

The framing of contemporary violence policy in England and Wales: An examination of the contributing roles of alcohol and illegal drugs

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Carly Lightowlers 

Department of Sociology, Social Policy and Criminology, School of Law and Social Justice, University of Liverpool, Liverpool, UK

Karen Duke

Department of Criminology and Sociology, School of Law, Middlesex University, London, UK

Abstract

Background: In 2018, the UK Government published its Serious Violence Strategy setting out the Government’s commitment to adopting a public health approach to ‘serious violence’ in England and Wales and encouraging a multi-agency, whole system public health approach to violence prevention. There has been very little research attention and commentary on the roles of alcohol and illegal drugs in the construction of “serious violence” within the Strategy. **Method:** Drawing on thematic analysis of key policy documents, the ways in which drugs and alcohol have been conceptualised in recent violence policy in the English and Welsh context are explored through the analytical framework of “framing”. **Results:** The overwhelming emphasis on violence associated with the drugs market has skewed attention towards exceptional and sensationalist forms of “serious” violence and diverted it from more common and widespread forms of “everyday” violence, including domestic and alcohol-related violence. Omitting these from the policy purview has implications for those affected and how resources are allocated. **Conclusion:** To advance inclusive and holistic violence prevention, a wider framing of violence is required and

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Corresponding author:

Carly Lightowlers, Department of Sociology, Social Policy and Criminology, School of Law and Social Justice, University of Liverpool, Liverpool L69 7ZA, UK.

Email: c.lightowlers@liverpool.ac.uk



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both illegal drugs and alcohol need to be embedded for meaningful working across populations and organisational boundaries.

Keywords

alcohol, drugs, framing, policy, substance use, violence

Internationally, the drivers of violence are similar. The World Health Organization (WHO, 2002, 2014) looks at common antecedents across a range of types of interpersonal violence,¹ which include, *inter alia*, substance use, the illegal drugs market, alcohol availability, and economic and gender inequality (WHO, 2014). On the international stage, the United Kingdom (UK) boasts national and sub-national violence policy and action plans spanning the range of forms of violence identified by the WHO and a suite of legislative provisions and treatment/education programmes for responding to and preventing violent behaviours (WHO, 2014). And, in this jurisdiction, there has been increased acknowledgement of the potential of moving beyond traditional criminal justice approaches to concurrently embrace a “public health approach” to violence prevention (Bellis et al., 2012; Conaglen and Gallimore, 2014; HM Government, 2019).

The public health approach to violence put forward by the WHO emphasises preventing violence by addressing its causes, rather than focusing on dealing with its consequences (WHO, 2002). Under this framework, a multi-agency, population-level approach is needed, with a focus on those groups/individuals who are most at risk of violence. The key steps in this public health approach are as follows: defining and monitoring the extent of the problem; identifying its root causes; developing and testing interventions to resolve the problem; and implementing those interventions that are found to be effective on a wider scale (WHO, 2002). The WHO approach separates violence into a number of different forms and contexts including youth violence, child abuse and neglect, violence by intimate partners, abuse

of the elderly, sexual violence, self-directed violence and collective violence. However, it is recognised that the risk factors and interventions for these different forms of violence and their contexts often overlap (Bellis et al., 2012; WHO, 2002)

In April 2018, the UK Government published its Serious Violence Strategy (HM Government, 2018). This set out the Government’s commitment to adopting a public health approach to “serious violence” in England and Wales. The Serious Violence Strategy encouraged a multi-agency, whole system public health approach to violence prevention (HM Government, 2018) and the strategy’s operationalisation was resourced with government (Home Office) funding for local Police and Crime Commissioners (PCC) to set up multi-agency Violence Reduction Units (VRU) in the 18 areas across England and Wales worst affected by “serious violence”. Despite acknowledgement, at the international level, that more extreme forms of violence and deaths and injuries that result “are only a fraction of the burden” of violence (WHO, 2014, p.8), the UK policy focuses exclusively on “serious violence” (HM Government, 2018). Yet commentators have suggested that focusing on high-harm serious violence alone “misses the wider offending context, much of which is hidden” (Kincaid et al., 2019, p.16). There has been very little research and commentary on the Serious Violence Strategy 2018 as a whole and specifically on the ways in which “serious violence” has been conceptualised, nor any commenting on the role substances play therein. Taking this gap in the literature as its point of departure, this paper examines the ways in which alcohol and illegal drugs have

been framed in contemporary violence policy in the English and Welsh context.

