

GUIDELINES FOR EVIDENCE-BASED KNIFE EDUCATION

1st Edition

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Introduction

This document aims to provide guidance for what makes an effective educational package around knife crime, based on current evidence. Evidence in this area is unfortunately sparse. What does exist sometimes has less evidence behind it than we would like.

Whilst we do provide some "dos" and "don'ts" for knife crime education, these guidelines are not prescriptive. There is always room for innovation, exploration, and especially for community input. Evaluation of interventions is desperately needed, and we provide guidance for evaluation at the end.

This document is dependent on evidence, and may change over time to reflect new evidence.

Theory of Change

Before starting your intervention, you need to consider the "theory of change" for how you expect it to work. You might consider;

- What are you using?
- What are you going to do?
- How do you expect this to work?
- How are you going to measure whether you did what you intended to?
- How do you measure if it had the effect you wanted?

Theories of change can be particularly useful for identifying the key elements of your intervention, and whether you have assumed something will work but you are not sure whether this assumption is fair.

If you are commissioning a service, ask them what their theory of change is.

Describing how to do a theory of change is beyond the scope of this guidance document. Your organisation may already contain individuals who know how to do one, or there are many resources online.

The Center for Theory of Change is a place to start.



Why do young people carry knives?

If we understand why young people carry knives, we might better understand how to reduce knife carrying.

Knife crime (not just carrying) can be associated with gang activity, but research in London (1) and beyond (2) suggests that gang activity is not responsible for the majority of knife crimes.

Fear of crime, and the perceived need for protection, is another factor (3). Young people who carry often report being threatened themselves (4) or that knife carrying was the norm in their area and so they needed to protect themselves (5). Young people may also carry a weapon because they feel at risk due to their sexuality (6), which suggests fear of hate crime may be a factor. This has serious implications for our messages around knife carrying; we do not want to increase fear and therefore the desire for protection.

The motivation to carry may also be due to the glamourisation of knives, using knives to gain status (7), or "saving face". These motivations represent social pressures on young people; what we may call "peer pressure".

Ofsted also report knife carrying for the purposes of self-harm, particularly amongst girls (8). Girls may also be carrying a knife due to exploitation, as they are less likely to be searched than their male peers, or due to domestic violence (9).

Beyond explicit reasons for carrying, there are what we refer to as "the causes of the causes" of carrying knives. These include income inequality (10), living in an "unsafe" area, feelings of isolation, self-harm, experiences of maltreatment (11), and a poor relationship with a care giver. These are not necessarily causes in themselves, but contribute to the more direct causes of knife carrying. We will not, in a single education session, address these issues, but this is the likely context for potential knife-carrying young adults in the audience.



When is the best time?

There is not a clear distinction between those who carry, and those who do not. Research in Scotland suggests that 30% of children aged between 12 and 17 might carry a knife at some point, but often it is infrequent and they quickly stop (12). Other studies suggest a much lower carrying rate of just 3.5% (11).

Age 10 to 14 is also the time when the impact of peer pressure is highest (13). Evidence also suggests that knife carrying peaks at 14 (12). After this, knife carrying either stops, or escalates. This suggests the ideal time is before 14 years old, as after this young people may either be entrenched in knife carrying and require more individualised intervention, or likely to have stopped.

Should we educate all young people?

Throughout this guidance document we have assumed that your intervention will be universal; that is, it will go to all students. This may not be the case. You might choose to target at-risk students.

The College of Policing supports the idea that targeting can be useful, but it is difficult to do. Targeting based on demographic variables alone (age, gender, home life situation) does not allow for good predictions of who is at risk of knife carrying (11). It is likely that if targeting is to be done, it will rely on local intelligence, and will likely miss some students who would have benefited and include many students who may never have become prolific knife carriers.

A universal approach is inefficient (14). The majority of young people will not be involved in knife carrying, and out of those that do the majority will also desist. A universal approach nonetheless removes the difficulties involved in targeting, and also makes sure no student feels "picked out".

Both approaches have their advantages and disadvantages. Decisions about whether to target or not will depend on a number of factors. If the resource is particularly expensive, targeting will be required by necessity.

Who should develop the education?

We cannot specify exactly who should make educational packages for knife carrying, and we would not want to. Different partners bring different experience, perspectives and tools.

Evidence suggests that education works best when it is "socio-culturally relevant" (15). It is unlikely that one person, or even one team from a single perspective, will be able to cover all cultural aspects. From this we would suggest a collaborative approach, which could mean

involving the views of communities, ex-offenders, and the young people themselves whilst developing the project.

Few interventions are designed with and by young people, although they may be asked to provide feedback after it has been developed. Engaging young people might help with the "social-cultural" relevance, and avoid material being unrelatable.

Collaborators might have suggestions that could be harmful, based on the "dos" and "don'ts" we present below. Managing the relationships whilst keeping an evidence-based approach is an important balance.

Who should deliver the education?

All education packages, regardless of topic, benefit from being delivered by well-trained staff (15). The first concern for any presenter should be whether they are competent at delivering the education.

