

Strategic Needs Assessment 2023 - 2024

### Table of Contents

executive summary	<u>2</u>		
MVRP	<u>3</u>		
Serious Violence Duty	<u>5</u>		
Aim of the SNA	5		
Annual data comparison	<u>6</u>		
Definition of a Public Health Approach	7		
Definition of Serious Violence	8		
Drivers of Serious Violence	9		
		Points of interest in relation to crime	4
Risk and Protective factors	<u>10</u>	Prison and Probation Service	4
aking an Evidence Based Approach	11	Knife Crime	4
hemes, Objectives & Life Course	<u>12</u>	Firearms	4
ocal Context	13	Community Insight	4
Deprivation	13	Knowsley	4
Cost of Living	14	Liverpool	4
Population	18	Sefton	4
Age	19	St Helens	5
Gender & LGBTQ+	20	Wirral	<u>5</u>
Ethnicity & Race	<u>21</u>	Conclusions, Next Steps &	
Education	<u>23</u>	Recommendations	<u>5</u>
Employment	<u>26</u>	Appendix 1	<u>5</u>
Health	<u>27</u>	Examples of interventions	
Religion & Culture	<u>28</u>	Appendix 2	6
TIIG Data	<u>29</u>	Urban areas statistics	
North West Ambulance Service	<u>30</u>	Appendix 3	6
Emergency Department	<u>31</u>	Progress on drivers of serious violence	
Merseyside Fire & Rescue Service	<u>33</u>	Appendix 4	8
Merseryside Police	<u>34</u>	Useful links	
ocal Authorities	<u>35</u>	Appendix 5	8
Knowsley	<u>36</u>	Glossary	
Liverpool	<u>37</u>	Appendix 6	8
Sefton	<u>38</u>	MVRP Strategy 2022-2025	
St Helens	<u>39</u>	Merseyside Violence Reduction	
Wirral	40	Partnership Logic Model (2022 Onwards)	8

## Executive Summary

The Strategic Needs Assessment (SNA) for Merseyside Violence Reduction Partnership (MVRP) allows MVRP and partnering agencies to understand what Serious Violence (SV) in Merseyside looks like, using both an evidence-based and public health approach. Reviewing data and information from a range of sources gives a solid understanding for both the MVRP and partners to put interventions in place that can have a big impact and reduce Serious Violence across the Merseyside region.

Specifically, the SNA for 2023/24 has:

- Provided understanding of what serious violence in Merseyside looks like through a range of data and information sources.
- Given a brief overview of local context, identifying what areas may be impacted by serious violence.
- The highlighted drivers and risks of serious violence, including the cost-of-living crisis, school exclusions and suspensions, and insight into the VRP progress on drivers of serious violence.
- Although the cost-of-living crisis is seeing a huge impact on food and fuel poverty, Citizens Advice is showing that here in Merseyside the majority of calls are regarding council tax arrears.
- School exclusions have seen a large increase. The most recent accessible data indicates an increase in Merseyside overall of 48.3%
- Given us an insight into the thoughts of our communities, across each Local Authority, on Serious Violence and how it has, or is, affecting them via/using the SVD consultation.
- Showcased a small selection of interventions that MVRP supports to help reduce Serious Violence across Merseyside as well as some guidance information and training.

- Demonstrated a partnership approach of working together to reduce and prevent violence.
- Recommendations for the next financial year to ensure we continue to progress towards our shared goals and objective.
- Identified gaps in areas where there is limited data and information that would allow the partners to provide focus and support.
- Highlighted that Serious violence is complex and multi-faceted, and with an estimated cost of over £209.6 million a year to the Merseyside region, partners have both a moral responsibility to protect and prevent further harm to communities as well as a fiscal imperative to do so. These lower-volume, higher-harm types of violence pervade society, causing significant harm to communities. However, violence is preventable, and this underlines the importance of partners working together in adopting a public health, whole systems approach to violence reduction. This is central to the approach of the MVRP, with continued investment in community-based programmes and early intervention to prevent violence a cost-effective use of public resources to minimise harm and maximise impact for communities.





The 23/24 MVRP SNA continues to provide an overview of all five Local Authority (LA) areas; Knowsley, Liverpool, Sefton, St Helens and Wirral. This includes identifying any issues or vulnerabilities that persist over Merseyside or an individual Local Authority; data and information available for 2023-24 is analysed along with comparisons from the previous year.

Much like last year's SNA publication, the cost-of-living crisis is having a large impact on our communities with increasing numbers of people attending foodbanks and basic household products and fuel prices remaining high. Further to the households and communities we live in, education is also a risk and driver for serious Violence. School exclusions have seen a dramatic increase, forcing more young people to be out of education, moving from school to school, or receiving home eduction for less hours than what they would receive in school - all impacting on their futures. As we already know, intervening at the root cause of a problem is a key part of prevention and can have a positive impact on an individual's life and make our communities around us a safer place.

Data and information sharing is key between partner agencies to understand what serious violence in Merseyside looks like, where the gaps in service are, where there is increased demand, but also where projects and interventions are having a positive impact on our communities. However, we should still recognise that behind this data sits a person with real life experiences both positive and negative.

Working in collaboration with the Serious Violence Duty team, this year we are able to provide some insights on what our communities think of serious violence including what they feel is needed, what does not work and how it has affected them. Having access to this information straight from members of communities allows all partners to consider what has been said and how this can be implemented into our actions and interventions.





# Merseyside Violence Reduction Partnership

Merseyside Violence Reduction Partnership (MVRP) was established in 2019 when the Home Office provided funding for 18 Violence Reduction Units, now 20, to be established in certain areas across the country. MVRP chose to rename the team from `unit` to partnership to reflect our approach to tackling serious violence. The MVRP brings together partners from across Merseyside's five local authorities, using a Public Health Approach (PHA).

Our partners here at the MVRP are seconded from a variety of services including Merseyside Police, Merseyside Fire and Rescue, Local Government, National Probation Service, Public Health, Department of Work and Pensions, Youth Offending Service, Health, OPCC and Education. All our partners bring expertise and knowledge to address underlying causes of violence and how we can work with our communities to prevent it.

### **MVRP Structure**

VRP Director Supt

### **Project Co-Ordinator**

Probation Youth Justice

**Early Years** 

Education MFRS DWP

Health - Trauma
Specialist

Comms

Public Health

Trauma Informed

### MVRP Evidence Hub Manager

Youth & Comm Engagement

OPCC Liason

Evidence Hub Analyst Evidence Hub Analyst

# Serious Violence Duty

Following the Serious Violence Strategy by the Home Office in 2018 and the establishment of VRU's, in 2022 the Police, Crime, Sentencing and Courts (PCSC) Act received Royal Assent. The PCSC Act introduced several measures to tackle serious violence, including a new Serious Violence Duty (the 'Duty') which sets out that partners (including the police, fire and rescue, health, local

authorities, youth offending teams and probation services) must work collaboratively and share data and information to create a strategy to prevent and reduce serious violence alongside the Serious Violence Duty Programme Manager and Analyst. In January 2023 the Serious Violence Duty commenced.

Under the legislation, educational, prison and/or youth custody authorities will be able to co-operate with the Specified Authorities as necessary and are known as the Relevant Authorities.

# Police Chief Officers of police for police areas in England and Wales



Probation Services and Youth Offending Teams Fire and Rescue Authorities

All Fire and Rescue Authorities operating in England and Wales

### Health

Integrated Care Boards in England Local Health Boards in Wales Local Authorities

Councils in England and Wales

## Annual Data Comparison

MerPol	11.0%	MerPo
39,190	V	34,923
ED	7.0%	ED
3121	V	2891
MFRS	25.8%	MFRS
3337	V	2475
NWAS		NWAS
447	18.7%	531

At the time of writing, only April 2023 to December 2023 was available for Emergency Department (ED), Merseyside Fire & Rescue Service (MFRS), Merseyside Police (MerPol), and North West Ambulance Service (NWAS), therefore a comparison over the same period last year will be compared.

As shown, North West Ambulance Service has seen an increase. Last year's SNA highlighted the changes North West Ambulance Service had made to their data causing limitations, this explains the increase seen here.

## Aim of the SNA

The MVRP SNA aims to provide a baseline understanding to our stakeholders and our community about the reality of violence within the Merseyside area.

MVRP have benefitted from collaborating effectively with our partnerships to share data and information where appropriate. This has informed our understanding and enabled MVRP to continue to identify the drivers of serious violence in the local area, and the identification of the cohorts of people most effected, leading to the participation and coordination of a multiagency response.

Basketball Tournament Liverpool 1, Toxteth El8te

The intention is to highlight potential areas of risk using data to support findings and provide further clarity as to the benefits of a Public Health Approach (PHA). This SNA will be used alongside the MVRP Logic Model, Theory of Change, and MVRP Strategy.



Grassing and Grooming, Ariel Trust

Total Beneficiaries from MVRP interventions throughout 2023/2024

This represents a conservative estimate of the split between intervention types for populations.

Universal 29,590

> Known Risk 195

Total Beneficiaries 30,300

30,300

Potential High Risk 402

Involved in Crime

5

- 6

# Definition of a Public Health Approach

The 'Preventing Serious Violence Strategy: Summary Publication' (21st October 2019) states the reasons why violence is a public health issue as:

`...because living without fear of violence is a fundamental requirement for health and wellbeing`.

This is vital, in that the health and wellbeing of an individual or a community has the potential to impact upon every interaction or experience a person has during their life be it, education, employment, prospects, or interpersonal relationships, etc. all of which, can be severely affected through ill health and poor wellbeing. Interventions and actions that address this, as early as possible, will not only reduce demands on health services, the criminal justice system, and the wider economy, but will also improve the outcomes in relation to an individual or a community by addressing the root causes of violent crime to prevent it occurring in the first place. The WHO primary, secondary and tertiary model identifies how the PHA can be adopted to support communities.



Tertiary prevention

Approaches that focus on long-term care in the wake of violence, such as rehabilitation and reintergration, and attempts to lessen trauma or reduce the long-term disability associated with violence.

Secondary prevention

Approaches that focus on the more immediate responses to violence, such as pre-hospital care, emergency services or treatment for sexually transmitted diseases following a rape.

Primary prevention

Approaches that aim to prevent violence before it occurs.

7

### Definition of Serious Violence

In the Serious Violence Strategy, the Home Office defines serious violence as:

`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`

In adopting a public health approach to violence prevention, our strategy has a strong emphasis on addressing the root causes of serious violence and endorsing factors that promote against and mitigate the impacts of violence. Preventing Adverse Childhood Experiences (ACEs) and developing trauma-informed approaches forms a key part of our approach.

ACEs include all forms of child maltreatment, and aspects that affect the environment in which a child lives, including the experience of domestic abuse. With this in mind, and given the impact of COVID-19, whilst our remit is serious violence, we remain flexible to respond to other violent crime types (such as domestic abuse and the impact of this ACE on future experiences of violence) based on the monitoring of information and data.

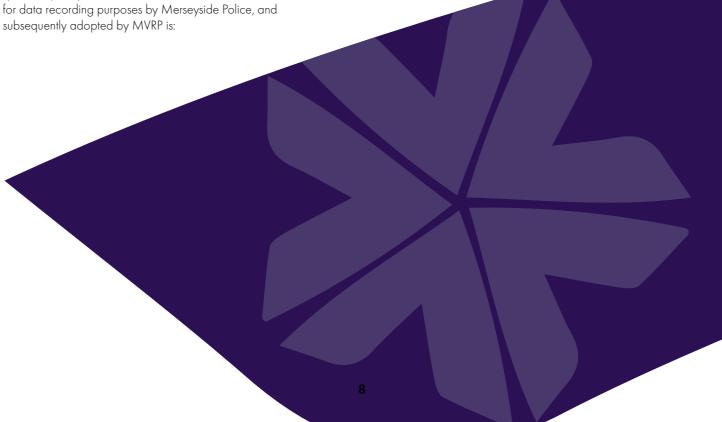
The evidence shows that serious violence is perpetrated by a small minority, and accounts for 2% of the total crime in Merseyside, however those individuals can do considerable harm to victims, families, and communities. It is recognised there are variations in serious violence within each borough across Merseyside. Whilst there is a focus placed upon youth violence in open spaces, we do seek to impact across the whole spectrum of serious violence, especially 'since' the Covid pandemic has changed the use and time spent in open spaces. The local definition of Serious Violence used for data recording purposes by Merseyside Police, and subsequently adopted by MVRP is:

All knife crime or firearms enabled offences including the following categories:

- Attempt murder
- Assault with intent to cause serious harm (wounding with intent to do GBH (\$18 Assault), causing bodily injury by explosion or torture)
- Business and personal robbery
- Threats to kill
- Assault with injury
- Racially or religiously and other form of hate aggravated assault with injury
- Assault with injury to a constable
- Rape
- Sexual assault against a female
- Sexual assault against a male
- Endangering life
- Homicide

Non-knife crime or firearms-enabled offences as below:

- Homicide plus attempt murder
- Assault with intent to cause serious harm (wounding with intent to do GBH (\$18 Assault), causing bodily injury by explosion or torture)
- Arson with intent to endanger life
- Assault with injury to a constable (only including cause GBH with intent to resist, prevent arrest, wounding with intent to do GBH and wounding with intent)
- All other robbery



### Drivers of Serious Violence

The MVRPs belief that violence is preventable has remained consistent since inception. By understanding the drivers behind crime, we can reduce the risk of offending and therefore reduce the number of victims. To achieve this, adopting and embedding a multi-agency PHA is essential. Some of the drivers of violence are detailed here and grouped into community and wider society drivers, drivers within close relationships, and individual factors that can contribute to driving violence.

It is widely acknowledged that violence is far reaching with detrimental impacts on our communities, particularly on those in our most deprived communities. Public Health England and the WHO, both provide frameworks for a PHA, which have helped shape the work of the MVRP:

### **Public Health Approach:**

- Understand the scale and nature of the problem
- Design interventions and policies to tackle the problem
- Monitor and evaluate
- Scale up successful strategies

### World Health Organisation Approach:

- Surveillance
- Identification of risk and protective factors
- Monitor and evaluate
- Implement effective interventions

The PHA supports a population focus rather than concentrating on high-risk individuals. The preventative emphasis is on tackling 'upstream' risk factors, to lessen 'downstream' consequences. It also must be acknowledged that it requires bravery in making long-term commitments where there are pressures to respond very guickly and operationally. This approach is not without its challenges, the key one being the use of data for policymaking which raises issues of privacy and political challenges. This PHA relies on knowledge and information from a range of disciplines and organisations.

### • Access to and misuse of alcohol and firearms Community & Wider S Poverty • Living in an urban area • National policies relating to areas such as education or law & enforcement • Local gangs and drug supplies Close Relationship High levels of inequality ACFs • Low household income or unemployment in family • Parents not involved in activities • Extreme or unreliable disciplining or lack of supervision by parents • Peers involved in crime or gang membership • Psychological (e.g. ADHD, behavioural disorders, low self esteem) • Education & employment (e.g. low achievement, truancy, exclusions, unemployment) • Behaviour (e.g. involvement in crime and ASB, early involvement in drugs and alcohol, positive attitude towards offending)

### Risk and Protective Factors

The World Health Organization (WHO) aims to improve health and safety by addressing the risk factors that increase the likelihood that someone will become a victim or a perpetrator of violence. They seek to identify the common risk factors driving violence and the protective factors preventing violence. It encourages identification of these factors and implementing interventions across all levels: individual, relationship, community and societal, at the same time.

A review of MVRP initiatives has provided an insight into the progress being made to address all drivers of serious violence. Working in line with the public health approach, we have ensured that all initiatives' core are either primary, secondary and tertiary prevention. It has also been identified that three `community drivers` (residential instability, social disorganisation / weak institutional support / weak community sanctions, social isolation) have been addressed by only one or two initiatives. Whilst we recognise this could be a gap for MVRP to address in future delivery, it is also an opportunity for collaboration with our partners to address these drivers. (See Appendix 3 for full overview of MVRP asset mapping).

### **Risk Factors**

- Genetic or Biological
- Perinatal Trauma
- Early Malnutrition
- Behavioural & Learnina Difficulties
- Alcohol & Substance Misuse
- Traumatic Brain Injury
- Gender

- Low Family Income
- Poor Parentina &
- Family Size
- Physical, Sexual)
- Neglect
- Substance Misuse
- Illness
- Family Violence
- Behaviour

• Healthy Problem Solving & Emotional Regulation

Individual

- School Readiness
- Good Communication Skills
- Healthy Social Relationships

- Inconsistent Discipline
- · Abuse (Emotional,
- Emotional or Physical
- Household Alcohol or
- Household Mental
- Family Breakdown
- Household Offending

### Relationships

- Stable Home Environments
- Nurturing & Responsive Relationships
- Strong & Consistent **Parentina** Frequent Shared Activities
- with Parents
- Financial Security & **Economic Opportunities**

- Unsafe or Violent Communities
- Low Social Intergration & Poor Social Mobility Lack of Possibilities for
- Recreation • Insufficient Infrastructure for the Satisfaction of

Community

• Sense of Belonging &

• Community Cohession • Opportunities for Sports

Connectedness

Safe Community

Environments

& Hobbies

- Needs & Interests of Young People
- Socio-economically Deprived Communities
- High Unemployment
- Homelessness or Poor Housing
- Culture of Violence, Norms & Values which accept, normalise or glory violence
- Discrimination
- Difficulties in Accessing Services



### Society

- Good Housing
- High Standards of Living
- Opportunities for Valued Social Roles

### **Protective Factors**

# Taking an evidence-based approach

A key aim of the MVRPs overarching strategy is to ensure that all decisions are based upon the best available evidence. The SNA, informed by the Trauma and Injury Intelligence Group (TIIG) Data Hub, About - TIIG (Ijmu.ac.uk), provides a basis for our evidence-based decision making, ensuring that MVRP look externally for further information and data sources. These can vary from academic research, community feedback, and publicly available datasets, to complement our understanding and allow informed decision making throughout. Examples include our commissioned work and independent evaluation with Liverpool John Moores University, and the Youth Endowment Fund Evidence toolkit Youth Endowment Fund Toolkit, which can support our partners to understand models and approaches more readily with a more solid evidence-base.



Trauma & Injury Intelligence Group Surveillance System

The bespoke TIIG data dashboard acts as the initial insight into demand across Merseyside bringing together data from health (Emergency Departments and North West Ambulance Service), Merseyside Police and Merseyside Fire & Rescue Service to provide a profile of Serious Violence across Merseyside. Plus, Department for Education data and the Index of Multiple Deprivation. All MVRP members and partnership organisations have access to this data.

Updated monthly and with data mapped and charted across the county, it assists in identifying at risk populations, hotspot areas for violence, as well as supporting the ability to monitor trends and identify the severity of violence being undertaken.

The Data Hub informs MVRP decision making from determining the type of intervention but also key locations for particular projects and interventions. It also allows our partners to use a consistent dataset to inform their own processes and governance. The data will continue to be used as part of future evidence base and can be supplemented and developed as MVRP and partners implement appropriate monitoring and evaluation.

The use of the data has encouraged shared learning, improved multi-agency working, and better targeting of resources. Whilst the value of the Data Hub is acknowledged by users, ongoing work is required to maintain the system and sustain high quality data transfer between partners.

The MVRP Evidence Hub have continued to engage with the National VRU Learning and Evaluation Network, and routinely engage and share best practice with other VRUs. This provides invaluable insight and ensures that we not only learn and embed an evidence-based approach but that we also learn from blockages experienced by others to deliver the most effective and efficient interventions across Merseyside. Below is a link to the National evaluation report. Violence Reduction Units 2022 to 2023 - GOV.UK (www.gov.uk)

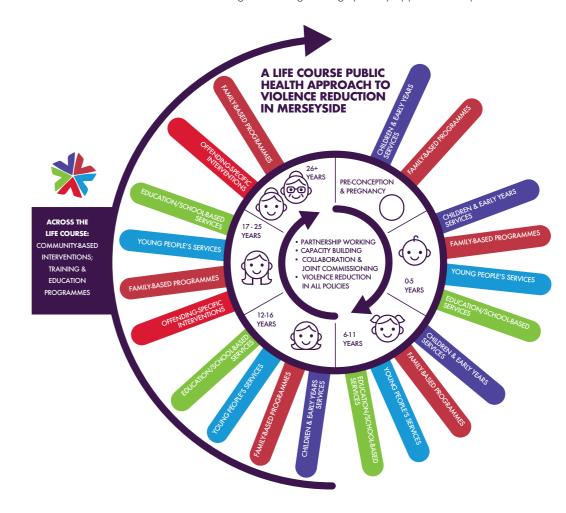
# Themes, Objectives & Life Course

As detailed in the MVRP Strategy, our five key thematic priorities and related objectives are:



- Ensure a Public Health Approach
- Ensure a Trauma Informed Approach
- Be transparent
- Ensure that community is at the heart of everything we do
- Taking an evidence-based approach
- Facilitating multi-agency working

Focusing on the above priorities and objectives has allowed MVRP to invest in the PHA at a universal level. Adopting some primary intervention delivery alongside targeted secondary and tertiary interventions is key to implementing a whole family approach to supporting communities across Merseyside. MVRP will continue to strive to achieve long-term change through primary approaches to prevention.



### Local Context

# For this SNA we have made use of the Census 2021 data published by the Office of National Statistics and data dashboard's provided by Gov.uk.

Unless otherwise stated, all data is from the Census

Census Maps - Census 2021 data interavtive, ONS.

This section will provide an overview of data and information relevant to or has an impact on drivers of serious violence in Merseyside, including deprivation data, the cost of living, demographics such as age, gender, ethnicity, education data, insight into employment data, health and religion. Data sources for this section include the 2021 Census, gov.uk and open-source data. Whilst the most recent data was retrieved February 2024, data and information are forever changing and being updated.