Internationally and nationally, violence policy has routinely acknowledged the contributory role alcohol and illegal drugs can play therein (WHO, 2002, 2014). Alcohol and drugs present a longstanding challenge for both criminal justice and public health. However, the relationship between alcohol and drugs and violence is far from straightforward, as these substances can be variously implicated in violence. For example, the relationship between substance use and crime more generally can be explained through several key models, including the psychopharmacological/intoxication model, economic compulsive model, systemic model and substance-defined model (cf. Bennett and Holloway, 2010; EMCDDA, 2013; Goldstein, 1985). Consequently, policy can draw on a preferred model to frame the “problem” and give weight to certain mechanisms. For example, government drugs policy around the turn of the century (e.g., Duke, 2006; HM Government, 2002) focused on those types of crimes thought to be causally associated with substance use (Bennett and Holloway, 2010), drawing on the economic-compulsive model of the drugs-crime link whereby individuals commit acquisitive crimes to support their drug use.

In this paper, we explore the framing of alcohol and drugs in current violence policy in England and Wales further by asking the following research questions:

- How is violence framed in contemporary policy in England and Wales?
- How are drugs framed as a contributing factor therein, with what implications?
- How is alcohol framed as a contributing factor therein, with what implications?

Methods and analytical framework

Within this paper, we employ documentary analysis and draw on the theoretical construct of “framing” to make sense of the ways in which violence has been framed in current policy in

England and Wales and how drugs and alcohol have been conceptualised within this policy framework. For Rein and Schon (1993, p.146), framing is defined as a “way of selecting, organising, interpreting, and making sense of a complex reality to provide guideposts for knowing, analyzing, persuading, and acting”. Through the processes of naming and framing, issues are defined as problematic and particular policy options are recommended to tackle the selected “problem”. Therefore, framing does two kinds of work. The framing process organises prior knowledge, experience and values and it guides action (van Hulst and Yanow, 2016).

It is important to make a distinction between a “frame”, which is static, and “framing”, which is a dynamic process “whereby a particular way of knowing or understanding comes to emerge, develop, fade away or re-emerge in an altered way of knowing” (Thom and MacGregor, 2020, p.2). Over space and time, certain policy frames can gain influence and others will lose dominance. In some cases, frames can become institutionalised as they become part of the context or institution. Bjornehet and Erikson (2018, p.113) combine frame analysis with institutional perspectives to explore the process by which “a frame gradually gains influence and regulative functions”. Ideas are therefore always path dependent, i.e., influenced by previous ideas, rather than being new products.

Some frames conflict with each other, while others run in parallel streams and periodically intersect. In the drugs and alcohol field for example, there are often clear tensions between criminal justice framings and public health framings. However, historically, public health framings have run parallel and interact with other approaches, including medical, psychiatric and criminal justice ways of dealing with illegal drugs and alcohol (Mold, 2018). These framings are shaped by wider societal, political and economic factors and change over time and between substances. As Mold’s analysis (2018, p.94) demonstrates: “there was

no single ‘public health’ approach to substance use: this can mean different things at different times and in different places”.

We analysed three key policy documents. The core of our analysis centres on the 2018 Serious Violence Strategy document (HM Government, 2018, 112 pages), but we also briefly examine the framing of drugs and alcohol in violence policy before the publication of the strategy and also reflect on current policy developments, such as the 2021 Tackling Violence Against Women and Girls Strategy (HM Government, 2021a, 85 pages) and the 2021 Beating Crime Plan (UK Government, 2021, 52 pages). Using thematic analysis (Braun and Clarke, 2006), the electronic documents were analysed inductively by closely reading each document, codes were marked and highlighted, and relevant sections of the text were copied into a separate coding framework. Themes relating to the framing of violence and the roles of alcohol and illegal drugs were identified, reviewed and refined.

Within our analysis, we draw on the original conceptual framework put forward by Rein and Schon (1993), highlighting the processes of naming (highlighting certain features of an issue, i.e., certain forms and manifestations of violence on which policy focuses), selecting (ignoring or selecting out other features of violence) and story-telling (binding the highlighted features together in a coherent pattern), and elaborated by Van Hulst and Yanow (2016) with two additional processes, sense-making (the conversion of an issue into a problem) and categorising (drawing distinctions between groups and issues). In relation to violence policy, we draw out which features of violence have been highlighted and selected out for attention and which features have been ignored or silenced within the documents. We explore how these different features of violence – and the role of alcohol and/or drugs therein – have been bound together, how these “stories” or narratives frame their subjects and how evidence is used to justify the focus on these particular aspects. We examine which groups of victims

and perpetrators have been selected for attention, how attempts have been made to draw distinctions between and within these groups and how they have been represented within the strategy documents.

