



# **STRATEGIC ASSESSMENT**

## **OF CRIME, ANTI SOCIAL BEHAVIOUR AND SUBSTANCE MISUSE**

2010/11

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**Extracts from:** Hampshire Constabulary's Portsmouth District Strategic Summary 2010/11

**Thanks to:** SPP support officers and all those who have contributed data and comments

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**Acronym list**

A&E	Accident and Emergency	LSD	Lysersic acid diethylamide
ABC	Acceptable Behaviour Contracts	LAC	Looked after children
ACPO	Association of Chief Police Officers	MAPPA	Multi Agency Public Protection Agenda
ADAPT	Adapt Domestic Abuse Prevention Training	MARAC	Multi Agency Risk Assessment Conference
AIT	Alcohol Intervention Team	MSV	Most serious violence
ASB	Anti social behaviour	MSG	Most similar groups – iQuanta comparison areas
ASBO	Anti Social Behaviour Order	NDTMS	National Drug Treatment Monitoring Service
AWLSI	Assault with less serious injury	NEET	Not in education, employment or training
AWOI	Assault without injury	NI	National indicator
BME	Black and minority ethnic	NTE	Night time economy
BCS	British Crime Survey	PC	Police Constable
CAADA	Co-ordinated Action Against Domestic Abuse	PCC	Portsmouth City Council
CSP	Community Safety Partnership	PCT	Primary Care Trust
CTB	Children's Trust Board	PDU	Problematic drug users
CTG	Community Tasking Group	PNC	Police National Computer
DAT	Drug Action Team	PPO	Prolific and other priority offenders
DIP	Drug Intervention Program	PUSH	Portsmouth User Self Help
DRR	Drug Rehabilitation Requirements	RAS	Racial Awareness Service
EIP	Early Intervention Project	SDAC	Specialist Domestic Abuse Court
ELNEP	Evening and Late Night Economy Partnership	SE	South East
FTE	First time entrant (to youth justice system)	SEPHO	South East Public Health Observatory
HIV	Human immunodeficiency virus	SPP	Safer Portsmouth Partnership
IDAP	Integrated Domestic Abuse Program	TFMV	Theft from a motor vehicle
IDVA	Independent Domestic Violence Advocate	VATP	Violence against the person
IOM	Integrated Offender Management	YOT	Youth Offending Team
ISVA	Independent Sexual Violence Advisors		

## Introduction

Community Safety Partnerships (CSPs) have a statutory requirement to produce an annual strategic assessment and three year partnership plan (refreshed annually).<sup>1</sup> This requirement has not altered as a result of the change in government. These two documents combined are intended to enable partnerships to target their resources at priority areas and become more responsive to the needs of local communities with regards to local crime, disorder and substance misuse issues. This is the fifth Safer Portsmouth Partnership (SPP) strategic assessment and the Community Safety Researchers have integrated findings from Hampshire Constabulary's Portsmouth District Strategic Summary 2010/11 where appropriate.

This strategic assessment does not aim to present all the research and analysis undertaken in the previous year in detail, but to provide a summary. This is to assist the SPP in setting and revising its three year rolling partnership plan by:

- Checking the partnership's current priorities and identifying any presenting priorities (known as 'key indicators')
- Providing a better understanding of local issues and community needs, and
- Providing knowledge of what is driving the problems to help identify appropriate responses.

The statutory framework requires a strategic assessment to include:

- Analysis of the levels and patterns of crime, anti social behaviour (ASB), substance misuse and re-offending
- Changes in the levels and patterns of crime, ASB, substance misuse and re-offending
- Analysis of why these changes have occurred
- *An analysis of the extent to which last year's plan was implemented<sup>2</sup>*

<sup>1</sup> Hallmarks of Effective Partnerships 2007

<sup>2</sup> This strategic assessment meets all of these requirements, except for 'providing an assessment of how far last year's plan was implemented'. This section will be presented separately following the annual review.

## Methodological Approach

The methodological approach used for this assessment includes:

- A scoping exercise to identify crime and ASB types to be included in the scan
- A scan of the crime and ASB types using a matrix of different considerations (See Appendix A) to check existing priorities and identify emerging priorities (known as 'key indicators'). This scan does not just identify key indicators, it also checks that the previously agreed underlying long-term priorities are still relevant for this period.
- A review of performance against current priorities
- A detailed analysis of agreed long-term underlying priorities and key indicators
- The partnership runs a continuous Research & Analysis programme of detailed analysis to help understand what is driving the problems and to plan an appropriate response. Many pieces of analysis completed throughout the year contribute to this document. A '§' symbol in this document indicates that further research and/or analysis is required.
- Recommendations for priorities arising from this year's strategic assessment period.

## Data Sources and Time Periods

Reference to '2010/11', or to 'this year' will refer to the financial year 1<sup>st</sup> April 2010 to 31<sup>st</sup> March 2011, and 'last year' will refer to the previous financial year of 2009/10, unless stated otherwise. Data will be compared back to a baseline of 2006/07 where possible.

iQuanta's most similar group (MSG) of CSPs<sup>3</sup> will be used to compare Portsmouth's crime data, and Primary Care Trust (PCT) comparators<sup>4</sup> will be used for health and substance misuse data. When comparisons are made, 1st is the best performing and higher numbers indicate poorer performance unless stated otherwise.

Public perception and experience of crime, disorder and substance misuse underpins the work of the partnership. In the past a number of relevant surveys have been used to gather resident's views. A full list of the surveys, consultations and focus groups used in this Strategic Assessment can be found in the Bibliography, and are referenced throughout the document wherever they are used. The main source of information about local priorities is now the regular discussions at the Community Tasking Groups (CTGs) (See Appendix B). There are four "Tasking Groups" covering the Cosham, Fratton, Central and Southsea areas of the city, where partners and community members come together monthly to discuss local problems that residents and they feel need sorting out. Tasking Groups are an important way of getting the local community to work together with their Safer Neighbourhood Team to solve their own problems.<sup>5</sup>

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<sup>3</sup> Blackpool, Bristol, Cardiff, Crawley, Exeter, Harlow, Hounslow, Lincoln, Plymouth, Rushmoor, Southampton, Stevenage, Watford and Weymouth & Portland. Boundary changes Portsmouth's MSG will change slightly for 2011/12, with Blackpool and Weymouth & Portland being replaced by Kirklees and Welwyn & Hatfield.

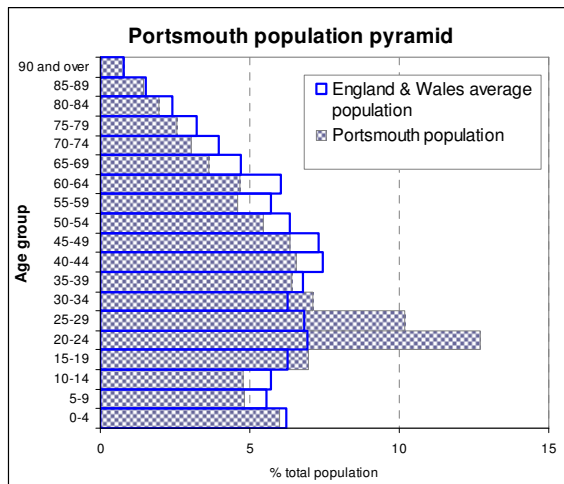
<sup>4</sup> Brighton & Hove, Bristol, Leeds, Liverpool, Newcastle Upon Tyne, Plymouth, Salford, Sheffield and Southampton

<sup>5</sup> More information about CTGs can be found on the SPP website: <http://saferportsmouth.org.uk/index.php/community-first/>

## Context and Demographic Picture

Portsmouth's population of 207,100 resides within 15.5 square miles.<sup>6</sup> It is the most densely populated area in the United Kingdom outside London<sup>7</sup>, with almost 80% of Portsmouth's population situated on Portsea Island. The distance from the north to the south of the city is 9km and from the west to the east of the city is 5km.

**Population forecasts:** The City's population is forecast to increase by half a percent over the next three years. However, the increase is unevenly spread with more people living in Charles Dickens and fewer in Copnor.



As can be seen in the graph to the left, Portsmouth has a comparatively high proportion of young adults aged 20-29 years, 13% of the total population compared with 7% nationally, mainly due to the City's University and colleges.<sup>8</sup> The University of Portsmouth continues to grow in size and reputation with around 19,000 students, including 3,000 from over 100 countries outside of the UK.<sup>9</sup>

Source: ONS Mid-2010 population estimate

It is forecast that there will be an overall increase in the number of 65+ year olds, particularly in Cosham and Paulsgrove. A slight decrease in the number of under 18 year olds is forecast, however this is unevenly spread with the biggest drop in Copnor but increases forecast in Charles Dickens and Nelson.<sup>10</sup>

**Young people:** There are about 40,200 children and young people under 18 years old, representing one in five of the total resident population. However, this varies dramatically across the city with approximately one in four of the population in Paulsgrove and Cosham, and only one in eight of the population in St Jude ward, in this age group.<sup>11</sup>

Less than half of young people leave the maintained secondary schools with five good GCSEs including English and Maths. The number of young people staying on in education or training after the compulsory school-leaving age is increasing, but the percentage of 16-18 year olds who are not in work or learning is high. The January 2010 figure of 11% NEET is much higher than the 6% national and regional figures. Exclusions are falling but persistent absence levels remain higher than comparators. Portsmouth had the worst persistent absence rate<sup>12</sup> in the South East region.<sup>13</sup>

**Ethnicity:** It is estimated that the black and minority ethnic (BME) community in Portsmouth has increased to 15.5% of the total population with Other White, Indian and Chinese communities comprising the largest ethnic groups.<sup>14</sup> The Bangladeshi

<sup>6</sup> Office for National Statistics, mid-year 2010 population estimate

<sup>7</sup> Portsmouth is also the most densely populated member of its iQuanta MSG of CSPs.

<sup>8</sup> Portsmouth's Joint Strategic Needs Assessment <http://www.portsmouth.gov.uk/living/19062.html>

<sup>9</sup> Portsmouth University <http://www.port.ac.uk/aboutus/factsfigures/>

<sup>10</sup> Portsmouth's Joint Strategic Needs Assessment <http://www.portsmouth.gov.uk/living/19062.html> Source: Hampshire County Environmental Department's 2010 based Small Area Population Forecast.

<sup>11</sup> Portsmouth's Joint Strategic Needs Assessment <http://www.portsmouth.gov.uk/living/19062.html>

<sup>12</sup> A pupil who is persistently absent misses more than 31.5 days across the academic year, in effect one day a week

<sup>13</sup> Children's Trust Needs Assessment 2011 [http://www.portsmouth.gov.uk/media/CYP\\_Childrens\\_Needs\\_Assessment\\_Final.pdf](http://www.portsmouth.gov.uk/media/CYP_Childrens_Needs_Assessment_Final.pdf)

<sup>14</sup> Portsmouth's Joint Strategic Needs Assessment <http://www.portsmouth.gov.uk/living/19062.html>

community is the largest of any south east city, and the Chinese community is the second largest.<sup>15</sup>

The most recent Portsmouth Schools survey indicates that younger age groups are more ethnically diverse: 14% of pupils aged 5+ years are from a BME community and this increases to 36% of pupils from St Thomas, and over a quarter from St Jude and Charles Dickens wards.

**Housing:** Portsmouth's housing has several distinctive features: nearly half was built before the First World War; almost two in three dwellings are terraced houses compared to one in three in England; the proportion of households renting rather than owning exceeds the regional average, and an estimated one in five city households rent from a private landlord with a similar proportion renting from the city council or housing associations.<sup>16</sup>

**Tourism:** Portsmouth is a regional visitor destination and each year attracts around 7.6m visits with a £373m visitor spend. This has a significant impact on the local economy, facilities and services for local people, with 9.5% of jobs tourism related.<sup>17</sup>

**Deprivation:** Portsmouth is ranked 76<sup>th</sup> most deprived out of the 326 local authorities in England.<sup>18</sup> This is worse than the previous 2007 ranking of 93<sup>rd</sup> of 354.

The most deprived areas in Portsmouth are located in Charles Dickens and Paulsgrove with small pockets of high deprivation in Nelson, Fratton and St Thomas wards.

- o 14 (out of 123) areas in Portsmouth were in the worst 10% of areas in England, up from 12 areas in the 2007 Index
- o more people are suffering from employment deprivation (11,300) than in 2007 (10,500)
- o 28 (out of 123) areas of Portsmouth are in the worst 10% areas in England for the crime domain, up from 20 areas in 2007

Unemployment rates during 2010/11 started to decrease (to 3.5%) from the highs of 2009/10, but the average duration of unemployment has increased. At March 2011, unemployment rates were highest in Charles Dickens (7.1%), Nelson (4.7%) and Fratton (4.6%) wards. A higher proportion of Portsmouth residents have "no qualifications" than the South East average.<sup>19</sup>

The combination of space restrictions within an island city, over representation of young adults, density of population and the type of housing potentially combined with overcrowding; poor sound insulation and on-street parking impacts on the nature of crime and disorder within the city.

See Appendix C for map of city ward and police beat boundaries.

*For more detailed information, please see:*

*Portsmouth's Joint Strategic Needs Assessment* <http://www.portsmouth.gov.uk/living/19062.html>

*Children's Trust Needs Assessment 2011*  
[http://www.portsmouth.gov.uk/media/CYP\\_Childrens\\_Needs\\_Assessment\\_Final.pdf](http://www.portsmouth.gov.uk/media/CYP_Childrens_Needs_Assessment_Final.pdf)

<sup>15</sup> 2001 Census. N.B. South East does not include London.

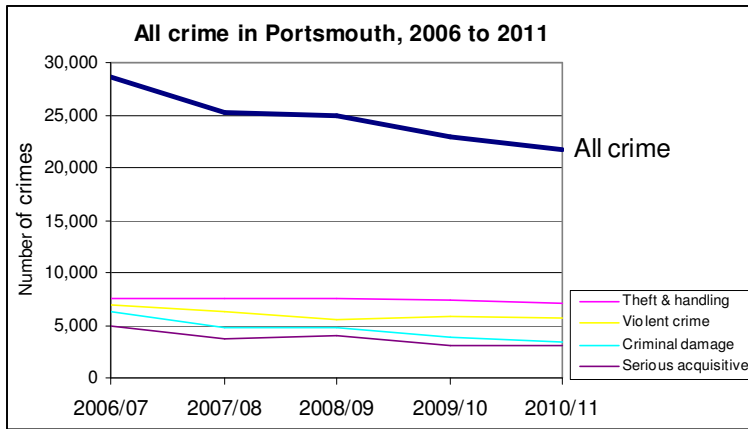
<sup>16</sup> Portsmouth's Joint Strategic Needs Assessment <http://www.portsmouth.gov.uk/living/19062.html>

<sup>17</sup> NOMIS, Official labour market statistics. [www.nomisweb.co.uk](http://www.nomisweb.co.uk)

<sup>18</sup> The 2010 Index of Multiple Deprivation (IMD) is a measure of deprivation at the Lower Super Output Area and contains seven domains of deprivation: Income; Employment; Health and disability; Education, Skills and training; Barriers to housing and services; Living environment; and Crime.

<sup>19</sup> NOMIS, Official labour market statistics. [www.nomisweb.co.uk](http://www.nomisweb.co.uk)

## Overview of Community Safety in Portsmouth

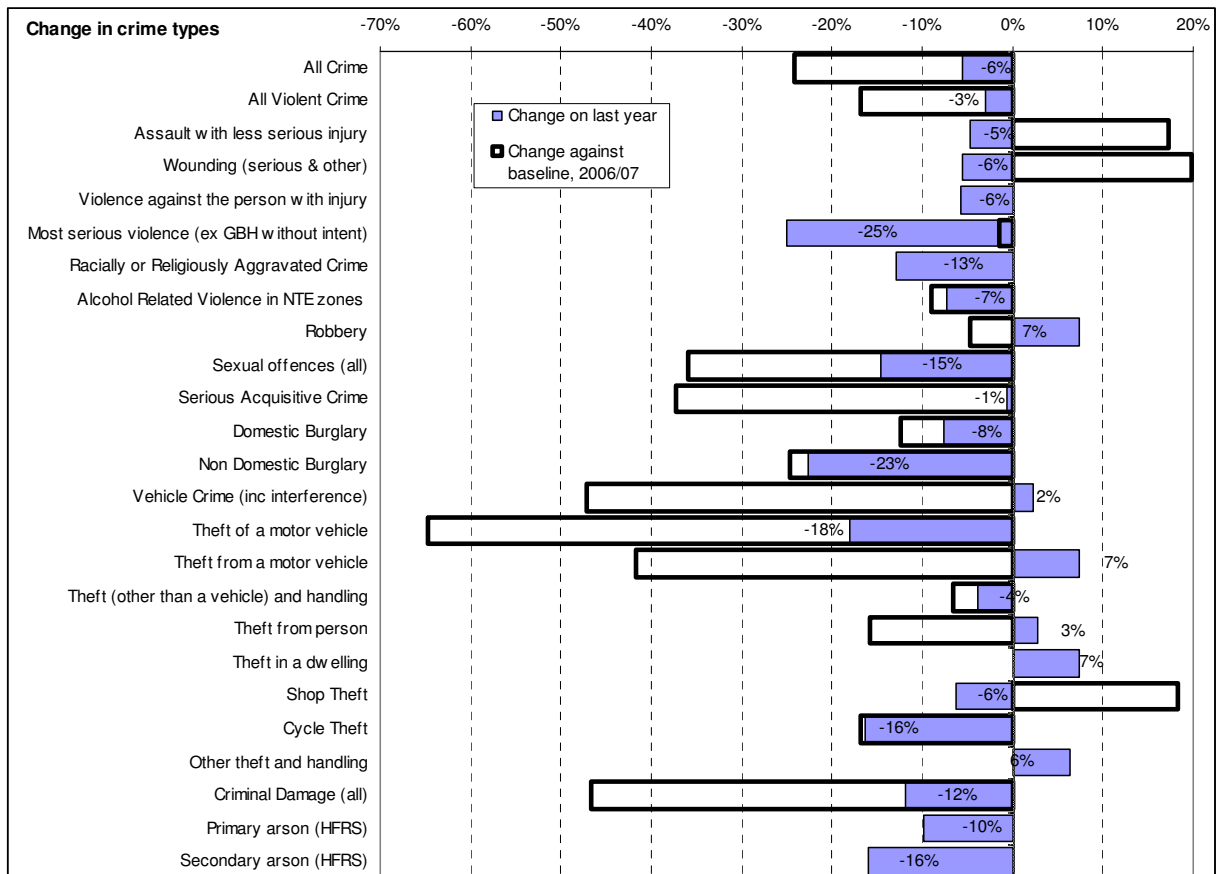


Despite the demographic changes in the city, Hampshire Constabulary recorded 21,654 crimes in Portsmouth in 2010/11. This is a reduction of 5.5% (n1,271) on the previous year, and 24% (n6,905) fewer than in 2006/07. This is in line with the national picture, with the 2010/11 British

Crime Survey showing crime experienced decreasing (but not by a statistically significant amount) and police recorded crime decreasing by 4% in England and Wales and 6% in Hampshire compared to 2009/10.<sup>20</sup>

The reduction in all recorded crime is even more impressive in the context of Portsmouth's population increasing by more than 5% since 2006. Expressing the crime rate as a proportion of the population shows a huge drop from 146 crimes per 1,000 people in 2006/07 to only 105 per 1,000 people in 2010/11.

However, this is still a higher rate than the National and South East region rate (76 and 68 respectively). The rate is also above the average rate for Portsmouth's MSG of CSPs (96) but lower than Southampton, Lincoln and Bristol (around 116).



Source: iQuanta data

<sup>20</sup> Crime in England and Wales 2010/11

The figure above shows the changes in crime types in Portsmouth compared to last year (figures and shaded columns) as well as to the baseline year of 2006/07 where possible (clear columns). It is clear that the majority of crime types have decreased on last year in Portsmouth, which is in line with national trends that are still seeing a reduction, but an easing of the rate of reduction. However, Portsmouth did see an increase in various acquisitive crimes including theft from motor vehicles, robbery, other theft<sup>21</sup> and theft in a dwelling of approximately 7% on last year, although these last few relate to fairly small numbers of crimes.

Almost all crime types, with the exception of shop theft and a few of the violence categories, have shown significant reductions from the baseline year of 2006/07.

A breakdown of recorded crime in Portsmouth is included in Appendix D.

“Crime and the safety of the local community” has consistently been the number one issue of Portsmouth residents by a wide margin.<sup>22</sup> One of the most recent surveys on community safety (2008/09 Place Survey) found:

- 62% of Portsmouth residents thought that the level of crime was the most important thing in making somewhere a good place to live.
- Fewer Portsmouth residents thought that the police and other local services sought their views on, or were successful at dealing with ASB and crime, than nationally.
- Over a quarter (27%) of Portsmouth residents thought that ASB was a problem in their area. This was well above the England (20%) and Portsmouth’s MSG average (23%).<sup>23</sup>
- Almost half of Portsmouth residents (45%) felt unsafe after nightfall, which is above the national average (37%). However, Asian respondents to the Valuing Diversity Survey (2009) were far more likely to feel unsafe than white respondents (53% in comparison with 37%). Additionally, Muslim respondents were more likely to feel unsafe (61%) than Christian respondents (39%).

The crime that residents were most worried about happening to them was acquisitive crime (such as burglary, robbery or vehicle theft), followed by violent crime (such as assault) and then criminal damage to their vehicle.<sup>24</sup> These concerns formed part of the matrix (see Appendix A) used for choosing presenting priorities. Experience of crime was lower than people’s concern about crime and the types of crime people were most likely to experience were different to the type they were most concerned about.

Since 2004, the top six areas that residents say they feel frightened or would avoid because of fear of crime have consistently been: Somerstown, Buckland, Paulsgrove (& Wymering), Guildhall Walk Entertainment Area, Landport and Portsea.<sup>25</sup>

There has not been a survey of Portsmouth residents collecting views on community safety related issues since 2009 and the police stopped their regular telephone survey during 2010/11. This is an area that needs to be addressed.

However, the main source of information about local priorities is now the regular discussions at the Community Tasking Groups. [See Appendix B].<sup>26</sup>

Each neighbourhood area have their own priorities, most have two or three priorities. The majority of priorities relate to some aspect of anti social behaviour but the most common priorities across the city are to target anti social behaviour occurring in specific areas/streets, reduce theft from motor vehicles, motor vehicle related anti social behaviour/speeding and cycling.

<sup>21</sup> An increase in ‘other theft’ was also seen nationally.

<sup>22</sup> Residents Survey 2009, 2007 & 2005 – When asked “which two or three priorities do you think are most important for the City Council and its partners to achieve?” over 70% of residents chose “Crime and the safety of the local community”, compared to the next highest 40% for “Education for children” [http://www.portsmouth.gov.uk/media/STG\\_ResidentsSurvey2009ToplineResults.pdf](http://www.portsmouth.gov.uk/media/STG_ResidentsSurvey2009ToplineResults.pdf)

<sup>23</sup> NI 17 Perceptions of ASB, Briefing Note to SPP on 14.01.10, Alan Leonard. See ASB section.

<sup>24</sup> Based on the 2004, 2005 and 2006 Community Safety Survey and 2009 Residents Survey.