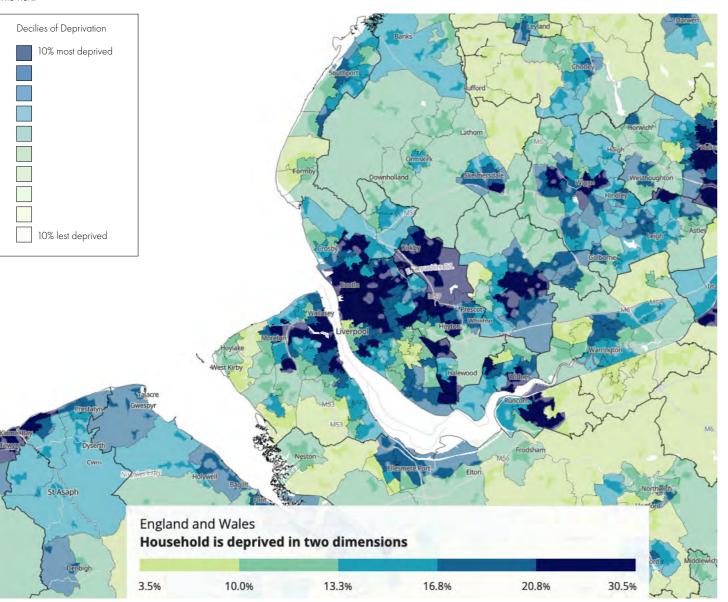
It should be noted that the below section identifies key areas that require further support, and the representation of individuals and communities that make up Merseyside. This information in relation to drivers and risks highlights potential areas or communities, or groups of individuals who could be vulnerable to serious violence, allowing for support and preventative measures to be put in place to reduce this risk.

### **Deprivation**

ONS have used four characteristics to classify household deprivation, which are: education, employment, health, and housing. It is not possible to select individual characteristics, only the number. Households that are deprived in two dimensions show that Merseyside is relatively high when compared to the rest of England and Wales, as can be seen in the map below.

Broken down by local authority area, the below highlights the percentage of households deprived in two dimensions in each locality:

Knowsley	19.2%
Liverpool	18.5%
Sefton	17.1 %
St Helens	16.1%
Wirral	16%



13

Microsoft Power BI allows further deprivation analysis by Local Authority. As we already know, two of Merseyside's Local Authorities are in the top 10% deprived in England; Knowsley with a rank of 3 and Liverpool with a rank of 4. The other Local Authorities in Merseyside rank: St Helens at 40, Wirral 77 and Sefton 89.

The below table shows a breakdown of each category by Local Authority and Rank.

Local Authority	La Rank (overall)	LSOA's in first decile	Income	Employment	Education, Skills & Training	Health & Disability	Crime	Living Environment	Barriers to Housing & Services	ADACI	IDAOPI
Knowsley	3	3	3	1	6	2	82	52	220	12	10
Liverpool	4	2	7	16	43	3	23	8	278	8	11
Sefton	89	43	67	39	162	37	147	90	310	108	83
St Helens	40	28	47	11	94	10	86	155	302	54	80
Wirral	77	24	69	33	177	25	135	66	313	95	97

Whilst the overall rank shows Merseyside is deprived, in particular Knowsley and Liverpool, it also shows that one particular domain, Barriers to Housing & Services, is not as disadvantaged. This indicates that it may be more impactful to target increased investment and resources to other domains which are more disadvantaged, such as employment and health.

The below shows the most deprived ward for each Local Authority:

Knowsley: Page Moss (rank of 56)
Liverpool: Anfield East (rank of 10)
Sefton: Seaforth South (rank of 54)

• **St Helens:** Town Centre East & Fingerpost (rank of 27)

• Wirral: Bidston Hill (rank of 19)

As to be expected this has not changed from last year's publication with no recent deprivation data available.

At the other end of the scale and using the deciles, with a decile of 10 meaning the least deprived, it has been identified that:

- There are no wards in Knowsley or St Helens with a decile of 10.
- Calderstones is the only ward in Liverpool with a decile of 10.
- There are 13 wards in Wirral with a decile of 10, of those the least deprived is Gayton & Lower Heswall.
- There are 7 wards with a decile of 10 in Sefton, with Formby West & Freshfield North the least deprived.

It should be noted that the boundaries and names of some wards have changed, so every effort has been made to ensure that the names in this section are correct for this reporting period, however there may be some older ward names used. Further to this as of May 2023 Liverpool City Council changed their wards, increasing from 30 to 64. This means that a direct comparison is not possible in future work, but every effort will be made to understand the impact of change.

#### **Urban areas Statistics**

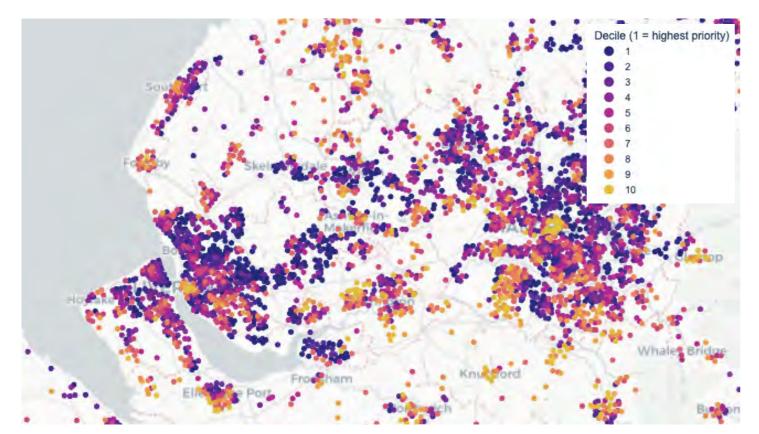
When using the <u>Data tool</u> <u>Centre for Cities</u> we are able to look at data that is a little more up to date then the Census 2021 data. There is a focus on 63 urban areas in the UK and two of them are in Merseyside: Liverpool and Birkenhead. By looking at the data it can be seen Birkenhead is assessed as being in a better position than Liverpool when a comparison has been completed, identifying the differences in key areas that shape deprivation. More detail is given in Appendix 2.

### **Cost of Living**

It is undeniable that the cost-of-living crisis has a greater impact on those from disadvantaged communities and with Merseyside having two Local Authorities in the top 10% deprived areas in England and Wales following the 2021 Census, the devastating effects will continue to be seen across our region.

Although two areas Centre for Cities (Birkenhead and Liverpool) have seen somewhat of an increase in wages over the 10 years, when it comes to real wage growth there has been a decrease. The rate of inflation since the cost-of-living crisis began has rapidly increased, it may be coming down compared to what it was, but it is still higher than the rate of growth of wages across the country. The majority of the 63 areas that they have looked at have had a negative real wage growth, including Liverpool at -1.4% and Birkenhead at -1.2%. The last time the UK has seen a positive real wage was July 2021.

The below maps show the <u>Priority Places (which.co.uk)</u> for food index; the top map includes all 10 deprivation deciles and the bottom map only shows deprivation decile 1 and 10. In comparison to last year's publication the light coloured dots in Liverpool city centre have decreased, showing where once had better access to food and food relative services has decreased.





Prices of food and non-alcoholic beverages have increased by 7% as of January 2024, this is a decrease from the 19.2% seen in March 2023. "The overall price of food and non-alcoholic beverages rose around 25% between January 2022 and January 2024. In the 10 years prior to this, overall food and non-alcoholic beverage prices rose by 9%." Cost of living insights - Office for National Statistics (ons.gov.uk). Although the prices of food and non-alcoholic beverages are coming down, they remain high with ONS finding 40% of adults spending more money on a food shop and 1 in 25 running out of food and unable to afford to buy more in the two weeks they had conducted their survey. To give an example of some common household items changing since last year to January 2024 see the below table.

The list of 12 items has an average cost of £63.30. In comparison to last year some items have gone down in price but most have increased. This is less than what it would have cost in December by £0.85 but £1.37 more than January 2023 with an annual increase of 2%. With the above suggesting that there is an overall decline in pricing, when it is broken down like the table to the right, this is not the case for all items. This table is only a small example of common items a household may purchase.

### Shopping prices comparison tool - Office for National Statistics (ons.aov.uk)

Other than food prices, other changing costs have included:

- Private rental prices have risen by 6.2% in the UK as of January 2024 the largest annual change since January 2016, from a survey conducted by ONS in January 2024, 35% had said they were finding it difficult to make mortgage or rental payments.
- Council tax will increase from April 2024 by a maximum of 4.99%.
- Gas prices fell by 26.5%, Electricity prices by 13% and motor fuel by 9.2% however, 4 in 10 people say they are still struggling to afford their energy bills. Last winter there was extra support from the government towards energy bills or credit for those on prepayment meters.

In contradiction to rates falling Sky News reported that there has been an increase in UK households entering fuel poverty, 4.29 million as of January 2024 from 3.83 million as of October 2023. Ofgem had stated there were growing concerns over energy companies forcing households in energy debt to move to prepayment meters, therefore they set out a new code of practice, which began November 2023, that all energy suppliers must follow before households have to make this change. The energy price cap has increased, allowing energy suppliers to increase the cost per unit of energy used in households at the time of writing. For those on direct debit they can see an average increase of £94 a year. Although this may not seem like a large increase, for those already in fuel poverty and struggling with other bills and outgoings this is an added pressure. Fuel poverty: More than 465,000 UK households will suffer this winter, research suggests | UK News | Sky News/Cost of living insights - Office for National Statistics (ons.gov.uk). From 01/04/2024 Ofgem have announced there will be an energy price cap decrease of 12.3% from April, meaning there is a saving of £238 a year compared to the amount set for January to March, the lowest it will have been in two years. For households that are on prepayment meters they will now pay the same standing charge as those on direct debits. Households who have both gas and electricity from the same supplier will see standing charges savings of £49 a year whereas those on direct debits will see an increase of £10.

### Citizens Advice

Local Authority	Q2 2022-2023	Q2 2023-2024	
Knowsley	Council tax arrears	Council tax arrears	
Liverpool	Council tax arrears	Council tax arrears	
Sefton	Energy debts	Council tax arrears	
St Helens	Council tax arrears	Council tax arrears	
Wirral	Energy Debts	Energy Debts	

Average price	Price last year	Annual growth
£3.82	£3.68	4%
£10.42	£10.69	-3%
£8.85	\$8.83	0%
£8.72	£7.95	10%
£0.92	£1.07	- 14%
£12.24	£11.97	5%
£8.07	£7.91	2%
£2.81	£2.97	-5%
£1.24	£1.33	-7%
£2.55	£2.36	8%
£2.56	£2.37	8%
£1.10	£1.05	5%
	£3.82 £10.42 £8.85 £8.72 £0.92 £12.24 £8.07 £2.81 £1.24 £2.55 £2.56	\$3.82 \$3.68 \$10.42 \$10.69 \$8.85 \$8.88 \$8.72 \$7.95 \$0.92 \$1.07 \$12.24 \$11.97 \$8.07 \$7.91 \$2.81 \$2.97 \$1.24 \$1.33 \$2.55 \$2.36 \$2.56 \$2.37

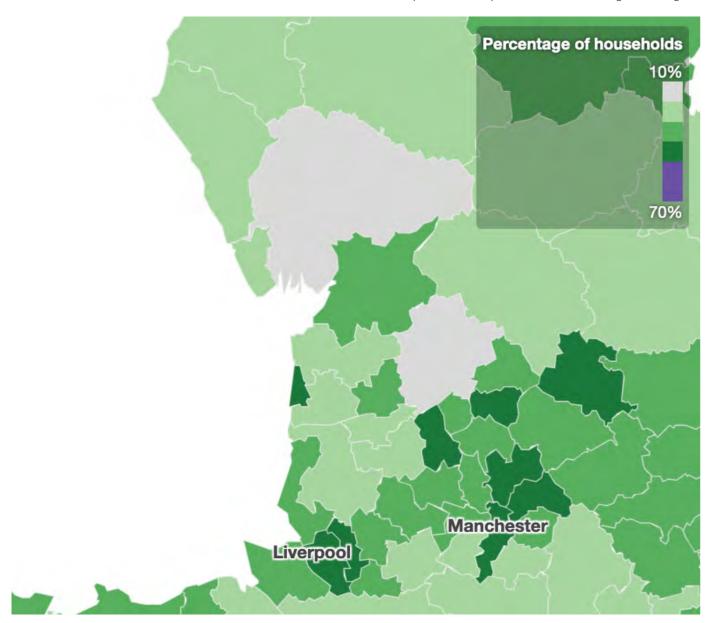
Reports from Citizen's advice indicate that before the pandemic their volume of calls received were regarding council tax arrears but since the cost of living crisis, they have stated the majority of calls received were regarding energy debts. From their dashboard looking at the five Local Authorities in Merseyside (the table on the previous page) we can see a comparison of Q2 2022-2023 and Q2 2023-2024. The pattern they are seeing overall is not consistent within Merseyside, with the exception of Wirral, and Sefton for Q2 2022-2023 only.

From this it suggests that Merseyside, Wirral being an exception, is not facing fuel poverty struggles. But with the evidence above and the common knowledge of the deprivation in Merseyside, we know that households will be impacted by fuel poverty. That being said, from council tax increases and the sheer volume of resident calls over council tax arrears, there is already a consistent need for support. This is further evidenced from Citizen's Advice who claim that since the cost-of-living crisis, calls over energy debts are their number one call nationwide. CA cost-of-living data dashboard | Flourish.

### Cost of Living support

In 2022 the government announced Low-income households may be eligible for cost-of-living support. Those that met the criteria did not have to apply and were sent the cost-of-living support payment automatically by either DWP or HMRC. The payments were first rolled out in Spring 2023 with the final payment being February 2024. In total the North West is second to London (15%) with the number of households receiving the cost-of-living payment, making up 13% out of the whole of the UK. <a href="Low-income households to receive over £2">Low-income households to receive over £2</a> billion in further cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further Cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further Cost of living support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in further Cost of living Support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in Support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in Support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in Support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in Support - GOV.UK <a href="Low-income">Low-income households to receive over £2</a> billion in Support - GOV.UK

The map shows the percentage of households that will be receiving this payment. The key scale goes from lightest – less receiving the support to dark purple, most receiving the support. As can be seen both Liverpool and Knowsley who are in the top 10% for deprivation are in dark green and sitting in the high percentages within the Northwest. See the below table for a breakdown of each Local Authority and how many households are receiving the funding.



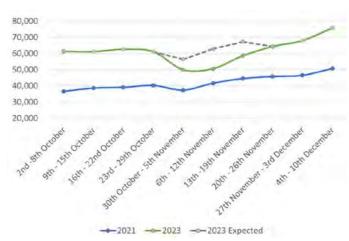
17

Local Authority	Number of cost-of-living payments	Amount paid out in February 2024	Amount paid in total	Percentage of Households
Knowsley	29,000	£8,671,000	£26,100,000	44%
Liverpool	88,900	£26,581,100	£80,010,000	43%
Sefton	39,800	£11,900,200	£35,820,000	32%
St Helens	26,900	£8,043,100	£24,210,000	33%
Wirral	46,500	£13,903,500	£41,850,000	33%

As the above table shows, just under half (44%) of Knowsley households are receiving cost-of-living support payments, closely followed by Liverpool (43%). St Helens and Wirral both see 33% of households receiving the support and Sefton sees 32%. Map shows how many £299 cost of living payments will be made where you live - Liverpool Echo.

Data from The Trussell Trust. shows what foodbanks are seeing when the cost of living support payments are being paid in and when the payments are not due to be made. When the payment in November 2023 was made, the Trussell Trust saw a 15% decrease in people needing an emergency food package. Once all payments had been paid out, there was once again an increase in requirement for emergency food packages (See chart below).

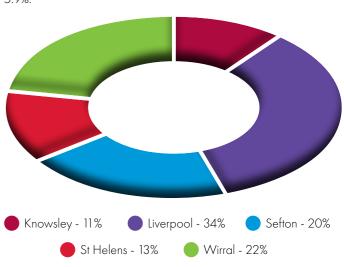
Impact of November 2023 cost of living payment on number of emergency food parcels provided.



Food banks have been hard hit by the cost of living with some of the people who would normally donate to their local food banks, now relying on them to feed themselves and their family. The government supported local authorities with household fund support to help families in their areas, this was due to end on 31st March this year but following the chancellors' budget (06/03/2023) it has been extended for a further 6 months. This announcement will ease the pressure on those in Merseyside currently supporting our food banks much like Naomi Maynard, Director of Feeding Liverpool. Naomi's organisation fund 84 food banks in Liverpool and have seen donations decrease and food prices rise. Naomi told the BBC 'The Household Support Fund is filling that gap...We'll be cutting ourselves off at the knees if we get rid of this funding at this crucial point when households are still struggling and are trying to recover Household Support Fund closure catastrophic, warns charity -BBC News.

### **Population**

The below graph shows the number of people who live in each Local Authority in Merseyside. The table below shows how the population has changed since the previous Census in 2011. In Merseyside, the population has grown since 2011, with Knowsley demonstrating the biggest increase in population with a growth of 5.9%.



Local Authority	Population 2011	Population 2021	% change
Knowsley	145,893	154,500	5.9
Liverpool	466,415	486,100	4.2
Sefton	175,308	183,200	4.5
St Helens	273,790	279,300	2.0
Wirral	319,783	320,200	0.1

### Language

The main language spoken in Merseyside is English (92%), this is higher than the average for the Northwest (90%) and England (88%). In all the Local Authorities Other European Language was the second most spoken Language and a variety of Asian, Polish and Arabic.

#### Place of birth

The majority of residents within Merseyside were born in the UK and only 8% of the population were born outside of the UK. Further to this, the Census provides an age breakdown for when people first arrived in the UK. Toxteth Park sees the most people who were aged between 0 and 9 years. Pier Head is the hotspot for those aged 16 to 17 years. Central & Islington for those aged 18 to 24. Finally, Southport Waterfront is the hotspot for those who were 45 to 59 years of age.

### Density

The LA with the most densely populated areas in Merseyside is Liverpool. Liverpool has multiple areas that sit at the top of the list, with the Wirral breaking this trend.

See below for the top wards for each Local Authority:

	people per square km			
Knowsley	19.2 Huyton Farm with 5,617			
Liverpool	Walton South with 11,682			
Sefton	Bootle North with 7,401			
St Helens	Blackbrook with 5,176			
Wirral	Egremont with 7,780			

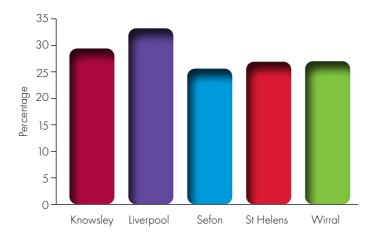
### Age

Much like the previous SNA there is no updated changes to age groups in Merseyside.

Our youngest population 0-15 years are housed in Knowsley, Liverpool houses the majority of young adults at 16-34 years. Between Sefton and St Helens, they share housing 35-64-year-olds and 65+ are spread between Sefton and Wirral.

Although Knowsley hosts our youngest population which is classified as 0-15 years, looking at a breakdown of this, under 4's make up 6% of Knowsley population but Wirral has a higher population of 10–15-year-olds; they make up 7.2% which is 0.1% more than Knowsley for this age group (7.1%).

See the below chart for a breakdown of the under 25 population per Local Authority:



The chart above is measured by percentage of people under 25.

As can be seen Liverpool are home to a larger population of under 25's (33.2%), followed by Knowsley (29.4%), Wirral (27%), St Helens (26.9%) and Sefton (25.6%). Please note (much like census education data) Liverpool data will include university students.

Census 2021 data provides us with specific wards for each age group:

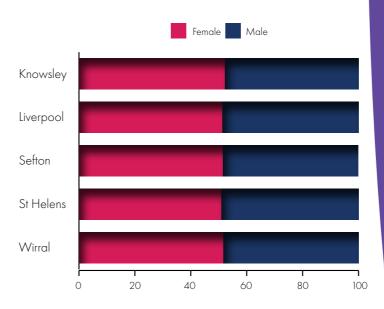
Under 4 years:	Norris Green East (9.8%)
5 to 9 years:	Norris Green East (again 9.8%)
10 to 15 years:	Toxteth Park (10%)
16 to 19 years:	Central & Islington (30%)
20 to 24 years:	Wavertree South (43.1%)
25 to 43 years:	Albert Dock and Queens Dock (35.5%)
Over 85 years:	Hesketh Park (8.2%)

It should be noted that the 35-49 and 50-64 age groups show no hotspots of note, whilst the 65-74 and 75-84 age groups saw numerous hotspots spread across affluent areas.

### Gender and LGBTQ+

#### Gender

There are more males than females in Merseyside and this is the case across all the Local Authorities. Knowsley only slightly see the highest percentage of males at 52.2%. The below chart shows a breakdown of male and females per Local Authority:



#### LGBTQ+

The data for LGBTQ+ statistics do remain the same from the previous SNA. Following London, the North West was the second highest region at 1.69% of the population identifying as gay or lesbian. In Merseyside, Liverpool has the highest population of LGBTQ+ at 4.42% and Knowsley had the lowest population with 2.32% identifying as LGBTQ+.

From the 2021 Census we can see the breakdown of the population of each Local Authority identity and if it is different from birth. Please see the table below for a breakdown:

Gender	Knowsley	Liverpool	Sefton	St Helens	Wirral
Gender Identity same as birth	95.11%	93.25%	95.17%	95.48%	94.88%
Gender Identity different from birth but not given	0.16%	0.33%	0.15%	0.17%	0.13%
Transgender Woman	0.05%	0.11%	0.07%	0.06%	0.08%
Transgender Man	0.07%	0.11%	0.07%	0.08%	0.07%
All other Gender Identities	0.01%	0.04%	0.02%	0.02%	0.03%
Not Answered	4.58%	6.07%	4.48%	4.15%	4.76%

Across all Local Authorities the majority identify with the same gender from birth. Liverpool has the bigger population of people who identify differently from birth at 0.59% and Knowsley with the smaller population with 0.29% whose gender identity is different from birth.

