



Ending Groups, Gangs and Serious Youth Violence Strategy

April 2015 - 2018

Responsible Officer: Nasima Patel, Service Head Children's Social Care
Author: Jebin Syeda, Strategy Policy and Performance Officer
Coverage: Partnership
Effective date: April 2015
Review date: Annual review
Status and version: Final draft subject to Cabinet approval

Contents page

Title	Page number
Mayors Foreword	3
Executive Summary	4
Introduction, Background	5
Aim and Principles, Objectives	6
National drivers, What is a 'gang'?	7
Causal factors, Current research - risk and impact	9
Local Experience, Evidence of groups, gangs and serious violence in Tower Hamlets	10
Best Practice	14
Current arrangements for tackling GGSYV	15
Our approach to tackling groups, gangs and serious youth violence	16
Priorities going forward	18
Appendix A – Current research on GGSYV	19
Appendix B – Prevalence of GGSYV in Tower Hamlets	22
Appendix C – Glossary	25
Appendix D – Ending Groups, Gangs and Serious Youth Violence Action Plan 2015/16	26

Foreword
Mayors Team

Executive summary

To be drafted by JS once strategy agreed

Introduction

London Borough of Tower Hamlets is a densely populated borough located to east of the City of London and north of the River Thames in east London. The London Borough of Hackney lies to the north of the borough while the River Lea forms the boundary with the London Borough of Newham in the east. The population here is characterised by diversity, mobility and high growth. Our residents live in the 20% most deprived area in England and levels of overcrowding are significantly higher than London (35% compared to 22% in London) with 40% of the population living in social rented accommodation compared to 24% in London. The number of households is projected to increase by 2.8% per year¹. Our borough has one of the highest levels of child poverty in the country and unemployment continues to be an issue despite bordering the city and having Canary Wharf in the borough. The complexities of these factors make Tower Hamlets at risk of facing problems associated with gangs and serious youth violence.

Background

We uphold the United Nations Convention on the Rights of the Child (UNCoRC) which reinforces our approach to recognising the rights of children. We recognise that children have the right to meet together and join groups and organisations, on the condition that it does not prevent others from enjoying their rights (Article 15), equally recognised is the right for children to be protected from all forms of abuse (Article 19). For a young and densely populated borough, Tower Hamlets has a history of delivering prevention and intervention balancing the need to enable children to exercise freedom and to be protected from harm. The effectiveness of our partnership arrangements in delivering this is well established and has evolved over time; however, what is lacking is a focused joined up approach to tackling groups, gangs and serious youth violence which is clearly articulated - this strategy is our commitment to articulating our partnership approach.

This is the borough's first Ending Groups, Gangs and Serious Youth Violence Strategy. This strategy will consolidate the work undertaken by the Council and its partners and will put in place a joined-up approach and commitment to addressing and tackling the issue of groups, gangs and serious youth violence (GGSYV). We recognise GGSYV as a safeguarding issue and as such our commitment to addressing GGSYV includes all forms of exploitation and abuse which can be associated with GGSYV.

Tackling GGSYV is already a priority for the borough reflected in both our Community Plan and the Community Safety Partnership Plan 2013-16 which sets out how we will tackle GGSYV. Early in the first year of the plan, the Early Intervention and Prevention service within the Youth Offending Service has successfully engaged with young people on the Police gangs matrix, using a peer outreach youth work model and we have deployed youth workers at the Royal London Hospital's paediatric A&E on weekend and evenings resulting in successful referrals being made. It is also a priority area for the Mayor. We have a number of local prevention and enforcement strategies which set out our approach to tackling different forms of abuse associated with GGSYV. These place us in a strong position to develop our work on GGSYV as they recognise and have in place arrangements for addressing the risk and abuse which can be associated with GGSYV. The local strategies are:

- Violence against Women and Girls Strategy
- Child Sexual Exploitation Strategy
- Prevent Delivery Plan
- Neglect Strategy
- Substance Misuse Strategy

Additionally, we operate the No Place for Hate Forum the remit of which is to create awareness and intolerance to all forms of hate crime for all community groups as per the Equality Act 2010.

¹http://www.towerhamlets.gov.uk/lgs/701-750/732_jsna.aspx

Aim and Principles

The aim of the Tower Hamlets Partnership is to *reduce the harm caused by groups, gangs and serious youth violence and its associated forms of abuse*. This requires a strong partnership approach as the issues cannot be tackled by one agency alone. The work we do on GGSYV will be guided by the following key principles:

1. The partnership will not tolerate groups, gangs and serious youth violence and its associated abuse in Tower Hamlets;
2. Our work will be underpinned by a safeguarding approach;
3. Young people (and families) who are at risk of involvement in groups, gangs and serious youth violence and the associated forms of abuse will be offered targeted interventions at the earliest point to discourage involvement with support from the appropriate partners;
4. If young people (or families) continue to engage in GGSYV the partnership will use all enforcement options available and also continue to offer support with appropriate interventions;
5. The partnership will place a strong commitment to data and intelligence sharing to reduce the harm caused by groups, gangs, serious youth violence and the associated forms of abuse.

This strategy will place a strong strategic, co-ordination and leadership role on the local authority which will work closely with the delivery plans for all safeguarding strategies with a focus on safeguarding children, young people and families by driving effective data and intelligence sharing and effective identification and support interventions – through a strong partnership commitment.

Our intention is that the GGSYV strategy should ensure that the support needs of young people and families affected by GGSYV or at risk of being afflicted by the GGSYV and its associated abuse are clearly identified and supported and that data is used proactively to address the issues affecting individuals and communities in the context of gangs operating:

- Gender based violence, including sexual exploitation of women,
- Child sexual exploitation – of boys and girls; this is also recognised as a form of violence against women and girls;
- Alcohol and Substance misuse;
- Challenges associated with the radicalisation and extremism of some young people;
- All forms of hate crime.

Objectives

1. To strengthen the partnership focus and delivery of the work to tackle GGSYV;
2. To create a shared understanding of the nature and impact of abuse associated with GGSYV and improve identification and monitoring of those at risk of harm from GGSYV by ensuring a consistent approach across agencies;
3. To create a shared understanding of how professionals working with vulnerable children and families affected by GGSYV respond;
4. To work collaboratively with information and data sharing to proactively disrupt or address the impact of GGSYV and its forms of associated abuse and offer better protection to those at risk taking whole family approach;
5. To establish information sharing arrangements to create a clear picture of the prevalence of GGSYV and its associated abuse in Tower Hamlets and use this to inform JSNA and influence commissioning intentions;
6. Using the above, to identify particular trends in group offending in Tower Hamlets including hate crime perpetrated because of a person's race or sexual orientation.

Our approach will focus on intelligence and data sharing, early identification and prevention, intervention and support and enforcement with support delivered through a strong leadership and Partnership approach.

National drivers

Following the disturbances of August 2011, there was concerted effort from the government to address the issue of gangs and youth violence. The Ending Gangs and Serious Youth Violence initiative led to local authority peer reviews across the country putting in place actions that tackle this problem which had hit nationally and locally. The cross-government report, published in November 2011, set out detailed plans to make this happen through:

- Preventing young people becoming involved in violence in the first place, with a new emphasis on early intervention and prevention;
- Pathways out of violence and the gang culture for young people wanting to make a break with the past;
- Punishment and enforcement to suppress the violence of those refusing to exit violent lifestyles;
- Partnership working to join up the way local areas respond to gang and other youth violence

In December 2012, the London Crime Reduction Board (LCRB) launched their Partnership Anti-Gangs Strategy. This was the first pan-London response to the harm caused by gangs in the capital and brought together key criminal justice agencies and London's 32 boroughs. This joined up response and prioritisation of gangs, alongside the Metropolitan Police Services (MPS) Trident Gang Crime Command has prioritised tackling the issue². Locally, this has improved the alignment of specialist risk assessments through the Youth Offending Team (YOT) -ROSH and Asset, which are now routinely shared resulting in better reflection of gang cohorts in the Gangs Matrix – leading to more effective identification and management of risks. The Police Gangs Team are now co-located with the YOT Team improving joint working. The pilot scheme initiated by Youth Services has resulted in 2 Children and Young People Improving Access to Psychological Therapies trained staff from Troubled Families attending the Clinical Trauma Ward meetings which will lead to improvements in the identification and support interventions for young people to divert away from GGSYV.

We will link into the forthcoming MOPAC initiative which will place specialists at the Royal London Hospital working on CSE and with those involved in GGSYV. When MOPAC publish the findings of the pilot on the development of an effective framework for commissioning of prevention and diversionary activities, the youth crime outcomes framework may inform our arrangements.

More recently the London Mayor launched Strategic Ambitions for London: Gangs and Serious Youth Violence which outlined the London Crime Reduction Boards (LCRB) strategic ambitions to reduce the harm caused by gangs in London. The approach focuses on the themes of **Prevention, Intervention and Enforcement**. Our approach will take a rounded view of tackling GGSYV which includes understanding GGSYV through intelligence and data analysis through to early identification and prevention, intervention and enforcement. The co-ordinated approach it calls for is in line with the adoption of the Family Wellbeing Model and our focus on prevention and early intervention. Additionally, the London Mayor's Crime Manifesto highlights the need for creating clear exit pathways for gang members wanting to leave a GGSYV related lifestyle³.