<sup>25</sup> Place Survey 2008/9, Residents Survey 2007, 2004, 2005 and 2006 Community Safety Survey

<sup>26</sup> More information about CTGs can be found on the SPP website: <http://saferportsmouth.org.uk/index.php/community-first/>

## Priorities

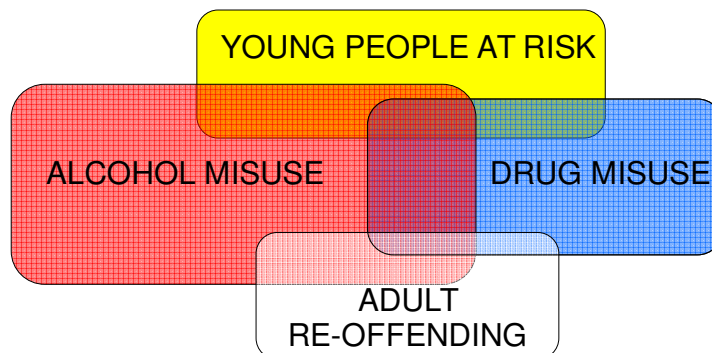
### Long-term underlying priorities

The recommended long-term underlying priorities for the SPP remain:

**Alcohol misuse**  
**Young people at risk**  
**Drug misuse**  
**Adult re-offending**  
**Domestic violence**

These are not presented in priority order, following the decision of the SPP on 22<sup>nd</sup> September 2011. The evidence and reasoning as to why these are recommended as long-term underlying priorities for the partnership can be found in the following relevant chapters. The first four were previously accepted by the SPP in October 2010, with the addition of domestic violence in March 2011.

These long-term underlying priorities are not mutually exclusive, can be inter-related and are most often the underlying driving factors behind, or contributors, to a range of crime types and the key indicators below. This is demonstrated in the figure below.



The long-term underlying priorities should be considered by the partnership when allocating resources and developing collaborative approaches to tackling crime and anti social behaviour in Portsmouth. These long-term underlying priorities are consistent with those identified by Hampshire Constabulary's District Strategic Summary 2010/11.

### Key indicators

- **Violence**
- **Acquisitive crime**
- **Anti social behaviour**

In order to identify 'key indicators' requiring additional analysis, the SPP has developed a scanning process and supporting matrix (Appendix A).

The priority matrix is based on models used for police and partnership strategic assessments elsewhere. The approach requires a consistent set of information to be available on each crime and anti social behavior type and takes into account:

- *Probability*: current performance in terms of "Volume", "Trend", and "Benchmarking concern"
- *Harm*: both perceived "Public concern" & the potential for "Personal harm"
- *Proportionality*: "Disproportionate impact against sections of the community (including business)" and whether it is a "Hidden or under reported crime"
- *Substance Misuse*: "Linked to drug or alcohol misuse"
- *Predictive*: "Future issues and PESTELOM"

This process highlights key indicators that require further consideration and ensures transparency in the decision making process.

## Performance

### Performance Management Framework

The Safer Portsmouth Partnership (SPP) monitored performance in 2010/11 in relation to its strategic priorities against a set of 25 'high level' indicators.

These are set out in the SPP Performance Summary, which is reviewed quarterly by the partnership (Appendix E). The Performance Summary is supported by a quarterly exception report highlighting good (green) performance, and areas for improvement (red). Actions are agreed at the SPP meeting to address the areas for improvement and monitored using the SPP Action Tracker.

Beneath these 'high level' strategic indicators each priority theme has a detailed delivery plan monitored by the relevant delivery group. Each delivery plan includes a selection of indicators and specific, measurable, achievable, realistic and timely (SMART) targets, with actions to address the areas of concern and the names of responsible lead agencies/individuals. Performance and activity updates take place regularly (at least quarterly) whilst the delivery plans are formally refreshed annually in line with the findings of the strategic assessment.

### Current performance

Comparing current overall performance to that at the end of 2009/10 shows a similar picture, with two-thirds of indicators achieving their target and just under a quarter missing their target.

Performance has improved in relation to 'alcohol related violence', 'adults accessing alcohol treatment' and the 're-offending rate of prolific and priority offenders' (red to green). However, the 're-offending rate of young people' has gone from green to red. Three indicators that were assessed as red at the end of last year remain red for this year.

For all those indicators that met their target, there is also a good direction of travel (the absolute change from last year and from the 2007/8 baseline) and they are performing well against Portsmouth's peers. However, there is a mixed story for those indicators that missed their target.

Despite the 'rate of alcohol related hospital admissions' missing its reduction target, and having increased year on year since the baseline, the rate of increase on the same period last year was only small in Portsmouth (1%) compared to that experienced by England and the South East (8%), Southampton (18%) and Brighton & Hove (6%).<sup>27</sup> Although the rate in Portsmouth remains above these comparator areas, the gap is narrowing.

The proven rate of re-offending by young people (180.7 re-offences per 100 young offenders) missed its 2010/11 target (no more than 156), despite excellent performance throughout the previous year. The re-offending rate also had a poor direction of travel, having increased on the 2005 baseline rate and on last year. The rate is above the Wessex and Hampshire areas (147 and 137 respectively) but below Southampton (210). This headline rate hides some of the detail and masks some of the more positive results, such as a significant reduction in the number of offenders (from 209 to 140) and the total number of offences only increasing marginally (from 239 to 253). It is possible that this is an unintended knock-on effect from the positive work achieved, such as triage, in reducing the number of first time entrants to the youth justice system, in that those left in the cohort are the more prolific offenders.

<sup>27</sup> This relates to the first three quarters of 2010/11, April 10-December 11 due to a lag in receiving the information.

## Alcohol Misuse - long-term underlying priority

Portsmouth has a vibrant night-time economy (NTE) which provides significant benefits to Portsmouth's economy, such as the influx of people from surrounding areas and the many jobs for local people.

Alcohol is used in many public and private social situations, and the majority of young people and adults use alcohol sensibly. However, a significant minority of people in Portsmouth drink at levels that increase the likelihood that their health will be negatively affected. The *Alcohol Needs Assessment 2009* reported that alcohol misuse can also have an impact on relationships, lead to family breakdown, cause unemployment and lead to poverty and homelessness.

The *Portsmouth Alcohol Strategy 2009/13* estimated that the cost of alcohol misuse to society in Portsmouth is £74 million. This includes costs to health services, criminal justice services, employee absenteeism, work performance and the cost of crime. The Alcohol Strategy provides objectives and actions for the following strands:

- PREVENT – Improve alcohol education and awareness
- TREAT – Increase access to improved treatment and support services
- ENFORCE – Tackle alcohol related crime and anti social behaviour.

### Extent of issue

It has been estimated that just over 22.2% (approx 38,000) of people over 16 years of age in Portsmouth drink at levels which could harm their health (known as hazardous drinkers).<sup>28</sup> This is a slight increase on last year (20.8%) but is lower (although not significantly different) than the South East (24.2%) and England average (23.6%). This is also less than the average for other similar areas<sup>29</sup> (25.2%), although it is slightly higher than Southampton (21.7%) within that group.

These hazardous drinkers include 4.9% (approx 9,700) of the 16+ population who drink at high risk levels, defined as over 35 units per week for women and over 50 units for men (known as harmful drinkers). This is a slight reduction on last year (5.5%). This is now lower (although not significantly different) than the South East (5.9%), England average (6%) and other similar areas (6.9%).

23.7% (approx 41,000) of the 16+ population in Portsmouth are defined as 'binge drinkers', which means they drank at least twice the daily recommended amount of alcohol in a single drinking session (more than 6 units for women or 8 units for men) on a single occasion in the last week. This group is likely to include a substantial proportion of hazardous and harmful drinkers. The rate in Portsmouth has increased from last year (19.6%) but Portsmouth remains in a similar position to last year in that it has a higher (but not significantly different) rate than the national average (20.1%) and the South East average (18.1%), while remaining lower than other similar areas (26.2%).<sup>30</sup>

It is worth noting that the average rates of hazardous, high risk and binge drinking have all increased on last year for the South East, England and other similar areas.

'Rethink your drink' scratchcards, based on the simple Alcohol Use Disorders Identification Test (AUDIT-C)<sup>31</sup>, use three questions from a screening tool to pick up the early signs of hazardous and harmful drinking and identify mild dependence.

<sup>28</sup> Using mid-2008 synthetic estimate of the percentage within the drinking population aged 16 years and over who report engaging in drinking more than 22 units of alcohol per week for males, and 15 for females). Applied to ONS mid-2010 population estimate of 16+ year olds: 173000)

<sup>29</sup> Other similar areas are the PCT comparators: Sheffield, Newcastle upon Tyne, Plymouth, Bristol, Southampton, Liverpool, Salford, Brighton & Hove and Leeds.

<sup>30</sup> Local Alcohol Profiles for England 2011 (LAPE) <http://www.lape.org.uk/>

<sup>31</sup> Alcohol Use Disorders Identification Test (AUDIT) – three questions from a screening tool to pick up the early signs of hazardous and harmful drinking and identify mild dependence.

These were promoted across 17 pharmacies in Portsmouth from September 2010 to June 2011. Of the 2,702 responses received, 5 out of 10 scored a sensible drinking level, 4 out of 10 were drinking at 'increasing risk' levels and one in 10 were 'higher risk'. 7 out of 10 of those who were drinking at increasing risk or high risk declined any further advice or intervention.

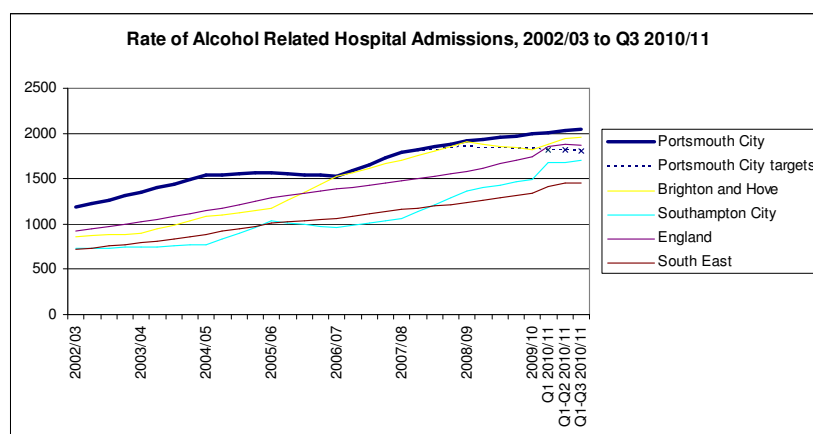
The *Alcohol Review Survey*<sup>32</sup> of Portsmouth residents found that:

- 25% of respondents had missed at least one day of work due to drinking too much, and 3.5% had missed 10 or more days.
- 4 out of 10 respondents said they would "just pay more" if the price of their favourite drink increased – whereas just less than 3 out of 10 said they would drink less.
- When asked where most of the alcohol they drink comes from, 54% said supermarkets while 30% said pubs/bars/clubs.
- Almost 60% of respondents said they did not go into town at night because of the drunken behaviour of other people.

### Impact of alcohol on health

The rate of alcohol related hospital admissions per 100,000 population (formerly NI 39) is measured by the SPP. As there is a lag of up to six months in the reporting of this indicator, four quarters worth of information from January to December 2010 have been used.<sup>33</sup>

Portsmouth had close to 4,200 alcohol-related hospital admissions in 2010, this is equivalent to a rate of 2,014 alcohol-related hospital admissions per 100,000 population. This remains a higher rate than for England (1842), the South East (1419), Southampton (1682) and Brighton and Hove (1904). However, the rate in Portsmouth only increased by 1.4% on the previous year compared to much higher rates of increase experienced by the rest of England and the South East (8%), Southampton (18%) and Brighton and Hove (3.5%). Although Portsmouth alcohol services still have a long way to go in addressing alcohol related harm, the good work by these services may be helping to keep any increases in hospital admissions lower than they otherwise may be.



The chart to the left shows the last eight years of data comparing Portsmouth with two similar areas and the South East and national averages. It is clear that all areas are experiencing increasing rates, but the gap between them and

Portsmouth is narrowing as Portsmouth's rate is increasing at a lower rate.

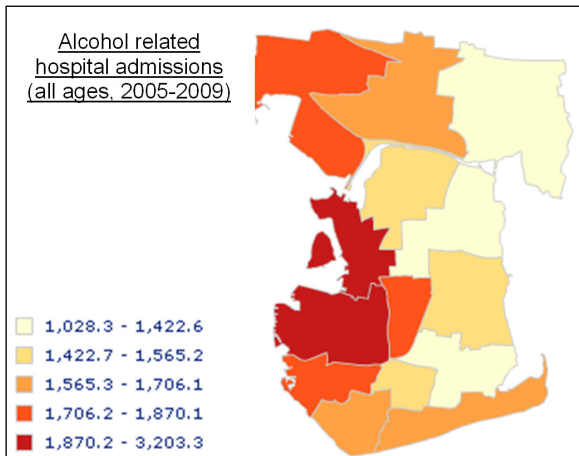
Although not directly comparable to the NI 39 measure, the "Alcohol Admissions<sup>34</sup> and Costs based on Alcohol Attributable Fractions" provides a more up-to-date picture of trends. Up to the end of March 2011 this shows a year on year increase of

<sup>32</sup> Alcohol Review Survey [974 respondents between April-August 2010], from the Review of alcohol-related hospital admissions, 2011, Health Overview & Scrutiny Panel. [http://www.portsmouth.gov.uk/media/hosp20110127r7\\_2.pdf](http://www.portsmouth.gov.uk/media/hosp20110127r7_2.pdf)

<sup>33</sup> This will be updated when Q4 data is released §

<sup>34</sup> This does not include A&E, ambulance etc. and is not directly comparable to NI 39

1.4% which supports the trends seen in the data for the year so far which shows a levelling off of the trend. There were 5,022 alcohol admissions (based on alcohol attributable fractions) in 2010/11, which were responsible for an estimated cost of £6.25million (a £0.29million reduction on last year).



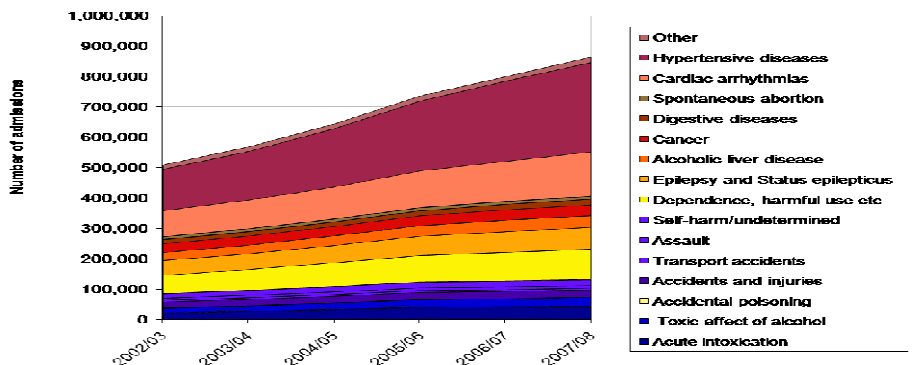
The map to the left shows the rate of alcohol related hospital admissions by electoral ward. It is worth noting just how high the rate for Charles Dickens ward is, at 3,203 per 100,000 this is more than twice the national average.

A similar picture is shown by mapping alcohol specific hospital admissions. These interactive maps can be found on the Joint Strategic Needs Assessment website [www.JSNA\\_portsmouth.gov.uk](http://www.JSNA_portsmouth.gov.uk).

Alcohol related hospital admissions are broken down into three broad categories: acute, chronic and mental and behavioural. An update to this information is not currently available due to new IT systems. In 2008/09, approximately 64% (n2,507) of admissions were from chronic conditions,<sup>35</sup> which are associated with long-term and usually heavy alcohol consumption. The two most common types of chronic condition were hypertensive diseases and cardiac arrhythmias (heart and blood pressure problems) both of which increased between 2007/08 and 2008/09 (11.5% and 5.3% respectively).<sup>36</sup>

Approximately 21% (n824) of alcohol related hospital admissions were due to mental or behavioural consequences of alcohol consumption. Acute conditions (including intoxication and injuries related to alcohol consumption) accounted for approximately 15% (n582) of alcohol related conditions.

The chart to the right shows the national alcohol-related hospital admission trends from 2002/03 to 2007/08. As can be seen, nationally hypertensive diseases are showing the biggest increases which is consistent with findings in Portsmouth.



The alcohol specific mortality rates for males in Portsmouth (23.1 per 100,000) were much higher than the South East (10.2) and England average (13.1). They were also slightly higher than the average for Portsmouth's similar areas (19.8) and much higher than the rate in Southampton (13.7).

Although the alcohol specific mortality rate for females in Portsmouth (6.6 per 100,000) was above the South East (4.7) and England average (6.1), it was not significantly different, and was lower than the average for Portsmouth's similar areas (9.2) which included Southampton (10.2).<sup>37</sup>

<sup>35</sup> NWPCHO Local Area Profiles, an update was not available from Portsmouth Hospital Trust due to new IT systems.  
<sup>36</sup> Portsmouth PCT Alcohol-Attributable Person Specific Hospital Admissions 2007/08 and 2008/09.  
<sup>37</sup> NWPCHO Alcohol-Specific Mortality males and females all ages per 100,000 2007-2009.

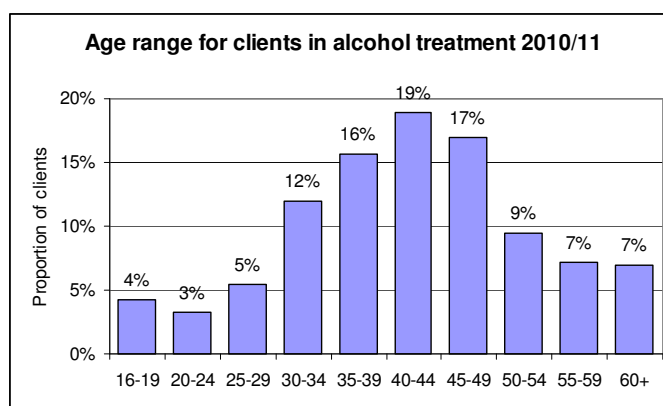
While the alcohol specific mortality rate for males in Portsmouth has shown an upward trend over the last few years, the rate for females has decreased.

### Alcohol misuse treatment services

The Department of Health recommends that capacity for adults in treatment for alcohol misuse should be about 15% of dependent people within a locality. In Portsmouth as many as 1 in 20 adults (over 7,000 people) may have an alcohol dependency.<sup>38</sup> This means that capacity for alcohol treatment should be around 1,050 places per annum and that Portsmouth needs to increase the 2008/09 capacity (n605) by 75%. However, the 'Ready Reckoner v5.2' available from the Alcohol Learning Centre estimates Portsmouth has 8,852 dependent drinkers which would indicate that the capacity target should equate to more like 1328 places per annum.<sup>39</sup>

There were 661 clients in treatment with alcohol as their primary drug (tier 3 & 4)<sup>40</sup> in 2010/11 which is an increase of 23% (n124) from 2009/10.<sup>41</sup> In 2010/11, 54.7% of treatment exits were care planned discharges, an increase from 48% in 2009/10.

There were twice as many male clients, than female clients, who received interventions (in line with the national average) and the peak ages were between 40 and 45 years. See chart below for the age range of clients in treatment for alcohol misuse.



Most clients were receiving treatment for alcohol misuse alone (82.3%), but where a client reported misusing more than one substance, the most common substance was cannabis (9%).

The Alcohol Specialist Nurse Service<sup>42</sup> provides alcohol treatment to patients based at Queen Alexandra Hospital. The service has developed over the past 12 months and from mid-December 2010 to end-April 2011 they dealt with 577 patients.

The top 20 Emergency Department attenders with alcohol misuse issues (also known as 'frequent flyers') in Portsmouth have been identified. Taking into account their rate of hospital admissions and ambulance calls, and applying the average cost per incident<sup>43</sup>, the average cost over the last 12 months was just over £21,000 per patient, or over £420,000 for all 20 frequent flyers. Most of these patients will also be costing Primary care, social care, housing and the criminal justice system significant amounts of money. §

These top 20 frequent flyers will be targeted by the Alcohol Specialist Nurse Service at QA and Frequent Flyers workers, with the aim of reducing admissions from between 50% to 75%. This will be monitored as part of the SPP quarterly performance summary.

The service recorded the ages that patients 'first used alcohol', 'regularly used alcohol' and when 'alcohol became a problem'. There is a clear progression in

<sup>38</sup> The Alcohol Harm Reduction Strategy 2007/08

<sup>39</sup> [http://www.alcohollearningcentre.org.uk/library/Alcohol\\_Ready\\_Reckoner\\_V5.2.xls](http://www.alcohollearningcentre.org.uk/library/Alcohol_Ready_Reckoner_V5.2.xls)

<sup>40</sup> Tier 3 Services are structured services e.g. Community DAT at Kingsway House, Portsmouth CDA and Portsmouth Counselling Service. Tier 4 Services are in-patient detoxification services (Baytrees) and Residential Rehabilitation.

<sup>41</sup> This figure includes those treated by the alcohol nurses since December 2010 (when they were at full capacity). There were 104 unique adults (not already on NDTMS) seen by the alcohol nurses from December 2010-March 2011.

<sup>42</sup> When a patient is admitted to hospital and a serious alcohol issue is identified the service oversee alcohol detoxification, provide advice and liaise with community services so that patients have support when they are discharged from hospital. The aim is to improve patient's health and reduce the likelihood they will have to go back into hospital as well as allowing patients to be discharged from hospital to complete their detox as an outpatient, freeing up beds.

<sup>43</sup> Emergency department: £88, hospital admissions: £1,502 and ambulance calls: £350 each.

severity with age. The most common age range for 'first using alcohol' being 11-15 year olds (48%), with those first 'regularly using alcohol' most likely to have been 16, 18 and 20 yr olds, with alcohol becoming a problem in the 26+ yr old group (in particular, 30 yr olds AND 40 yr olds were cited as the largest).

It is reassuring to see that referrals to the Alcohol Intervention Team (AIT), which is a tier 2 service, have also increased from 668 to 1,101 this year. The majority of the AIT's clients are 35-54 years old, two in three are male from across the city. Referrals are received from a range of sources such as Alcohol Specialist Nurse Service, Probation and GPs. However it is worth mentioning that referrals from GPs have not grown at the same rate as other sources and this is an area that requires further work.

The *Save Dave* campaign, aimed at men over 35 who drink too much, continues to be successful in raising awareness, with specific campaigns throughout the year such as 'The Party's Over' linking in with New Year's resolutions and a football theme during the World Cup period in 2010.<sup>44</sup>

### Impact of alcohol on crime and anti social behaviour

For every recorded crime, the police have the option of recording whether it was affected by alcohol, alcohol and drugs, drugs, not affected by drink or drugs, not known or to leave it blank (not stated). The affects of alcohol and/or drugs on all recorded crime in Portsmouth in 2010/11 was not known or stated in 76% (n16,626) of cases.<sup>45</sup> Looking only at those cases where it was known or stated (n5,373), 54% (2,891) of offences were not affected by alcohol or drugs. 42% (n2,256) were affected by alcohol or alcohol and drugs. The remaining 4% (n226) were affected by drugs alone.<sup>46</sup>

In Portsmouth, violence against the person was the most likely crime type to be affected by alcohol or alcohol & drugs (61.3%, n1341) where known.<sup>47</sup> This was followed by criminal damage and robbery which were the next most likely at just over 50% of incidents.

National surveys report that victims believed their attacker(s) to be under the influence of alcohol in half of all violent incidents.<sup>48</sup>

In 2010/11, Portsmouth had a rate of 12.8 alcohol attributable crimes<sup>49</sup> per 1,000 population, a slight reduction of 2.4% on 2009/10 (13.2). However, this is still substantially higher than the average rate for the South East (7.7) and England (8.4). It is also still higher than the average for Portsmouth's most similar areas (10.6).

The alcohol attributable violent crime rate was 9.4 per 1,000 in 2010/11 which is a slight reduction of 1.4% from 2009/10 (9.6). Once again, this is higher than the South East and England averages (5.3 and 5.5 respectively), and is also much higher than the average for similar areas (7.2).

In 2010/11 alcohol related assaults (according to the ELNEP definition,<sup>50</sup> see Appendix F) have reduced by 7% (n68) from the previous year to n865 assaults in the night time economy (NTE) areas. However, this is still higher than the number of NTE assaults in 2008/9 (n806) and 2007/8 (840). The largest proportion of assaults continue to take place in the Guildhall area (33%, n287), followed by the Commercial

<sup>44</sup> <http://www.savedave.info/>

<sup>45</sup> Dis-proportionately so for burglary, theft, fraud & forgery and criminal damage.