There is evidence that engagement by trained and dedicated police officers in school can be good for trust in the police (16). Police officers do report that learning how to engage with schools and young people can be difficult.

St Giles' trust, who emphasise the use of presenters with lived experience, provide some evidence from their own evaluations that a speaker with lived experience is impactful, at least according to the young people who received their education (17). "Lived experience" in this case is usually involvement with gangs. Any presentations by practitioners with lived experience should still be checked to see if they fit in with the "dos" and "don'ts" listed below.

"No Knives Better Lives" recommend the use of victims and families of victims for lived experience (18).



What you could include

The below lists the many approaches, tactics or educational content we have found which have some evidence supporting their efficacy. We do not want to stop new ideas, and so these are guidelines for what you could include. A good educational package will likely not contain all of these but will likely contain aspects of some.

Skills-based lessons

Skills based lessons are "anything that involves students in doing things and thinking about what they are doing". Whilst we do not have good evidence for knife carrying interventions, this kind of learning works well in other settings such as drugs education, general violence reduction, and sexual education (15).

The YEF (Youth Endowment Fund) have found social skills lessons effective for reducing violence. Activities highlighted by the YEF include;

- Role playing. For example, children might take on different roles in a potential conflict and practise strategies for resolving the conflict peacefully.
- Video demonstrations of positive behaviours. For example, children might be shown examples of other children playing together and finding ways to resolve conflict.
- Specific activities to reinforce effective delayed gratification.
- Relaxation and deep breathing techniques which children could use to calm down if they become angry.

The <u>YEF entry on social skills lessons</u> includes example projects you may want to consider when developing or commissioning your own interventions.

In general, providing young people with cognitive and emotional "tools" is necessary to turn awareness of an issue into actual behaviour change in young people. Awareness without the tools for how to deal with peer pressure, sensation seeking, or their own emotions may lead to no change at all, or even worse behaviour (13).

Positive Reinforcement

Adolescent brains respond better to positive reinforcement for good behaviour, rather than negative reinforcement for bad behaviour (13). This may not be a consideration when delivering a universal intervention, but a more targeted intervention that works closely with potential or known knife carriers may need to take this into account.

The Four Rs

The Four Rs come from the "No Knives Better Lives" campaign used in Scotland (19). The Four Rs can be summarised as four things to make sure your message says to young people;

• **Reassurance.** Most people do not carry knives. Young people should be told they are very unlikely to be stabbed or hurt by a knife.

- **Responsibility.** Informing young people that if they are afraid or scared of someone else, to take responsibility. Depending on the level of seriousness or threat, they should tell a friend, youth worker or teacher, or let the police know.
- Risks and consequences. Give young people factual information. Do not judge, try
 to persuade them to your viewpoint, or sensationalise. Be as straightforward as
 possible.
- **Resilience**. Ask young people what or who helps them feel safe and valued in their communities? Studies indicate that even one intervention by a trusted adult or a well-informed friend can make all the difference when faced with a risky situation. Help young people to identify a safe space and a safe person.

De-normalising knife carrying

A small scale study of 16 young people suggested that knife carrying was seen as "normal" in some areas, with young people desensitised to the idea (5). It was suggested that media may play some part in this, but we cannot rule out that there is a shared perception in an area that knife carrying or knife crime is common. The young people suggested making it "not normal" again, which also relates to reassurance in the Four Rs.

The APPG report indicated that young people were "desensitised" to knives. This is a contentious point when considered with other data; if young people are scared of knives, are they truly desensitised?

We must consider the ethical implications of "re-sensitising" young people. "Desensitisation" may be taken as reducing fear of knife crime; if we want to show it is an abnormal behaviour, we risk making the fear return too. This may be mitigated by emphasising the low level of knife carrying.

Home Office Knife Crime Lessons

The Home Office has already produced a <u>PSHE lesson plan</u> "to challenge the myths and communicate the realities of carrying a knife to secondary school students, using the Home Office #knifefree campaign as stimulus for discussion." This lesson plan can be used on its own, but can also provide a helpful structure or guidance for your own ideas.

Remember the "Victim-Offender Overlap"

We are not assuming that the young people you are delivering the education to have offended (either by carrying a knife or using it), or that they have been a victim of knife crime. However, it is important to remember that those who do offend have also often been victims themselves (20). This means if you are targeting those who have offended, you will need to consider previous victimisation as well. They may also have witnessed violence, such as in a domestic violence situation.

The best way to approach this is with a "trauma-informed" approach.

Keep school a "safe place"

Whilst not directly related to knife-carrying education (although you may be able to integrate it), research has shown that school is one of the safest places for young people (13). "Zero

tolerance" approaches can have a negative effect, as they suggest there is a risk in the school. Naturally, this needs to be balanced with the need to protect other pupils if a young person does bring a knife to school.

What not to include

The below lists approaches and tactics known not to work, or even be actively harmful. We encourage innovation, but education content that includes these is not likely to work or may even increase knife carrying.