Results and their discussion

The framing of “violence” in contemporary policy in England and Wales

The concept of “serious violence” is operationalised within the Serious Violence Strategy (HM Government, 2018) as knife crime, gun crime, homicide and robbery.² It also specifies areas of criminality where serious violence or its threat is inherent, such as gangs and county lines drug dealing. Indeed, the strategy identifies four key drivers of serious violence as follows: drugs and profit; effectiveness of the Criminal Justice System (CJS); character; and opportunity.

UK violence policy has increasingly tended to focus on the most visible and sensational (read *rarer*) forms of violence – specifically driven by the Serious Violence Strategy (HM Government, 2018). In attending to a narrow focus on “serious violence”, thought to be on the increase, the strategy marks a distinct departure from any consideration of everyday “mundane” forms of violence, and towards a focus on “street-based, gang-association crime” (Levell, 2022, p.135). With the strategy’s spotlight on “serious violence” – despite these being exceptional – everyday forms of violence that affect the population are overlooked. For example, the strategy explicitly excludes both alcohol-related and domestic violence³ from its purview, despite these being widespread (Stripe, 2021). So, as well as domestic violence fatalities, homicides related to alcohol consumption and violence linked to the night-time economy (NTE) were also excluded from the strategy’s purview. Instead framing violence to accord with public and political conceptions of “violence” (and dominant

actors therein) as introduced in the Serious Violence Strategy (HM Government, 2018).

Many violent incidents are less “visible” than the “knife and other weapon-related attacks and murders” focused upon in the strategy (Kincaid et al., 2019, p.16). Notably, the harm associated with domestic violence and abuse (DVA), which is experienced disproportionately by women and girls/children (UNODC, 2014; WHO, 2014). Despite such violence being widespread, as Levell (2022, p. 135) argues, the violence that is considered “serious” enough to feature in the Serious Violence Strategy (HM Government, 2018) is aligned with that which is public, rather than acknowledging the considerable harm resulting from and serious nature of violence behind closed doors. The denial of domestic violence as a serious concern is also seen in the framing of alcohol-related violence more generally (Wilson et al., 2022) and plays into wider concerns about the invisibility of gender in considerations concerning alcohol-related violence (Moore et al., 2021).

Elsewhere, Levell (2022) critiqued that this silo-ing out of DVA in need of a separate strategic consideration⁴ leaves the Serious Violence Strategy gender-blind. Separating out of types of violence in this way results in a proliferation of approaches over time and the extent to which regional VRUs permit consideration of DVA within their remits (Levell, 2022). Alas, the mainstream neglect of particular types of violence – notably gender-based violence – is nothing new (Walby et al., 2014; Walklate, 2008; Westmarland, 2015) and silo-ed thinking in both the alcohol and domestic violence fields has led to missed opportunities for tackling alcohol-related domestic violence (Wilson et al., 2022).

The changing drug market is identified as a key driver in increases in serious violence; for example, links to county lines drug dealing activity (HM Government, 2018; Levell, 2022). As such, the way in which offending intersects with a “toxic trio” of mental health, domestic violence and abuse, and substance

use is acknowledged, but it is curious that issues of substance use and domestic abuse are then omitted from the strategy’s purview, despite their prevalence (cf. Levell, 2022).

Indeed, when it comes to substance use, the distinction between alcohol and illegal drugs is stark in the strategy. Although the illegal drugs market and organised crime are foregrounded, alcohol’s role is diminished through the following justification for its omission.

“Opportunity. One of the most influential criminological theories states that crime can be driven not just by individuals with a greater propensity for offending, but by factors that make the opportunity for crime greater. For example, more people in confined pubs and clubs consuming alcohol increases the opportunity for provocation and violence. But... there is no strong evidence that the current increase is being driven by night-time economy violence.” (HM Government, 2018, p.30)

This is curious given the routine finding of alcohol’s involvement in many forms of violence crime, including homicides when compared with drugs (ONS, 2023).

In sum, the 2018 Serious Violence Strategy treats “serious” violence as an isolated phenomenon – distinct from other crime types – something that is reflected in available government funding streams, further hindering integration with other approaches to crime and violence prevention (Kincaid et al., 2019). Levell (2022, p.136) goes as far as to suggest this fragmented policy approach creates “different cultural, operational and theoretical planets by which to understand societal violence limits our ability to understand the interconnectedness of DA [domestic abuse] and SV [serious violence] and develop genuine public health solutions”. What results is a fragmented policy landscape for violence and proliferation of initiatives and policy foci on different solutions and targeted at specific populations (e.g., education, prevention, treatment, harm reduction and

criminal justice approaches), which ultimately obscures any meaningful work (coordinated responses) across organisational boundaries (as all have different values and resources) and has very real lived impact on victims.