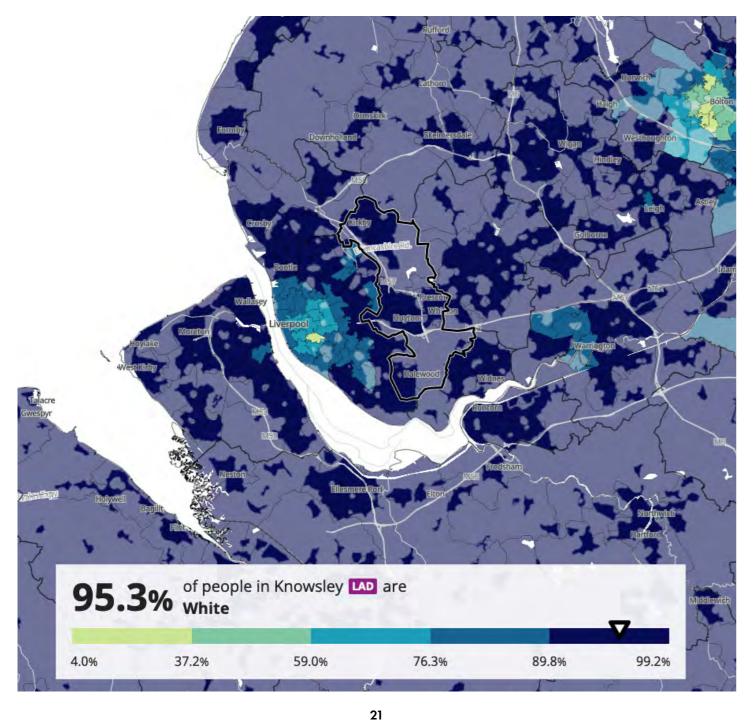
### **Ethnicity and Race**

The Census 2021 shows us most of the population for each Local Authority in Merseyside identified as White, see the below for a breakdown per Local Authority:

Knowsley	95.3%
Liverpool	84.0%
Sefton	95.8%
St Helens	96.5%
Wirral	95.2%

In Knowsley mixed or multiple ethnic groups was the next highest population at 1.7%, in Liverpool 5.7% of the population are Asian, Asian British or Asian Welsh, Sefton's population shows both mixed or multiple ethnic groups and Asian, Asian British or Asian Welsh are their next highest ethnic population at 1.5%. In St Helens, Asian, Asian British or Asian Welsh was the second highest community at 1.4%. Asian, Asian British or Asian Welsh were also the next highest population in Wirral at 2.3%.

When looking specifically at the most diverse Local Authority, Liverpool, Toxteth Park ward is the most diverse area with 30.3% of residents identifying as White British. Interestingly, a very specific MSOA within this ward is 8% White British (E00176718), with 67.6% of residents identifying as Black, Black British, Black Welsh, Caribbean or African.



### Gypsy, Roma and Traveller

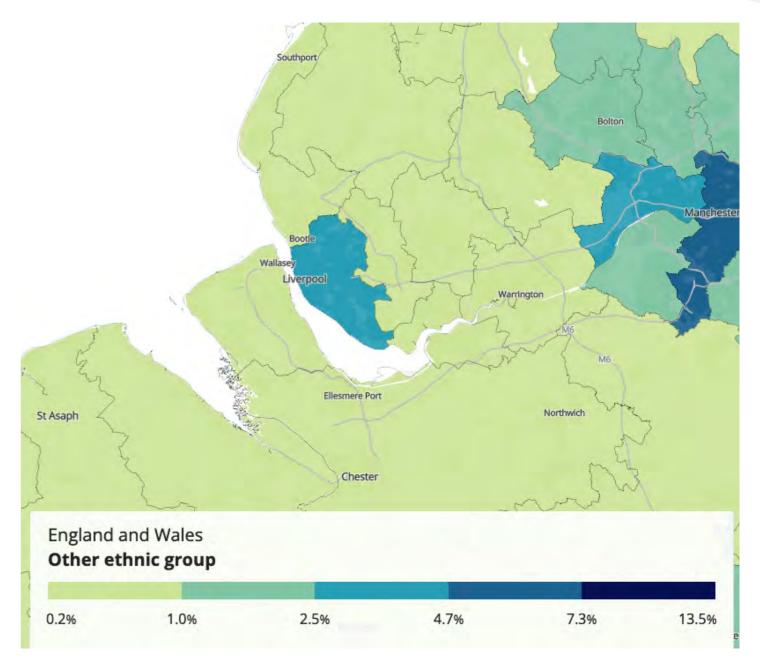
A recent publication of the 2021 census gives us information of the Gypsy, Roma and Traveller community.

The map (below) shows that Merseyside is not home to a large population of Gypsy, Roma and Traveller communities.

Unfortunately, there is no option to break the data down to ward level to get an understanding of where hosts the majority of the population:

Knowsley	0%
Liverpool	0.7%
Sefton	0.1%
St Helens	0.2%
Wirral	0.1%

The Gypsy, Roma and Traveller community have more younger people aged 25 years and younger at 45.7% compared to the rest of England at 30.4%. 26.5% of the population were also believed to be living in housing conditions that were overcrowded which is significantly higher than the rest of England at 8.4%. This is also the case for those who reported bad health at 12.5% but consistent with the rest of England population, this seemed to fall mostly with the older generation. 41% of the community are in employment, with the majority consisting of males and the majority of females reporting they looked after the home. Over half (56.8%) of the population have no qualifications, and these tend to be female.



### **Education**

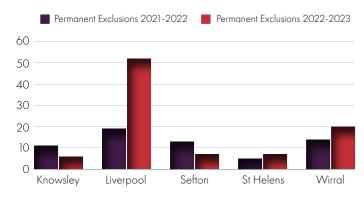
The census 2021 provided us with a breakdown of children and those in full time education per Local Authority (Liverpool hosts two large universities and were included in the data collection): Knowsley 19%, Liverpool 25.3%, Sefton 17.3%, St Helens 17.6% and Wirral 18.5%. Regarding academic qualification, Knowsley have the highest population to have no qualification (26.2%) and Wirral have the highest population with a qualification at level 4 or above (31.5%).

### **Exclusions**

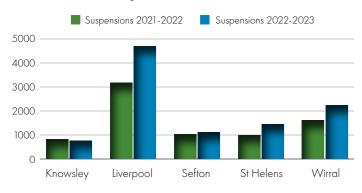
Since the publication of MVRP's SNA for 22-23 a report has been released by Liverpool City Council for the academic year 2022-2023 showing an increase in school exclusions. When looking at the rest of England this also appears to be the case for autumn terms 2021/22 and 2022/23 showing a 50% increase in exclusions and a 34.5% increase in suspensions. From further analysis for all five Local Authorities in Merseyside, MVRP have found an increase in school exclusions in Liverpool, St Helens and Wirral.

The charts below shows school exclusion and suspension comparisons per Local Authority for the Autumn terms during academic years 2021/22 and 2022/23. Schools types are State funded primary and secondary and special schools and have been sourced from a data set provided by **Gov.uk**. (At the time of writing there is no access to further data to include the Autumn term for 2023/24.)

The increase overall for Liverpool is 173.6%, St Helens has a 40% increase and Wirral has a 42.8% increase. Both Knowsley and Sefton there have seen a decrease in school exclusions; Knowsley 45.4% and Sefton 46.1%.



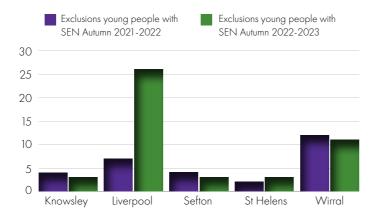
The increase overall for Liverpool is 48.6%, Sefton 7.2% St Helens 44.8% and Wirral 43.4%. Knowsley being the only Local Authority with a decrease, although minor, at 6.6%.



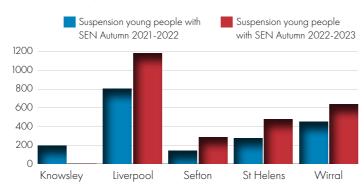
23

Exclusions and suspensions per Local Authority can further be broken down into three categories: No SEN, SEN with statement or EHC and SEN without statement. The below charts display young people with SEN that have been excluded in the Autumn terms of 2021/22 and 2022/23 (In some cases, data was not provided for state funded special schools).

Overall, in Merseyside there has been a 65.5% increase in exclusions of young people with SEN. As can be seen from the chart Liverpool has had the largest increase out of all the Local Authorities, with the only other Local Authority showing an increase being St Helens. Although Wirral has seen a decrease in SEN exclusions, it is the second highest LA when excluding young people with SEN.

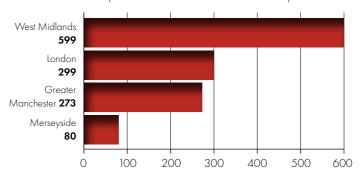


Much like young people with SEN exclusions, there has been an increase in suspensions (39%). Excluding Knowsley, all Local Authorities have seen an increase, with Liverpool having the highest rate followed by Wirral, St Helens and Sefton.



Sadly, when it comes to exclusions this does not represent the young people whose families/guardians have chosen to remove them from school before it got to this stage. These young people can either be home schooled or moved from school to school. For home schooled young people in this situation Local Authorities are to provide 5 hours a week of education. Compared to children in schools who are receiving 32.5 hours a week, depending on their home situation, they could be missing out on 27.5 hours a week of education.

Exclusions and suspensions of children at risk of criminal exploitation



Guardian graphic | Source: Fol requests responded to by 37 councils. Note: Data covers two years, 2021-2022 and 2022-2023.

Overall, there is an increase in exclusions in Merseyside leaving many of our Young People without a place in education, not only is this having an impact on their learning and development but also their vulnerability to exploitation. A BBC sounds podcast that investigated school exclusion obtained data from 37 Local Authorities which included some within Merseyside.

The data had shown that in academic year 2021/22 2,300 young people were excluded with just under a quarter at risk to criminal exploitation. Academic year 2022/23 showed 3,800 young people were excluded with 600 were at risk of criminal exploitation. File on 4 - A Different Class: Excluded kids lured into crime - BBC Sounds. The below is a graph published by The Guardian regarding the breakdown of areas for the Local Authorities that provided data for the podcast. Please note, this data has not been corroborated by the MVRP but with it being such a key topic, it is important for us to still highlight.

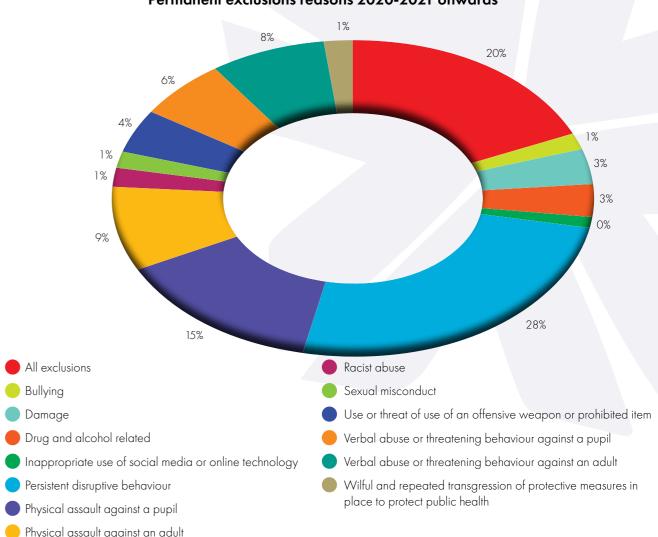
### Reasons for exclusions

The below breaks down reasons for permanent exclusions and suspensions in Merseyside over all five Local Authorities for school academic years 2020/21 through to autumn term 2023 for state funded primary and secondary schools and special schools. The data has been sourced from <a href="Gov.uk">Gov.uk</a> and they have allowed for each exclusion up to three reasons to be provided.

The top three reasons provided for exclusions in Merseyside are:

28% persistent disruptive behaviour, 20% All exclusions and 15% physical assault against a pupil.

### Permanent exclusions reasons 2020-2021 onwards



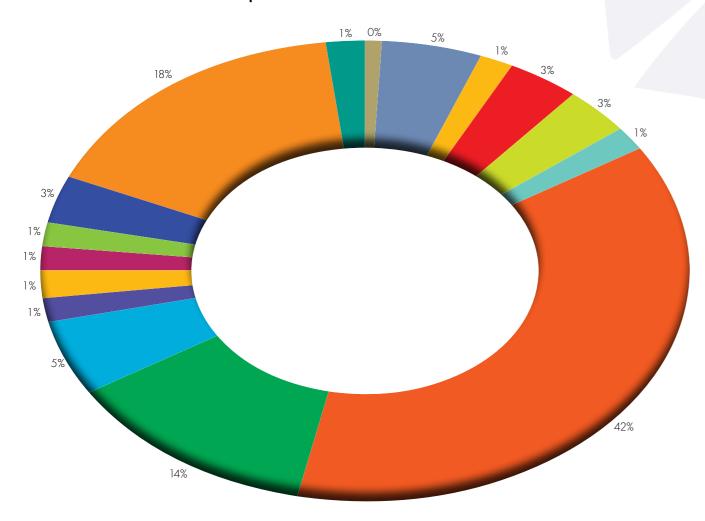
The top three reasons provided for the suspensions in Merseyside:

42% persistent disruptive behaviour, 18% verbal abuse or threatening behaviour against an adult and 14% physical assault against a pupil.

Persistent disruptive behaviour was the main reason for both suspension and exclusion in state funded schools in Merseyside for the past few years. This has also been the main factor for the rest of England, which shows that Merseyside is not alone.

Persistent disruptive behaviour can be a sign of further issues a young person may be facing. Without further investigation to this type of behaviour it can leave the young person, families and schools without answers and support that can be provided. The young person being excluded or suspended from schools can cause vulnerability, frustration and/or uncertainty to where they may be accepted and supported, increasing the likelihood of negative life choices.

### Suspension reasons 2020-2021 onwards



Physical assault against an adult

place to protect public health

Use or threat of use of an offensive weapon or prohibited item.

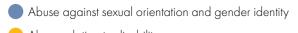
Verbal abuse or threatening behaviour against a pupil

Verbal abuse or threatening behaviour against an adult

Wilful and repeated transgression of protective measures in

Racist abuse

Sexual misconduct



Abuse relating to disability

All exclusions

Bullying

Damage

Drug and alcohol related

Inappropriate use of social media or online technology

Persistent disruptive behaviour

Physical assault against a pupil

### **Employment**

As mentioned, for the section covering deprivation, we have seen updated data for employment covering Liverpool and Birkenhead (refer to Appendix 2).

The Census 2021 data has been used to obtain a better understanding of people and their jobs, but it should be noted that when this census took place it was during a period of change in terms of working from home and furlough due to the Covid-19 pandemic.

When looking at those who are economically active but unemployed (excluding full time students\* but including those who are seeking work, waiting to start work or available to start work within 2 weeks) Liverpool is the highest at 3.4%.

The below table is a breakdown by Local Authority of the economically inactive categories. These figures confirm some aspects of the Merseyside residents that are already known:

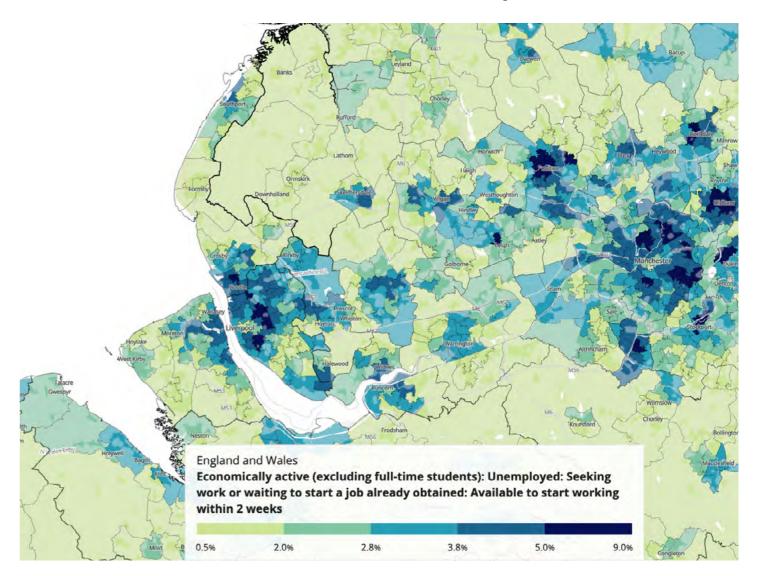
- Sefton and Wirral have a higher retired population.
- Liverpool has a higher student population.
- Knowsley and Liverpool have a higher population who have poor health.

Also identified is that Knowsley and Liverpool have a higher population of people who are economically inactive due to looking after their home or family, as shown below:

	Retired	Student	Home / Family	Disabled / Sick	Other
Knowsley	19.3	4.1	5.1	8.1	3.8
Liverpool	19.7	11	4.9	7.6	4.1
Sefton	26.6	3.9	3.9	5.9	3
St Helens	24.6	3.5	4.4	6.5	3
Wirral	26	4.3	4.2	6.5	3

(Other is unfortunately unknown)

(Green to Red = Low to High)



The top industry type for Local Authority is shown below:

Knowsley	Retail trade, Human Health Activities and Construction of Buildings
Liverpool	Human Health Activities, Retail Trade and Education
Sefton	Retail Trade, Human Health Activities and Education
St Helens	Retail Trade, Human Health Activities and Construction of Buildings
Wirral	Human Health Activities, Retail Trade and Education

### **Business effects of Cost of Living**

Since the 2021 Census we know these figures will have changed due to the cost-of-living impact. Businesses are also feeling the impact of the cost-of-living crisis with residents having to prioritise their bills, some businesses are forced to close their doors for good. Within Merseyside and the short time we have been in 2024, it has seen, multiple businesses already closing, including pubs, restaurants and shops, this not including the years between the census and the start of this year. The closure of businesses has a ripple effect on residents in our region losing their jobs and having no income to support themselves or their families. This creates a vulnerability and some may find themselves with no choice other than to refer to crime as a means of providing for their family and themselves. As we can see from above, all of our Local Authorities have a significant part of their population working in retail, the below Echo report highlights the closure of these types of businesses that have closed only in 2024. Merseyside pubs, restaurants and shops that have already closed this year - Liverpool Echo

### Mental Health and employment

There has been an increase in mental health amongst young people in the UK impacting on employment status. Resolution Foundation found 21% of young people (18-24) who had mental health issues were out of work compared to 13% of young people who did not have mental health issues. From those young people who are out of work due to mental health, 79% have qualifications at GCSE level or below. Although this covers the UK, for Merseyside we know our two most deprived areas, Liverpool and Knowsley, have a higher population of people who are economically inactive due to disability or sickness. With the increased awareness of mental health and knowing the additional stresses of living in a deprived area this could be behind some of the data we can see.

### Health

The Census 2021 data also provides an insight into the health of residents across Merseyside per Local Authority. The three tables below show general health, disability, and unpaid care.

(Please note: green indicates the more positive answer. For example, when asked about general health the positive answer is 'very good' so is shown in green as the highest, however the negative answer is 'very bad', so the highest number is shown in red, with green now the lowest number).

#### General health

	Very Good	Fair	Very bad
Knowsley	45.7	14.7	2.2
Liverpool	44.6	14.9	2.3
Sefton	48.4	13.3	3.9
St Helens	45.5	14.4	1.7
Wirral	47.4	13.6	1.6

### Disability (Equality Act)

	Not disabled	Limited a little	Limited a lot
Knowsley	76.4	10.7	13
Liverpool	76.2	11.1	12.7
Sefton	79.3	10.7	9.9
St Helens	78	11.3	10.8
Wirral	77.8	11.6	10.6

### Unpaid care hours per week (aged 5 years and over)

	19 hours of less	20 - 49 hours	50 hour plus
Knowsley	4.3	2.9	4.3
Liverpool	4.1	2.6	3.6
Sefton	4.9	2.4	3.4
St Helens	5.1	2.7	3.9
Wirral	5	2.4	3.5

(Green to Red = Low to High)

In terms of general health, Liverpool has the poorest health, showing the lowest for 'very good' and the highest for 'very bad'; however it is top for 'fair'. Knowsley shows the same trends. At the other end of the scale is Sefton, followed by Wirral with the highest for 'very good', lowest for 'very bad' and highest for 'fair'. For all three categories St Helens sits in the middle.

Sefton has the lowest number of residents who identify with a condition as per the Disability Act (20.7%), with Liverpool having the most (23.8%). Of the people who said they were disabled, Wirral sees the highest number of people whose day-to-day activities are slightly limited, followed by St Helens. Those whose day-to-day activities are limited a lot is highest in Knowsley, followed by Liverpool.

Finally, when looking at the number of people aged over 5 years (unfortunately further information on age groups is not provided) who provide unpaid care, St Helens sees the most people who provide 19 hours or less a week. However, of the people who provide more than 19 hours (20 to 49 hours and more than 50) Knowsley is the highest. If we concentrate on those people who provide over 50 hours, we can see that Sefton has the least.

The above tables and explanations highlight the health differences across Merseyside. Generally, people are healthier and provide less unpaid care to others in Sefton and Wirral but people in Liverpool, Knowsley and St Helens have poor health and a provide a lot of unpaid care to others. In terms of deprivation this matches our affluent and deprived areas of Merseyside.