What is a 'gang'?

The term 'gang' is controversial and inevitably most people have a view on what is meant by the term and as such it can be difficult to come to consensus about the correct terminology to use to recognise the differences of opinions and the different levels of involvement in the agenda. The diagram below⁴ illustrates that the journey leading towards involvement in an organised crime

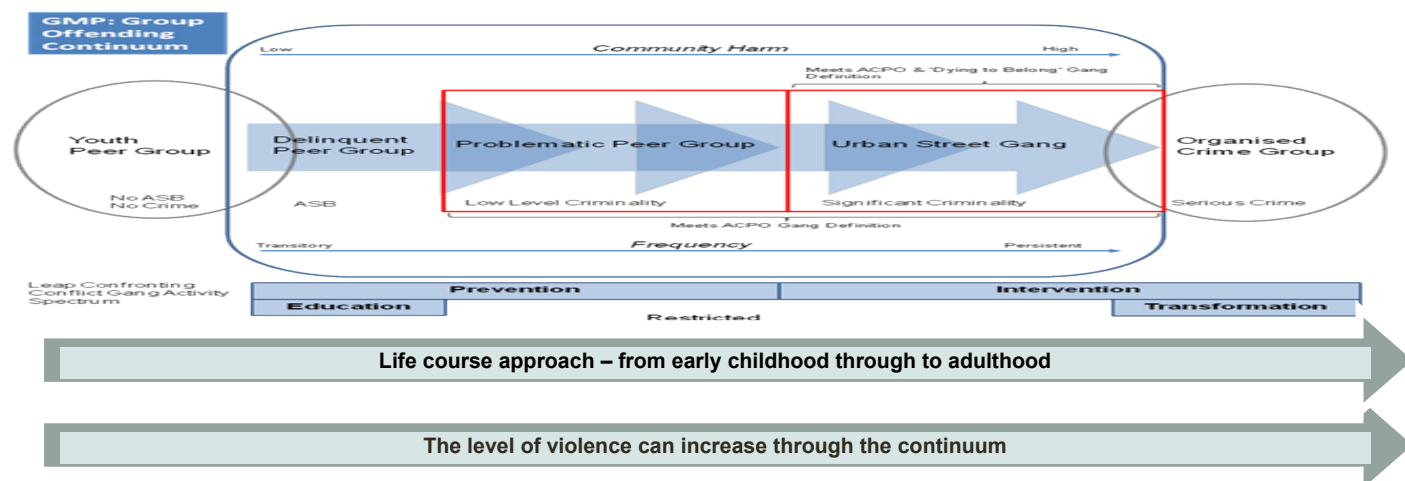
² <http://www.london.gov.uk/sites/default/files/LCRB%20gangs%20consultation%20-%20Summary.pdf>

³ <http://www.scribd.com/doc/87619798/Boris-Johnson-2012-Crime-Manifesto>

⁴ The Group Offending Continuum is used by the Home Office. Although we have adopted this Continuum, we do

group may begin with low-level anti-social behaviour, and gradually escalate in to more concerning behaviour leading to criminal activity. This continuum can be seen to fit loosely with the concept of a life course approach (this concept recognises age differentiated life-cycle stages and that the outcomes and interventions in a given part of the cycle can impact on the outcomes and life chances in another part of the life-cycle). It is underpinned with a scale that illustrates how prevention and intervention - before a young person becomes immersed in the criminal justice system can transform this journey. We know that not all people recognised in the continuum below will identify with a group or gang but we accept that being part of a group that is involved in criminality increases the risk of offending, as well as increasing the frequency and level of violence used in the offending⁵.

Diagram A – Group Offending Continuum



The Home Office definition as adopted by the local authority is that gangs are:

- A relatively durable, predominantly street-based group of young people who;
- (1) See themselves (and are seen by others) as a discernible group, and
 - (2) Engage in a range of criminal activity and violence.

They may also have any or all of the following features:

- (3) Identify with or lay claim over territory
- (4) Have some form of identifying structural feature
- (5) Are in conflict with other, similar, gangs.

(“Dying To Belong”, Centre for Social Justice, 2009 as amended by ACPO October 2012.)

The discourse on the definition of gangs has always been part of the work on tackling the issue. For some people the definition of ‘gangs’ in every day discourse is usually reference to the more visible ‘peer group’ description on the continuum but is also used interchangeably to describe those at the more serious end of GGSYV. It is not helpful to use a singular description of ‘gang’ as it gives credence to a status that would otherwise not be afforded and can in itself perpetuate the situation, it does not, in a helpful way justify who is and who isn’t in a ‘gang’.

We know from the work we do with young people at risk or involved in gangs and serious youth crime that the GGSYV continuum of involvement can be very broad, very fluid and behaviour can change over time. As such our approach to tackling the issue needs to vary in the range of interventions and be fluid enough to change with pace and time and to be able to work with those at the different ends of the continuum -from young children affected by GGYSV in the home to those involved in more serious crime. The continuum serves a useful purpose in recognising that there are different levels of involvement in GGSYV and we can shape our response accordingly.

Much of the research and the incidences that have taken place across the borough go to highlight that people, particularly young people can be perpetrators as well as victims in relation

not necessarily accept the use of the term ‘delinquents’ as a way of describing young people.

⁵ http://safe.met.police.uk/utilities/Gang_Group_Offenders_practitioners_handbook_v2.pdf

to GGSYV and as such we have not sought to define a specific age group which this strategy seeks to support but accept that it can impact on a broad age range from very young children through to adults.

Causal factors

'Ending Gang and Youth Violence', published in 2011⁶ set out causal factors that can lead to young people committing serious violence and joining gangs:

- Ill health in the family including ill mental health;
- Early childhood neglect and abuse;
- Social exclusion and early conduct disorders;
- Violent victimisation and repeated hospital visits;
- Early involvement in local gangs;
- Substance misuse;
- Early and repeat offending;
- Poverty and deprivation;
- Perceived lack of available opportunities for engagement;
- Parental abuse or neglect;
- Local attitudes to illegal economy;

These causal factors illustrate that Tower Hamlets has all the defining features that make it a borough most likely to have GGSYV as a key feature. It also illustrates that there will be multiple opportunities for services to engage with vulnerable individuals and families at risk. We will adopt an early identification and prevention approach to identifying and supporting children, and young people and those at risk or involved in gangs and serious youth violence, working with the family and the community to address the individuals, the families and the community needs. Our adoption of the Family Wellbeing Model⁷ means we are well placed to create a shared understanding of how we respond to vulnerable children and families as a partnership.

Current research - risk and impact

Current research (appendix A sets out a summary of the research) highlights the following key areas of concern in relation to GGSYV:

- Serious levels of **violence and substance misuse** as part of gang life, both of which perpetuate psychological problems – poor mental wellbeing is both an impact and risk factor;
- People with **learning disabilities** are at increased risk of experiencing gender based violence
- Significant levels of **sexual violence, victimisation and sexual exploitation of females** and the lack of appropriate services – violence against women is a high impact area
- **Child sexual exploitation (CSE)** in the context of gangs operating and significant failings in protecting children; it is also a form of violence against women and girls;
- **Looked After Children (LAC)** are at risk of re-offending and sexual exploitation;
- **Children who go missing** are at risk of CSE
- **Forced marriage** can be a stressor for young people going missing, it can be a family/community response to young people who go missing, it can be a family/community response to sexual exploitation - leading to children going missing.
- Vulnerable individuals are at risk of **radicalisation and extremism** and we recognise that often violent offenders may seek alternative lifestyles as an escape from criminality;
- **Poor mental health** and gang affiliation share common risk factors relating to young people's early life experiences and the environment in which they grew up and the more risk factors they are exposed to the greater the negative outcomes.

⁶ <https://www.gov.uk/government/publications/ending-gang-and-youth-violence-cross-government-report>

⁷ <http://www.childrenandfamiliestrust.co.uk/family-wellbeing-model/>

This recognises a range of associated abuse and risk factors in the context of gangs operating.

The research highlights the need for the following in addressing GGSYV:

- Assessments which identify health and mental health needs, substance misuse, the risk of sexual exploitation and of harm from GGSYV;
- Assessments which identify females, children who go missing and LAC and monitor their specific needs and track outcomes
- Effective information sharing, profiling, evidence based commissioning, whole-school approach to safeguarding and strong leadership and commitment;
- A life course approach focusing on preventing risk factors with negative outcomes and promoting mental wellbeing working with the family and building from the early stages of life;
- Policy and specialist services needed to identify and to support females affected by GGSYV;
- Exit Strategy for removing from GGSYV to include health and employment support and a whole family approach.

