

Police use of force:

evidence from complaints,
investigations and
public perception



Acknowledgements

This report was largely researched and written by Kerry Grace, Rebecca Teers and Yvonne Sekiwa from the IPCC research team, together with Mark Hines from the policy and engagement team. They were assisted by Paul Burnside, Warren Davies, Emily Borelli, Nina Smith and Kimberley Williams.

In addition, TNS-BMRB conducted elements of the research on behalf of the IPCC, and Chris Posch from ICPR assisted with some of the statistical analysis.

We would like to thank all those who contributed to the research fieldwork, including, community groups, members of police forces, other stakeholders, and individual members of the public.

Contact details

If you have any questions or comments about this report, please contact Kerry Grace at research@ipcc.gsi.gov.uk

Statistical note

In the percentage column presented in the tables, '-' denotes zero and '0' denotes less than 0.5%. Some percentages may add up to more or less than 100% due to rounding.

Statistical differences presented in the report are at the 95% confidence level.

Proportions are calculated from information that is known.

Contents

Foreword	iv
Executive summary	vi
Introduction	1
1.1 Background	1
1.2 Aims and objectives	4
1.3 Definition of police use of force	4
1.4 Research methodology and report structure	6
Perceptions about police use of force	7
2.1 Trust in the police to use force	8
2.2 Extent of force used by the police	9
2.3 Type of force and severity	10
2.4 Risk assessment and challenges	11
2.5 Communication	14
2.6 Accountability	15
2.7 Recording	17
Complaints, referrals and appeals	20
3.1 Public complaints	21
3.2 Referrals	29
3.3 Appeals	36
Analysis of IPCC investigations	41
4.1 Characteristics of people who had force used against them	42
4.2 Characteristics of officers who used force	45
4.3 Circumstances in which the police used force	45
4.4 Types of force used by the police	47
4.5 Injuries and fatalities	50
4.6 Assessment and disciplinary action	52
Thematic analysis	55
5.1 Mental health	55
5.2 Children	61
5.3 Black and minority ethnic group	66
5.4 Custody environment	70
Recommendations	75
Appendix	81
A. Methodology	81
B. General population survey questions	84
C. Referrals	85
D. Appeals	86
E. Additional reading / literature review	88
References	91

List of tables and figures

<i>Table 3.1.1</i>	Use of force complaint allegations recorded, 2009/10 to 2013/14	23
<i>Figure 3.1.1</i>	Serious non-sexual assault allegations recorded, 2009/10 to 2013/14	24
<i>Figure 3.1.2</i>	Other assault allegations recorded, 2009/10 to 2013/14	24
<i>Table 3.1.2</i>	Use of force allegations recorded by police force, 2009/10 to 2013/14	25
<i>Table 3.1.3</i>	Method by which use of force allegations were finalised, 2010/11 to 2013/14	26
<i>Table 3.1.4</i>	Proportion of upheld investigations, 2010/11 to 2013/14	26
<i>Figure 3.1.3</i>	Complaint allegations recorded by type and age group	28
<i>Figure 3.2.1</i>	Age group by ethnic group, referrals data	31
<i>Table 3.2.1</i>	Types of force allegedly used, referrals data	33
<i>Figure 3.3.1</i>	Assessment grounds for upheld appeals by type	38
<i>Figure 3.3.2</i>	Type of recommendation and direction made for upheld use of force appeals	38
<i>Figure 4.1</i>	Age group and gender, investigations data	42
<i>Figure 4.2</i>	Drugs, alcohol and mental illness factors, investigations data	43
<i>Table 4.1</i>	Reason for detention, investigations data	44
<i>Table 4.2</i>	Comparison between single and multiple incidents	45
<i>Table 4.3</i>	Types of force used, investigations data	47
<i>Figure 4.3</i>	Level of injury, investigations data	50
<i>Table 4.4</i>	Disciplinary outcomes, investigations data	54
<i>Table 4.5</i>	Criminal outcomes, investigations data	54
<i>Figure 5.1.1</i>	Characteristics of person with or without mental illness	57
<i>Figure 5.1.2</i>	Type of contact for people with or without mental illness	58
<i>Figure 5.1.3</i>	Type of force used on people with or without mental illness	59
<i>Figure 5.1.4</i>	Injuries received by people with and without mental illness	60
<i>Figure 5.2.1</i>	Characteristics of child and adult sample	63
<i>Table 5.2.1</i>	Types of force used, comparison between children and adults	64
<i>Figure 5.2.2</i>	Injuries received, comparison between children and adults	65
<i>Figure 5.3.1</i>	Characteristics by ethnic group	67
<i>Figure 5.3.2</i>	Arrest reason, comparison by ethnic group	67
<i>Figure 5.3.3</i>	Types of force used, comparison by ethnic group	69
<i>Figure 5.3.4</i>	Injuries received, comparison by ethnic group	69
<i>Figure 5.4.1</i>	Characteristics of people who had force used against them in custody	72
<i>Table 5.4.1</i>	Types of force used in custody	73
<i>Table C.1</i>	Referrals received by appropriate authority, 1 April 2014 to 30 June 2014	85
<i>Table D.1</i>	Type of upheld appeals by appropriate authority, 1 April 2014 to 30 June 2014	86
<i>Table D.2</i>	Number of force types used, appeals data	87

Foreword

Our police service has, and needs, the power to use force where necessary when carrying out its duty to protect the public. It is clear that the public understand and indeed expect and rely on this. However, under the UK's tradition of policing by consent, they also expect that there will be accountability for the use of force, particularly where it leads to death or serious injury. Part of this is holding individual officers to account through investigations by the IPCC or forces themselves. But a significant part of accountability is ensuring that the public, the police and police oversight bodies know and understand when and how force is actually used, and its impact on particular groups or sections of the community.

For that reason, we have for some time been calling for police forces to collect, analyse and publish data on the use of force. This has two purposes: it can be an early warning system for senior officers and oversight bodies, alerting them to patterns that appear to be unusual or potentially problematic, and it can also improve public confidence, by providing factual information that can be shared with and discussed by communities. We therefore very much welcome the review being led by Chief Constable David Shaw, at the request of the Home Secretary, to implement and pilot an effective system for collecting data on all police use of force.

Our report shows why this is important and necessary. We draw on the information available to the IPCC: surveys of the public, analysis of complaints statistics, examination of the referrals we receive, and the evidence that comes out of our independent and managed investigations. This is far from being a comprehensive account of police use of force

in England and Wales. It necessarily focuses on issues that have raised concerns. However, it underlines why a comprehensive analysis is needed.

First, it is clear that, while the public broadly support police use of force, this is less true for certain groups – particularly young people and those from black and minority ethnic (BME) communities. Accurate information can help to dispel some misconceptions – for example, about how frequently firearms are used. It can also highlight genuine areas of concern. Members of our focus groups highlighted the importance of better communication between police and communities, and the need for more training to equip police officers to deal fairly and effectively with people from minority groups, including people with learning difficulties.

Second, the statistics raise some concerns about the robustness of police investigations into complaints from people who have experienced use of force. When the police investigate them, these kinds of complaint are much less likely to be upheld than others. Yet, when a subsequent appeal comes to the IPCC, we are more likely to uphold it than appeals that do not relate to use of force. This is especially the case when the appeal is from someone from a BME community, where over half of appeals were upheld. In around one in five appeals, the IPCC had concerns about the force used, whereas in most cases the original police investigation did not.

Finally, we examined the data from our own independent investigations over a five-year period. These investigations are not typical of police use of force: they represent the

most serious cases – in particular, those where death or serious injury followed. In two-thirds of our investigations, we did not find concerns about the force used and in some, we found evidence of good practice where officers had tried to safely contain some extremely challenging and vulnerable people. Our investigations do, however, raise some troubling issues. Half of the 18 people on whom restraint equipment was used subsequently died, as did half of the ten people who experienced force in a hospital setting. In light of concerns expressed by us and others, we also draw out issues relating to specific groups: those with mental health concerns, children and young people, people from BME communities, and those held in custody.

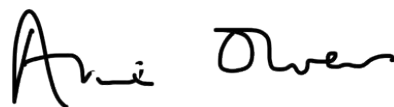
The IPCC has frequently expressed concern about the relationship between mental illness, restraint and death. One in five of those involved in our investigations into use of force were known to have mental health concerns. They were four times more likely to die after force had been used than those not known to be mentally ill. They were much more likely to be restrained, to experience multiple uses of force, and to be subject to force in a custody environment. People with mental health concerns are clearly vulnerable, but in many cases, they were also likely to present challenges to the police officers dealing with them. They were much more likely to be under the influence of drugs or alcohol and to be in possession of some kind of weapon, with risks to themselves or others. This underlines the findings in other reports: not only do police need training in recognising and communicating with those in mental health crisis, but there is an urgent need to invest in appropriate mental health services that can prevent such crises or support people through them.

We also examined investigations involving young people and people from BME communities, given the lower confidence in policing among those groups. One in seven of the people involved in our investigations

was aged under 18. They were less likely to be injured than adults, but when they were injured, it was likely to be more serious. The young people involved were disproportionately likely to be of BME background: that was the case for nearly half of the under-18s whose cases we investigated. In general, people from BME communities involved in use of force investigations were likely to be younger than others, and much more likely to have had force used on them in a public place, rather than at home. When we looked at the complaints data in general, we found a significant gap in forces' ability to reassure themselves that their practices are not disproportionately affecting certain communities: in a quarter of complaints about the use of force, ethnicity was not recorded.

We have previously expressed concern about the use of force in custody, which is reflected in this report. In our investigations, we expressed concern about half the uses of force in custody, including the use of restraint equipment, physical strikes and Taser. We often found that communication with the person before using force was inadequate.

Finally, and importantly, it should be noted that many of the most serious incidents referred to in this report involve people with multiple and complex needs, and occur outside normal working hours, when the police too often become the service of first resort. This report necessarily focuses on the actions of the police. However, there are important messages too about the need to ensure appropriate and available support and intervention outside criminal justice, including in particular mental health and addiction services.



Dame Anne Owers
Chair

Executive summary

There is currently no complete picture of how police in England and Wales use force. This study brings together an evidence base that is informed by:

- analysis of public complaints recorded by the police
- cases that the IPCC has been involved with
- research into the perceptions and experiences of members of the public, police personnel, and other stakeholders

This report does not intend to provide a representative picture of how force is used nationally. However, it does identify some issues that emerge from the evidence available.

Informed by our findings, we have made a number of recommendations. These are designed to improve how force is used and recorded and how its effectiveness is evaluated, with the overall aim of improving public confidence in its use.

The main findings of the study and its recommendations are outlined below.

Trust in the police to use force

- In general, the public trust the police a lot or a fair amount to use reasonable force (83%). However, there was less trust among Black and minority ethnic (BME) groups (76%), younger people (71%), and those living in London (69%). Trust was particularly low among Black respondents (61%).

- Public trust was affected by personal experiences, news reporting, and television dramas. Police officers reported their feeling that a focus on negative experiences could undermine public trust in the police.
- Public concern about how frequently police use force was relatively low (25%). However, there were higher levels of concern among BME groups (32%) and, in particular, Black respondents (45%).
- In general, the public think that police use force more readily now than ten years ago. They also thought that the police fired firearms four times more often than they did.
- People who had direct experience of police using force on them believed that police were more ready to use excessive force, that verbal communication was not attempted first, and lacked confidence in the complaints system.

Risk assessment and communication

- Good communication was seen as key to preventing situations from escalating to a point where force needed to be used. While officers felt that verbal commands and talk-down methods were always used initially to manage situations, people who had experienced force felt that officers often used force too quickly.
- Stakeholders, in particular those from African-Caribbean communities and those with learning disabilities, told us that body language, cultural differences, and language barriers can negatively affect the initial contact with the police.

- There was a perception, particularly among BME communities, that officers at times decide to use force based on stereotypes and preconceived ideas about certain groups or people. However, the police officers we spoke to during this study said that individual characteristics were not factors in deciding when to use force. They were considered only as part of the risk assessment and when considering the potential impact of using force.
- Over the five-year period analysed, the number and proportion of complaints relating to use of force has decreased. Allegations relating to police use of force account for around 10% of allegations recorded.

Accountability and recording

- Officers said that the National Decision Model (NDM) formed the basis of any decision about whether to use force. Since each officer can perceive a situation differently, it is crucial that they record their rationale for using force to help aid accountability. In some investigations we examined, there were concerns about the lack of information gathered before risk assessments were conducted and force was used.
- There is currently no standardised national practice for police forces to record all types of force used. The police, public, and stakeholders were all strongly in favour of robust methods of recording and monitoring when police officers use force.
- The use of body worn video was seen as a positive addition to policing that could improve public confidence. People felt that the footage could be used to help improve public awareness and understanding of the circumstances in which force may be used and assist with accountability and investigations into how force was used.
- In a quarter of allegations about use of force, ethnicity was not recorded. Where it was, 19% of allegations came from BME complainants.
- Age was also not recorded in 14% of these cases. Where it was, the proportion of complainants aged 18 to 29 was higher than among complainants in general (33% compared to 22%).
- Some forces (12) recorded above average proportions of allegations about how force was used. Although figures have fluctuated, five forces recorded above average proportions in each of the five-years analysed. Without police forces conducting further analysis to understand the context from which these complaints were made, it is difficult to know if these figures are a cause for concern.
- A similar proportion of use of force allegations was investigated by the police (57%) compared to all allegations (54%), but a lower rate were upheld (5% compared to 13% overall).

Referrals

- One in five (21%) referrals to the IPCC over a three-month period were about police use of force – 93% were deemed suitable for local police investigation.
- One in four (24%, 45) were from a BME background, the majority of whom (13%, 25) were Black.
- Alcohol and/or drugs were a factor for more than half of the people involved (57%) and mental health concerns were identified in one in three people (37%). Both of these factors were more prevalent in cases where Taser, restraint equipment, or incapacitant spray was used.

Complaining, referrals and appeals

Complaints

- The public said they needed to know more about what reasonable use of force looks like so that they have a greater awareness about when to complain.

Appeals

- Over a three-month period, one in four (25%) of all appeals completed by the IPCC following a complaint investigation carried out by a police force was about police use of force.
- The IPCC upheld more appeals following complaints about police use of force (42%) than appeals involving other issues (37%).
- Over half (57%, 26) of BME people had their appeal about use of force upheld compared to 40% (29) of White people.
- In around one in five cases (21%, 29), the IPCC had concerns about the force used. In most of these, the original police investigation did not. The IPCC was more likely to disagree with forces' decisions on officers' conduct or performance in use of force appeals than in other appeals (27% compared to 10%).
- Forty people (17%) died during or following use of force. Not all deaths were directly related to the force used. Thirteen of these people had been restrained, though this was not always referenced as the cause of death; all had alcohol or drugs as a factor. There was a fatality in half (nine) of the incidents where restraint equipment was used.
- Being under the influence of alcohol and/or drugs, having a mental health concern and being fatally injured, were more common among people who experienced multiple incidents of force being used compared to those who experienced one.
- Five of the ten people who experienced force in a hospital setting died. In four of those cases struggle against restraint was noted as a contributory factor, together with the effects of drugs or alcohol.

IPCC investigations

- Over a five-year period, the IPCC carried out or managed 191 investigations involving 239 people about police use of force. These are the most serious incidents, sometimes resulting in death or serious injury.
- Over one in four (29%, 60) people involved were from a BME background and 27 were under 18.
- Alcohol and drugs were relevant for half the people. One in five (49) had known mental health concerns, and one in five people were carrying a weapon.
- Half of the incidents took place between 9pm and 3am.
- The IPCC found concerns about use of force in nearly a third (31%, 59) of investigations. A quarter of these occurred in the custody environment. For one in ten people, communication was considered inadequate, and this increased to one in four people for incidents in the custody environment. Other concerns included overuse or incorrect use of equipment and insufficient rationale.
- Sixty-two of the officers involved in these investigations were proven to have breached the standards of professional behaviour. Nine officers were dismissed.
- IPCC investigations also found examples of good practice, including gathering information for full risk assessment, ensuring the provision of first aid and immediate medical help, recording rationales for the use of force, and ceasing use of force once the situation was under control.

Mental health

- From the investigations examined, one in five (20%, 46) people were identified with a mental health concern. Compared to people with no mental illness, those who did have a mental illness were: more likely to be White and over 30, more likely to be intoxicated by drugs or alcohol, more likely to be carrying a weapon, more likely to have a firearm, restraint equipment, or Taser used on them, but less likely to have a baton used on them, or be physically struck.
- A higher proportion (24%) of those with mental health concerns experienced force in the custody environment than those with no mental illness (13%).
- Nineteen people (41%) with mental ill health died compared to 21 people (11%) with no mental health concerns.
- Stakeholders felt that officers lacked confidence in dealing with people with mental health concerns, as well as other hidden impairments, such as learning disabilities.

Children

- Children aged 17 years and under accounted for 14% (27) of those who made up the investigations sample.
- A greater proportion of children than adults were from a BME background (48% compared to 24%).
- Children were less likely than adults to be injured as a result of force, but if they were injured, the injury was more likely to be serious.
- There was less use of Taser, but more use of physical strikes on children than adults.
- Feedback from young people highlighted their lack of awareness of and confidence in the police complaints system.

Black and minority ethnic groups (BME)

- The general population survey shows that BME groups have less trust in the police's ability to use force reasonably, and are more concerned about the frequency with which officers use force. This is particularly the case for Black respondents.
- People from a BME background accounted for 24% and 39% of people respectively in the referrals and appeals sample analysed. They also made up 29% of people in the investigations sample. However, there was a lower proportion (19%) of BME people among those making complaints about the use of force.
- In the investigations sample, BME people were likely to be younger than the White people involved. Over one in five (22%) were under 18, compared to 9% of White people; almost two-thirds (63%) were under 30 compared to 40% of White people.
- BME people were less likely to have mental health concerns than White people (10% compared to 26%), less likely to be intoxicated with drugs or alcohol, but more likely to be arrested for possession/supply of drugs or possession of a weapon.
- People from BME groups were more likely to have experienced use of force in public spaces (73%) than in their home (15%), compared to White people (58% and 23% respectively).

Custody environment

- In the investigations sample, 35 people (15%) had force used on them in a custody cell or suite. Of these, eight people died, four of them related to drug intoxication and struggles against restraint.
- The IPCC had concerns about the force used against half of the people (49%, 17) in custody, including three of the five uses of restraint equipment, a third of physical holds, and the single use of Taser.
- The investigations found that communication with the person involved was not adequate before force was used in one in four of these cases (23%, eight). This was a higher rate compared to the overall sample (10%).

Recommendations

To help make sure that the study leads to changes in police practice, we have made a number of recommendations to police stakeholders and the police.

The full list of recommendations can be found in [chapter 6](#). A fundamental and underlying recommendation is the need to record, analyse and publish information on all uses of force. Other recommendations include:

- Communications and de-escalation.
- Special considerations when dealing with vulnerable groups.
- Training to ensure consistency with national guidance, and specific training in dealing with unconscious bias.
- Dealing with incidents in medical settings.
- Use of body worn video.
- Understanding community impact.

The recommendations are intended to:

- Improve police practice and levels of public confidence in the police to use force appropriately.
- Inform the ongoing development of Authorised Professional Practice (APP) and training standards by raising awareness of possible gaps identified by the study.
- Improve recording and monitoring practices for all types of police use of force.
- Encourage other stakeholders and oversight bodies to consider the part they can play in taking forward the recommendations from the study.
- Inform and encourage discussion and debate about police use of force.

1. Introduction

1.1 Background

The law allows the police to use reasonable force when necessary in order to carry out their role of law enforcement. If this power is believed to have been misused, it can have serious implications for public confidence. This is particularly the case when it appears to have been applied disproportionately or differentially.

In order to be lawful, the force used must be necessary, reasonable, and proportionate in the circumstances as the police officer in question honestly perceived them. In other words, force may be used only where lesser interventions would not have sufficed. The law¹ that governs the police use of force applies both to the police and all other citizens. It states:

“A person may use such force as is reasonable in the circumstances in the prevention of crime, or in effecting or assisting in the lawful arrest of offenders or suspected offenders or of persons unlawfully at large”.

Inappropriate or excessive use of force may contravene the Human Rights Act 2000. The extent of any force used, must be

proportionate to the perceived threat. This will be subjective for each person. Therefore, determining whether any force used is excessive relies on an officer’s reasoning and rationale for using that force. The College of Policing’s Authorised Professional Practice (APP)² sets out three questions that police officers should consider when determining when and to what extent they use force:

- would the use of force have a lawful objective (e.g. the prevention of injury to others or damage to property, or the effecting of a lawful arrest) and, if so, how immediate and grave is the threat posed?
- are there any means, short of the use of force, capable of attaining the lawful objective identified?
- having regard to the nature and gravity of the threat, and the potential for adverse consequences to arise from the use of force (including the risk of escalation and the exposure of others to harm) what is the minimum level of force required to attain the objective identified, and would the use of that level of force be proportionate or excessive?

¹ Criminal Law Act 1967, the Police and Criminal Evidence Act 1984, Common Law, the Criminal Justice and Immigration Act 2008 and the European Court of Human Rights.

² College of Policing, Authorised Professional Practice on [police use of force](#).

1. Introduction

It is accepted that the use of force is a necessary part of the police's role of public protection. It is used in a variety of contexts, ranging from interactions on the street to policing of large-scale public demonstrations. The legitimacy of this and other police actions is closely aligned to the belief that this will be carried out fairly and with good reason.

A number of different organisations have looked into aspects of the use of force, or related topics, but there is no definitive national picture. Such a picture is difficult to draw, because there is no consistent data about the extent and type of force used by the police. This is something that the IPCC has repeatedly drawn attention to, as has the Independent Advisory Panel on Deaths in Custody³. This makes it difficult to identify lessons and trends.

Her Majesty's Inspectorate of Constabulary (HMIC) has carried out a number of thematic inspections about use of force in public order situations⁴. They included public surveys, which in general showed that the public considered that force was justifiable as violent or anti-social behaviour escalated. The second report, following the August 2011 riots, identified some gaps in police training and confidence in applying the law. It drew out ten principles for use of force in these situations (see [Appendix E](#)).

It is clear that there have been specific concerns about policing in general, and the use of force in particular, in relation to certain groups and settings: those from BME groups, those with mental health concerns, children and young people, and those held in custody.

National statistics show that people from BME communities, particularly those of Black or mixed heritage, are over-represented in the criminal justice system⁵. The government has just announced a major review into this, led by David Lammy MP⁶. Some reports have focused specifically on interactions with the police, including the report of the independent commission on mental health and policing in the Metropolitan Police Service (MPS). This report collated anecdotal evidence that race was believed to be an aggravating factor in interactions between young Black men and the police⁷.

An IPCC study in 2010, examining 11-years of deaths in or following police custody, found that people from BME groups were significantly more likely to be restrained than White people⁸. In addition, recently-released information on the use of Taser appears to show that Black people are four times as likely as White people to have a Taser used on them⁹.

The relationship between mental health and policing has been a continuing theme. Research carried out for Mind and Victim Support in 2013¹⁰ found that two-thirds of people in their sample with serious mental health issues were dissatisfied with aspects of their treatment by police. The independent report¹¹ on mental health and policing in the MPS surveyed people with mental health issues who had interacted with police. It found that more than half of respondents believed that police did not understand their issues and did not offer appropriate care and support.

³ Independent Advisory Panel on Deaths in Custody, [Report of the Cross-Sector Restraint Workshop held in May 2010](#).

⁴ HMIC (2009) [Adapting to protest](#) and HMIC (2011) [The rules of engagement: A review of the August 2011 disorders](#).

⁵ Ministry of Justice (2014) [Statistics on race and the criminal justice system 2014](#).

⁶ [Review of racial bias and BAME representation in criminal justice system](#) announced January 2016.

⁷ [Independent Commission on mental health and policing report](#), focus on MPS (2013).

⁸ IPCC (2010) [Deaths in or following police custody: An examination of cases 1998/99 to 2008/09](#).

⁹ BBC News (2015) [Black people 'three times more likely' to be Tasered](#).

¹⁰ Mind and Victim Support (2013) [At risk, yet dismissed: The criminal victimisation of people with mental health problems](#).

¹¹ [Independent Commission on mental health and policing report](#), focus on MPS (2013).

1. Introduction

The IPCC has produced a report on the use of Section 136 of the Mental Health Act, and argued that police stations should not be used as places of safety under the Act¹². While the use of Section 136 in police stations has decreased since then, it is clear that a significant number of those who die during or immediately after police custody are known to be mentally ill. Eight of the 17 people who died in police custody in 2014/15 had mental health concerns.

There are also longstanding concerns about the role of police in hospitals and other medical settings. This was raised in the MPS report above, and is also being examined by the National Mental Health Expert Reference Group, which aims to define better the responsibilities and requirements when mental health trusts call the police into healthcare settings.

Work by the All Party Parliamentary Group for Children¹³ found that many children and young people have ‘a profound lack of trust in the police’. They found that their views and attitudes are often shaped by negative encounters, with limited contact and communication in more positive environments. The IPCC’s own surveys show less confidence in the police by young people¹⁴.

The HMIC/HMIP report on vulnerable people in police custody raised a number of specific and general concerns about use of force in that setting. They found inconsistent recording practices, unnecessary use of force and incidents where the use of restraint was both disproportionate and oppressive. In addition, they found a lack of awareness that resistance may be linked to mental disturbance. Noting that police restraint methods are designed for use against people who are violent, rather than vulnerable, they expressed particular concern about their use on children.

Although the IPCC has conducted in-depth analysis of restraint-related custody deaths¹⁵ and produced a report about Taser use¹⁶, we have not previously carried out any detailed analysis looking at police use of force. We can offer a unique perspective on this area drawing on our experience of the cases we investigate and oversee, and exploring the views and experiences of the public, police and other stakeholders.

This report therefore examines the data we have, to draw out some findings on use of force in general, and also findings in relation to the specific groups and settings raised above: those from BME communities, those with mental health concerns, children and young people, and those in custody.

¹² IPCC (2008) [Police Custody as a “Place of Safety”: Examining the Use of Section 136 of the Mental Health Act 1983](#).