The Serious Violence Strategy motivates the need for a national preventative, public health approach to violence, according with a public health framing of violence prevention (WHO, 2002, 2014). Specifically, there is priority on early intervention and community engagement, signalling a departure (in theory) from punitive criminal justice approaches centred on individual perpetrators and the apportioning of blame to such individuals, and a move toward working with affected communities and acknowledgement of the porous boundaries between victims and perpetrators (cf. Levell, 2022). In the forward, the then Home Secretary (Amber Rudd MP) suggests (HM Government, 2018, p.7) the strategy “supports a new balance between prevention and effective law enforcement”, noting too that it is clear “that we cannot arrest our way out of this issue” and advocating a partnership approach to violence prevention. Only sentences later, however, do they advocate a deterrent law or order approach by adding “we will continue to support an effective law enforcement and criminal justice response so that those who commit these offences feel the full force of the law” (ibid, p.7); then highlighting new legislative provisions for disrupting serious violence, seemingly diverting back to a punitive and deterrent law and order approach, somewhat at odds with a health promotion framework centred upon engaging communities. And although there is some acknowledgement of “strong links between policing and public health, particularly with regards to drug and alcohol treatment and prevention services” (HM Government, 2018, p.71), no wider community- or population-level interventions to stem the availability of alcohol (known effective public health measures for violence prevention) (Babor et al., 2022) are mentioned.

The framing of drugs as a contributing factor to “serious violence” and the implications

As noted above, the key driver behind the focus on the category of “serious violence” (i.e., knife crime, gun crime and homicide) was the changing nature of the drugs market. The increasing drug-related homicide rates were quoted as a justification for the spotlight on violence within drug markets: homicides where either the victim or suspect were known to be involved in using or dealing illegal drugs increased from 50% in 2014–2015 to 57% in 2016–2017 (HM Government, 2018, p.9), despite recent estimates highlighting that more homicides involve alcohol than illegal drugs (ONS, 2023). Linked to the rise in crack use since 2014, crack cocaine markets were framed as having strong links to “serious violence”. Although the link between crack cocaine use and violent behaviour is mentioned in the strategy (drawing on the psychopharmacological model of the drugs-crime link), the violence associated with the competition and grievances within the drug market itself (i.e., systemic model of the drugs-crime link) is selected as particularly problematic:

Grievances in illicit drug markets cannot be settled through legal channels, so participants may settle them violently. This can lead to escalation as dealers seek to portray themselves as excessively violent and carry weapons, so as not to be cheated in the market... for serious violence, drugs and profit (which captures more organised criminality aimed at making a profit over and above an immediate need) are closely linked. Violence can be used as a way of maintaining and increasing profits within drug markets. (HM Government, 2018, p.21)

Social media was also framed as a contributing factor to the increase in violence between gangs and facilitating opportunities for “rivals to antagonise each other, and for those taunts to

be viewed by a much larger audience for a much longer time period [which] may have led to cycles of ‘tit-for-tat violence’” (HM Government, 2018, p.30). The use of social media was also blamed as the vehicle promoting the attractions of drug-dealing lifestyles, recruiting young people into dealing networks and normalising the carrying of weapons.

The increase in “serious violence” was framed as being everyone’s problem and affecting not just metropolitan areas like London and Manchester, but also rural and coastal areas. The increase was linked to changes in the operation of the drugs market and the movement of drugs through county lines where drug suppliers in the larger urban areas seek to exploit provincial markets in smaller towns and rural areas (see Coomber and Moyle, 2018; McLean et al., 2020; Spicer, 2021a).

Within the strategy, young people take on the dual role of both the victims of and perpetrators of “serious” violent crime and are therefore framed as both “at risk” and “risky”. This was seen to be linked to their increasing involvement in “different aspects of the illicit drug market” (HM Government, 2018, p.22). Convictions for Class A drug production and possession with intent to supply offences of young people aged 10–17 years increased by 77% between 2012 and 2016. The increase in “vulnerable” groups (people who are homeless and young people who have been excluded) was framed as a possible contributing factor to increased violence as these groups have higher risk of being both a victim and an offender – although it is our contention that this group might also include those who use drugs. The strategy fails to recognise drug use as a potential source of “vulnerability”. Thus, it produces an artificial dichotomy in the framing of people who deal drugs as distinct from people who use drugs, neglecting the overlaps. In reality, it ignores a group of “user-dealers” operating at street level whose motivations to deal drugs are different to commercial suppliers, but they are exposed to the same heavy sentences (Moyle and Coomber, 2015). Reid (2023)

effectively demonstrates how the lives of those involved in drug dealing networks are shaped by a complex interplay of psychosocial trauma and socioeconomic and cultural factors. This is also borne out in homicide statistics, which suggest a greater proportion of those who use drugs (as opposed to those who deal drugs) are both victims and suspects (ONS, 2023).