Local experience

Local agencies would like to see clearer referral pathways and better joining-up of service delivery. In-line with the strategic direction of the local authority, local agencies call for better early identification using all sources of intelligence to identify those who may otherwise become involved in GGSYV. The current arrangements are felt to be disparate with no operational or strategic lead and there is no clarity about the interventions professionals can access to support those vulnerable. Furthermore, there is recognition that investment has been made in the early intervention stages however there are two gaps in relation to working with GGSYV. Firstly, that something significant has to happen before a family will get support by which stage they are already involved in GGSYV and we need to get better at recognising the risk factors associated with GGSYV much more early on. Secondly, there is a cut off point for access to local authority early intervention support (17 year olds for Youth Offending Service, 19 year olds for Targeted Support although up to 25 year olds with Special Educational Needs) it is felt that in transition from children's services to adulthood there is a lack of interventions to support young vulnerable adults and adults generally as the issues become matters of public protection rather than safeguarding and taking a whole family approach would require us to re-think the focus on this.

Evidence of groups, gangs and serious violence in Tower Hamlets

The GGSYV impact on the community can vary depending on where on the group offending continuum the analysis points. We know that regardless of whether people are personally affected or not – it can influence the perception of crime in an area. In the Annual Residents Survey 2013/14 crime remains the top personal concern for local residents⁸.

Local discussions with practitioners working with the community highlight that young people can see gang membership as a form of support, a way of receiving respect and belonging and that whilst the above can be true, young men in particular can find themselves in adult authoritative role as a result of having no other male role models around. Respect and being able to provide for the family become the aspirations which can lead to focusing on short term gains and can perpetuate family violence including adolescent to parent abuse and sibling abuse and that we need to get better at identifying the risk factors of this. The defining feature of GGSYV locally is that serious youth violence has increased and practitioners are most worried about the intensity of the violence and the impact of this on the family.

The diagram below sets out the information available on the prevalence of GGSYV using the Group Offending Continuum.

Diagram B – Indicators of prevalence along the Group Offending Continuum

⁸ http://www.towerhamlets.gov.uk/lgs/851-900/867_consultation/annual_residents_survey.aspx

<p>Youth Peer Group Almost one quarter (24.3%) of all LBTH residents are under 20 years of age</p> <p>Levels of child poverty are significant across the borough</p> <p>34.8% of all households in the borough, have fewer rooms than required</p>	<p>Delinquent Peer Group ASB crime rate is ranked as high December 2014 – 929 crimes - 3.66 rate* November 2014 1274 crimes - 5.01</p> <p>*a rate of that crime per 1,000 head of population</p>	<p>Problem atic Peer Group Youth Service A&E data: largely 16-19 year olds with knife wounds/facial injuries</p>	<p>Urban Street Gang There are currently two gangs which are most active, with increased activity from other gangs periodically</p> <p>Almost 50% of violence against the person with substantive outcomes offences are committed by Asian or Asian British (males) (2013/14) – this group make up 65.5% of the population of 10-17 year olds (2011 Census) A Thematic Review is underway (Autumn 2015) to better understand causal factors and to develop local responses to serious offences .</p> <p>Drugs offence and violence against the person are the top two reasons for substantive outcomes; nature of violence is intensifying and is a major concern for frontline workers.</p> <p>Violence against youths has increased by 16.5% (339 in 2013 and 395 in 2014)</p> <p>Pre/out of court referrals for females involving violence against the person shows increase in referrals: 2011/12-13, 2012/13-15, 2013/14-14, 2014/15-19</p>	<p>Organised Street Gang At January 2015 there were 158 individuals on the Police Gangs Matrix, only 1 is Female, 38 of these are 17 years or under.</p>
---	---	---	---	---

Appendix B provides further information on the diagram above.

VOLT analysis

As part of the Home Office work undertaken in 2012 - a local victim/offenders/locations/times (VOLT) analysis was undertaken. The data sources that informed this are no longer available and the profile may have changed; however, it gives an indication of the prevalence at the time:

Victims

- The majority of victims of serious youth violence are Asian males.
- The main victim age-range concentration is between 15 and 19 years (74%)
- The peak victim age is 15, with most victims living on the borough
- 28% of victims of knife-enabled personal robbery are in the 10 –19 age group
- 89% of victims within the 10 – 19 age group are male

Offenders

- Serious youth violence on the borough is showing an overall increase since August 2010
- In 2011 there was a substantial increase in the proportion of violence against the person offences committed by Asian/Asian British young people in the borough
- The majority of those accused of serious youth violence are Asian males.
- The main age range is 15-17 (70%) Numerous youth groups have been identified in Tower Hamlets. Many are linked to postcode areas/schools and a higher proportion of these groups involve Asian youths than would be found elsewhere in London due to the demographics of the borough. Of those accused of serious youth violence aged 10 – 19 years, 67% offended in a group of two or more
- Gun related crime is very low and knife-related crime is relatively low compared with other London Boroughs though rising. Belts and improvised weapons are most common.

Locations

- There are three hotspots for reported serious youth violence in the borough: one in the west (Brick Lane) and two in the east (Poplar).
- Hotspots in the east (Poplar) are largely related to gang rivalry between two groups: the 'X' and the 'Z' and cross-border disputes with groups from other boroughs including Hackney – The hotspots can change with time and this was from data taken at the time
- Intelligence suggests that gang members are involved in drug dealing and that the younger members are becoming more active and trying to 'step up' which is causing tensions and associated violence. Gang members also commit other offences such as burglary and anti-social behaviour.

Times

- Temporal analysis suggests that after-school violence is one of the main contributors to serious youth violence.

Gender based violence

The Violence Against Women and Girls Action Plan produces a bleak picture of serious gender based violence in Tower Hamlets:

- We have one of the highest rates of reported domestic violence incidents across the 32 London boroughs;
- 97% are reported as crime against women;
- In the period 2011-2012, The Police received 6625 reports of domestic violence;
- High risk referrals to the Tower Hamlets Multi-Agency Risk Assessment Conference (MARAC) have increased year on year, such that 2011-12 will see around three times as many high risk cases being referred as in 2008-09;
- Domestic abuse and incidents of violence (against women) currently accounts for a high proportion of referrals to LBTH Children's Social Care and is a key child protection issue for the borough.

Child Sexual Exploitation

An independent review of child sexual exploitation is being undertaken in the spring of 2015 and this will provide further information in this area. Tower Hamlets has had a Multi-agency intelligence sharing group which has existed for about 10 years, this has tracked and brought to attention about 70 girls and/or young women that have been of concern in any one year as victims or at risk of CSE.

Locally, we are hearing more from boys who describe being victims of gang affiliated CSE, both as a victim of rape and forced sexual activity and as a 'victim' who is made to take part in gang initiation activity which can involve perpetrating sexual assault on others because deviating from gang expectations has dire repercussions. We have very little information locally about the prevalence of boys as victims of CSE but there is local and national recognition of this vulnerable group.

Radicalisation and extremism

The Counter Terrorism Local Profile (CTLP) places Tower Hamlets as a high risk area alongside its neighbouring boroughs. Locally, we have seen a small number of arrests under the Terrorism Act and extremism is becoming an increasing concern. Whilst involvement in radicalisation and extremism is different from the accepted definition of gangs, we recognise that offenders may seek alternative lifestyles as an escape from criminality. In this context, involvement in GGSYV and radicalisation has crossovers in the work we do across safeguarding and crime prevention. This strategy recognises this as both a safeguarding and crime prevention issue and as such will look to ensure all staff are well trained and recognise the risks and know the referral routes if they are concerned about radicalisation in the context of groups, gangs and serious youth violence.

Substance misuse

Tower Hamlets Substance Misuse Strategy 2011-2014 highlights the significant issue of substance misuse locally:⁹

⁹ <http://www.towerhamlets.gov.uk/pdf/Draft%20Substance%20Misuse%20Strategy%20Summary.pdf>

- Although the average rate of alcohol consumption across Tower Hamlets is relatively low, due to a large proportion of the population who do not drink, 43% of people who do drink have harmful or hazardous drinking patterns;
- Despite the large proportion of the population who do not drink, we have higher than the London average alcohol-related admissions to hospital (1,841 per 100,000 alcohol related hospital admissions in 2009/10 compared to a rate of 1,684 in London and 1,743 in England);
- Nationally, it is estimated that nearly half of all violent crime and antisocial behaviour is alcohol related;
- Between April 2009 and March 2010 drug related offences (dealing and possession) in Tower Hamlets accounted for 12.2% of all “notifiable” offences dealt with by the police. This is the second highest rate in London;
- Where mandatory drug tests in police custody suites have been undertaken, 30% of those tested have had a positive result for opiates or cocaine (mostly crack cocaine). There are well documented associations between dependent class A drug use and acquisitive crime;
- The most recent estimate suggests that there are around 3,795 people with problematic drug use in Tower Hamlets; Of this number, 1,775 (47%) are estimated to have not yet engaged with treatment;
- Alcohol misuse, in the form of ‘binge drinking’, remains prevalent among young people with no sign of abating;
- 128 young people with substance misuse related issues were treated in 2009/10, 38.2% of whom were receiving treatment for alcohol misuse. The average age of a young person in treatment was fifteen and 73% of those in treatment were male;
- There is a considerable body of international literature showing that treatment for alcohol problems is both effective and cost-effective.