¹³ All-Party Parliamentary Group for Children (2014) [“It’s all about trust”: Building good relationships between children and the police](#).

¹⁴ Ipsos-MORI for the IPCC (2014) [Public confidence in the police complaints system 2014](#).

¹⁵ IPCC (2010) [Deaths in or following police custody: An examination of cases 1998/99 to 2008/09](#).

¹⁶ IPCC (2014) [IPCC review of Taser complaints and incidents 2004-2013](#).

1.2 Aims and objectives

The overall aims of this study were:

- To develop an understanding of when and how police personnel use force, through analysing the findings of IPCC investigations and appeals.
- To consider factors that influence definitions of reasonable and excessive force by drawing on the opinions, views and experiences of police personnel, members of the public, experts and other specialist interest groups.
- To develop an evidence base to inform relevant recommendations relating to operational policies and training and to support future IPCC recommendations in this area.
- To provide the IPCC with an opportunity to use learning from its work to influence the work of partner organisations.
- To contribute to the debate around whether a comprehensive system for recording use of force should be implemented across the police service.

1.3 Definition of police use of force

For the purpose of this study, the term ‘use of force’ includes a range of actions. These include:

- physical restraint, such as arm locks and pressure compliance
- the use of batons and incapacitant sprays (CS spray/PAVA)
- the use of Tasers, firearms and restraint equipment

The use of handcuffs has not been specifically examined as part of this study. However, it has been considered in cases where use resulted in either a complaint or a serious injury.

Box A Definition of types of force used in the study

Physical force

This covers the physical holding / pinning / restraining of a person by police personnel, as well as any form of physical contact – for example, pushing, pulling, and striking.

Restraint equipment

Specialist equipment used to hold limbs, control behaviour and prevent harm to the people involved in an incident. It includes the use of body or limb restraints, such as an Emergency Restraint Belt (ERB)¹⁷, Velcro or fast straps¹⁸, and a contamination hood¹⁹.

Taser / CED

The technical name for a Taser is a Conducted Energy Device (CED). It is a tool that uses electric shocks to stun and immobilise. These devices release short bursts of 1,500 volts in either drive stun (manual use) or through two spiked barbs launched up to 21 feet away from the person being targeted. The only CED in use in England and Wales is the 26 watt Taser X26. Throughout this report, this device is referred to as a Taser.

Incapacitant spray

Police forces use two types of incapacitant spray: PAVA and CS spray. They are used to incapacitate someone by irritating the skin, causing them to experience tears and coughing. PAVA is a synthetic of capsaicin peppers. It is an inflammatory substance affecting the immune and vascular systems. It causes severe irritation of the eyes and respiratory tract. CS spray affects the nervous system, leading to heavy mucus flow and respiratory discomfort.

Baton

Refers to either a static or an expandable stick. The collapsible baton is provided to most officers. It can be deployed easily when needed and stowed away when not in use so it does not interfere with the officer's movement. An expandable baton is opened by being swung forcefully and it has a solid tip at the end to maximize the power. A fixed acrylic baton is normally used for public order duties.

Conventional firearm

Specially trained firearms units have access to conventional firearms.

Police dog / horse

Specially trained animals, including dogs and horses, can be used in situations where police officers need to control or pursue people.

Baton rounds / AEP rounds

Baton rounds are intended to be less lethal than firearms. They are fired from a specially designed gun and their use is restricted to authorised and trained police officers. Attenuating energy projectiles (AEP) are soft-nosed projectiles intended to soothe the impact, but deliver a high amount of energy over an extended period.

Other

Refers to any other method of force outside the standard techniques set out above – such as using a police vehicle to stop someone moving or fleeing.

¹⁷ Soft style restraining belt made from strengthened fabric and straps secured with Velcro. Its intended purpose is to provide a protective and restraining device to handle, control, restrain, and move people who are violent or injured. It is intended to be used on the legs and arms.

¹⁸ This device is designed and used to restrict the movements of limbs. Its application should prevent a person from kicking and punching and allow them to be transported safely.

¹⁹ A hood designed to cover the whole of the face made of a thin, light fabric designed to allow the person to breathe easily while others are protected from their spitting or biting.

Outside the scope of this study

Our study focused on force used during encounters between the public and the police, in the context of police officers and staff²⁰ carrying out their appointed duties. It does not include allegations of sexual or emotional abuse against officers. Incidents involving strip searching by the police, where no force as described above was used, are also not included. Nor is the routine use of handcuffs, or incidents of stop and search that did not include force as defined above.

1.4 Research methodology and report structure

Our study was divided into a number of areas of research summarised below (see [Appendix A](#) for further detail). Each of these involved one or more discrete research strands. Some elements of the study were conducted by an independent external research agency, TNS-BMRB²¹, on behalf of the IPCC. It carried out the fieldwork for the survey, interviews and focus groups with members of the public, and conducted interviews with police officers. During 2015, the IPCC ran a number of stakeholder events where discussions about use of force took place, to collect further data for this study. Finally, the IPCC research team collected data and analysed information from our investigations and appeals, referrals of cases to us and public complaints made to police forces.

The research areas were:

- **General population survey** to measure the public's perception of the extent to which police use force and their trust in the way that they do so.
- **Six public focus groups** in four locations across the country to gather insight into the public's understanding of when and how police use force, what types of force are appropriate or excessive, and the factors that may influence use.
- **Interviews with those who had experienced police use of force** to gain insight from those who are most likely to have had contact with the police.
- **Interviews with police personnel** to explore their views, experiences and attitudes about using force and their rationale for doing so.
- **IPCC stakeholder events** across the country to develop our understanding of the issues and concerns relating to police use of force.
- **Assessment of current recording by police forces** of use of force data and how this is collected and used.
- **Analysis of referrals relating to use of force** received by the IPCC from forces in England and Wales during a three-month period in 2014.
- **Analysis of complaints from the public** involving allegations about the use of force recorded by police forces in England and Wales between 2009/10 and 2013/14.
- **Analysis of completed IPCC appeals against local police investigations** relating to use of force during a three-month period in 2014, comparing these with the outcome and assessment of other kinds of appeals.
- **In-depth analysis of IPCC investigations** relating to use of force completed over a five-year period from 2009/10 to 2013/14, to describe the circumstances and outcome of these investigations.

²⁰ The term 'officers' is used to describe 'police officers' or 'police staff' throughout the report.

²¹ TNS-BMRB was recruited to conduct the fieldwork for the survey, and to run public focus groups and police interviews on behalf of the IPCC. The full report of their findings is available on the IPCC website.

2. Perceptions about police use of force

Aims:

To explore the public's perception of the extent to which the police use force and their views about what level of force is reasonable and what level of force is excessive.

To gather a rich and deep insight into the public's views on when and how police officers should use different types of force and develop an understanding of when and in what circumstances force is perceived to be reasonable or excessive.

To explore the views of people who have direct experience of police use of force.

To explore police officers' views about using force and their rationale for its use.

Key findings

- Members of the public report that they have high levels of trust in the police using reasonable force (83%). However, there is less trust among people from BME communities (76%), younger people (71%), and people who live in London (69%). Trust was particularly low among Black respondents (61%).
- Compared to ten years ago, the public thinks that the police are using force more readily.
- Public concern about the frequency with which force is used is relatively low (25%). However, concern is higher among BME groups (32%), particularly among Black respondents (45%).
- Members of the public and the police officers spoken to, considered that excessive use of force by the police was rare.
- People who had direct experience of police using force against them generally held more negative views than the general public. They believed that the police use force more frequently, and more excessively, and that verbal communication was not attempted first. They also lacked confidence in the complaints system.
- Some public and stakeholders held the perception that the police at times decide to use force based on stereotypes or preconceived ideas about certain groups.
- There was a lack of awareness among members of the public about what constitutes legitimate police use of force, and the types of situation in which force is used.
- All groups said that clear communication between police officers and members of the public was vital and verbal techniques should be used wherever possible to help defuse a situation.
- Using body worn video was seen as a positive addition to policing that could improve public confidence and their understanding of when force may be used.
- The public and stakeholders were concerned that there were no national recording practices for police use of force. All participants were strongly in favour of national standards and practices on recording.
- The public and stakeholders considered that when using force police officers need to be aware of the specific needs of vulnerable people. This includes people with mental illness or other hidden impairments.

This chapter considers the key findings from:

- the general population survey of England and Wales
- six public focus groups in four locations across the country with 44 people attending
- thirteen interviews with people who had direct experience of police use of force
- thirty-one police personnel interviews in a range of roles and ranks from six police forces
- IPCC stakeholder events at four regional locations, and a roundtable event with Black Mental Health UK, where we asked about and discussed people's perceptions and understanding of police use of force
- current recording practices on use of force

Where we refer to 'the public', this includes people who participated in focus groups, as well as the people we interviewed for this study and who had direct experience of police use of force. If the opinions of these two groups differed, we have noted this in the text. The views and experiences of police officers included in this report came from people we interviewed. They are not necessarily representative of the police as a whole. The people who attended our stakeholder or roundtable events predominantly represented service providers, though some service users were present. Views and opinions from the sessions are collectively referred to as being from the stakeholder events.

2.1 Trust in the police to use force

Overall, the general population survey showed a relatively high level of trust in the police to use reasonable force: eight out of ten (83%) people trusted the police a lot or a fair amount to use reasonable force in the course of their duties. The people who expressed lower levels of trust were:

- Black and minority ethnic (BME) groups (76%) and in particular Black respondents (61%)
- younger people aged 16 to 24 (71%)
- people who live in London (69%)

Since a higher proportion of young people and people from a BME background live in the city compared to other regions, this could influence the finding for London. This echoes findings from the IPCC's survey of [public confidence in the complaints system](#), where the same groups of people reported having less trust in the police complaints system and greater dissatisfaction with the police. High levels of trust in the police to use reasonable force were recorded among older people (87%) and managerial and professional social grade categories (85% to 88%).

People who attended the focus groups told us that the following factors affected levels of trust in the police: lack of visible police in their local area; lack of police response to less significant crimes; slow response to emergency calls for matters such as burglary; and young officers failing to demonstrate respect.

For young people, other factors that affected levels of trust included stop and search and the perception that police officers “bend the rules” – for example, parking on yellow lines while going into a shop. These factors apparently had far greater impact on trust than specific concerns about the use of force itself by police officers.

Members of the public said that personal experience, news reporting, social media, and television dramas affected the levels of trust they had in the police to use reasonable force. Police officers reported feeling that there was too much focus on negative experiences in the media, which could undermine public trust in the police. They would like information to be shared about incidents where police officers used force appropriately, as well as information from less positive incidents where lessons have been identified.

2.2 Extent of force used by the police

Almost half (47%) of the survey respondents thought that the police use force **more readily** now than ten years ago²². This feeling was:

- highest among people aged over 65 (58%)
- lowest among 35 to 54 year olds (39%)
- in line with the national picture for young people and people from BME groups

Discussions at the focus groups suggested that people believe that more force is needed to deal with changes in the type and nature of crime. They cited increases in the number of people carrying knives or guns and drunken behaviour.

However, overall public **concern about the frequency** with which the police use force was relatively low (25%). It was higher among BME groups (32%) and, in particular, among Black respondents (45%), who are statistically more likely to experience contact with the police²³. Although young people (aged 16 to 24) reported lower levels of trust in the police using force reasonably, their concern about how frequently police used force was similar to that of the public overall (26%).

Recommendation 1

We recommend that all police forces take steps to understand how their use of force affects the trust and confidence of people living and working in the local area.

Whether directly or indirectly affected, people’s perceptions of how the police use force affects their trust and confidence in the police. Forces should develop existing local engagement activity, to share information and help shape organisational policy, communication strategies and officer training.

²² A third (33%) disagreed with this view and 19% were unable to answer the question.

²³ Black people are four and a half times more likely to be subject to stop and search by the police than White people: [Statistics on Race and the Criminal Justice System 2014](#).

2. Perceptions about police use of force

Our survey asked respondents how often they thought police officers fired guns. We asked about this particular type of force because there are official statistics that show the frequency. Though respondents thought that this happened relatively rarely, they thought that police officers fired guns four times more often than they actually do²⁴. This could indicate that the public believes that police officers use force, particularly potentially lethal force, more frequently than they do in reality. This over-estimate could affect public confidence in the police. Discussions during the focus groups indicated that their views and understanding about the use of firearms by the police in the UK could be influenced by media reports about incidents overseas – in particular, gun use by police officers in the United States.

We also asked participants at our regional stakeholder events whether they believed that police officers use force more readily and more frequently on the groups of people they work with or represent. Participants found it difficult to answer the question, observing that without statistics, their judgement would be subjective. They felt that how people learn about police use of force is influenced primarily by what is reported in the media. This would mean that the more extreme cases of police use of force are shaping public opinion and levels of trust.

2.3 Type of force and severity

Our research found that members of the public had some **awareness** about the types of force police officers can use. However, they lacked awareness about the full range of techniques available to officers. Despite this lack of awareness, they expressed a high degree of trust in the police using force appropriately. In general, they reported feeling that the police would only use types of force that are legal.

In our discussions with police officers, they told us that they believe that the public were ill-informed about the types of force the police can legitimately use. They also reported feeling that the public are not always able to appreciate the context of the situations and threats they face, which determine the type or level of force. They said that this lack of understanding might lead to them being unfairly criticised by the public.

In the survey, the public did not indicate that one particular type of force concerned them more than others in a variety of scenarios. If they accepted that a specific situation called for the police to use force, then the type of force used did not appear to be significant. For example, if a situation arose where someone was armed with a knife and the public felt that it was appropriate for the police to use force, they did not generally have a view about whether a Taser or a baton should be used. However, in situations where a person was threatening to harm themselves, the public was less convinced that officers should use force at all. During the focus group discussions, there was some concern about the police using physical strikes, which could be seen as ‘fighting’. This method was a particular concern for people who had personal experience of police use of force. They felt that physical strikes indicated that the police officer lacked ‘control’ of the situation.

²⁴ In 2012/13, [the statistics](#) on firearm discharges show that this happened three times, which is typical of the last five years.

When we asked the public about their views about whether the police ever use **excessive force**, they had no evidence as to whether this happened, or how often. However, they did assume that police officers might use force inappropriately on some occasions. People who had personal experience of force being used against them by the police had more negative views than the general public. All of the people we spoke to who had experience of police use of force felt that the force used against them was excessive. They also believed that police officers use force more frequently than the wider public did. The police officers we spoke to described excessive force as: *high-level immediate force that was greater than required or continued force after a tactical objective had been met.*

All the groups we spoke to during this research (public focus groups, stakeholder groups, and police officers) felt that younger, less experienced officers might use force more readily. They thought that these officers were more likely to act instinctively or aggressively rather than trying to calm a situation. Although they did not view it as being acceptable, both the police and the public recognised that there could be excessive force when a police officer faces someone who is aggressive. The police said that this might happen in situations where the confrontation becomes personal or where it involves an inexperienced officer who may lose control. However, overall, the police officers and members of the public we spoke to assumed excessive use of force to be a rare event.

2.4 Risk assessment and challenges

Both the public and stakeholders recognised and accepted that there will be situations where police officers have to use force. Officers need to assess each situation according to the risks it presents. They must then respond accordingly and continue to monitor the situation to make sure that the response is adequate and appropriate. The police told us that the National Decision Model (NDM)²⁵ guides them when deciding how and when to use force. The public understand that “police officers are human”, and that they have to make decisions on the spot, often in challenging situations. The key factors they thought police officers should consider before using force, which are broadly in-line with the NDM, were:

- information about the person involved
- the context of the situation
- seriousness of the crime, if relevant
- level of threat presented to them and others
- the way the person responded to verbal communication
- the impact of the type and level of force and potential injuries
- the availability of police resource
- the impact on public perception

²⁵ The [National Decision Model](#) (NDM) is a risk assessment framework that guides all decision making in policing. It aims to make the process easier and uniform, and can also be used to assess the decisions that are made. The model also aims to improve future decision making and help create methods for different situations.

2. Perceptions about police use of force

When we asked police officers about their experiences of using force, they told us that they would try to use the minimum amount of force necessary to control a situation while minimising harm to the person involved. They found it difficult to describe a typical situation in which force would be used. While training and guidance underpinned a police officer's decision to use force, how each situation is assessed and handled is subject to the individual officer's assessment. Their perceptions and experiences mean that not all situations will be assessed in the same way. However, officers felt that perceiving a situation differently does not mean that there is always a right or wrong answer. The police officers we spoke to recognised that, while a supervisory officer can make decisions about tactical deployment and authorisation of force, the ultimate decision about how and when to use force is at the officer's discretion.

The public felt that characteristics such as age, gender, and the build of the person involved should not affect a police officer's decision about using force. The response should be based on the threat posed in a specific situation. They did express concern that officers may make unfair decisions about the risk they were facing based on the attitude, verbal behaviour and previous history of the person they were dealing with. Similarly, people who attended our stakeholder events suggested that some officers may **stereotype** an individual based on preconceived ideas about certain people or groups. They referred to the 'unconscious bias' that can predetermine someone's responses and perceptions of threat. This was a perception particularly held among BME participants. Police officers told us that age, gender, and physical build were not factors in determining how, and if, force was used. However, these characteristics would be considered as part of the risk assessment and when assessing the potential impact of different types of force in terms of possible risk and injury.

Unconscious bias

Our brains make quick judgments and assessments of people and situations without us realising. Our biases are influenced by our background, cultural environment and personal experiences. We may not even be aware of these views and opinions, or be aware of their full impact and implications.

Recommendation 2

We recommend that forces develop, or adapt existing training on unconscious bias, in relation to the decisions that officers make about when and how to use force.

Forces should refer to the good practice and developments ongoing in this area. Personal attitudes to age, race and mental health, influenced by negative stereotypes, can affect officers' behaviour. Increased awareness of unconscious bias, together with the National Decision Model, will help officers to think more carefully about how they interact with members of the public.

2. Perceptions about police use of force

The groups we spoke to also considered the locations where police use force. Some stakeholders told us that in larger cities they felt it had become the norm or the first option for the police to use force. This could mean that the type and level of force escalates more quickly. Stakeholders also thought that if officers know they are going to a particular problem area where they are likely to meet resistance and feel threatened, they may be more willing and ready to resort to force. Some senior and supervisory police officers discussed force being used more frequently in areas where crime and poverty are higher, and where people are known to the police. People who had personal experience of police using force felt that it was more common for police officers to use force on people from socially deprived areas.

We asked participants at our stakeholder events to consider a number of different situations and think about how police officers should react and decide what force to use, if any. People considered that force should be used less readily when someone was already in a police cell, as custody is a more controlled environment, away from outside factors and risks to the public. The view was that, as long as there was not an immediate threat to the person's life, police officers should take time to assess the situation and talk to the person, without direct physical contact. They also thought that, while more officers would be available to assist in custody, this could cause the situation to escalate faster as more officers could get involved.

Another theme that was discussed at the stakeholder events was mental health and learning difficulties. It was felt that **hidden impairments**, such as autism, may mean that some situations escalate more readily because of a lack of understanding on the part of all those involved. There was also the perception that some police officers lack confidence in dealing with people with mental health issues. This lack of confidence could have a particular impact on spontaneous interactions that happen in public spaces.

It was suggested that in **planned** situations, if the police are aware that the person they are approaching has mental health concerns or learning disabilities, they should attend with, and seek advice from, the person's support worker wherever possible, or as an alternative a significant other person who understands their needs. Making sure that the person has access to someone they know who is not in uniform could help to reduce their anxiety. People with mental health concerns suggested that police officers should be trained to help develop their awareness of the best ways to approach incidents involving vulnerable members of the community where it may be necessary to use force. The NDM states that officers should take into account, among a number of other factors, any information they have about the mental health of the person.

Recommendation 3

We recommend that, in line with the National Decision Model, forces make sure that their risk assessment processes prompt officers to give special consideration to the needs of vulnerable people when they plan operations.

The risk assessment process should prompt officers to consider how planned police operations could affect vulnerable adults (including people who have existing medical or mental health conditions or learning disabilities) and children or young people. This will enable them to consider the most appropriate course of action to limit any potential distress. Where possible and relevant, officers should seek advice and information from a person's support worker to help inform decision making.

2. Perceptions about police use of force

People who attended our stakeholder events discussed the importance of local policing practice and the impact this can have on communities. They said that it was important that the police service is demographically representative of the community it serves. They also felt it was important, where possible, to have the same officers on regular routine patrol areas, specifically in troublesome locations, to help build rapport and engage with the public. There was recognition that one negative experience can affect the whole community and its relationships with the police. It is very common for people to share bad experiences, but less common for positive experiences to be shared.

2.5 Communication

All those we spoke to during our research discussed the importance of communication. Police officers said they would use verbal commands and ‘talk-down’ methods to manage situations and negate the need for physical force. The police shared the view that force should be part of a continuum, with communication being used initially and force being considered only as the level of risk increases. Other factors that must be taken into account include the nature of the threat, where the incident is happening, and the risk to the people involved. People who had personal experience of police using force thought that talk down methods were used too rarely.

Initial communication should help to gauge information about someone’s background and current situation – for example, indicating whether they are intoxicated or have medical needs. Stakeholders told us that they were concerned that police officers lack sufficient awareness to deal with language and cultural differences or learning difficulties. This could influence the initial interaction between the officer and the member of the public and result in the situation escalating.

De-escalation

All officers should be guided by the [National Decision Model](#) during any interaction with the public. Communication should always be considered in an attempt to de-escalate any situations before force is used.

In particular, stakeholders discussed the importance of the following areas of communication:

- **Body language** – police officers could misconstrue certain behaviour as aggression or suspicious behaviour. Misinterpreting behaviours could also happen as a result of an officer’s preconceptions. What may appear to be threatening behaviour – for example, hand gestures and speaking loudly – can be an example of learning difficulties, or cultural difference, a view expressed particularly from African-Caribbean participants. The officers’ personal demeanour can also have a negative impact if they fail to remain calm to help de-escalate a situation.
- **Language barriers** – these will not always be immediately obvious. When English is not someone’s first language, someone may not respond when spoken to by a police officer, or they may respond more slowly. If the police officer misunderstands this, the situation may escalate more readily. Similar situations may arise for people with learning disabilities.
- **Cultural differences** – people from some cultures may prefer not to make eye contact. This could be viewed as suspicious from an officer’s point of view. In addition, if someone has come from another country where the tactics, behaviours, and attitudes of police are more heavy-handed, this can influence how they react to the presence of UK police.

2.6 Accountability

The police officers we spoke to recognised that they had to be accountable and responsible for their actions. They were also conscious that they were often under observation and scrutiny from CCTV and phone footage. Generally, they reported having confidence in the measures in place to make sure that force is used reasonably. Likewise, the public, with the exception of those who had direct experience of police use of force, generally thought that there were good processes to make sure that force was used appropriately and reasonably. Police officers believed that there are clear lines of accountability through the complaints and investigations processes. However, the public felt they needed greater awareness about what constitutes legal and reasonable use of force. This would allow people to be more confident about complaining if they felt that excessive force had been used. People who had experienced police using force were not confident about the current complaints procedures, and felt that complaints did not lead to significant action or change.

Recommendation 4

We recommend that all police forces provide training for their officers in communication techniques to help them manage and de-escalate situations without using force.

Our research has shown that effective communication between officers and the public is crucial in helping to prevent situations escalating to a point where officers need to use force. Training can be particularly useful to give officers the skills and confidence to communicate with groups with specific needs – such as people with hidden impairments, or those for whom English is not their first language.

Recommendation 5

We recommend that all police forces provide people who have had force used against them with information about how to give feedback about their experience, including information about making a complaint.

Complaints are a valuable source of information that can help to improve police practice. All forces should comply with the IPCC's [key principles for access to the police complaints system](#). Forces should publicise how people can give feedback or make complaints. Information should be available in custody suites, police station front offices, or on any records or literature provided to people who have been subject to the police use of force.

Officers viewed good training as fundamental to supporting their decision to use force and accountability for that decision. In general, officers considered the **training** provided to be sufficient and adequate, but they did raise some concerns about the reduction in time dedicated to training. They thought that the use of online self-learning tools had made it more difficult to evaluate whether officers fully understood the training. In addition, the grouping of some training modules around personal safety were considered insufficient and too infrequent to ensure that knowledge stayed up to date. Officers felt that further sharing of lessons learnt from investigations and embedding of the NDM in training would help them to evaluate and assess how they use force.

Police officers reported that the **complaints process** sometimes focused too much on occasions where force was used inappropriately. This gave the public a skewed negative picture about police use of force, which could undermine their trust. They also felt that the public lack understanding about the context of policing and its potential risks and threats, which impacts on their views about police use of force. The police suggested that an increased focus on lessons learnt and publicity around good practice in police use of force could help to build trust, especially with those people who are most disengaged from the police.

Recommendation 6

We recommend that all police forces review local policy and training to make sure that it is consistent with Authorised Professional Practice and other guidance (including the personal safety manual) relating to the police use of force.

Authorised Professional Practice and other guidance developed by the NPCC and College of Policing sets the national standard for how the police should use force, and brings together good practice from across the country.

2.7 Recording

National processes are in place to record the use of conventional firearms and Taser. However, there is no consistent national recording practice to record and analyse all incidents where the police use force.

The public assumed that robust systems were in place to record every incident where police use force. Both the public and stakeholders were concerned to learn that there were in fact no **standard recording practices** and that some forces do not have any mechanisms for collating and analysing usage. They felt it was important to record and to monitor information about the circumstances and the frequency of use of force.

The police, public, and stakeholders all told us they were strongly in favour of more robust methods of recording how, and when, police officers use force. However, all felt it was important that this did not pose additional administrative burdens on police officers. The police suggested two possible improvements: incorporating this recording into existing systems, such as the custody record, and having remote electronic devices to make recording more flexible. It should be noted that simply recording force on an individual custody record or individual occasion will be insufficient, unless there are mechanisms to collate and monitor this information.

All the groups we spoke to during our research thought that **body worn video** was a positive innovation in policing. Some people voiced concerns about the possible manipulation of recording devices if an officer chose not to switch it on in certain situations.