<sup>46</sup> From raw police incident data provided by Hampshire Constabulary

<sup>47</sup> It is worth noting that it was not known or stated whether alcohol or drugs were an issue in 55% of all violence offences (it was just over 50% last year). While this could be due to fluctuations in the types of incidents where it can not be known, it could also hint that recording practices have worsened.

<sup>48</sup> 2009/10 British Crime Survey, Home Office.

<sup>49</sup> This is worked out by applying alcohol attributable factors to the rates of recorded crime for VATP, sexual offences, robbery, burglary, TFMV & TOMV.

<sup>50</sup> Incidents which occur in specified roads between the hours of 9pm and 5am.

Road (15%, n130) and Central Southsea areas (15%, n133). This is despite large reductions in the Guildhall area of 11%.<sup>51</sup>

There is a link between alcohol misuse and domestic abuse/violence for both perpetrators and victims. In Portsmouth, in 2010/11, where recorded 65.6% (n437) of domestic abuse violent offences indicated that alcohol was a contributing factor, which is slightly higher than the average for all other types of violent crime (approx 60%).

Alcohol Concern found that alcohol was a factor in 62% of offences and almost half of perpetrators were alcohol dependent. Furthermore, 97% of women survivors of domestic abuse had used alcohol to 'numb the pain'. 44-58% of males in treatment had perpetrated domestic abuse or violence, whilst two thirds of women in treatment had suffered violence by their partners in the last 12 months.<sup>52</sup> Home Office research on domestic violence offenders has shown that nearly three quarters had consumed alcohol prior to the offence.<sup>53</sup>

See the Violence section for more alcohol misuse information relating to NTE related assaults, domestic violence and violence data collected from the Emergency Department at Queen Alexandra Hospital.

Alcohol was also identified as a key underlying issue for many crime and disorder types by Hampshire Constabulary.

'Licensed premises' were recorded as a factor in 15% (n3,221) of all recorded crime cases in Portsmouth in 2010/11. This is much higher for specific crime types, such as shop theft (41%).

Overall, approximately one in five incidents that were defined as affected by alcohol were also linked to licensed premises. 59% (n475) of incidents in licensed premises (where the effect of substance misuse was known) were affected by alcohol, and alcohol and drugs.

Licensed premises were a factor in 14% (n706) of violence against the person offences, one of the highest rates for specific crime types. Of these offences, where substance use was known, 86% (n279) were affected by alcohol or alcohol & drugs.

Tackling alcohol misuse in Portsmouth's adult population can have positive knock-on effects for young people at risk. This was confirmed in a Recent Joseph Rowntree Foundation report that found young people are "more likely to drink, to drink frequently and to drink to excess" if they are exposed to a close family member, especially a parent, drinking or getting drunk.<sup>54</sup> This was recently highlighted in Portsmouth as part of the SPP's '*One Less Drink... What could one less drink mean for your kids?*' campaign.<sup>55</sup>

For more detailed information on alcohol misuse in Portsmouth please read:

- o Review of alcohol-related hospital admissions, 2011, Health Overview & Scrutiny Panel [http://www.portsmouth.gov.uk/media/hosp20110127r7\\_2.pdf](http://www.portsmouth.gov.uk/media/hosp20110127r7_2.pdf)
- o Portsmouth Alcohol Strategy 2009/13 <http://saferportsmouth.org.uk/index.php/priorities/alcohol-misuse/>
- o Joint Strategic Needs Assessment [www.jsna.portsmouth.gov.uk](http://www.jsna.portsmouth.gov.uk)

<sup>51</sup> See the Violence section: 'NTE related violence' for more info

<sup>52</sup> Alcohol Concern (2009) Knowledge Set 1: Domestic Abuse

<sup>53</sup> Gilchrest et al 2003 cited in Review of alcohol-related hospital admissions, 2011, Health Overview & Scrutiny Panel

<sup>54</sup> <http://www.jrf.org.uk/publications/young-people-alcohol-and-influences>

<sup>55</sup> <http://saferportsmouth.org.uk/index.php/campaigns/one-less-drink/>

## What is this telling us?

Alcohol remains a significant health and crime related issue in Portsmouth, however things are improving.

Portsmouth now has a similar proportion of hazardous drinkers to the South East and England average, and a lower proportion of hazardous, high risk and binge drinkers than our peers.

While alcohol related hospital admissions remain higher than for England, the South East and similar areas, the gap is narrowing as the rate of growth in Portsmouth is much lower than in other areas.

Although the number of males that die specifically from alcohol is higher than other areas, the number of females that die is showing some real improvement.

The capacity of treatment services to help people with alcohol issues (such as the Alcohol Specialist Nurse Service at QA Hospital and the Alcohol Intervention Team) are increasing rapidly in combination with targeted publicity (such as the Save Dave campaign) and focusing on the highest cost/most at risk people (such as the 'frequent flyers' interventions).

Males aged over 30 remain the largest group likely to experience alcohol misuse problems.

Alcohol is known to be a key driver for a range of crimes. Although the recording by police of whether an incident was affected by alcohol still needs improving, the information available does support national research that violent offences are the most likely to be affected by alcohol.

Although Portsmouth's alcohol attributable crime rate remains higher than our peers, assaults specifically related to the night time economy areas are showing improvements.

## Young people at risk - long-term underlying priority

### Risk Factors

Research into youth offending shows that there is a range of identifiable risk factors present in the lives of many children and young people.<sup>56</sup> Some risk factors or combination of risk factors significantly increase the likelihood of them becoming involved in criminal or anti social behaviour.<sup>57</sup> Earlier identification and intervention with these young people can provide an opportunity to engage them and bolster protective factors.

Further analysis was conducted to explore whether there were any prominent risk factors for first time entrants (FTEs) to the youth justice system in Portsmouth. Overall the most prominent risk factors appeared to be whether the young person was known to social services<sup>58</sup> (64%, n57 in quarter 4 2009/10), poor attendance at school and being excluded from school.<sup>59</sup>

In quarter 3 of 2009/10, it was found that only 41% (n25) of FTEs who had offended in that quarter and were of compulsory school age had an attendance rate of over 80%, while 49% (n30) had an attendance rate of less than 80%.<sup>60</sup> This was substantially less than the average attendance rates for Portsmouth.<sup>61</sup> 43% of FTEs had received fixed term or permanent exclusions, which is higher than would be expected for the average young person in Portsmouth (less than 11%<sup>62</sup>). These findings highlight the importance of youth crime prevention services working with young people who are often not thriving in school.

Just under a quarter (22%) of FTEs in quarter 4 2009/10 were known to the Challenge and Support team for ASB, but the sample size was too small to explore whether those who were known for ASB were more likely to commit a particular type of offence. This is an area that could benefit from further exploration. §

A mapping exercise was carried out as part of the 'Think Family Initiative' in 2009/10 to identify the most disadvantaged area of Portsmouth and families within that area experiencing two or more risk factors. The exercise found that Charles Dickens was the ward with the most families experiencing a range of risk factors including issues with education, anti social behaviour, mental health, domestic violence as well as substance misuse.

The SPP and Children's Trust Board<sup>63</sup> have worked together over the past 12 months to improve information sharing and effective working practices, including the development of the Children's Hub. However, public sector cuts and the subsequent re-configuration of youth support and offending services at the City Council has caused some uncertainty this year as to the focus of services in the future.

**TRIAGE** References to triage have been included in boxes throughout this section.

One of the major influences on youth offending this year has been the continuation of triage, also known as Youth Restorative Disposal.

<sup>56</sup> A full list of risk and protective factors can be found in last year's Strategic Assessment (Appendix 2.1)

<sup>57</sup> <http://www.yjb.gov.uk/en-gb/practitioners/InformationSharingandTechnology/InformationSharing/RiskFactorsbyAgency/>

<sup>58</sup> However, those known to social services are more likely to have other presenting risk factors.

<sup>59</sup> Challenge and Support – Penny Robinson

<sup>60</sup> The rate was not known for 10% of cases.

<sup>61</sup> For the academic year 2008/09, the average attendance rate for secondary schools was approximately 91%, although this decreased to 82% for special schools PCC Term Census Data – data for 2009/10 not available until October 2010

<sup>62</sup> It was only possible to find out the number of fixed term exclusions (n1,999) and not how many young people have received them. Therefore, based on the population of 10-17yrs, the maximum number of young people who could have received exclusions is approximately 11% as there is a strong likelihood that some young people would have received more than one exclusion.

<sup>63</sup> Children's Trust Board website: <http://www.portsmouth.gov.uk/learning/childrens-trust.html> and Children's Trust Needs Assessment 2011: [http://www.portsmouth.gov.uk/media/CYP\\_Childrens\\_Needs\\_Assessment\\_Final.pdf](http://www.portsmouth.gov.uk/media/CYP_Childrens_Needs_Assessment_Final.pdf)

Triage involves putting Youth Offending Team (YOT) staff in contact with the police to influence and discuss disposals and interventions to divert young people from being formally dealt with by the police, using a Youth Offending Team assessment and intervention as an alternative. This means that these young people had still committed an offence, but were considered at low risk of re-offending, so diverted from the youth justice system in this instance. It is too early to confidently predict the long term effects and effectiveness of this approach but the initial signs are promising. Only 10% of those that were referred to triage re-offended during the following 12 months, compared to a re-offending rate of approximately 20% for those issued with reprimands or final warnings.

Triage began in Portsmouth in December 2009, originally focusing on the city centre, but soon expanding city-wide. From January 2011, Wessex Youth Offending Team (YOT) has rolled triage out to all of their areas.

The majority of young people involved with triage would have been counted as young offenders, because before triage existed these young people would have received a Reprimand or Final Warning as a disposal.

However, since January 2011 the police have issued guidance to their officers that the scheme can now include young people who have previously received Reprimands and Final Warnings (i.e. not just FTEs), if the officer thinks appropriate i.e. smaller offences, length of time since Reprimand or Final Warning etc.

Triage will have a direct impact on the total number of young people counted as 'offenders' and first time entrants (FTEs) to the criminal justice system, the number and type of offences that are counted and the demographic make-up of young offenders. This should be borne in mind when interpreting the analysis below. E.g. just because the number of offences that were counted as crimes this year has decreased, we can not necessarily say that crime committed by young people has decreased this year, as an offence that would have been counted last year could have been referred to triage this year

Also, prior to January 2011, Portsmouth YOT dealt with all young people that had committed an offence in Portsmouth - regardless of where they were resident. From January 2011, each YOT only dealt with young people that were resident in their area - therefore those that weren't resident in Portsmouth but committed an offence here, would be dealt with by their own YOT. Therefore, approximately 11% of the young people included in the triage data used below were not resident in Portsmouth.

Due to potential double-counting and the other issues identified above, then we cannot simply add the number of triage offenders to those counted by the YOT as this would not paint an accurate figure. However, this has been done in the boxes throughout this section to help put the findings in context or to indicate what is likely to be a genuine change in Portsmouth rather than just an effect of the triage system.

## Offending

There are approx 17,000 young people aged 10-17 years currently resident in Portsmouth. The number of young people aged 10-17 years of age in the criminal justice system has decreased dramatically by 40% from 605 last year to 364 in 2010/11. This is almost a 50% reduction since 2007/08.

If those that were referred to triage in 2009/10 (n52) and 2010/11 (n244) are also counted as offenders<sup>64</sup> then there was actually a lesser, although still impressive, reduction of 7.5% in the number of young offenders from 657 to 608 in 2010/11.

<sup>64</sup> There may be an issue with this comparison as some of those referred to triage may not necessarily have been counted as offenders otherwise, and conversely some of those referred to triage could be double counted if they re-offended during/after triage in 2010/11 or had already offended during 2010/11 and were later referred to triage after January 2011.

The number of young people in the criminal justice system has been decreasing, both in terms of actual numbers and as a proportion of young people aged 10-17 years, since 2007/08. This means that approximately 2.1% (n364) of the population of 10-17 year olds in Portsmouth committed an offence during 2010/11 in comparison to 3.5% (n605) last year. This decrease in young offenders is part of an overall downward trend since 2003/04 when almost 5% (n801) of 10-17 year olds committed an offence.

Portsmouth is performing well compared to its neighbours Southampton (2.6%), Havant (2.6%) and Gosport (2.2%) but is still above the average for the Hampshire County Council area (1.7%).<sup>65</sup> Caution should be used when interpreting these figures as they don't take into account different rates and starting times of triage.

However, as those young people referred to triage in 2009/10 and 2010/11 would previously have counted as committing an offence, it is not comparing like for like. For illustrative purposes, combining the number of young offenders with the number of young people referred to triage was equivalent to approximately 3.8% of the population in 2009/10 and 3.5% of the population in 2010/11. This still shows a reduction but is much less of a dramatic change.

	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11
Number of young offenders	801	698	707	665	605	364
... as a proportion of the 10-17 population	4%	3.7%	4%	3.9%	3.5%	2.1%
Number of FTEs (rate per 100,000 10-17 year olds) [included in number of young offenders]	447 (2269 per 100,000)	357 (1869 per 100,000)	395 (2130 per 100,000)	399 (2325 per 100,000)	317 (1842 per 100,000)	128 (756 per 100,000)
Numbers referred to triage (not included in numbers of young offenders)	N/A	N/A	N/A	N/A	52 (from Dec 2009)	244
Number of offences by young offenders	1929	1513	1601	1369	1298	1208

### Type of offences committed by young people 10-17yrs

The number of offences committed by young offenders decreased by 7% (n90) from last year to 1,208 in 2010/11. This is almost a 25% reduction since 2007/08.

However, if triage offences were included (assuming one offence per young person referred to triage) then this would actually indicate an increase of 7.6% from 1,350 offences in 2009/10 to 1,452 in 2010/11.

The SPP ran a successful and high profile "shoplifting can ruin your life" campaign targeted at 10-17 year olds in the run up to Christmas 2010. This included an education pack & DVD to schools and youth groups across the city. This campaign was highly successful and, after taking into account those young people referred to triage, the number of young people caught shoplifting in this season was halved.<sup>66</sup>

Most offences committed by young men and women were given a YOT gravity rating<sup>67</sup> of 3 (half of all offences) or 2 (one in three).

<sup>65</sup> Based on Hampshire County Environment Department's 2010 based Small Area Population Forecasts and young offenders receiving substantive outcome.

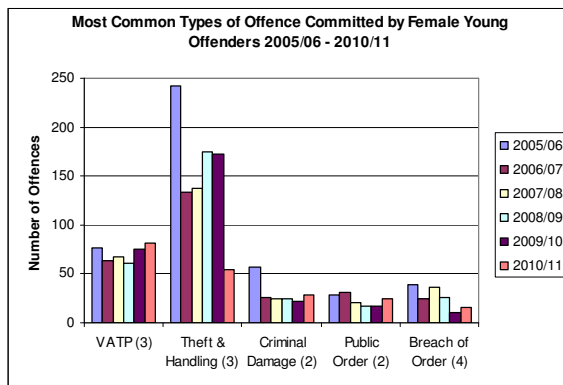
<sup>66</sup> [www.saferportsmouth.org.uk/index.php/download\\_file/view/263/270/](http://www.saferportsmouth.org.uk/index.php/download_file/view/263/270/) and <http://saferportsmouth.org.uk/index.php/campaigns/shoplifting-can-ruin-your-life/>

<sup>67</sup> YOT gravity rating on a scale of 1-8, 1 being the least serious

Theft and handling offences remained the most common type of offence for young men (29%, n257) of which the largest proportion was for shoplifting offences (29%, n75).<sup>68</sup>

While theft and handling also accounted for a large proportion of offences for young women (24%, n54), of which the majority were shoplifting offences (63%, n34), it was overshadowed this year by violence against the person (VATP) (36%, n82). VATP offences have previously been the second most common type of offence, accounting for approx one in five offences by young women. Now VATP is the largest offence type for young females, but because offences only increased by a small amount (n7) to 82 offences, this is mostly due to massive reductions in theft and handling rather than a significant increase in violence. As explained in the box below, this is mostly due to the large number of shop theft offences committed by young females that were dealt with by triage.

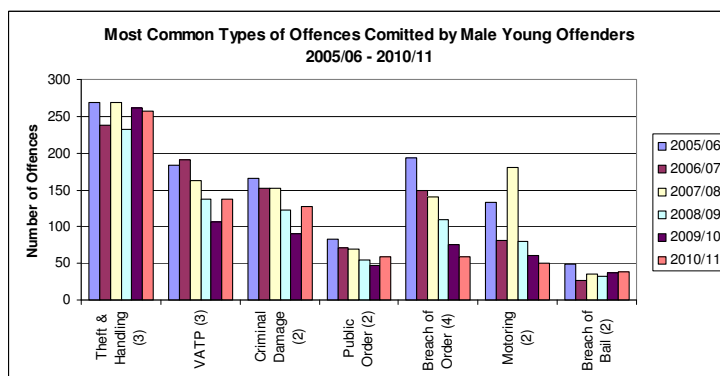
Research by the Youth Justice Board also found that data showed an increased number of convictions for young women for violent offences, but that it was not possible to directly attribute this to a 'real' increase in offences since self-reported data does not support such an increase. There is an hypothesis that young women are being prosecuted more readily for offences, particularly within a school setting which would have been dealt with differently in the past. Alternatively, it could suggest that violence has become normalised, and that violence by young women may have been under-reported in the past.<sup>69</sup>



The chart to the left shows the most common offences<sup>70</sup> committed by young women from 2005/06 to 2010/11, and includes the gravity ratings in brackets next to the offence type.

Common offences committed by young men cover a broader range than females, as shown in the graph below. In 2010/11, after theft and handling offences, VATP offences were the next

most common offence (16%, n138), closely followed by criminal damage (15%, n127). While this is a very similar pattern to previous years, it's worth noting the small increase in VATP and criminal damage in 2010/11 that go against the downward trend of the last four years.



Triage would have influenced/swayed/unbalanced the type and gravity of offences counted by the YOT as, almost by definition, offences referred to triage are generally low level, and the majority of offences (two in three) would be classed as a severity rating of 3.

<sup>68</sup> For more information on shoplifting, including a breakdown of the different characteristics of young male, young female and adult offenders, please see the 'Acquisitive Crime' section.

<sup>69</sup> YJB 2009: Girls and Offending – patterns, perceptions and interventions. <http://www.yjb.gov.uk/publications/Scripts/prodView.asp?idProduct=440&eP=> accessed 02/08/10

<sup>70</sup> Where an offence represented at least 4% of all offences.

Just under half (46%, n112) of offences referred to triage were for shoplifting and this was the most common offence category for both sexes. However this masks the detail that females were far more likely (70% of female triage referrals) to commit shoplifting than males (only 29% of male triage offences).

Overall, the next most common triage offence was criminal damage, representing 18% (n44) of offences, followed by assault representing 9% of triage offences. However, this also masks the detail that males were far more likely to have been referred for criminal damage, accounting for a quarter of male triage offences but only 8% of female triage offences. Females were just as likely to be referred for assault as for criminal damage. Males were equally likely to be referred for assault (10%) as for possession of class B drugs (10%).

To take account of the effect of triage, and to provide a rough indication of trends, triage offences were added to the offences recorded by the YOT. Results are split by gender but information was not available to split offences by age as well.

This had the largest affect on shoplifting offences. For young females, this crime type increased dramatically from n34 (13.5% of all offences) to n104 (29.5%). This had a knock on-effect on the theft and handling category, of which shoplifting went from accounting for 63% to 83%, which increased from 21.4% to 35.5% of all offences.

For females, although there was a small increase in the number of VATP offences, from n88 to n97, this was overshadowed by the massive increase in shop theft offences which meant VATP went from accounting for 35% of all offences to 27.6%. Therefore, when taking account of triage offences, the relative size of VATP was much less than theft and handling (including shoplifting) which is more in line with previous trends.

There was a less dramatic change for young males, with shoplifting increasing from n75 (7.9% of all offences) to n117 (10.6%) and accounting for 37.5% (from 29%) of theft and handling. This only increased theft and handling as a proportion of all offences from 27% to 28.4%. There were generally no significant changes to the proportion of male offence types, and it just emphasised existing trends. For example, small increase in possession of cannabis and in criminal damage.

Serious acquisitive crimes (burglary, robbery and vehicle crime) aren't the most common types of offences committed by young males (although still accounting for approximately n85, 7.8% of offences committed, or referred to triage, by young males). However, it is worth noting that, even after taking account of triage, no young females were charged with robbery or burglary and there was only one vehicle crime offence (taking without consent).

Hampshire Constabulary's District Strategic Summary 2010/11 notes that:

For domestic burglary offences "the percentage of offenders aged under-18 increased from 20% to 25% in this period. These youths commonly reside in lower income areas and have progressed through low-level crime and ASB into burglary. Offending is equally about financial gain as it is peer pressure."

Similarly, for theft of motor vehicles "the peak age group for offenders is 17 – 21 years. This is indicative of youths who are seen to escalate their offending behaviour from ASB up to serious acquisitive crime."

Theft from motor vehicle offences "are predominantly committed by young males who are known to police for ASB and low-level acquisitive crime."

### **Offender Profiles**

With the large reduction in the number of young offenders this year, some caution is needed in interpreting trends in gender and age. In 2010/11, seven out of ten young

offenders were male (71%) and three in ten were female (29%). This shows a turn-around in relation to the increasing proportion of young female offenders seen for the last two years.

However, 42% (n100) of those referred to triage were female. If those young people referred to triage were added to the total number of young offenders then there would have been a 65.5% male to 34.5% female split in 2010/11. This would indicate that the trend for an increase proportion of female young offenders was not turning around and was becoming the norm since 2008/09.

For male young offenders, there was a reduction in absolute numbers across all ages except 10 yr olds. There is not one clear peak age for males, as the majority of male offenders (74%) are spread across the 15-17 yr age group. This is broadly consistent with previous years when 16 was the peak age.

In 2010/11, the female offender group more closely resembled the age breakdown of male offenders, with a peak age of 17 (the peak age was younger in previous years, mostly 14 and 15) and the number of female offenders noticeably increasing with age. The proportion of 12 and 14 yr olds decreased, while the proportion of 16 and 17 yr olds increased to account for approximately half of young female offenders.

For triage referrals, both genders follow the same pattern beginning with a low proportion of referrals for 10 year olds, which increases up to the peak years of 13 to 15, before starting to decrease, but remaining relatively high, for 16 and 17 year olds.

The main difference is that males are more evenly spread across the age ranges, while the peak of females in years 13 to 15 are more pronounced.

Combining the ages of offenders recorded by the YOT and for triage, and comparing to recorded ages shown above shows:

- Older males (15-17 year olds) still represent the peak ages, but account for less of the total and are more in line with levels seen in previous years. There is an increase in the relative size of lower ages, also in line with previous years.
- For female offenders, the peak age is now 15 years and although the proportion of 16-17 remains higher than previous years they represent a smaller proportion that decreases with age. Massive increase in proportion of 13 year olds, almost doubling to 18%, similar to levels seen in 2008/9. The big reductions in 14 yr olds compared to last year were maintained.

Black (African, Caribbean, UK, European and Other) young offenders remain over-represented, whilst Asian, Chinese and young offenders of mixed ethnicities were under-represented in the youth justice system.

A disproportionately high number of young offenders were again resident in Charles Dickens ward (rate of 3,717 per 100,000 young people aged 10-17yrs, n62) compared with other wards, followed by St Thomas (3,141 per 100,000, n31) and Paulsgrove (2,941 per 100,000, n46).

Looking only at the 89% (n219) of those triaged who were resident in the city, the largest number of young people on the triage scheme (48, 22%) were from the PO1 area (which includes the city centre and Charles Dickens ward). This area was the most over represented as it only accounts for 13% of Portsmouth's young people.