### **Religion and Culture**

The 2021 Census revealed England and Wales are no longer a majority population whose religion is Christian. However, this is not the case for Merseyside with each Local Authority still seeing the majority of their population identifying as Christian. There are also more people across Merseyside who identify themselves as non-religious. This table shows the comparison of Christian and no religion per Local Authority:

	Christian	No Religion
Knowsley	66.6	27.2
Liverpool	57.3	29.4
Sefton	64.4	28.6
St Helens	62.3	31.2
Wirral	55	37.3

Those of 'no religion' appear to live around the City Centre and Wirral with notable clusters in North Sefton and parts of St Helens. Our Hindu community are found in Liverpool, our Jewish community are mainly located in Liverpool South, our Buddhist community appears to be spread across Liverpool, East Wirral, South Sefton and parts of St Helens and our Muslim community are mainly found in Liverpool North and the City Centre with a very specific hotspot of Toxteth Park with 50.3%.

The data also identifies that most people live with others who share the same belief. Of those multiple person households where there are at least two different religions, hotspots include Edge Hill (2.9%) and Wavertree South (2.8%). Further work will need to be carried out to establish if these households are mainly houses of multiple occupancy (commonly known as HMO's) and perhaps even student accommodation.

### Marriage and Civil Partnership

Below is a breakdown of legal partnership status by Local Authority. This shows more people in Liverpool have never married or entered a civil partnership. More people in St Helens and Sefton are married or in a civil partnership. For those who are separated it is fairly even across the region, however divorce is higher in Wirral. Finally, the level of people widowed is higher across Sefton, Wirral and St Helens.

	Never married	Married	Separated	Divorced	Widowed
Knowsley	45.6	37.2	2.5	8.2	6.6
Liverpool	53.4	31.5	2.2	7.4	5.5
Sefton	37.3	43	2.1	9.7	7.9
St Helens	37.5	43.3	2.4	9.5	7.3
Wirral	37.3	42.6	2.4	10.2	7.5

### **Overall Local Context**

As previously mentioned, the most recent deprivation data for two areas in Merseyside shows the comparison over 10 years as well as the average changes in employment and wages compared to the rest of the UK. This gives further evidence that one of our most deprived local authorities, Liverpool, is not meeting the average against the rest of the country. The Cost-of-living data provides specific areas of struggles in Merseyside, with Citizens Advice highlighting that the majority of our Local Authorities are struggling with council tax arrears which goes against what their data has told them for the rest of the country since the cost-of-living crisis began.

Having said this, the data also suggests that energy and food - two key necessities - are also having an impact in our region. Food banks are struggling with supplies even with the cost-of-living support, Merseyside residents are turning to food banks due to the increases in food costs. There has been an increase in school exclusions and suspension, with most being down to persistent disruptive behaviour creating vulnerabilities for these young people in the community.

Our risks and drivers fall into separate categories, community, individual, society and relationships. A negative change in local context can have an impact on more than one of these categories. If we take school exclusions for example, one young person being excluded from school can affect individual risks in terms of education, support, and vulnerability to exploitation. This can then have a negative impact on relationships in their home between the family unit (Parents/guardians and siblings). It can then impact the community and society where violence or crime can become the norm, creating a negative place for people to live.

Being able to understand Merseyside's population, age, gender, LGBTQ+, ethnicity, race, health, religion and culture not only allows us to see further risk factors but identify what type of support and preventative measures are required and where.

### TIIG Data

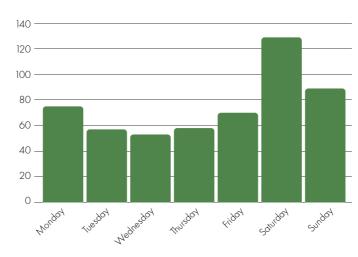
This section explores data from the Trauma and Injury intelligence Group (TIIG) based at the Public Health Institute (PHI) at Liverpool John Moore's University (LJMU). Data is provided in relation to Emergency Department attendances, Noth West Ambulance Service, Merseyside Fire & Rescue Service and Merseyside Police. All data covers the period of time available between 01/04/2023 - 31/12/2023.



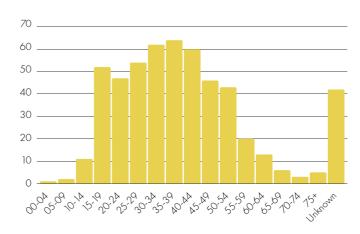




Days which had the highest NWAS call outs were Saturday and Sunday. Saturday made up 24% of callouts and Sunday 17%. Monday seems to stand out as their busiest week day seeing 14% of call outs made on this day.

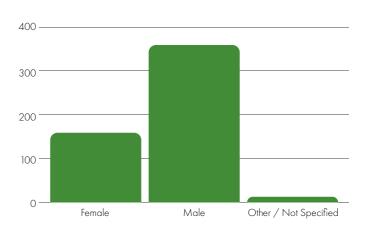


Looking specifically at those people requiring medical assistance, the peak ages are from 30-34 years to 40-44 years. Overall this accounts for 35%. However, when looking at these datasets separately we can see that the peak age for NWAS is 35-39 years (12%)which is a change from last years SNA publication, which found 30-34 years were the peak age for NWAS. As shown, 'unknown' does appear to make up a significant part of the data compared to some other age groups we know (2%).

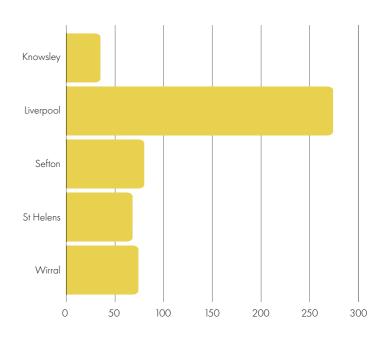




In terms of gender 68% are male, 30% are female, with other or 'not specified' accounting for 1%.

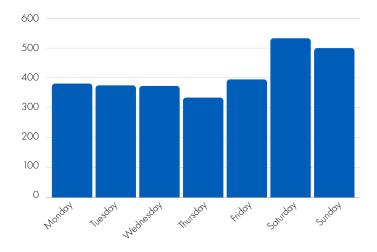


Finally, when looking at the Local Authority breakdown, 51% of patients reside in Liverpool; Sefton (15%), Wirral (14%), St Helens (13%) and Knowsley (7%).

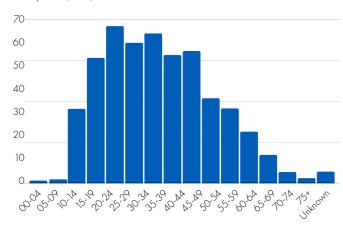




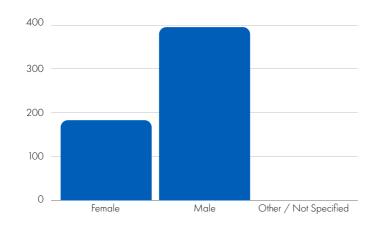
Much like the NWAS data, ED's peak days were Saturday (18%) and Sunday (17%).



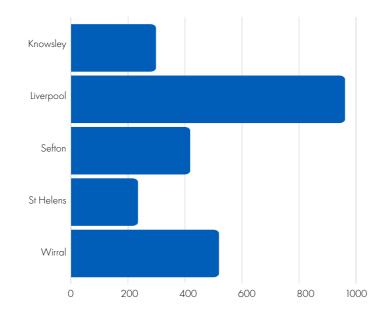
Looking specifically at those people requiring medical assistance, the peak ages are from 20-24 years to 30-34 years. Overall this accounts for 38%. However, when looking at these datasets separately we can see that the peak age for ED attendances is 20-24 years (13%)



In terms of gender 68% are male, 32% are female, with 'other' or 'not specified' accounting for 0%.



Finally, when looking at the Local Authority breakdown, the majority (33%) of patients reside in Liverpool, followed by Wirral (18%), Sefton (11%), Knowsley (10%) and St Helens (8%). It should be noted that 16% of ED attendees reside outside of Merseyside.

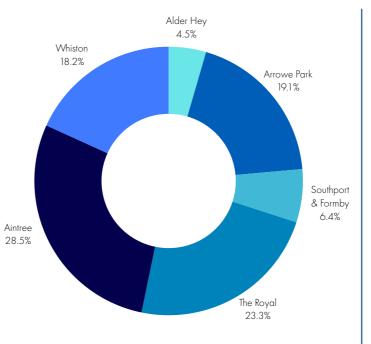


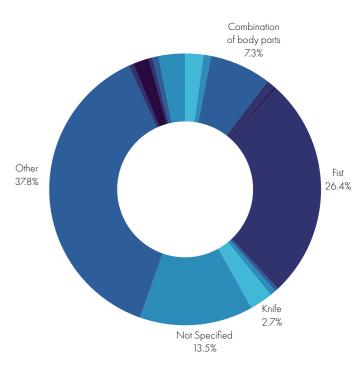


Attendances were quite consistent throughout the time period; April and June had the highest peaks accounting for 24% of attendances during this time

- As per the chart to the bottom left, the top ED was Aintree (28%)
- 71% of attendees were White British
- 61% self referred
- 61% arrived in their own transport
- 41% were discharged with no follow up, whilst 16% were discharged to be followed up by a GP. 13% were admitted to a hospital bed but 14% left before being seen

In terms of weapon type, over half (51%) were either classed as 'other' or 'not specified', however of the ones where the type of weapon is known, 26.4% involved a fist whilst 3% involved a knife or sharp object and 0.2% involved a firearm.





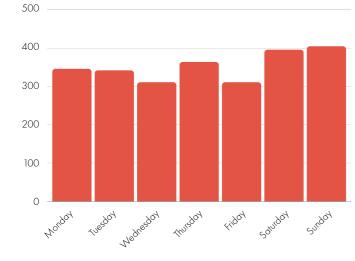
35% of known weapon types involved the use of a body part, meaning of the people requiring ED treatment for a SV injury and where the weapon type is known, it is likely that the majority of people were injured by activities consistent with fighting.



MFRS saw 2475 deliberate fires, the majority of which (2049) were classed as secondary.

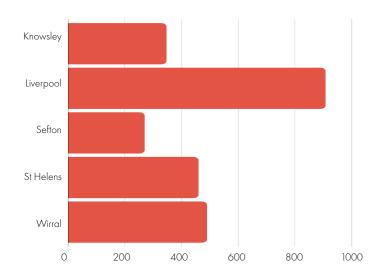
Peak months include June (16%), and April and May (15% each). Previous discussions with MFRS reveal usual peaks around these months attributed to dry weather causing grass fires.

In terms of days of week, peaks can be seen for Saturday and Sunday, both 16% each.



The majority of deliberate fire incidents occurred in the evening time, with peak times of 18:00 – 21:59, accounting for 47%.

Liverpool sees the most deliberate fires with 37%. This is by far the highest, with the next LA being Wirral (20%) closely followed by St Helens (18%), Knowsley (14%) and Sefton (11%).



Of these 2475 incidents:

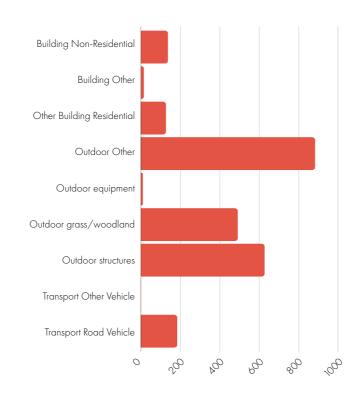




The last chart shows the property category involved, with 'outdoor other' being by far the most property affected (36%). Further to this 'outdoor structure' accounts for 25%.

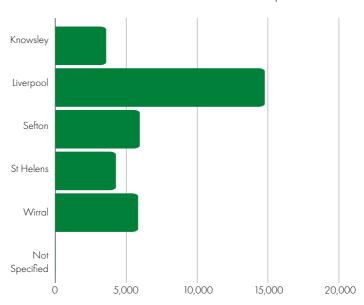
The majority (89%) of spread items were classed as not specified, not known, other and none. When it was known, the main 'spread item' was 'Explosives petrol/oil' at 2%.

42% involve others property and 8% to own property. The remaining 50% are unknown.



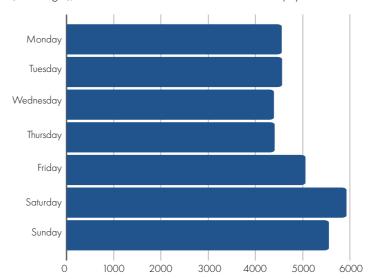


The Local Authority with the most recorded Serious Violence incidents is Liverpool, with 42%. As can be seen with this dataset (below) there is also an option for 'not specified'. Although this is hard to see, there is a small figure making up 0.03%, there should always be an offence location so MVRP will work with MerPol to improve this.



SV incidents were quite consistent throughout the time period, with a slight peak in May and June (24%). The peak days of the week were Saturday (17%) and Sunday (16%) (below).

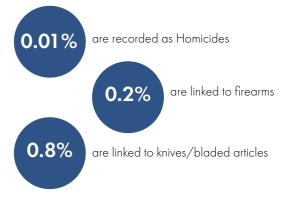
The main crime type was, by far, Violence Against the Person at 88% (to the right), with 57% recorded as Violence without Injury.





When victims were known 54% were female, 77% were white British, the main age range was 30-39 years (22%).

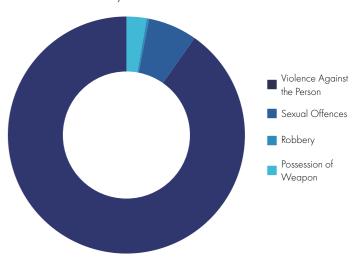
When offenders were known 71% were male, 83% were white British, the main age range was 30-39 years (28%).



#### Stop and Search

TIIG have also provided us with a Police Stop and Search dataset. From this we know that in Merseyside:

- Stop Searches were consistent throughout the time period with no main day of the week
- They mainly took place in the evening and overnight but with a specific peak time of 22:00 – 23:59 (14%)
- The main residential LA for those stopped was Liverpool at 46%. For information 0.9% live in LA's outside of Merseyside
- 78% of people who were stopped self identified as White British
- The main Act cited was the Misuse of Drugs Act at 75% and the main'object' found was controlled drugs at 74%. For information offensive weapons (including firearms) was 6%
- 72% received no further action, whilst 9% were arrested and 7% received community resolution



### Local Authorities

This section displays relevant data from the TIIG Data Hub, information from the 2021 Census and specific intervention figures for each Local Authority.





### TIIG VRP Hub - Charts (ljmu.ac.uk)

### **Emergency Department:**

- 298 residents attended an ED
- 282 of these attended a Merseyside based ED
- Focusing on just those Knowsley residents who attended a Merseyside based ED:
- 132 attended Whiston Hospital, closely followed by Aintree at 103
- 50 were aged 30-34 years, followed by 44 people aged 25-29 years
- 191 were male and 107 were female
- 244 were White British
- 171 self-referred with 182 arriving in their own transport
- 118 were discharged with no follow up whilst 41 were to be followed up by a GP, 42 left before being seen and 63 were admitted to a hospital bed
- Where a weapon is known, 67 involved a fist. Figures are too low to disclose a firearm or knife.

### Merseyside Fire & Rescue Service:

- There were 347 deliberate fires
- 136 were to others property
- 374 were outdoor property types, loose refuse was by far the highest at 74
- Extremely small numbers were linked to either suspected DV or OCG activity

### Merseyside Police:

- There were 3585 reported Serious Violence incidents
- 3189 of these were Violence Against the Person, with 2115 being Violence without Injury
- There were 197 Sexual offences, 103 Possession of a Weapon, 13 Robberies and 71 Arsons
- 36 were linked to a bladed article and 13 to a firearm
- Victims were mainly female at 2079, 2492 were White British. Suspects were mainly male at 1829, with 2309 White British.

### **Demographics**

From the recent Census, we know:

- 11% of the residents of Merseyside live in Knowsley
- The population has grown by 5.9% since 2011
- Knowsley has the highest population of females at 52.2%
- It also has the most children and young people at 19.5%
- 95.3% of the residents are White British
- 66.6% identify as Christian
- 26.2% of residents have no qualifications
- 40% of residents are economically inactive. 19.3% account for retirees, however this is the second lowest percentage across the borough, with Knowsley the top for inactivity due to disability or sickness which is at 8.1%. It is also the highest across the borough for being economically inactive due to home/family at 5.1%
- For those in employment, most jobs involve retail, human health, and construction



Number of Beneficiaries 3,428



### TIIG VRP Hub - Charts (Ijmu.ac.uk)

### **Emergency Department:**

- 961 residents attended an ED
- 944 of these attended a Merseyside based ED.

### Focusing on just those Liverpool residents who attended a Merseyside based ED:

- 448 attended The Royal, closely followed by Aintree at 331
- 124 were aged 20-24 years, followed by 123 people aged 30-34 years and 121 people aged 40-44 years
- 666 were male and 295 were female
- 670 were White British
- 528 self-referred with 548 arriving in their own transport
- 295 were discharged with no follow up whilst 211 were to be followed up by a GP, 179 left before being seen and 106 were admitted to a hospital bed
- Where a weapon is known, 243 involved a fist and 32 involved a knife or bladed object. Figures are too low to disclose firearm.

#### Merseyside Fire & Rescue Service:

- There were 908 deliberate fires
- 454 were to others' property
- 714 were outdoors property type, loose refuse was by far the highest at 193
- An extremely small number were linked to DV and 26 linked to OCG activity.

### **Merseyside Police:**

- There were 14770 reported Serious Violence incidents
- 13032 of these were Violence Against the Person, with 8397 being Violence without Injury
- There were 988 Sexual offences, 452 Possession of a Weapon, 62 Robberies and 202 Arsons
- 194 were linked to a bladed article and 74 to a firearm
- Victims were mainly female at 13032, 10349 were White British. Suspects were mainly male at 7435, with 7773 White British.

### **Demographics**

From the recent Census, we know:

- 34% of the residents of Merseyside live in Liverpool
- The population has grown by 4.2% since 2011
- 51.3% of the population are female
- It has the young adults at 31.6%
- 84% of the residents are White British
- 57.3% identify as Christian
- 22.3% of residents have no qualifications
- 44% of residents are economically inactive. 16.7% account for retirees, however this is the lowest percentage across the borough. Liverpool is the top across the borough in inactivity due to being a student
- For those in employment, most jobs involve retail, human health, and education.

### From Data tool | Centre for Cities for just the City for 2023 we know:

- Average weekly wages were £642.90 an increase of £151.50 in 10 years.
- Liverpool City employment rate was 68.3% a 7.6% increase from 2013
- $\bullet$  The average house price in the city was £177,211 and ranked on the low side compared to other UK cities
- Ranked low for housing affordability at a ratio of 5.98.

### TIIG VRP Hub - Charts (limu.ac.uk)

### **Emergency Department:**

- 418 residents attended an ED
- 376 of these attended a Merseyside based ED.

### Focusing on just those Sefton residents who attended a Merseyside based ED:

- 225 attended Aintree, followed by Southport & Formby at 97
- 58 were aged 35-39 years, followed by 53 people aged 30-34 years
- 285 were male and 133 were female
- 251 were White British
- 230 self-referred with 245 arriving in their own transport
- 167 were discharged with no follow up whilst 69 were to be followed up by a GP, 79 left before being seen and 45 were admitted to a hospital bed
- Where a weapon is known, 114 involved a fist. No attendances involved a firearm and figures are too low to disclose a knife.

### Merseyside Fire & Rescue Service:

- There were 270 deliberate fires
- 108 were to others property but the majority recorded were to unknown other (128)
- 223 were outdoors property type, loose refuse was by far the highest at 51
- An extremely small number were linked to DV and OCG activity.

### Merseyside Police:

Sefton

- There were 5955 reported Serious Violence incidents
- 5402 of these were Violence Against the Person, with 3552 being Violence without Injury
- There were 347 Sexual offences, 116 Possession of a Weapon, 9 Robberies and 56 Arsons
- 51 were linked to a bladed article and 16 to a firearm
- Victims were mainly female at 3194, 4833 were White British.
   Suspects were mainly male at 3241, with 3989 White British.

### Demographics

From the recent Census, we know:

- 20% of the residents of Merseyside live in Sefton
- The population has grown by 2% since 2011
- 51.6% of the population are female
- 45.3% of the population are aged over 50 years
- 95.8% of the residents are White British
- 64.4% identify as Christian
- 19.7% of residents have no qualifications
- 43% of residents are economically inactive. 26.6% account for retirees, this is the highest across the borough
- For those in employment, most jobs involve retail, human health and education.

Liverpool City Council Number of Beneficiaries

10,933



Number of Beneficiaries 3,428





#### **Emergency Department:**

- 235 residents attended an ED
- 204 of these attended a Merseyside based ED.

### Focusing on just those St Helens residents who attended a Merseyside based ED:

- 181 attended Whiston, followed by Aintree at only 17
- 35 were aged 25-29 years, closely followed by 29 people aged 20-24 years and then 26 aged 30-34 years (there are no records for anyone under the age of 10 years)
- 168 were male and 67 were female
- 168 were White British
- 148 self-referred with 148 arriving in their own transport
- 117 were discharged with no follow up whilst 11 were to be followed up by a GP, 25 left before being seen, 48 were admitted to a hospital bed and 13 referred to an outpatient clinic
- Where a weapon is known, 45 involved a fist. No attendances involved a firearm and figures are too low to disclose a knife.

### Merseyside Fire & Rescue Service:

- There were 460 deliberate fires
- 152 were to others property but the majority recorded were to unknown other (281)
- 399 were outdoors property type, loose refuse was by far the highest at 157
- An extremely small number were linked to DV and OCG activity.

### **Merseyside Police:**

- There were 4273 reported Serious Violence incidents
- 3793 of these were Violence Against the Person, with 2328 being Violence without Injury
- There were 271 Sexual offences, 112 Possession of a Weapon, 12 Robberies and 69 Arsons
- 43 were linked to a bladed article and 15 to a firearm
- Victims were mainly female at 2368, 3381 were White British.
   Suspects were mainly male at 2296, with 2858 White British.