A key aim of the 2018 strategy was to achieve a balance between prevention and enforcement activities. Tackling serious violence was framed as “not a law enforcement issue alone” but required a “multiple strand approach involving a range of partners across different sectors” (HM Government, 2018, p.14). The document outlined a preventative, public health approach that prioritised and resourced early intervention with “at risk” young people and building partnerships between police, local authorities, social services, youth services, housing, victim services, health and education.

The narrative around “serious violence” was therefore framed as being linked to changes in drug demand (crack cocaine), shifts in the drugs market to rural areas, and the involvement of increasing younger people in drug supply activities. The framing of the role of drugs in contributing to serious violence is based on the systemic model of the drugs-crime link. Here, violent acts, such as assaults and homicides, are committed within drug markets as part of the drugs business involving supply and distribution (EMCDDA, 2013). Violence is employed to control territorial disputes, to intimidate young people into becoming involved in the supply, transport and storage of drugs, to collect debts and to control rival gangs. These systemic crimes are not necessarily connected with the use of drugs, but the violence within the operation of the market may increase the chance that people who use drugs become perpetrators and/or victims of violent crimes.

This framing of the drugs “problem” and focus on systemic, violent crime associated

with the drugs market was continued and became further embedded in the UK Government's Beating Crime Plan in 2021:

“Drugs are a scourge on society. We will address both supply and demand – coming down harder on drug dealers, dismantling county lines gangs, making clear that ‘recreational’ use is not harmless and supporting drug and alcohol addicts to access the treatment services they need to turn their lives around.” (UK Government, 2021, p.3)

This document placed greater focus on people who use drugs recreationally and consequences (and possible sanctions) for their drug use. This signalled a shift towards more punitive approaches and perhaps a shift away from public health and the in-roads these approaches have made. This political direction continued unabated despite not necessarily borne out in public sentiment (Kirby and Jacobson, 2014). There may also be a clear disjuncture between the rhetoric of punitive policy statements and the reality of practice on the ground where police diversion schemes are being introduced and expanded for people who use drugs (Crest Advisory, 2022).

Similarly, the 2021 drug strategy has further spotlighted the systemic violence associated with the drugs market with promises to “break drug supply chains” and shut down 2000 county lines.

“Because drugs cause crime and crime ruins innocent lives. If we're going to succeed in levelling up this country, then we have to break the cycle of violence and abuse that blights so many communities, bring hope to those who have long since lost it and help rebuild the lives shattered by the illegal drug trade.” (Foreword, Prime Minister Boris Johnson, HM Government, 2021, p.4)

However, as Bacon and Spicer (2022) argue, there is an underlying assumption that this focus on disrupting and breaking drug supply

chains will directly reduce violence. They point to concern and evidence that crackdowns and enforcement in general can actually have the unintended consequences of amplifying and increasing drug market violence (see Werb et al., 2011).

The focus on “recreational users” was also reinforced in the 2021 drug strategy. The threat of increasing sanctions for their role in sustaining the systemic violence associated with the drugs trade was put forward as a future development. This was then taken forward in a White Paper (Home Office, 2022, p.5), which set out a “tough escalatory framework” for dealing with those caught in possession of recreational drugs. People who use drugs recreationally were framed as being responsible for “putting money into the pockets of dangerous drug gangs and fuelling violence” (Home Office, 2022, p.8). Similar to developments in Denmark (see Sogaard and Nielson, 2021), they were framed as market actors complicit in and responsible for organised drug-related crime and the violence associated with it. This strategic mobilisation of morality (O'Malley, 1999) justifies this more punitive approach to individual users. As Spicer (2021b) argues, these techniques of allocating blame and responsibility is a form of surface scapegoating – akin to the identification of folk devils (in a moral panics paradigm) (Cohen, 1972) – which deflects attention away from the underlying social and structural conditions that drive the violence and the drugs trade.

The silencing of alcohol as a contributing factor to serious violence and the implications

Although alcohol formed a defining feature of much policy discourse concerning violence in and around the NTE around the turn of the century both in the UK and elsewhere (Bellis and Hughes, 2011; Hadfield et al., 2009; Moore et al., 2021; Ragnarsdóttir et al., 2011), the narrow focus adopted in the Serious

Violence Strategy 2018 explicitly excludes the consideration of alcohol-related violence as previously alluded to.