Despite the PO6 area (Paulsgrove, Cosham and Drayton and Farlington) accounting for a relatively large proportion (20%) of triage offences, it was in fact under represented as that area accounts for 25% of Portsmouth's young people.<sup>71</sup>

<sup>71</sup> As previously mentioned, some caution should be taken in interpreting this as for three quarters of the year this only includes those young people that committed an offence in Portsmouth.

### First Time Entrants (FTEs)

The rate of FTEs to the youth justice system (formerly NI 111) has seen a dramatic reduction of almost 60% from 1,842 per 100,000 of young people aged 10-17 years (n317) in 2009/10 to 756 per 100,000 (n128) in 2010/11. This is a very positive outcome and is significantly lower than the reduction target for NI 111 of (2,000 per 100,000, n343). The rate in Portsmouth is now below the average rate for the Wessex area (857).

Nationally, the number of FTEs to the youth justice system has been decreasing every year since 2006, 28% on last year and 55% since it peaked in 2006. The rate in Portsmouth is now lower than the national rate of 941 per 100,000.<sup>72</sup>

If triage referrals were included,<sup>73</sup> the number and rate of FTEs would have remained practically the same for the last two years. There would have been 369 FTEs in 2009/10 and 372 FTEs in 2010/11 equating to a rate of approximately 2,180 per 100,000 10-17 yr olds in 2010/11. It is worth noting that this is still a reduction on the FTE rates seen in 2008/9 and previously but the reduction targets for 2010/11 would not have been met.

The most common types of offences committed by FTEs are very similar to those committed by all offenders, and are mostly gravity three (half) and gravity two (one in three).

In 2010/11, female FTEs were most likely to commit theft and handling offences (41%, n17) of which the majority are shop lifting (65%, n11), or VATP offences (27%, n11). Although the number of offences is a lot lower this year, the most common crime types are similar to last year.

Male FTEs committed a broader range of offences including theft and handling offences (28%, n32) of which half are shop lifting (53%, n17), VATP offences (18%, n21), criminal damage (11%, n13) and motoring offences (10%, n11). Although the number of offences is also a lot lower this year, VATP has increased in relation to the other crime types compared to last year (12%, n28).

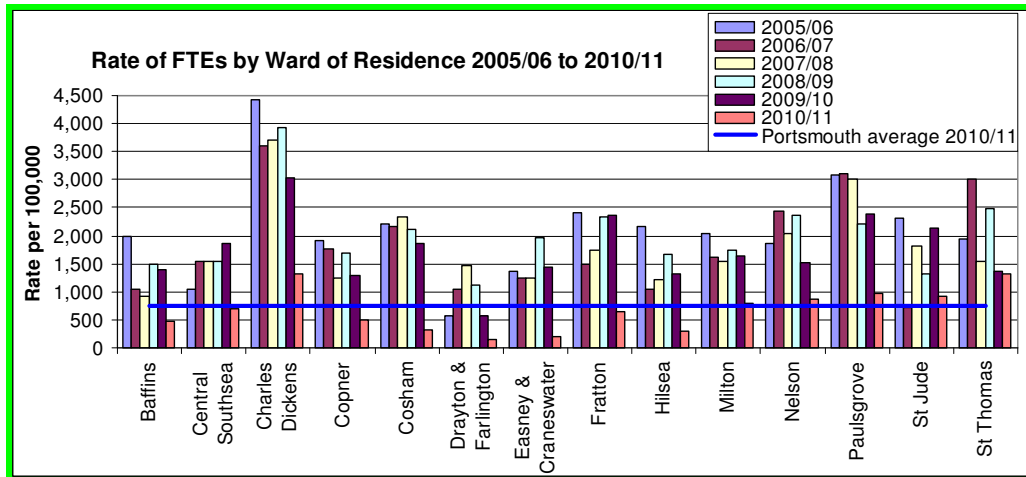
There was a return to 70% male to 30% female FTEs not seen since 2007/08.

The peak age for female FTEs was 17 years, a big change from previous years when it has been lower at around 14 years. The peak age for male FTEs remains at 16 years. The demographics of FTEs are very similar to that for all offenders.

As for all offenders, the highest proportion of FTEs in 2009/10 lived in Charles Dickens ward (1,319 per 100,000) closely followed by St Thomas ward (1,317 per 100,000). The graph below shows the rates for all wards in comparison with the average rate of FTEs for Portsmouth overall. While the absolute number of FTEs has decreased across the city, the most notable difference is in Fratton which has moved from the third highest rate to the eighth.

<sup>72</sup> Please note that these figures relate to the calendar year January to December.

<sup>73</sup> This assumes that all those young people referred to triage would otherwise have counted as FTEs, ignoring the possibility of double counting and the change in the triage threshold (to include previous offenders) from January 2011.



Using the flawed assumption that all triage offences were potential FTEs and ignoring the possibility of double counting or including those offenders not resident in Portsmouth, then combining the triage data with FTE data gives the following indications:

For young female FTEs, theft and handling are still the most common offence but a lot more prolific, increasing from 17 (41% of all offences) to 88 (59%), the majority of which is due to an increase in shoplifting offences from 11 (23% of all offences) to 81 (44%). Although the absolute number of VATP offences increases, its relative size as a proportion of all FTE offences decreases from 27% to 14%.

Triage data supports the statement that young males commit a broader range of offences than females. The order of the most common offences changes slightly with theft and handling remains the most common offence (33%, n87), mostly due to shop theft (22.6% of all offences, n56), this is now followed by criminal damage (19%, n49) and then VATP (18%, n46). This order is very similar to that seen for male FTEs last year. The real change is that criminal damage and VATP are approximately 50% more common.

The male to female split would be 63% male to 37% female.

Compared to the ages solely from FTE data, the peak age for females drops to 15, closely followed by 13 years, when triage data is included. The relative size of the 16-17 age range is reduced compared to that indicate by the FTE data alone, but this is still an increase on previous years' rates.

The peak age for males also drops to 15, then declines as age increases. Although the 15+ age group still account for a relatively large proportion of FTEs, this is less than that indicated solely by FTE data and less than in previous years.

### Repeat offending

At the end of 2010/11 the rate of re-offending per 100 young offenders (formerly NI 19)<sup>74</sup> in Portsmouth was 180.7 per 100, which does not meet the SPP target of 156. This is despite excellent performance last year. This rate was worse than the overall Wessex and Hampshire rates (147 and 137 respectively) but below Southampton (210). This headline rate hides some of the detail and masks some of the more positive results, such as a significant reduction in the number of offenders (from 209 to 140 in the cohort<sup>75</sup> from January-March 2010) and the total number of offences only increasing marginally (from 239 to 253). It is possible that this is an unintended

<sup>74</sup> This rate is the number of offences committed by the cohort during a one year follow up period which resulted in a conviction in court or an out of court disposal per 100 offenders.

<sup>75</sup> The cohort includes all those receiving a pre-court disposal (reprimand or final warning) or a first-tier or community penalty or who are released from custody.

knock-on effect from the positive work achieved, such as triage, in reducing the number of first time entrants to the youth justice system, in that those left in the cohort are the more prolific offenders.

Alternatively, if a re-offender is simply defined as a young person who had previously entered the youth justice system prior to 1<sup>st</sup> April 2010 and committed at least one offence in 2010/11 [i.e. not a FTE in 2010/11] then there were 236 young re-offenders in Portsmouth in 2010/11. They were responsible for 987 offences. This simple definition does not include a FTE who committed their first offence in 2010/11 and went on to commit further offences throughout the year.

### Outcomes resulting in custody

In 2010/11, 4.3% (21 out of 484) of young offenders received a custodial sentence.<sup>76</sup> This is a small increase on previous year's rates of 2.6% (15 out of 580) in 2009/10 and 3.6% (n22/606) in 2008/09, but still below previous highs of 6.3% in 2007/08. Although Portsmouth has a similar rate to Southampton (4.3%) this year and is not that much higher than the rate for the whole of the Wessex area (3.5%), both of these comparator areas had improved on the previous year whereas Portsmouth had worsened.

Each young person who receives a custodial sentence costs £140,000 a year on average.<sup>77</sup> Therefore, this reduction in custodial sentences has led to substantial financial savings in the past few years and the YOT have reported that this has enabled further investment in other areas such as prevention and working with young offenders.

### Education, Training or Employment figures

The indications are that young offenders' engagement in education, training and employment is a key protective factor against re-offending. This indicator measures the proportion of young offenders who are actively engaged in education, training or employment.<sup>78</sup>

This has been steadily creeping towards the target of 70% for the past few years, almost achieving it in 2010/11 with 69.96% (191/273). Portsmouth has one of the highest rates in the Wessex area and is better than the Southampton and average Wessex rates of 63% and 66% respectively.

### Offending by Looked After Children

At the end of 2010/11 a looked after child was 3.6 times more likely to have offended than the average young person in Portsmouth.<sup>79</sup>

This is a slight increase on the last two years, where the rate was only about 2.9. This could be due to LAC being likely to have more risk factors present in their lives and less protective factors than the general population of young people in Portsmouth.

The proportion of offenders amongst LAC (10% for 2010/11) is substantially higher than the proportion of young offenders aged 10-17 in Portsmouth overall (approx 2.2% for 2010/11). In addition, Portsmouth does not compare favourably with the DCSF England average of 7.9% for LAC.

<sup>76</sup> This formula represents the number of young offenders who received a custodial sentence as a proportion of those receiving a sentence. Formerly NI 43.

<sup>77</sup> Youth Justice Board, Second Annual Letter to Local Authority Chief Executives on Use of Custody for 10-17 year olds in England.

<sup>78</sup> Formerly NI 45. Active engagement is counted as at least 25 hours, (and those above statutory school age at least 16 hours), of Education, Training and Employment (ETE) in the last full working week of their disposal.

<sup>79</sup> Rate of offending by LAC, LAA indicator 10.12. This indicator actually represents how much more likely it is that a young person who is looked after by the local authority will offend than the general population of young people in Portsmouth (aged 10-17 years).

Analysis of cohort data<sup>80</sup> for 2006/07 to 2008/09 found that assault was the most common offence (24%, n40), followed by criminal damage (17%, n29) and theft (16%, n27). Five young people (16% of those who committed offences during the qualifying time periods) were responsible for committing more than half (53%, n85) of the offences. The offences were mostly committed during the day and early evening (between 9am and 6pm) and were distributed fairly evenly throughout the week, peaking on a Friday.

Overall, most offences took place in Milton ward, due to a large number of repeat offences at Lightfoot Lawn Children's Home, and further offences taking place near to Bransbury Park and Milton Allotments. The Harbour School in Tipner, Skye Close Children's Home in Cosham and Tangiers Road Children's Home in Baffins were also common repeat locations. It is possible that the higher numbers of offences at these locations could be due to staff at these premises being more likely to report fights or a child 'kicking off' to the police than a parent dealing with fighting siblings or an angry child at home.<sup>81</sup> More work is needed to explore the levels of offending by LAC before they were in care, compared with during and after being in care, so this remains on the Research and Analysis Programme. §

**Violence and young people** - See the Youth section of the Violence Section for more information.

For the purposes of this report, youth violence relates to assaults where either the victim or offender or both is aged between 10 and 17 years. During 2010/11 there were 689 youth related assaults. This is an absolute reduction in the number of assaults (n51) and a reduction in the proportion of all assaults compared to last year, although it remains the second largest driver of violent assaults

However, in 80% (n550) of these youth related assaults the victim was aged 10-17yrs whereas the offender was a young person in only 27% of cases (n185).

There was therefore a crossover of 'youth on youth' violence, where both the offender and the victim are young people, which only accounted for 6.7% (n46) of youth related assaults. This is a noticeable reduction on last year (10.3%, n90). This is consistent with previous analysis<sup>82</sup> which has shown that young people are more likely to be the victim of violent offences than the perpetrator.

### Young people as victims

According to the 2010/11 British Crime Survey extension covering 10-15 year olds, a higher proportion of young people were victims of violent crime than adults; 3.1% of adults were victims of a violent crime compared to 6.9% of 10-15 year olds. Violent crime accounted for two thirds of crime experienced by 10-15 year olds and 80% of these incidents resulted in injury to the victim (the majority being minor bruising or black eyes).

In Portsmouth, "University students and a transient young population are the main targets for domestic burglary. Rented accommodation, including houses of multi-occupancy, are particularly targeted." "Victims of personal robbery are often young males affected by alcohol."<sup>83</sup>

Further analysis is still required to find out more about offenders where young people are the victims of violence and remains on the Research and Analysis Programme. §

There is a significant mismatch between perceptions of youth crime and the reality, with research showing approximately 135% over estimation. Focus groups

<sup>80</sup> There were 55 young people overall in the three cohorts, and 169 offences were committed by these young people during the time periods considered.

<sup>81</sup> SPP Briefing note: Offending by Looked After Children, Hogan May 2010

<sup>82</sup> TKAP CDRP Problem Profile, Feb 2010 by S. Hogan & Violence in Portsmouth 2006-2009, Jan 2010, by P. Moorman

<sup>83</sup> Portsmouth District Strategic Summary 2010/11, Hampshire Constabulary

conducted in July 2010 with difficulty to reach sections of the community ascribed almost one in four of the incidents that they had experienced to either individual young people or groups of young people, which does suggest that young people are seen to be involved in a notable proportion of ASB.<sup>84</sup>

The SPP has tried to address this bad image of young people through 'The Kids Are Alright' publicity campaign.<sup>85</sup>

## Young people and substance misuse

The last Tellus4 survey in 2009 showed that 12.8% of pupils in Portsmouth reported frequently misusing substances (including alcohol, illegal drugs and volatile substances). This was a slight decrease on the previous year's, but was still the second highest in the South East, after Brighton and Hove. This was also substantially higher than the South East and national averages of 9.8%.

This survey has been discontinued, so a local survey has been created to continue the collection of this useful information. Full details can be found in Sue Knifton's "School Substance Misuse Survey 2011" and a summary is provided below.

This survey was completed between March and July 2011, with 1,219 responses (the last TellUs Survey only received 647 responses from Secondary Schools) in 8 out of the 11 secondary schools in Portsmouth. The survey was completed anonymously by year 8 and year 10 students (the majority of which are aged between 12 and 15yrs).

Caution should be taken in comparing this to the TellUs Survey, but comparisons have been provided below to give a rough indication of any changes.

Young people in Portsmouth:

- Just under half of young people find advice on alcohol and drugs helpful (*decrease from TellUs Survey 53% and 58%*).<sup>86</sup>
- 68% reported that they had had an alcoholic drink (*increase from TellUs Survey 50%*)
- 55% reported they have never been drunk, but 9% stated that they had been drunk three or more times, 7% twice and 14% once within the last four weeks.

Girls were slightly more likely to have been drunk three or more times in the last four weeks than boys. Alcohol is the most commonly used substance and the main reason given for drinking is "It's normal, everyone does it", followed by "My friends do it" and "I like the way it makes me feel".

Parents providing alcohol was stated by young people as the main way alcohol is obtained (29%), closely followed by "other" (which could be because the respondent doesn't obtain the alcohol themselves e.g. from friends) and "bought with money from parents". However, in a survey of parents<sup>87</sup> less than 2% of parents responded that their child drinks alcohol provided by them outside the home, although 21% of parents responded that their child drinks alcohol at home with the family on special occasions.

Cannabis is the most commonly used drug, with approximately 9% of young people reporting they are using it at least monthly (2.8% daily).

Legal highs were the second most commonly used drugs followed by solvents, although approximately 94% of those surveyed had never tried either.

<sup>84</sup> Report on Anti Social Behaviour 2010 (learning Links, Rosie Wynn)

<sup>85</sup> <http://saferportsmouth.org.uk/index.php/campaigns/the-kids-are-alright/>

<sup>86</sup> The Alcohol and Substance Misuse Support worker posts within HIDS were not available to provide sessions in schools during most of 2010.

<sup>87</sup> Parents Substance Misuse Survey 2011, Sue Knifton, July 2011. Based on 157 responses from parents attending parents' evenings with children between 11-16 (however majority were 11-13 years old, so younger than those completing School Survey).

“I like the way it makes me feel” was stated as the main reason for trying drugs, followed by “my friends do it”.

The British Crime Survey (Drug Use Declared 2010./11) found that nationally, around one in five young people aged 16 to 24 had used one or more illicit drugs in the last year (20.4%). Use of any illicit drugs among young people has fallen since 1996 (29.7%), in large part due to a decline in the use of cannabis.

In Portsmouth, the number of under 18 year olds admitted to hospital with alcohol specific conditions (60 per 100,000 population) was not significantly different to the South East (52) or England average (62), but was significantly lower than Southampton (112) and Brighton and Hove (89).<sup>88</sup>

The following is a brief summary of the key findings from Sue Knifton’s *Portsmouth Young People’s Substance Misuse Services, Needs Assessment 2010*. An update of this will be available by October 2011 and this section will be updated accordingly.

- The Department of Health identifies 1,783 young people in Portsmouth at high risk of binge drinking. Glasgow Estimates suggest that the number of PDUs for the 15 to 25 age group is 227, which would indicate that the vast majority of young people in Portsmouth begin using opiates and/or crack cocaine after the age of 18.
- For the age group 11 to 18, the vast majority of clients (n28) are presenting with alcohol and cannabis as the main drug of choice. New substances such as Gamma-butyrolactone (GBL), Spice and Mephedrone are becoming more popular.
- The two most common reasons for a young person being admitted to hospital were Alcohol Poisoning and Mental and Behavioural Disorders due to use of alcohol.
- Only 3 young people were referred to E’s Up (Young People’s Specialist Substance Misuse Service) by A&E in 2008/9 and none in 2009/10. There has been a reduction in referrals to Young People’s Specialist Treatment from 60 to 40 in 2009/10 and a reduction in referrals to Health Improvement Development Service substance misuse worker from 19 in 2007/08 to 10 in 2009/10. There has been no recorded needle exchange activity for under 18s.
- Young people are being retained in treatment in E’s Up for twice as long as regional and national average. Twelve of the clients retained in E’s Up for more than 12 months are multiple offenders and have committed between 29 and 115 offences. 104 drug related offences by under 18’s were recorded in 2009/10. 23 of these offences related to Class A drugs. 80% of the 205 substance misuse related crimes committed by young people last year were alcohol related, 65% of these offences (n107) were violence against person.
- There is a need to ensure that the universal young people’s work force is able to identify substance misuse issues and make appropriate referrals.

In 2009/10, none of the young people in treatment in Portsmouth were opiate and/or crack users. Over a third (37%) of young people in treatment stated alcohol as their primary, secondary or third drug, although the proportion with alcohol as their primary drug (21%, n15) was less than the South East (SE) average (36%). The opposite was seen for cannabis, which was the primary drug for 71% (n50) of young people in treatment and was much higher than the SE average (54%). Hospital stays due to substance misuse<sup>89</sup> were higher in Portsmouth (64 per 100,000 aged 15-24) than the SE average (51), whereas hospital stays due to alcohol were close to the SE average at 57 per 100,000 under 18 year olds.<sup>90</sup>

### What is this telling us?

One of the major influences on youth offending in Portsmouth this year has been the continuation of triage (also known as Youth Restoration Disposals). Triage involves putting Youth Offending Team staff into police custody suites at peak times to assess whether it is possible to divert young people from being formally dealt with by the police using a Youth Offending Team assessment and intervention as an alternative. This means that these young people had still committed an offence, but were considered at low risk of re-offending, so diverted from the youth justice system in this instance.

<sup>88</sup> NWPFO. Does not include attendance at A&E. 2007/08-2009/10

<sup>89</sup> Directly standardised rate per 100,000 (age 15-24 years), 2005/06-2008/10, ChiMat, HES

<sup>90</sup> SEPHO Drug and Alcohol Action Team (DAAT) profile: Young People. April 2009 – March 2010

Without taking triage into account, the headline rates for young offenders show massive reductions in the number of young people in the Youth Justice System, dropping by 40%, and the number of offences they were responsible for dropping by a quarter. There is also a dramatic reduction in the number of first time entrants to the youth justice system, of almost 60%, making it a much lower rate in Portsmouth than the Wessex and national average.

However, if triage is taken into account and the possible issues of double counting are ignored, then there has been a lesser, but still impressive, reduction in the total number of young offenders but an increase in the number of offences they are responsible for. If all those referred to triage were counted as first time entrants, then there would not have been any change in the number of first time entrants from last year.

It could therefore be inferred that the real reductions are being made with the number of young people who re-offend this year, rather than with first time entrants. This could be a positive knock on effect of the triage last year, and/or that resources are freed up to deal with re-offenders rather than low-level first time entrants. However, poor performance this year with the re-offending rate (previously NI 19) and the slightly higher number of young people receiving custodial sentences would counter this inference.

Those referred to triage include a high proportion of young females and shoplifting offences, so this needs to be taken into account when interpreting the Youth Offending Team information on young offenders. For example, while the police recorded information shows the alarming trend that violence against the person is the most common offence by young females, this is soon overshadowed if triage offences are included as the most common offence for young females reverts back to shop theft.

When taking account of triage offences, males continue to commit a broader range of offences than young females, the most common being shop theft, criminal damage and violence against the person.

The peak age range for males is 15-17, while it is younger for females at 15 (and even younger for female first time entrants).

A disproportionately high number of young offenders were again resident in Charles Dickens ward compared with other wards. This was supported by triage data.

The proportion of young offenders engaged in education, training or employment (a key protective factor against re-offending) is higher than Southampton and the average for the Wessex areas.

Young people in Portsmouth are far more likely to be the victim of an assault, rather than an offender, and the proportion of 'youth-on-youth' violence remains low.

Alcohol remains the most commonly used substance by young people. Parents providing alcohol was stated by young people as the main way alcohol is obtained, although a survey of parents had contradictory findings. Cannabis remains the most commonly used drug of young people, although usage is declining nationally.

Last year this section noted the importance of continuing to work with young offenders and to identify young people at risk of offending as early as possible, ensuring that they are engaged with services which can bolster protective factors. This is particularly important for education services, adult social care, substance misuse services and family intervention project, in line with the 'think family' ethos as well as targeted youth crime prevention services. The planned reconfiguration of youth services in the city may have an impact on the consistency of this work in the next 12 months and the Safer Portsmouth Partnership should monitor carefully.

## Drug misuse - long-term underlying priority

Problem drug use by individuals can have wide reaching effects, not just on the drug user, but on their family and the community. The drug user may experience a range of difficulties, from health problems through to accommodation and relationships. Families may be disrupted and suffer neglect or even abuse and cause concern to neighbours. The cost to the community and public services ranges from drug related crime, increases in sexually transmitted and blood borne viruses infections (such as Hepatitis B & C and HIV), drug litter and the costs associated with policing, health care, social care and prison services.<sup>91</sup>

While we have information about people who seek treatment for drug addiction in Portsmouth, very little is known about recreational drug use locally. The British Crime Survey (BCS) collects data on self reported drug use by 16-59 year olds across England, and can give an indication about what is likely to be happening locally.<sup>92</sup>

The 2010/11 BCS findings show that:

- Overall use of illicit drugs in the last year remains close to the lowest levels measured by the BCS since 1996. 8.8% of adults reported using illicit drugs in the last year in comparison to 10.1% in 2008/09. The number of adults using illicit drugs in the last month has also decreased to 4.8% from 5% in 2009/10.
- This could equate to approximately 12,100 people using illicit drugs in the last year, and 6,600 using illicit drugs in the last month in Portsmouth.<sup>93</sup>
- Reported class A drug<sup>94</sup> use in the last year was lower in 2010/11 (3%) than in the previous two years, although this has remained fairly steady since 1996. However, there were small, but statistically significant, changes from last year in a decrease in powder cocaine use (to 2.1%) and an increase in methadone (to 0.2%).
- Cannabis remains the most commonly used drug (6.8% in the last year) followed by powder cocaine (2.1%) and ecstasy (1.4%). However, usage in the last year has decreased for both powder cocaine and ecstasy. Mephedone (also known as meow meow) was included in the survey for the first time this year, with 1.4% of adults reporting use in the last year; a similar proportion that had used ecstasy.
- Levels of drug use for men were more than twice as high as those for women.
- Levels of drug use increased with increasing frequency of alcohol consumption e.g. 12.3% of adults who consumed alcohol on three or more days per week had used an illicit drug in the last year, compared to only 6.1% who drank but on less than one day per week.

