Public health approaches in policing

A discussion paper

Executive summary

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i. Introduction
The purpose of this resource is to explore what is meant by “a public health approach” in the context of policing. It has been developed by an expert reference group of police, public health and voluntary sector professionals based on the existing evidence base and their expertise and experiences. It is part of a programme of work to implement the national Policing, Health and Social Care Consensus.

Public health approaches, whilst different from traditional models of response policing which often focus on individuals and enforcement, build on police experiences of neighbourhood policing and problem solving. Public health approaches in policing support the Policing Vision 2025, which talks about proactive preventative activity, working with partners to problem-solve, vulnerability, cohesive communities, improving data sharing, evidence-based practice and whole-system approaches.

The idea of applying public health approaches to areas such as road safety, drugs and violence is not new; but the term is being used to mean different things and no nationally or internationally agreed definitions of ‘public health approaches in policing’ currently exist.

This paper is intended to support police and their partners in understanding and applying public health approaches to policing.

ii. What are public health approaches?
Population focus
Public health approaches start with the needs of the public or population groups rather than with individual people. This is different to healthcare where the focus is on the individual patient, or reactive policing where officers respond to calls about individual victims or perpetrators. Public health approaches involve interventions delivered at population level and targeting resources effectively through increased understanding of the population.

The causes of the causes
Taking public health approaches means looking behind an issue or problem or illness to understand what is driving it. Often called ‘social determinants’ or ‘structural factors’, these are the circumstances such as housing, education, indebtedness and income that underpin people’s lives and make them more or less likely to:

- experience criminal victimisation
- have poor health outcomes, have less access to health services, and die prematurely
- have contact with the police and other services; and
- enter the criminal justice system.

Prevention
Public health approaches start from the principle that prevention is better than cure. A three-tier approach is often used, which recognises that there are opportunities to be preventative even after a problem has emerged:

- primary prevention is preventing the problem occurring in the first place;
- secondary prevention is intervening early when the problem starts to emerge to resolve it; and
- tertiary prevention is making sure an ongoing problem is well managed to avoid crises and reduce its harmful consequences.
Data, evidence and outcomes
A key element of public health approaches is skilled use and interpretation of data and the evidence base to ensure that interventions are designed, delivered and tailored to be as effective as possible. This links closely to a focus on population outcomes. Both policing and public health share a commitment to evaluation of new or untested interventions.

Epidemiology is a quantitative public health discipline which looks at the frequency and patterns of events in a group of people and what the risk and protective factors are. This is often the starting point for public health approaches to violence prevention, some of which use epidemiology to understand the patterns of violent events.

Partnerships, communities and systems
Partnership is central to public health approaches because the breadth of population need requires response (intervention) across many disciplines and services. Different partners have access to different skills, levers and mechanisms to effect change. A key public health skill is influencing partners to use their time and resources in a way that improves population health, safety and wellbeing, as well as understanding and championing community assets. Public health approaches are always consciously located within a wider system – which includes communities - rather than thought of in isolation.

iii. Challenges and opportunities
Challenges to adopting public health approaches in a policing context include the difficulty of evidencing the impact of preventative intervention and of investing for long term outcomes. Using approaches that are already well-evidenced and evaluating interim progress can assist with this.

The police cannot tackle the root causes of problems at a population level on their own and understand the benefits of working in partnership. This is particularly the case when demand from the public is rising and the complexity of need is increasingly recognised. Over 80% of all calls to the police are not about crime, and many relate to issues of vulnerability and people with complex social needs.

iv. Tools and case studies
Examples of tools and case studies as well as background reading are available on the Emergency Services Hub.