### **Demographics**

From the recent Census, we know:

- 13% of the residents of Merseyside live in St Helens
- The population has grown by 4.5% since 2011
- 50.9% of the population are female
- 52.6% of the population are older adults
- 96.5% of the residents are White British
- 62.3% identify as Christian
- 21.4% of residents have no qualifications
- 42% of residents are economically inactive, 24.6% account for retirees
- For those in employment, most jobs involve retail, human health, and construction.

### TIIG VRP Hub - Charts (limu.ac.uk)

### **Emergency Department:**

- 519 residents attended an ED
- 512 of these attended a Merseyside based ED.

### Focusing on just those Wirral residents who attended a Merseyside based ED:

- 469 attended Arrowe Park, followed by Royal Liverpool University Hospital at only 26
- 70 were aged 15-19 years, followed by 20-24 years at 67 and 65 were 40-44 years. It should be noted the Wirral had 5 ED attendees under 10 years.
- 329 were male and 190 were female
- 451 were White British
- 407 self-referred with 367 arriving in their own transport
- 303 were discharged with no follow up whilst 84 were to be followed up by a GP, 10 left before being seen, 28 were admitted to a hospital bed and 50 referred to an outpatient clinic
- Where a weapon is known, 161 involved a fist and 122 involved a combination of body parts. 17 involved a knife and figures are too low to disclose a firearm.

### Merseyside Fire & Rescue Service:

- There were 490 deliberate fires
- 193 were to others property but the majority recorded were to unknown other (262)
- 401 were outdoors property type, loose refuse was by far the highest at 81
- An extremely small number were linked to DV and OCG activity.

### **Merseyside Police:**

- There were 5839 reported Serious Violence incidents
- 5206 of these were Violence Against the Person, with 3359 being Violence without Injury
- There were 368 Sexual offences, 138 Possession of a Weapon,
   9 Robberies and 95 Arsons
- 52 were linked to a bladed article and 12 to a firearm
- Victims were mainly female at 3179, 4800 were White British. Suspects were mainly male at 2837, with 3560 White British.

### **Demographics**

From the recent Census, we know:

- 22% of the residents of Merseyside live in Wirral
- The population has grown by only 0.1% since 2011
- 51.6% of the population are female
- Age ranges are spread across Wirral with 22% from retirement age
- 95.2% of the residents are White British
- 55% identify as Christian
- 17.9% of residents have no qualifications
- 44% of residents are economically inactive, 26% account for retirees
- For those in employment, most jobs involve retail, human health, and education

### From Data tool | Centre for Cities for just Birkenhead for 2023 we know:

- Average weekly wages were £561.10 an increase of £166.50 in 10 years.
- Birkenhead's employment rate was 76.9% a 7.9% increase from 2013
- The average house price in Birkenhead was £230,562 and ranked in the middle compared to other UK cities
- Ranked low for housing affordability at a ratio of 7.2.



Number of Beneficiaries 2,791



Number of Beneficiaries 4,251

### Points of interest in relation to crime

This section goes into further detail in relation to certain crime types and other factors to consider when reading this SNA.

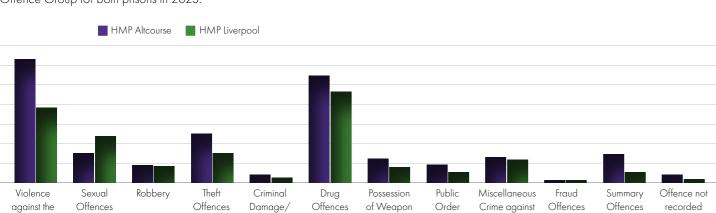
### Prison and Probation service

### **Merseyside Prison population**

In 2023 there were a total of 7,933 prisoners in both Merseyside Prisons, HMP Altcourse and HMP Liverpool (1). The below shows graphs of a breakdown of the characteristic of the prisoners (please note, this number represents prisoners during 2023, not at one given time). All data is based on Male prisons, with Merseyside not having a prison for females, both prisons also represent those that are not Merseyside residents.

As shown, both prisons had the majority of prisoners aged between 30-39, followed by 40-49.

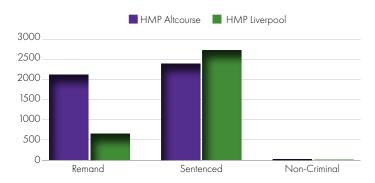
Offence Group for both prisons in 2023.



In 2023 HMP Altcourse's highest offence group was violence against the person followed by drug offences. HMP Liverpool was the opposite way seeing the highest offence group of drug offences followed by violence against the person.

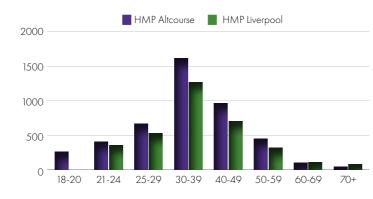
Custody type for both prisons in 2023.

person



In 2023 HMP Altcourse had near enough the same number of prisoners on remand to those who were serving a sentence. HMP Liverpool had a significant difference between those serving a sentence compared to those on remand. Both prisons saw a small population that were non-criminal.

Age groups for both prisons in 2023.



The most recent data available for prison population, at the time of writing, is December 2023. See below for the most recent population of the two prisons in Merseyside:

Society

	Population
HMP Altcourse:	1121
HMP Liverpool:	863

Potential risk of crowding in prisons is measured by the operational capacity being higher than the Certified Normal Accommodation (CNA), see below the comparison of the operational capacity and CNA for Altcourse and Liverpool:

	CNA	Operational capacity
HMP Altcourse:	780	1184
HMP Liverpool:	890	870

As we can see from above HMP Liverpool's operational capacity is sitting below the CNA along with the population of prisoners in December 2023. HMP Altcourse is not showing the same, with the prison's operational capacity sitting a significant amount above the CNA and the population also over, suggesting HMP Altcourse is crowded.

The Chief Inspector of Prisons, Charlie Taylor stated on his blog

"There is nothing particularly surprising about the growth in the prison population. The prison service itself predicted back in 2018 that the prison population would reach over 86,000 by March 2023... More prisoners squeezed into already overcrowded prisons will mean more deprivation, squalor and the risk of further violence. HMPPS's own safety in custody statistics are showing that prisons are getting less safe, with key metrics like the number of deaths, number of individuals self-harming and assault incidents all on the rise".<sup>[2]</sup>

It has been highly reported at the near end of 2023 that prisons in the UK are becoming overcrowded and running out of space, resulting in 18-day early release for those serving 4 years or less and release dates falling between October-December 2023 [3]. Whilst this may make room for those receiving sentences during this time, for the prisoners released early there is concern for their introduction back into society, housing, employment and money. In July 2023 Ministry of Justice published life after release data showing 98 prisons did not achieve the target of accommodations on the first night following release and 99 prisons did not achieve the target of employment within the first 6 weeks after release. The pre-early release proposal was put in place but no new figures yet published to see the impact.

By November 2027 the prison service population projections believe prisons will have 114,200 prisoners. The data shows an increase year on year on the prison population for England and Wales

- 1) Prison Population Projections: 2023 to 2028 GOV.UK (www.gov.uk)
- 2) Chief Inspector's blog: Why the prison population crisis is everyone's concern (justiceinspectorates.gov.uk)
- 3) Two-thirds of prisons officially overcrowded in England and Wales | Prisons and probation | The Guardian

### **Neurodiversity in Prisons**

There is very limited data when it comes to how many prisoners are neurodiverse. Following the report <a href="Overlooked and overwhelmed">Overlooked and overwhelmed</a> it was suggested that over 50% of prisoners are neurodivergent, some without having a diagnosis. When looking at screening in prisons, there is no capacity to do so especially in female prisons which are usually smaller than male prisons.



A pilot study has been undertaken by London City Police screening those in custody. Sarah Templeton, who has been a part of the creation of the screening checklist has stated the number of prisoners who are neurodivergent is more likely to be around 85%. We can see from the lack of confirmed numbers and data sets available, neurodivergence is a huge gap in prisons. Dis Life: <85% of prison inmates are neurodivergent.

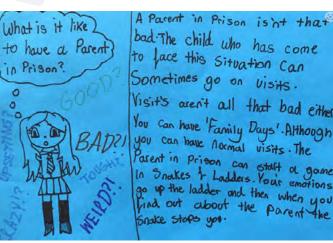
The most recent Action plan for neurodivergence in prison from the Chief Inspector states there are 100 Neurodivergent Support Managers (NSMs) introduced into the prison and probation services with plans to have one in every adult prison by 2024. Prisoners with neurodiversity can have a paid role as Neurodivergent Reps, working with prisons and mental health to create spaces focusing on the requirements for prisoners with complex needs, creating easy read versions of prison documents and embedding neurodiversity training in the induction for new staff members.

### Support available for families.

A parent, guardian or family member going to prison can have a big impact on family members, especially young people. The MVRP supports projects who support those with a family member serving a sentence embedding the whole-family approach:

- Time Matters Having a loved one in prison is traumatic for children and can often result in stigma. Through this programme, we work with children who have a parent in prison to support them and try to ensure they don't follow a similar lifecycle.
- Invisible walls The invisible walls programme is aimed at
  maintaining and improving relationships between male prisoners
  and their children and families, improving the quality of life of all
  participants, reducing re-offending by the prisoners and reducing
  the risk of 'intergenerational' offending.

All images sourced from Gallery - Time-Matters UK (timemattersuk.com)

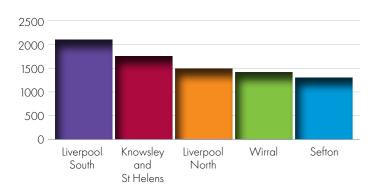


### **Probation in Merseyside**

Probation data is hard to source and with publicly available data, the most recent is not available until April 2024. With many thanks to probation colleagues, we can provide some probation data that provides a good understanding of what is happening in Merseyside.

### **Merseyside Probation Case Loads**

Below is the male case load of the probation service as of December 2023:

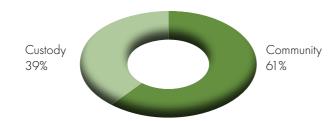


Liverpool South makes up 32% of the male caseloads of probation in Merseyside. Sefton has the smallest caseloads of males on probation (20%).

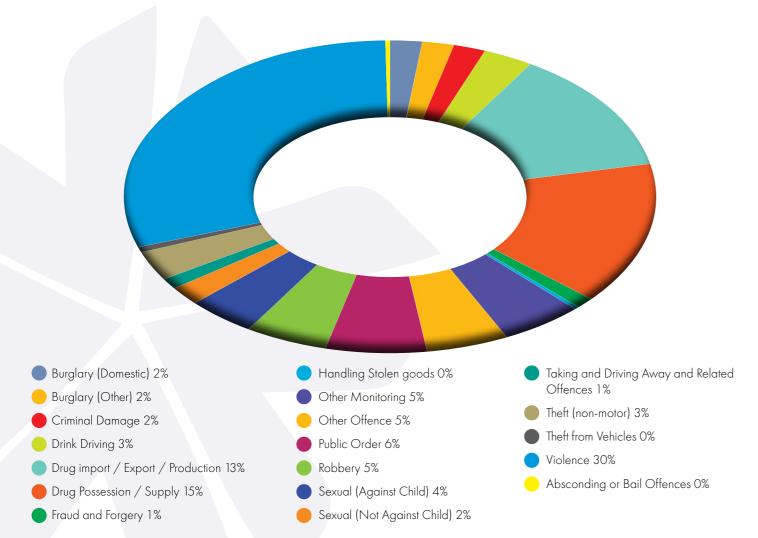
Both female and 'lifers' in the community are a small population of the probation caseloads, just over 10% (1032 Female/136 'Lifers'). To put this into comparison they make up less than the male population in Sefton (1306), to share the caseloads per Local Authorities could make the data identifiable to the individual so therefore has not been shared. ('Lifers' in the community are individuals who are on probation for life, living within the community).

### There are 1032 female caseloads and 136 'lifers' in the community.

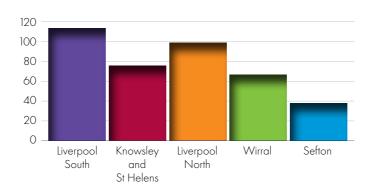
This chart looks at location of caseloads for Liverpool North and Liverpool South combined. Showing that for Liverpool the majority of probations case load locations are in the community.



Below we see a breakdown of offences that had been committed by those on probation. The top two being Violence (30%) and Drug possession/supply (15%).

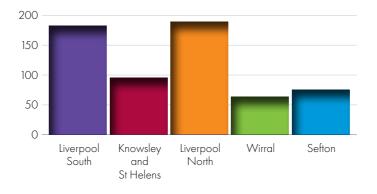


### **County Lines and Organised Crime Register**



As of February 2023, the chart above is the county lines register for Merseyside. Liverpool South and Liverpool North have the highest numbers, together making up over half of the County Lines register at 54%. Sefton is at the other end making up just 10%.

The chart below, as of February 2023, is the Organised Crime Register. Much like the above, Liverpool North and Liverpool South have the highest numbers and make up 61%. Wirral has the lowest numbers at 11%.



### Knife crime

In England and Wales there has been an overall decrease of 7.3% of serious offences that have involved a knife. The North West has followed this trend, seeing a decrease of 54.5% of serious offences involving a knife. Merseyside has played a part in the decrease that the North West Region has seen, with a total decrease of 18.6% for knife crimes. This follows the previous release of Merseyside having a 22% decrease during the June'22-June'23 period. See the below table for comparison of Police recorded data (provided by ONS) for offences that involved a knife between September 2022/23.

Crime in England and Wales: Police Force Area data tables - Office for National Statistics (ons.gov.uk)

From the data we have available on TIIG (April 23- December 23) there were a total of 924 offences of Possession of a Weapon. When broken down, possession of article with a blade makes up for 41% and weapons defined as 'other' make up 45%.

From the same available data period 96 people have attended Emergency Department's for knife or other sharp object injuries, this is 3.3% of Serious Violence Emergency Department's attendees. In our Merseyside hospitals, Aintree has seen the most (24) attendees with knife or sharp object related injuries closely followed by The Royal (21). When it comes to age groups, 15-19 years have been the ones who have attended Emergency Department's for knife related injuries more frequently during this time, seeing 18%. 83 Males have attended Emergency Department's and 67 of attendees identified as white British.

Crime type involving a knife	Year ending Sept 2022	Year ending Sept 2023	Total % difference
Attempted murder offences involving a knife	12	8	33.3% decrease
Threats to kill offences involving a knife	123	100	18.6% decrease
Assault with injury and assault with intent to cause serious harm offences involving a knife.	869	724	16.6% decrease
Robbery offences involving a knife.	435	414	4.8% decrease
Rape and sexual assault offences involving a knife.	28	26	7.1% decrease
Homicide offences involving a knife.	10	4	60% decrease

This year saw Merseyside Police cary out a knife surrender week in May 2023 and November 2023 through Operation Sceptre; allowing those who carry an illegal weapon the opportunity to dispose of a knife safely. They carried out land searches, stop and search and engaged with community outreach. In November there were 170 weapons handed in by the public, 77 weapons seized from stop and searches and arrests and Police attended 64 community meetings and school events. Merseyside Police have also invested in 140 handheld metal detectors to be used alongside stop and searches to recover weapons. A successful week of enforcement, prevention and engagement to tackle knife crime Merseyside Police



Although the above highlights the positive decrease of knife crime across Merseyside, we know that knife crime has a long and high impact in our communities. We sadly had the tragic incident that took place during Christmas week in Liverpool City Centre where a young male was stabbed in the chest, thankfully it was not fatal. Detective Chief Inspector Roberts, from Merseyside Police, stated "Knife crime has no place on the streets of Merseyside and we are committed to finding the people who choose to carry knives. We need the public to speak to their family and friends and make it socially unacceptable for them to even think of carrying weapons" Boxer «wins most important fight» after being stabbed in chest - Liverpool Echo.

The numbers of police recorded incidents involving a knife may be decreasing and there are positive responses to reduce knife crime, like `Operation Sceptre`, but there is still a lot of work to be done. MVRP is a part of the work and have continued or introduced:

- Hospital Navigator programme based in Aintree Hospital, Alder Hey Hospital and The Royal Liverpool University Emergency Department to support and engage with both victims and perpetrators of violence, during a teachable moment to provide support and alternative opportunities.
- Arts, Culture, Sport (ACS) programme initiatives providing a
  variety of activities and opportunities for young people across all
  five local authorities. This year 18 initiatives have been funded
  from basketball, Forrest schools and engaging with young people
  through live music. (All received free licences for the street doctor
  app and trauma informed training).
- Supporting other organisations and charities in their involvement in preventative work:
- Knife Savers founded by trauma doctors based at Aintree
  Hospital who provide education and training and teach members
  of the public how to treat someone who has sustained a knife
  injury using a bleed control kit.
- Bleed control cabinet roll out across Merseyside, which contain bleed control kits that have been selected by trauma doctors.
   They can be accessed by a code provided by North West Ambulance Service.



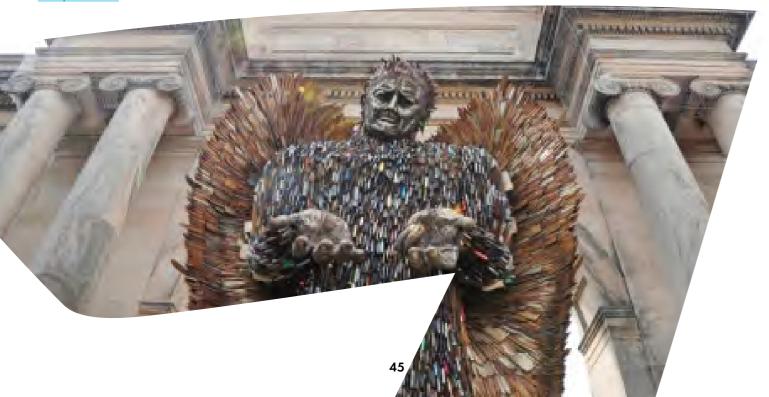
### **Firearms**

The previous reporting period (2022-2023) included several high-profile homicides involving the use of a firearm which led to the launch of Evolve Knowsley-Liverpool. One year on, Merseyside Police said there has been a 78% increase in intelligence from the community to help tackle serious violence. One year anniversary of EVOLVE Liverpool-Knowsley | Merseyside Police.

Since the tragic and devastating homicides in 2022 and the preventative work that has been undertaken, there has been a decrease in Firearm discharges as reported by ONS of 50% between September 2022-September 2023 and 37% decrease in gun crime.

Looking only at Emergency Department data that is available on TIIG (April-December 2023) at the time of writing shows injuries due to firearms are the least reason for attendance making up 0.2%. The number of firearm injuries are too low to disclose further information such as characteristics.

MVRP engage with interventions to reduce all types of violence but interventions that target reduction and support those who have fallen victim of firearms offences include Hospital Navigators and the Arts, Culture and Sports programme (as detailed above).



# Community Insight

This section provides insight and feedback from our Merseyside communities gathered from Serious Violent Duty surveys.

### Serious Violence Duty survey response

With many thanks to Serious Violence Duty team, we can share the responses to a survey from communities in each Local Authority, allowing the communities to have a voice and to offer us insight into how we can better support them. The individuals in each Local Authority live and work within the serious violence that goes on and the information they share with us should be acknowledged with the highest importance. We can see what similarities and differences are present in information given by communities regarding serious violence. The surveys ran between 5th September 2023 and 1st October 2023 and reflected on the 12 months prior.

Community consensus lies at the heart of the local partnership approach to preventing and reducing serious violence. To embed a truly place-based, multi-agency, public health approach to serious violence prevention, we recognise the importance of working with and for our local communities, empowering them to actively participate in matters that affect them and that they care about.

In adopting a strengths-based approach, we want to support our communities to co-design solutions, ensuring their voices are at the heart of the decision-making processes at both local and central Government level. In developing this strategy, we have delivered a series of consultations over the past 12-months to understand how violence affects our communities, to establish what we can do as a partnership to improve feelings of safety amongst our communities and minimise the fear of violence.

Insight has been collated to understand the Merseyside-wide context, however, to provide a more detailed insight the more localised responses have been detailed below.

### Knowsley

The universal population received 66 participants from the Knowsley local authority. The target population reached 57 participants, and the groups engaged with included:

- Knowsley Youth Cabinet.
- Knowsley MADE group (care experienced young people).
- LIVV Housing Apprentices.
- Fairhaven Residents Group.
- SHARE Knowsley Kirkby Drop In.
- Friends of Court Hey Park.
- Friends of Jubilee Park.

### Experience

The findings presented that the meaning of violence meant 'physical', 'assault', and 'person', highlighting the fear that violence against the person is prevalent amongst those participating in this consultation.

The findings from graph 1 suggest that 32% (n39) of Knowsley residents have been victims of violence. That is, 36% (n24) of the universal population, compared to 26% (n 15) from the targeted

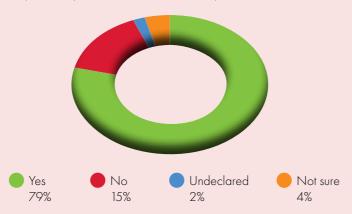
Graph 1: Have you been a victim of violence



From people's experience of violence, participants believed that 18-24-year-olds are most likely to be victims and perpetrators of violence. The reasons for this were linked to peer-pressure, having a poor upbringing and frequenting social settings such as pubs or

Graph 2 suggests that most Knowsley residents have witnessed violence 79% (n97). That is, 82% (n54) of the universal population, and 75% (n43) of the targeted groups.

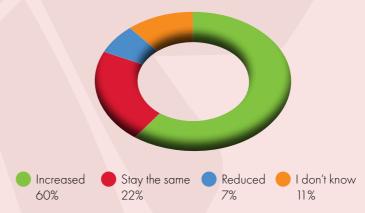
Graph 2: Have you witnessed (or seen) violence in person?