Another source of information which can add to the local picture of drug use is drug related hospital admissions. The 2008/09 Strategic Assessment found that most types of admission had reduced but that mental and behavioural disturbances from multiple / psychoactive drugs had increased year on year since 2006/07. Data for 2009/10 has shown that this type of admission has now reduced substantially (by 56%, n18 since 2008/09, and by 48%, n13 since 2007/08). The most common types of admission in 2009/10 were due to:

- poisoning by analgesics, antipyretics and anti-rheumatics (which are over the counter or prescription drugs, not illicit, which have either been misused deliberately or have contributed to an accidental overdose)

<sup>91</sup> SEPHO: Choosing Health in the South East: Problem Drug Use 2006

<sup>92</sup> Drug Use Declared

<sup>93</sup> ONS mid-2010 population estimates, based 137,300 15-59 year olds in Portsmouth.

<sup>94</sup> Class A drugs under the Misuse of Drugs Act at time of publication are: powder cocaine, crack cocaine, ecstasy, LSD, magic mushroom, heroin, methadone and methamphetamine.

- mental and behavioural disorders due to the use of opioids (e.g. morphine / codeine) and
- poisoning by narcotics and psychodysleptics (e.g. opium, heroin, methadone, cannabis or LSD)

During 2009/10 there was a reduction in drug-related hospital admissions overall of 8% (n71) since 2008/09 and 1.7% (n14) since 2007/08. This is a positive finding, which could indicate that the use of illicit drugs is reducing locally as well as nationally. However, we do not know if this trend has continued as the Hospital Trust were unable to provide any data this year.

Portsmouth has the highest rate of drug related hospital stays (212.8 per 100,000 population) in the South East, and is substantially higher than the South East average of (77.6 per 100,000).<sup>95</sup>

There were 12 drug related deaths in Portsmouth in 2009, a higher rate (7.3 per 100,000 population) than the South East average (4.2).<sup>96</sup>

The SPP's Drug Market Questionnaire (2009)<sup>97</sup> surveyed drug users accessing a range of services and found that respondents believed that the use of many drugs, including anti depressants, benzodiazepines, cocaine, crack, heroin, skunk and street methadone had increased in the last year. Comments about mixing alcohol with drugs or cocaine with other drugs such as ketamine, crack or cannabis could indicate that more young people are experimenting with a variety of drugs on a night out. However, some caution should be attached to this, as this perception may be a result of their experience of drug use changing as they have become more absorbed into a drug taking culture.

The drug market survey will be re-run in late 2011. One of the expected changes is that the use of the internet will have increased as a method of accessing drugs based on anecdotal evidence and an increase in barbiturate related hospital admissions.

Results from a survey of cocaine use by Portsmouth University students in 2010 found that<sup>98</sup>:

- 20% of respondents reported that they knew where to obtain cocaine in Portsmouth (this was a 10% decrease on the previous year). The majority of these respondents had lived in Portsmouth for at least a year.
- 13% stated they had been offered cocaine on a night out in Portsmouth in the last year (this was an 8% decrease on the previous year).

### Treatment Services and Problematic Drug Users

There is a new national Drug Strategy 2010, '*Reducing Demand, Restricting Supply, Building Recovery: Supporting People to Live a Drug Free Life*'<sup>99</sup> The strategy has recovery at its heart and:

- puts more responsibility on supporting individuals to achieving recovery and overcoming dependency
- places emphasis on providing a more holistic approach, by addressing other issues in addition to treatment to support people dependent on drugs or alcohol, such as offending, employment and housing
- aims to reduce demand
- takes an uncompromising approach to crack down on those involved in the drug supply both at home and abroad

<sup>95</sup> SEPHO: DAAT Profile April 2009 – March 2010 (based on Hospital Episode Statistics for 2007/08 to 2009/10)

<sup>96</sup> SEPHO: DAAT Profile April 2009 – March 2010

<sup>97</sup> A repeat questionnaire did not take place in 2010/11.

<sup>98</sup> Cocaine Use by University Students in Portsmouth, 2010, CS Researchers. Based on anonymous survey of 191 respondents at Portsmouth University Freshers Fair.

<sup>99</sup> <http://www.homeoffice.gov.uk/publications/alcohol-drugs/drugs/drug-strategy/drug-strategy-2010?view=Binary>

- puts power and accountability in the hands of local communities to tackle drugs and the harms they cause.

Although approximately one in three people will try illicit drugs in their lifetime, only a small proportion will go on to develop problems such as physical and psychological dependency, social isolation, physical and mental illness or commit criminal offences. Problem Drug Users' (PDUs) refers to the use of opiates and/or crack cocaine. There were an estimated 1,403 PDUs in Portsmouth in 2008/09, or approximately 1% of those aged 15-64.<sup>100</sup> This is a higher proportion than the South East average of 0.6%.<sup>101</sup> The highest number of PDUs (n525) were aged 25-34 years, representing 1.6% of this age range.

In 2010/11 there were 658 problem drug users effectively engaging in drug treatment. This is 7% (n45) more than the 2007/08 baseline and close to the target for planned increase of 667 a year by March 2011. This means that approximately 47% of PDUs in Portsmouth are in effective treatment, (which is similar to the average of 48% for PCT comparator areas last year).<sup>102</sup>

In 2010/11 there were 733 adults effectively engaging in drug treatment. Almost a third (32%, n99) of all adults had planned exits.

During 2010, approximately 70% of clients were male, and 30% were female (no change from last year)<sup>103</sup>, which is a slightly higher number of females in treatment than the South East Average of 28% for 2009/10.<sup>104</sup> There is no clear evidence to suggest that women are under-represented in drug treatment programs, largely because prevalence data shows that more men than women use illicit drugs.<sup>105</sup> Regular drug misuse is a risky activity to which men are more likely to be attracted. Using NTDMS data for 2008/09 analysis revealed some differences in the profiles for men and women. Women tended to enter treatment at a slightly earlier age than men (30yrs and 32yrs), which is on average seven years after first taking the drug upon which they are dependent (whereas men waited on average 9yrs). Females were also more likely to seek help for themselves via self referrals, were more likely to effectively engage with treatment, to stay in treatment longer and to get better results.<sup>106</sup>

Portsmouth also had a slightly higher number of clients who have children or are pregnant (32%) than the South East average (26%) in 2009/10.<sup>107</sup> From January to December 2010, 211 parents were in effective treatment, accounting for 27% of those in effective treatment, close to the regional and national averages (26% and 33% respectively). There has been a push to improve recording of parental substance misuse in Portsmouth, so this may reflect better recording rather than more clients who are pregnant or have children than the South East average. For some women, parenthood can be a barrier to treatment, as there is a fear that their children could be taken away. However, for others, it can be a driver for engaging and staying with treatment as there is a motivation to be a better parent. The data revealed that both male and female drug users got better results from their treatment if they were parents.

<sup>100</sup> Glasgow estimate, 2008/09, 15-64 year olds. <http://www.nta.nhs.uk/facts-prevalence.aspx> Please note that last year's Strategic Assessment used Glasgow Smoothed Estimates (average of a number of years) that gave a lower number.

<sup>101</sup> SEPHO: DAAT Profile April 2009 – March 2010

<sup>102</sup> PCT comparators are Brighton & Hove, Bristol, Leeds, Liverpool, Newcastle-Upon-Tyne, Plymouth, Salford, Sheffield and Southampton. This uses the original effective treatment summaries as provided by the NTA which differ from the most recent data (which was for the South East only)

<sup>103</sup> NDTMS Quarterly report (2010) Portsmouth Adult Partnership Performance Report.

<sup>104</sup> SEPHO: DAAT Profile April 2009 – March 2010

<sup>105</sup> Drug Use Declared: Findings from the BCS 2008/09 – 7% women / 13.5% men used drugs in the last year

<sup>106</sup> NTA: Women in Drug Treatment: What the latest figures reveal, March 2010

<sup>107</sup> SEPHO: DAAT Profile April 2009 – March 2010

Portsmouth had a slightly higher proportion of adults in drug treatment recording their primary drug as opiates (78.4%) or crack cocaine (4.8%) than the SE averages (77% and 2.9% respectively) and England averages (77% and 4.5% respectively).

The SPP's Drug Market Questionnaire 2009 asked injecting drug users about their use of needles and found that the average needle in Portsmouth is used approximately 6 times, although this is likely to be an under-estimate as it does not take into account injecting drug users not accessing drug services, who are even less likely to have access to clean needles. Additionally, 48% (n44) of respondents reported that they shared needles, with 13% (n12) stating that they shared everyday or most days. This is also likely to be an under-estimate due to reluctance to admit to this practice.

29.3% of adults in treatment in Portsmouth were currently injecting in 2009/10, which is higher than the SE average of 21.8%.<sup>108</sup> For those starting a new treatment journey in 2010/11, where injecting status has been recorded, 28% (n106) are currently injecting and another 32% (n120) had previously injected. There has been no significant change since 2008.

Pharmacy based needle exchanges have been introduced in 22 pharmacies across the city. They offer greater out-of-hours coverage including weekend and evening availability across the city and have experienced good take-up so far.

Portsmouth has the highest level of Hepatitis C in the South East, with an estimated prevalence of 57% amongst injecting drug users. Since Hepatitis C is a blood born virus, it can be spread by sharing injecting equipment. There are also other health risks associated with re-using needles/syringes, so ideally an injecting drug user would have a clean needle every time they inject. This is called 100% coverage.

Using a 'Coverage Calculator', Portsmouth had an estimated coverage of 13% in 2009/10 which is very low in comparison with cities of a similar size which have an average coverage of 30%. This will be re-run in late 2011 to take account of the new pharmacy based needle exchange

Under the Drug Intervention Program (DIP), adults are identified by the police, courts and probation services through offending history, intelligence or self disclosure. The DIP can then work with problem drug users addressing the link between drug misuse and offending behaviour. In 2010/11 the DIP made contact with 498 clients through Arrest Referral. Although, this is substantially higher than the target of 450 contacts, the number has decreased gradually for the last three years. This may be because the DIP is seeing less people in the cells, and in particular less opiate users. Staff have also found that it is becoming rarer for them to encounter clients in the cells that they don't already know or who aren't in treatment already.

There were 70 Drug Rehabilitation Requirements (DRRs) commenced in 2010/11 which is a 23% (n13) increase on last year but is still less than in 2008/09 (n90). The proportion of completions out of commencements decreased, from approx 50% to 39%.

### **The link between drug misuse and crime**

The detection of drug offences is very much linked to pro-active policing and most information originates from intelligence received by the police. There were 872 drug offences in 2010/11, which is an increase of 11% (n87) on last year and 26% (n184) on 2008/09. However, it is not possible to conclude that this is an increase in drug crime, as it is just as likely to be due to an increase in pro-active policing.

<sup>108</sup> SEPHO: DAAT Profile April 2009 – March 2010

The most common drug offence was possession of cannabis by far (n551, 63% of drug offences, 73% of possessions). The second most common drug offence was possession of cocaine (n75, 8.6% of all drug offences, 10% of possessions), followed by possession of amphetamine and heroin (n42 & n43, 6% of possessions).

Robbery was more likely than other crimes to be recorded as affected by drugs.

Drugs were also identified as a key underlying issue for many crime and disorder types by Hampshire Constabulary in their Portsmouth District Strategic Summary 2010/11, stating that:

“Drugs underpin a number of priority areas including acquisitive crime, violence and ASB. The location of drug markets can directly influence dwelling burglary rates in an area. Drug-related violence is under-reported and remains a difficult issue to report on with confidence. There is an intrinsic link between the markets for acquisitive crime, drugs and stolen property.”

A recent report by Matrix Evidence (see Adult Re-offending section) identified that the acquisitive crimes (such as burglary, motor vehicle offences, theft and handling of stolen goods and shop theft) committed by persistent offenders in Portsmouth are typically associated with drug use, and supported the SPP’s plan to look in more depth at offenders with drug and alcohol needs. The police also identified drug users as the persistent repeat offenders for burglary offences, theft from motor vehicles and shoplifting. It is worth noting that there has been a substantial reduction in the number of serious acquisitive crimes (burglary, robbery, vehicle crime) recorded over the last two years, reducing by almost a quarter (24%, n973) since 2008/09.

#### **Location:**

Guildhall walk is a peak location for possession of cocaine offences. This is the busiest NTE area, with the most police resources dedicated to it, so offences are more likely to be detected.

Southsea and central police sectors were over represented, both for the absolute number of drug offences and drugs as a proportion of all crime in those areas. In particular, PS04 and PS02 police beats (covering Eastney and Craneswater and Central Southsea wards), where 7.5% of recorded crime were drug offences (compared to 4% average across the city).

Drug litter, recorded by Portsmouth’s Clean City Service, showed a similar level to previous years and was mainly focused in Charles Dickens and St Thomas wards, particularly Portsea and Somerstown. The most common item was needles, accounting for just over half of drug litter reports.

#### **Offenders:**

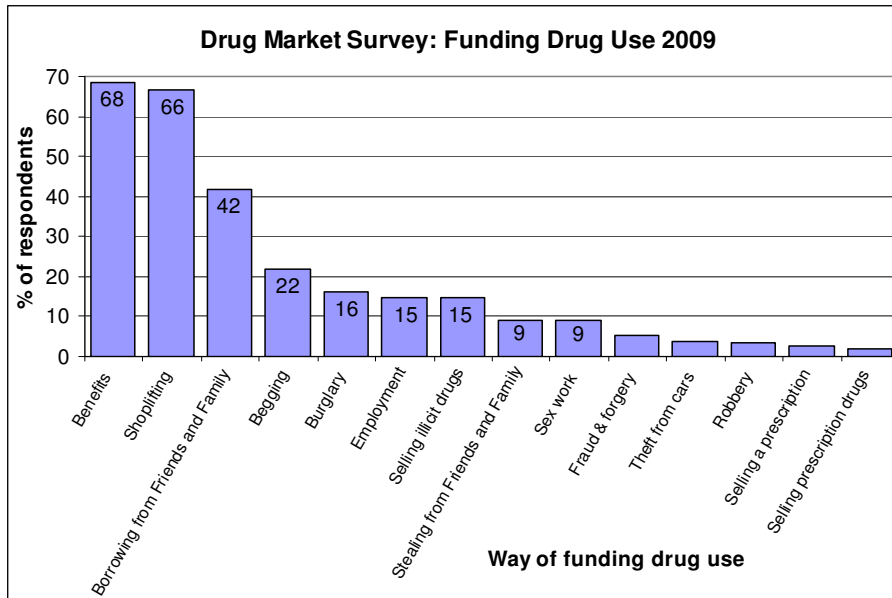
Those arrested for possession of drugs were most commonly male (88% where gender known). The most common age for possession of cannabis was 17-19 and was higher for possession of cocaine at 21-25 years old. Previous analysis identified those arrested for possession of crack cocaine and heroin were mainly males aged between 30 and 35 years of age, who were already known to police for acquisitive crime offences.

Drug misuse was identified as a criminogenic need for a third of adult offenders in 2010/11.<sup>109</sup>

<sup>109</sup> Where criminogenic need is identified as linked to offending. This includes all offenders who completed an assessment in 2010/11 (n1075)

### Funding drug use:

Respondents who were surveyed in the SPP's Drug Market Questionnaire 2009 reported that they thought the most common way to fund drug use was using benefits (68%, n106) followed by shoplifting (66%, n103). The chart below shows the common ways to fund drug use, and shows that many respondents consider that committing crimes is a common way to fund drug use.



Concerns have been raised about the potential change to the benefit system as this is the most common, and legal, method of funding drug use in Portsmouth. However, there is no hard evidence that the effects have been seen yet. Locally, there have been more people 'pulled in' for reviews of benefits but the Job Centre Plus are responding positively by accepting treatment as a step towards work.

For further information please see:

- National Drug Strategy,
- Portsmouth Treatment Plan (SPP website),
- PUSH website. <http://www.pushingchange.org/>

### What is this telling us?

There is a strong link between drug misuse, adult re-offenders and acquisitive crime, although serious acquisitive crimes have reduced substantially over the last two years. Drug users in Portsmouth stated shoplifting as the second most common method of funding drug use and drug misuse was identified as a criminogenic need for a third of adult offenders. Drug misuse was also identified as a key underlying issue for many crime and disorder types by Hampshire Constabulary's Portsmouth Strategic Summary.

Nationally, there was a reported reduction in drug use and there was a new *National Drug Strategy* (2010), which focuses on achieving recovery and supports the work undertaken in Portsmouth.

There are an estimated 1,400 problem drug users (using opiates and/or crack cocaine) in Portsmouth, accounting for approximately 1% of the working age population and most commonly males in the 25-34 year age group. Almost half of these problem drug users are in effective treatment.

## Adult re-offenders<sup>110</sup> - long-term underlying priority

The management of re-offending is led by Hampshire Probation Service and Hampshire Constabulary using risk management and multi-agency panels. Higher risk offenders and prolific or other priority offenders are managed through the systems listed in more detail below. Since Hampshire Probation became a statutory member of the Safer Portsmouth Partnership in April 2010, data sharing arrangements have improved, and closer working, epitomised by the IOM, have become even more developed and embedded.

This section aims to look at all adult re-offenders as a long-term underlying priority across all crime types. The specific characteristics of offenders responsible for particular offences are contained within the relevant sections in this strategic assessment.

A number of research studies have shown that offenders have a propensity to re-offend. For example, a recent Ministry of Justice statistics bulletin shows that the re-offending rate for adults released from custody, or commencing a court order under probation supervision, is strongly associated with the number of previous offences committed.<sup>111</sup> We know that targeting these re-offenders is one of the best and most cost effective ways of addressing high volume crime.

The SPP commissioned research, as part of the Research and Analysis programme, into answering the question:

**“What proportion of crime in Portsmouth are re-offenders responsible for?”**

The report also presents analyses of re-offenders and crime committed in Portsmouth, the proportion that is detected, the location of offences and the cost to the criminal justice system.<sup>112</sup>

The Home Office had previously estimated that nationally approximately 10% of the active offender population was responsible for committing about 50% of all crime and that a very small proportion of offenders (0.5%) were responsible for committing about 10% of all crime. The following analysis proves that this is also the case in Portsmouth and adds valuable local detail to these estimates.

Of the 22,915 crimes recorded in Portsmouth in 2009/10, 6,335 (27.6%) offences were detected. Sufficient details were available for 3,151 offenders relating to 5,461 of these detected crimes. Therefore the offenders analysed were responsible for 86% of all detected crime in the city and at least 24% of all recorded crime. The following analysis uses these 5,461 detected crimes as a base, unless stated otherwise.

A relatively small number of known offenders, one in six, (16%, n498) are responsible for almost half of detected crime (which equates to 11% of all crime). Within this group, just under 5% of all offenders are responsible for almost 20% of detected offences

Four in five offenders (80 %, n2,530) had some previous offending history recorded on the Police National Computer (PNC), and they were responsible for 87% (n4,736) of detected crime in Portsmouth in 2009/10.

Therefore, one in five offenders (20%, n621) were first-time entrants to the criminal justice system (FTEs) and they were responsible for 13% (n725) of detected crime.

<sup>110</sup> An adult is defined as a person aged 18 or over.

<sup>111</sup> Ministry of Justice (2010) “Re-offending of adults: results from the 2008 cohort – England and Wales”.

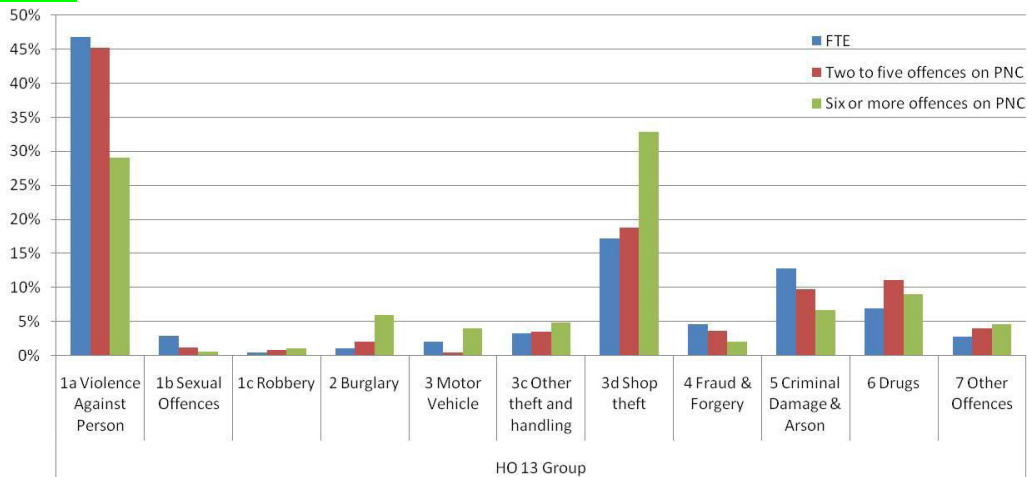
<sup>112</sup> Matrix Evidence, *SPP: Research into re-offending in Portsmouth*, April 2011, Dr Matt Hopkins, Alan Mackie.

To request a copy please contact [csresearchers@portsmouthcc.gov.uk](mailto:csresearchers@portsmouthcc.gov.uk)

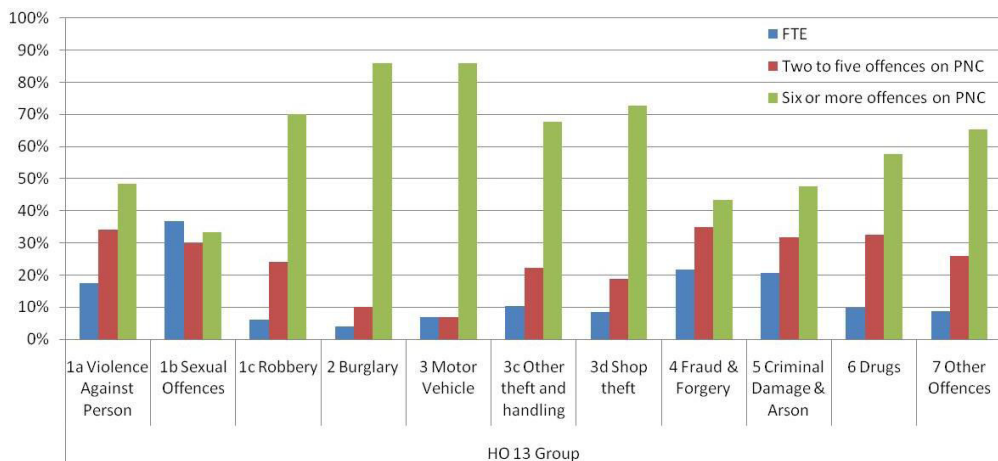
There are different levels of re-offending, and this report highlighted a statistically significant relationship between the number of previously known offences and the number of offences committed in Portsmouth in 2009/10:

- A third of all offenders (35%, n1,093) were known for between two and five previous offences on PNC. This group were responsible for 27% (n1,477) of detected crime.
- Almost half of all offenders (46%, n3,259) were known for six or more previous offences on PNC. This more prolific group were responsible for 60% (n3,259) of detected crime. This was even more noticeable for acquisitive crime types, where this group were responsible for over 80% of burglary, theft of motor vehicle, theft from motor vehicle and over 70% of shop theft and robbery.

The types of offences committed by: first time offenders, those with 2-5 and 6+ previous offences:



The proportion of all detected crime committed by FTEs, those with 2-5 and 6+ offences. In the context of a split of offenders: 45% with 6+ previous offences, 35% with 2-5 previous offences and 20% FTEs with no known offences on PNC.



The data also show that a high proportion of offences are committed by a relatively small group of offenders who have a history of offending.