Hate crime

Hate crime is crime committed against someone because of their disability, gender-identity, race, religion or belief, or sexual-orientation, it can take place and be the motivation for offending behavior in the context of groups and gangs operating.

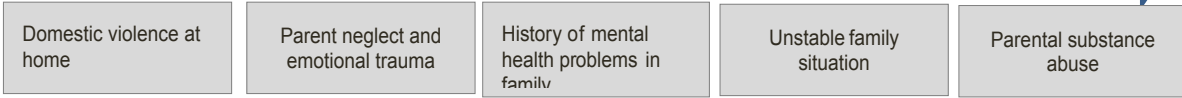
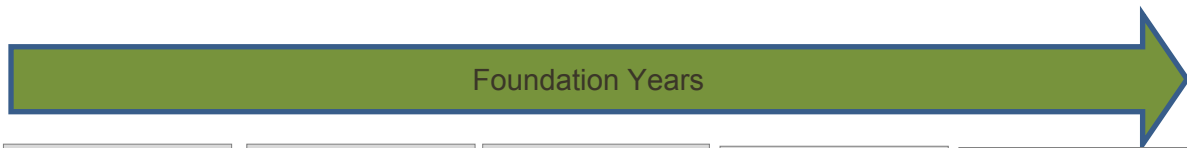
Local police data from July 2013 to July 2015 shows that incidences of hate crime have occurred in the context of the perpetrators being in a ‘group’ at the time of the offence.

Types of hate crime	Number of incidences	Number of incidences where the perpetrator(s) were in a group at the time of the offence
Anti-Semitic	29	2
Disability	19	0
Faith	146	2
Gender	15	0
Homophobic	138	7
Islamophobic	99	0
Race	913	19
Traveller	0	0

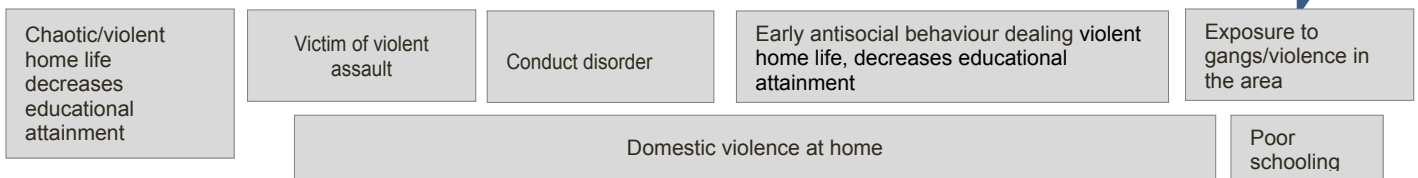
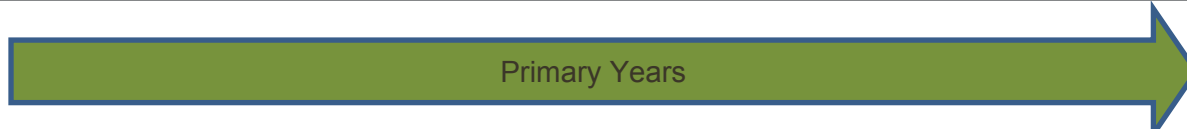
Improving our monitoring arrangements for data on group offending would be useful for identifying emerging issues and will enable us to respond to and better manage this. As part of the information sharing arrangements, this data set will also be considered.

Best practice

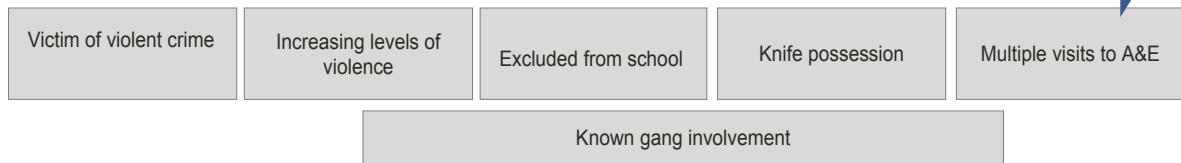
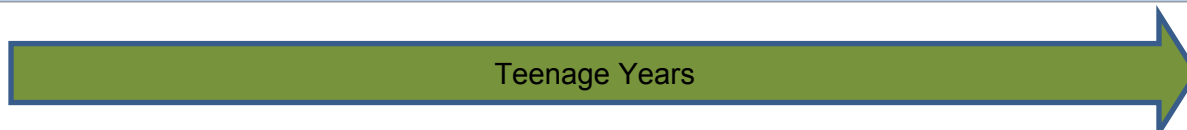
In developing recommendations for the way forward in tackling groups, gangs and serious youth violence, it is worth considering practice elsewhere. In 2011, a cross-government report¹⁰ took a life course approach to highlight good practice in ending gangs and serious youth violence.



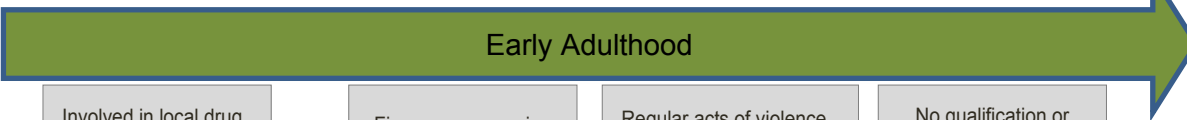
Good practice: Sure Start Children's Centres, free nursery places, parenting programmes, Family Nurse Partnership, Health Visitors, MARAC, Domestic Violence Advisors, Troubled Families, Substance misuse services



Good practice: Mental Health Services, Schools to undertake targeted work with children at risk, help parents' spot signs of gang involvement, school behaviour policies to set out multi-agency assessment for underlying causal factors, parenting skills for parents, substance misuse services, targeted work with those at risk.



Good practice: A&E and Social Care link, Substance misuse services, Multi-systemic therapy for major behavioural problems, psychological therapy, action plan for CSE, GGSYV materials at school, Munro recommendations, LSCB to address safeguarding GGSYV, services for girls suffering sexual abuse, Youth justice Liaison and diversion sites, identify vulnerabilities at arrest, target problem areas, YOT run gang reduction forums, gang injunctions for 14 to 17 year olds, improve health and education in secure estate and on release from custody to address SEN mental health disability etc, alternative provision for permanent exclusions with accountability for outcomes, parenting programmes, School multi-agency support plans to help children remain in school accessing education and improving behaviour. Schools promote conflict resolution and engagement in positive activities



Good practice: Offending behaviour programmes for violent offenders, prison leavers referred to work programmes, re-housing for former gang members, mediation using ex-gang members, firm arms offences, substance misuse services, deport dangerous gang members, reinforce criminal justice consequences (law on joint enterprise), community impact statements

¹⁰ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97862/gang-violence-detailreport.pdf

Current arrangements for tackling GGSYV serious youth violence

Set out below is the range of services/interventions available to support those involved in GGSYV set out across the three key themes for the delivery of the strategy. The data and intelligence column identifies the information which may be used to inform a preventative approach.

Data processing and Intelligence available	Current interventions		
	Early identification and Prevention	Intervention and Support	Enforcement and Support
Pupil Referral Unit Data	School Patrols	IAPT practitioners placed at A&E	Gangs Team/ Police
School children at risk of exclusion	Multi-Agency Risk Assessment Conference	Youth workers at CAMHS	Legal powers
YOT convictions and court orders	Multi-Agency Sexual Exploitation Panel	Youth & Community Service Case Worker based in Leaving Care Team	
Attendance and Welfare data	Multi-Agency Safeguarding Hub	Gangs Team/Police	
Social Inclusion Panel (including those below 18 on Prevent)	Youth Offending Team (incl. Early Intervention & Prevention)	Integrated Offender Management	
Leaving care team	Pupil Referral Unit	Restorative Justice	
Youth and Community Services	Victim Support	Substance Misuse Treatment Services	
Police Gangs Matrix Meetings	Social Workers	Targeted Youth Service	
A&E data	Attendance and Welfare Service	Rapid Response Team	
North East London Collaboration	Parenting Support Programme	Troubled Families	
MERLIN	Girl Talk (community and school settings)	NIA (Support service - VAWG)	
Prevent Safeguarding Adults Panel	Multi-Agency Public Protection Arrangements	NSPCC Protect and Respect	
NEETs	Targeted Youth Support	Mediation	
Housing ASB data	Schools	St Giles Project	
Third sector agencies data	Schools Highlights Panels	Ben Kinsella – Kickz	
School Patrols		Social Inclusion Panel (including those below 18 on Prevent)	
Rapid Response Team		Pupil Referral Unit	
Tower Hamlets Enforcement Officers		Multi-agency School Support Plan	
		CAMHS worker linked into YOT	
		Hate Crime reporting	
		CAMHS	
		Troubled Families	

Our approach to tackling groups, gangs and serious youth violence

Our approach will focus on intelligence and data analysis, early identification and prevention, intervention and support, and enforcement with support delivered through strong leadership and partnership. In developing our approach we have considered feedback from the recent Pan-London Gang Exit and Resettlement event which took place in December 2014. It is also informed by our local event with third sector involvement which looked at local challenges. This approach is in line with national and other local strategies.

