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Introduction

Welcome to the fifth edition of the Consultation Board literature review, compiled by Senior Research Officer Natasha Fletcher. The theme of this literature review is serious violence.

We start with a look at violence with females and their offending. **Violent Girls in the United States: Urban, Suburban, and Rural Differences** explores whether there are differences in the offending by female in rural and urban environments. It does not account for where the crime took place, but whether the offender resides.

Predicting crime it not for the faint hearted. Through replicating an already used method, **Predicting Domestic Homicides and Serious Violence in Dorset: A Replication of Thornton's Thames Valley Analysis** takes a look at what facts known to police, if any, could have predicted the 107 domestic and family murders and nearmurders in Dorset (UK) police area over a recent 7-year period, using methods identical to Thornton's.

There is much investment into youth diversion, this paper looks at **The impact of a youth violence intervention programme on re-attendance rates and young people's wellbeing**, recognising that tackling gang violence is a significant challenge. Hospital-based youth violence intervention programmes (YVIP) are one alternative that aim to reduce risk and increase protective factors for gang-related youth violence.

Testing the validity of criminal risk assessment tools in sexually abusive youth, as although accurate risk appraisals are mandatory to provide effective treatment to juveniles who have sexually offended (JSOs), the current knowledge on the validity of risk assessment instruments for JSOs is inconclusive.

Our Emergency Departments can often be the first service victims of a crime come into contact with. **Injury resulting from targeted violence: An emergency department perspective** takes a look at the frequency, levels of physical harm and circumstances of targeted violence in those seeking treatment at EDs in three UK cities.

Peers influence offending, both directly through co-offending and indirectly through information and advice. Despite such findings, there has been only limited research into the ways in which the presence of other offenders (i.e., accomplices) may impact criminal behaviour, especially violence. **The Consequences of Crime in Company: Co-Offending, Victim—Offender Relationship, and Quality of Violence** explores this.

The night time economy can be an area where violence is often influence through alcohol consumption. **The impact of breathalysers on violence and attitudes in the night-time economy** looks at a month-long pilot breathalyser scheme for pubs and clubs implemented in the UK.

Finally, we look at the **Risk of Being Subjected to Crime, Including Violent Crime, After Onset of Mental Illness.** People with mental illness are more likely to have contact with the criminal justice system, but research to date has focused on risk of offense perpetration, while less is known about risk of being subjected to crime and violence.

If you find articles to include within the review or for discussion, please email them to Natasha (natasha.fletcher@hampshire.pnn.police.uk).

Anja Kimberley,

Consultation Board Chair.



Violent Girls in the United States: Urban, Suburban, and Rural Differences July 2018

Abstract: Though there is a rapidly growing social scientific literature on geographic variations in crime, it is still unclear whether rural girls are at greater or lesser risk of committing violent offenses than are their urban and suburban counterparts. This article uses 1992-2015 National Crime Victimization Survey (NCVS) data to help fill this research gap. The results show that there are significant differences in the rates of offending across geographic place. When considering offending rates for an aggregation of rape, sexual violence, robbery, aggravated assault and sexual assault, results indicate the highest rates of juvenile female offending in urban areas. The lowest juvenile female offending rates are found in rural areas. When excluding simple assault from the analysis (i.e., serious violence), juvenile female offending rates are highest in urban areas, but are similar in suburban and rural areas. While informative, this research highlights the need for greater research on this topic.

Report: https://kb.osu.edu/handle/1811/86154

Accessible: Yes

Predicting Domestic Homicides and Serious Violence in Dorset: A Replication of Thornton's Thames Valley Analysis July 2017

Research Question What facts known to police, if any, could have predicted the 107 domestic and family murders and near-murders in Dorset (UK) police area over a recent 7-year period, using methods identical to Thornton's (2011, 2017). The data was gathered from all 107 cases of domestic murders, manslaughter, attempted murder or grievous bodily harm with intent in Dorset between April 2009 and March 2015, plus a matched control sample of 214 arrestees for less-deadly violent offences.

Methods Replicating Thornton's Thames Valley analysis, two methods were used: (1) calculating errors in predictions from previous risk assessments using the UK's DASH (Domestic Abuse, Stalking and Harassment) risk assessment protocol and (2) making a case-control comparison of Thornton's risk factors between the deadly domestic violence cases in Dorset to a Dorset sample of victims and offenders in all violence cases during the same time period.

Findings False negative risk assessments were found in 67% of the deadly violence cases with prior police contact (45 of 67) not classified by DASH as 'high risk.' The false positives in the same time period totalled 12,279 cases of no serious harm among 12,301 cases receiving high risk assessments, for a 99% false positive rate. Possible alternative predictors were found in differences between deadly offenders and controls, both male and female, although it is not known whether these variables were added to the records before or after the deadly violence event. Male offenders in deadly violence cases were 120% more likely to have their police records note a self-harm warning, 20% more likely to have a suicide warning, yet only half as likely to have a mental health warning as control males. Female offenders in deadly violence cases were 355% more likely to have a weapons warning on file, 244% more likely to have a mental health warning and 146% more likely to have a drugs warning than female control case offenders.