“Serious violence extends to other forms of serious assault of course. We know that a significant proportion of violence is linked to either domestic abuse or alcohol, but these two important elements are not driving the increases we are seeing in violent crime. This is why they are not the focus of this document.” (HM Government, 2018, p.12)

The strategy acknowledges that a “substantial proportion of violence is related to alcohol consumption” in highlighting that:

“A substantial proportion of serious violence is linked in some way to alcohol. In more than a third of homicides (35%) in 2016/17 either the victim or suspect had consumed alcohol prior to the incident (only alcohol, i.e., excluding alcohol and illicit drugs).” (HM Government, 2018, p.29)

Thus, denoting alcohol consumption an important contextual factor in serious violent offending and suggesting that “evidence-based interventions targeting alcohol-related violence and domestic abuse are likely to help bring serious violence levels down” (HM Government, 2018, p.29).

However, owing to the absolute number of homicides where the suspect or victim had consumed alcohol before the offence having decreased and this accounting for a smaller proportion of homicides, the strategy concludes there is little evidence that the current increase in “serious” violent crime is being driven by these kinds of offences. Yet recent estimates highlight how the involvement of alcohol is greater than that of drugs by both victims and suspects of homicide (ONS, 2023). Similarly, it suggests there is no strong evidence that an increase in violent crime is being driven by alcohol-related violence in the NTE.

“Since 2007/08, the absolute number of homicides where the suspect or victim consumed only alcohol has reduced and they now account for a smaller proportion of total homicides (down from 41% in 2007/08). So there is little evidence that the current increase is being driven by these kinds of offences.” (HM Government, 2018, p.29)

Despite acknowledgement that alcohol consumption features in many violent incidents, owing to low numbers of homicides where the suspect or victim consumed alcohol before the offence, even homicides related to alcohol consumption were not considered a priority for inclusion within the strategy’s purview. The Serious Violence Strategy suggests strategies are best placed to deal with alcohol and violence in the NTE as dedicated foci (HM Government, 2018).

Through its myopic focus on “serious violence”, the Serious Violence Strategy 2018 obscures consideration of most alcohol-related violence (among others), despite the high prevalence of alcohol implicated in serious crimes, such as homicides (26% in England and Wales) (Stripe 2022), and the widespread harm associated with alcohol-related violence – in the form of stranger, acquaintance and domestic violence (XXX, 2021), and thus limits how policy seeks to address this – suggesting other strategies deal with this issue, presumably the outdated Alcohol Strategy (HM Government, 2012). The 2012 Alcohol Strategy was introduced by the then Conservative and Liberal Democrat coalition government and has yet to be updated by any successive governments. This leaves a considerable vacuum in how alcohol-related harm ought to be addressed and surprising in the context of (1) significant policy attention on alcohol-related violence, particularly in NTE settings and city centres, in the early part of the century (Nicholls 2012); (2) alcohol consumption being acknowledged as a common antecedent (along with SES) to violence (e.g., Bryant and Lightowlers, 2021; Lightowlers

et al., 2014); and (iii) the Serious Violence Strategy's commitment to the merits of public health approaches to policing (see HM Government, 2018, p.71) where it calls for continued cooperation between "policing and public health, particularly with regards to drug and alcohol treatment and prevention services", which are thought to be promising avenues in stemming alcohol-related violence alongside action on the price and availability of alcohol (Babor et al., 2022; Bryant and Lightowers, 2021; WHO, 2010). Indeed, the WHO (2014) recommended reducing the availability and harmful use of alcohol as a key strategy to aid violence prevention and pushed the consideration of alcohol's harms to others (AHTO) as part of its global strategy to reduce harmful alcohol use (Wilkinson and Ritter, 2021). In addition, many scholars increasingly advocate for government action on controlling alcohol consumption and associated harms (Laslett et al., 2019). Instead, however, alcohol is missing from the agenda altogether in the Serious Violence Strategy (HM Government, 2018).

Any consideration of alcohol consumption in the Serious Violence Strategy relates solely to the consideration of "those addicted to or abusing drugs and/or alcohol", seeing these as distinct from other (voluntary) users and relying on a false dichotomy in this regard (Room, 2020). Alcohol dependence and abuse are talked about in the Serious Violence Strategy 2018 as background contextual factors to individual propensity to commit violence or to engage in trauma-informed practices when working with young people. As such, one of its key commitments is to roll out:

"Liaison and Diversion services in police stations and courts to help improve outcomes for people with vulnerabilities including drug and alcohol problems and mental ill health."
(HM Government, 2018, p.66)

However, the strategy lacks acknowledgement of any continuum of alcohol consumption,

consideration of the degree of intoxication and how it impacts people differently, or level of harm associated with this. This seems a missed opportunity given that alcohol's involvement has been identified as greater than that of drugs in the most violent crimes, including homicide.