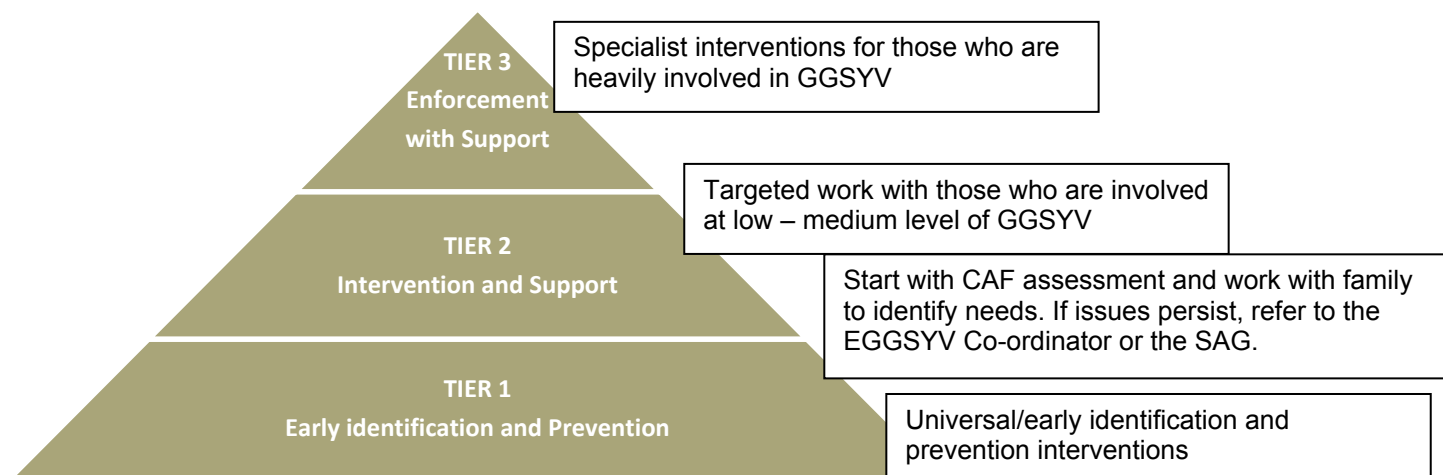
Intelligence and data sharing	Early identification and prevention	Intervention and Support	Enforcement with Support
<p>Join-up sharing and analysis of data to create profiles of GGSYV with data from Health, Police, community settings and the local authority with the intention of creating profiles of individuals, geographical areas or activities to identify symptoms and extent of GGSYV and use this to guide resource allocation and to support individuals and families affected by GGSYV</p>	<p>Targeting those at risk or vulnerable to GGSYV or any of the associated forms of abuse. This will focus largely on community settings, schools and frontline services working with children, young people and families. The aim of this will be to prevent the possibility of young people from becoming involved in any form of GGSYV or its associated abuse.</p>	<p>Targeting those involved in low-medium levels of GGSYV and any of the associated forms of abuse by identifying the needs of individuals and families affected by GGSYV with the aim to reduce or deter the escalation of involvement in more serious GGSYV</p>	<p>Targeting those heavily involved in GGSYV and effectively enforcing to deter, disrupt or incapacitate using the full force of the law and continuing to support as appropriate, including creative use of the legal powers available across the partnership</p>

Using the Family Wellbeing Model

The overall aim of Tower Hamlets' Family Wellbeing Model is to safeguard and promote the welfare of children, young people and families (Section 10 of the Children Act 2004), it is a partnership model which illustrates how we will respond to children and young people across three levels of need – universal, targeted and specialist – and the model describes services as falling into these three levels of support. The Family Wellbeing Model will ensure the risk factors and access to GGSYV related interventions are clearly identified. There are a number of referral forms, and therefore how we measure outcomes which are currently being used; these are being given further consideration as to which is best fit for the purposes of tackling GGSYV, this will be directed through the review of our existing Family Wellbeing Model.

The proposed Strategic Action Group (SAG) will report on:

- Evidence based deployment of resources using data on GGSYV activity in the borough;
- Number of cases which have been identified through the Strategic Action Group which has resulted in intervention and the outcome for the case



Ending GGSYV Co-ordinator

As part of our commitment to addressing GGSYV, we will recruit an Ending GGSYV Co-ordinator managed by Service Manager Family Intervention (Troubled Families Co-ordinator) whose primary role will be to:

- Lead the implementation of the GGSYV Strategy as directed by the Strategic Action Group;
- Ensure the contributions of all partners to tackling GGSYV is co-ordinated and works effectively;
- Ensure the collaborative use of data for the purposes of identification for intervention and prevention;
- Be the single point of contact for GGSYV, including managing social media contact;
- Work across agencies to develop new initiatives;
- Act as the Pan-London cross boarder local authority link;
- Work closely with all other safeguarding leads to ensure our approach to GGSYV is embedded in all works of the Council;
- Manage a multi-agency response to complex cases of GGSYV.

Additionally, the GGSYV Co-ordinator will have a dotted reporting line to Service Head for Children's Social Care.

Troubled Families Board and Strategic Action Group

To ensure strong leadership on the issue of GGSYV, we will identify a senior local authority lead responsible for reducing the harm caused by GGSYV and its associated abuse. The Strategic Action Group will operate as a sub-group of the Troubled Families Board, reporting to the Board every quarter on operational matters. The operation of the Strategic Action Group will have the following key purpose:

- Bring together and use data and intelligence collaboratively for the purposes of profiling GGSYV, including identifying hot-spots, victims and offenders, activity, group offending and drivers of GGSYV and use this to proactively address GGSYV for the purposes of commissioning and service design;
- Use sources of data and intelligence collaboratively to identify groups, individuals and families in need of support and intervention and ensure co-ordinated delivery and management of complex cases;
- Be the base for strong links to the Police, Community Safety, Health, Youth Offending, Registered Social Landlords, ESCW Social Care staff, CAMHS Staff;
- Drive the delivery of the GGSYV Strategy Action Plan;

Arrangements for delivery of the strategy

The implementation of the Ending GGSYV strategy will be placed with the local authority lead responsible for reducing the harm caused by Ending GGSYV and driven by the Strategic Action Group through Troubled Families. The action plan will be reviewed by the Strategic Action Group and reported to Troubled Families Board every quarter, identifying any operational issues. The implementation of the action plan and the work of the Strategic Action Group will be reported to the Community Safety Partnership Board annually.

Priorities going forward

The priorities identified below have developed into the action plan for implementing the strategy

What our priorities should be in tackling GGSYV and its associated abuse			
Data and intelligence	Early identification and Prevention	Intervention and Support	Enforcement and Support
Agree a senior local authority lead responsible for reducing the harm caused by GGSYV and its associated abuse	Apply a set of common risk factors for GGSYV and the associated abuse and use this to improve understanding of the identification of risks to safeguard and protect – this should be included in the review of the Family Wellbeing Model	Develop clear GGSYV Exit Strategy for those who want to exit an offending lifestyle- include employment options, health (including mental health and substance misuse) and housing needs underpinned by a whole family approach	There are a range of legal powers available to individual agencies which can be utilised to tackle GGSYV- draw together the full range of powers available and consider how it can be utilised creatively to end or disrupt offending behaviour.
Employ an Ending GGSYV Co-ordinator	Apply a consistent approach across agencies to improve identification, support planning and monitoring of those at risk of harm from GGSYV and its associated abuse through a common practice framework – include: <ul style="list-style-type: none"> • Identification of gender specific needs, health including substance misuse, mental wellbeing; • Monitoring of children who go missing and Looked After Children and track their outcomes • Take a whole family approach to identifying needs and support planning 	Consider Gang Call-Ins, including Trauma Surgeon resources and knowledge	Develop clear GGSYV Exit Strategy for those who want to exit an offending lifestyle - include employment, health (including mental health and substance misuse) and housing needs underpinned by a whole family approach
Set up GGSYV Strategic Action Group with responsibility for delivering the GGSYV agenda and manage complex cases	Map the different agencies that offer interventions for GGSYV and ensure clear referral pathways for those affected by GGSYV and its associated abuse ensuring CSE, radicalisation and gender based violence and hate crime pathways recognise GGSYV element	Provide gender specific support for women and girls experiencing GGSYV related abuse	Introduce Gang Injunctions - introducing conflict and reconciliation service
Develop GGSYV data and intelligence sharing from the local authority with the Police, Housing and Public Health with links established with DWP, Probation, MASH, Youth Offending, PRU and Youth Services and other relevant council services to consider the full range of data available and use for the purposes of identification and prevention	As part of whole schools approach to safeguarding, include the GGSYV agenda (include this information at the Pupil Referral Units) and ensure school behaviour policies set out multi-agency assessment for understanding underlying causal factor	Ensure support for ex-offenders who may otherwise be at risk of radicalisation when released in the community	Assess the current gaps in provision for those transitioning from children's interventions to adult interventions with a view to putting in place interventions needed where there is a gap
Agree data to be shared across boroughs through the North East London Forum	Develop an engagement process to gather feedback from local communities, faith groups, VCS, youth groups etc and to raise awareness of risk factors and reporting of GGSYV	Consider Gang Injunctions and conflict reconciliation service	
Agree a legally compliant information sharing protocol which clearly sets out the data required from partners, the purpose of the data and the frequency of data sharing	Deliver parenting programmes to support parents to identify risks and signs of engagement in GGSYV and how to access support needed	Monitor hate crime reporting which takes place in the context of groups and gangs	
Produce problem profile on GGSYV informed by all partner data to inform understanding of the drivers of gangs and youth violence e.g. school exclusion data	As part of the review of the Family Wellbeing Model review, ensure staff have an understanding of the risk factors of GGSYV and are aware of services that support those affected		

Appendix A – Current research on GGSYV

Gangs and serious youth violence – what does research tell us?