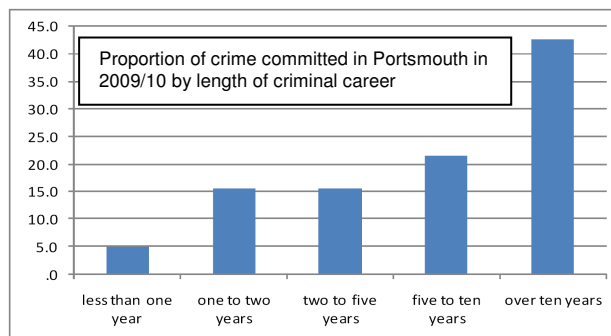
One in six offenders (16%, n498) had ten or more offences recorded on PNC. These offenders were responsible for almost half of all detected crime (46%, n2,488). This equates to at least 11% of all recorded crime in Portsmouth. Once again, this was more noticeable for acquisitive crimes where these persistent offenders were

responsible for over 60% of all burglary, robbery and motoring offences. To put this in the context of all recorded crime (and not just detections), this small group of offenders were responsible for:

- 27 per cent of all shop theft;
- 26 per cent of all drugs offences;
- 13 per cent of all robbery; and
- 12 per cent of all violence against the person offences.

The length of the offending career was also a factor in the level of re-offending. Offenders with a criminal career of:

- over ten years committed over 40% of detected offences in Portsmouth in 2009/10. This group accounted for 38% (n1,199) of all offenders.
- five to ten years committed over 20% of offences.
- less than one year committed just 5% of offences.



The key implication of the results is that effective action against the small number of known re-offenders could have a significant impact on overall levels of crime in Portsmouth. Further, the acquisitive crimes (such as burglary, motor vehicle offences, theft and handling of stolen goods and shop theft) committed by persistent offenders are typically associated with drug use. Together, these results support the SPP's plan to look in more depth at offenders with drug and alcohol needs.

The results of this analysis also indicate that an IOM programme, that includes PPOs, is likely to have a significant impact on levels of crime in the city if delivered effectively. Both these interventions have been in place in Portsmouth for some time and research was commissioned to review the effectiveness of the PPO scheme in 2010 (see below).

### Integrated Offender Management (IOM)

Integrated offender management (IOM) builds on the success of other work – including the Prolific and other Priority Offender (PPO) programme, Drug Interventions Programme (DIP) and Multi-Agency Assessment Public Protection Arrangements (MAPPA) – to prevent, deter, catch and convict offenders by enhancing efforts to rehabilitate and resettle them.<sup>113</sup>

The IOM in Portsmouth is Probation led and gives the individual an opportunity to access employment, training, education, drug and alcohol services that are offered to all statutory offenders currently on Probation. IOM is also offered to non-statutory offenders (those who are not on any supervision or orders) to enable them to access any Probation service they require.

The main aim of the IOM is to focus on those individuals that continually slip through the gaps. At the moment there are 3 cohorts

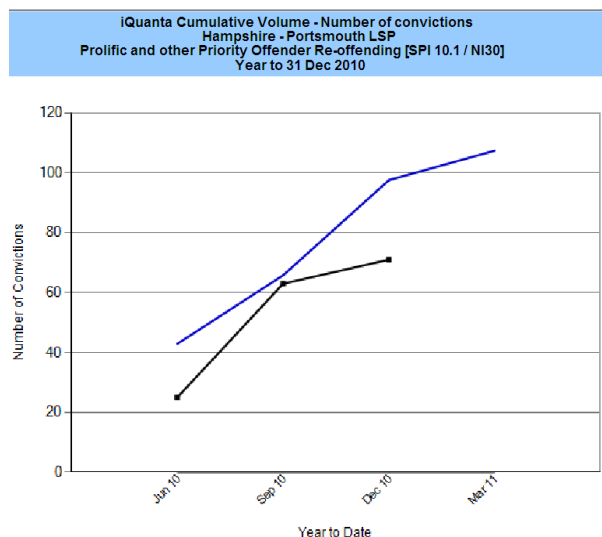
- *Breach* (those who regularly breach court and Probation orders)
- *Repeat Arrest* (Police identify by way of a 2x2x2 system, at least 2 arrests in each 4 months period over the course of a year)
- *Short term custody* (those who regularly receive short term prison sentences – revolving door)

<sup>113</sup> <http://www.justice.gov.uk/about/integrated-offender-management.htm>

A snapshot of the IOM cohort, taken at the start of April 2011, showed 109 cases on the cohort. Two thirds of these were 'non-statutory short-term custody over 21' which had grown significantly during 2011.

It is too early to measure the success of the IOM approach but Hampshire wide evaluation framework is being developed the Local Criminal Justice Board's Offender Management Group which should be in place

### Prolific and other Priority Offenders (PPO)



The chart to the left shows the re-offending rate of a cohort of PPOs compared to a predicted reduction in re-offending (formerly NI 30). After poor performance in 2009/10 the results available for 2010/11 are far more promising. In the first nine months of 2010/11 we can see that the cohort<sup>114</sup> has only accrued 71 proven offences against a baseline of 107 and target of 98 proven offences at this stage.

Source: iQuanta

As part of the Research and Analysis programme, a report was commissioned to investigate a specific group of PPOs in Portsmouth to establish what enabled them to reduce their offending.<sup>115</sup>

In line with national and international research findings, the Portsmouth PPO team is a multi disciplinary and co-located team and includes staff from both social casework and enforcement backgrounds. This has improved and enabled better data sharing and joint working, although the data searches that formed part of this research highlighted some areas for improvement.

This report focused on those offenders commencing Portsmouth's PPO scheme from April 2006 to March 2008 (and for whom the scheme could be thought to have been able to influence). The analysis finds that they reduced their offending in the two years after commencing the scheme by 37% compared to the two years prior to commencement. Taking into account any time in custody, this decline represented a change from 2.9 offences per 100 days at liberty in the two years prior commencing the scheme, to 1.8 offences in the two years after.

However, it should be noted that these results are tempered by the findings that those for whom the scheme was not expected to have influenced reduced their offending by more (41%). Regardless of this anomaly, these findings suggest that those with whom the scheme has worked, reduced their levels of offending on being enrolled on the scheme.

There is some suggestion that these reductions are sustained for the first twelve months but that offending begins to go up after twelve months (although not to previous levels). This may bring into question the longer term sustainability of reductions.

Recommendations from the report include:

<sup>114</sup> 22 PPOs with an average of 46.2 months on the programme

<sup>115</sup> *Reducing offending among Prolific and Other Priority Offenders: A study for the Safer Portsmouth Partnership.* Wickson Consultancy & Evidence Led Solutions. May 2011.

- Separate out / identify those PPOs referred on to the scheme from elsewhere and those referred locally,
- Maintain a list of interventions and actions received by PPOs,
- Maintain a separate list of offences for PPOs,
- Record release dates from custody,
- Routinely conduct 'exit' interviews,
- Record basic personal details and PPO input,
- Routinely run quality checks relating to criteria for referral and the success of the referral process.

### Multi Agency Public Protection Agenda (MAPPA)

Registered sex offenders, violent and dangerous offenders are managed by the Multi Agency Public Protection Agenda (MAPPA).

Number of:	2007/08	2008/09	2009/10	2010/11
MAPPA subjects	431	368	340	424
▪ Registered sex offenders	240	228	248	277 <sup>116</sup>
▪ Violent offenders	168	101	67	126
▪ Dangerous/potentially dangerous offenders	23	39	25	21

288 offenders were MAPPA level 1 (low risk), 119 level 2 (high risk) and three<sup>117</sup> level 3 (exceptionally high risk of harm).

### Drug related (class A) offending (formerly NI 38)

The latest performance information for 2010/11 shows that the actual number of proven offences is less than the predicted rate.

Date	Cohort size	Actual	Predicted	NI38 (A/P)
2010/11	18	59	63.7	0.93
2009/10	31	90	78.5	1.15
2008/09	37	102	105.5	0.97

### The Integrated Domestic Abuse Programme (IDAP)

The Integrated Domestic Abuse Programme (IDAP) continues to run for convicted domestic abuse offenders and the Adapt Domestic Abuse Prevention Training (ADAPT) Social Care programme runs for families involved with domestic abuse issues who have children on the At Risk Register. An evaluation of ADAPT found that, over a three year period, only nine of the 70 men referred to ADAPT successfully completed the programme.

Between October 2009 and March 2010, 8 people successfully completed the 27 group sessions of IDAP and only one has been convicted of a domestic violence related offence and the police were only called out for this same individual in the following twelve months to end-March 2011. Between April 2010 and March 2011, 20 Portsmouth offenders completed the IDAP programme. Given the prevalence of domestic abuse this increase is a positive development. These offenders will be tracked over the next 12 months. Work is also underway to explore extending IDAP to the IOM cohort.

Date of IDAP course:	Number of IDAP completers	Convicted	Police called out	In the following:
Q3-Q4 2009/10	8	1 (13%)	1 (13%)	12 months to end-March 2011
Q1-Q2 2009/10	14	1 (7%)	2 (14%)	6 months to end-March 2010
Q3-Q4 2008/9	11	0	3 (27%)	12 months to end-March 2010
Q1-Q2 2008/9	7	0	n/a	6 months to end-March 2009
2007/8	7	3 (43%)	n/a	12 months to end-March 2009

<sup>116</sup> Of which 81 are in HMP

<sup>117</sup> Two are in HMP and will be regarded upon release.

## Local adult re-offending measure

The local adult re-offending measure counts the proportion of offenders (aged 18+ under probation supervision at the end of a quarter) who re-offend, and compares this to the proportion expected to re-offend given the known characteristics of the offenders in the snapshot.<sup>118</sup>

12 months to:	Cohort size	Actual rate of re-offending	Predicted rate of re-offending	Difference between actual and predicted rate
<b>December 2010</b>	<b>2,805</b>	<b>13.3%</b>	<b>12.5%</b>	<b>7.0%</b>
Dec 2009	2,854	13.3%	13%	2.2%
Dec 2008	2,994	12.4%	12.9%	-3.5%

In summary, re-offending rates using this measure appear to have worsened and remain above predicted rates but the difference is still not statistically significant.<sup>119</sup>

## Profile of all offenders supervised within the community in 2009/10

Not all offenders are subject to an assessment in relation to their risk of re-offending, but the following analysis is based on the 1,075 offenders that completed an assessment in 2010/11.<sup>120</sup>

Compared to the adult population in the area, offenders from the PO1 area, (covering Charles Dickens, south Fratton and the west of St Thomas ward) were over represented by almost 50%. Offenders from PO3 and PO4 (Baffins, Copnor, Milton, Central Southsea and Eastney and Craneswater wards) were the most under represented, by approximately a third.<sup>121</sup>

Showing little change from last year, the most common offence remains 'Violence against the person' (39% of offenders), followed by 'Theft and handling' (15.4% of offenders). To put this in context, theft and handling was twice as prevalent as the next highest offence of burglary at 7.7%. This strongly supports the key indicators identified by this Strategic Assessment.

There are approximately six males to every one female (n926 males to n149 females), whereas in Portsmouth's general population there are slightly more females than males. Nationally the norm for offenders is a ratio of four males to one female offender.<sup>122</sup>

Age range	Number of offenders	Proportion of offenders	Proportion of adults in Portsmouth <sup>123</sup>	Over or under represented
18 - 20	88	8%	8%	Same
21 - 25	177	17%	15%	Slightly over (13%)
26 - 34	359	33%	19%	Over (80%)
35 - 49	358	33%	24%	Over (41%)
50 - 64	80	7%	18%	Under (59%)
65+	10	1%	17%	Under (94%)

Compared to the average Portsmouth population, offenders in the age ranges 26-34 and 35-49 are the most over represented, accounting for approximately 50% more offenders than you would expect.

<sup>118</sup> Local Adult Re-offending, Ministry Of Justice. <http://www.justice.gov.uk/publications/local-adult-reoffending.htm>

The measure includes recordable offences, as entered on the Police National Computer (PNC), which are proven by either court convictions or cautions. This local measure is different to the annual National Statistic on Adult Re-offending.

<sup>119</sup> This is not statistically significant at the 95% confidence level, which means that we cannot say with confidence that this rise is not due to random chance.

<sup>120</sup> Offenders are categorised as tier 1 to 4. Those in tier 1 are not generally given an assessment because they are not actively managed by probation officers and commit less serious crime.

<sup>121</sup> Of the 96% where an offender's postcode was known. Note this is the address when offence committed.

<sup>122</sup> ONS, "Gender: Crime – 4 in 5 offenders are male" <http://www.statistics.gov.uk/cci/nugget.asp?id=442>

<sup>123</sup> ONS mid-2010 population estimates

Compared to last year, the younger ages (18-20 and 21-25) are no longer as over represented which could signal the impact of work with young offenders over the last ten years.<sup>124</sup> Those aged 50+ were again drastically under-represented.

Because of the small numbers involved it is hard to draw any strong conclusions, but comparing the ethnic make-up of Portsmouth<sup>125</sup> to this cohort of offenders finds that those with Black ethnicity are over represented by one and a half times, specifically those described as Black/British Caribbean (by double). Asian offenders were under represented by approx two-thirds, while 'Chinese & other' offenders were under represented by a lot more.

Analysis of the criminogenic needs<sup>126</sup> finds that "Thinking and behaviour"<sup>127</sup> remains the most common need by far for 90% of offenders. "Lifestyle and associates" was the second most common. Alcohol misuse was the third most common need (54%) with a third of offenders identifying drug misuse as a criminogenic need. These levels are consistent with previous year's analysis of alcohol and drug misuse and alcohol misuse continues to show a slight downward trend.

Previous analysis identified a continued rise in the percentage of offenders who have a close family member with a criminal record, identified problems with school attendance and who had their first contact with police under 18.<sup>128</sup> The last two issues are clearly and directly related to young people at risk, but more work is needed to compare and identify similarities in these risk factors and target areas where joint-working and earlier intervention will have the biggest impact on future adult offenders. §

### **Offenders in settled accommodation (formerly NI 143)**

86.8% (308 out of 355) of offenders living in Portsmouth in 2010/11 were in settled and suitable accommodation. This is better than Southampton (81.8%) and Hampshire (84%).

### **Offenders in employment (formerly NI 144)**

53.5% (137 out of 256) of offenders were classified as in employment in 2010/11. This is slightly better than Southampton (49%) and about the same as Hampshire (53%).

### **What is this telling us?**

This year's analysis continues to identify strong links with the other long-term underlying priorities of alcohol (third most common criminogenic need of offenders) and drug misuse (a third of offenders identified this as a criminogenic need) and the key indicators of violence (the most common offence committed by re-offenders) and acquisitive crime.

A relatively small number of known offenders in Portsmouth, one in six, are responsible for almost half of detected crime. Within this group, just under 5% of all offenders are responsible for almost 20% of detected offences.

<sup>124</sup> However, the absolute number of offenders in these younger age groups has only decreased by six offenders on last year, so the relative decrease is mostly attributed to the increase in the Portsmouth population measure of these ages compared to last year.

<sup>125</sup> Based on mid-2009 population by estimated ethnic group (experimental) [ONS]. Please note, ethnicity data relates to all ages and not just adults.

<sup>126</sup> An offender is identified as having a criminogenic need if it has been identified as linked to offending.

<sup>127</sup> One of the National Offender Management Service's seven pathways to support the rehabilitation of offenders to reduce re-offending. This criminogenic need flags up those offenders that may not have developed the ability to think through their actions properly. E.g. offenders may have no appreciation of their actions effects on others, or think mainly in the short-term unable to see their actions having long-term affects that damage themselves and others. Others have developed anti-social attitudes or may not have the motivation to change their behaviour.

<sup>128</sup> 2008/09 Strategic Assessment

Only one in five offenders was not known for a previous offence. The level of previous offences and the length of criminal career were proven as factors in the level of re-offending in Portsmouth. For example, almost half of offenders were previously known for six or more offences, and they were responsible for 80% of domestic burglary, theft from motor vehicles and theft of motor vehicles.

The key implication is that effective action against these small numbers of known re-offenders could have a significant impact on overall levels of crime in Portsmouth.

Research into the prolific and other priority offender (PPO) scheme in Portsmouth suggests that those with whom the scheme has worked have reduced their levels of offending on being enrolled on the scheme although there is some suggestion that these reductions are sustained for the first twelve months, offending begins to go up after twelve months (although not to previous levels). PPO research identified a need to improve recording and processes in relation to the current PPO scheme.

Compared to the average Portsmouth population, offenders were disproportionately likely to be male, in the age range 26-49 and/or resident in the PO1 postcode area (covering Charles Dickens, south Fratton and the west of St Thomas ward).

The rate of re-offending by prolific and other priority offenders, and class-A using re-offenders was lower than expected, and there are a higher proportion of offenders in settled accommodation and in employment in Portsmouth than our neighbours. However, the level of re-offending by all adults in Portsmouth, as measured by the local adult re-offending measure, continues to be above the predicted rate.

## Violence and domestic violence

Domestic violence was identified as the main driver of violence in last year's strategic assessment, and was elevated in priority by the SPP (and by the Children's Trust Board) during 2010/11 to become the fifth long-term underlying priority because of its cross-cutting nature. Analysis of this long-term underlying priority is included here as a major part of the violence section.

A commissioning review of domestic violence services is currently underway across the city. The review will make recommendations in the autumn and may not be completed in time to be included in this strategic period.

During 2010/11 police data showed that there were 5,741 violent crimes in total, a reduction of 3% (n175) on last year.<sup>129</sup> Excluding sexual offences and robbery (which will be considered separately) there were 5,197 violent offences.

Violent crime accounted for 26.5% of all crime, a small increase of less than one percentage point on last year. In 2010/11 Portsmouth performed slightly better than in previous years against its most similar group, ranking 11<sup>th</sup> highest (out of 15) in 2010/11 but is still above the average.

'Violence Against the Person with Injury' was the violence measure of choice for the SPP in 2010/11. Although this measure reduced by 6% to 2,602 crimes in 2010/11, this just missed the target of only 2,570 and so was rated 'amber'.

### All Crime and Violent Crime totals (iQuanta)

Crime	2006/07	2007/08	2008/09	2009/10	2010/11
<b>All Crime</b>	28,559	25,161	24,946	22,925	<b>21,654</b>
<b>Total Violent Crime</b>	6,901 (24.2%)	6,254 (24.9%)	5,483 (22%)	5,916 (25.8%)	<b>5,741 (26.5%)</b>
<b>Assaults (AWOI, AWLSI &amp; MSV)</b>	4,158 (14.6%)	3,918 (15.6%)	3,736 (15%)	4,176 (18.2%)	<b>4044<sup>130</sup> (18.7%)</b>

### Violence by motivation

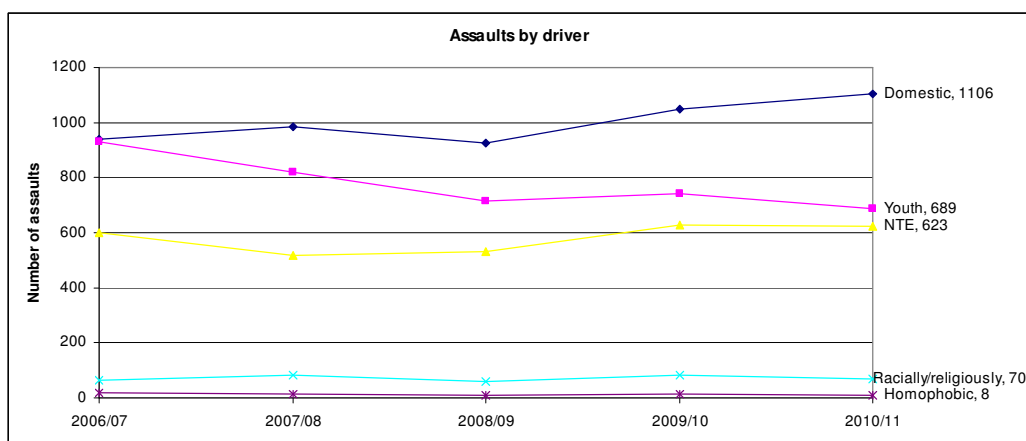
In order to understand more about the drivers or motivation of violent crime in Portsmouth, detailed analysis was commissioned by the SPP in 2009/10 and conducted by the police to explore patterns and trends for assaults (for the purpose of this analysis assaults included assaults without injury (excluding on PC) (AWOI), assault with less serious injury (AWLSI) and most serious violence (MSV) only).<sup>131</sup> It was agreed that this analysis would be refreshed annually.

The table below shows the breakdown of assaults by motivation, although there will be some double counting where offences fall into more than one category. This uses information for 2010/11 provided by iBase and that may differ from performance information.

<sup>129</sup> Violent crime is made up of a number of offences broadly falling into the categories of assault without injury (AWOI), assault with less serious injury (AWLSI), most serious violence (MSV), harassment and causing public fear, alarm or distress. Sexual offences and robbery are also regarded as violent crimes but will only be included for totals of all violent crime.

<sup>130</sup> Assault With Less Serious Injury = 2479, Assault Without Injury (excluding on PC) = 1442, Most Serious Violence = 123

<sup>131</sup> Strategic Review: Violence in Portsmouth 2006 – 2009, Jan 2010, Paul Moorman, Hampshire Constabulary



Drivers of Violence <sup>132</sup>	2006/07	2007/08	2008/09	2009/10	2010/11 (police iBase figures)
<b>Domestic</b>	22.5% (n937)	25.1% (n985)	24.8% (n927)	25.1% (n1048)	<b>27.4% (n1,106)</b>
<b>Youth Related (10-17yrs)</b>	22.4% (n931)	20.9% (n820)	19.2% (n716)	17.7% (n740)	<b>17% (n689)</b>
<b>NTE Related</b>	14.5% (n601)	13.2% (n519)	14.2% (n531)	15% (n627) <sup>133</sup>	<b>15.4% (n623)</b>
<b>Racially / Religiously Aggravated</b>	1.6% (n65)	2.1% (n81)	1.6% (n58)	2% (n81)	<b>1.7% (n70)</b>
<b>Homophobic</b>	0.5% (n19)	0.4% (n15)	0.3% (n10)	0.4% (n16)	<b>0.2% (n8)</b>
<b>Other</b>	42.4% (n1,761)	39.3% (n1,538)	40% (n1513)	39.2% (n1,688)	<b>38.3% (n1,549)</b>

Domestic violence assaults increased for the second year in a row and now accounts for over 27% of assaults in 2010/11. This has been the largest driver of violence since 2006/07.

The next two largest categories were youth related (17%) and NTE related (15.4%) assaults. Youth related assaults continue to decrease while NTE related assaults appear to have plateaued.

“Other violence<sup>134</sup> is marginally lower than previous years and the main drivers continue to be substance related violence, particularly amongst strangers and acquaintances. Much of this relates to violence in secondary NTE areas.”<sup>135</sup>

Overall, “violence continues to be focused around the City Centre and stretches the length of the western side of the city”<sup>136</sup> but geographic concentrations will differ by driver.

A key finding from previous analysis is that that young people aged 18-24 years of age consistently feature as the peak age groups for both victims and offenders.

### Domestic Abuse

Police data showed that domestic abuse violent offences accounted for over a quarter of all assaults (27.4%, n1,106) in 2010/11. This proportion has increased for the second year in a row, and is currently the highest it has been in absolute terms and as a proportion of assaults since 2006/07. However, it is important to note that

<sup>132</sup> For AWOI, AWLSI & MSV only

<sup>133</sup> Please note this figure has been revised to reflect the information provided by the police.

<sup>134</sup> Violence which can not be classified into one of the driver categories.