Conclusions The current risk assessment tool (DASH) failed to predict the majority of deadly domestic violence cases over 6 years in Dorset. Other factors could do better, but more research is required before highly accurate forecasting tools can be applied to help save the lives of more domestic abuse victims.



Report: https://www.repository.cam.ac.uk/handle/1810/274617

Accessible: Yes

3. The impact of a youth violence intervention programme on re-attendance rates and young people's wellbeing

March 2018

Introduction Tackling gang violence is a significant challenge. With knife crime and serious youth violence on the rise, the Government has looked towards alternatives to punitive measures. Hospital-based youth violence intervention programmes (YVIP) are one alternative that aim to reduce risk and increase protective factors for gang-related youth violence. Users views of YVIPs have yet to be evaluated in the UK.

Aims Two main aims:

- to compared re-attendance rates to A&E of those who engaged with the YVIP and those that refused engagement
- to evaluate the YVIP by examining exit surveys of the young people who had completed the programme

Methods The re-attendance rates were analysed for those attending for gang violence who either fully engaged, partially engaged or refused to engage with the programme. The exit survey responses of those patients who had fully engaged were evaluated. The exit survey contained statements that the completed service users responded to based on how strongly they agreed/disagreed with statements. This allowed self-assessment about whether the YVIP had any impact on their lifestyle.

Results Since its inception in October 2014, the YVIP had received 465 referrals. Only 18% (85 patients) engaged with the service. At the time of study only 15 services users fully engaged and completed the programme. Those patients who had fully engaged had lower re-attendance rates (6.7%) than those patients who engaged and dropped out (19%) or those who had refused to engage (26.7%).

Every completed service user felt that the YVIP had provided helpful support. 33.3% (5/15) strongly agreed that they were much happier since joining the programme. 33.3% (5/15) agreed that they were happier and 33.3% (5/15) were neutral. 73.3% (5/15) felt they were less likely to re-attend A and E due to youth violence, whilst 26.7% (4/15) were neutral. 100% (15/15) strongly agreed that it is a good idea to have a youth support service in the hospital.

Conclusions Although it is hard to engage young people who have been involved in gang violence, there is evidence of the usefulness of YVIPs on both re-attendance rates and the well being of those who engage.

Report: https://adc.bmj.com/content/103/Suppl_1/A136.2

Accessible: Yes



4. Testing the validity of criminal risk assessment tools in sexually abusive youth

May 2018

Abstract:

Although accurate risk appraisals are mandatory to provide effective treatment to juveniles who have sexually offended (JSOs), the current knowledge on the validity of risk assessment instruments for JSOs is inconclusive. We compared the predictive validities of the Juvenile Sex Offender Assessment Protocol II (J-SOAP II), the Estimate of Risk of Adolescent Sexual Offence Recidivism (ERASOR), and the Violence Risk Appraisal Guide-Revised (VRAG-R) scores concerning sexual, nonsexual-violent, and general criminal recidivism (based on both official and nonregistered re-offences) in a consecutive sample of 597 male JSOs (Mage = 14.47 years, SDage = 1.57 years) while accounting for different recidivism periods, offense severities, and cumulative burden of adverse childhood experiences (ACEs). Receiver Operator Characteristic (ROC) curves and Cox regression analyses indicated that the tools allowed valid predictions of recidivism according to their intended purposes: The ERASOR was best suited to predict sexual recidivism within 0.5 and 3 years, the J-SOAP II was valid for predictions of sexual and nonsexual-violent recidivism within these recidivism periods, and the VRAG-R showed potential strengths in predicting nonsexual-violent recidivism, especially when committed above age 18. Elevated offense severity and burden of ACEs impeded predictive accuracies of the J-SOAP II and the VRAG-R, particularly in case of sexual recidivism. Our findings emphasize that risk assessment for JSOs must not rely solely on scores derived from risk assessment instruments, but a comprehensive consideration of a JSOs offense severity and psychosocial adversities is additionally necessary to approach accurate risk appraisals.

Report: https://europepmc.org/abstract/med/29792506

Accessible: No

5. Injury resulting from targeted violence: An emergency department perspective

December 2017

Background: Hate crimes – those perpetrated because of perceived difference, including disability, race, religion, sexual orientation or transgender status – have not been studied at the point of the victim's hospital emergency department (ED) use.

Aim: To investigate the frequency, levels of physical harm and circumstances of targeted violence in those seeking treatment at EDs in three UK cities.

Method: In a multimethods study, face-to-face semi-structured interviews were conducted with 124 adult ED attenders with violent injuries. Victim and perpetrator socio-demographics were recorded. Patient narratives about perceived motives and circumstances were transcribed, uploaded onto NVivo for thematic analysis.