Research shows that there are a number of associated abuses which can take place in the context of gangs operating and serious youth violence taking place.

Gender based violence

All research tells us that violence is a part of gang affiliation for all members. Race on the Agenda's research on 'Female Voices in Violence' by Firmin¹¹ highlighted concerns about the lack of appropriate services available to females caught up in gangs, the use of rape, sexual violence, substance misuse and exploitation by gang members, and the impact of serious violence on their sexual and mental health and that policy and specialist services are needed to support women involved in gangs.

Firmin has highlighted the involvement of girls and young women in youth gangs and the potential risk of offending, domestic abuse, and sexual violence amongst other issues affecting these young people. We acknowledge that gang-associated girls and young women can be vulnerable to sexual violence and exploitation and our VAWG strategy places us in a position to address some of the issues and is strengthened by the approach taken by this strategy.

'It's wrong ...but you get used to it'¹² a study of gang associated sexual violence towards and exploitation of, young people in England by University of Bedfordshire found that there are significant levels of sexual victimisation within the gang-environment and young women are at particular risk, women associated with a gang member can be exposed to different forms of risk depending on their status within the environment highlighting how it can impact families; women are blamed, young people assume that sexual violence is inevitable or 'normal', incidences are not being reported or adequately identified and that this form of abuse and exploitation must be viewed within the wider patterns of harm and victimisation between young people.

A recent Probation Inspection¹³ found that fewer girls than boys offended with crimes being less serious and that due to the relatively low numbers, the needs of girls in the justice system can be overlooked and it needed a tailored response. It highlights Look After Children as having a pattern of reoffending. The best assessments and interventions recognised that girls had different needs to boys and that YOTs were able to track outcomes for girls. In essence, assessments should identify needs of girls, gender based risk of harm, possibility of sexual exploitation, substance misuse and health needs in assessment, intervention and information sharing. We should also evaluate the effectiveness of interventions with analysis and sharing of data in relation to safeguarding girls and that offending rates of LAC should be routinely evaluated. It asks that staff are trained to identify needs in relation to girls and gangs. It recommends exit strategies to ensure access to appropriate ongoing support when YOT support comes to an end for young girls.

Learning Disabilities and Gender Based Violence

Literature Review summary¹⁴ - People with learning disabilities are at increased risk of experiencing gender based violence. Below are the key points from the literature review:

- Disabled people are more likely to experience GBV than non-disabled people..
- People with learning disabilities are more likely than other disabled people to experience GBV.
- Disabled women are more likely to experience GBV than disabled men or non- disabled women.

¹¹ The Female Voice in Violence Project. Final report: This is it. This is my life... ROTA March 2011

¹² It's wrong ...but you get used to it, University of Bedfordshire, 2013

¹³ Girls in the Criminal Justice System, Criminal Justice Joint Inspection, December 2014

¹⁴ Clare McFeely, National GBV & Health Team, Chloe Trew, Scottish Consortium for Learning Disability, February 2011

- The perpetrators of abuse are most often known to the victim.
- People with learning disabilities are less likely to report abuse and less likely to receive a good service from agencies when they do.
- The consequences of abuse for people with learning disabilities are similar to those without learning disabilities but may be more severe.
- Health care workers have a responsibility to protect people from abuse, identify abuse and to respond to the needs of people who have been abused.
- There is little evidence of effective interventions to address this issue.

Child Sexual Exploitation

Our local Child Sexual Exploitation Strategy adopts the Department for Children, Schools and Families definition of Child Sexual Exploitation and as such recognises that it can impact on both boys and girls.

'Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive something (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing and/or others performing on them sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social /economic and/or emotional vulnerability.' (DCSF, 2009)

The Office of the Children's Commissioners inquiry into child sexual exploitation¹⁵ CSE in gangs and groups in 2012 highlights the need to do much more to protect and support those experiencing or at risk of sexual exploitation. The inquiry identified nine significant failings in the current response to tackling and addressing child sexual exploitation and sets out a framework and a set of principles for effective practice. They recommend compliance, information sharing, problem profiling, evidence based commissioning, whole-school approach to child protection and also highlights the need for strong leadership and commitment as necessary for effective practice including a list of common risk factors. One of the key highlights of the report was the finding that young people could be victims and the perpetrators of abuse associated with GGSYV and sets out risk indicators of CSE.

Mental health, substance misuse and gang affiliation

The Centre for Public Health report¹⁶ highlights that whilst a minority of young people are involved in gangs, gang members account for disproportionate levels of crime and are at increased risk of violence both as a victim and a perpetrator and are also disproportionately affected by mental health difficulties – being involved in gangs can negatively impact on mental wellbeing and having poor mental wellbeing can draw young people to gangs. Additionally, violence and substance misuse are part of gang culture and perpetuate psychological problems. Girls involved in gangs are particularly vulnerable to poor mental health due to sexual violence. The report concludes that poor mental health and gang affiliation share common risk factors relating to young people's early life experiences and the environment in which they grew up and the more risk factors they are exposed to the greater the negative outcomes. It calls for a life course approach focusing on preventing risk factors and promoting mental wellbeing working with the family; building from the early stages of life. Our local CAMH Service must have a strong role to play.

Children who go missing

¹⁵ <http://www.childrenscommissioner.gov.uk/info/csegg1>

¹⁶ The mental health needs of gang-affiliated young people, Centre for Public Health, January 2015

In 2012, the Joint All Party Parliamentary Group Inquiry on Children Who Go Missing from Care and the Children's Commissioner's inquiry into Child Sexual Exploitation in Gangs and Groups suggested that children who go missing are vulnerable to sexual exploitation and highlighted that the Local Safeguarding Children Boards have an important role to play in monitoring and interrogating data on children who go missing.

Young people who go missing are at risk of CSE is generally acknowledged in the CSE literature. Sharp¹⁷ found that young people seeking to escape a forced marriage by running away lack access to the economic resources required for independent living and are therefore at risk of child sexual exploitation. In her study of young people she found:

- Those that were homeless were sexually exploited or were at risk of sexual exploitation through seeking older boyfriends to go and live with.
- Forced marriage is a stressor for going missing in the context of CSE;
- Forced marriage is a family/community response to going missing;
- Forced marriage is a family/community response to sexual exploitation leading young people to run away.

She found risk assessments to be too narrow in enabling the identification of multiple risks and this was further compounded by services working only on particular issues.

Prevent and exploitation

'Prevent' is one of four strands of the Government's counter-terrorism strategy. This is part of its overall approach to countering terrorism with the aim of preventing people becoming terrorists or supporting violent extremism. A key element of the Prevent Strategy¹⁸ is supporting individuals who are being targeted and recruited to the cause of violent extremism and protecting vulnerable individuals who could be at the risk of radicalisation and extremism. We recognise that often violent offenders and gang members seek alternative lifestyles as an escape from criminality; however the route they take can include adopting extremist religious practices or becoming members of extremist organisations. Work therefore needs to be done with offenders to safeguard against radicalisation and extremism.

Appendix B – Prevalence of GGSYV in Tower Hamlets

¹⁷ www.beds.ac.uk/research/iasr

¹⁸ Prevent Plan, London Borough of Tower Hamlets 2014/15

Prevalence of GGSYV

Adopting the groups identified in the Home Office continuum, the prevalence of GGSYV in Tower Hamlets can be described as below:

Youth Peer Group – not involved in ASB or crime.

These are groups of young people who may congregate in public places. Given the boroughs young population, overcrowding and high poverty levels, this is likely to be a high feature of the borough.

An independent blog documenting London Street gangs lists 37 distinct groups in the borough which would appear “lower down” on the continuum. Many of these groups are linked to postcode areas or schools, and may not perpetuate serious anti-social behaviour.

Delinquent Peer Group – involved in anti-social behaviour

These are groups of young people who congregate and cause or is likely to cause harassment, alarm or distress to one or more persons not of the same household.

ASB reporting data from the Police shows Tower Hamlets as having considerably above average reporting of ASB with trends showing activity is higher than last year in that period.

