

Reducing crime – a call for action for public health leaders

Crime reduction and improving the public's health are both a key nationwide focus, so what is the relationship between them? In this article, Jane Leaman, Consultant in Public Health, and Dr Eamonn O'Moore, National Lead, Health and Justice Team, of Public Health England (PHE), discuss the link between poor health and offending behaviour and what can be done to support local action.

The recently reported violent crime in England prompts us to remember the key contribution public health can bring to the reducing crime agenda.

In England, nearly two million people every year come into contact with the criminal justice

system as perpetrators of crime, with many more coming into contact as victims, witnesses, or through mental health crisis.¹ Among these are numerous

people with multiple and complex needs – much poorer health (mental health and physical health, including higher burden of some infectious diseases), substance misuse (drugs, alcohol and tobacco), poorer access to health services, homelessness, indebtedness, unemployment and limited educational attainment, family breakdown and social isolation. There is evidence to suggest that there is an association between

these health and social needs and offending and re-offending, which will have an impact on the individual, their family and communities, and public services. Therefore, addressing the underlying health inequalities will produce

a 'community dividend'.

The link between poor health and offending is further compounded by the fact that people in contact with the criminal justice system are often underserved

by community services and professionals. This may be due in part to the mistrust of authority figures, perhaps caused by previous negative experiences in the criminal justice system itself, or the fact that people with complex problems are less likely to seek help, as traditional service models don't fit their needs. Stigma can also cause further barriers.

To support local action, Revolving Doors Agency, in partnership with PHE

and the Home Office, published 'Rebalancing Act, a resource for Police and Crime Commissioners and Directors of Public Health' which provides an evidence-based description of need, exemplars of good practice, and describes a model of collaborative, multi-agency, place-based approaches to understanding and meeting health and social care needs.² It also sets out the case for investment and more effective use of existing resources, whether through joint or co-commissioning, pooled budgets, or simply more effective collaboration, by building on existing local activities and utilising existing partnerships.

The resource is not a prescriptive guide but provides a framework for local action, in which local systems will need to determine the most appropriate approach to implementation, building on existing local partnerships.

A newly published consensus statement between PHE and police services explains how partnership work between health and justice partners can improve health, reduce inequalities, reduce reoffending and support the development of safer communities.³

For further information, please visit <http://health-Justice@phe.gov.uk>.

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References

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3. Christmas H, Hindle L and Houlston E. Blue light leadership: developing public health consensus agreements with the fire, ambulance and police services. *Perspect Public Heal* 2018;**138**(6).