The trivialisation of alcohol's role in so many violent crimes and its omission in violence policy in England and Wales in recent years becomes further embedded in the Tackling Violence Against Women and Girls Strategy (HM Government, 2021a), which, despite former acknowledgement of alcohol's role in domestic abuse (in the Serious Violence Strategy 2018⁵), makes no explicit reference to alcohol and only refers to the exposure of domestic abuse as a child as increasing the risk of substance use (or violence victimisation and perpetration, among others) later in life (HM Government, 2021a, p.21).

In a further example of violence policy that has developed since, the UK Government's (2021) Beating Crime Plan emphasises drugs as being "a scourge on society" (UK Government, 2021, p.3) but has little to say on the matter of alcohol. It notes that, once again, those addicted to alcohol (and drugs) will be supported "to access the treatment services they need to turn their lives around" (UK Government, 2021, p.3), boasting the commitment of £80 million to expand "substance misuse treatment services in England to support the recovery of prison leavers with drug and alcohol addictions and to place offenders into tough and effective community sentences with a requirement to undergo drug and alcohol treatment" (UK Government 2021, p.25–6). It also heralds advances in technology – in the form of alcohol tags – for supervising those on court orders or on licence for alcohol-related offenders as a potential mechanism for behavioural change (UK Government, 2021, p.6), despite representing a departure from addressing alcohol as a (public) health issue and further toward criminalising individuals for their drinking (Lightowers, 2022).

Study limitations

Our documentary analysis is necessarily limited in its analysis at the strategic level, which does not shed light on how such high-level directives may variously be translated into practice on the ground.

In focusing only on the English and Welsh context, we cannot purport to comment on policy directions occurring in other jurisdictions, but offer these reflections by way of a case study with lessons to be learned and reflected on by other adjacent jurisdictions and those with historically similar drinking cultures and framing of the problem of alcohol-related violence as a problem of the NTE, such as those seen in Nordic regions and Australia, among others.

Conclusion

Our analysis offers a distinct focus on the policy construction of the violence “problem” in the English and Welsh context and the way in which alcohol and illegal drugs are – or are not – represented therein. As such, it represents an interesting case study and the first of its kind to specifically focus on the landmark shifts observed in this jurisdiction upon the introduction of the Serious Violence Strategy. Our analytical framework of framing has provided valuable tools to demonstrate how certain forms of violence gained attention and how others were ignored or silenced. The selection of particular types of violence and ways in which drugs and alcohol contribute to these are bound together in narratives and evidence is employed to support and reinforce the focus. Thus, analysing framing helps to reveal how policy choices are justified, how they become embedded in policy development and have real effects on the allocations of scarce resources and on different populations.

In attending to our research questions, we identify three key findings through our analysis of framing in the Serious Violence Strategy

2018. First, its myopic framing of “serious violence” skews perceptions of the problem, perpetrators and harms that result, for example, in denying the severity of DVA. Second, the strategy creates a compelling narrative around “serious violence”, which is framed as being only associated with the drugs trade, the young age of the victims and perpetrators involved, and the justification for several approaches running parallel to deal with the “problem”, including public health informed early prevention interventions for the victims, as well as law and order approaches to deal with the “villains” (i.e., people involved in the drug market and people who use drugs recreationally). Third, the strategy’s silence on alcohol further denies the considerable harm associated with alcohol-related violence and the sizeable proportion of violence thought to involve alcohol (Stripe, 2021) as well as echoed in the rise in alcohol-related deaths during and since the pandemic (Breen and Butt, 2022; Butt and John, 2021). This further skews and reinforces the political discourse around violence to be associated with illegal drugs, drugs markets and organised crime and diverts our attention away from the risks associated with everyday violence in domestic and NTE settings. Government funding follows this framing. For example, in 2019, the Home Secretary allocated £35 million to Police and Crime Commissioners (PCC) in 18 areas to set up multi-agency violence reduction units (VRUs). The steer from the Home Office was to target serious violence prevention, although local areas were given latitude to specifically define their parameters and scope in relation to the types of violent offending they would concentrate on (Home Office, 2023). For example, some chose to acknowledge domestic violence as within their remit (e.g., Greater Manchester Violence Reduction Unit, undated) while others did not (e.g., Merseyside Violence Reduction Unit, 2020). Such decisions will have implications for communities as it diverts public funds away from much widespread, serious and fatal violence,

such as that involving alcohol and affecting women and girls in particular.