The most frequent places respondents have witnessed violence are in the city or town centre at night, in the city or town centre during the daytime and in a street in their local area where they live during the daytime.

Graph 3 shows that the majority of residents 60% (n74) believe that violent crime has increased in the last 12 months in Knowsley. That is, 74% (n49) of the universal population, compared to 44% (n25) from the targeted groups.

Graph 3: How do you think violent crime has changed in your area in the past year?



The areas perceived as the safest are at home or at a friend/family's house, in and around entertainment venues, in and around places they shop, and parks, playgrounds and green spaces.

Unfortunately, most residents view pubs or nightclubs as unsafe and a large percentage of residents view the street as unsafe.

#### **Drivers of Serious Violence**

Respondents outlined what they thought the drivers of serious violence are, the most frequent answers were the effects of drugs and alcohol, criminal behaviour, and to exert power or control.

Knowsley respondents prioritised policing solutions as those which they felt would make the biggest reduction in violent crime where they live; for example disrupting gangs, tackling drug supply, more police on the street and preventative policing. On the other hand, solutions that Knowsley respondents feel have the least impact are improved housing, dealing with low level crime and anti-social behaviour and street maintenance.

> "Areas should invest in gathering youths and helping them find a direction in life, provide activities, and support that will help them in school/ work."

### Liverpool

The universal population received 306 participants from the universal population. The target population included the groups of:

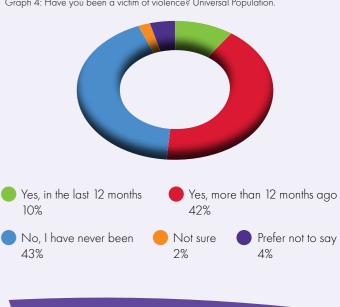
- Young Victim's Families.
- Voluntary, Community Sector Delivery Providers.
- Kinship Children.
- Kinship carers.
- Black and Asian Community Members.
- Alternative Education Students.
- Youth Justice Experienced Young People.
- Ethnic Minority Young People.
- Families with Children with Additional Needs.

### **Experience**

The findings presented that the meaning of violence meant 'physical', 'harm', and 'person' highlighting the fear that violence against the person is prevalent amongst those participating in this consultation.

The findings from Graph 4 suggest that 52% (n 158) of Liverpool residents have been a victim of violence and 43% (n 132) have never been a victim of violence.

Graph 4: Have you been a victim of violence? Universal Population.





The focus groups agreed that anyone can be a victim of violence, yet certain crimes have attachments to groups of individuals. For example, most alcohol-related violence occurs within communities of adults, rather than children. Ethnic Minority Young People felt that they are stereotypically linked to crimes associated with knives, drugs and stealing.

From people's experiences of violence, participants believed that 19-24-year-olds are most likely to be a victim and perpetrator of violence

Graph 5 shows the majority of residents in Liverpool have witnessed violence in person 80% (n24). 13% (n40) have never witnessed violence.

Graph 5: Have you witnessed (or seen) violence, in person? Universal Population.

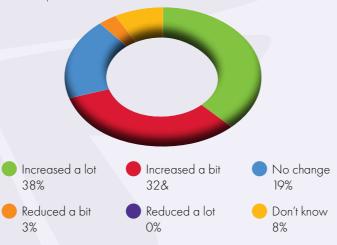


The most frequent places that respondents witnessed violence were in the city or town centre and in a street in their local area during the daytime.

The focus groups specified that there are certain areas where you are more likely to witness violence, specifically relating to the L8 postcode. There was a consensus that witnessing acts or threats of violence on social media was common and this also included seeing people using or promoting illegal drugs.

Graph 6 shows that the majority of residents 70% (214) believe that violent crime has increased in the last 12 months in Liverpool. It is important that no participants believed that violence crime had reduced a lot.

Graph 6: How do you think violent crime has changed in your area in the past year? Universal Population.



The areas perceived as the safest are at friends' or relatives' homes and at home.

On the other hand, more people view travelling on public transport, in or around pubs or nightclubs and in or around bus or train stations as unsafe rather than safe.

### **Drivers of Serious Violence**

Respondents outlined what they thought the drivers of serious violence are, the most frequent answers were the effects of drugs and alcohol, criminal behaviour and to exert power or control.

An interesting point was made by Young Victims' Families that stated the filming of attacks by peers increases propensity for a more violent attack. They spoke that there should be better legislation surrounding the filming of violent offences because it is a major safeguarding issue.

### **Solutions**

Liverpool respondents prioritised policing initiatives overall as solutions which they felt would make the biggest reduction in violent crime where they live for example, disrupting gangs, more police on the streets and tackling drug supply. Improving job opportunities for people leaving school was also considered to be an effective way of reducing violent crime. On the other hand, solutions that Liverpool respondents feel have the least impact are street maintenance (such as cutting back trees and bushes), improved housing and voluntary schemes to hand in weapons anonymously.

Targeted groups also called for:

- Increased parental responsibility.
- Training for parents preventing children from carrying weapons.
- Toolkit for schools around violence prevention education.
- Positive role models shown in the media.
- Whole family approach.

49

• Education around 'grass culture'.

### Sefton

The universal population received 139 participants from the Sefton local authority. The target population reached 65 participants including focus groups of:

- Youth Justice Cohort.
- Turnaround Cohort.
- Youth Connectors Cohort.
- Making a Difference Group.
- New Beginnings Group.
- Grant Funded Organisations.
- Uniformed Youth Organisation.
- Outreach Work.

### Experience

Participants outlined the meaning of violence based on their personal experiences with the most used words being 'harm', 'physical', and 'person'. Other examples include 'sexual violence', 'criminal damage', and 'racism'.

### "Violence is fear, transphobia and gang wars."

The findings from graph 7 suggest that 43% (n88) of Sefton residents have been victims of violence.

Graph 7: Have you been a victim of violence?



That is, 47% (n65) of the universal population, compared to 33% (n21) from the targeted groups.

Based on people's experiences of violence, the universal population believed that 19-24-year-olds are most likely to be victims and perpetrators of violence, compared to the targeted groups who believed this was 13-18-year-olds. The reasons for this were linked to substance use (drugs and alcohol) and peer-pressure.

Graph 8 suggests that most Sefton residents have witnessed violence 67% (n 137).





The most frequent places that respondents witnessed violence were at school, in the city, or town centre, at night and in a street in their local area where they live, during the daytime.

In addition, individuals in the targeted groups frequently witnessed messages on posts on social media containing violence.

Graph 9 shows that the majority of residents 76% (n 154) believe that violent crime has increased in the last 12 months in Sefton. That is, 73% (n 102) of the universal population and 80% (n52) of the targeted groups. It should be noted only 1% (n2) believed violent crime had reduced.

Graph 9: How do you think violent crime has changed over the past year?



The areas perceived as the safest places are at friends' or relatives' homes, at home and places they shop. Unfortunately, residents view pubs or nightclubs as mostly unsafe and a large percentage of residents perceive the park, common, or other public open spaces as unsafe.

#### **Drivers of Serious Violence**

Respondents outlined what they thought the drivers of serious violence are, the most frequent answers were the effects of drugs and alcohol, criminal behaviour and peer-pressure.

Respondents from the targeted groups claimed that it is common for young people to seek belonging by being in a gang, or to have friends that are gang members which results in carrying knives and violent actions. The reasons why young people may become involved in gangs included:

- Lack of family support.
- Not having a caring home.
- Lack of places to go (such as youth clubs).
- Not many free places for young people to go to.

"Us as a generation have it rough. On a single person salary, you can't get a mortgage. It puts you in a difficult position. If you live life properly it seems you get less. It is understandable people get involved in criminality".

### Services Available

Young people said they felt apprehensive about contacting the police and there were not many situations where they would feel comfortable ringing the police for help. Some of the reasons for this included:

- Fear of repercussions.
- Being seen as a 'grass'.
- Nothing will come from it.
- The police are portrayed negatively in the media, specifically in relation to women.

#### **Solutions**

Sefton respondents prioritised policing initiatives as solutions which they felt would make the biggest reduction to violent crimes where they live, for example, disrupting gangs, tackling drug supply, more police on the streets and preventative policing. On the other hand, solutions that Sefton respondents feel have the least impact are dealing with low level crime and anti-social behaviour, better street lighting and street maintenance.

Young people suggested that to deter individuals from joining gangs there should be positive mentors in place in schools. They also called for a shift away from focussing primarily on educational achievement to focussing on bolstering positive developmental opportunities.

### St Helens

The universal population received 53 participants from the St Helens local authority. The target population reached over 60 participants and included the groups of:

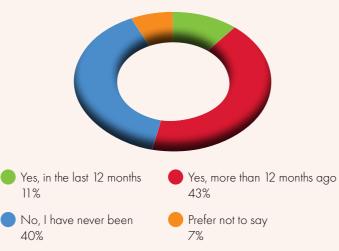
- Over the Rainbow.
- YMCA YP Listening Service.
- Chrysalis Centre for Change.
- St Helens Council Resettlement Service.

### Experience

The findings presented that the meaning of violence meant 'physical', 'harm', and 'attack', highlighting the fear that violence against the person is prevalent amongst those participating in this consultation.

The findings from Graph 10 suggest that 54% (n29) of St Helens' residents have been a victim of violence and 40% (n21) have never been a victim of violence.

Graph 10: Have you been a victim of violence?



From people's experiences of violence, participants believed that 19-24-year-olds are more likely to be victims and perpetrators of violence. The reasons for this were linked to substance use (drugs and alcohol).



The findings from Graph 11 show that the majority of residents in St Helens have witnessed violence in person 87% (n46).

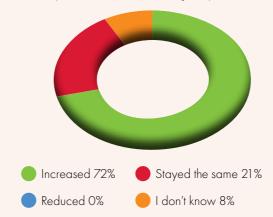
Graph 11: Have you witnessed (or seen) violence, in person?



The most frequent places that respondents witnessed violence were in the city or town centre at night, in a street at night, and in a street during the daytime.

Graph 12 shows that the majority of residents 72% (n38) believe that violent crime has increased in the last 12 months in St Helens. It should be noted that no participants believed that violent crime had reduced.

Graph 12: How do you think violent crime has changed in your area in the past year?



The areas perceived as the safest are at friends' or relatives' homes and at home.

On the other hand, more people view the street, travelling on public transport, pubs or nightclubs, and the park common, or other public open spaces as unsafe rather than safe.

#### **Drivers of Serious Violence**

Respondents outlined what they thought the drivers of serious violence are, the most frequent answers were the effects of drugs and alcohol, criminal behaviour and retaliation.

#### Solutions

St Helens respondents prioritised policing initiatives as solutions which they felt would make the biggest reduction to violent crimes where they live, for example, disrupting gangs, tackling drug supply, more police on the streets and preventative policing. On the other hand, solutions that St Helens respondents feel have the least impact are improved housing, street maintenance and support for parents so they can be around more.

Targeted groups also called for:

- More safe spaces for the LBGTQ+ community.
- School-based education programmes to support young people to stay safe in the community.
- Awareness raising on the impact of violence on victims and their families, including more opportunities for restorative justice including perpetrators.



### Wirral

The universal population received 169 participants from the Wirral local authority. The target population reached 43 participants and included focus groups of:

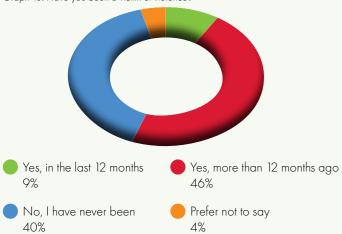
- Care leavers.
- Families with children with additional needs.
- Children in alternative education provision.
- Ethnic minority young people.
- Youth offending service.
- Victims of crime.

### Experience

The findings show that the most used word to describe violence was 'knife', highlighting that the fear of knife crime is prevalent amongst those participating in this consultation. As such, there are opportunities for the partnership to build community awareness and understanding of the actual rate of serious violence versus community perceptions, to provide reassurance of the work underway on the Wirral to prevent and reduce serious violence – including knife crime. Other common answers revolved around fighting, physical abuse and fear.

The findings from graph 13 suggest that 55% (n93) of Wirral residents have been victims of violence. 40% (n56) have never been a victim of violence.

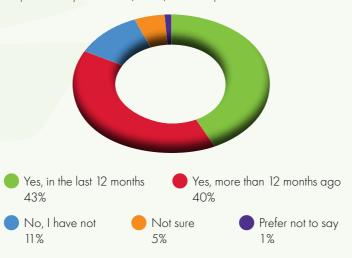
Graph 13: Have you been a victim of violence?



From people's experiences of violence, participants believed that 19-24-year-olds are most likely to be victims and perpetrators of violence. The reasons for this were linked to substance use (drugs/alcohol), involvement in gangs and frequenting social settings such as pubs or clubs.

Graph 14 suggests that most Wirral residents have witnessed violence 83% (n 140).

Graph 14: Have you witnessed (or seen) violence in person?

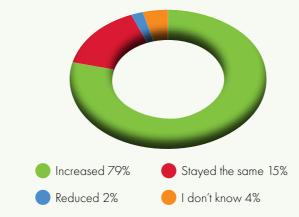


The most frequent places that respondents witnessed violence were in a street, in their local area, where they live, during the daytime 37% (n63), in the city or town centre, at night 32% (n54), and in a street, in their local area, where they live, at night 30% (n50).

Students with alternative education provision stated that they have seen violence on multiple social media platforms such as Bestgore, Instagram, Twitter, and Snapchat.

Graph 15 shows that the majority of residents 79% (n 134) believe that violent crime has increased in the last 12 months in Wirral. Only 2% (n3) believe that violent crime had reduced.

Graph 15: How do you think violent crime has changed in your area in the past year?



The areas perceived as the safest are at friends' or relatives' homes 91% (n 154) and at home (9% (n 150).

On the other hand, more respondents view the street 39% (n66), travelling on public transport 38% (64), pubs or nightclubs 50% (n85), and at the park 47% (n79) as unsafe.

Ethnic minority young people expressed concerns that they feel certain violent crime related factors are stereotypically associated with ethnic minority communities including drug dealing, terrorism, benefit scamming and aggressive fighting.

"In the media, white criminals always have bad mental health, but ethnic criminals are always a bad person."

### **Drivers of Serious Violence**

Respondents outlined what they thought the drivers of serious violence were, the most frequent answers were the effect of drugs and alcohol, criminal behaviour and to exert power or control.

More specifically, youth offending services outlined that violence occurs when people of different areas meet, with specific reference to 'Fez', 'Woody', 'Nocky', 'Seacombe', and 'Leasowe'.

#### Services Available

The focus group which included families with children with additional needs spoke about the services within Wirral that have been beneficial to them. These services included Wirral Autism & Learning disabilities Keyworkers (WALK), Merseyside Police and Adolescent Support Team. The participants stated that other services can be more difficult to access due to long waiting lists, and the likelihood of being turned away.

'It is difficult to trust people in authority".

### **Solutions**

Wirral respondents prioritised policing initiatives as solutions which they felt would make the biggest reduction to violent crimes where they live, for example reducing gangs, more police on the streets and tackling drug supply. On the other hand, solutions that Wirral respondents feel have the least impact are improved housing, street maintenance and better street lighting.

The focus groups identified the need to set up hubs for potential offenders to be able to speak to someone before they commit a crime, better parenting support, and bolstering youth worker capacity.

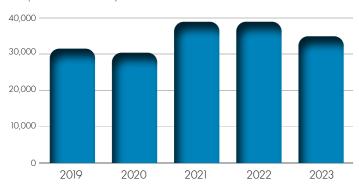
### Conclusion

### Blue light data comparison

Whilst remembering behind all of our data sits lived experiences of serious violence, the data allows us to see and understand what is going on in Merseyside. Unlike last year, not all of our blue light services have seen a decrease in serious violence; with North West Ambulance Service seeing increases in demand for service. As stated in last year's SNA, North West Ambulance Service have made changes to their data, which can have reflection on the data reported in this current period, therefore a greater understanding and comparison can be reached in the next reporting period (24/25).

As an example of our blue light services, last year we used Emergency Department data and this year we want to use the example of Merseyside Police. The below shows a five year period (all April-December) of Merseyside Police's Serious violence reporting. The decrease this year continues the downward trend following the high increase after the first lockdown restrictions were lifted. The decrease that we can see this year is the lowest it has been since pre covid and compared to last year demonstrates an 11% a 11% decrease.

Merpol offences over the years



There has been a notable decrease in Emergency Department data and a significant decrease in Merseyside Fire and Rescue Service Data.

As mentioned, MVRP currently do not have access to a full financial years' worth of data (January- March missing) but as we know from the above, reporting from North West Ambulance Service will increase further. When looking at previous reporting from our three blue light services that have shown decreases, further analysis shows January – March has not appeared as peak months for Emergency Departments and Merseyside Fire and Rescue Service sets from 2019; this indicates that the figures of Emergency Department attendees and Merseyside Fire and Rescue call outs will see this trend continue. Merseyside Police has seen January and March as months where the number of call outs regarding Serious Violence does appear to fall into some of the peak months, February does not. Therefore, it is expected that the numbers for Merseyside Police will still see a larger increase then the other blue light services.

Below highlights the consistencies that all our blue light services see, creating a profile of serious violence:

- The weekend (Saturdays and Sundays) were the two peak days of the week
- Evenings were the peak time (16:00-21:59 hrs)
- For data sets that provide an age, both victim and offender ranged between 20 39 years
- Where gender is known, the majority of victims in Emergency Departments and North West Ambulance Call Outs are male; this differs from Merseyside Police data with more victims being female and more suspects being male
- Where ethnicity is known, for both victim and offender, most were white British
- Liverpool had the highest reporting for serious violence from all emergency services

Liverpool has the highest reporting across all blue light services, when looking at the hotspots of Emergency Departments, Merseyside Fire and Rescue, Merseyside Police and North West Ambulance Service, the peak hotspot areas tend to fall in or around the City Centre. With the above profile it indicates that a lot of serious violence can come from the night life economy when looking at the time of day and day of the week. From Emergency Department data we can see that most are males attending with injuries consistent with fighting, where weapons are known they are mostly fists or a combination of body parts. It is important to note that this profile has not changed from previous SNA reporting.

The City Centre has a large Night Life Economy with visitors from outside areas, students and Merseyside residents. To see other hotspot areas outside of the Liverpool Local Authority MVRP have analysed the data to provide hotspots for each of our blue light services. In Knowsley, Northwood had the highest rate of Emergency Department attendance, Merseyside Police calls and Merseyside Fire and Rescue call responses, however, Stockbridge Village had the highest rate of North West Ambulance Call Outs. In Sefton, Linacre had the highest rate of Emergency Department attendances, Merseyside Police response and North West Ambulance Call outs, Derby had the highest Merseyside Fire and Rescue call outs. In St Helens, the Town Centre was the hotspot for all blue light services. Finally, in Wirral, Birkenhead and Tranmere appeared as the hotspot with the highest rate for each blue light service.

### **Community Insight**

It is important to hear the voice of those who live in our communities and live with the serious violence that occurs therein. From the surveys conducted by Serious Violence Duty, it allows us to understand what they think and feel about their areas. The below explains the similarities communities feel towards serious violence and what the differences are.

Participants outlined the meaning of violence based on their own personal experiences. A reoccurring theme revolved around someone causing hurt or harm, to a person, animal, or property. It was commonly understood, throughout Merseyside, that violence can occur through the means of physical (with or without a weapon), mental, emotional, sexual, domestic and/or verbal abuse.

Merseyside local authorities believe that 19–24-year-olds are most likely to be victims and perpetrators of violence. Therefore, this age group should be targeted for prevention tactics. Approximately 84% of the Merseyside population have witnessed violence, this is highest in St Helens (87%), and lowest in Liverpool (80%). The areas most common to witness violence are the city or town centre and streets in the local area, therefore these areas should be targeted.

Approximately 75% of respondents across all local authorities believed violence had increased, with <5% believing it had reduced. As such, there is work to be done across Merseyside to highlight that serious violence is in fact reducing.

Merseyside local authorities thought that the drivers of serious violence were the effects of drug and alcohol and criminal behaviour. Respondents prioritised policing solutions which they felt would make the biggest reduction in violent crime where they live. This included disrupting gangs, more police on the street and tackling drug supply.

On the other hand, there were some differences between the local authority areas that should be noted. When explaining the meaning of violence, Wirral respondents frequently mentioned 'knife crime'. As such, there is work for the partnership to do within Wirral to improve the feelings of safety from knife crime.

There are different percentages of respondents that have been a victim of violence. In Knowsley 36% and Sefton 42% of respondents have not been a victim of violence. However, in Liverpool 52%, St Helens 54%, and Wirral 55%, most respondents have been a victim of violence. An important note to make is that the Sefton findings showed that individuals witnessed violence the most in schools. As such, there is work to be done within Sefton schools to reduce serious violence.

### Recommendations

- Promote and support partners to embed a whole system and public health approach to violence reduction.
- Ensure all MVRP workstreams incorporate youth voice into decision making, collaboration and co-design.
- Review the existing MVRP Strategy & Theory of Change (ToC) to ensure effective delivery against our objectives.
- Effectively share best practice and learning from all MVRP activity to support the partnership in tackling serious violence.
- Continue to work alongside evaluation partners to understand and develop the evidence base for intervention activity with delivery partners.
- Continue collaboration with LIMU TIIG to enhance data collection and data quality.
- Continue to understand the impact of deprivation on our communities, the links to serious violence and the use of this information to drive activity.
- Continue to work to understand the relationship between neurodiversity and serious violence and how we can develop and deliver interventions to support neurodiverse population groups.
- Collaborate with other working groups, steering groups, community groups and / or alliances to share knowledge and experience to work towards a legacy of MVRP impact.
- Strive to achieve sustainability, where appropriate, for programmes, activity, and resources, designed and funded by MVRP, to ensure a legacy after March 2025
- Collaborative working with academic partners to understand the relationship between preventative activity and impact on reductions in crime, specifically serious violence reported crime.
- Provide informative evaluation and summaries of all MVRP funded activity.
- Review all independent evaluation reports to respond and take action against all recommendations.
- Design and disseminate a sustainability plan to all stakeholders and partners to achieve longstanding legacy for MVRP.