However, if officers were unable to provide a valid reason for a situation not having been recorded, this should be considered during any subsequent investigation. Stakeholders also thought that recording equipment could mean that situations escalated less quickly, as officers might take longer to consider using force.

The groups of people we spoke to all highlighted the following benefits of recording interactions between the public and police:

- improved public awareness and understanding of circumstances in which force may be used
- increased confidence in policing
- evidence to support investigations and hold police to account for their actions
- police feeling protected if their actions were challenged

National recording

Use of force data is collected by some police forces in England and Wales, although recording processes and extent of information collated varies considerably. In the absence of comprehensive and comparable data, it is not possible to be sure that force is used proportionately or in a non-discriminatory way. At the [Policing and Mental Health Summit in October 2014](#), the Home Secretary asked CC David Shaw to lead a review of police use of force, and present options for what data should be recorded, analysed and published by the police. In October 2015, the review set out a number of key recommendations and an implementation plan to introduce a new data collection system for the police. Ten pathfinder forces will begin collecting data on all significant use of force by April 2016, with the aim of all police forces recording data by 1 October 2016. Our study has helped to inform and support this review.

Recommendation 7

We recommend that all police forces that currently use body worn video keep footage if a complaint has been made, or a referral has been sent to the IPCC, or if the footage relates to a death or serious injury.

Body worn video can assist with the investigation of complaints or allegations of misconduct. Clear standards for retention of footage will help to make sure that important footage is not lost. This in turn will help to make sure that the use of force can be scrutinised properly.

Recording practices of use of force

In January 2014, we contacted all police forces and other bodies under our jurisdiction to ask what records they kept about incidents where police used force. We received 46 responses, with 37 reporting that they collect some data about use of force²⁶. Although there was some evidence of recording, this is only beneficial if the information can be routinely retrieved and analysed. While some good practice was found, there was no consistency across a number of areas in the approach to recording or using data on use of force. Some forces did not record at all.

- Due to a no standard approach in recording use of force data, it is not possible to compare use of force practices between police force areas or produce a national picture.
- The trigger for recording use of force differed from anything above non-compliant handcuffing, to only recording what was currently required (Taser and firearms use).
- The methods for recording data varied between forces. They included a web-based tool, a Share Point platform and paper-based records. Some only recorded information as part of the risk assessment for those arriving in custody. Some also did not bring the information about a detainee together in a single record or single system. This practice could increase the chance that important information is overlooked or not shared as required. This approach also meant that many forces were unable to extract the data collected and make full use of it for the purposes of monitoring and analysis.
- There were differences between forces in the number of records that were completed when force was used – either every officer involved completed a record, or one officer per incident.
- The point at which the information was recorded varied from as soon as practical after the incident, to within 24 hours. Any delay in recording information increases the likelihood that important details could be forgotten or left out of records.
- There was a notable lack of external publication of the information. Therefore, there was no opportunity for public scrutiny.
- Where the data could be analysed in a meaningful way, it was used for internal training purposes, monitoring individual officer practices, or responding to ad hoc requests where possible.

²⁶ Some forces may have made changes to their arrangements since they told us about their recording practices.

Recommendation 8

We recommend that the NPCC uses the proposed pilots on recording use of force to further develop national recording standards, and issues guidance on the use of the data collected.

This guidance will build on the national standards developed by the NPCC and help to ensure that forces make effective use of any data collected. This should include using data to monitor how officers are using force, how individuals and communities are affected and how data can be shared with the public to improve transparency and confidence.

Recommendation 9

We recommend that all police forces take steps to make sure that officers complete records relating to the use of force. They should also set up systems that enable them to monitor how force is being used.

Where use of force records are used effectively they have the potential to provide a valuable insight into how officers are using force. This in turn could help to improve organisational policy and training. Forces need to have systems in place that allow them to identify where officers are potentially overusing or misusing force, and where individuals or communities are potentially being repeatedly or disproportionately affected. These systems should allow forces to monitor the extent to which people's experience varies depending on the protected groups or communities that they are part of.

Recommendation 10

We recommend that all police forces publish data about their use of force and create opportunities for the public to scrutinise this data.

Forces should publish data about the circumstances and context in which force was used (such as during a stop and search encounter or in a custody suite), the type of force used, and the characteristics of the person involved (such as their age, ethnicity, gender, or other protected characteristic). Forces could involve community members in reviewing records about their use of force, relevant complaints, body worn video footage and other data. This would build public confidence in how the police use force.

3. Complaints, referrals and appeals

Because of a lack of consistent recording, there is no national picture showing how police officers use force. This section looks at a number of sources of data in the complaints system about use of force to help identify any patterns or useful learning. That information provides an initial insight into force used by the police, including:

- the circumstances in which it is used
- who it is used against
- how investigations relating to use of force are handled

The first part of this chapter looks at information included in complaints made by members of the public about alleged police assault. We considered any trends in the recording of these allegations, the people who made them, and how they were dealt with compared with other complaints and allegations.

The second part focuses on the referrals²⁷ the IPCC received from police forces²⁸ where an officer is alleged to have used force. We considered the personal characteristics of the people involved, the types of force and the situations in which it had been used. We sought to draw out key differences in the types of force used.

The final part of this chapter considers the outcomes of appeals²⁹ submitted to us when a police investigation into a complaint about use of force has concluded and the complainant is dissatisfied. It compares these to the outcomes of appeals that do not relate to the use of force. It also looks at the recommendations and directions made by the IPCC.

²⁷ The IPCC must be notified about specific types of complaint or incidents. See Section 8 of the [Statutory Guidance 2015](#) for further information on the mandatory referral criteria.

²⁸ Where we say 'police forces' in this report, this could also include other organisations under the IPCC's jurisdiction, such as National Crime Agency (NCA), Home Office and Police and Crime Commissioners (PCCs).

²⁹ The IPCC is responsible for considering certain appeals about the way that police forces and the National Crime Agency (NCA) have dealt with complaints. Section 13 of the [Statutory Guidance 2015](#), sets out further information about appeals.

3.1 Public complaints

Aim: To quantify the number of complaint allegations relating to assault recorded by police forces with their outcomes in order to provide broader context on public contact and dissatisfaction with the police.

Key findings

- While the overall number of complaints against the police is increasing each year, the number and proportion of complaints about use of force is decreasing steadily. Assault allegations account for around one in ten (10%) of allegations made.
- Twelve forces recorded above average proportions of allegations about how force was used. Although figures have fluctuated, five forces recorded above average proportions in each of the five-years analysed.
- Age was not recorded for 14% of complainants alleging misuse of force. Where it was known, 22% of all complainants are aged between 18 to 29. This increases to 33% (one in three) of complainants who made allegations involving police use of force.
- Almost two-thirds (64%) of all complainants were men. This increases to 73% of complainants who made complaints that included allegations about police use of force.
- For a quarter (23%) of complainants alleging misuse of force their ethnicity was not recorded by the police. Where it was, 19% of complainants were from BME groups.
- The proportion of allegations about police use of force that are investigated by the police has increased, and is on average slightly higher than complaints in general (57% compared to 54%). However, a lower proportion is upheld (5% compared to 13%).

Sample and methodology

This chapter presents figures on complaints made by members of the public under the Police Reform Act 2002, alleging the misuse of force by the police in England and Wales between 2009/10 and 2013/14. A single complaint may contain a number of separate allegations. For the purposes of this analysis, and to identify complaints that contained allegations about police use of force, the categories of allegation that we examined were 'serious non-sexual assault' and 'other assault' (Box B). We looked at the number of allegations recorded and finalised, and the personal characteristics of both the person who made the complaint and the person the complaint was about. Unfortunately, no additional data is available about the context in which these allegations were made, such as the location of the incident and the actions of the people involved.

These figures need to be treated with some caution. From previous research³⁰, we know that some members of the public are less confident about using the police complaints system. This is especially the case for BME groups and young people. Therefore, these statistics may not be fully representative of the extent of dissatisfaction, particularly among certain groups.

A complaint is...

...an expression of dissatisfaction by a member of the public about the conduct of a person serving with the police. This could, for example, be about the way the person has been treated or the service he or she has received.

³⁰ Ipsos-MORI for the IPCC (2014) [Public confidence in the police complaints system 2014](#).

Box B Definition of use of force allegation categories

Serious non-sexual assault

Inclusion in this category depends solely on the nature of the injuries.

1. This includes Section 18 or 20 assaults contrary to the Offences Against the Person Act 1861, i.e. unlawfully or maliciously wounding or causing grievous bodily harm and homicide.

Examples include: injury resulting in permanent disability or permanent loss of sensory function, fracture, deep cut or deep laceration, and injury causing damage to an internal organ or the impairment of any bodily function.

2. This includes Section 47 assaults contrary to the Offences Against the Person Act 1861.

Examples include: loss or breaking of a tooth or teeth, temporary loss of sensory functions (which may include loss of consciousness), extensive or multiple bruising, displaced broken nose, minor fractures, minor (but not merely superficial) cuts of a sort probably requiring medical attention (for example, stitches), and psychiatric injury that is more than fear, distress, or panic.

Other assault

This concerns use of more force than is reasonable. Inclusion is solely dependent on the nature of the injuries. This includes common assault and battery. Injuries include: grazes, scratches, abrasions, minor bruising, swellings, reddening of the skin, superficial cuts, and a 'black eye'. This category includes minor injuries resulting from the use of handcuffs. It also includes minor assaults resulting in no injury, such as pushing. A person serving with the police must never knowingly use more force than is reasonable, nor should he or she abuse his or her authority. This category includes any unjustified use of force or personal violence (but not assaults that cause no injury arising from unlawful arrest) and any incident involving police dogs or horses where the incident is attributable to the conduct of the person in control, unless the severity of injury puts them into the 'serious non-sexual assault' category.

Recorded complaint allegations

The data is taken from the IPCC's annual statistics for all public complaints made to police forces in England and Wales. This covers allegations recorded within the five-year period, 2009/10 to 2013/14³¹. Table 3.1.1 shows that allegations recorded about police use of force have decreased over the last five years, with a slight increase in 2013/14. The proportion of use of force allegations in relation to all allegations has decreased over the five-year period, accounting for one in ten allegations recorded in 2013/14.

The number of recorded allegations has fluctuated slightly over the five-year period. However, in each of these years, there were significantly fewer allegations of 'serious non-sexual assault': less than 1% of all recorded allegations. The majority of allegations of use of force come into the category of 'other assault'. Taking both categories together, there has been a gradual decrease in the number of use of force allegations recorded, falling by 19% from 2009/10 to 2013/14, and decreasing from 13% to 10% as a proportion of all complaint allegations.

Table 3.1.1 Use of force complaint allegations recorded, 2009/10 to 2013/14

Allegation category	2009/10	2010/11	2011/12	2012/13	2013/14
Serious non- sexual assault	376	312	418	322	336
Other assault	7,348	6,843	6,242	5,669	5,925
Total use of force allegations	7,724	7,155	6,660	5,991	6,261
Proportion of all allegations	13%	12%	12%	11%	10%
<i>Total allegations</i>	58,399	59,442	54,714	55,849	61,694

³¹ Annual data for 2014/15 shows that the number of allegations recorded continues to increase but the proportion of assault allegations now accounts for 9% of allegations recorded.

Figure 3.1.1 Serious non-sexual assault allegations recorded, 2009/10 to 2013/14

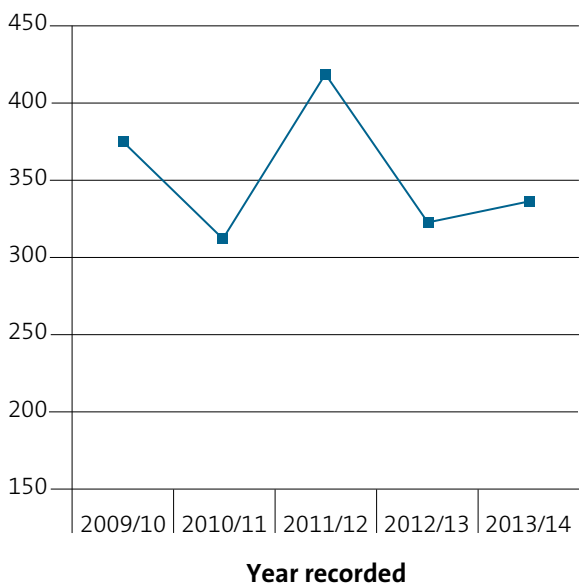


Figure 3.1.2 Other assault allegations recorded, 2009/10 to 2013/14

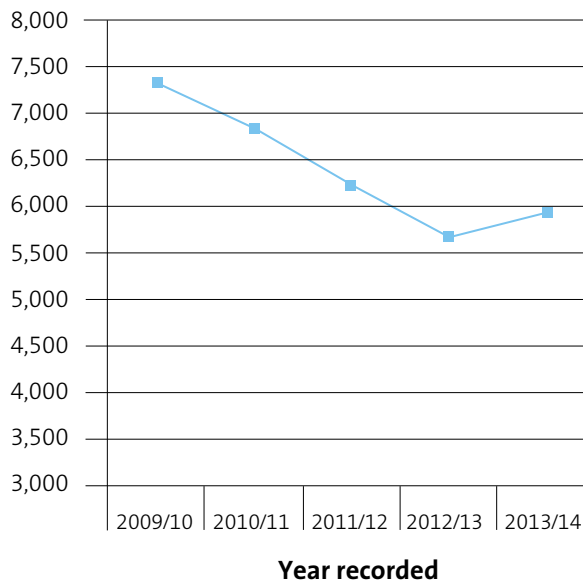


Table 3.1.2 shows the number of use of force complaint allegations recorded over the five-year period and its proportion of all allegations recorded by police forces. It shows the average proportion of use of force allegations over the five years (12%). It breaks this down by police force, and shows the average proportion of such complaints over the five-year period for each police force. This shows that nine police forces had the same proportion as the national average, 23 police forces had a lower average proportion, and 12 police forces an above average proportion. Staffordshire, Greater Manchester (GMP), and Merseyside recorded the

highest average proportion of use of force allegations (21%, 19% and 18% respectively). British Transport Police and West Yorkshire Police both recorded averages of 17%. Although the figures have fluctuated, all five forces recorded above average proportions of use of force allegations in each of the five years. In Merseyside there has been a notable decrease during the five-year period from 23% to 14% of all allegations. This data requires further examination to understand the context in which these complaints were made and to enable a judgement to be made about whether these figures are a cause of concern.

3. Complaints, referrals and appeals

Table 3.1.2 Use of force allegations recorded by police force, 2009/10 to 2013/14

Police force	2009/10		2010/11		2011/12		2012/13		2013/14		Total recorded (five years) N	Average proportion (five years) N
	Recorded N	Proportion of all recorded %	Recorded N	Proportion of all recorded %	Recorded N	Proportion of all recorded %	Recorded N	Proportion of all recorded %	Recorded N	Proportion of all recorded %		
Avon and Somerset	174	13	190	12	227	16	192	12	231	11	1,014	13
Bedfordshire	50	9	52	9	24	6	45	8	43	6	214	7
British Transport	137	18	129	17	130	17	85	14	126	17	607	17
Cambridgeshire	83	13	115	12	85	10	59	8	62	8	404	10
Cheshire	104	16	123	17	78	11	112	12	100	8	517	12
City of London	43	25	9	6	6	3	16	8	9	3	83	8
Cleveland	106	15	108	15	121	14	116	12	115	13	566	13
Cumbria	54	16	61	15	54	19	42	13	49	10	260	14
Derbyshire	86	10	82	9	86	8	56	6	70	9	380	9
Devon and Cornwall	137	8	144	9	156	9	177	8	166	7	780	8
Dorset	97	16	82	13	69	11	70	12	44	7	362	12
Durham	44	11	36	11	48	10	40	9	31	7	199	9
Dyfed-Powys	42	6	52	7	57	9	71	10	47	8	269	8
Essex	114	8	108	7	106	7	109	7	127	9	564	7
Gloucestershire	65	11	66	14	55	10	57	14	51	11	294	12
Greater Manchester	549	18	406	22	507	25	430	16	496	16	2,388	19
Gwent	64	10	41	5	51	9	40	6	49	6	245	7
Hampshire	270	12	196	12	194	12	187	11	156	9	1,003	11
Hertfordshire	69	8	68	9	63	8	85	8	94	7	379	8
Humberside	106	12	119	12	114	13	104	11	116	13	559	12
Kent	158	13	131	11	119	11	116	9	128	8	652	10
Lancashire	242	12	189	13	174	12	158	11	189	12	952	12
Leicestershire	87	11	80	10	60	8	99	11	75	6	401	9
Lincolnshire	60	9	51	7	50	7	69	9	55	8	285	8
Merseyside	437	23	355	21	322	17	244	13	314	14	1,672	18
Metropolitan	1578	13	1453	10	1327	11	1137	9	1002	9	6,497	10
Norfolk	75	12	76	12	85	11	71	14	88	10	395	12
North Wales	71	10	57	9	56	11	46	7	46	7	276	9
North Yorkshire	75	9	82	8	84	9	63	8	71	7	375	8
Northamptonshire	95	14	69	11	80	16	46	11	51	8	341	12
Northumbria	145	13	152	11	154	11	96	13	147	10	694	11
Nottinghamshire	151	16	134	17	97	12	89	9	144	9	615	12
South Wales	134	13	147	13	106	10	89	8	111	9	587	11
South Yorkshire	195	17	149	15	127	16	108	12	103	10	682	14
Staffordshire	155	24	156	24	119	19	112	17	119	22	661	21
Suffolk	34	4	47	8	45	9	44	13	62	11	232	8
Surrey	103	10	78	7	91	8	102	7	107	7	481	8
Sussex	167	16	150	13	120	12	108	10	101	8	646	12
Thames Valley	282	13	285	13	262	14	250	15	292	17	1,371	14
Warwickshire	86	14	75	12	53	11	57	17	53	13	324	13
West Mercia	166	11	146	8	83	9	93	10	93	12	581	10
West Midlands	492	16	484	13	456	16	387	14	411	12	2,230	14
West Yorkshire	303	18	346	19	284	17	254	17	251	15	1,438	17
Wiltshire	39	9	76	11	75	12	60	10	66	9	316	10
Total use of force	7,724	13	7,155	12	6,660	12	5,991	11	6,261	10	33,791	12

Finalised complaint allegations

An allegation can be dealt with and finalised in a number of ways. It may be investigated, withdrawn, subject to a disapplication, dispensation or discontinuance, or dealt with through local resolution³². Table 3.1.3 shows how allegations of use of force were finalised between 2010/11 and 2013/14³³. Over the four-year period there has been:

- An increase in the proportion of use of force allegations being finalised by an investigation (52% to 61%). On average

over a half (57%) of these allegations were completed by this means, slightly higher than the average for all complaint allegations (54%).

- A decrease in the proportion of these allegations being dealt with via local resolution. On average, use of force allegations are less likely to be dealt with by local resolution compared to the average of all complaint allegations (20% compared to 29%).

Table 3.1.3 Method by which use of force allegations were finalised, 2010/11 to 2013/14

Method completed	2010/11		2011/12		2012/13		2013/14		Use of force average %	Average for all allegations
	N	%	N	%	N	%	N	%		
Investigated	3,757	52	3,625	57	3,444	61	3,221	61	57	54
Local resolution	1,667	23	1,283	20	977	17	1,023	19	20	29
Withdrawn	759	10	630	10	461	8	505	10	10	9
Dispensation	911	13	677	11	585	10	97	2	9	6
Discontinuance	180	2	134	2	110	2	106	2	2	1
Disapplication^	-	-	-	-	-	-	329	6	1	1
Unknown	2	0	0	0	84	1	3	0	0	0
Total	7,276	100	6,349	100	5,661	100	5,284	100	100	100

Average of the four-year period 2010/11 to 2013/14.

^ Disapplication was introduced in November 2012 and first reported on in 2013/14.

Allegations that have been investigated are either upheld or not upheld³⁴. Though a greater proportion of allegations involving use of force is investigated, a lower proportion of allegations about use of force is upheld than the average for all complaint allegations (5% compared to 13%).

Table 3.1.4 Proportion of upheld investigations, 2010/11 to 2013/14

	2010/11	2011/12	2012/13	2013/14	Average upheld
Use of force allegations	5%	5%	5%	6%	5%
All allegations	11%	12%	12%	14%	13%

³² Recording of police complaints under the Police Reform Act 2002 sets out detailed information about how complaint allegations can be handled.

³³ Due to the way historical data is held, it was not possible to look at data for 2009/10.

³⁴ In 2010 the terminology used to describe the outcome of an investigated complaint allegation changed from 'substantiated' to 'upheld' and 'unsubstantiated' to 'not upheld'. IPCC Statutory Guidance (2010) paras. 423, 424, and 431 to 439 and Statutory Guidance (2012) paras. 11.18 to 11.22 provides more information.

Personal characteristics of the complainant

This section considers the characteristics of people who made allegations about police use of force. We compared these to the picture for all complainants. To do this, we looked at information involving allegations recorded between 2010/11 and 2012/13. Since the demographic picture remains similar across the years, an average of the three years is provided here.

In a significant proportion of complaint cases, forces do not record the ethnicity of the complainant. This happened in nearly a third of all complaints, and in around a quarter of complaints where people alleged that force had been misused.

Where the person's ethnicity was known, there was little difference between the recorded ethnicity of complainants in general, and those specifically alleging misuse of force. Eight out of ten (81%) of complainants overall were recorded as White and there was a similar proportion of those specifically complaining about the use of force. Around two out of ten (18%) of complaints were recorded as having come from someone from a BME group, and there was a similar proportion (19%) among those alleging misuse of force. Men account for almost two in three (64%) of all complainants. This increases to three in four (73%) for complaints about police use of force.

Similarly, the age of the complainant was not recorded in a large number of complaint cases³⁵. Where age-related information was known, we found differences between the ages of complainants overall and those who made allegations about police use of force. Figure 3.1.3 shows that while complainants aged 18 to 29 years accounted for 22% (one in five) of those complainants whose age was recorded, this increased to 33% (one in three) of complainants whose age was recorded and who made allegations about use of force.

These gaps in recording are of concern in relation to the police service's duties under the Equality Act 2010. Police forces need to assure themselves that their policies and practices are not having a differential impact on people with protected characteristics. These include ethnicity and age³⁶. Accurate information on the number and proportion of people from those groups who complain about the service provided is therefore very important.

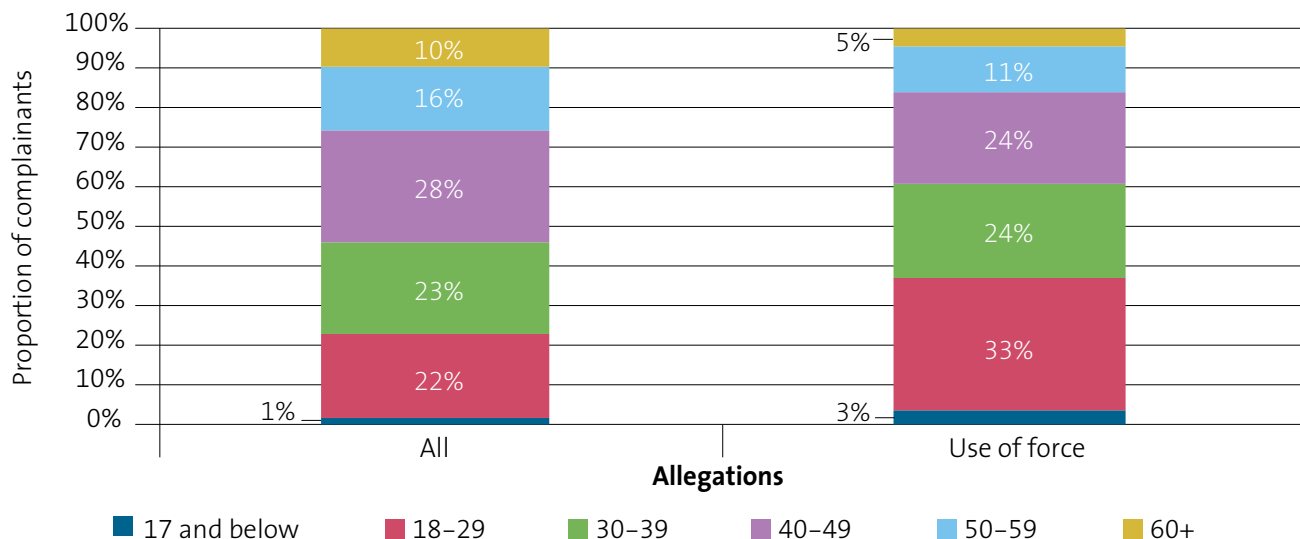
A complainant is defined as a member of the public who:

- claims to be the person who experienced the alleged incident/conduct
- claims to have been adversely affected by the conduct the complaint refers to
- claims to have witnessed the conduct the complaint refers to
- is acting on behalf of someone in one of the above categories

³⁵ Across all complaints made, 26% of complainants' age was unknown. For complainants who made allegations of use of force, 14% of age was unknown.

³⁶ The protected characteristics are: age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, sex and sexual orientation.

Figure 3.1.3 Complaint allegations recorded by type and age group



Figures calculated based on information that was known.

Age group is calculated from an average across 2010/11 to 2012/13 and based on complainants on allegations recorded.

Recommendation 11

We recommend that all police forces carry out work to ensure that information about complainants’ protected characteristics is recorded.

Forces have a duty under equality legislation to ensure that their services do not impact differently on people with protected characteristics, and analysis of complaints statistics can provide valuable information on issues that may need to be addressed.

Demographics of the people complained about

We looked at demographic information about the person who the complaint was about. The majority of complaints about those serving with the police were about men (85%). This is slightly higher than the proportion for complaints overall (76%). We excluded those complaints where the ethnicity of the person complained about was unknown³⁷. In those cases where ethnicity was known, the vast majority of complaints

regarding use of force were made against White police personnel (95%). This is the same as the proportion complained about overall, and reflects the fact that the majority of serving officers are White³⁸. The majority of complaints are made against police officers rather than members of police staff. This is not unexpected as, in general, they have a more public facing and enforcement role.