The framing of the causes of violence in this way feeds public and political imaginations concerning the idea that drugs (illegal) are associated with “serious” forms of violence, while alcohol (legal) is associated with more “mundane”, “everyday” types of violence. In turn, contributing to deviancy amplification spirals and moral panics concerning the usual “folk devils” (cf. Cohen, 1972), i.e., the “drug dealers” and “addicts” referred to in the strategy (HM Government, 2018, p.3), a problem then of organised (drug) criminals and irresponsible or dependent consumers of alcohol as opposed to everyday people/drinkers.

Thus, despite efforts to embrace a more holistic public health approach to violence prevention, what we have seen emerge in England and Wales is a less a comprehensive policy focusing only on more extreme and rare forms of violence, reactively responding to emotive responses and the “moral panic” of the day (Cohen, 1972). In this instance, this has resulted in policy being more attentive to sensationalist and extreme forms of “serious” violence (HM Government, 2018). Through this lens, drunken violence no longer receives as much “airtime” in policy discourse as it did around the turn of the century, and the drugs market is foregrounded as the key driver behind violence.

Moreover, the framing of the “problem” to be attended to in the strategy contributes to the proliferation of policy approaches. As such, the Serious Violence Strategy adds to a “patchwork” of policies (fragmentation) that have focused on different forms of violence which respond to “the ‘fascination’ with, direct violence” necessarily influenced by media and other social practices (Žižek, 2009). How violence ought to be conceptualised, operationalised and what ought to be considered within violence policy is necessarily the subject of ongoing debate in policy as well as academic arenas (cf. Moore et al., 2021; Walby 2013), and is unlikely to be resolved any time soon.

This particular framing of the “violence problem” has produced effects and has had real consequences for those who have to implement the frames and on those who are subjected to them. The focus on “serious violence” as distinct has, since the launch of the Serious Violence Strategy 2018, taken hold and become entrenched in the way in which VRUs think about responding to violence at the sub-national level, despite the drivers and correlates of many forms of violence often being similar (e.g., inequality, poverty and substance use) (WHO, 2014). The resulting funding streams also mirror the policy landscape and, as such, the slicing up/silo-ing of specific forms of violence in specific policies further dilutes valuable resources and opportunities for holistic whole systems approaches to be realised. This in turn has practical implications on the ground, for example in the allocation of funding for VRUs. The initial policy decision to focus on “serious” violence has become entrenched and embedded through a series of policy documents over time (HM Government, 2018, 2021a, 2021b; Home Office, 2022; UK Government, 2021). This could have lasting influence from which it is hard to decouple for policy makers and practitioners (path dependence) (cf. Cairney, 2012; Pierson, 2000), especially when funding and resources are allocated on this basis. These findings are of particular relevance as the UK government is increasingly criticised for the lack of an up-to-date Alcohol Strategy (Alcohol Health Alliance, 2022).

A more inclusive and holistic view of violence would allow for a more coordinated prevention strategy within which individual types of violence and populations can be addressed. Specifically, both drug and alcohol use need to be further embedded to allow for more meaningful working across populations and organisational boundaries.

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ORCID iD

Carly Lightowlers  <https://orcid.org/0000-0002-0608-8141>

Notes

1. The WHO encourages an all-encompassing definition of interpersonal violence which is “violence between family members, intimate partners, friends, acquaintances and strangers, and includes child maltreatment, youth violence, intimate partner violence, sexual violence and elder abuse” (WHO, 2014, p.3)
2. There is also mention of acid attacks and exploitation via county lines in the forward too by then Home Secretary (Amber Rudd MP), foregrounding more extreme and rarer forms of violence (which the strategy itself concedes [p. 13] only represent 1% of crimes – although these are associated with high levels of harm and costs to life) (HM Government, 2018).
3. There are of course wider concerns and debates to be had about the politics of excluding the consideration of domestic violence as serious, which are beyond the scope of this paper, especially as the strategy highlights that “around a quarter of homicides involve victims and suspects who are either intimate partners or ex-partners, or family members” (HM Government, 2018, p.29). The validity of conceptual distinction between serious and less serious violence is also debated *within* the domestic violence field, with Walby and Towers (2018) suggesting consideration of domestic violent crime ought to be mainstreamed rather than separated out as a specialist field.
4. Since taken up in the development of a Violence Against Women and Girls (VAWG) strategy (<https://www.gov.uk/government/consultations/violence-against-women-and-girls-vawg-call-for-evidence/violence-against-women-and-girls-vawg-strategy-2021-2024-call-for-evidence>).
5. “Alcohol is also often a factor in domestic abuse” (HM Government, 2018, p.29).

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