# Appendix 1

### **Examples of MVRP interventions**

Below is just a small selection of projects we support here at the MVRP to reduce violence and support young people in Merseyside:

### School based Interventions

Mentors in Violence: Mentors in Violence supports a 'whole school' approach which encourages young people to intervene to help prevent bullying, harassment, and risky behaviours through a peer-peer lead programme. Young people receive the following training covering 5 key themes - Exploring violence through a gendered lens, developing leadership, adopting a bystander approach, recognising the scope of violent behaviour and challenge victim blaming.



A peer education leadlership programme based on a Public Health model

**Ariel Trust:** Provide resources/training opportunities to tackle issues young people face. The three projects they are currently delivering include 'Grassing or Grooming?' – tackling issues with exploitation of children, 'Send me a Selfie' – informing young people of the pressures they may feel to share images online and the consequences from it and 'Resisting Radicalisation' – interactive online resource for teachers to explore issues and build young people's resilience.



MFRS Beacon Project: The Beacon project is running 1 day a week over 6 weeks at a fire station local to their school for primary school ages during term time. The activities can be tailor made with issues the schools may be facing but also may include: Practical fire service activities (e.g. hose drills, search and rescue and foam drills), team building, communication tasks, community safety awareness (safety in home, fire escape plans, arson, bonfire, firework safety and ASB), first aid, resilience, child exploitation, healthy relationships, road safety and water safety. At the end of the course they complete a pass out presentation in front of parents/guardians and teachers and receive a certificate.



Fire Champions: Fire Champions runs 1 day a week for young people aged 9-10, who are about to make the transition into secondary school. It covers a variety of topics such as fire, road and water safety, anti-social behaviour and first aid. This project uses physical activity rather than classroom-based learning to provide enjoyment whilst learning. It brings together other blue light services (Merseyside Police and North West Ambulance Service) to break down barriers and build trusting relationships. The aim is to keep children safe and away from risks in their community. It encourages them to identify and understand when they feel they are not safe so they can stay in control of the situation, strengthening their protection factors, building self-esteem, self-confidence and self-control.



### **Early Years Delivery**

**Reading to Bump:** Research has shown that reading to baby whilst in the womb familiarises them with their parents' voice, establishes a routine, stimulates brain activity, and makes for better communicator later in life. Delivered across all five Merseyside boroughs, "Reading to the Bump" has seen practitioners deliver a course in groups or one-to-one and will involve strengthening bonds between parents in prison and their children.

### **Read To Bump**



### Oh, the places you'll go!

Look, Say, Sing, Play: This is a scheme run nationally by the NSPCC and funded in our region by the Merseyside Violence Reduction Partnership. The first 1,000 days of child's life are a crucial period for child development and wellbeing and this set of resources encourages interaction between parents and their babies. It also improves attachment and sensitivity of parents from an early stage, setting up positive behaviour as their child grows.



Monkey Bob and Invisible Walls: Aimed at professionals working with child victims of trauma, Monkey Bob aims to reduce the impact of serious violence on 0-5-year-olds. Invisible Walls meanwhile, works within prisons using practical ways to reconnect those in custody with their families, reduce reoffending plus cut the risk of 'intergenerational' offending.



**Building Attachment and Bonds:** Building Bonds offers specialist attachment-based, Early Years and Parent Infant Mental Health (PIMH) training, consultation and supervision to multi-agency professionals, staff, and third sector organisations who want to build their capacity, knowledge and resources in this specialist area to support vulnerable families to 'build good bonds and break negative cycles'. This year, Building Bonds built greater specialist workforce capacity in the field of PIMH, working with multi-agency professionals who are on the frontline supporting vulnerable/at risk parents and infants in the community: The training equips professionals with:

- Greater insight, understanding and knowledge in the field of PIMH, the importance of attachment/relationships, and the impact and outcomes of separation and loss.
- Greater confidence, skills, competence and feeling better equipped to support vulnerable/at risk parents and infants in their roles.
- Being able to help and support vulnerable parents and infants with their mental health, bond and relationship and the issues which impact it.
- Understanding how they are key in helping families to break through the difficult perinatal period and break cycles via the good relationships they build with families, the support they offer, and how they make families feel.
- Greater skills, knowledge, tools to be able to engage vulnerable 'hard to reach' families in their professional role.



### Sefton Place Based Early Years Delivery

A place-based approach was introduced to specifically assist those children born during COVID-19, who were aged 2 at the start of the project, to ensure they are ready to start school. A number of wards, based on data, were identified in the South Sefton area for a very targeted approach initially involving very specific early years interventions including Reading to Bump, Monkey Bob, Look Say Sing and Play and a number of others.

**ADHD Foundation:** Umbrella stay and play is a 1 hour play session in identified hotspot children centres for children with emerging neurodevelopment traits. It offers advice and guidance to parents/guardians, promotes peer support and coaching and signposts parents/guardians to additional support services. They also offer Umbrella drop-in sessions on a 1-1 basis for parents/guardians for 1 hour with an early years neurodivergent specialist. Some examples of topics covered include sleep, Language, communication and interaction and play. Further providing training in education for professionals.





Hospital Navigators: The Navigators are located in Emergency Departments at Alder Hey, Aintree and RLUH. The programme is aimed at young people aged 10-25 years that have attended an emergency department due to serious violence as the victim, perpetrator or both. Through their experience in youth work, the Navigators, alongside the young person, design a long-term intervention plan that will steer them into exciting activities and opportunities leading to a safer, positive lifestyle.



**Now Fest:** Festivals that focus on key themes that bring together young people to perform an art piece relevant to a theme that is important to them. For 2024 the festival focused on 'overcoming Adverse experiences (ACES)'. The festival creates a space for discussion, awareness and education, allowing young people to be at the heart of it and lead the way on what matters to them.

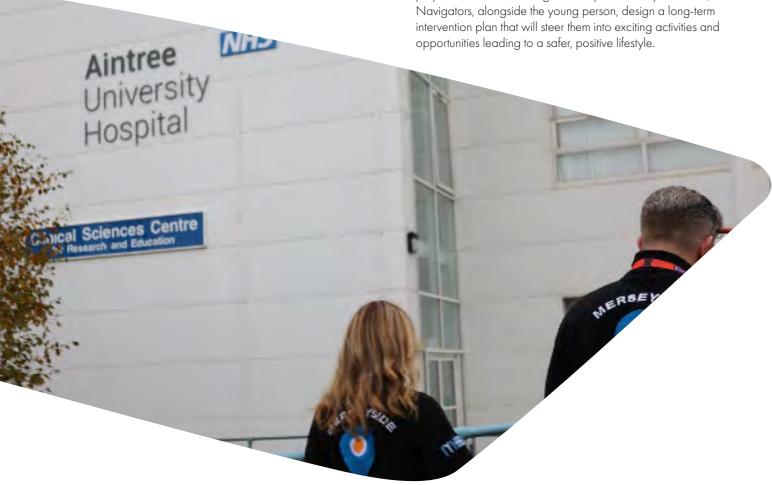
**Knife Savers:** Knife Savers is supported by MVRP and run by our health lead and NHS trauma surgeon. A team of health professionals host demonstrations in our communities on how to treat an open wound that could have occurred from a knife related injury or from a fall. During the demonstration the professionals show how to use a bleed control kit on several dummies all with different open wounds. Those who have attended the event are encouraged to try using the bleed control kit on the dummies alongside the professionals.

**Vibe – St Helens:** Vibe in St Helens has the aim to prevent serious violence in their borough and to extend already existing interventions in place. It is done through: Targeted specialist provision of youth engagement & diversion through the week, weekend and school holidays to divert young people away from serious violence, they offer mentoring support to vulnerable young people and their families

**Positive Futures: Transitions:** This project provides early intervention and support for young people at risk of crime and anti-social behaviour. Within this project we identified the significantly disproportionate number of young people with disrupted education. Given there is a link between disrupted education and crime, we want to look what is the impact of getting young people back in to school, what works and what doesn't.

**LFC Foundation Youth Workers:** MVRP funded two youth work apprentices. Upon their completion they will go on to support young people aged 11-25 years to promote their personal, social and educational development. Further supporting young people to reduce involvement in and impact of youth violence, criminal activities and exploitation.

**GANGS – Knowsley:** Get Away and Get Safe mission is to educate, inspire and empower young people to take control of their future by rejecting the gang lifestyle. It is delivered in five sessions in schools across Knowsley to year six pupils. The five sessions cover different topics to educate the young people on staying safe.





### Family Service Hub – Multi-disciplinary team, Knowsley

Development in Northwood, the most deprived ward in Knowsley. The team will be linked to a number of pre-existing and established programmes of work and bring together a number of work strands to enable a new way of working. Examples of programmes are Cradle to Career, National Family Hubs Programme and ICB Health Programme. A family Case worker and family support worker aid the transition to provide responsive help to families in Northwood.

Are you onside? A pioneering evidence-based Bystander Intervention programme – Football Onside – specifically designed for the community sports sector to Community Sports Organisations (CSOs) across Merseyside over a three-year period. The programme will equip community sports coaches with the confidence and skills to intervene in potentially harmful situations and aims to play a role in helping to eliminate Violence Against Women and Girls (VAWG) within community and grassroots sports settings and beyond.

**Invisible Walls:** The Invisible Walls programme is aimed at maintaining and improving relationships between male prisoners and their children and families, improving the quality of life of all participants, reducing re-offending by the prisoners, and reducing the risk of 'intergenerational' offending. It adopts a 'whole family' approach, providing support to prisoners, partners, and children.

**Op Inclusion:** Operation Inclusion is a Deferred Prosecution Scheme developed in partnership with Merseyside Police and the five Youth Offending Service's across the region. Operation Inclusion can be applied to a one-off offence, or to a child demonstrating a rapid escalation of offending, which could lead to an increase from minor risk/vulnerability to behaviour reflecting a propensity to commit acts of violence or high vulnerability to. Case Managers work with children and their families/carers utilising diversion and support strategies to offer those who engage a chance to change their behaviour and if they complete a three to six-month intervention, exit the service without a statutory criminal record.



Arts Culture Sports (ACS): 18 grassroot projects have been granted funding to deliver arts, culture and sports programmes in all five Local Authorities to host young people in positive activities. Through Arts, Culture and Sport it is an exciting and gripping way to engage our young people away from negative activities such as violent crime and create positive outlooks for their future. Each of the 18 projects received a trauma training session and licences for the Street Doctor App that the MVRP fund separately from Arts Culture Sport. The below are some examples of the projects from each of the Local Authorities this fund has supported (Please note all 18 grassroots projects can be found on our website):

- Shakespeare North (Knowsley): Work with local young people giving them opportunity and a voice in the redesign of the piazza through discussion, workshops and co-creation.
- Toxteth El8te (Liverpool): provide fitness sessions to young
  people after school and on weekends to divert away from a
  negative lifestyle and giving them an alternative to lead a more
  positive and enriched lifestyle. They develop relationships with
  coaches giving them an adult they can trust.
- Community by nature (Sefton): A forest school themed experience that provides education on safety and allows the use of tools in a safe and controlled environment. In this project they host regular family days, a rural residential trip and the opportunity to provide training to young people 14+.
- People Empowered (St Helens): Work with young people delivering targeted diversionary activities and building relationships to enable 1-2-1 mentoring and support. They Deliver Art and Literature diversionary projects in collaboration with Maximum Edge CIC. The project is working with acclaimed Artist, Ian Murphy and Children's Author Catherine Kilgannon, better known as Kitty K; further providing Art and Literature workshops that look at using art and words in lockdown to support young people to develop their aspirations in the Arts and support their mental health and well-being.
- **Utopia Project CIC** (Wirral): Offerings of support and activities to young people who are neurodivergent and are seen at risk to criminality or harm. They host 1-2- therapy and activities that fall into both arts and sport.

### Whole Family Therapy

MVRP have commissioned Crea8ting Communities and YPAS to provide evidence-based therapeutic interventions using a whole family approach. 'Whole family' therapeutic approaches means that family members are clinically triaged for their individual needs, but interventions are co-ordinated/concurrently delivered. The Service is aimed at vulnerable 0 - to 25-year-olds and their families. The criteria for referral and participation have a specific focus on those who are identified as having experienced childhood adversity or trauma.



### Guidance, Research and training

**Trauma Informed Practice Training (TIPT):** Aimed at all public services in Merseyside, seeing over 1,000 individuals signed up to the training and over 500 of these have completed. TIPT focuses on the trauma and development of trauma young people and adults may be suffering with and how it impacts their lives. This training provides further knowledge to our public services and how they can embed trauma knowledge into their services when interacting with the public.

We have a range of guidance available to our partners:

- Additional guidance when considering permanent exclusion: highlights principles, consequences and identifies local level support
- <u>Delivering Violence Reduction:</u> This guidance provides a steer for organisations and schools when presenting and arranging activities in this grea
- What you need to know about child criminal exploitation: provides a short and clear guide for young people which includes signposting
- MVRP Trauma Informed Approaches for vulnerable pupils: shares the learning in supporting young people through school's covid recovery plans, individual pastoral support and modifications to the curriculum and environment



# Appendix 2

Through the commission of Liverpool John Moores:

 child and adolescent to parent-violence and abuse research study: presents a research study examining child and adolescent to parent/caregiver violence and abuse across Merseyside.

Additional guidance when considering permanent exclusion: MVRP created additional guidance to schools for use when making a crucial decision about the direction of a child's life when considering permanent exclusion. By highlighting the principles, consequences and identifying local-level support, MVRP sees this guidance as a valuable tool to assist schools when undertaking the difficult decision of considering exclusion. This guidance has been very well received across the education sector and is supported by the Time Project that is providing trauma-informed mentoring to pupils aged 11-16 who are on the cusp of exclusion from school and vulnerable to criminality across eight schools in the city region.

We have an ever-growing library of resources to support schools, organisations, and young people:

- 'Trauma informed approaches for vulnerable pupils'

   shares the learning in supporting young people through school's covid recovery plans, individual pastoral support and modifications to the curriculum and environment
- 'Delivering violence reduction learning in schools' This guidance provides a steer for organisations and schools when presenting and arranging activities in this area
- 'Guidance when considering permanent exclusion'
   highlights principles, consequences and identifies local level support



- 'What you need to know about Child Criminal Exploitation' provides a short and clear guide for young people which includes signposting
- Facilitator notes to support professionals delivering MVRP films
   'To the Edge' and 'Jay's Story'



### **Urban Areas Statistics**

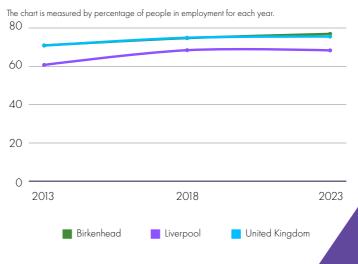
When using the <u>Data tool | Centre for Cities</u> we are able to look at data that is a little more up to date then the Census 2021 data. There is a focus on 63 urban areas in the UK and two of them are in Merseyside: Liverpool and Birkenhead. By looking at the data it can be seen Birkenhead is assessed as being in a better position than Liverpool when a comparison has been completed, identifying the differences in key areas that shape deprivation.

The below will look at a comparison of the changes in Employment and Wages in these two areas.

### **Employment**

To look at the changes in the two areas of Merseyside, the MVRP have chosen to look at the nearest year to the current date, five years prior (pre-pandemic) and ten years prior to see what growth has occurred with the multiple changes and challenges that have been faced.

Liverpool is sat in the bottom 10 for employment as of 2023, at 68.3%, Birkenhead appears to sit in the middle of the table at 76.9%. When we look at the comparison over the key years stated above, we can see the changes the two areas have seen: Liverpool saw a big change from 2013 to 2018 with a 12.8% increase in employment but 2018-2023 saw a decrease of 0.1%. Despite the pandemic, over 5 years, Liverpool's employment had not changed and in fact was rated second to the bottom just before Dundee but after Blackburn out of the 63 areas. It looked different for Birkenhead who seem to have sat in the middle of the table and saw a steady increase through the key years with 5% between 2013-2018 and 2.9% between 2018-2023. We can see Birkenhead seemed to stay consistent with the average increases in the UK but as of 2023 it sat slightly above. Although Liverpool has seen a higher increase in the early date selection then Birkenhead overall, it is falling short of the UK average for each key date selected.



The unemployment rate shows Liverpool in the top 10 out of the 63 areas in 2023 and Birkenhead in the middle of the list. From 2013 to 2018 there was an improvement in unemployment in Liverpool, seeing a decrease from 5% to 3%. However, by 2023 unemployment had increased back to 5% again showing that in 10 years Liverpool's unemployment rates are back to where they were 10 years prior. Birkenhead had seen no increase in unemployment between 2013-2018 sitting at 3.2% of the population but did see an increase of 12.5% in the 10 years (with their being no change in 2018). The unemployment rate changes seen in Birkenhead in 2023 is currently sitting just below the UK average, although they have seen a large increase in the 10 year period. Liverpool sits above the UK average for unemployment, showing a decrease in 2018 but increased again by 2023.

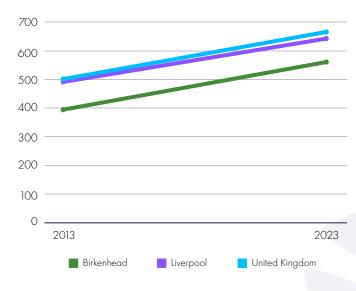
The chart is measured by percentage of people in unemployment for each year.



# Appendix 3

### Wages

For 2023 Birkenhead appeared in the bottom 10 with regards to average weekly wages in the 63 areas. Although this may appear like a negative in 2013, they were at the very bottom earning £394.60 on average a week. By 2023 Birkenhead had moved up 5 spaces showing a total increase of £166.50 in the 10 years. When we look at Liverpool in 2013 the average weekly earnings were £491.40 and had an increase of £151.50. When we look at the average increase for the United Kingdom in 10 years it is £164.80. Although Birkenhead is in the bottom 10 for average weekly wages their increase is slightly higher than the UK average. When looking at the chart below we can see that it is sitting lower than Liverpool and the UK but if we look at the incline it is consistent with the incline of the UK.



When we look at other areas in the UK the majority that sit at the top of the list for the increase are in the South of England. We know there is a higher rate of living in the South so can reflect the earnings brought home but that figure should not impact the difference in the increase to figures for average weekly wages. For example, the top two on the list – London, in 10 years, had seen an increase of £193 and Slough £205.90. The increase in goods, although different, will not see a difference in the rate of increase to justify the difference in the increase in the average weekly wages. This highlights the North/ South divide we see in the country and the need for levelling up.

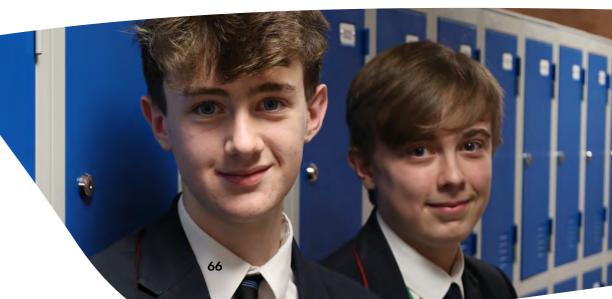
Although slow, we can see Birkenhead is improving at a higher rate compared to Liverpool over the years. The increases Liverpool has seen for wages and Employment have been smaller but still significant to moving in the right direction. Birkenhead, for both employment and wages seems to sit above the average changes that have happened in the UK over the years and under the average for unemployment when measured against the UK overall.

### Progress on drivers of serious violence (from MVRP SNA & WHO)

The SNA states that addressing combinations of risk factors, particularly those with stronger associations, can markedly increase the ability of interventions to reach those who are at most risk and put the proportion of intervention spend going to those genuinely 'at risk' above 50%. It is therefore likely that some interventions will fit into more than one box.