Problematic Peer Group – Involved in low level criminality

A&E data – from youth workers

Between April 2014 and November 2014 Youth and Community Services based at the A&E on Fridays (6:30pm – 1am), Saturdays (6:30pm – 1am) engaged 44 young people between the ages of 13 and 28 with the largest representation being in the 16 and 19 year groups. Whilst there are data recording and completeness issues this snap shot reports:

- The vast majority of victims were from Tower Hamlets (73%) there were young people from Hackney, Newham, Haringey, Camden and Islington;
- Of the reasons recorded for visiting the A&E, stabbing was recorded 10 times (3 Black British, 7 Asian British) Bodily injury (mainly facial injuries) recorded 7 times; 3 were under the influence of drugs or alcohol. 6 received intervention because they were peers and others were unrecorded
- 93% were male, 7% were female – these each coming from Asian Bangladeshi, Arab and Black British background as peers, the reasons for their visit is unknown except the Black British female was a peer whose friend had been stabbed

This data set is collected over the peak periods on Fridays and Saturdays only. Similar data on serious injuries sustained by people through violence which would be collected by health colleagues is not routinely shared. Furthermore there is currently no consistent approach to working with neighbouring boroughs and we can strengthen this through better information and data sharing.

The Prevent Plan states that despite the widespread condemnation of extremism, groups that seek to radicalise (namely the proscribed Al – Muhajiroun) can be found in the borough. It is important that they are prevented from increasing their membership and do not act as a starting point for radicalisation and influencing individuals onto further extremist groups, self - radicalisation, and subsequently committing a terrorist offence.

Offences are grouped by date of substantive outcome

Ethnicity	2012/13			2013/14		
	No. of All Offences	No. of Violence against Person Offences	National Census 2011 % of 10-17 yr old population	No. of All Offences	No. of Violence against Person Offences	National Census 2011 % of 10-17 yr old population
Asian or Asian British	273	53	65.5%	298	54 (48%)	65.5%
Black or Black British	86	22	9.4%	128	29 (26%)	9.4%
Chinese or other ethnic group	4	1	1.8%	1	0	1.8%
Mixed	49	10	5.5%	49	7 (6%)	5.5%
White	198	48	17.8%	102	23 (20%)	17.8%
Total	610	134	100.0%	578	113	100.0%

Offensive Weapons Offences with Substantive Outcomes

Grouped by date of offence

Ethnicity	2012/13			2013/14		
	No. of Offensive Weapons Offences	% of Total Offensive Weapons Offences	National Census 2011 % of 10-17 yr old population	No. of Offensive Weapons Offences	% of Total Offensive Weapons Offences	National Census 2011 % of 10-17 yr old population
Asian or Asian British	10	37.0%	65.5%	16	61.5%	65.5%
Black or Black British	9	33.3%	9.4%	6	23.1%	9.4%
Chinese or other ethnic group	0	0.0%	1.8%	0	0.0%	1.8%
Mixed	1	3.7%	5.5%	3	11.5%	5.5%
White	7	25.9%	17.8%	1	3.8%	17.8%
Total	27	100.0%	100.0%	26	100.0%	100.0%

2013/14	Number
Asian or Asian British	16
Having an Article with Blade or Point in a Public Place (Offensive) 3	3
Possession Offensive Weapon Without Lawful Authorisation or Excuse 3	13
Black or Black British	6
Having an Article with Blade or Point in a Public Place (Offensive) 3	4
Possessing Firearm Without Certificate 2	1
Possession Offensive Weapon Without Lawful Authorisation or Excuse 3	1
Mixed	3
Having an Article with Blade or Point in a Public Place (Offensive) 3	2
Possession Offensive Weapon Without Lawful Authorisation or Excuse 3	1
White	1
Possession Offensive Weapon Without Lawful Authorisation or Excuse 3	1

Urban Street Gang – Involved in significant criminality

By adopting the Home Office definition of gangs locally, we identify two gangs involved in the more complex and criminal end of the gang's continuum. The two gangs are known locally as 'X' and 'Y' based on geographical boundaries, primarily based in geographical areas. Historically there have been high level incidences involving these gang members. Monitoring of gangs is made further complex because different agencies codify gang involvement and gang membership differently.

Substantive outcomes

Drugs offence and violence against the person are the top two reasons for young people receiving substantive outcomes. The act leading to the substantive outcome involving drugs offences or violence against the person is most likely to have taken place in the group context involving 2 or more persons. The numbers are reducing over the years; however there are concerns about the nature of violence intensifying.

Organised Crime Group – Involved in serious crime

Gangs Matrix data

The matrix is used to identify the most harmful gang members:

- individuals in a gang are scored - not the gangs
- individuals are identified by police and partners
- based on individuals previous violent history (last 3 years)
- based on the individuals recent intelligence (violence/weapons last 6 months)
- based on partners risk / harm score
- based on intelligence managers judgement
- individuals are also scored and ranked as victims of violence

Each gang member is scored according to how many crimes they have been involved in over the last three years. This scoring is weighted according to the crimes' seriousness and how recently it was committed. In addition intelligence from the last six months is also used to weight the score for each nominal. These weighted scores then add up to an overall harm score, which is used to rank each of the gang members within each borough. In addition to the harm score each nominal is also scored as a victim.

On 21/01/2015 Tower Hamlets Gangs Matrix has 158 people on it.

157 Males

1 female

131 Live Nominals (4 in Red, 33 Amber, 92 Green) -of these 37 are juveniles (17 years and under)

27 Custody Nominals (4 in Red, 3 Amber, 20 Green) - 1 Juvenile

Ethnicity

(White European appearance) - 33 and 3 in Custody

(Dark skinned European appearance) - 1

(African-Caribbean appearance)- 61 and 18 in Custody

(Asian appearance) - 34 and 6 in Custody

Glossary of acronyms used in this strategy is as below:

A & E	Accident and Emergency
ASB	Anti-social Behaviour
CAMHS	Child and Adolescent Mental Health Service
CMT	Corporate Management Team (Council)
CSE	Child Sexual Exploitation
DMT	Directorate Management Team
ESCW	Education Social Care and Wellbeing
GBV	Gender Based Violence
GGSYV	Groups, Gangs and Serious Youth Violence
LAC	Looked After Children
LCRB	London Crime Reduction Board
LSCB	Local Safeguarding Children's Board
MAB	Members Advisory Board
SAG	Strategic Action Group
YOT	Youth Offending Team
VAWG	Violence Against Women and Girls
VCS	Voluntary and Community Sector

Ending Groups, Gangs and Serious Youth Violence Strategy Action Plan 2015/16

Lead: Nasima Patel, Service Head Children’s Social Care

Delivered by: Tower Hamlets Council services, Police, Public Health, Housing, Probation, Schools and other relevant agencies.

This action plan outlines the recommendations as part of implementing the Ending Groups, Gangs and Serious Youth Violence Strategy. GGSYV cannot be addressed by one agency alone and must be delivered with strong partnership arrangements. This action plan is set to be delivered within the 2015/16 financial year and refreshed for 2016/17 onwards.

It is recommended that the action plan be reviewed and progress tracked every quarter by the Troubled Families Board and reported annually at the Community Safety Partnership Board.

The Ending GGSYV Co-ordinator will have a key role in implementing the GGSYV Strategy, driven by the Strategic Action Group with strategic leadership provided by Children’s Social Care and be closely aligned with Troubled Families.

Work stream 1: Data and intelligence				
Activity	Timescales for completing the action	Outcome	Deliverables/Product	Named lead and agency responsible for delivery
Partners to formally sign off the GGSYV Strategy	Quarter 4 2014/15	Members of the Community Safety, Health and Well Being, Children and Families, Local Safeguarding Children's, Learning Disability Partnership Boards, the Tower Hamlets Housing Anti-social Behaviour Forum and the Family Wellbeing Model Steering Group adopt the strategy	Strategy presentation at various Boards for sign off of the strategy	Strategy Policy and Performance and Service Head for Children's Social Care
Agree formal sign off of the GGSYV Strategy including through MAB	Quarter 4 2014/15	Formal adoption of the GGSYV Strategy with leadership and political support	Strategy taken through DMT, CMT, MAB and Cabinet and Partnership groups	Strategy Policy and Performance and Nasima Patel, Service Head Children's Social Care
Formal launch of the strategy	Quarter 1 2015/16	Wider awareness and adoption of the GGSYV Strategy	Launch of strategy through council & partner agencies, internet and intranet and include in Managers Briefings	Service Manager Family Intervention