Definition of a subject is a person serving with the police as:

- a member of a police force
- a member of police staff
- an employee of the Common Council for London who is under the direction and control of a chief officer
- a special constable who is under the direction and control of a chief officer

³⁷ For all complaints, the ethnicity of the person complained about was not known for 6%. In relation to use of force allegations, the ethnicity was not known for 12% of people complained about.

³⁸ [Police workforce, England and Wales, 31 March 2014](#) shows that 94% of police workforce are White.

3.2 Referrals

Aim: To quantify the number and type of use of force incidents referred to the IPCC over a three-month period to identify high-level characteristics, such as type of force alleged and key demographics.

Key findings

- One in five referrals (21%, 202) received over a three-month time period involved police use of force.
- The majority of use of force referrals were deemed suitable for a local police investigation (93%).
- 86% of the people who were subject to police force in this sample were men. One in four (24%) were from a BME background, the majority of whom were Black (13%, 25 people).
- Most of the people subject to police force in this sample were aged between 18 and 29 (37%). Two thirds were aged under 40.
- Every second person in the sample (57%) was said to be under the influence of alcohol and/or drugs and mental health concerns were identified in one in three people (37%).
- Police dogs were only used in situations that involved men, all of whom were later arrested. These men tended to be younger than others in the sample.
- Compared to the overall referral sample, a higher proportion of people with mental illness, alcohol, and/or drugs issues were involved in incidents where Taser, restraint equipment or incapacitant spray was used.

Sample and methodology

We examined [referrals](#) that we received from police forces between 1 April 2014 and 30 June 2014. The sample included mandatory and voluntary referrals that involved either a complaint about use of force or matters that involved a death or serious injury³⁹. The information in this section is limited to what was provided to us in the referrals we received from the police forces. The findings are

limited to the sample examined. We looked at information about:

- the person force was used against
- where the incident happened
- the types of force used
- the stated reason why force was used
- the injuries received

³⁹ Section 8 of the [Statutory Guidance 2015](#) provides further information on the referral criteria.

3. Complaints, referrals and appeals

At the referral stage there is no assessment of the appropriateness of the force. This would be established by a subsequent investigation.

Over the period examined, we received 965 referrals. Of these, **202 referrals** (21%) were related to police use of force. Therefore, during the three-month period, one in five of the referrals we received was about police use of force. The great majority of these referrals (93%, 187) were returned to the relevant police force professional standards department for them to conduct a local investigation. Nine referrals were returned to the police force for them to decide how to deal with the matter, four were independently investigated, and two were subject to a supervised investigation⁴⁰.

Table C1 in the Appendix shows the referrals we received from each police force and the proportion that related to use of force. The figures should be treated with caution, as the numbers are small, and may also reflect individual force practice in relation to referrals. However, in some forces the proportion of referrals involving use of force was higher than the average; most notably North Wales (33%), Avon and Somerset (31%),

Thames Valley (31%), Greater Manchester Police (27%), and Kent (26%).

Characteristics of people who had force used against them

Each referral we receive may involve more than one person who had force used against them. We identified a total of **222 people** in the sample who were subject to use of force. The majority were men (86%, 190 people). Ethnicity was unknown for 35 (16%) people. Where information about ethnicity was known, three in four were White (76%, 142 people), 25 were Black (13%), 13 were Asian (7%), and seven people were from a Mixed or Other ethnic background (4%). Overall, one in four (24%, 45 people) whose ethnicity was recorded were from a BME background. Age was unknown for 13 (6%) people. Where information about age was known, more than a third (37%, 77 people) of those affected were aged between 18 and 29. The next largest age group was 30 to 39 (24%, 50 people). Fourteen people (7%) were aged 17 or younger. Figure 3.2.1 sets out age group by ethnicity; BME people who were subject to police force were generally younger than those who were White.

Referrals

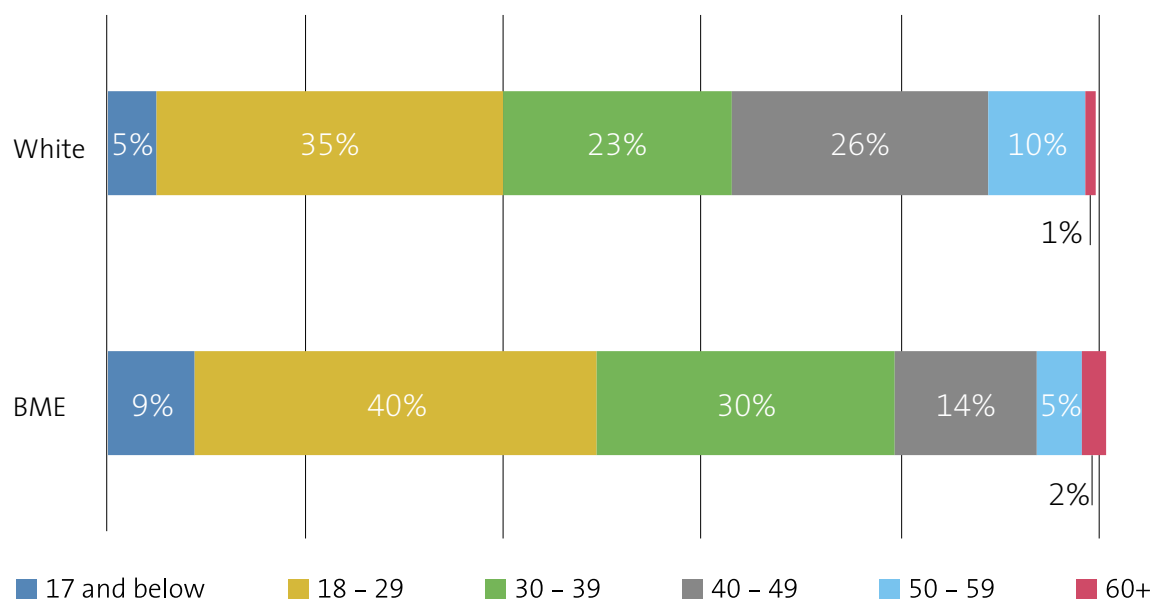
Referral to the IPCC is an important part of ensuring public confidence in the independence, accountability, and integrity of the police complaints system. Referrals include complaints and conduct matters relating to:

- a death or serious injury
- serious assault, sexual offence or corruption
- a criminal offence or misconduct
- discriminatory behaviour

Forces are also encouraged to refer matters considered to have significant impact on public confidence, or where there is a need for independent involvement.

⁴⁰ Section 8 and Section 9 of the [Statutory Guidance 2015](#) sets out information about investigations.

Figure 3.2.1 Age group by ethnic group, referrals data



Almost one in four people (24%, 52 people) were said to be under the influence of drugs at the time that police used force against them, and 44% (95 people) were reported to be intoxicated through alcohol. In total, more than half of the people (57%) were said to be either intoxicated through drugs and/or alcohol. Mental health was said to be relevant for 81 people (37%); for 57 of these (27%) drugs and/or alcohol was also said to be relevant.

Circumstances in which force was used

Each referral may involve more than one person; each person may be involved in more than one incident in which force was used against them. There were 245 incidents in our referrals sample.

In three-quarters of the incidents (74%) the person involved had been arrested for an alleged criminal offence either just before or while force was used. A person could be arrested for multiple reasons:

- 58 people were arrested for reasons related to violence

- 37 people were arrested for burglary/theft
- 34 arrests related to public order offences
- other common reasons included driving offences (26), being drunk and incapable (18), and criminal damage (17)

A further six people were detained by the police under Section 136 of the Mental Health Act (MHA)⁴¹.

Where a time was identified, the majority of incidents (67%, 159) took place between 5pm and 4am. The majority (57%, 138 incidents) started with police officers being called or requested to deal with, for example, a situation of anti-social behaviour, a crime in progress, or a concern for someone’s welfare.

More than one in five incidents (22%, 54) started after a spontaneous event, such as a driving or traffic incident, a stop and search, or a police officer coming into contact with a suspect, or with someone who was said to be acting suspiciously. Fifty-one incidents (21%) began after pre-planned police action, such as executing a warrant for arrest or search of premises, or attendance at a football match.

⁴¹ When a person is in a public place and believed to be in need of ‘immediate care and control’, they can be detained by police officers under Section 136 of the Mental Health Act 1983 and taken to a place of safety. A place of safety is defined as ‘hospital, police station, mental nursing home or residential home or any other suitable place’.

3. Complaints, referrals and appeals

Half of the incidents (50%, 122) took place in a public setting. Most of these (75) happened on the street, road, or near someone's vehicle. Other public settings included a train or bus station (nine), a park (eight), and a car park (seven). Seven people experienced force in a hospital or medical setting. Six of

the incidents happened outside licensed premises. One in three incidents (36%, 88) took place in a private dwelling or associated outside space. Twenty three incidents (9%), occurred in the police custody environment and in a further 12 incidents (5%) in a police vehicle.

Hospital or medical setting

In the seven referrals that related to police using force in a hospital setting, the people involved and the circumstances are summarised below:

- The separate incidents involved five men and two women; six were White and one was Black.
- Five of those involved were aged over 40. Two were in their 20s.
- Six people had mental health concerns, with alcohol and/or drugs being a factor for four of these. The factors relating to the remaining person were alcohol and drugs.
- Police were called or requested to attend all these incidents. Reasons for them being called included concern for wellbeing when someone had gone missing, concerns about self-harm, and a request for police to assist medical staff to control someone.
- The main reasons reported for force being used were to:
 - control violent behaviour
 - prevent someone escaping
 - make someone comply with police instructions
 - prevent self-harm

Types of force allegedly used

Table 3.2.1 shows the number of people on whom the different types of force were used, and the total number of alleged separate uses of each type of force. The majority of people who experienced police force were subject to either some form of physical hold or strike or they were taken to the ground. Firearms were involved four times. In one instance the

firearm was only drawn, in two instances the firearm was discharged and made no impact, and in one case the firearm was discharged and hit the person. Physical holds, strikes and Taser use⁴² were generally used on the person involved more than once during an incident. The other types of force were normally used once on the person involved.

Table 3.2.1 **Types of force allegedly used, referrals data**

Force type	Number of people	Total uses
Physical hold	117	159
Physical strike	101	166
Taken to ground	61	62
Taser	52	68
CS spray/PAVA	29	29
Dogs	21	21
Restraint equipment	20	20
Baton	9	10
Firearm	4	4
Other [^]	19	20

[^] Examples included allegations of: use of vehicle, biting, pulling out earring, stun/flash grenade, head dunked under water and general grabbing or pinching.

⁴² Throughout the analysis, Taser use includes a Taser being drawn, red-dotted, used in stun mode and the discharge of the barbs.

Looking at the people and circumstances in which some of these types of force have been used reveals some interesting differences and observations:

- **Physical holds** were the most common type of force. These were used against 117 people in the sample. Of these, 36 people were held in a **prone hold** position, which is when the person is face down to the ground. There was a higher representation of women (25%, nine women) for this type of force than the overall referrals sample (14%). Alcohol and/or drugs featured more in relation to physical holds in general (64%), but not as much in relation to prone holds (49%) compared to the general sample. When physical holds were used, this was often in conjunction with other types of force, predominantly physical strikes and being taken to the ground. However, there were also a number of uses of Taser (20), CS spray/PAVA (16), and restraint equipment (14) (see below for more on restraint equipment).
- **Physical strikes** were the second most common type of force with 101 people reportedly experiencing this. As with physical holds, more women were subject to this type of force (22%, 22) in comparison with other types of force. Therefore, women tended to experience physical types of force rather than equipment use. Half (53%, 24) of people from a BME background in the sample experienced a physical strike compared to two in five (42%, 60) White people.
- **Taser** was used on 52 people a total of 68 times. On 38 occasions the barbs from the Taser were fired, it was used in the stun mode⁴³ 14 times, the person was red-dotted ten times, and on six occasions, the Taser was only drawn. In three out of four uses of a Taser, the incident also involved another type of force. On most occasions when a Taser was used (33) this happened at a person's home or on surrounding grounds. It was often part of a planned operation

to execute a search warrant, or as a result of the police being called in relation to a domestic dispute, violent behaviour or, on a few occasions, to assist bailiffs or ambulance staff. The police were called a number of times (eight) where there was concern that someone might self-harm or concern about someone's mental state. One use of Taser took place in police custody. The reason given for this was the violent behaviour of the person, and their perceived size and strength.

The age group 18 to 29 years was slightly over-represented (42%, 20) among Taser use compared to the overall referrals sample (37%). Likewise, mental health was identified as a factor in more than half (53%, 27) of the people who had Taser used against them. Alcohol and/or drugs were a factor for two in three people (64%, 32). This, and mental health, were both higher than the overall proportions in the referrals sample (57% and 37% respectively). The ethnicity of those Tasered, where recorded, was in line with the overall proportions of the sample (76% White and 24% BME).

- **CS spray/PAVA** was used against 29 people and on each occasion only once. On four occasions, CS spray/PAVA was only drawn and not deployed. In the majority of incidents, it was used in conjunction with another type of force – mostly a combination of physical holds, physical strikes, and taking the person to the ground, mainly to allow an arrest. In a number of incidents, the reason the officer gave for using CS spray/PAVA was to protect either them or others present at the scene. On most occasions when CS spray/PAVA was used (18), more than one officer was involved. Alcohol was cited as a factor in more incidents than the sample average (55% compared to 44%). The ethnicity of those involved, where recorded, was in line with the overall proportions of the sample (76% White and 24% BME).

⁴³ In drive stun, an officer manually presses the device onto a target's skin to deliver the shock.

3. Complaints, referrals and appeals

- Twenty-one people were involved in an incident where a police **dog** was used and in all but one of these the dog bit the person. In the remaining case, the police dog was present, but was not instructed by its handler to detain the person. All those involved in these incidents were men. They were generally younger than the overall referrals sample (14 were aged under 30 years, including five aged under 18 years). Interestingly, alcohol, drugs, and/or mental health featured in only a small proportion of cases – much lower than the overall referral sample. Fourteen people received a serious injury as a result of a dog bite. Most of these injuries affected people’s legs. Other minor injuries included scratches and bruises.

All the men involved in these incidents were arrested. In most cases, this was for alleged burglary/theft offences (17 people). Other offences included criminal damage, speeding or drink driving, possession of a weapon or drugs, or offences involving violence. Not surprisingly, most incidents where police dogs were used involved an alleged crime in progress or the sighting of a suspect. The main reason given for a dog being used was to arrest the person, or prevent them from escaping. When dogs were used, this was usually the only type of force used in the incident (62%, 13 uses). On two occasions, the dog was used along with a Taser in red-dot mode. Other types of force used with dogs included holds or strikes. In the majority of incidents (16) involving dogs, only one police officer was present.

- Our referral sample included 20 people who had **restraint equipment** used on them. In all but one of these incidents, the restraint used was leg straps⁴⁴. In the remaining case, an emergency response belt⁴⁵ was used. Thirteen of the people who had restraint equipment used on them were White and five were from a BME background⁴⁶. Twelve people in the sample were said to be under the influence of alcohol and/or drugs, or it was a feature in their lifestyle, at the time of the restraint. Thirteen people also had a mental health concern (65% – higher than the overall referral sample). Of these, drugs and/or alcohol were also identified as a factor for ten people. Looking at the location of the incident where the restraint equipment was used:

- nine took place in a private home or garden
- five happened in public spaces, such as a train station or the street
- four took place in a police custody cell or wider custody environment
- two were in a police vehicle

⁴⁴ This device is designed and used to restrict the movements of limbs. Its application should prevent a person from kicking and punching and allow them to be transported safely.

⁴⁵ Soft style restraining belt made from strengthened fabric and straps secured with Velcro. Its intended purpose is to provide a protective and restraining device to handle, control, restrain, and move people who are violent or injured. It is intended to be used on the legs and arms.

⁴⁶ In two of the incidents, the ethnicity of the person involved was unknown.

3.3 Appeals

Aim: To describe the circumstances of use of force investigation appeals in order to: broaden our understanding of the types and circumstances of force allegedly being used and identify any issues with how investigations into use of force are handled by the police.

Key findings

- Over the three-month period examined, one in four (25%) of all appeals the IPCC completed following a complaint investigation carried out by a police force was about police use of force.
- We upheld 42% of these appeals. This compares to 37% of appeals that did not relate to police use of force.
- Over half, (57%, 26) of people from a BME background had their appeal about use of force upheld, compared to 40% (29) of White people.
- The most common reason for upholding a use of force appeal was that the investigation findings or the information provided to the complainant were not adequate.
- Because of an inadequate police investigation, we were not able to consider the conduct of officers involved in 27% of upheld use of force appeals. For the same reason, we were not able to consider whether disciplinary action needed to be taken in 29% of upheld appeals. This compares to 15% and 4% respectively for non-use of force appeals.
- We made recommendations and/or directions to forces in relation to 79% of the use of force appeals we upheld. This compares to 54% of appeals that did not relate to use of force.
- There was some cause for concern about the force used in 29 (21%) of the appeals we looked at. In many of these cases, the police force that dealt with the original complaint had not been concerned about the force used by their police officer/s.
- An appeal was more likely to be upheld in relation to the force's decision on conduct or performance issues in use of force appeals (27%) than in non-use of force appeals (10%).

Sample and methodology

In certain circumstances, a member of the public can appeal to the IPCC⁴⁷ if they are unhappy with how their complaint has been handled by a police force⁴⁸. For the purposes of this study, we looked at completed appeals in relation to local police investigations. A total of 553 investigation appeals were closed by

the IPCC over the three-month period analysed (1 April 2014 to 30 June 2014). In the original complaints from which these appeals stemmed, **137 (25%)** related to police use of force. [Table D1](#) (Appendix D) shows the proportion of finalised appeals relating to use of force for this three-month period by police force.

⁴⁷ The IPCC considers appeals from people who are dissatisfied with the way a police force has dealt with their complaint. Since November 2012, the responsibility for determining appeals is shared with local police forces.

⁴⁸ Visit <http://www.ipcc.gov.uk/appeals> and section 13 of the [Statutory Guidance 2015](#).

Appeal outcome

When we receive an investigation appeal, we first decide whether it is valid. Valid investigation appeals are then assessed, which involves considering all the information and deciding whether the appeal should be upheld. There are [five grounds](#) on which an investigation appeal can be upheld⁴⁹ – only one ground needs to be upheld for the whole appeal to be classed overall as upheld. Of the 137 use of force investigation appeals we looked at, we **upheld 42%** (58). This compares to 37% (154) of upheld appeals following complaints that did not relate to police use of force.

Where information about ethnicity was known⁵⁰, over half (57%, 26) of BME people involved in a use of force appeal had their appeal upheld. This compares to two in five White people (40%, 29). Overall, people from a BME group accounted for 39% (46) of people involved in a use of force appeal (one in four were Black (25%, 29 people), nine were of a Mixed ethnic background, and eight were Asian).

For appeals that were upheld, figure 3.3.1 compares the assessment made by the IPCC against each of the five appeal grounds in use of force and non-use of force investigation appeals.

- The most common ground for upholding all types of appeals was the *findings of the investigation*. However, we upheld a greater proportion of use of force appeals (91%) than non-use of force appeals (78%) on this ground.

- When the appeal was upheld on the ground of level of information provided, this was due to a lack of:
 - engagement with the complainant
 - providing the complaint with updates
 - detail about the decisions made about their complaint

Although the difference was not as large, a greater proportion of use of force appeals (52%) than non-use of force appeals (45%) were upheld on this ground.

Some of the grounds of appeal were more likely not to be considered by the IPCC, largely because the police force needed to conduct a re-investigation into the complaint before a comprehensive assessment could be made on these grounds. This was most often connected to the decision relating to any conduct or performance issues with the officers involved. When we were in a position to make an assessment of this decision, the appeal was much more likely to be upheld on this ground in use of force appeals (27%) than in non-use of force appeals (10%). This could be because the force's proposed action in relation to conduct issues for the officer was inadequate or there had not been sufficient consideration of potential misconduct. Furthermore, the proposed action against the officers following the investigation could not be considered for 29% of use of force appeals.

Investigation appeals and appeal grounds

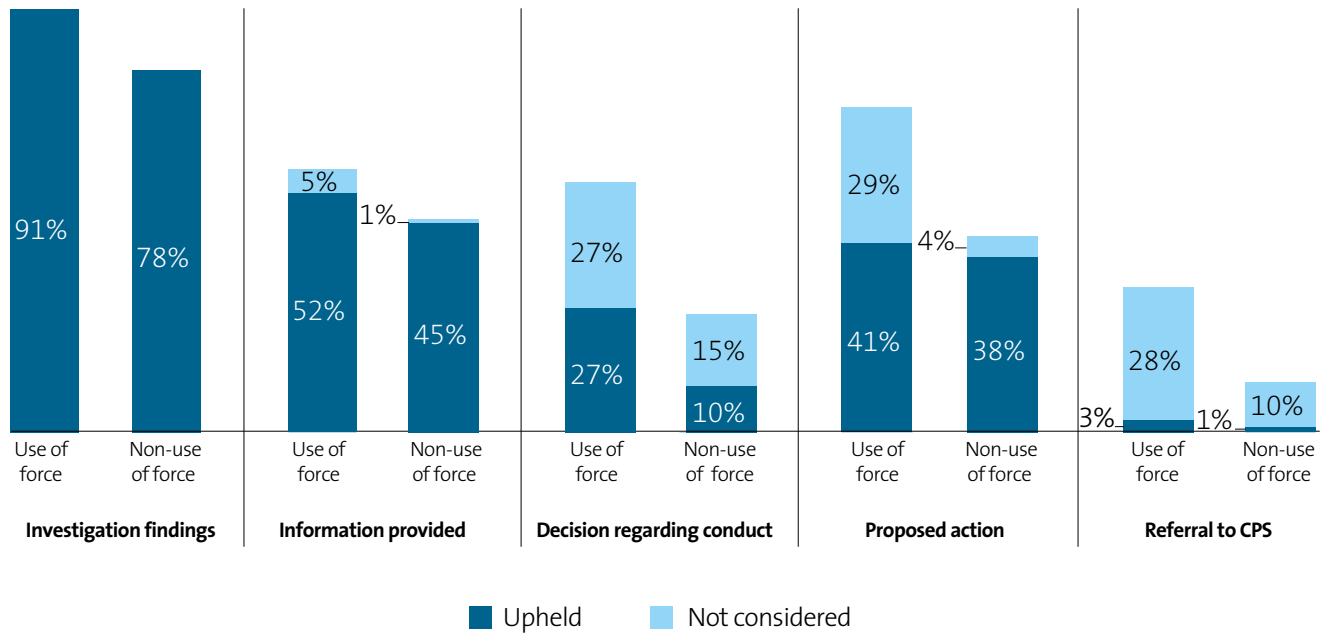
The PRA 2002 provides people who have made a complaint the right to appeal a local or supervised investigation into their complaint. Investigation appeals are considered on five grounds:

- the findings of the investigation
- adequacy of information provided
- result of the conduct or performance of those investigated
- the action taken or not taken following the investigation
- decision to not refer the investigation to the CPS

⁴⁹ Section 13 of the [Statutory Guidance 2015](#), from 13.83.

⁵⁰ The ethnicity of the person was unknown for 31 people.

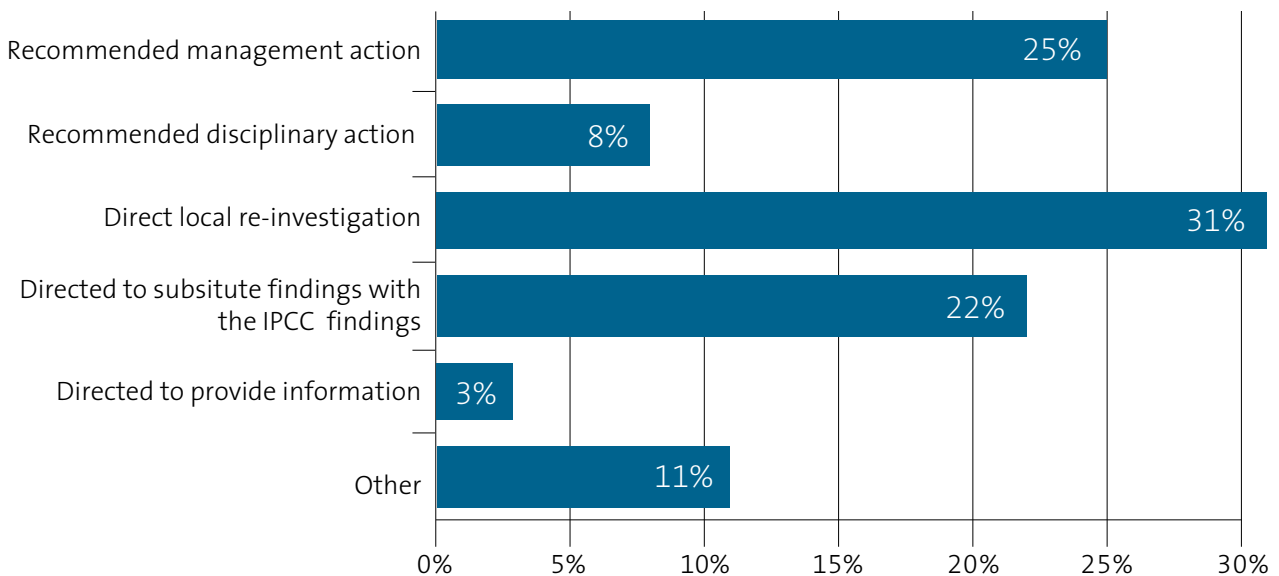
Figure 3.3.1 Assessment grounds for upheld appeals by type



Once the appeal process is complete and a decision to uphold the appeal has been made, the IPCC can use its powers to make a recommendation or direction⁵¹ to the police force. In 46 (79%) of the 58 upheld use of force appeals, the IPCC made a recommendation and/or direction. This compares to 54% (83 of

154) of upheld non-use of force appeals. We made a total of 64 recommendations and/or directions in relation to the 46 upheld use of force investigation appeals. Figure 3.3.2 provides detail on the type of recommendations and directions made by the IPCC on the use of force appeals.