\* Primary prevention: Addressing inequalities & the root causes of conflict in local & community situations; Secondary prevention: Early warning & intervention, de-escalation & conflict handling + effective planning; Tertiary prevention: Response, treatment & rehabilitation + reconstruction & resolution

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
	Societal	
Gender, economic & racial/ethnic inequality	Trauma informed policing training	Primary, secondary & tertiary
ennic inequality	• Are you onside?	Primary & secondary
	Included in the TIP training is information on insidious trauma, impact of poverty, understanding of trauma and gaps in childhood development and how to engage, understand and support. Website information on understanding Trauma and Stress, Compassion and Dependability, Cultural Humility and Responsiveness, Safety and Stability, Collaboration and Empowerment, Resilience and Recovery.	Primary, secondary & tertiary
	Hope Hack Evaluation	Primary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	Arts, Culture, Sports programmes	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary & Tertiary



Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Social & cultural norms	Are you onside?	Primary & secondary
supportive of violence	Understanding DV and Coercive behaviour and impact on long-term development	Secondary
	Hope Hack Evaluation	• Primary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	• LIMU – CAPVA	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group	Secondary
	member  • Arts, Culture, Sports programmes	Primary, secondary
Harmful norms around	Are you onside?	Primary & secondary
masculinity & femininity	The 12th International Club Health Conference	Primary, secondary & tertiary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	• LIMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Arts, Culture, Sports programmes	Primary, secondary

		Ctata hashar animanna arana danna antanii ana
Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Weak health, economic, gender, educational, social, or law & enforcement	Challenging practice in education and public services to be more relationship based and include the 6 TI principles.	Secondary
policies	Early years initiatives to address inequalities	Primary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	• LJMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Support creation of Safer School Officer post for MERPOL	Primary
	Arts, Culture, Sports programmes	Primary, secondary
	Merseyside OOCD Leads meetings/Greater Merseyside YJ Managers Meetings	Primary
	Community	
Access to & misuse of alcohol & firearms	Suggestion: separate issues: (1) Access and misuse of alcohol and other drugs (2) Access to firearms	Primary, secondary
	The 12th International Club Health Conference	Primary, secondary& tertiary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	Arts, Culture, Sports programmes	Secondary, tertiary
	• "She Inspires"	Primary, secondary & tertiary
	Operation Inclusion/No Comment Pathway	Tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Concentrated poverty	Hope Hack Evaluation	Primary
	All early years services looked at through an anti-poverty lens	All primary
	Beacon programme	Primary, secondary
	Fire Champions programme	• Primary
	Arts, Culture, Sports programmes	Secondary, tertiary
	• "She Inspires"	Primary, secondary & tertiary
	Hospital Navigators	Tertiary
	NPPS co-location	Tertiary
	We are Causeway	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary
	Universal Credit Advanced Claims for Prison Leavers Test	Tertiary
	DWP National Prison Leaver Steering Group     & National Prison Leaver and Ex-offender     into Work projects	Tertiary
Local gangs & drug supplies	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Arts, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary & tertiary
	Operation Inclusion	Tertiary
	GetAwayNGetSafe (GANGS)	Primary, secondary
Residential instability	Navigators	Primary & Secondary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Low collective efficacy	Are you onside?	Primary, secondary
(willingness to intervene)	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	• LIMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
Diminished economic opportunities	Free early years provision to remove financial barriers	Primary
	NPPS co-location	Tertiary
	We are Causeway	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary
	Universal Credit Advanced Claims for Prison Leavers Test	Tertiary
	DWP National Prison Leaver Steering Group & National Prison Leaver and Ex-offender into Work projects	Tertiary
Social disorganisation / weak institutional support / weak community sanctions	• LJMU - CAPVA	Secondary, tertiary
Social isolation	Operation Inclusion/No Comment Pathway	• Primary
	CFO Activity Hub	Tertiary
Living in an urban area	The 12th International Club Health Conference	Primary, secondary & tertiary
	Hope Hack Evaluation	• Primary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Arts, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary & tertiary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
	Close relationships	
Gender, economic & racial/	Merseyside Trauma and ACEs Network	Primary, secondary & tertiary
ethnic inequality	Trauma informed policing training	Primary, secondary & tertiary
	NOW Festival	Primary, secondary & tertiary
	Sport, art and culture trauma training	Primary, secondary & tertiary
	Focus on attachment and bonding in early years to help build resilience	Prevention
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary & tertiary
	• LIMU – CAPVA	Primary, secondary & tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary & tertiary
	Beacon programme	Primary, secondary & tertiary
	Fire Champions programme	Primary, secondary & tertiary
	Arts, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Arts, Culture, Sports Trauma Training	Primary, secondary & tertiary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary
	Navigators	Secondary, tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Low household income or unemployment in family	Covered within the TI training under the topic of poverty including food poverty	Primary
	Anti-Poverty lens always considered to remove financial barriers to accessing early years support and services	Primary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Arts, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	NPPS co-location	Tertiary
	We are Causeway	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary
	Universal Credit Advanced Claims for Prison Leavers Test	Tertiary
	DWP National Prison Leaver Steering Group & National Prison Leaver and Ex-offender into Work projects	Tertiary
Parents not involved in	Arts, Culture, sports trauma training	Primary, secondary & tertiary
activities	Ariel Trust – Skills for healthy relationships	Primary, secondary
	• LIMU – CAPVA	Secondary, tertiary
	Arts, Culture, Sports Trauma Training	Primary, secondary & tertiary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Extreme or unreliable	Covered within the TI training	Primary, secondary & tertiary
disciplining or lack of supervision by parents	HMP Altcourse works with absent fathers on the role that they still play in parenting	Tertiary
	• LIMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary
Peers involved in crime or	Hope Hack Evaluation	Primary
gang membership	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary
	GetAwayNGetSafe (GANGS)	Primary, secondary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Gender role / high	Are you onside?	Primary, secondary
relationship conflict	Parental Conflict training to prisoners at HMP     Altcourse	Tertiary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	• LJMU – CAPVA	Secondary, tertiary
	Arts, Culture, Sports programmes	Primary, secondary
	• "She Inspires"	Primary, secondary
Poor parent-child relationships /	Another Sign: Neurodiversity and The Criminal Justice System report	Primary
communication / family functioning	Merseyside Trauma and ACEs Network	Primary
	Arts, Culture & Sports trauma training	Primary, secondary & tertiary
	Covered within the TI training	Secondary
	All early years initiatives support the bonding and attachment agenda to promote those positive relationships.	Primary, secondary
	• LIMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	Arts, Culture, Sports Trauma Training	Primary, secondary & tertiary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Family environment	Merseyside Trauma and ACEs Network	Primary, secondary & tertiary
characterised by violence, conflict & instability	Trauma informed training	Primary, secondary & tertiary
	NOW Festival	Primary, secondary
	Hope Hack Evaluation	• Primary
	HMP Altcourse. The Nurture Programme looks at self-reflection and changing behaviours and attitudes to promote positive relationships.	Tertiary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	• LIMU – CAPVA	Secondary, tertiary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Building Attachment and Bond Service (BABS)	Primary, secondary
	The Family Hub Knowsley	Primary, secondary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Economic, childrearing &	Covered within the TI training	Primary
other stress	Parental Conflict training to prisoners at HMP     Altcourse	Tertiary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon programme	Primary, secondary
	Fire Champions programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	NPPS co-location	Tertiary
	We are Causeway	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary
	Universal Credit Advanced Claims for Prison Leavers Test	Tertiary
	DWP National Prison Leaver Steering Group & National Prison Leaver and Ex-offender into Work projects	Tertiary
	Building Attachment and Bonds Service (BABS)	Primary, secondary
	The Family Hubs Knowsley	Primary, secondary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*	
	Individual		
Psychological/mental health problems (ADHD,	Another Sign: Neurodiversity and The Criminal Justice System report	Primary secondary & tertiary	
behavioural disorders, low self-esteem, poor	Covered within the TI training	Primary secondary & tertiary	
behavioural control / impulsiveness)	ADHD Umbrella Project supports families to develop strategies around neuro diverse conditions in young children	• Primary	
	Merseyside Youth Association – Mentors in Violence Prevention	Secondary	
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary	
	Aftathought – Peer on peer misogyny awareness	Primary, secondary	
	• LIMU – CAPVA	Secondary, tertiary	
	SAFE taskforce, Liverpool - Steering Group member	Secondary	
	Beacon Programme	Primary, secondary	
	Fire Champions Programme	Primary, secondary	
	Art, Culture, Sports programmes	Primary secondary & tertiary	
	• "She Inspires"	Primary, secondary	
	Operation Inclusion/No Comment Pathway	Secondary, tertiary	
Early involvement in alcohol	Merseyside Trauma and ACEs Network	Primary	
& drug misuse	Gambling seminar	Secondary, tertiary	
	Covered within the TI training	Secondary, tertiary	
	Merseyside Youth Association – Mentors in Violence Prevention	Secondary	
	SAFE taskforce, Liverpool - Steering Group member	Secondary	
	Art, Culture, Sports programmes	Primary secondary & tertiary	
	• "She Inspires"	Primary, secondary	
	Operation Inclusion/No Comment Pathway	Secondary, tertiary	

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Low educational achievement	Merseyside Trauma and ACEs Network	Primary
	Covered within the TI training	Primary
	All Early Years interventions support educational achievement. The focus on those in disadvantaged communities in particular looks to establish those early foundations on which future learning and attainment is built.	Primary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Secondary
	School Improvement Liverpool - Exploring misogyny, sexual harassment and sexual abuse through PSHE	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary secondary & tertiary
	• "She Inspires"	Primary, secondary
Truancy & exclusions	Merseyside Trauma and ACEs Network	Primary, secondary
	Art, Culture, Sports trauma training	Primary, secondary
	Covered within the TI training and in the school exclusion information for schools	Secondary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary secondary & tertiary
	SAFE taskforce, Liverpool - Steering Group member	Primary secondary & tertiary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Unemployment	Art, Culture, Sports programmes	Primary, secondary
	Operation Inclusion/ No Comment Pathway	Secondary, tertiary
	NPPS co-location	Tertiary
	We are Causeway	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary
	Universal Credit Advanced Claims for Prison Leavers Test	Tertiary
	DWP National Prison Leaver Steering Group & National Prison Leaver and Ex-offender into Work projects	Tertiary
Involvement in crime & ASB	Another Sign: Neurodiversity and The Criminal Justice System report	Primary
	Holiday Activity Fund helps to provide activities during the school holidays for children and young people to become engaged.	Primary, secondary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Primary, secondary
	SAFE taskforce, Liverpool - Steering Group member	Secondary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary
	Navigators	Secondary, tertiary
	NPPS Co-location	Tertiary
	• IOM	Tertiary
	CFO Activity Hub	Tertiary

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Attitudes towards offending	Another Sign: Neurodiversity and The Criminal Justice System report	Primary, secondary
	Ariel Trust – Skills for healthy relationships	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Secondary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary
	Navigators	Secondary, tertiary
	We are Causeway	Tertiary
History of engaging in aggressive behaviour	Arts, Culture, Sport trauma training	Primary, secondary & tertiary
	• LJMU – CAPVA	Secondary, tertiary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

# Appendix 4

Determinant	Our actions / investment	State whether primary, secondary, or tertiary prevention*
Poor behavioural control/impulsiveness (violent & addictive behaviours)	Gambling seminar	Primary secondary & tertiary
	Covered within the TI training	Primary, secondary
	Merseyside Youth Association – Mentors in Violence Prevention	Primary, secondary
	Aftathought – Peer on peer misogyny awareness	Secondary, tertiary
	• LIMU – CAPVA	Secondary
	SAFE taskforce, Liverpool - Steering Group member	Primary, secondary
	Beacon Programme	Primary, secondary
	Fire Champions Programme	Primary, secondary
	Art, Culture, Sports programmes	Primary, secondary & tertiary
	• "She Inspires"	Primary, secondary
	Operation Inclusion/No Comment Pathway	Secondary, tertiary

### **Useful links**

Merseyside Violence Reduction Partnership Website - Merseyside Violence Reduction Partnership (merseysidevrp.com)

Education resources from MVRP - Education Resources - Merseyside Violence Reduction Partnership (merseysidevrp.com)

Evaluation reports for MVRP programmes & Whole Systems Evaluation -

Evaluation Reports - Merseyside Violence Reduction Partnership (merseysidevrp.com)

Trauma Informed Practice Resources -

<u>Trauma Informed Practice - Merseyside Violence Reduction Partnership (merseysidevrp.com)</u>

National VRU evaluation (year ending March 2023) - Violence Reduction Units 2022 to 2023 - GOV.UK (www.gov.uk)

# Appendix 5

### Glossary

O1035G1 y	
Term	Definition
'Blue Light' data	A popular term for those emergency services (police, fire services, emergency responders) in the UK and elsewhere, which, in case of an emergency, are allowed to turn on flashing blue lights indicating traffic priority over other motorists.
County Lines	County lines is the name given to drug dealing where organised criminal groups (OCGs) use phone lines to move and supply drugs, usually from cities into smaller towns and rural areas. They exploit vulnerable people, including children and those with mental health or addiction issues, by recruiting them to distribute the drugs, often referred to as 'drug running'. (MERPOL)
Domestic Abuse	DA Act 2021  Definition of "domestic abuse"  (1) This section defines "domestic abuse" for the purposes of this Act.  (2) Behaviour of a person ("A") towards another person ("B") is "domestic abuse" if—  (a) A and B are each aged 16 or over and are personally connected to each other, and  (b) the behaviour is abusive.  (3) Behaviour is "abusive" if it consists of any of the following—  (a) physical or sexual abuse;  (b) violent or threatening behaviour;  (c) controlling or coercive behaviour;  (d) economic abuse (see subsection (4));  (e) psychological, emotional, or other abuse  and it does not matter whether the behaviour consists of a single incident or a course of conduct.

Term	Definition	
Early Intervention	Early intervention means identifying and providing effective early support to children and young people who are at risk of poor outcomes. Effective early intervention works to prevent problems occurring, or to tackle them head-on when they do, before problems get worse. It also helps to foster a whole set of personal strengths and skills that prepare a child for adult life. (Early Intervention Foundation, EIF)	
Evidenced Based Approach	Taken from the Youth Endowment Fund (YEF) 'Right now, we just don't know enough about the best ways to protect children from becoming involved in violence in the long term. Evidence in the UK is limited and hard to find. On top of this, far too little is known and understood about the difficulties faced by many young people or how to build on their strengths and talents. This needs to change. That's why we're focused on building knowledge of what works and getting this insight into the hands of decision makers.'	
Knife crime	Knife crime is any crime that involves a sharp or bladed instrument and can include anything from a kitchen knife or piece of glass to a potato peeler or knitting needle. Knife crime can range from a threat of violence, where someone is carrying a sharp or bladed instrument to someone who receives an injury as a result of a sharp or bladed instrument. (MERPOL)	
Life-course approach	A person's physical and mental health and wellbeing are influenced throughout life by the wider determinants of health. These are a diverse range of social, economic, and environmental factors, alongside behavioural risk factors which often cluster in the population, reflecting real lives. All these factors can be categorised as protective factors or risk factors. Addressing the wider determinants of health will help improve overall health by helping to improve the conditions into which people are born, live and work. (GOV)	
MVRP Logic Model	The logic model details: the inputs and resources required to deliver the strategy; the range of partners who are required to work together to embed interventions and create positive outcomes; how the values of the VRP are embedded across the whole system, ensuring the concepts of community and trauma-informed thinking are at the heart of the VRP; and how the strategy is ensuring the coordination and maximisation of resources. The logic model also provides a framework for monitoring and evaluation. (EVAL REPORT)	
	A 'logic model' represents the theory of how an intervention produces its outcomes. In a simplified way, it represents a hypothesis or 'theory of change' about how an intervention works. Process evaluations test and refine the hypothesis or 'theory of change' of the intervention represented in the logic model.	
	They summarise the VRP's:	
	• inputs/resources	
	implementation/outputs	
	<ul><li>outcomes/impact</li><li>context</li></ul>	
	and the relationships between them. (MVRP SITE)	
Open Source	Research that uses any publicly available information, including the internet, social media, books, periodicals, databases etc. (GOOGLE)	
Prevention: Primary	Primary services provided for a whole population (in violence reduction these refer to preventing violence from happening in the first place) (HOME OFFICE)	
Prevention: Secondary	Secondary services for those 'at risk' (in violence reduction the focus is on preventing violence from escalating to serious criminality) (HOME OFFICE)	
Prevention: Tertiary	Tertiary services for those who have experienced or caused injury (in violence reduction these relate to preventing violent offenders from reoffending). (HOME OFFICE)	

Term	Definition
	The principles of public health provide a useful framework for both continuing to investigate and understand the causes and consequences of violence and for preventing violence from occurring through primary prevention programmes, policy interventions and advocacy.
	The activities of the Violence Prevention Alliance (VPA) are guided by the scientifically tested and proven principles and recommendations described in the World report on violence and health. This public health approach to violence prevention seeks to improve the health and safety of all individuals by addressing underlying risk factors that increase the likelihood that an individual will become a victim or a perpetrator of violence.
	The approach consists of four steps:
Public Health Approach	To define the problem through the systematic collection of information about the magnitude, scope, characteristics, and consequences of violence.
	2. To establish why violence occurs using research to determine the causes and correlates of violence, the factors that increase or decrease the risk for violence, and the factors that could be modified through interventions.
	3. To find out what works to prevent violence by designing, implementing, and evaluating interventions.
	4. To implement effective and promising interventions in a wide range of settings. The effects of these interventions on risk factors and the target outcome should be monitored, and their impact and cost-effectiveness should be evaluated.
	By definition, public health aims to provide the maximum benefit for the largest number of people. Programmes for the primary prevention of violence based on the public health approach are designed to expose a broad segment of a population to prevention measures and to reduce and prevent violence at a population-level. (WHO)
Theory of Change	The Theory of Change provides the narrative to explain the processes and mechanisms of change that will occur as a result of the Merseyside VRP strategy. (EVAL REPORT)
	According to the concept of a trauma-informed approach, "A program, organisation, or system that is trauma-informed:
	Realises the widespread impact of trauma and understands potential paths for recovery;
	2. Recognises the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
Trauma-Informed Approach	<ul><li>3. Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and</li><li>4. Seeks to actively resist re-traumatisation.»</li></ul>
	A trauma-informed approach can be implemented in any type of service setting or organisation and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing.
	(https://www.mentalhealth.org/get-help/trauma)

# Appendix 6

MVRP Strategy 2022-2025

# Our Vision

We believe that all communities across Merseyside have the right to be free from violence in order to provide the best life chances for all.

# Objectives & Priorities

- Ensure a Public Health Approach
- Ensure a Trauma Informed
  Approach
- Be transparent
- Ensure that community is at the heart of everything we do
- Taking an evidence-based approach

Facilitating multi-agency working



# Merseyside Violence Reduction Partnership Logic Model (2022 Onwards)

Vision: We believe that all communities have the right to be free from violence in order to provide the best life chances forall across Merseyside

#### **OUR OBJECTIVES**

- 1) Ensure a public health approach drives & underpins all that MVRP do;
- 2) Ensure that the community is at the heart of everything that we do;
- 3) Ensure a trauma informed approach underpins all services;
- 4) Take an evidence-based approach to identifying root causes of serious violence in order to prevent & tackle serious violence;

- 5) Facilitate multi-agency working at both an operational & strategic level;
- 6) Implement transparent & coordinated allocation of resources to tackle county wide & local causes of serious violence;
- 7) Implement & support sustainable practices;
- 8) Ensuring poverty, inequality & deprivation will be a continuous thread throughout the work of the MVRP

#### **OUR PRIORITIES**

Early intervention & a lifecourse approach focused on: Early Years, Education, Health, Whole Family Approach & Preventing Offending

#### **INPUTS**

Funding: Home Office, MVRP partners & other sources

**Local partner commitment, expertise, data & resources:** police, health, public health, local authorities, education, third sector, Community Safety Partnerships, probation, fire & rescue service, youth offending service, Department of Work & Pensions, CYP & community members, & intervention delivery partners

**Wider partner support:** Home Office, VRUs, Youth Endowment Fund; College of Policing; WHO Collaborating Centre for Violence Prevention (UMU): national evaluation team

#### **ACTIVITIES**

### Strategic leadership, governance, accountability & delivery:

Core MVRP multi-agency co-located delivery team; MVRP multi-agency steering group (& priority area sub-groups); Oversight from Merseyside Police & Crime Commissioner via Merseyside Strategic Policing & Partnership Board

Development of partnerships committed to implementing a whole system public health approach to violence prevention

**Development of evidence based practice** supported by the MVRP Evidence Hub (research/data/intelligence, monitoringevaluation; online Data hub via TIIG)

Creation of policy/practice guidance to support system change & intervention delivery

**Development & implementation of community led approaches** (supported by community engagement, consultation & research)

**Capacity building to prevent violence** including developing understanding of & expertise on a public health approach to violence prevention, neurodiversity, & adverse childhood experiences (ACEs) & implementing trauma-informed practices (TIPs)

Funding of primary, secondary and/tertiary interventions to prevent violence focused on the MVRP five priority areas – implemented at regionally & place-based

**Targeted & tailored communications** across the community & partners

**On-going review/enhancement of the MVRP** (e.g. MVRP strategy & implementation & monitoring/evaluation plans; intervention delivery; expertise & data)

### **OUTPUTS**

### Number & breadth of partners engaged in MAVRP

MVRP vision, priorities & public health principals incorporated into organisational strategies & practice

Coordinated multi-agency approaches to violence prevention following a public health approach supported

Enhanced data sharing, access & use to inform intervention development, implementation & monitoring/evaluation

Internal & independent (e.g. UMU) research, & programme monitoring & evaluation reports & case studies; routinely collected monitoring data gathered by delivery partners

MVRP understand CYP & community views & needs; CYP & community influence MVRP strategy & activity

Number & type of CYP & other community members engaged in MVRP

Number of professionals trained

Number, type & reach of interventions funded

Number & type of CYP & other beneficiaries accessing interventions

Number, type & reach of MVRP communications

Updated MVRP documentation & processes; breadth if expertise

### **OUTCOMES (SHORT/MEDIUM)**

Coordinated whole system public health approach to violence prevention implemented/strengthened

Interventions informed by evidence

Voice of CYP & communities embedded in MVRP work

CYP & community members have positive views of MVRP and professionals inc. uniform services

Increased expertise on a public health approach to violence prevention, neurodiversity, preventing ACEs & implementing TIPs

Implementation of TIPs across the system

CYP & other beneficiaries have greater access to evidenced based interventions/support/improved referral pathways

Greater access to support for at-risk/most vulnerable CYP & wider beneficiaries

Implementation of whole family support

Reduction in risk factors for violence, & increase in protective factors

CYP diverted from violence to positive opportunities

### **OUTCOMES (LONG)**

### Whole system public health approach embedded & sustained

Reduction in serious violence & anti-social behaviour: hospital admissions; police recorded crime; accident & emergency attendances

Increased positive mental health & wellbeing, & quality of life

Improved community connectedness & feeling of safety

Increased aspirations & educational outcomes in CYP

Reduction in school exclusions

Improved attitudes & language across communities/professionals

Reduction in vulnerability of CYP affected by or at-risk of serious violence

Reduction in ACEs / experience of trauma

MVRP LM V2, Updated August 2022 -Produced by MVRP & lead evaluator Liverpool John Moores University