Agree a senior local authority lead responsible for reducing the harm caused by GGSYV and its associated abuse	Quarter 1 2015/16	Leadership commitment and accountability established	Senior lead agreed	London Borough of Tower Hamlets
Employ an Ending GGSYV Co-ordinator	Quarter 2 2015/16	Co-ordinated delivery through a SPOC	Resource to deliver the GGSYV Strategy	London Borough of Tower Hamlets
Set up GGSYV Strategic Action Group with responsibility for delivering the GGSYV agenda	Quarter 2 2015/16	Strategic and operational lead for delivering the GGSYV agenda	Group set up and operational	Ending GGSYV Co-ordinator with council services and SPOC from partner agencies*
Agree a legally compliant information sharing protocol which clearly sets out the range of data required from across the agencies and services, the purpose and frequency of reporting and who is responsible for providing the data	Quarter 2 2015/16	Clear commitment to data and intelligence sharing with leadership endorsement	A formal data sharing agreement	Ending GGSYV Co-ordinator with council services and SPOCs from partner agencies with input from Redouane Serroukh, Information Governance Manager, ESCW
Agree the development of GGSYV data and intelligence sharing from the local authority with the Police, Housing and NHS with links established with DWP, MASH, Youth Offending, PRU and Youth Services, Schools and other relevant council services to consider the full range of data available	Quarter 2 2015/16	Improved identification and prevention	Number of effective interventions	Ending GGSYV Co-ordinator with council services and partner agencies

and use for the purposes of identification and prevention				
Periodically produce a problem profile on GGSYV informed by all partner data to inform understanding of the drivers of GGSYV and to influence commissioning intentions	Quarter 2 2015/16	Better understanding of GGSYV in Tower Hamlets leading to evidence based commissioning	Evidence base for where resources are deployed	Ending GGSYV Co-ordinator with the Strategic Action Group
Agree data to be shared across boroughs through the North East London Forum	Quarter 2 2015/16	Cross borough data and intelligence sharing to better identify and intervene in cases of GGSYV	Clear data sharing arrangements in place	Ending GGSYV Co-ordinator

Work stream 2: Early identification and Prevention				
Activity	Timescales for completing the action	Outcome	Deliverables/Product	Named lead and agencies responsible for delivery
Agree a set of common risk factors for GGSYV and the associated abuse and use this to improve understanding of the identification of risks to safeguard and protect – this should be included in the review of the Family Wellbeing Model	Quarter 2 2015/16	Improved understanding of risks associated with GGSYV leading to improved identification and consistency	Revised Family Wellbeing Model	Family Wellbeing Model Steering Group
Apply a consistent approach across agencies	Quarter 2	Co-ordinated response across	A common practice	Family Wellbeing Model

<p>to improve identification, support planning and monitoring of those at risk of harm from GGSYV and its associated abuse through a common practice framework – include:</p> <ul style="list-style-type: none"> • A clear referral mechanism; • Identification of gender specific needs, health including substance misuse, mental wellbeing and learning disabilities; • Monitoring of children who go missing and Looked After Children and track their outcomes; if the concern is GGSYV related; • Take a whole family approach to identifying needs and support planning • Reinforce the requirements of the Equalities Act 2010 to collect and review diversity data as part of monitoring arrangements 	2015/16	agencies with improved monitoring data and identification of needs	framework to support partnership wide approach to responding to GGSYV	Steering Group
<p>As part of the review of the Family Wellbeing Model review, ensure staff have an understanding of the risk factors of GGSYV and are aware of services that support those affected</p>	Quarter 2 2015/16	Staff are clear about our approach, thresholds clearly identify GGSYV risks and impact and staff know about services to support and intervene where GGSYV is an issue	Revised FWM, the launch of the FWM	Family Wellbeing Model Steering Group

Agree and put in place a referral form and process for GGSYV which allows outcomes to be measured	Quarter 2 2015/16	Clear referral pathways established	Agreed form and process for agencies to use when concerned about GGSYV	Family Wellbeing Model Steering Group
Map all of the different agencies that offer interventions for GGSYV and ensure clear referral pathways for those affected by GGSYV and its associated abuse ensuring CSE, radicalisation and gender based violence pathways recognise GGSYV element	Quarter 3 2015/16	Clarity of interventions and referral pathways for GGSYV	Document mapping interventions which can be drawn on to identify and tap into interventions	Ending GGSYV Co-ordinator with other safeguarding leads, with Young People and Preparing for Adulthood CDG partnership contribution from Jo Reed, (city Gateway) Alex Nelson, (Voluntary Sector)
Develop an engagement process to gather feedback from local communities, faith groups, VCS, youth groups etc and to raise awareness of risk factors and reporting of GGSYV	Quarter 3 2015/16	Community awareness of safeguarding and risk factors of GGSYV	Processes agreed and set up	Ending GGSYV Co-ordinator with council services and partner agencies
Deliver parenting programmes to support parents to identify risks and signs of engagement in GGSYV and how to access support needed	Quarter 2 2015/16	Strengthen parenting skills and build resilience	Parenting programmes delivered	Family Support Programme – Jill McGinley, Head of Family and Parent Support Services
As part of whole schools approach to safeguarding include the GGSYV agenda and	Quarter 2 2015/16	Young people are aware of risks and impact and are	Material used in schools and PRUs and behavioural	Safeguarding Leads in schools

materials in schools and ensure schools (and PRUs) behaviour policies set out multi-agency assessment for understanding underlying causal factors and have multi-agency strategies for supporting vulnerable young people to remain in education		better able to safeguard against GGSYV. Better early identification and prevention.	policy includes a multi-agency assessment for causal factors	Jill McGinley, Head of Family and Parent Support Services Liz Vickery, Head of Social Inclusion
--	--	--	--	--

Work stream 3: Intervention and Support				
Activity	Timescales for completing the action	Outcome	Deliverables/Product	Named lead and agencies responsible for delivery
Consider how the monitoring of hate crime might be improved to inform our understanding of hate crime in the context of group offending	Quarter 3 2015/16	Information to allow the borough to respond to emerging issues of group offending in	Information to inform commissioning intentions	Mel Clare Met. Police and Sharmeen Narayan, Domestic Violence and Hate Crime Manager
Provide strategic and policy support for those experiencing GGSYV related gender based violence	Quarter 3 2015/16	Those experiencing gender based violence are offered better support	Interventions delivered with positive outcomes for those experiencing gender based violence	Violence Against Women and Girls Manager – Fiona Dwyer
Ensure support for ex-offenders who may otherwise be at risk of radicalisation when released into the community	Quarter 3 2015/16	Ex-offenders are prevented from radicalisation and extremism	Interventions delivered to ex-offenders	Prevent Team

Consider Gang Call-Ins	Quarter 3 2015/16	Gang exit option encouraged for those who are involved	Gang Call-In happens	Youth Offending Service
Consider introducing Gang Injunctions and conflict reconciliation service	Quarter 3 2015/16	Improved enforcement and reduction of GGSYV	Interventions delivered	Youth Offending Service including Trauma Surgeon resources and knowledge
Link into MOPAC work placing specialists at the Royal London Hospital working with victims of gang related violence	Quarter 2 2015/16	Better information share and identification of support	Specialist placed at the Royal London	Youth Offending Service
Request young people's substance misuse provider have clear referral and support pathways for gang members with substance misuse problems and report on numbers presenting in treatment and outcomes	Quarter 3 2015/16	Reduction in substance misuse amongst gang members	Increased successful treatment for substance misuse	Bola Akinfolarin- Young People's substance misuse Commissioner

Work stream 4: Enforcement and Support				
Activity	Timescales for completing the action	Outcome	Deliverables/Product	Named lead and agencies responsible for delivery
Assess the current gaps in provision for those transitioning from children's interventions to adult interventions with a view to putting in place interventions	Quarter 4 2015/16	Better understanding of need for interventions	Assessment is completed	Ending GGSYV Co-ordinator and Strategic Action Group

needed where there is a gap				
Develop clear GGSYV Exit Strategy for those who want to exit an offending lifestyle - include employment, health (including mental health and substance misuse) and housing needs underpinned by a whole family approach	Quarter 4 2015/16	Clear pathway for those who want to exit GGSYV lifestyle	Agreed Plan for putting in place a GGSYV Exit Strategy	Ending GGSYV Co-ordinator with council services and partner agencies
There are a range of legal powers which can be utilised to tackle GGSYV across the partnership - draw together the full range of legal powers to tackle GGSYV to end or disrupt offending behaviour and consider how this is used creatively across the partnership to tackle GGSYV	Quarter 4 2015/16	Better understanding of the legal powers available to agencies in the partnership and creative utilisation of this to improve ending or disrupting GGSYV	Legal powers clearly set out in a document	Ending GGSYV Co-ordinator with council services and partner agencies through the Strategic Action Group

*Members on the Strategic Action Group

- Council Social Care services (Nasima Patel, Head of Children’s Social Care)
- Police (DCI Mel Clare)
- Housing (Kevin Jones, Interim Director of Neighbourhood Service)
- Public Health (Chris Lovitt, Associate Director of Public Health)
- Voluntary Sector (Alex Nelson, Voluntary Sector Children and Youth Forum Youth Forum Co-ordinator)
- Probation (Emma Connor, Tower Hamlets lead for gangs)
- Child and Adolescent Mental Health, (Bill Williams, General Manager and IAPT Project Lead)
- Tower Hamlets Clinical Commissioning Group (John Wardell, Deputy Chief Officer)
- John Watkins, Head teacher, Tower Hamlets Pupil Referral Unit
- Emma Grove, Assistant Head teacher – Safeguarding and Inclusion, George Green’s School