<sup>135</sup> Hampshire Constabulary, Portsmouth District Strategic Summary. Paul Moorman

<sup>136</sup> Hampshire Constabulary, Portsmouth District Strategic Summary. Paul Moorman

these are only the offences which fit the Association of Chief Police Officers (ACPO) definition of domestic abuse:

*'Any incident of threatening behaviour violence or abuse between adults who are or have been intimate partners or family members, regardless of gender or sexuality'*

This means that, where the victim is under 18 years of age, then the police do not record it as a domestic incident. Therefore domestic violence as a proportion of all assaults is likely to be higher **than 27.4%**. There are also issues with significant under-reporting, so some offences may be reported but not declared as domestic incidents or not reported at all.<sup>137</sup>

▪ **Victims and offenders**

Where the gender has been recorded approximately 81% (n893) of victims of domestic assaults are female (a slight increase from 78% last year), whilst 19% (n213) are men (a slight reduction from 22% last year).

The proportion (and number) of female offenders decreased to 11.5% (45) from 15% (58) last year. Whereas the proportion and number of male offenders increased to 88.5% (346) from 85% (n331).<sup>138</sup>

Previous analysis suggested that not only are men more likely to be perpetrators of domestic abuse crimes, they are more likely to commit more serious violent offences. Data received from the MARAC supports these findings as only 6% of the cases heard were male which would further suggest that the level of violence experienced by women was greater than that experienced by men. This is also supported by national research which found significant differences between male and female perpetrators including:

- A vastly greater number of incidents were attributed to men, whether they were the sole perpetrator in the relationship or not.
- Violence used by men against their partners was more severe than that by women, and more men were arrested.
- Abuse by men was more likely to involve fear and control of their partner.<sup>139</sup>

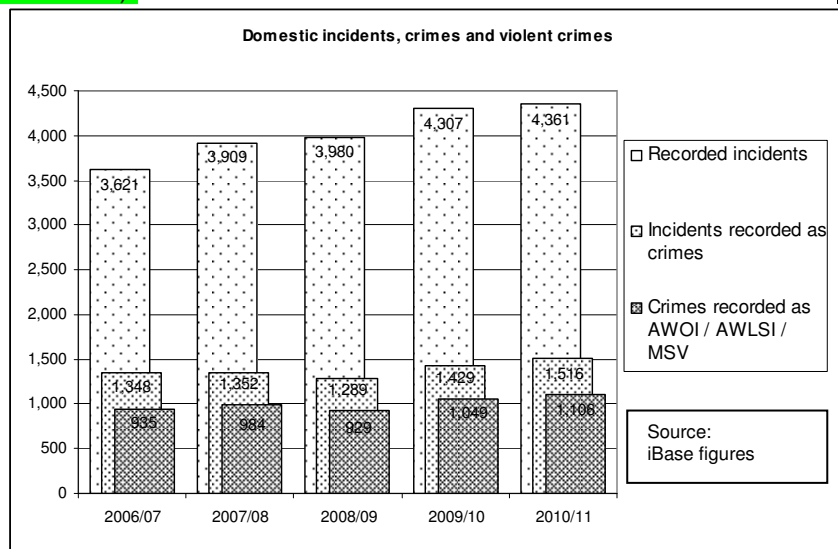
Previous analysis by the police has shown that the peak age range for victims of domestic abuse violent offences is 21-24 years of age, while offenders are slightly older at 23-26 years.

Where data on ethnicity was available, the majority of offenders and victims were white European (92% and 94%).

▪ **Incidents**

The graph to the right shows that the reported number of domestic abuse incidents has increased slightly by 1.3% (n54) on last year and has been increasing since 2006/07.

Likewise the number of domestic incidents that go on



<sup>137</sup> Walby & Allen 2004 found that Domestic crimes were likely to be substantially under-reporting.

<sup>138</sup> Source: iBase police figures.

<sup>139</sup> Hester 2009 'Who Does What to Whom'

to be recorded as crimes and violent crimes increased during 2010/11 (by 6.1%, n87 and 5.4%, n57 respectively). Both have also increased from the levels seen in 2006/07.

According to a recent CAADA report, 6.1% of the population in Portsmouth report domestic abuse to the police, this was higher than the national average (3.7%). This could indicate either an increased confidence in reporting to the police, more domestic violence or both.

The BCS found domestic abuse accounted for approximately 18% of all violent crime in 2010/11 (an increase on the last year, but broadly in line with previous years), which is a smaller proportion than was found locally. However, although this section of the BCS is a self-completion module, there is still a high chance of under-reporting.

#### ▪ Arrests

Whilst data from the police shows that 83.6% of domestic crimes in 2010/11 resulted in arrest, the detection rate is not so positive at only 38.8%. This detection rate is similar to the level seen for the past two years but is lower than those seen in 2007/08 (46.6%), 2006/7 and 2005/6. It is possible that the low detection rate is due in part to a lack of evidence which then means that the case cannot progress through the criminal justice system. Given the proportion of violent crime represented by domestic abuse, it is recommended that further research is undertaken to investigate the attrition rate for this type of violence (see below). §

#### ▪ Convictions

The Specialist Domestic Abuse Court (SDAC) continues to run in Portsmouth. Information from Portsmouth Magistrates Courts reports that between April and December 2009, 231 cases of domestic abuse were heard in the SDAC. Of these, 87 guilty pleas were entered and 31 offenders received a custodial (n17) or suspended custodial (n14) sentence.<sup>140</sup>

When a case reaches the evidential threshold and the witness is supported by the SDAC Independent Domestic Violence Advocate (IDVA) there have been some positive outcomes. In a snapshot of cases held by the SDAC IDVA, a guilty plea on or before the trial was received in 78.6% of cases.<sup>141</sup> Last year's Strategic Assessment identified the need for further work to explore the effectiveness of the SDACs across the county. §

#### Multi Agency Risk Assessment Conferences (MARACs)

MARACs enable the sharing of information between partner agencies in order to make an informed assessment about high risk cases. A risk management plan can then be devised to reduce the likelihood of severe harm or murder faced by the victim and their family. A national review of (MARACs) found that repeat victimisation was reduced by approximately 50% where the victim was the subject of a MARAC.<sup>142</sup> Also, a recent publication by CAADA has indicated that for every £1 spent on MARAC at least £6 could be saved in direct costs to agencies such as the police, health, criminal justice system and children's services.<sup>143</sup> The level of repeat incidents for victims in Portsmouth who are subject to MARACs (NI 32) has again remained fairly constant around the SPP target of no more than 30%, but slightly lower in 2010/11 at 29.4% (141 repeat incidents out of 480 cases subject to MARACs).

<sup>140</sup> An update was not available this year, the Hampshire Strategic group are working on a way to collate SDAC data county wide.

<sup>141</sup> Of the 48 referrals received from April-June 2011, 33 clients were active with IDVA and 22 of these clients had guilty pleas on or before the trial, however 5 clients' trials were still impending. (22/28 = 78.6%)

<sup>142</sup> HM Government: Together We Can End Violence Against Women & Girls, p 74

<sup>143</sup> <http://www.caada.org.uk/News/news.html> accessed 15/07/2010

## Alcohol

During 2010/11, where recorded, 65.6% (n437) of domestic abuse violent offences indicated that alcohol was a contributing factor, which is slightly higher than the average for all other types of violent crime (approx 60%). Once again, this proportion could be higher, but the police have not recorded this information for a substantial proportion of cases. This is supported by a report by Alcohol Concern, which found that alcohol was a factor in 62% of offences and almost half of perpetrators were alcohol dependent. Furthermore, 97% of women survivors of domestic abuse had used alcohol to 'numb the pain'. 44-58% of males in substance misuse treatment had perpetrated domestic abuse, whilst two thirds of women in treatment had suffered abuse and/or violence by their partners in the last 12 months.<sup>144</sup> Home Office research has shown that nearly three quarters of domestic violence offenders had consumed alcohol prior to the offence.<sup>145</sup>

## Youth related violence

For the purposes of this report, youth violence relates to assaults where either the victim or offender or both is aged between 10 and 17 years.

During 2010/11 there were 689 youth related assaults. This is an absolute reduction in the number of assaults (n51) and a reduction in the proportion of all assaults compared to last year, although it remains the second largest driver of violent assaults

However, in 79.8% (n550) of these youth related assaults the victim was a young person whereas the offender was a young person in only 26.9% of cases (n185).

There was therefore a crossover of 'youth on youth' violence, where both the offender and the victim are young people, which only accounted for 6.7% (n46) of youth related assaults. This is a noticeable reduction on last year (10.3%, n90). This is consistent with previous analysis<sup>146</sup> which has shown that young people are more likely to be the victim of violent offences than the perpetrator.

According to the 2010/11 BCS extension covering 10-15 year olds, a higher proportion of 10-15 year olds were victims of violent crime than adults, even when excluding minor offences between children or family members; 3.1% of adults were victims of a violent crime compared to 6.9% of 10-15 year olds. Last year's Strategic Assessment identified the need to conduct further research into the profile of offenders who victimise young people in order to address this issue and this need remains. §

Work is still required to explore the links/escalation from ASB to violence recommended by the Violent Crime Strategy Group as identified by the detailed analysis of violence in 2010. §

Violent crime accounted for two thirds of crime experienced by 10-15 year olds and 80% of these incidents resulted in injury to the victim (the majority being minor bruising or black eyes).

## Victims and offenders

Where gender was known, young men were slightly more likely to be victims (55%, n377) and far more likely to be perpetrators (67%, n164) of a violent assault than young women.

<sup>144</sup> Alcohol Concern (2009) Knowledge Set 1: Domestic Abuse

<sup>145</sup> Gilchrist et al 2003 cited in Review of alcohol-related hospital admissions, 2011, Health Overview & Scrutiny Panel

<sup>146</sup> TKAP CDRP Problem Profile, Feb 2010 by S. Hogan & Violence in Portsmouth 2006-2009, Jan 2010, by P. Moorman

The offender was most likely to be an acquaintance (in 43.5% of offences), followed by a stranger (in just under 30% of cases). The offender was a member of their family in 16% of cases and a spouse/partner in 6% of cases. This split has been fairly consistent since 2007/08, although the proportion of youth related assaults committed by strangers has decreased the most.

Analysis has shown that the majority of youth related violence in Portsmouth is not gang related<sup>147</sup>. Portsmouth does have a small number of active gangs who engage in violence against each other but is not on a par with the level reported nationally.

### **Alcohol related violence linked to the Night Time Economy (NTE)**

Portsmouth has a thriving NTE which is focused mainly in the Guildhall area, Gunwharf Quays and Albert Road. However, there is a particularly high pub-per-population<sup>148</sup> count and there are smaller NTE areas on most main roads and a number of side streets across the city. Many people from surrounding areas visit Portsmouth for a night out and there is also a naval base and substantial student population.

The NTE<sup>149</sup> was the third biggest driver identified by the analysis and accounted for 15.4% (n623) of assaults in 2010/11. Although this is a reduction of four assaults since last year, it now accounts for a slightly larger proportion of all assaults.

Using a slightly different measure,<sup>150</sup> developed by the Evening and Late Night Economy Partnership (ELNEP), alcohol related assaults showed a 7% decrease compared to 2009/10 after increasing since April 2008.

There were a total of 865 assaults in the NTE areas in 2010/11 with the largest proportion of assaults, almost one in three, taking place in the Guildhall area (n287, 33%). This was followed by Central Southsea (n133, 15%) and Commercial Road (n130, 15%). However, this masks the fact that there were reductions in the number of assaults in Guildhall and Commercial Road, while the number of assaults in Gunwharf and Central Southsea have been creeping up.

The Guildhall area is characterised as a small area saturated with drinking establishments and a 'super' club. However, this area has a higher police presence than other areas, so offences are more likely to be reported in this area.

This is being addressed by the One Punch Can Kill campaign in 2011/12, aimed at men aged 18-25 years, to reduce alcohol related violence in the night time economy.<sup>151</sup>

### **Hospital Emergency Department data**

The SPP has been working closely and pro-actively with the Emergency Department at Queen Alexandra Hospital to increase the accuracy and usefulness of assault data collected there. While there are still areas to improve on, the usefulness of the data collected has increased enormously.

Large numbers of violent offences which result in Emergency Department treatment are not detected by the police. Involvement can lead to improvements in local transport services, pedestrian safety and alcohol licensing all of which are important in violence prevention. This approach can identify trends in weapon use, for example the use of glasses and bottles as weapons was first recognised not by police but by Emergency Department services.<sup>152</sup>

<sup>147</sup> Where the term 'gang' relates to a specific named group whose members identify themselves as part of a gang.

<sup>148</sup> <http://www.portsmouthpubs.org.uk/> accessed 15/07/10

<sup>149</sup> Incidents which occur in specified roads between the hours of 9pm and 5am.

<sup>150</sup> This is similar to the 'NTE assaults' definition but includes incidents which occurred in a private place.

<sup>151</sup> For more info: <http://saferportsmouth.org.uk/index.php/campaigns/>

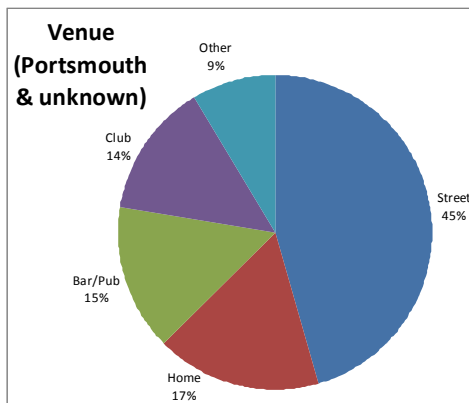
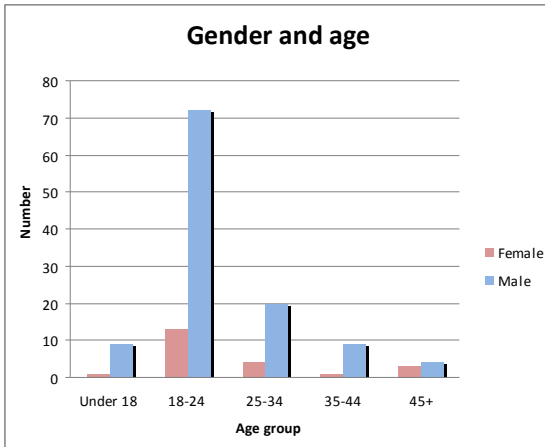
<sup>152</sup> Effective NHS Contributions To Violence Prevention: The Cardiff Model. Professor Jonathon Shepherd. 2007

The following analysis looks at the last six months data (October 2010 to March 2011), where the location was either in Portsmouth (n142) or stated as 'unknown' (n32).

The majority of assaults (86%, n123) were recorded as involving alcohol.

Three-and-a-half times as many males as females were seen in this period.

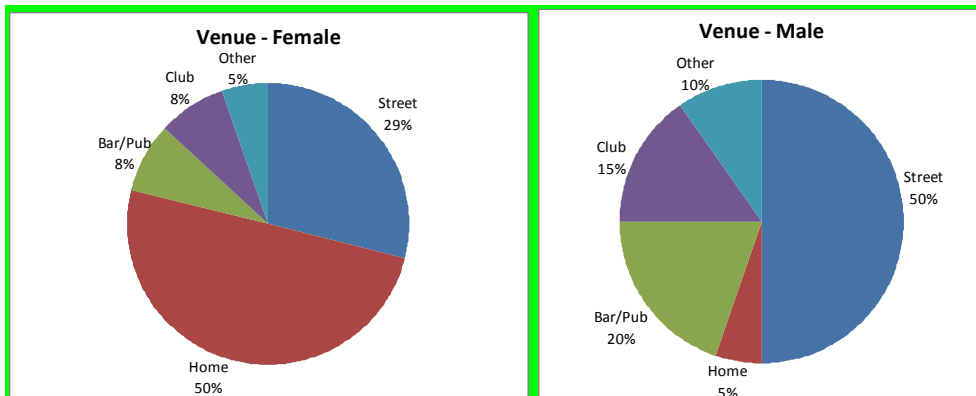
The 18-24 year old age group had the largest number and proportion of both males and females (61% of males and 48% of females).



Overall, the 'street' was the most commonly reported venue (53%), followed by the 'home' (17%), suggesting a significant proportion of NTE assaults are likely to be domestic related, then 'bar/pub' (15%) and club (14%).

However, when the reported venue is split by gender there are some clear differences. The most commonly reported venue for females is by far the 'home', accounting for half of all assaults, ten times more than for males. This could indicate a higher proportion of domestic violence committed against women.

Males were more than twice as likely to have been assaulted in a bar/pub or club (35%) than females (16%).



The most common item that both males and females were assaulted with was the fist. The majority of incidents occurred in the early morning (1am-4am), followed by the late evening (10pm-1am). Unsurprisingly, Saturday and early morning Sunday were the most common days, representing two-thirds of assaults.

### Violence linked to licensed premises

While it is rather unsurprising that over 40% (n257) of NTE related assaults were linked to licensed premises, it is also worth mentioning that the next highest rate was for 'other' assaults (that weren't classified as one of the drivers of violence mentioned

here) where 17% were linked to licensed premises. These are likely to reflect the numerous secondary NTE areas and pubs in Portsmouth.

### Overall Alcohol related violence

In total, approximately 30% (n1213) of assaults were reported to have been affected by alcohol, whilst only 16% (657) were recorded as not affected by alcohol or drugs. In just over half (n2156) of offences it was not known or stated whether alcohol or drugs were a factor in the offence. This means that the proportion of violent offences that are alcohol related are likely to be substantially higher.

### Racially / Religiously Aggravated Crime

Race hate crime is defined as any incident that constitutes a criminal offence, which is perceived by the victim or any other person as being racially or religiously motivated.<sup>153</sup>

During 2010/11, 196 racially or religiously aggravated offences were reported to the police compared to 221 last year. Only 1.7% (n70) of assaults were classified as racially/religiously aggravated. Although the numbers are small, this is a 14% (n16) decrease on last year.

The police violence analysis for 2006 to 2009 found that people working in the service industry are more likely to be the victim of racially or religiously motivated violence, and this is likely to be because their role brings them into contact with people who may be under the influence of alcohol.

The majority of assaults (84%) were committed by strangers, and two thirds of offenders were male (where the offender's gender was known). Victims were disproportionately male (88.6%) and where ethnicity was known, victims were equally likely to be 'white European' or Asian (32%), followed by black (18%).

The Racial Awareness Service (RAS) received reports of 603 incidents in 2010/11 which is a 22% (n107) increase from 2009/10 (n496). This is not consistent with the reduction in police recorded crime.

The most common incident types in 2010/11 (out of 964) remain verbal abuse (45%, n434), harassment (20%, n196) and physical abuse (13%, n124). These were also the most common incident types since 2007/08, and although the total number of incidents has increased, they remain the same proportion of all incident types.

The most notable change is an increase in the number of homophobic related incidents (35 from Oct 2010- Mar 2011, 3.6%, compared to one incident (0.6%) last year).

Similar to previous years, a third of offences occurred outside people's homes (32%, n201). This indicates that people may be being targeted and possibly experiencing repeat victimisation.

Almost a quarter of incidents occurred in the street or parks (24%, n149) slightly more than last year (19%, n87).

The number and proportion of incidents experienced at work (either as employee or own business) fell from 21% (n98) last year to 14% (n86) in 2010/11.

More victims of reported incidents were male (62%, n251) than female (36%, n145). 19-29 year olds were the most over represented group, accounting for a third of victims although half of all victims were aged 30-59. Where ethnicity was recorded, the most common ethnicity remained Asian<sup>154</sup> (41%, n75) followed by Black<sup>155</sup> (22%,

<sup>153</sup> McPherson report definition

<sup>154</sup> Includes: Asian / Asian British Bangladeshi, Indian and any other background, and police classification IC4

<sup>155</sup> Includes: Black / Black British - Caribbean, African, mixed heritage - white and black Caribbean, and police classification IC3

n40). In 55% (n219) cases the ethnicity was not known. However, the biggest problem is still with the classification given, whereby the police classifications differ from the RAS classifications and have been amalgamated for the purposes of this analysis.

Consistent with previous years, where gender was known most perpetrators (74%, n165) were male. The peak age range for perpetrators remains 19-29 year olds (37%, n79), and contrary to previous trends the proportion of 30-59 year old perpetrators decreased to 28% (n60) from 35% (n61) last year. Finally, the majority of perpetrators (91%, n43) were White European (police classification IC1) where ethnicity was known, but it was not known in 79% (n177) of cases.

Consistent with previous years, where gender was known most perpetrators (74%, n165) were male. The peak age range for perpetrators remains 19-29 year olds (37%, n79), and contrary to previous trends the proportion of 30-59 year old perpetrators decreased to 28%, n60 from 35% (n61) last year. Finally, the majority of perpetrators (91%, n43) were White (British / European or IC1).

Approximately 3,000 children from BME households attend schools in Portsmouth. There were 216 reported hate incidents in schools during 2009/10, one for approximately every 14 children. This is a reduction of 13.9% (n35) from 2008/09. However, this reduction in reported incidents may not reflect a reduction in actual incidents in schools. Most of these incidents were verbal abuse<sup>156</sup> (78.7%, n170) followed by racist comments in the course of discussion (15.3%, n33) and they were not recorded physical assaults. This is similar to the proportions seen in 2008/09.

Most victims were pupils (88.6%, n178) although 9.4% (n19) were staff members. More victims were male (63.2%, n127) than female (34.8%, n70) and there was a greater number in the 10-14 years age group (46.8%, n94) than 5-9 years (32.3%, n65). Almost all the perpetrators were pupils (98.8%, n254) and the majority were male (76.3%, n196). The age split was similar for victims with 48.6% (n125) in the 10-14 age group and 36.2% (n34) in the 5-9 age group.<sup>157</sup>

### Homophobic crime

There were very few police recorded assaults in 2010/11 (n8, 0.2% of assaults), half as many as last year. Because these numbers are so small and this type of crime is likely to be largely under reported, it is not possible to know whether this is indicative of the larger picture of homophobic violent crime in Portsmouth.

In order to try and find out more about the true picture of homophobic crime Inscape conducted the 'Speaking Out 3 Survey' in 2010. There was a disappointing response to this survey with only 92 participants completing the survey. This is less than a third than the previous Speaking Out Survey, and reflects the lack of confidence in the police and partner agencies felt by the lesbian, gay, bisexual and transgender community.

59% (n54) of respondents stated that they had experienced one or more homophobic incidents or crimes in the last year, which is a 12 percentage point rise since the 2003/04 Speaking Out survey, and much higher than the 12.5% reported nationally (Homophobic Hate Crime, Stonewall 2008). There were also a high number of repeat incidents.

Verbal abuse was experienced by 43% (n40) of participants in the last year, and this was by far the most common type of incident reported in this survey. It was also the most common type of repeat incident (41%, n19) of repeat incidents).

<sup>156</sup> Name calling, threats, insults or jokes

<sup>157</sup> Data from Information Assistant for CFL DRM, Portsmouth City Council

Young people aged between 16 and 24 years were the group who experienced the most homophobic incidents (45%, n50), which is consistent with the previous Speaking Out Survey.

Only 14% (n7) of respondents who answered the question said they had reported all incidents to the police, with the majority (71%) not reporting any incidents to the police, which is consistent with national findings (Homophobic Hate Crime, 2008). However, 24% (n22) of respondents reported an incident to an agency other than the police, which is an increase of 8 percentage points since 2003/04 and is a positive sign that third party reporting is a viable option to reporting directly to the police.

The Racial Awareness Service data above would support this last statement as it identified a notable increase in the number of homophobic related incidents reported (35 (3.5% of all reports) from Oct 2010-Mar 2011, compared to one incident (0.6%) in the previous year).

### Sexual Offences

There were 298 sexual offences recorded by the police during 2010/11, which is a decrease of 15% (n51) on the previous year. This is a positive achievement in the context of a 1% increase in England & Wales and no change in Hampshire. However, it is important to remember that this type of crime is significantly under-reported so any reductions may signal problems with reporting rather than reductions. Victims are likely to know the offender in some capacity, either as an acquaintance, family member, partner or ex partner. Victims are also predominantly females (90%) where gender was recorded, white and under 24 years old.