Results: Nearly a fifth (23, 18.5%) of the injured patients considered themselves to have been attacked by others motivated by hostility or prejudice to their 'difference' (targeted violence). Thematic analyses suggested these prejudices were to appearance (7 cases), racial tension (5 cases), territorial association (3 cases) and race, religious or sexual orientation (8 cases). According to victims, alcohol intoxication was particularly relevant in targeted violence (estimated reported frequency 90% and 56% for targeted and non-targeted violence, respectively).



Conclusions: Our findings support a broader concept of hate victimisation and suggest that emergency room violence surveys could act as a community tension sensor and early warning system in this regard. Tackling alcohol misuse seems as important in this as in other forms of violence perpetration

Report: https://onlinelibrary.wiley.com/doi/abs/10.1002/cbm.2066

Accessible: No

6. The Consequences of Crime in Company: Co-Offending, Victim-Offender Relationship, and Quality of Violence

July 2018

Abstract

Peers influence offending, both directly through co-offending and indirectly through information and advice. Despite such findings, there has been only limited research into the ways in which the presence of other offenders (i.e., accomplices) may impact criminal behaviour, especially violence. Drawing on research on small group behaviour, this study explores the relationship between the presence of co-offenders and offense severity, focusing on weapon use and victim injury. More specifically, this research hypothesizes that, owing to a diffusion of responsibility and other group processes, crimes committed by groups are more severe than crimes committed by a single offender and that crimes committed by large co-offending groups are particularly severe. This research also proposes that anonymity is an important mechanism behind this relationship and tests the hypothesis that the relationship between groups and offense severity varies according to the victim—offender relationship. Using National Incident-Based Reporting System (NIBRS) data, the results indicate that (a) offenses committed by groups of offenders are more likely than offenses committed by a single offender to be severe (i.e., involve a weapon, result in injury); (b) as the size of the co-offending group increases, the likelihood of offense severity also increases; and (c) whether the victim is known to the offender is an important predictor of the relationship between co-offending and offense severity.

Report: http://journals.sagepub.com/doi/abs/10.1177/0886260518786497

Accessible: No

7. The impact of breathalysers on violence and attitudes in the night-time economy Jan 2018

Abstract

The current study evaluates the efficacy and acceptability of a month-long pilot breathalyser scheme for pubs and clubs implemented in the UK. During the initiative 818 people were breathalysed. The number of violent crimes (excluding domestic abuse) decreased by almost 40 percent compared with the previous year, while violent incidents increased in a comparison location. The Assault Related Injuries Database (ARID) of admissions to Accident and Emergency showed there were fewer alcohol-related injuries during the initiative. Over 75 percent of respondents to an online survey (n = 310) supported the breathalyser scheme. Results suggest the breathalysers may promote moderate drinking and result in less violence. However, the number of crimes is small and fluctuates over time, so more research is needed to demonstrate whether this initiative is effective.



Accessibility: No

8. Risk of Being Subjected to Crime, Including Violent Crime, After Onset of Mental Illness July 2018

Importance: People with mental illness are more likely to have contact with the criminal justice system, but research to date has focused on risk of offense perpetration, while less is known about risk of being subjected to crime and violence.

Objectives: To establish the incidence of being subjected to all types of criminal offenses, and by violent crimes separately, after onset of mental illness across the full diagnostic spectrum compared with those in the population without mental illness.

Design, Setting, and Participants: This investigation was a longitudinal national cohort study using register data in Denmark. Participants were a cohort of more than 2 million persons born between 1965 and 1998 and followed up from 2001 or from their 15th birthday until December 31, 2013. Analysis was undertaken from November 2016 until February 2018.

Exposures: Cohort members were followed up for onset of mental illness, recorded as first contact with outpatient or inpatient mental health services. Diagnoses across the full spectrum of psychiatric diagnoses were considered separately for men and women.

Main Outcomes and Measures: Incidence rate ratios (IRRs) were estimated for first subjection to crime event (any crime and violent crime) reported to police after onset of mental illness. The IRRs were adjusted for cohort member's own criminal offending, in addition to several sociodemographic factors.

Results: In a total cohort of 2 058 063 (48.7% male; 51.3% female), the adjusted IRRs for being subjected to crime associated with any mental disorder were 1.49 (95% CI, 1.46-1.51) for men and 1.64 (95% CI, 1.61-1.66) for women. The IRRs were higher for being subjected to violent crime at 1.76 (95% CI, 1.72-1.80) for men and 2.72 (95% CI, 2.65-2.79) for women. The strongest associations were for persons diagnosed as having substance use disorders and personality disorders, but significant risk elevations were found across almost all diagnostic groups examined.

Conclusions and Relevance: Onset of mental illness is associated with increased risk of exposure to crime, and violent crime in particular. Elevated risk is not confined to specific diagnostic groups. Women with mental illness are especially vulnerable to being subjected to crime. Individual's own offending accounts for some but not all of the increased vulnerability to being subjected to crime.

Report: https://jamanetwork.com/journals/jamapsychiatry/article-abstract/2680807

Accessible: No