"Scared Straight"

It has been long established that "scare 'em straight" approaches do not work. This includes visiting prisons, hearing graphic inmates' stories (with a focus on how awful prison is), or even experiencing being "locked up" themselves (21). There are few interventions like this anymore, due to the widespread acknowledgement of their harmful effects. However, some interventions may include aspects of this, and lived experience from individuals who have been incarcerated might include inmate stories.

Fear messaging

Experiments which prime participants to feel fear of death are able to make participants think about death more, but this did not change their attitudes or intentions towards carrying knives (22). Trying, and succeeding, to make young people scared does not mean their attitude towards knife carrying will change.

Even if a consequence is real, if it is rare or feels excessive, the audience is less likely to engage (3). For example, images of gruesome injuries do not seem to have a positive effect on behaviour. Exclusively fear-based messages also do not seem to change behavioural intent (22).

If consequences are to be presented, it is better to focus on giving an accurate representation of likely consequences. It is also important to remember that the likelihood of punishment is more important than how harsh it is (13). The threat of prison may not be effective at all.

Myth-busting

A common tactic in many interventions is to state a myth, such as "there are safe places to stab someone", and then present the counter argument, "there is no safe place to stab someone". This approach can work, but there is some evidence that it can also backfire. The audience might remember the myth more than the correction (23). If myth-busting is included, it is important not to repeat the myth too often, and make sure the correction is more impactful and memorable.

"Knife tables" and similar images

Research suggests that young people experience anxiety when presented with tables of knives, but not attitude change. Anxiety might lead to a desire for self-protection, increasing the likelihood of carrying (24).

Evaluation

Evaluating your own intervention is vitally important. If you are basing your education on an existing package, you need to know if it translates to your particular context. If it is a novel intervention, you want to see if it works at all. We provide some guidance here, but there is further guidance available from the Youth Endowment Fund.

Types of evaluation

There are three main types of evaluation to focus on; process, outcome, and impact (25).

Process evaluations check whether the programme has been implemented as intended. This will vary between interventions, but may ask:

- Did we reach our target audience?
- Did we reach as many of our target audience as we wanted?
- Were the people delivering the education confident in doing so?
- Was the package completed in all cases?

Outcome evaluations measure programme effects in the target population by assessing the progress in the outcomes or outcome objectives that the programme aims to achieve. This may be:

- Surveying the audience's attitudes before and after the education package.
- Surveying the audience's knowledge before and after the education package.
- Surveying young people's emotional response before and after the education package.

Surveys are good ways to collect large amounts of data, although young people may not be honest about their intention to carry a knife or not. Focus groups give better data but are also far more expensive to run and intensive to analyse.

Not all data has to be numbers. So long as you are systematic, you can collect opinions of young people, their carers, school staff or others.

Impact evaluation assesses programme effectiveness in achieving its ultimate goal; in our case, reducing knife carrying amongst young people. This is the hardest level to achieve, and will be beyond the capacity of most organisations.

Randomised Control Trials

The "gold standard" of evidence-based policing is a randomised control trial, or RTC. In an RTC, your potential audience is split evenly. One half will receive the intervention, while the other half receives something else. This may be a different intervention, or nothing at all (although this has serious ethical implications). You then use the same measure, such as a survey delivered after the intervention, on both audiences. If the audience who saw your intervention score better than the audience who saw something else, then you can be more confident that it is working.

RTCs are difficult to set up and can come with serious ethical issues. The main concern is that you must withhold the intervention from one half of the audience. If you are using an existing intervention for them, and you just want to prove that yours is better, this lessens the ethical issues.

Planning the evaluation

You should begin planning the evaluation as soon as you start planning the education programme. As you design each step, you should also bear in mind how you will know that it is working.

If you can, it is best to come back to your audience to see if the message has stuck. This might mean surveying a week or even a month after.

Who should conduct the evaluation?

The best evaluations are done with academic partners, who have the skills and resources to carry out robust evaluations. However, this can be very expensive. Conducting a smaller scale evaluation that keeps to the best practice possible is still preferable to conducting no evaluation at all.

Conclusion

Lack of evidence, and a desire not to stifle creativity and new ideas, means we cannot provide an exact outline of what a good knife crime or knife-carrying education package would look like. Hopefully this guidance has provided you with some ideas of what to do, and just as importantly what not to do.

Evaluation is important. A well-designed intervention with a well-designed evaluation that not only works, but tells us why it works, will greatly enrich our understanding. If you know of, or carry out, any evaluations please send them to

<u>Violence Reduction Unit@southyorks.pnn.police.uk</u> so we can collect this evidence together and provide better guidance year on year.

Further Reading

This guidance document has tried to cover as much as possible of the evidence as to what works in terms of the education of young people about knife crime. The following documents and websites can provide more detail on the topics we have covered:

Sharper Solutions: Toolkit for Practitioners

Lives Not Knives: Young People's Perspectives on Knife Crime

Key principles of effective prevention education

College of Policing: Crime Reduction Toolkit

Youth Endowment Fund: Toolkit

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- 5. <u>All-Party Parliamentary Group on Knife Crime: Young people's perspectives on knife</u> crime
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- 25. Types of Evaluation