Figure 3.3.2 Type of recommendation and direction made for upheld use of force appeals



On each upheld appeal, the IPCC could make a recommendation and/or a direction; therefore the percentages represent the type of recommendation or direction made.

⁵¹ As well as having powers to make recommendations and give advice in relation to any action it considers suitable to resolve a complaint, the IPCC also has the power to make directions to ensure that an adequate investigation is conducted and appropriate disciplinary proceedings are brought.

3. Complaints, referrals and appeals

Our recommendations included asking the force to consider management action⁵² for the officers involved (16 times, 25%) or to take disciplinary action against them (five occasions, 8% of recommendations). The most common direction made to the force was to reinvestigate the original complaint (20 occasions, 31%). On 14 occasions (22%), we directed a police force to substitute the findings of its investigation with the IPCC's findings. We directed the police force to provide information to the complainant twice (3%). Seven recommendations or directions were categorised as 'other'. This included:

- recommendations as part of the direction for the police force to reinvestigate. For example, to obtain statements from particular witnesses as part of the new investigation
- a recommendation for learning for the officers involved on sharing clear information between each other
- a direction to the police force to refer the IPCC report to the Crown Prosecution Service (CPS) for their consideration
- a direction to take disciplinary action against an officer involved
- a direction to uphold the complaints

Concern about the force used

There was concern about the force used, either from the IPCC or in the initial police investigation, in one in five (29, 21%) of the incidents associated with the appeals. Of the 29 appeals:

- for 20 appeals, only the IPCC found concern
- for seven both the IPCC and the force reported concern

- for two appeals the police force found some concern in their original investigation, but the IPCC was unable to make an assessment until the original complaint was re-investigated.

Of these 29 appeals, there were 57 separate uses of force that raised some concern.

The majority were assessed as either being excessive or unsuitable in the circumstances. Examples of uses of force where *concern was only raised by the IPCC* and not in the original assessment by the force included:

- The use of a Taser in one incident was considered to have been over zealous and inappropriate given the confined space within which the incident took place.
- The length of time that a dog held on to a person, despite commands from the officer for it to let go, was considered too long.
- A physical strike was considered inappropriate and unnecessary as the threat posed by the person had been minimised before the strike was delivered.
- There were several incidents where the arrest of the person was not considered necessary or lawful. Therefore, any force used was not appropriate or necessary.

⁵² Management action is not a disciplinary outcome, but is considered to be part of the normal managerial responsibility of managers in the police service. It is intended to deal with misconduct in a timely, proportionate and effective way that will command the confidence of staff, police officers, the police service and the public; identify any underlying causes or welfare considerations; improve conduct, and prevent a similar situation arising in the future.

Recommendation 12

We recommend that all professional standards departments make sure that they have systems in place to monitor the number of allegations recorded about the use of force.

These systems should enable forces to identify any significant changes in the numbers of allegations recorded so that they can take action to identify the reasons for the change and take any corrective action required.

Recommendation 13

We recommend that all police forces regularly dip-sample investigations into complaints and conduct matters about their officers' use of force.

Dip-sampling could be a particularly useful technique where high proportions of upheld appeals have been identified. Forces need to make sure that any organisational learning is cascaded to all relevant officers, and that it feeds into the development of guidance and training. Where relevant, this learning should also be shared with other forces working regionally or nationally to help improve practice.

4. Analysis of IPCC investigations

Aims: To describe the types, circumstance and context in which force was used by the police in cases investigated by the IPCC.

To examine any learning, recommendations and misconduct or criminal outcomes and quantify how many use of force investigations found some concern with the force used.

Key findings

- The majority of people in this sample were men (88%). Over one in four (60, 29%) were from a BME background.
- The average age was 32, and 27 people were aged 17 or younger.
- Alcohol and/or drugs were relevant for every second person in the sample (52%, 118).
- One in five (20%, 46) people had mental health concerns.
- One in five (21%, 50) people were carrying a weapon before or during the incident.
- Forty people (17%) died during or following the use of force. Not all deaths were directly related to the force used by the police.
- People who experienced multiple incidents of force were twice more likely to have a mental health concern and be fatally injured than those who experienced one incident. They were also more likely to be under the influence of alcohol and/or drugs.
- Half of incidents took place between 9pm and 3am.
- Ten people experienced police use of force at a hospital. Five of these people died during or following the incident.
- Almost three in four people (71%, 170) were arrested – mostly for alleged violence-related offences, threatening behaviour/harassment, or burglary/theft.
- The most common reasons given by the police for using force were to arrest or gain compliance from the person, protect themselves or others, or because the person was armed or acting in a threatening manner.
- In the majority of investigations (69%, 132), the IPCC found no concern with the force used. There was some concern about the force used in 59 investigations (31%).
- For one in ten (10%) people, communication with them before force was used was considered inadequate. This increases to one in four people for incidents taking place in the custody environment.

We looked at cases that were independently investigated or managed by the IPCC relating to police use of force. The sample included investigations that were completed between 1 April 2009 and 31 March 2014. Investigations

were included in the sample if they featured at least one of the types of force set out in [Box A](#). In the following analysis, the term 'officers' will be used for ease of reference, but this may include police staff.

4. Analysis of IPCC investigations

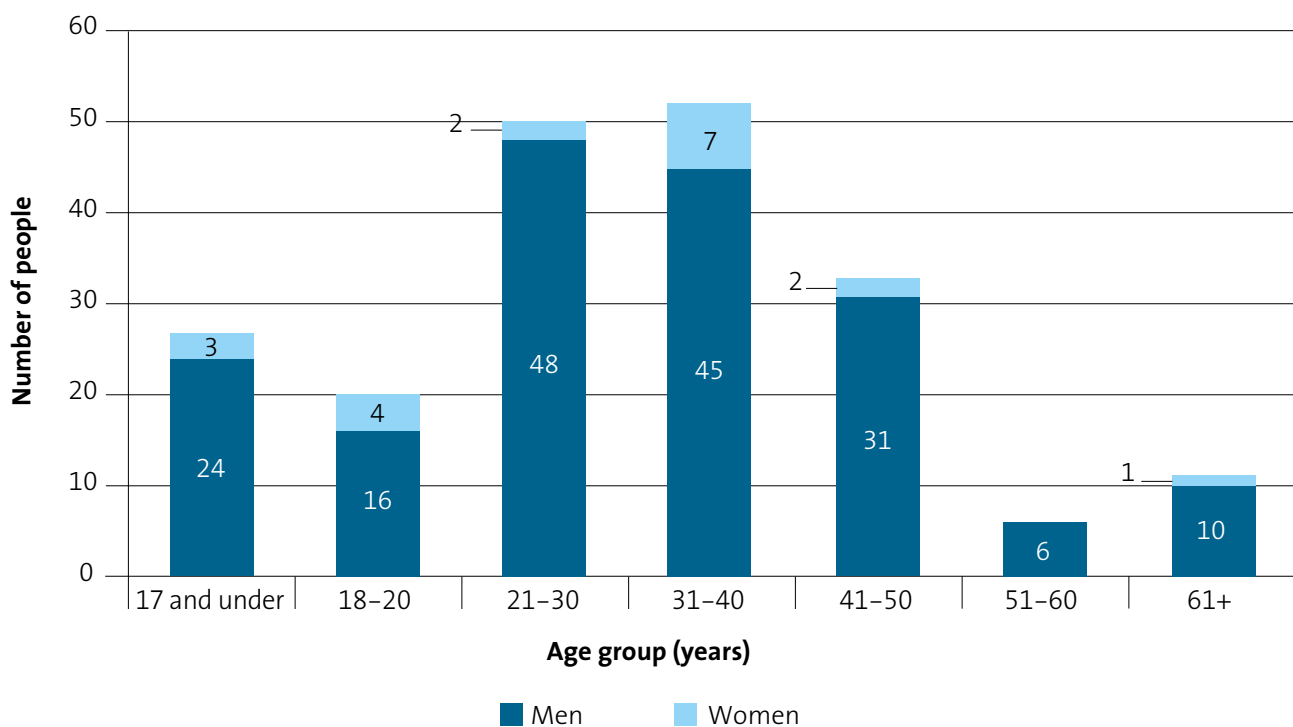
A total of **191 investigations** were identified as relating to police use of force; 120 were independently investigated, and 71 were managed⁵³. In addition, four investigations that had been completed were overturned following a judicial review. These have not been included in the sample as the investigation would have been re-opened and is no longer complete.

The information presented here is an illustration of the types of case examined by the IPCC. It is important to note that cases that are independently investigated or managed are more likely to be serious and have the greatest level of public concern. Therefore, this sample is more likely to have, for example, a higher prevalence of death or serious injury, and more severe levels and types of force used.

4.1 Characteristics of people who had force used against them

In this sample, a total of 239 people had force used against them by the police across 191 investigations. The majority were men (210, 88%) and 29 were women. The average age of the people involved was 32⁵⁴. Twenty-seven people (14%) were aged 17 or younger⁵⁵. Figure 4.1 provides a breakdown of the age and gender of those involved. Where ethnicity is known, almost three-quarters were White (71%, 147 people), 17% (35 people) were Black, 8% (16 people) were from an Asian background, and nine people (4%) were of Mixed ethnic origin⁵⁶. Overall, those from a BME background made up almost a third of those whose ethnicity was known (29%, 60 people)⁵⁷.

Figure 4.1 Age group and gender, investigations data



Figures calculated based on information that was known.

⁵³ Independent investigations are carried out by the IPCC's own investigators and are often used for the most serious incidents and/or those with the greatest public concern. Managed investigations are carried out by police Professional Standards Departments (PSDs), under the direction and control of the IPCC.

⁵⁴ The age was unknown for 40 people.

⁵⁵ See [chapter 5.2](#) for a detailed look at the findings for people aged 17 years and younger.

⁵⁶ The ethnicity was unknown for 32 people.

⁵⁷ See [chapter 5.3](#) for a detailed look at the findings for the BME sample.

4. Analysis of IPCC investigations

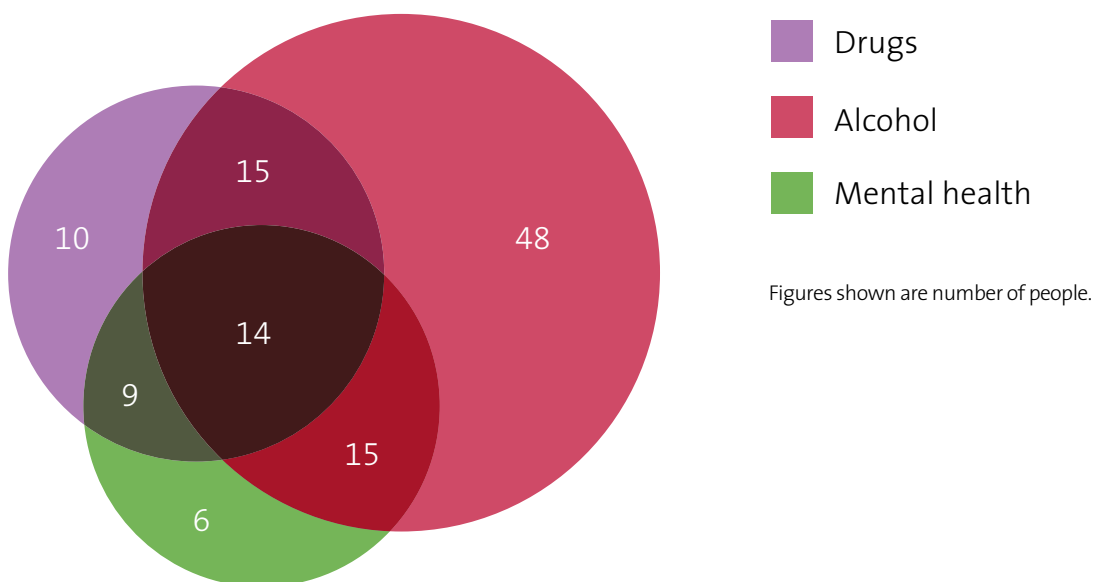
Two in five (93, 41%) people were reported to be intoxicated by **alcohol** at the time of the incident, and for one in five (54, 23%) **drugs** were a factor. Overall, every second person in the investigations sample was intoxicated with alcohol or drugs, or had a history of substance misuse (118, 52%)⁵⁸. The most common type of drugs included cocaine, cannabis, heroin, and amphetamines. These were often used in combination with each other, or with other types of drugs.

Forty-six people (20%) were identified as having a **mental health** concern⁵⁹. This included depression, schizophrenia, personality disorders, bi-polarity, known

threats of or previous attempts of self-harm or suicide, and paranoia. Figure 4.2 shows the proportion of people with one or more of the factors relating to drugs, alcohol, or mental health. People with mental health concerns were more likely than those without to have drugs and/or alcohol as a factor.

Twenty-nine (12%) people had an existing **medical** condition or **learning** disability. This included heart conditions, asthma, epilepsy, health conditions caused by alcohol or drug abuse, and autism.

Figure 4.2 **Drugs, alcohol and mental illness factors, investigations data**



Recommendation 14

We recommend that the NPCC reviews Authorised Professional Practice and relevant guidance to make sure that sufficient emphasis is placed on the needs of vulnerable people when officers are considering using any type of force.

In firearms incidents, these considerations are emphasised, but we consider that this should be general practice for all types of force. This will help to improve the experiences of vulnerable people – including children and young people, and people with a learning disability, mental health conditions or who are under the influence of drugs and alcohol. Officers need to consider how they communicate, the type of force they use, the aftercare required, or the support needed, when they deal with people with different needs.

⁵⁸ It was unknown whether alcohol or drugs were a factor for 11 people.

⁵⁹ See [chapter 5.1](#) for more information about cases involving people with mental ill health.

4. Analysis of IPCC investigations

Almost three-quarters of people (71%, 170) were **arrested** or **detained** during the use of force incident with the police. Table 4.1 shows the reasons for detention. The total number

of arrest reasons will be higher than the number of people arrested. This is because each person may have been arrested for up to two different reasons.

Table 4.1 Reason for detention, investigations data

Reason for detention	Number of people	% of people
Violence related (non sexual/murder)	41	24%
Burglary/theft	28	16%
Threatening behaviour/harassment	27	16%
Criminal damage	17	10%
Drugs – possession/supply	13	8%
Drunk and incapable/disorderly	12	7%
Breach of peace/anti-social behaviour	11	6%
Possession of weapon	10	6%
Driving offences	9	5%
Obstruction of police/resisting arrest	9	5%
Section 136 of Mental Health Act	7	4%
Other^	12	7%

^ Includes kidnapping, immigration offences, sexual offences, manslaughter, and being wanted on warrant.

Fifty people (21%) were carrying a **weapon** before or during the incident with the police. Sixteen people were carrying a bladed weapon, 15 people had a firearm (including one that was a replica), and nine people had a blunt weapon, such as a bat. Other weapons included a bottle, chair, knuckle-duster, and screwdriver, and one person was threatening to release their pit bull terrier at the officer. The police thought that a further three people were armed, but this was disputed and not proven as part of the investigation.

The **behaviour** and actions of 138 people (58%) during the incident where the police used force was reported to be verbally or

physically aggressive or violent. The police knew or had some intelligence about 94 (39%) of the people involved in these incidents before they occurred. This was most often in connection with the person having⁶⁰:

- either a history of carrying a weapon, or known to be carrying a weapon (53%, 50 people)
- a propensity for violence (29%, 27 people)
- drugs and/or alcohol issues (27%, 25 people)
- a mental health concern or previous self-harm (20%, 19 people)

⁶⁰ The police may have known more than one piece of intelligence about each person.

4.2 Characteristics of officers who used force

Investigations relating to police use of force can relate to the actions of one or more officers. A total of 584 police personnel were identified as being involved in these cases. The majority were men (86%, 505), 9% (53) were women, and the gender was not known for 26 people. Eighty-five percent of these police personnel were officers (499), 4% were staff (25), and for 10% their position was unknown. Limited information was available about the officers' ethnicity, age, and length of service (more than 90% unknown). There was also limited information about the training they had received (more than 80% missing information). This prevents meaningful analysis of these factors.

4.3 Circumstances in which the police used force

Most people (87%, 209) experienced one incident of force. Twenty-three people experienced two incidents, six people went through three, and one person had four. The 30 people who experienced multiple incidents were more likely to have certain characteristics compared to those who experienced one.

Table 4.2 Comparison between single and multiple incidents

Characteristic	Single incident		Multiple incidents	
	%	N	%	N
Under the influence alcohol and/or drugs	46%	97	70%	21
Mental health concern	17%	36	33%	10
Died during or following the incident(s)	14%	30	33%	10

The use of force incidents were spread relatively evenly from Monday to Sunday. However, half took place between 9pm and 3am, when other support services are likely to be stretched or unavailable. Most of the incidents (61%) happened in a public space, mostly in the street. Other public locations included a car park, inside and outside a licensed bar, in a hospital or medical facility (see below for further information), in a park, train or bus station. A number of incidents (22%, 61), took place at a private home, including the garden and garage. Some incidents (17%, 48) took place in or on police premises, including eight that happened in a police vehicle. Force was used on 35 people (40 incidents) in the custody cell or wider custody environment⁶¹.

The contact between the police and the public could start in a number of ways:

- For over a third of people (38%, 91) the police were called or requested to attend an incident.
- For 67 people (28%) the contact was the result of planned police activity.
- For a quarter of people (26%, 61) the incident started with the police reacting spontaneously to something they had seen.
- Thirty-five people (15%) were already in the custody environment.

There were also various reasons for each person having contact with the police:

- For 76 people (32%) this was because of their suspicious behaviour. This was most often in relation to a firearm or other weapon, or in connection with anti-social behaviour.
- For 65 people (27%) the reason related to a crime in progress or a public order event.

Incident definition

One investigation could involve multiple incidents. A separate incident is captured for each person who had force used against them. One person could also go through multiple incidents. An incident is identified when compliance is reached or the force used comes to an end due to the health of a person during the interaction. The analysis breaks down the investigations where appropriate at an incident level.

⁶¹ Chapter 5.4 provides more detail about the incidents that happened in the custody environment.

4. Analysis of IPCC investigations

- For 41 people (17%) the police came into contact with them because some concern had been raised about their welfare. This was often about their mental state or potential risk of self-harm. Other reasons included concern in relation to a domestic dispute they were involved in.
- For 72 people (30%) the contact related to policing practices. This includes 35 people who were in police custody. In other cases, police were executing a search warrant, carrying out the stop and search of a person on foot or in a vehicle, and assisting medical staff following a request.

Hospital incidents

Ten people experienced police use of force while in a hospital – for example, in accident and emergency or a specialist mental health unit. There were some common features: involving people who were under the influence of drugs and/or alcohol, had mental health concerns, were behaving in an aggressive manner, or who had been subject to restraint.

- Nine of these people were men and one was a woman. Eight people were White, one was of Asian ethnicity, and the ethnicity of one was unknown. The most common age group involved was from 31 to 40 (six people).
- Nine people were intoxicated through alcohol or under the influence of drugs.
- Seven people had mental health concerns. This included personality disorders, psychotic episode, schizophrenia, and detention under Section 136 of the Mental Health Act (MHA). Three people had other medical conditions, such as alcohol withdrawal symptoms, including seizures and epilepsy.
- Eight people were said to be acting in a threatening manner, such as being verbally abusive or physically violent during the incident at the hospital. A further person was acting in this manner during the contact with the police before arriving at the hospital.
- Six people were arrested or detained – two for violence-related offences, and four under Section 136 of the MHA, one of whom was also arrested for possession of a weapon.
- Police primarily had contact with the person either because of a concern for their welfare, or because they were assisting medical staff. While the reason for police attendance was not specifically to assist medical staff with the administering of medication, there were three instances where sedatives were administered while a person was being held by police officers.
- Nine people were physically held by the police including four in the prone (face-down) position; CS spray/PAVA was used on two people; one person had Taser used on them (barbs); and restraint equipment was used on four people (two leg restraints, one emergency response belt, and one contamination hood). Other types of force included taking the person to the ground, pushing/pulling, and use of handcuffs. Medical staff and hospital security were also involved in four incidents.
- Five people died during or following the incident of force being used. In four instances, the struggle against the restraint was noted as a contributory factor, along with the effects of drugs or alcohol. The fifth cause of death was linked to the effects of alcohol.
- Six people displayed symptoms of acute behavioural disturbance⁶². This included extreme strength or aggression, constant physical activity, and increased breathing, temperature and sweating.

⁶² These symptoms were identified during the data collection process using the list of features described in a number of [research studies from Canada](#). Also referred to as 'excited delirium'.

Recommendation 15

We recommend that all police forces review existing arrangements relating to police attendance and their role at hospitals, mental health units or other medical settings, to minimise the involvement of the police.

Working practices should be consistent with national guidance, and all parties must make sure that they have a clear understanding of the circumstances and the extent to which the police should be involved.

4.4 Types of force used by the police

Table 4.3 shows the types of force used in the investigations sample. The majority of people experienced a form of physical hold or physical strike from a police officer(s). This often coincided with them being taken to the ground. When they are used, physical holds, strikes and Taser are predominantly used multiple times.

Police officers provided a number of reasons for using force. The main reason was to arrest the person, gain their compliance or prevent them from escaping (47%). In one in five reasons (20%), officers said they used force for their protection or for the protection of other people. In one in ten reasons given (11%), related to the person’s behaviour, physical size and strength, or the fact that they were armed. Other reasons included preventing self-harm or injury to the person who had force used against them (6%).

Table 4.3 Types of force used, investigations data

Force type	Number of people	Number of uses
Physical hold	144	229
Physical strikes	130	200
Taken to ground	76	80
Baton	40	43
Handcuffs^	37	41
Taser	32	81
Firearms	31	39
CS spray/PAVA	26	29
Other	25	27
Restraint equipment	18	22
Pressure point	14	14
Dogs	9	9

^Handcuffs were only recorded in instances where there was a specific complaint about their use or where their use resulted in a serious injury.

Physical holds

A person may have been physically held in a number of different positions during the incident and interaction with the police. Seventy one people were held in a prone hold position, which is when the person is face down to the ground. The IPCC investigation had some concern about five of the prone holds. Being under the influence of drugs and/or alcohol significantly increased the likelihood of being physically restrained, whereas carrying a weapon decreased the likelihood.

Baton

Forty people experienced a baton strike. This was significantly less likely to be used against someone with mental health concerns or someone under the influence of alcohol and/or drugs. When the situation involved a crime in progress, this increased the likelihood of a baton being used.

Taser

Thirty-two people had a Taser used against them. This involved 81 separate uses of Taser, which include a Taser being drawn, discharged with barbs, or used in the stun-mode⁶³. The great majority of uses (75 out of 81) involved Tasers actually being discharged, rather than just drawn. Taser was more likely to be used multiple times than other types of force, with the exception of physical holds or strikes. It was used once against 12 people, but more than once against 20 people⁶⁴. A Taser was used in the following ways:

- firing of barbs (44 times)
- sending additional shocks through attached barbs (21 times)
- use of the stun-mode (ten times)
- ‘red-dotted’ on the person (four times)
- drawn but not used (twice)

When the Taser made contact with the body, most impacts were to the back (29 times), followed by chest and stomach (13 times), and arms and legs (nine times). Contact with the face happened once. On 19 occasions, although fired, the Taser made no contact with the person. Information about the length of time a person was subjected to the use of the Taser is available for only 32 uses. This ranged from one second to 24 seconds, with the most common length of time being five seconds.

A third of people (33%, ten) who had Taser used against them had a mental health concern, and six of them experienced multiple uses. This included the person who had Taser used against them 11 times and both people who had it used against them six times. Taser was used mainly against men. One in four (27%, eight people) uses of Taser were on someone from a BME ethnic group. Fourteen of the people (44%) were armed with a weapon. This increased the odds of a Taser being used, as did the police being called or requested to attend an incident rather than getting involved spontaneously.

Firearms

A police firearm was used in 25 cases involving 31 people. On 24 occasions the firearm was discharged and made contact with a person, on 11 occasions it was drawn, and on four occasions it was discharged without making contact. In the majority of instances (61%, 19 people), the person had a weapon. In the remaining cases, the incident was part of a planned operation relating to crime in progress or suspected gang activity, where the police had intelligence that it involved a weapon, including that the person had a history of being armed. Mental health was a factor for 12 people (39%) who had firearms used on them.

⁶³ In drive stun, an officer manually presses the device onto a target’s skin to deliver the shock.

⁶⁴ Taser was used twice against nine people, three times against four people, and a further four times on four people. Two people had it used six times and one person 11 times.

4. Analysis of IPCC investigations

From the sample examined, some strong predictors for a firearm being used were:

- a member of the public carrying or believed to be carrying a weapon
- the police having prior knowledge or intelligence about the person
- mental illness

However, being under the influence of drugs and/or alcohol decreased the likelihood of firearms being used.

Restraint equipment

Some form of restraint equipment was used on 18 people and 22 times in the sample. In the majority of uses (17) this was a form of leg restraint, such as Velcro straps or leg cuffs⁶⁵. There were three uses of an emergency response belt⁶⁶ and two uses of a contamination hood⁶⁷. Restraint equipment was used on seven people with mental health concerns. Fifteen people were under the influence of alcohol and/or drugs, which significantly increased the likelihood of restraint equipment being used. The likelihood of restraint equipment being used also increased if the police were called or requested to attend an incident (most often because there was concern for a person's welfare), or if the force was used in police custody rather than during a spontaneous incident.

CS spray/PAVA

In the sample, CS spray/PAVA was used on 26 people. Eighteen of these people were in a public place when it was used, including two in a hospital. Eight people had CS spray/PAVA used on them while in a private house or surrounding garden. There was no strong relationship between personal or situational factors and the use of CS spray/PAVA.

Dogs

Police dogs were used against nine people. In three of these instances, the dog was used to control the person without making contact with them. In the remaining six incidents, the dog bit the person. There was a low prevalence of mental illness or alcohol and drugs issues among the people involved in these incidents. Seven were men, five were White and most were aged over 30. All the incidents involving a police dog took place outside, with eight taking place in a public space and one in a person's garden. Six people received injuries as a result of the dog being used. These were mainly deep cuts or lacerations, bruising or swelling.