Offenders are predominantly male (96%, n52) where gender was recorded, white and aged 20-35 years.

11% (n3) of cases were found to be alcohol related, but this is likely to be a much higher proportion, as in 73% of cases it was not known or not stated whether alcohol was a factor. It is also not possible to break these figures down to find out whether it was the perpetrator or victim who was affected by alcohol. Alcohol increases an individual's vulnerability; however this in no way implies that the victim is to blame for the offence. The SPP have been increasing awareness of this issue with the 'Alcohol doesn't rape, people do' campaign.

Sexual offences continue to be dealt with by the Crystal Unit, which provides a specialist service to victims of a sexual offence across Hampshire. The Early Intervention Project (EIP) received 109 referrals to their Independent Sexual Violence Advisors (ISVAs) service, based at the Crystal Unit, in 2010/11. The ISVA role exists to provide support at the point of crisis and afterwards, and will continue throughout the criminal justice process (if applicable). It has been suggested that the involvement of an ISVA may additionally result in clients feeling more able to go through the court process and thus reduce attrition rates, although there is currently a lack of national statistical data on the ISVA role available to support this.

### Violent offences involving weapons

"There are no identified issues with either knife crime or gun crime, both of which have reduced to a five year low. Similarly, violence in which a glass or bottle is used as a weapon is also at a five year low"<sup>158</sup>

<sup>158</sup> Hampshire Constabulary, Portsmouth District Strategic Summary. Paul Moorman

### **What is this telling us?**

Violent crime accounted for over a quarter of all crime in Portsmouth in 2010/11, and the number of crimes had reduced by 3% on last year. Portsmouth performed slightly better against its peers than in previous years, but is still above the average rate.

Domestic violence accounted for just over a quarter of assaults in 2010/11, having increased for the second year in a row, and remains the largest driver category since 2006/07. The majority of victims were females, and the majority of offenders were male. The number of incidents recorded by the police increased every year since 2006/07, but so did the number of incidents that went on to be recorded as crimes or violent crimes. There continue to be difficulties in getting consistent data about domestic abuse convictions. This needs to be resolved in order to get a true picture of the attrition rate of domestic abuse crimes in Portsmouth.

The level of repeat domestic incidents that were subject to a MARAC (showing how successfully serious incidents are dealt with the first time they are addressed) has remained fairly constant. Strong links to alcohol misuse were identified again.

The next two largest driver categories were youth related (17%) and night time economy (NTE) related (15%) violence.

Youth related assaults continue to decrease, with young people being much more likely to be a victim rather than an offender, and the proportion of 'youth-on-youth' violence remaining low.

NTE related assaults appear to have plateaued at approximately 15% of all assaults. 40% of NTE related assaults were linked to licensed premises. Accurate Hospital Emergency Department data was available this year following targeted work with reception staff. The majority of assaults the Emergency Department dealt with had involved alcohol. Males were over represented, but the peak age for both genders was 18-24. Females were far more likely than males to have been assaulted in their own homes, whereas males were more likely to be assaulted in the street, or a bar/pub/club.

Work is still required to explore the links/escalation from ASB to violence recommended by the Violent Crime Strategy Group as identified by the detailed analysis of violence in 2010.

There are still approximately 40% of assaults which cannot be easily classified despite recommendations by the Violent Crime Strategy Group last year.

## Acquisitive crime - key indicator

Acquisitive crime is one of the key crime indicators, driven to a large extent by the underlying priorities. Acquisitive crime includes burglary, robbery and theft (including shop theft) as well as other crime types. This section draws a lot of information from Hampshire Constabulary's District Strategic Summary 2010/11.

The measure of 'Serious acquisitive crime'<sup>159</sup> (formerly NI 16) is one of the SPP's main performance indicators. As well as being important in itself it acts as a proxy for the effectiveness of efforts to tackle the long-term underlying priorities of substance misuse, young people at risk and adult re-offending.

Performance for 2010/11 has been excellent with only 15 serious acquisitive crimes per 1,000 residents in Portsmouth (3,052 crimes). This exceeded target reductions of only 18 crimes per 1,000, equivalent to a 5.5% reduction over 3 years

**Shop theft** was again identified by the partnership scanning matrix as one of the highest ranking acquisitive crime types. Despite reductions of 6% on last year, for the first time since 2007, it remains the largest acquisitive crime type, accounting for 3,151 crimes, almost half (45%) of all theft and 14.6% of all crime.

As part of the Research and Analysis programme, it was recommended last year that distinct groups of male and female young offenders aged 10-17, and the (potential) drug mis-users aged 18-39 were separated to discover more about the drivers behind shop theft.<sup>160</sup>

The following analysis only relates to the 1,967 shop thefts in 2009/10 where offenders details were known:

- Young females (222 shop thefts, 177 offenders)
- Young males (201 shop thefts, 173 offenders)
- Adults 18 years and over (1,539 shop thefts, 951 offenders)

90% of young males were only likely to commit one offence, whereas young females and adults were more likely to commit more than one offence (19% and 23% respectively). Therefore, each adult was responsible for more shop thefts (1.6 on average, compared to only 1.2 for young males).

A minority of adult offenders (2%) committed more than seven offences each a year accounting for 15% of offences by adults. 18-23 year olds had a consistently high rate of offending, and 83% of shop thefts by adults were committed by those under 40years.

Young females were more likely to steal clothes, jewellery and make-up – mainly from the city centre (not Gunwharf) on Friday & Saturday – and from a few shops, mostly Primark (44% of offences). Only 7% of known items were alcohol.

Young males targeted a much wider variety of shops, although they still focused on the City Centre and Gunwharf on Saturdays with Primark, Co-op and Debenhams being the most commonly targeted. Young males were more likely to steal personal accessories and foodstuff, and were the most likely group to steal alcohol (17%)

Adults were more likely to steal from Co-op stores across the city but almost half of offences were from the city centre area. Adults were more likely to consistently steal throughout the week. The items stolen by adults, mostly foodstuff and personal accessories (clothing, cosmetics, cigarettes, electrical appliances and perfume), indicate they were stolen for re-sale which supports the hypothesis that adults are

<sup>159</sup> Includes: domestic burglary, theft from a motor vehicle, theft of motor vehicle and robbery.

<sup>160</sup> Further analysis to breakdown drivers for shop theft by young males, younger females and drug misusing adults. (Nov 2010). David Trathan & Alan Leonard, SPP.

more likely to be stealing to fund drug use. Approximately 14% of known theft items were alcohol.

Co-op stores remain the most often targeted, usually for alcohol theft by youths and young adults. However, class A drug users remain the persistent repeat offenders.

The SPP ran a successful and high profile “shop lifting can ruin your life” campaign targeted at 10-17 year olds in the run up to Christmas 2010. This included an education pack & DVD to schools and youth groups across the city. This campaign was highly successful and, after taking into account those young people referred to triage, the number of young people caught shoplifting in this season was halved.<sup>161</sup>

However, shop theft remained the most common offence for young males and females in 2010/11, for both first time entrants and all offenders if offences referred to triage are included.

‘Theft from a motor vehicle’ (TFMV) was also ranked highly by the scanning matrix. A small increase (of 2%) in total vehicle crime masks a large reduction in theft of motor vehicles (18%, n65), but an increase in theft from motor vehicles (7%, n107).

TFMV was also the third highest acquisitive crime type accounting for 1,562 recorded crimes, 51% of all ‘serious acquisitive crime’ and 7.2% of all crime.

There has been an increase in offences in all sectors except Cosham, with long-standing hotspots for TFMV offences exist in Portsea and Somerstown. Peaks in offending are most obvious during the summer period, driven largely by visitors to the city and international visitors. The largest proportion of TFMV offences are driven by items being left in the vehicle, often on display or otherwise secreted in the boot or glove box.

TFMV was also one of the most common local priorities identified for neighbourhood areas through the Community Tasking Groups, specifically Milton, Eastney, St Jude & Charles Dickens west

TFMV offences are predominantly committed by young males who are known to police for ASB and low-level acquisitive crime and offences. However, there are a small handful of habitual offenders who steal from vehicles to support their lifestyle, usually centred on drug addiction.

Robbery was up by 7%, but this only equates to a small number (n17) of crimes. This masks that although there was an increase in personal robbery (12%, n24) there was a proportionally large reduction in business robbery (23%, n7).

Large reductions were seen for the second year in a row for domestic burglary (8%, n78) and non-domestic burglary (23%, n260).

There are strong links with the underlying/long-term priorities:

**Alcohol misuse** - Alcohol represented a fifth of the recorded items stolen from shops in 2009/10. Hampshire Constabulary has also conducted further analysis of the link between theft of alcohol and youth ASB.<sup>162</sup> Approximately a third of robbery victims were targeted when returning from the night time economy.

**Young people at risk** - Shop theft remained the most common offence for young males and females in 2010/11, for both first time entrants and all offenders if offences referred to triage are included.

- The percentage of offenders committing domestic burglary aged under-18 increased from 20% to 25% in this period. These youths commonly reside in lower income areas and have progressed through low-level crime and ASB into burglary.

<sup>161</sup> [www.saferportsmouth.org.uk/index.php/download\\_file/view/263/270/](http://www.saferportsmouth.org.uk/index.php/download_file/view/263/270/) and <http://saferportsmouth.org.uk/index.php/campaigns/shoplifting-can-ruin-your-life/>

<sup>162</sup> Theft of Alcohol and Youth Related Anti-Social Behaviour – Problem Profile, May 2009, Hampshire Constabulary

▪ The peak age group for 'theft of motor vehicle' offenders is 17 to 21 years old. As mentioned above, TFMV offences are predominantly committed by young males who are known to police for ASB and low-level acquisitive crime.

**Drug misuse and adult re-offending** - Recent analysis by Matrix Evidence (see Adult Re-offending section) identified that those re-offenders who had more than six previous offences, (accounting for almost half of all offenders in the cohort) were not only more prolific offenders but were specifically much more prolific for acquisitive crime types. For example, they were known to be responsible for over 80% of burglary, theft of motor vehicle, theft from motor vehicle and over 70% of shop theft and robbery detected offences by the cohort in 2009/10.

The analysis also showed that a high proportion of acquisitive crime offences in Portsmouth are committed by a relatively small group of offenders who have a history of offending (one in six known offenders (16%, n498) with at least ten previous offences). While these offenders were responsible for almost half of all detected crime of known offenders, which equates to at least 11% of all recorded crime in Portsmouth, this was more noticeable for acquisitive crimes where these persistent offenders were responsible for over 60% of all burglary, robbery and motoring offences. To put this in the context of all recorded crime (and not just detections), this small group of offenders were responsible for 27% of all shop theft and 13% of all robbery.

'Theft and Handling' remained the second most common offence category for offenders supervised within the community in 2010/11 (15.4%, 166), twice as high as the next largest offence (burglary).

Drug users stated shop theft as the second most common (66%) way of funding their habit, after claiming benefits.<sup>163</sup> The percent who said they fund their drug use by shop theft was larger than the combined total of those saying it was funded by either burglary, theft from cars or robbery.

A dip sample of shop theft offences found that a quarter of offenders had drug misuse warnings, although this is likely to be under recorded.<sup>164</sup>

Domestic burglary offences are often offender driven by drug addiction. A relatively small number of individual addicts are responsible for large numbers of burglary offences, often committed as a series.

### **What is this telling us?**

Shop theft and theft from motor vehicles were identified by the scan as emerging issues. Despite reductions in shop theft from last year, this remains the largest acquisitive crime type and accounts for 15% of all recorded crime. Shop theft remained the most common offence for young people despite a successful 'shop lifting can ruin your life campaign' targeted at young people that halved the number of shop theft offences by young people in the run up to Christmas 2010.

There are strong links to long-term underlying priorities, in particular drug misuse and adult re-offending.

Excellent performance was achieved this year against the measure of serious acquisitive crime (burglary, robbery and vehicle crime).

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<sup>163</sup> Drug Market Questionnaire (2009), Safer Portsmouth Partnership

<sup>164</sup> Conducted by Hampshire Constabulary, reported in 2008/9 Strategic Assessment

## Anti social behaviour (ASB) – key indicator

Despite a downward trend in almost all measures of ASB, it is the high volume of incidents (partly because of the wide ranging and varying definitions of ASB), combined with the high perceptions of ASB that are of concern and lead to the recommendation of ASB as a key indicator for the partnership.

A number of surveys have previously shown that ASB is a greater concern for Portsmouth residents than it is nationally, or for similar areas. Although there has been no update in the past three years, in the Place Survey 2008, particular concern is expressed about 'teenagers hanging around the streets' and 'people being drunk or rowdy in public places'.<sup>165</sup> These perceptions are stronger amongst different groups, most notably younger residents, those living in social rented housing and residents with BME backgrounds.

The majority of local priorities identified for neighbourhood areas through the Community Tasking Groups were for anti social behaviour issues.

Most problems in Portsmouth are rated more seriously than the average for all parts of England. Most notably this is the case for 'People being drunk and rowdy in public places' (13 percentage points above the average), 'Noisy neighbours or loud parties' (11 points above) and 'Vandalism, graffiti and property damage' (9 points above).<sup>166</sup>

There are also strong links to the long-term underlying priorities:

- Alcohol misuse - is particularly relevant for general nuisance, criminal damage and noise complaints. Between 2004 and 2009, 42 dispersal areas have been agreed in the city of which 32 (76%) were related to alcohol misuse, and three quarters of these (n24) were related to under-age drinking. A similar review of anti social behaviour orders (ASBOs) found that 40 (37%) of the 108 ASBOs issued were directly related to alcohol misuse.

There are also strong links with the perceptions of ASB, as identified by Portsmouth's higher than average perception of 'drunk & rowdy behaviour in a public place' above the national average and the second highest in Portsmouth's MSG after Southampton.

- Substance misuse - is directly correlated with ASB in terms of drug litter and the running of crack houses. Perceptions of drug use and drug dealing dropped in 2008/9 (making Portsmouth 5<sup>th</sup> lowest in its MSG).<sup>167</sup>

- Young people at risk - There is evidence to suggest an escalation from ASB to more serious crimes (especially for young people) and this is seen to a certain degree in Portsmouth. For instance, from 2007 to 2009, there were 11 Acceptable Behaviour Contracts (ABCs) for under 18 year olds that progressed to ASBOs.<sup>168</sup> This is in the context of approximately 120 ABCs to under 18 year olds in this period. Following on from this, just under a quarter of First Time Entrants to the Youth Justice System aged 10-17 years old were previously known for ASB.<sup>169</sup>

The majority of criminal damage incidents where an offender is known are committed by young males. Criminal damage was the third most common offence for young male offenders in 2010/11. It is also the third most common crime for young male offenders (and the second most common for young male FTEs if offences to triage

<sup>165</sup> A detailed breakdown of these results can be found in NI 17 Perceptions of ASB, Briefing Note to SPP on 14.01.10, Alan Leonard.

<sup>166</sup> Ipsos MORI: Assessing Portsmouth's performance, Results of the Place Survey 2008/09 for Portsmouth City Council and partners

<sup>167</sup> Residents Survey 2003/04, Place Survey 2008/09.

<sup>168</sup> There were 8 ABCs that progressed to ASBOs for over 18 year olds.

<sup>169</sup> Dip sample taken of FTEs in Q4 2009/10

are included).<sup>170</sup> It is often the combination of alcohol and young people that instigates ASB.<sup>171</sup>

There is also a strong perception of ASB, in particular ‘teenagers hanging around’. As with youth related violence, younger residents can also be more likely to be victims as, counter-intuitively, younger people are more likely to perceive that ASB is a problem in their local area than older groups.<sup>172</sup>

### Complex cases

It is worth noting that by analysing each type of ASB separately, the more complex cases that involve multiple reports of ASB can be overlooked. Often a small number of offenders (e.g. one person or a family) can be responsible for a large volume and variety of ASB (and criminal) incidents that have a huge impact on local communities. Alternatively there could be repeat victimisation against a small number of victims. For instance, each ASBO granted has been for a range of different ASB types. These are the cases, also identified in the previous strategic assessment, that benefit from a specialised multi-agency partnership approach and require further analysis and action. §

### Police recorded ASB

The following analysis is based on the definition of ASB used by Hampshire Constabulary, and the analysis from the Hampshire Constabulary Portsmouth District Summary 2010/11 with supporting partnership data where appropriate.

For the purpose of this Strategic Assessment, and the analysis that follows, the ASB offences categories used are: Rowdy & Inconsiderate (accounting for the majority of ASB incidents), Vehicle Related Nuisance, Street Drinking, Substance Misuse and Inappropriate use of Fireworks.

During 2010/2011 there has been a 13% (n1,463) decrease in these ASB offences to 9,853 incidents, compared to the previous year.<sup>173</sup> Over the last four years reductions in overall ASB have been seen across the city.

It should be noted that since 1<sup>st</sup> April 2011 there has been a change to the ASB categories recorded by the police. The main categories are now: ASB Environmental, ASB Nuisance and ASB Personal. To aid analysis, each of these will also be broken down into seven ASB types that broadly match those previously used by the police. However, direct comparisons to earlier data will not be possible.

### Location analysis of all ASB

All sectors across the city have recorded decreases in ASB levels during 2010/11, the smallest reductions were seen in Cosham (9.4%, n189) and the highest in Southsea (15.7%, n402). Offences are highest on the western side of the city, particularly in lower income and social housing areas.

During 2010/11 there were seven roads which each recorded more than 100 offences. Of the peak roads, all except one are main roads, in-line with busy day and night time economies.

Street name	2009/10 ASB incidents	2010/11 ASB incidents
London Road, PF02	159	144
Commercial Road, PC04	157	156
Lindisfarne Close, PN01	107	134

<sup>170</sup> See [Young People at Risk](#) section

<sup>171</sup> Hampshire Constabulary, ASB & Criminal Damage Campaign, 2010

<sup>172</sup> NI 17 Perceptions of ASB, Briefing Note to SPP 14.01.10, Alan Leonard

<sup>173</sup> Taking into account a wider definition of all ASB incidents, there has been a 5.9% (n831) decrease from last year to 13,293 incidents.

High Street, PN02	157	130
Albert Road, PS02	163	121
Guildhall Walk, PC04	128	113
Allaway Avenue, PN03	144	105
<b>Total</b>	<b>1015</b>	<b>903</b>

There were 5 active dispersal areas in Portsmouth in 2010/11, four were explicitly because of young people and three were alcohol and/or drugs related (See Appendix G).

Across the city, actions to reduce anti social behaviour represented the majority of local priorities set for neighbourhood areas through the Community Tasking Groups (see Appendix B). Targeting anti social behaviour occurring in specific areas/streets<sup>174</sup> and motor vehicle related anti social behaviour/speeding, were some of the most common priorities for neighbourhood areas across the city.

There were no Class A closures in 2010/11 but there was one premise closure on Eastern Road.

### Criminal damage & arson

There has been a 12% (n446) decrease in occurrences of criminal damage and arson<sup>175</sup> to 3443 incidents (of which 3334 were criminal damage) and detection rates have increased by 16% (n544).<sup>176</sup> All sectors have shown a decrease in the number of criminal damage offences except Central sector, where there has been an increase of 3.6% (n31), led by a 5.2% (n16) increase in offences in Somerstown (PC03).<sup>177</sup>

April and May are the peak months, followed by October. These months are linked to youth-related ASB. Overall, offenders are predominantly young males aged 10–24 years. Criminal damage was the third most common offence for young male offenders in 2010/11, and the second most common for young male first time entrants (if triage offences are included). Generally, offences peak in-line with temporal peaks in the NTE. Damage is commonly directed towards vehicles and buildings.

A series of vehicle arson offences (*Operation Sparrow*) have continued during this strategic period and are subject to partnership work.

According to Hampshire Fire and Rescue Service figures, primary arson reduced throughout 2010/11 by 10% from last year to n83 and secondary arson reduced by 16% to n194. This meant that the 2010/11 target reduction of only 684 primary and secondary deliberate fires was met. This is equivalent to a two-thirds reduction since 2007/08, giving Portsmouth a lower rate of arson per resident than Southampton achieved.

### Offender profile

The offenders are primarily youths and young adults.

There were only four anti-social behaviour orders in 2010/11. All were for residents over 18 years of age, and the majority were linked to alcohol misuse

### Victims

ASB is well managed through dedicated police and partnership processes and departments, with increased focus on the risk to repeat or vulnerable victims.

<sup>174</sup> Including Lindisfarne Close, Cosham High Street, Allaway Avenue Shopping Parade, Tangiers Road and St James Road/Dunsmore Close.

<sup>175</sup> Arson as defined and recorded by the police is different to the HFRS method.

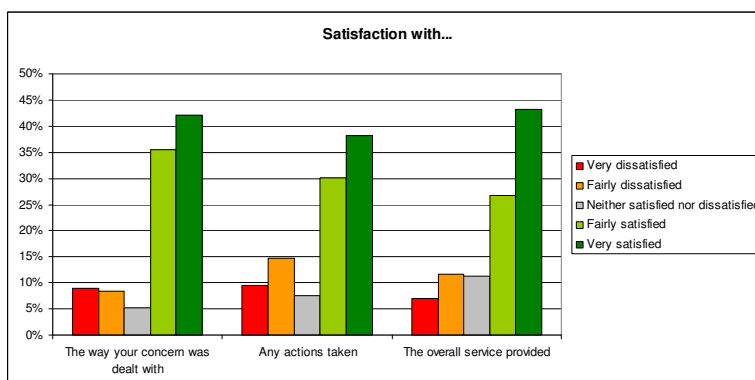
<sup>176</sup> It should be noted that there can often be discrepancies with identifying those offences which border the criminal damage and theft from motor vehicle boundary.

<sup>177</sup> It should be noted that the main repeat location is the custody centre of the police station.

The *ASB Victims & Witness Support Review* (2011) identified national best practice and considered the three stages of involvement with victims and witnesses at the point of referral, the life time of the case whilst being active and the closure of case. The review has highlighted many good areas of practice but also made over twenty recommendations (see Appendix H) to further enhance the support to victims and witnesses of anti-social behaviour, ranging from nil to higher cost recommendations.

As part of the review, the public were consulted about their experience of anti-social behaviour, with the aim to establish their views on the amount and quality of support given by each agency. The City Helpdesk carried out a telephone survey using the contact details (randomly selected) of residents who had reported ASB to one of the relevant agencies (public protection noise department, Anti Social Behaviour Unit, police and Community Wardens). 217 responses were received from the 578 Portsmouth residents contacted in November and December 2010.

There were some very positive results overall with 78% were satisfied with “the way the concern was dealt with”, 68% were satisfied “with any actions taken” and 70% were satisfied “with the overall service provided”. However, almost a quarter of respondents were dissatisfied “with any actions taken”.



Of the 212 respondents who answered all three questions a third (33%, n71) gave the highest possible ranking of ‘very satisfied’ across all three questions and only 6% (n13) were ‘very dissatisfied’ across all three questions.

The main issues identified, across all services, were that the problem still exists or no action was taken. The next most common issue was that there was no feedback provided. The concerns and the majority of those were addressed in the aforementioned recommendations of this review.

### What is this telling us?

Incidents of anti social behaviour (ASB) across a range of measures have gone down compared to last year, but ASB remains a high volume issue and Portsmouth residents have a high perception of ASB. Criminal damage and arson have both decreased. All areas across the city have recorded decreases in ASB levels during 2010/11.

There are complex cases of ASB that require further analysis to identify the level, and the locations/victims/offenders so that actions can be targeted.

Young people are disproportionately responsible and blamed for ASB. However, they also have the highest perception of ASB as a problem in their local area.

From 1<sup>st</sup> April 2011 there has been a change to the ASB categories recorded by the police. The main categories are now: ASB Environmental, ASB Nuisance and ASB Personal. To aid analysis, each of these will also be broken down into seven ASB types that broadly match those previously used by the police.

The ASB Victims and Witness Review (2011) found that over 70% of ASB victims and witnesses that accessed services were satisfied. The review made a large number of recommendations to improve the services available