Other

Twenty-five people had another type of force used on them. This included:

- a police vehicle (six times)
- firing of a baton round against five people
- use of a police shield to push a person (twice)
- general pinching and poking (four times)
- a head butt (twice)
- a stun grenade (once)

There were five single uses of other types of force identified. This included someone having their head put into a sink of water, a bucket of cold water thrown over a person, a cup of hot water thrown over someone, a general assault, and the person being pinned down with a baton.

⁶⁵ This device is designed and used to restrict the movements of limbs. Its application should prevent a person from kicking and punching and allow them to be transported safely.

⁶⁶ Soft style restraining belt made from strengthened fabric and straps secured with Velcro. Its intended purpose is to provide a protective and restraining device to handle, control, restrain, and move people who are violent or injured. It is intended to be used on the legs and arms.

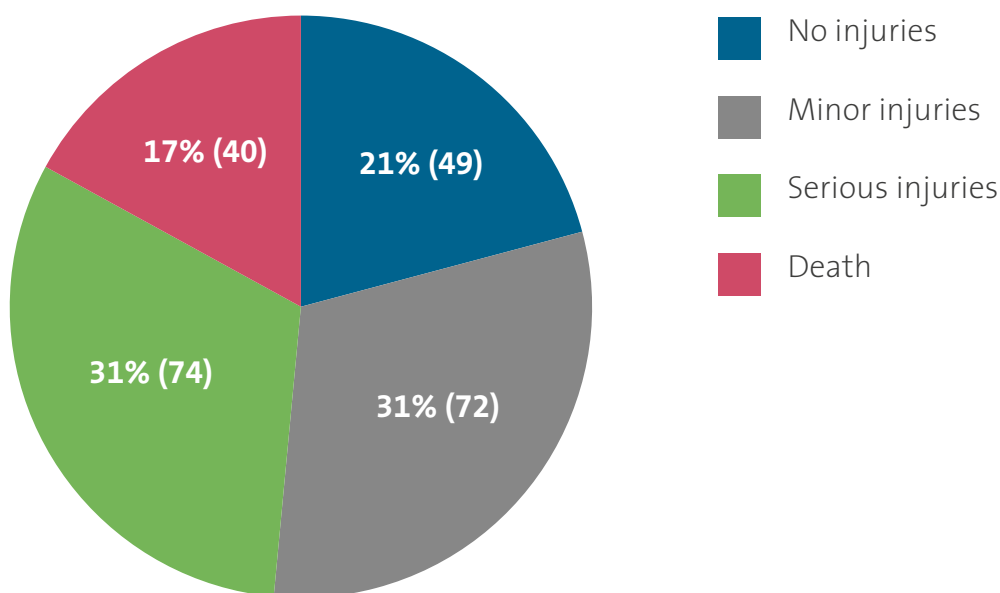
⁶⁷ A hood designed to cover the whole of the face made of a thin, light fabric designed to allow the person to breathe easily while others are protected from their spitting or biting.

4.5 Injuries and fatalities

We examined information about any injuries the people involved in these incidents received (Figure 4.3). The minimum condition for an injury to be deemed serious is a deep cut or laceration; anything less than this is a minor injury. Of the 239 people in the sample:

- 49 people (21%) received no injuries as a result of the incident.
- 72 people (31%) received a minor injury; mostly scratches, bruises, small cuts, and swellings. Also included in this category are the injuries received from Taser barbs.
- 74 people (31%) received a serious injury (excluding fatalities). The most common injuries were deep cuts and broken or fractured bones, followed by gunshot wounds and internal injuries.
- 40 people (17%) were fatally injured during the incident (although not all of these were directly related to, or a consequence of, the force used).
- Information about injuries was not available for four people.

Figure 4.3 Level of injury, investigations data



Figures calculated based on information that was known.

4. Analysis of IPCC investigations

It was not always possible to specifically link the injuries a person received with the types of force used on them. However, some general observations can be made about the level of injury and the type of force used:

- There was a fatality in half (nine) of the incidents where restraint equipment was used.
- In three out of four uses of a baton, the person received a serious or minor injury.
- Dog bites resulted in serious injuries.
- When a firearm was discharged, this often resulted in a death or serious injury.
- Taser use resulted in minor injuries.

The personal characteristics of the 40 people who died are as follows:

- 38 were men and two were women
- 35 were White and four were from a BME background (ethnicity was unknown for one person)
- the average age was 38; and the most common age group was between 31 and 40 (17 people), followed by 41 to 50 (eight people)
- 19 people had a mental health concern⁶⁸
- 36 people were under the influence of alcohol and/or drugs
- 15 people were armed with a weapon

In 13 fatalities, the cause of death followed a period of restraint by the police, although the restraint was not always directly referenced

in the post-mortem cause of death. In all of these deaths, alcohol and/or drugs was an associated factor:

- Seven post-mortem results specifically mentioned the term excited delirium / acute behavioural disturbance.
- In six fatalities, there was no specific mention of excited delirium / acute behavioural disturbance but there was reference to struggling, or a period of restraint or physical exertion, together with the effects of alcohol and/or drugs.

There were ten deaths that were not associated with restraint:

- Nine people were fatally shot by the police – six of these individuals had mental health concerns.
- One fatality happened after the person was pushed by officers and had abdominal haemorrhaging.

For the remaining 17 fatalities that had no identified association or causal link to the force used by the police:

- 12 were related to the effects of alcohol and/or drugs overdose or misuse.
- Four deaths were self-inflicted either from a gun shot wound, hanging, or injuries that caused extensive bleeding.
- One death was due to head injuries resulting from the person falling before the arrival of the police.

⁶⁸ See [chapter 5.1](#) for more detail of fatalities relating to people with mental ill health.

4.6 Assessment and disciplinary action

In most instances (69%, 132 investigations), the IPCC found no concern⁶⁹ about the force used in the circumstances. When no concern was found, this was often because:

- The rationale for the officer using force and their individual decision making was consistent with the National Decision Model (NDM)⁷⁰.
- Once compliance was achieved, the use of force stopped.
- At the conclusion of the incident, when it was apparent that the individual had suffered an injury, medical assistance was immediately sought and the officers administered first aid.
- It was evident that there had been proper consideration of how to secure a safe and effective resolution using minimum force whilst reducing the risk to the general public, the officers and the individual.
- There was timely recording of the incident and the events that took place, which allowed for an efficient investigation into the matter.

There were also some examples of good practice:

- Officers recognised the signs of acute behavioural disturbance and treated the situation as a medical emergency. They transported the person immediately to hospital and shared information with medical staff.
- On attending an incident, officers used all resources available to them to assess effectively the risk and plan for the safety of the public and others involved before taking any action.

- Knowing that firearms officers were deployed to a scene with the likelihood of shots being fired, steps were also taken to prepare for the provision of first aid.
- One officer removed themselves from the incident to help calm the situation as their presence appeared to particularly agitate the individual.
- There was good communication between all police during a negotiation and dialogue with the individual to gather intelligence on their mental state and well being.

Before any force is used, the police officer should attempt to engage with the person verbally to help de-escalate the situation. In the majority of instances we reviewed, this did happen. However, for one in ten people (10%, 25 people) there was an inadequate level of communication. This increased to one in four (23%, eight) for people who had force used on them in the custody environment.

⁶⁹ This is taken from the findings and conclusions of the investigation.

⁷⁰ See [page 11](#) for further information about the NDM.

4. Analysis of IPCC investigations

In one in three cases (31%, 59) the IPCC investigator raised a concern about at least one of the uses of force or the decision to use the force. One in four of these cases (25%, 15 cases), related to force being used in the custody environment. The concerns included:

Poor risk assessment and communication

- Not enough information was gathered before authorising the use of a Taser.
- Lack of information gathered to make a proportionate decision on the necessary level of force to use.
- No warning was given before using incapacitant spray against a person.
- The decision to use force was made too early without a full evaluation of the threats posed. It was based on previous experience rather than the current situation.
- Evidence did not support the level of threat reported by the officer and the force used (prone hold, head butt, and physical strikes).
- The behaviour of the person did not justify the force used. They were not treated as a vulnerable person; the situation should have been dealt with as a medical emergency rather than restraining the person.

Over or incorrect use of force and equipment

- Concern with the length of the cycle the Taser was used for (11 seconds).
- A contamination hood was used against the guidelines and on someone who had vomited; it was incorrectly fitted, and the person was left unsupervised.

- Leg straps were used, among other types of force, on someone who spat at an officer through the hatch in the cell door. This was deemed excessive and the situation did not warrant the level of force used by the officers.
- While it was reasonable to use a prone hold, the duration of the position (12 minutes) was too long.
- Disproportionate and inappropriate use of a police vehicle to stop a person who was on foot.
- Putting someone's head into a sink of water, the head butts, the throwing of hot water and a bucket of cold water over a person, the way a police shield was used and a general assault were all a cause for concern for their inappropriate, disproportionate, excessive or malicious use.

Insufficient rationale

- The rationale for the decision to authorise the use of the Taser was not recorded.
- Force used (prone hold) was not appropriate. The person had fallen from a window and medical help should have been sought sooner.
- The individual was complying with the officers when force in the form of a prone physical hold and strikes were used.
- Police officers were unable to justify their actions, provide a credible reason, or evidence did not support their account of the force used.

4. Analysis of IPCC investigations

When an independent or managed investigation is completed, the investigator concludes whether any officer under investigation has a case to answer for gross misconduct⁷¹, misconduct⁷² or has no case to answer. It is then up to the police force to proceed with any disciplinary procedures. The IPCC also decides whether there is any evidence that a criminal offence may have been committed and whether to refer the case to the CPS. The IPCC does not decide whether the misconduct allegation is proven or whether the officer has acted unlawfully. Any misconduct will be determined by the police force. The CPS will consider whether any criminal charges are appropriate.

Following a misconduct meeting or hearing, gross misconduct was found for 22 officers and misconduct for 39. One officer was found to have unsatisfactory performance. Table 4.4 gives the disciplinary outcome for the officers. An additional four officers retired or resigned prior to the conduct proceeding taking place.

Table 4.4 Disciplinary outcomes, investigations data

Conduct sanction	Number of officers
Dismissed	9
Final written warning	12
Written warning	6
Management advice	12
Management action	7
Performance improvement plan	1
No further action	6
Unknown/awaited [^]	9

[^] Disciplinary proceedings for conduct can take place sometime after the conclusion of the investigation.

We sent the CPS files relating to 24 officers. The CPS decided to take criminal proceedings against 18 of them. Ten officers were found guilty in subsequent criminal proceedings. Following an appeal, four had their convictions overturned and one had their sentence reduced. Table 4.5 describes the offence and criminal sanction that the officers received after any appeal.

Table 4.5 Criminal outcomes, investigations data

Offence convicted	Sanction	Force used by the officer
Section 18 assault GBH	Three year prison sentence	Threw hot water over a man in custody
Assault and perjury	Two year prison sentence	Punched someone a number of times in the back as he held their head on the ground
Common assault	18 month prison sentence	Grabbed person's hair and forced their head onto a desk before pulling their handcuffed arms up behind them
Actual bodily harm	Eight month prison sentence	Knocked a tooth out of a demonstrator at a protest using his riot shield
Common assault	150 hours community service – pay fine, costs and compensation	Physically pushed a teenager during a stop and search
Common assault	Pay fine, costs and compensation	Twisted the arm of a man in custody

⁷¹ Gross misconduct means a breach of the Standards of Professional Behaviour so serious that dismissal would be justified. Therefore, for a matter to be assessed as gross misconduct, the person making the assessment needs to be satisfied that dismissal would be justified if the conduct alleged was proven or admitted, having regard to all the circumstances of the case.

⁷² Misconduct is a breach of the Standards of Professional Behaviour that does not meet the criteria specified under gross misconduct.

5. Thematic analysis

This chapter considers four areas in more detail:

- mental health
- children
- black and minority ethnic groups
- custody environment

We looked at these areas using the data from the independent and managed investigations referred to in chapter four. These themes have been chosen because of concerns about the experiences or perceptions of force used on certain groups of people or in certain locations.

5.1 Mental health

The police are often the first public service to deal with someone with mental ill health, and are likely to be called upon when other services are unavailable or under-resourced. A person's mental health may not be relevant in every interaction with the police, but police always need to be aware of the potential impact of mental health concerns on their behaviour and that of the individuals concerned.

Mental health is an underlying theme in many of the cases that we investigate, especially where a death has occurred. The annual national statistics on deaths in or following police custody show that, on average mental health was a factor for two in five people (43%) who died each year.⁷³

Key findings

- We identified that one in five people (20%, 46 people) in our sample had a mental health concern.
- People with mental ill health were significantly more likely to be White and more than 30 years old than those with no mental health concerns identified.
- People with mental health concerns were over three times more likely to be on drugs and twice as likely to be under the influence of alcohol as those with no mental illness.
- Every second person (50%) with mental ill health was in possession of a weapon during the incident in question. This was significantly higher than people with no mental illness (14%).
- People with mental health concerns were significantly more likely to have a firearm or Taser used on them. They were also more likely to be put into restraint equipment than people with no mental health concerns.
- People with mental ill health were significantly less likely to have a baton used on them or to be physically struck by the police.
- A higher proportion of people with mental health concerns experienced force in the custody environment (24%) than people with no mental illness identified (13%).
- There was concern about the force used on six people with mental ill health (13%) – this was a significantly lower level of concern than that raised about people with no mental illness (34%, 64 people).
- Nineteen people (41%) with mental ill health died compared to 21 people (11%) with no mental health concerns.

⁷³ Average calculated between 2010/11 and 2014/15. [Full IPCC annual death reports available.](#)

Sample

For our study, the sources of information about a person's mental health included:

- the police force at the point of referral
- evidence from the investigation
- information provided by the person involved
- medical staff or close associates of the person involved

Mental ill health was considered relevant if someone had been detained under the Mental Health Act or if they were a patient at a psychiatric hospital. It was also relevant if the person had previously attempted suicide, was suffering from depression, or had current or historical mental health concerns. We have used a range of wording to refer to mental health issues – these are used interchangeably and all relate to the same definition.

One in five (20%, 46) of the 239 people connected to the investigations examined had a mental health concern⁷⁴. The types of mental ill health identified included: bipolarity; depression; schizophrenia; paranoia; previous self-harm or suicidal tendencies; detention under the Mental Health Act. These factors were either known by the police before contact, made apparent during their interaction, or were identified during the investigation.

Characteristics of people with mental illness who had force used against them

The majority of people with mental ill health in our sample were men (85%, 39) and White (86%, 37). There were six people from a BME background. Where this information was known, the average age was 38 with 41% of people in the 31 to 40 age group. People with mental ill health were significantly more likely to be White and aged over 30 years compared to those with no mental illness.

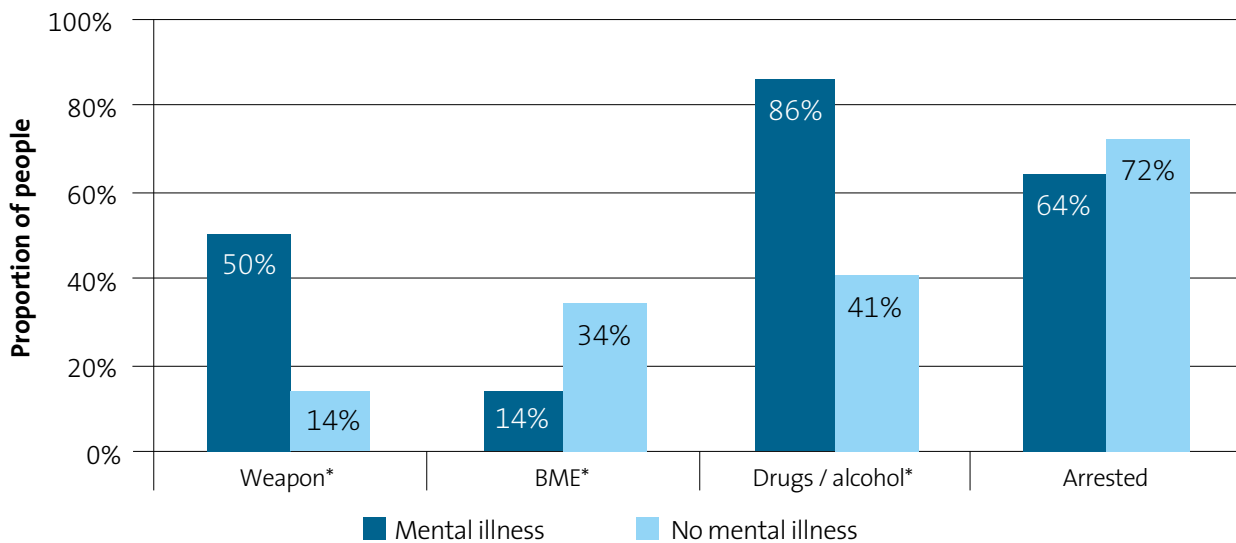
Every second person with mental health concerns (24 people) was identified as being on **drugs** at the time of the incident, and two in three people (66%, 29) were **alcohol** intoxicated. Overall, alcohol and/or drugs was relevant for 87% (39) of people with mental health concerns. The presence of drugs was over three times higher for people with mental illness, and twice as high for alcohol compared to those with no mental illness (14% and 36% respectively).

Twenty-nine people (64%) with mental health concerns were **arrested or detained**. Seven detentions were made under Section 136 of the Mental Health Act. One of these detentions also involved possession of a weapon. Seven people were arrested for violence-related offences, one in conjunction with criminal damage and another for threatening behaviour. Four of the ten arrests for possession of a weapon related to a person with mental health concerns. The proportion of people with mental health concerns who were arrested was not significantly lower than those with no mental illnesses (72%).

Twenty-three of the 46 people with mental health concerns were believed to be or were **armed with a weapon** before or during the incident with the police. Eleven people were armed with a firearm, including one that was a replica; seven were armed with a bladed weapon; three had a blunt weapon such as a bat; and three had other weapons, such as a bottle, chair or knuckle-duster. People with mental ill health were three and a half times more likely to have a weapon than those with no mental illness (50% compared to 14%).

⁷⁴ The sample size for those identified with no mental ill health is 187; it was unknown for six people.

Figure 5.1.1 Characteristics of person with or without mental illness



*Statistically significant difference.

Figures calculated based on information that was known.

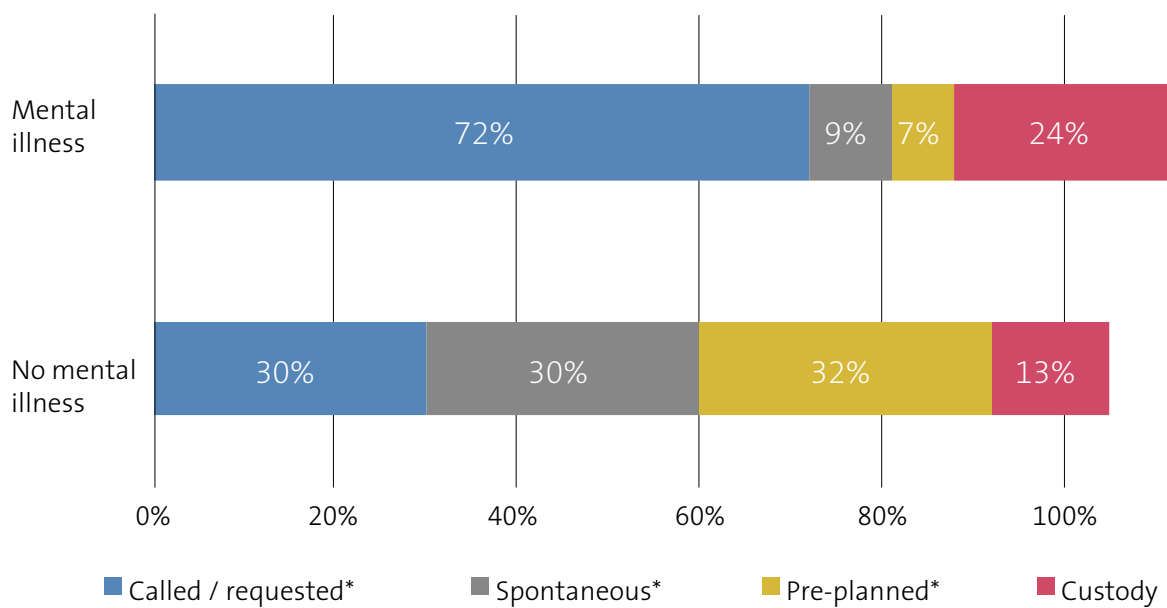
Circumstances in which force was used against people with mental illness

Each person may have experienced more than one incident in which force was used. Ten people (22%) with mental illness experienced more than one incident. These may have occurred at different locations during contact with the police.

- Most incidents took place in a public setting, most often in the street.
- Seven people experienced an incident in a hospital setting (see [chapter four](#) for more information).
- Fifteen people with mental health concerns had force used against them in their home or garden; one of these people experienced two incidents in this location.
- For 11 people the incident took place in the custody cell or wider custody environment. Force was used in a police vehicle on two people. A higher proportion of people with mental health concerns experienced force while in the custody environment (24%) than people with no mental health concerns identified (13%).

For the majority of people with mental health concerns, contact with the police was because someone had asked them to attend (33 people, 72%). This was significantly higher than those with no mental illness (30%). The reason for requesting police attendance was often due to a concern for the welfare of the person or behaviour relating to firearms or other weapons. On the other hand, a smaller number of people with mental ill health were engaged with spontaneously (four people, 9% compared to 30%) or as part of a pre-planned effort (three people, 7% compared to 32%). The three cases that were part of pre-planned operations all related to firearms.

Figure 5.1.2 Type of contact for people with or without mental illness



One person may have been involved in more than one type of incident and contact with the police so the percentages will not equal 100%.

* Statistically significant difference.

Figures calculated based on information that was known.

The police had contact with 19 people with mental health concerns because of concern for their wellbeing. This was four times more likely for people with mental ill health than for people with no mental illness (41% compared to 11%). By contrast, contact was three times less likely to be a result of a crime in progress for people with mental health concerns (11%, five people) than for those with none (32%, 60 people).

Types of force used against people with mental illness

Most force types showed a significant difference between the two groups of people. People with mental ill health, compared to those with no mental illness identified, were significantly:

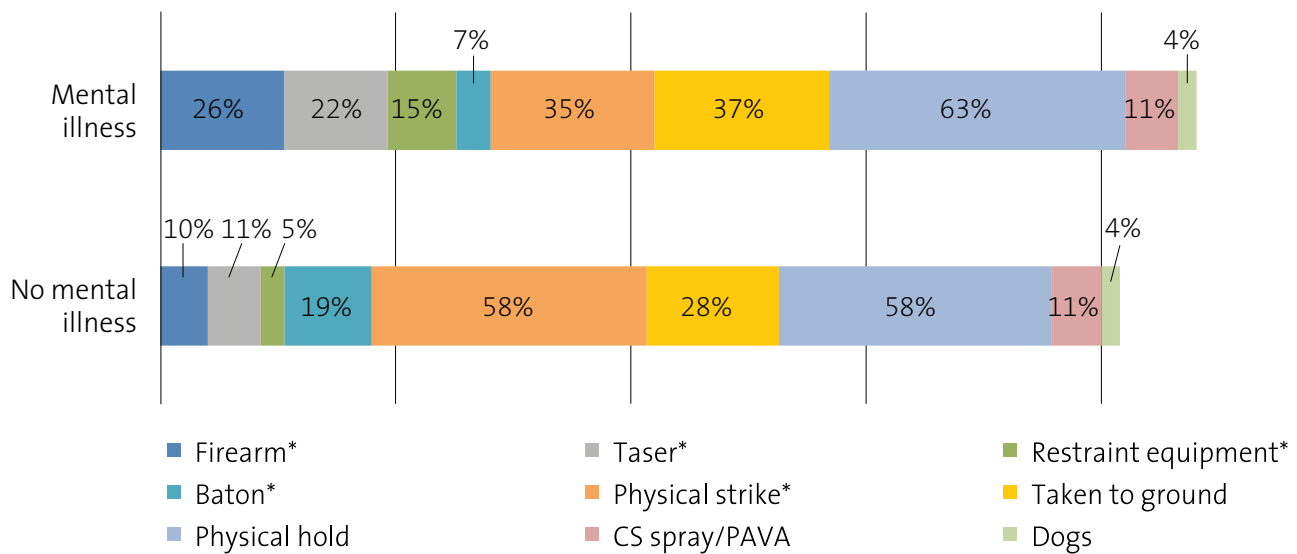
- *more likely* to have a firearm used against them (26%, 12 people)
- *more likely* to be put into restraint equipment (15%, seven people)

- *more likely* to have a Taser used on them (22%, ten people)
- *less likely* to have a baton used against them (7%, three people)
- *less likely* to be physically struck (35%, 16 people)

When Taser was used against a person with mental ill health, it was more likely to be used multiple times (six people). No differences were found in the use of police dogs (two people), use of a pressure point technique (one person), use of CS spray/ PAVA (five people), being taken to the ground (17 people), a physical hold (29 people), and 'other'⁷⁵ uses of force (six people) on people with a mental illness compared with those with none.

⁷⁵ The other types of force included a baton round being fired at three people with a mental illness, the use of a police vehicle against two people and a stun grenade used in one case.

Figure 5.1.3 Type of force used on people with or without mental illness



Figures calculated based on information that was known.

One person may have had more than one type of force used against them so the percentages will not equal 100%.

* Statistically significant difference.

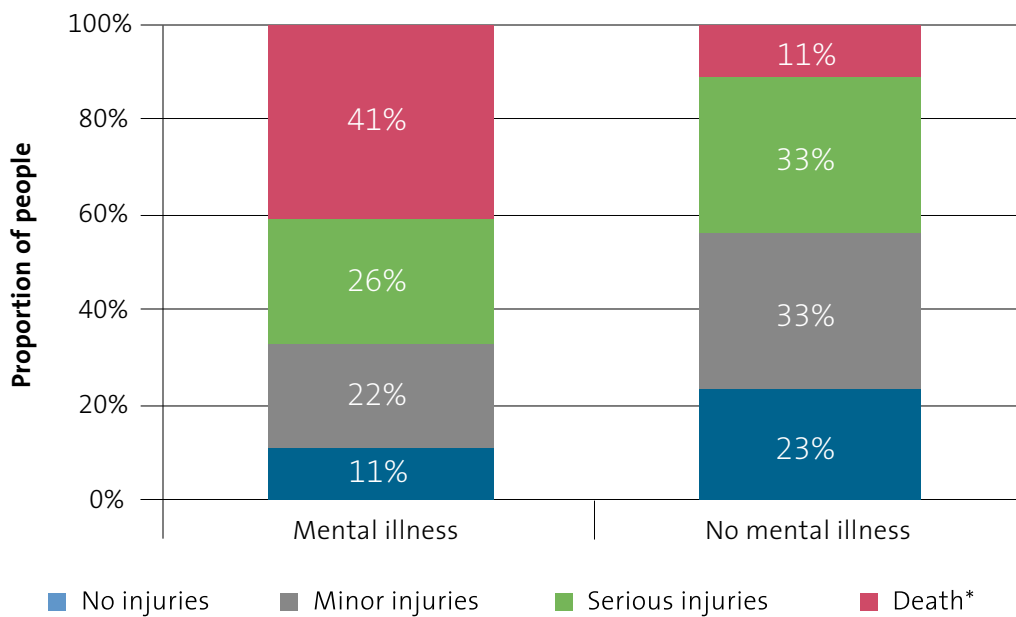
Injuries and fatalities

People with mental health issues were more likely to be fatally injured during or following an incident than those with no mental health concerns. This could be due to the increased use of police firearms during incidents involving someone with mental ill health. One out of ten people (11%) did not receive any injury and one in five (22%) received minor injuries. This compares with 56% of people with no mental illness. A quarter (26%) of people with mental ill health suffered serious injuries. A further 19 people (41%) with mental health concerns died during or shortly after the incident in the following circumstances:

- seven deaths followed physical restraint or a violent struggle with the police (they were linked to the presence of drugs or acute behavioural disturbance)
- six deaths resulted from police shootings

- three deaths were self-inflicted
- two were from natural causes related to drug and alcohol abuse
- one was from an accidental head injury the person received after falling over before they had contact with the police

Figure 5.1.4 Injuries received by people with and without mental illness



Figures calculated based on information that was known.

* Statistically significant difference.

Concern about the force used

At the end of our investigations, there was some concern about the force used on six people (13%) who suffered from a mental illness. This is significantly lower compared to people with no mental illness⁷⁶. Half of the concerns related to force being used in the custody environment. The concerns included:

- The use of a **baton and physical strike** that was considered excessive and unnecessary in circumstances where the person was unarmed and seated in a room in custody. Although they spat at the officer, they posed no real threat – using alternative defence tactics would have been sufficient.
- While conducting a search on a woman found smoking in her cell, an officer **physically pushed** her against the wall **and took her to the ground**. The investigation believed that the officer lost their temper while conducting the search and should have left the cell, leaving the other officers present to deal with the situation. The force was considered disproportionate as there was no evidence the person posed a threat.

- The risk of harm posed using a **police van** to nudge a person was too high, and there was not enough evidence that the person had done anything to justify the action.
- The use of a **Taser** on three occasions. For two of these uses, there were concerns about whether sufficient information had been gathered about the situation to be able to make a correct and proportionate decision. For one of these, it was also considered unnecessary and disproportionate in the circumstances. For the third use, there was no audit trail of the decisions made by the authoriser.

⁷⁶ In this sample of people with mental health concerns, they were more likely to be under the influence of drugs or alcohol or be in possession of some kind of weapon. The investigations were more likely to conclude that the force used was proportionate and appropriate in these circumstances where risks of violence and harm were higher.

5.2 Children

Police using force against children is a contentious issue. Any decision to use force on a child must take into account the implications of doing so – in particular, the potentially greater impact of force on their underdeveloped bodies.

For the purpose of our study, children have been defined as those aged 17 years or under at the time of the incident. People aged 18 years and over are referred to as either ‘older’ people or as ‘adults’.

Key findings

- A total of 27 people (14%) in the sample were aged 17 years or under.
- A greater proportion of children than adults were from a BME background (48% versus 24%).
- Children were significantly less likely to be under the influence of alcohol or drugs than those who were older.
- Contact was significantly more likely to result from a crime in progress for children (44%) than for adults (21%).
- Police were less likely to use Taser on children than adults.
- Police were more likely to physically strike a child than those older, and it was more likely for there to be a subsequent complaint about the use of handcuffs.
- Children were significantly more likely to receive no injuries (30%, eight), but if they did, it was more likely to be serious in nature (44%, 12), than the older sample (14% and 35% respectively). No children in our sample died as a result of their contact with the police.
- The force used against seven children (26%) was deemed excessive or inappropriate. This was a similar proportion for adults (31%).

5. Thematic analysis

To provide further context about the thoughts and opinions of young people about police use of force, [Box C](#) provides a summary of views collated at four of our youth

engagement events, which took place in 2014. These events were not specifically run for the purpose of our study, but police use of force featured in the discussions.

Box C **Feedback from IPCC events with young people**

In 2014, the IPCC hosted a series of youth engagement events in Birmingham, Bradford, Cardiff, and London where police use of force was discussed. Young people told us that:

- Previous direct negative contact with the police (for example, through stop and search), or hearing about the bad experiences of peers or family members, damaged their trust in the police and made them less confident or willing to turn to the police in times of difficulty.
- Police officers should explain their actions to make sure young people understand what is happening – for example, when they stop and search someone.
- The way that police officers communicate with them often causes them to react in a negative way – sometimes resulting in force being used or the young person being arrested.
- Police officers should be calm and professional, use appropriate language, and should not try to deliberately intimidate, threaten, or provoke young people.

When we asked why young people do not complain when they have bad experiences, they told us that:

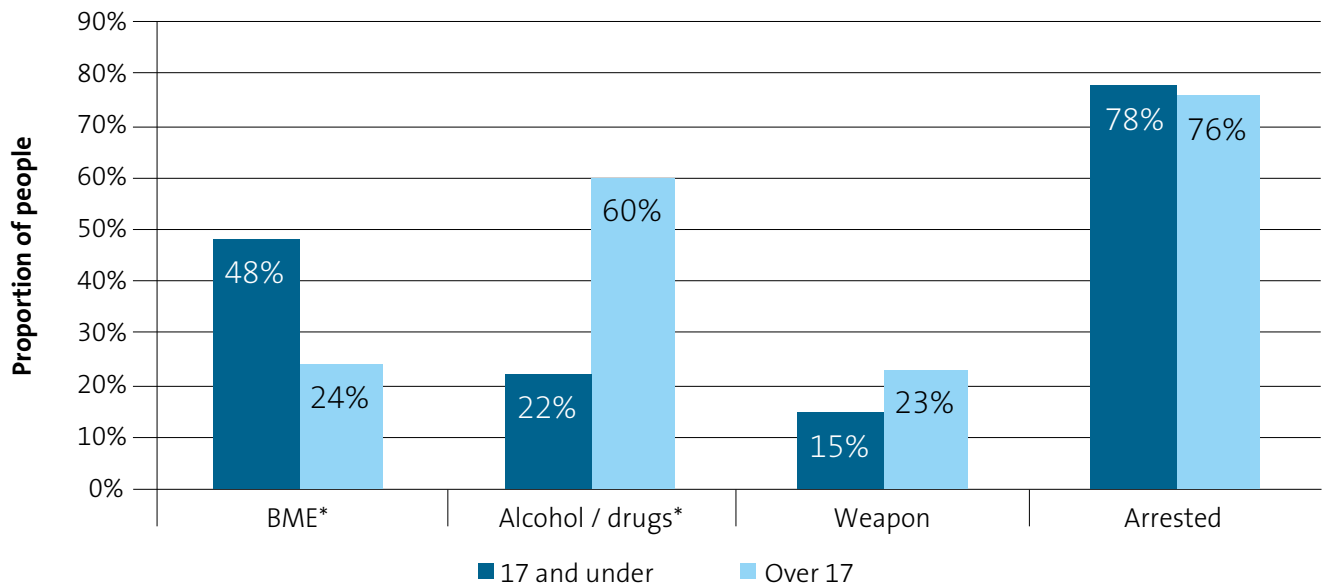
- Not all young people know what their rights are and how the police should behave. They do not always realise when they can make a complaint.
- Most young people do not know how to complain because the process is not advertised, and the information does not feature in ‘know your rights’ material or on websites used by young people.
- Not everyone wants to walk into a police station or talk to an officer to make a complaint. Sometimes, people just want to talk to someone face-to-face who is independent of the police.
- Some police officers try to discourage young people from complaining.
- Some young people are concerned about being labelled as “a grass” – it is not part of their culture/generation to “tell tales”.
- Some young people worry that they will not be believed or taken seriously, particularly if they have been in trouble in the past. They also fear that if they make a complaint the police will not help them in the future if they need them.
- Some young people think that complaining is not worthwhile as “nothing ever changes”.
- Some young people worry that the police will close ranks and stick up for each other.

Characteristics of children who had force used against them

In our sample, 27 (14%) people were identified⁷⁷ as children. They were predominantly young men (24). Where ethnicity was known⁷⁸, 11 people (48%) were from a BME background. This is significantly higher than the adult sample where one quarter (24%, 38 people) were BME. Mental illness was significantly lower among the children in our sample than those who were older. One child had a history of self-harm, whereas one in four adults (25%, 43 people) were described as suffering from a mental illness. One child was identified as having a learning disability. During their encounter with the police, six children (22%) were under the influence of alcohol and/or drugs. This compares to 60% of the older sample.

Four children had a weapon just before or during their interaction with the police – two had a knife, one had a gun and one had a screwdriver that officers believed was going to be used as a weapon against them. As a result of the incident, three out of four (78%, 21) young people were arrested. These findings did not significantly differ from the adult sample. Six young people were arrested for burglary / theft offences, five for violence-related offences, and four for threatening behaviour or harassment.

Figure 5.2.1 Characteristics of child and adult sample



* Statistically significant difference.

Figures calculated based on information that was known.

⁷⁷ Age was unknown for 40 people.

⁷⁸ Ethnicity was unknown for four children.

Circumstances in which force was used against children

Most of the children in the sample (85%, 23) had a single incident of force used on them. Three young people experienced two incidents and one was involved in three incidents. Most of the contact with the police took place in a public place such as the street or road (14). Other public locations included a car park, football stadium, shopping centre, and inside a pub. Six children had force used on them while at home or in the garden. In two of these incidents the police were asked to attend in connection with the actions of the child. On four occasions, the police went to a private home to take action relating to someone other than the child. Five young people experienced force while in or on police premises; one child experienced three incidents while in a police custody cell and another experienced two. Two further children had force used on them while in the wider custody environment and one while in a police vehicle.

Almost one in four children were involved in a spontaneous encounter with the police (37%, ten), the police were called/requested to attend the scene on eight occasions (30%),

the contact for one in five young people was part of pre-planned police action (22%, six), and four (15%) were already in police custody when the force was used. There were no significant differences in the type of contact between children and those who were older. There were some distinct differences in the reason why the police had contact with the child compared to adults. The police were twice as likely (44%, 12) to have contact with a child because there was a crime in progress compared to those who were older (21%). In none of the cases was the reason for contact concern for their welfare, whereas it was a reason for one in five adults.

Types of force used against children

While often involved in only one incident, each child may have experienced multiple uses and/or types of force. Table 5.2.1 details the number of children who experienced the different types of force compared to those who were older. As with the adults in the sample, the force most commonly used on a child was physical holds and strikes. There were significantly more complaints about the use of handcuffs on children compared to adults.

Table 5.2.1 **Types of force used, comparison between children and adults**

Type of force	17 years and younger		18 years and over	
	%	N	%	N
Physical strike	63%	17	51%	87
Physical hold	63%	17	61%	105
Handcuffs [^]	30%*	8	15%	25
Taken to ground	26%	7	33%	56
Baton	19%	5	17%	29
Other~	11%	3	12%	20
CS spray/PAVA	7%	2	12%	20
Firearm	4%	1	15%	26
Taser	4%	1	15%	26
Restraint equipment	4%	1	9%	16
Dogs	4%	1	3%	6
Pressure point	4%	1	6%	11

* Statistically significant difference.

[^] Handcuffs were only recorded in instances where there was a specific complaint about their use or where their use resulted in a serious injury.

~ For two children this was the use of the police vehicle and one instance of a head butt.

5. Thematic analysis

We considered that the force used by the police against seven young people (26%) was excessive or inappropriate. This is a similar proportion to the adult sample (31%). Some of the more severe types of force used against children are described below:

- When a firearm was used, this was drawn at the child. Firearms officers were present because of concerns that an adult was armed.
- A Taser was used against a child of Black ethnicity who was suspected of being involved in an armed robbery that had just taken place. A struggle developed and one officer used a Taser in the stun mode owing to his close proximity to the child. Another officer fired the barbs from the Taser as he believed the person was reaching for a weapon. The child was arrested for burglary/theft and drug possession before being taken to police custody.
- Restraint equipment (Velcro leg straps) was used in conjunction with a face-down hold. These were used on a 13-year-old girl while she was in police custody. She was hitting her head against the cell wall, spitting and being verbally abusive to the officers. The main reason given by officers for using both types of force was to prevent self-harm. While our investigation found the use of leg restraints or a hold were appropriate, it concluded that these were used for too long (12 minutes). In addition, we found that the person may not have received adequate warning that force would be used⁷⁹.
- One use of a police vehicle was deemed accidental by the police officer. The reason given for the other use of a vehicle was to prevent the person escaping after they had committed driving offences. This was deemed to be an inappropriate method in the circumstances and the officer received a final written warning for gross misconduct.
- One officer denied head butting a child. The subsequent investigation found there was no justifiable reason or action for the officer to use that level of force. The officer received a final written warning for misconduct.

⁷⁹ One officer received a final written warning, the second officer a written warning, and the third officer was subject to management action.

⁸⁰ One person suffered a torn spleen and damaged liver. The other ruptured a testicle.

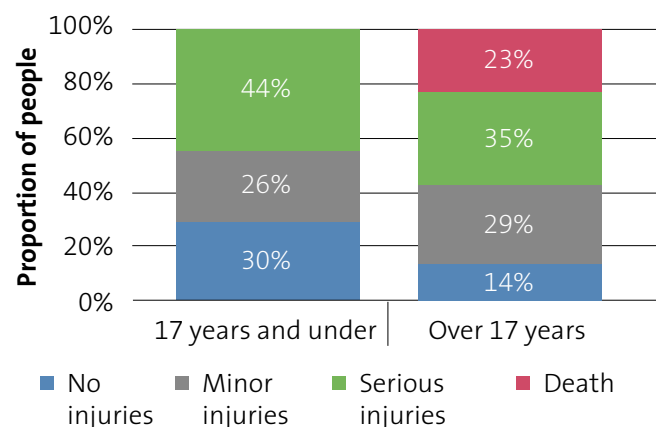
Injuries and fatalities

Twelve young people (44%) received a serious injury as a result of the incident, seven received a minor injury (26%) and eight received no injuries (30%). The force or action that caused the injuries could not always be identified. The seven children who received minor injuries mainly experienced bruising, swelling, or scratches to the limbs or face. Methods of force suitable for adults can be unsuitable for children as they can cause them more harm. Where a serious injury occurred:

- For seven children this was a broken bone / dislocation or fracture. These were often caused by their arms being held, being pushed or pulled, and in one case, a police vehicle going over their feet.
- Two young people received internal injuries⁸⁰ caused by physical strikes, kicks, and physical pushing or pulling.
- One child received dog bite injuries and a further two received deep cuts.

There were key differences between children and adults in terms of injuries and fatalities. Children were significantly more likely to receive no injuries than adults (30% compared to 14%), but when they did receive an injury, it was more likely to be serious (44% compared to 35%). Children and adults had similar proportions of minor injuries (26% compared to 29%). No children were fatally injured during the incidents, compared to almost one in four adults (23%).

Figure 5.2.2 Injuries received, comparison between children and adults



Figures calculated based on information that was known.

5.3 Black and minority ethnic group

The relationship with BME communities remains a critical issue for the police service, despite work in recent years. Confidence in the police is strengthened or damaged through day-to-day interactions between them and members of the public. However, community concerns about use of stop and

search powers, their impact on children and young people and the policing of BME communities more generally continues to erode trust and confidence.

Key findings

- Over one in four people (29%) in our sample who had force used against them were from a BME background (60 people).
- The BME people in our sample were generally younger and significantly more likely to be aged 17 or under (22%) than those who were White (9%).
- White people were significantly more likely to be intoxicated through alcohol and/or under the influence of drugs (62%) than BME people (34%).
- One in ten (10%) BME people were identified with mental health concerns compared to one in four White people (26%).
- A higher proportion of BME people were arrested for possession of a weapon and drugs supply/possession. A higher proportion of White people were arrested for burglary/theft, and violence related offences.
- The location where the incidents involving the BME sample took place was more likely to be a public setting (73%) than a person's home (15%) compared to the White sample (58% and 23%). Similar proportions took place on police premises.

Characteristics of BME people who had force used against them

Overall, 60 people (29%) who had force used against them in the investigations sample were from a BME group⁸¹. Of these, 35 people were Black⁸², 16 were Asian, and nine were from a Mixed background. The majority were men (53) and seven were women. BME individuals were generally younger with one in five aged 17 or under (11 people, 22%)⁸³ and almost two-thirds (63%) were aged under 31. This was significantly different than those who were White (9% and 40% respectively). BME individuals were significantly less likely to be intoxicated

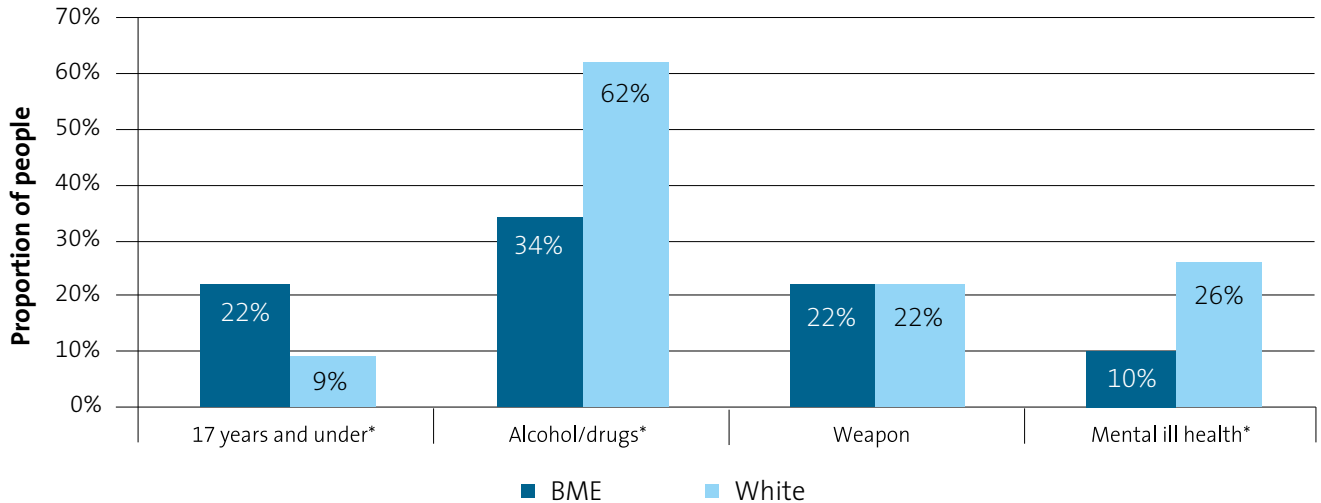
through alcohol (25%, 15) or be under the influence of drugs (13%, eight) compared to their White counterparts (49% and 29% respectively). Overall, the White people in our sample were almost twice as likely to be under the influence and/or intoxicated compared to the BME sample. Those from a BME background in our sample were less likely to have mental health concerns – one in ten (10%, six people) compared with one in four White people (26%, 37 people). There were no differences in the likelihood of individuals carrying a weapon (both ethnic groups 22%).

⁸¹ There were 147 White people in the sample; the ethnicity was unknown for 32 people.

⁸² Thirteen people had a Caribbean ethnic background, 11 were other Black ethnic backgrounds and four were African. The ethnicity sub-group was not known for seven people.

⁸³ Age was unknown for ten people.

Figure 5.3.1 Characteristics by ethnic group

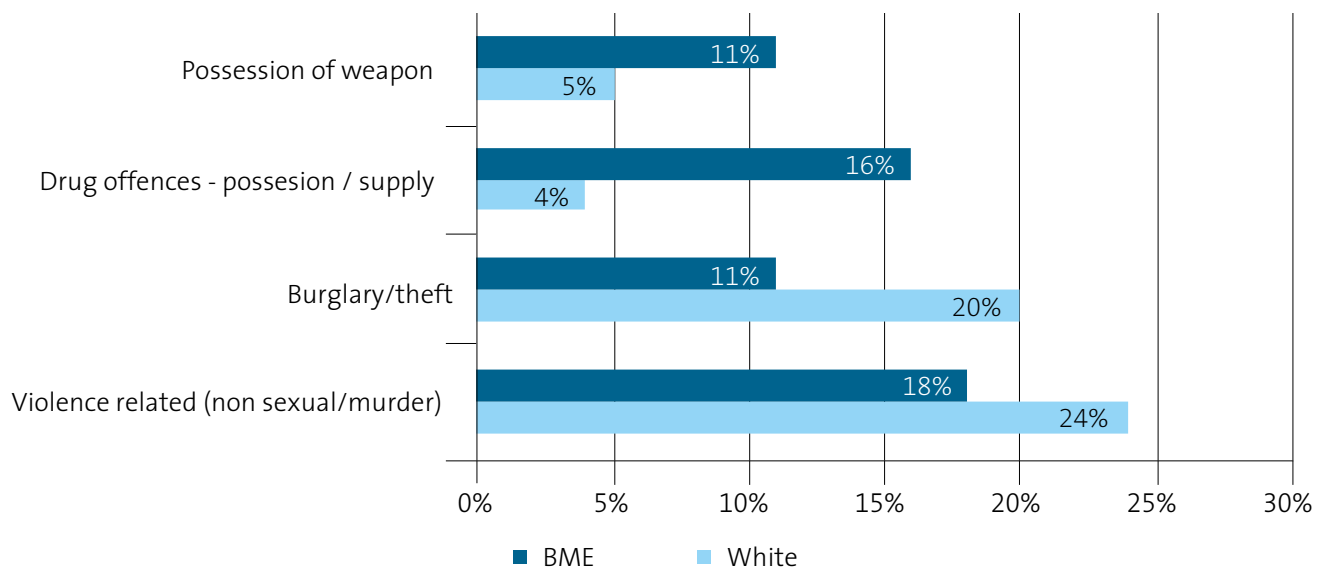


* Statistically significant difference.
 Figures calculated based on information that was known.

There was also no difference in the likelihood of being arrested (73% of the BME group were arrested compared to 75% White). However, there were some differences in the reasons for arrest between the ethnic groups. Figure 5.3.2 illustrates these key differences. While being on drugs features low among the BME group compared to the White sample, a higher

proportion were arrested for possession or supply of drugs (16% compared to 4%). Also, although similar proportions were carrying or believed to be carrying a weapon, 11% (five people) of a BME background were arrested for possession of a weapon compared to 5% of White people.

Figure 5.3.2 Arrest reason, comparison by ethnic group



Each person may have been arrested for up to two different reasons.
 Figures calculated based on information that was known.

Children and ethnicity

- One in five (22%, 11 people) of the BME people in our sample were aged 17 years or under. This is significantly higher than those who were White (9%, 12 people).
- Three BME children and one White child in the sample carried, or were believed to be carrying, a weapon.
- All but one BME child was arrested (91%, ten), compared to three-quarters (75%, nine) of White children.

Circumstances in which force was used against BME people

As with the White sample, the majority of people from a BME group (92%) were involved in one incident with the police where force was used. Four BME individuals experienced two incidents and one person experienced three.

- 48 (73%) BME individuals had force used against them while in a public setting, most of which (39) took place in the street or road
- Ten (15%) BME people had force used against them while at home
- Eight (12%) experienced force on police premises; six in the custody cell and two in the wider custody environment

The most notable difference is that people in the White sample experienced a greater proportion of force used at their home (23%) and a smaller proportion in a public place (58%) than people from a BME group.

Seventeen (28%) BME people had contact with the police because of so-called suspicious behaviour⁸⁴. A third (33%) of White people had contact with the police because of this reason. In another 18 (30%) cases, the contact took place as a result of the belief that they were committing a crime, and for 23 (38%) cases, the contact was part of routine police work. On five (8%) occasions contact was said to be the result of concern for the safety of the individual and/or others – this category was significantly lower than for White people (22%). In contrast, there was no

difference across the types of contact with the police. One third of the encounters were spontaneous (33%, 20), and another third started because someone called or requested the police (32%, 19). More than a quarter of incidents took place as part of a pre-planned operation (28%, 17).

Types of force used

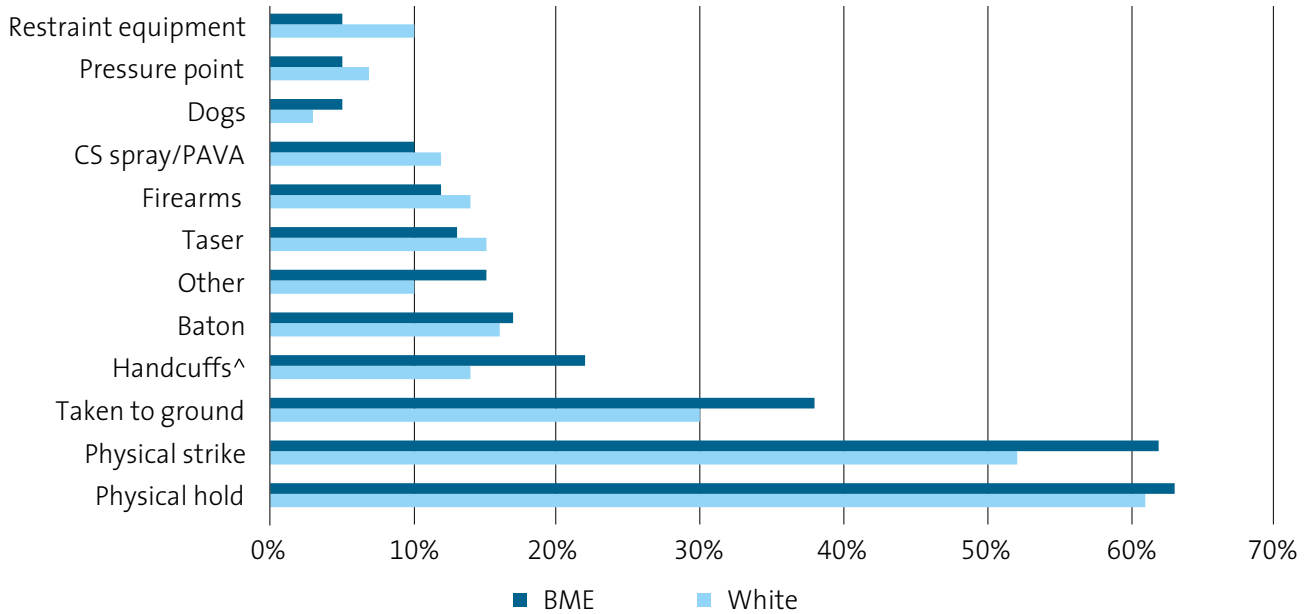
We found no significant difference in the type and frequency of force used against people from a BME background compared to those who were White. The most common force used against BME individuals, as with the White sample, was being put in a physical hold (63%, 38), followed by physical strikes (62%, 37) and being taken to ground (38%, 23). Ten BME people (17%) were hit by a baton, eight (13%) were Tasered, and another nine people (15%) experienced 'other' types of force. CS spray/PAVA was used against six BME individuals (10%) and seven were involved with police use of a firearm. Using pressure points, police dogs, and restraint equipment each occurred against three people (5%).

There were no significant differences in the likelihood of the IPCC investigation finding a concern with any of the force used against the BME sample compared to the White sample (30% and 29% respectively).

⁸⁴ This included anti-social behaviour, suspected of being armed or was armed with a weapon, reported suspicious behaviour to the police, and suspicion concerning drugs use or possession.

5. Thematic analysis

Figure 5.3.3 Types of force used, comparison by ethnic group

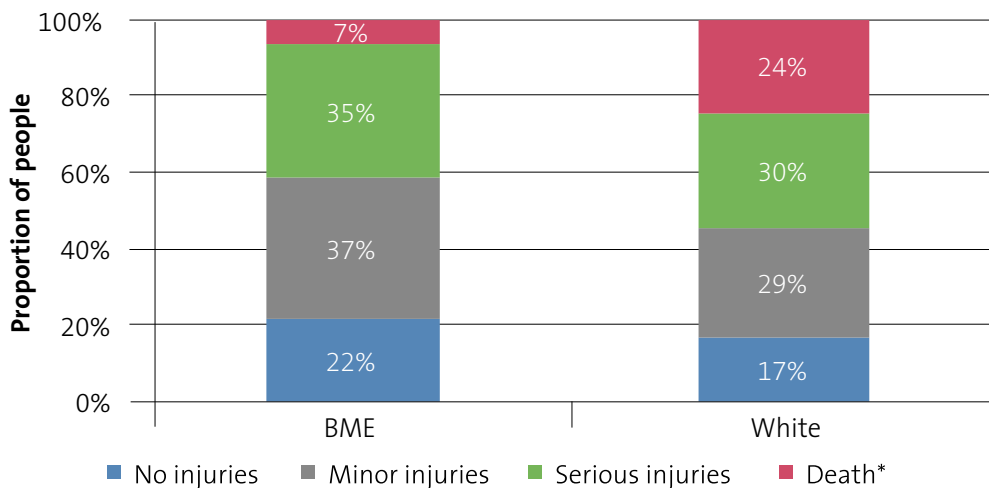


^ Handcuffs were only recorded in instances where there was a specific complaint about their use or where their use resulted in a serious injury.

Injuries and fatalities

The injuries received by the BME group and the White group were similar. Figure 5.3.4 shows that a greater proportion of BME individuals suffered no injuries (22%, 13 people), minor injuries (37%, 22 people) and serious injuries (35%, 21 people) than their White counterparts. From the investigations examined, four people (7%) from a BME background died during or following the incident compared to one in four (24%) people who were White.

Figure 5.3.4 Injuries received, comparison by ethnic group



Figures calculated based on information that was known.

* Statistically significant difference.

5.4 Custody environment

Many of the people taken into police custody are vulnerable in some way. They may have mental health concerns, physical illnesses, a disability or learning difficulties. National statistics on deaths in or following police custody show that, over the last five years, people with a mental health concern accounted for a third to almost half of those fatalities each year⁸⁵. Alcohol and drug concerns also feature in many of those detained.

Cases are included in this section if force was used on a person either in a police custody cell or within the wider police custody environment, such as the booking-in desk of the custody suite. It does not include police vehicles (see separate box for detail on these incidents). Some people included in this section may have had force used against them at a different location before their arrival to police custody.

Key findings

- Thirty-five people (15%) had force used on them while in a custody cell or in the wider custody environment.
- The average age was 28 years, which is slightly lower than the overall investigations sample.
- Restraint equipment was used on five people, two people experienced baton strikes, and one person had a Taser used against them.
- For every second person (49%, 17 people) who had force used on them in custody, we had some concern about the force used.
- There was some concern about the adequacy of communication before force was used for almost one in four people (23%, eight) in custody. This is a higher proportion than in the overall sample (10%).
- There were eight deaths in police custody; four of which related to the effects of drug intoxication and struggling against restraint.

One element of HMIC's thematic inspection⁸⁶ on the welfare of vulnerable people in police custody considered the use of force in custody. It raises many of the same issues referred to in this report, including:

- Inconsistent recording practices when force was used. Information about the force used during the arrest was not passed to the custody inspector.
- Little evidence of management review or analysis of data about use of force in custody.
- Sometimes, the force observed was unnecessary and the use of restraint both disproportionate and oppressive.
- Some concerns about the extent to which restraint equipment was used to prevent people who had a mental illness from harming themselves, and limited evidence that detentions under Section 136 of the Mental Health Act were treated as medical emergencies.

⁸⁵ IPCC [Deaths during of following police contact](#) annual reports.

⁸⁶ Full HMIC (2015) report [The welfare of vulnerable people in police custody](#).

5. Thematic analysis

- The measures of control used by the police are designed more for people who are violent, rather than people who are agitated because of vulnerability.
- Lack of awareness of the need for different approaches to restrain children and pregnant women, and lack of awareness that resistance may be linked to a mental disturbance where the person would be more open to reassurance than restraint.
- Positive examples observed where force was used as a last resort, with good communication and de-escalation skills to calm detainees and avoid the use of force.

Characteristics of people who had force used against them in custody

In total, 35 people (15%) had force used against them while in a police custody cell or in the wider custody environment. Twenty-eight were men and seven were women. The average age was 28 and four people were aged under 18⁸⁷. Where information was known, three in four people (74%, 23) were White and eight people (26%) were from a BME background – four were Asian, two were Black, and two from a Mixed ethnic background⁸⁸.

Twenty-two people (63%) were intoxicated through alcohol at the time of the incident and ten people (29%) were under the influence of drugs. Eleven people (31%) were reported to have mental health concerns and six people had another medical condition.

Force used in police vehicles

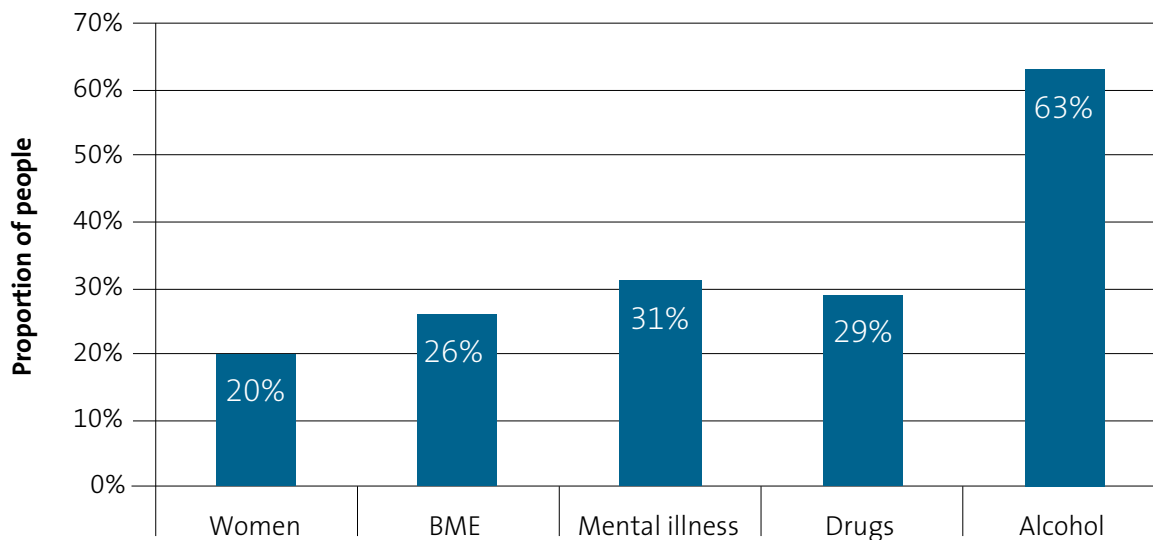
Eight people in our sample had force used against them while in police vehicle.

- All eight people were men and seven were White. The ethnicity of one person was not known.
- Six people were arrested.
- In general, the type of force used while in the police vehicle was physical strikes and physical holds.
- Five people were being taken directly to a police custody suite, and force was used while getting them in or out of the vehicle.
- The force used by one officer, who physically punched the person when they arrived at the custody suite, was deemed excessive by our investigation. There was also no attempt made to verbally communicate with them. The officer was dismissed without notice for gross misconduct.

⁸⁷ Age was unknown for one person.

⁸⁸ Ethnicity was unknown for four people.

Figure 5.4.1 Characteristics of people who had force used against them in custody



Figures calculated based on information that was known.

Circumstances in which force was used in custody

A total of 40 incidents took place while in the custody environment. Twenty-eight of these were in a custody cell. Most people (31) were involved in one incident while in custody. Three people had two episodes of force and one person had three.

These incidents occurred throughout the week. Where this information was known, almost half (18 incidents) took place between the hours of 9pm and 6am.

In 24 of the incidents, the person who had force used against them was described as acting in a threatening manner. Each person may have had up to four different types of behaviours recorded. On 19 occasions, the person was described as being verbally abusive towards the officer, on seven occasions the person was verbally or physically threatening violence, and on nine occasions the person was physically violent towards an officer. There were three instances of the person spitting or threatening to do so.

Types of force used and assessment

A number of different types and applications of force can be used with each person and within each incident. In total there were 98 separate uses of force in police custody. Most people (29) had some form of **physical hold** used against them. For 12 people, this was lying face down in the prone position. A total of 46 **physical holds** were used; 14 were while the person was standing. Other physical holds were used while the person was sitting, lying face-up, with legs held, or using a relocation holding technique to take the individual from one place to another.

Five people had a form of **restraint equipment** used on them during the incident; four of these were a form of leg strap and one person was made to wear a contamination hood⁸⁹. Two people had a **baton** used against them and one person was **Tasered**.

⁸⁹ A hood designed to cover the whole of the face made of a thin, light fabric designed to allow the person to breathe easily while others are protected from their spitting or biting.

Table 5.4.1 Types of force used in custody

Type of force	Number of people	Number of uses
Physical hold	29	46
Physical strikes	15	22
Taken to ground	13	13
Handcuffs [^]	5	5
Restraint equipment	5	5
Pressure point	3	3
Baton	2	2
Taser	1	1
Other – hot water	1	1

[^]Handcuffs were only recorded in instances where there was a specific complaint about their use or where their use resulted in a serious injury.

The IPCC was concerned about the force used against 17 people (49%) while in the custody environment. In addition, for eight people (23%), we found that the communication before force was used was inadequate. Specific examples of concern and circumstances during which force was used are summarised below (some of these may have already been mentioned in the previous chapter):

- There was concern about a third of the **physical holds**. The majority of these related to a hold while standing (nine) and two were about a prone hold. In one case, while it was considered reasonable to use a prone hold, the duration for which the position was held (12 minutes) was too long causing concern about positional asphyxia⁹⁰. One of the standing holds was used with a **pressure point** technique. The force was thought to be applied at an unacceptable level for a prolonged period of time given that the person posed no real threat.
- There was some concern about three of the five uses of restraint equipment. A **contamination hood** was used against guidelines and on someone who had been sick. It was incorrectly fitted and the person was left unsupervised.
- There was some concern with two uses of **leg straps**. In one incident, leg straps, among other force, were used on someone who spat at an officer through the hatch in the cell door. This was considered excessive as the situation did not warrant the level of force used. The other use of leg straps was in conjunction with a prone hold, which was deemed to be used for too long.
- Both uses of a **baton** were considered excessive and an inappropriate method in the circumstances.

⁹⁰ Positional asphyxia is likely to occur when a person's body position restricts a person's ability to breathe. Some positions may increase the risk of asphyxiation, for example, the prolonged restraint of a person placed face down on the floor.

5. Thematic analysis

- In relation to the use of **Taser**, officers wanted to enter the cell to conduct a search of the person because they were known for concealing objects and self-harm. The IPCC considered that there was no audit trail for the authorisation or use of Taser.
- One case involved a **cup of hot water** being thrown over someone in their cell. The police officer provided no explanation of why this happened. The IPCC considered that this was excessive and malicious and the officer received a three-year prison sentence.

Injuries and fatalities

Eight people received no injuries from the incident that took place in the custody environment. Twelve people received minor injuries and seven received serious injuries. Eight people who had force used against them while in custody died:

- one from self-inflicted injuries
- one from head injuries received prior to contact with the police
- two from alcohol and drug toxicity
- four deaths were related to drug intoxication linked with struggling during restraint or acute behavioural disorder.

6. Recommendations

We have developed a number of recommendations in response to the issues identified in our study. These are designed to improve how force is used and recorded, and how its effectiveness is evaluated. We engaged with stakeholders as part of the discussions around these recommendations.

To help us make sure that the study leads to changes in police practice we will:

- Ask that all forces set out how they plan to respond to the findings of the study and recommendations directed at them and invite Police and Crime Commissioners (PCCs) to follow up on their force's progress.
- Invite the National Police Chiefs' Council (NPCC), the College of Policing and Her Majesty's Inspectorate of Constabulary (HMIC) to respond to the recommendations addressed to them. We will follow up to check progress.
- Follow up with forces, NPCC, HMIC and PCCs, to find out more about how they are dealing with the issues identified in the study.
- Undertake work to help us to find out how community and voluntary sector stakeholders are using the report.

The recommendations are targeted towards key policing stakeholders and police forces directly.

Recommendations for the National Police Chiefs' Council (NPCC)

Recommendation 8

We recommend that the NPCC uses the proposed pilots on recording use of force to further develop national recording standards, and issues guidance on the use of the data collected.

This guidance will build on the national standards developed by the NPCC and help to ensure that forces make effective use of any data collected. This should include using data to monitor how officers are using force, how individuals and communities are affected and how data can be shared with the public to improve transparency and confidence.

Recommendation 14

We recommend that the NPCC reviews Authorised Professional Practice and relevant guidance to make sure that sufficient emphasis is placed on the needs of vulnerable people when officers are considering using any type of force.

In firearms incidents, these considerations are emphasised, but we consider that this should be general practice for all types of force. This will help to improve the experiences of vulnerable people – including children and young people, and people with a learning disability, mental health conditions or who are under the influence of drugs and alcohol. Officers need to consider how they communicate, the type of force they use, the aftercare required, or the support needed, when they deal with people with different needs.

Recommendations for police forces

Recommendation 1

We recommend that all police forces take steps to understand how their use of force affects the trust and confidence of people living and working in the local area.

Whether directly or indirectly affected, people's perceptions of how the police use force affects their trust and confidence in the police. Forces should develop existing local engagement activity, to share information and help shape organisational policy, communication strategies and officer training.

Recommendation 2

We recommend that forces develop, or adapt existing training on unconscious bias, in relation to the decisions that officers make about when and how to use force.

Forces should refer to the good practice and developments ongoing in this area. Personal attitudes to age, race and mental health, influenced by negative stereotypes, can affect officers' behaviour. Increased awareness of unconscious bias, together with the National Decision Model, will help officers to think more carefully about how they interact with members of the public.

Recommendation 3

We recommend that, in line with the National Decision Model, forces make sure that their risk assessment processes prompt officers to give special consideration to the needs of vulnerable people when they plan operations.

The risk assessment process should prompt officers to consider how planned police operations could affect vulnerable adults (including people who have existing medical or mental health conditions or learning disabilities) and children or young people. This will enable them to consider the most appropriate course of action to limit any potential distress. Where possible and relevant, officers should seek advice and information from a person's support worker to help inform decision making.

Recommendation 4

We recommend that all police forces provide training for their officers in communication techniques to help them manage and de-escalate situations without using force.

Our research has shown that effective communication between officers and the public is crucial in helping to prevent situations escalating to a point where officers need to use force. Training can be particularly useful to give officers the skills and confidence to communicate with groups with specific needs – such as people with hidden impairments, or those for whom English is not their first language.

Recommendation 5

We recommend that all police forces provide people who have had force used against them with information about how to give feedback about their experience, including information about making a complaint.

Complaints are a valuable source of information that can help to improve police practice. All forces should comply with the IPCC's [key principles for access to the police complaints system](#). Forces should publicise how people can give feedback or make complaints. Information should be available in custody suites, police station front offices, or on any records or literature provided to people who have been subject to the police use of force.

Recommendation 6

We recommend that all police forces review local policy and training to make sure that it is consistent with Authorised Professional Practice and other guidance (including the personal safety manual) relating to the police use of force.

Authorised Professional Practice and other guidance developed by the NPCC and College of Policing sets the national standard for how the police should use force, and brings together good practice from across the country.

Recommendation 7

We recommend that all police forces that currently use body worn video keep footage if a complaint has been made, or a referral has been sent to the IPCC, or if the footage relates to a death or serious injury.

Body worn video can assist with the investigation of complaints or allegations of misconduct. Clear standards for retention of footage will help to make sure that important footage is not lost. This in turn will help to make sure that the use of force can be scrutinised properly.

Recommendation 9

We recommend that all police forces take steps to make sure that officers complete records relating to the use of force. They should also set up systems that enable them to monitor how force is being used.

Where use of force records are used effectively they have the potential to provide a valuable insight into how officers are using force. This in turn could help to improve organisational policy and training. Forces need to have systems in place that allow them to identify where officers are potentially overusing or misusing force, and where individuals or communities are potentially being repeatedly or disproportionately affected. These systems should allow forces to monitor the extent to which people's experience varies depending on the protected groups or communities that they are part of.

Recommendation 10

We recommend that all police forces publish data about their use of force and create opportunities for the public to scrutinise this data.

Forces should publish data about the circumstances and context in which force was used (such as during a stop and search encounter or in a custody suite), the type of force used, and the characteristics of the person involved (such as their age, ethnicity, gender, or other protected characteristic). Forces could involve community members in reviewing records about their use of force, relevant complaints, body worn video footage and other data. This would build public confidence in how the police use force.

Recommendation 11

We recommend that all police forces carry out work to ensure that information about complainants' protected characteristics is recorded.

Forces have a duty under equality legislation to ensure that their services do not impact differently on people with protected characteristics, and analysis of complaints statistics can provide valuable information on issues that may need to be addressed.

Recommendation 12

We recommend that all professional standards departments make sure that they have systems in place to monitor the number of allegations recorded about the use of force.

These systems should enable forces to identify any significant changes in the numbers of allegations recorded so that they can take action to identify the reasons for the change and take any corrective action required.

Recommendation 13

We recommend that all police forces regularly dip-sample investigations into complaints and conduct matters about their officers' use of force.

Dip-sampling could be a particularly useful technique where high proportions of upheld appeals have been identified. Forces need to make sure that any organisational learning is cascaded to all relevant officers, and that it feeds into the development of guidance and training. Where relevant, this learning should also be shared with other forces working regionally or nationally to help improve practice.

Recommendation 15

We recommend that all police forces review existing arrangements relating to police attendance and their role at hospitals, mental health units or other medical settings, to minimise the involvement of the police.

Working practices should be consistent with national guidance, and all parties must make sure that they have a clear understanding of the circumstances and the extent to which the police should be involved.

Recommendation 16

We recommend that all police forces respond formally to the recommendations in this report, setting out any action they plan to take in response.

Responses and action plans should be made available for scrutiny by Police and Crime Commissioners, the IPCC, and other stakeholders. This will help reassure the public that action is being taken in response to the findings of this study.

Recommendations for Police and Crime Commissioners

Recommendation 17

We recommend that where police forces record data about the use of force, Police and Crime Commissioners should make sure that this data is collected and analysed. They should also make sure that action is taken to follow-up on any trends or issues of concern.

Police and Crime Commissioners have an important role to play in helping make sure that police officers use force effectively.

Recommendation 18

We recommend that Police and Crime Commissioners make sure that chief constables develop an action plan to take forward the recommendations from this study.

Police and Crime Commissioners have an important role to play in making sure that this research leads to changes in police practice.

Recommendation for the College of Policing

Recommendation 19

We recommend that the College of Policing works with the National Police Chiefs' Council and the police service to take forward the recommendations arising from this study.

As the professional body for the police service the College of Policing plays a vital role in setting standards. It has an important role in ensuring that the findings of this study are taken forward in Authorised Professional Practice, guidance, training, and other work they are involved in developing, to help contribute to visible changes in police practice.

Recommendation for Her Majesty's Inspectorate of Constabulary (HMIC)

Recommendation 20

We recommend that HMIC follows up on police forces' responses to this study and the recommendations it contains as part of its programme of annual PEEL assessments.

HMIC has an important role in examining how forces are responding to issues nationally. Considering force's responses as part of annual PEEL assessments could provide an important national picture of performance in relation to the use of force.

Appendix

A. Methodology

Chapter two

General population survey

A nationally representative general population survey of 1,302 people in England and Wales was conducted over a three-week period in early 2014. The purpose of the survey was to measure the public's perception about the extent to which the police use force and their levels of trust in the way that they do this. TNS-BMRB ran this face-to-face survey on behalf of the IPCC. The survey questions are included in Appendix B.

Public focus groups

We conducted six focus groups in four locations – South Wales, Durham, Birmingham, and London. A total of 44 people attended the sessions and we ensured that those involved reflected diversity in age, gender, life stage⁹¹, ethnicity, and overall trust in the police. The focus group sessions were scenario-based. Participants were asked to consider types of force appropriate in different circumstances, perceptions about the extent of force used, and factors that might influence use. The demographic breakdown of participants was:

- 26 men and 18 women
- 22 White and 22 from a Black or minority ethnic group (BME)
- 29 aged 16 to 35 years, and 15 aged over 35 years.

Interviews with people who had experience of police use of force

We conducted interviews with 13 people who had direct experience of police use of force to provide an insight into the impact this can have. We used voluntary agencies to arrange these interviews. Those involved were from Bristol, Durham, Manchester, and London. Participants were mainly men (11) and from a BME background (ten). It was a challenge to sign up women who had direct experience of police use of force, but we interviewed two. Five interviewees were aged under 34 years and some participants were known to suffer from mental illness.

Police personnel interviews

The six forces that took part in this study were selected based on their size, geography, and spread over the country. We conducted 31 interviews with police personnel. We spoke to officers in a range of roles and ranks to develop an understanding of how the police use and view different types of force, and the rationale for its use. Where we have included views and opinions of the officers we spoke to, these are those individuals' views and are not necessarily representative of police officers or staff generally.

⁹¹ A stage or phase in life – such as being single, working, being a parent of young children, or a parent whose children have left home.

IPCC stakeholder events

The IPCC ran four regional stakeholder events during May 2015. These took place in Cardiff, Leeds, Manchester, and London. Representatives from more than 75 voluntary and community groups attended, working across a diverse range of areas including mental health, custody, BME communities, faith groups, and young people. Attendees were asked to discuss any concerns they had about police use of force, and to consider force being used across a number of scenarios. In November 2015, we held a further roundtable event with Black Mental Health UK to gain further insight into the experiences of black mental health service users and the organisations that work with them.

Current recording by police forces

In early 2014, all police forces were contacted to see if, when, and how they collect data on police use of force and how this data is used.

Chapter three

Public complaints

We analysed complaints from the public recorded by police forces under the allegation categories ‘serious non-sexual assault’ and ‘other assault’ across a five-year time period between 2009/10 and 2013/14. Data on allegations recorded and completed, the demographics of people who made the complaints, and those subject to the complaints have been analysed.

Referrals

We collected and analysed data from referrals received by the IPCC from police forces over a three-month period from 1 April 2014 to 30 June 2014. Referrals include complaints and conduct matters relating to a death or serious injury, serious assault, sexual offence of corruption, a criminal offence or misconduct, and discriminatory behaviour. Forces are also encouraged to refer matters considered to have a significant impact on public confidence⁹². Referrals were included in the sample if they related to alleged police use of force as described in Box B. We identified and analysed 202 use of force referrals. Additional information is provided in Appendix C.

Investigation appeals analysis

We collected data from closed appeals against local police complaint investigations over a three-month period from 1 April 2014 to 30 June 2014. Relevant appeals relating to the use of force were identified from the summary description of the case. A total of 137 appeals were identified and examined. The analysis explored any differences between the outcome of the appeal, the demographics of the people involved, and the assessment about the force used that was part of the complaint. Further analysis of the data collected from appeals is presented in Appendix D.

⁹² Section 8 of the [Statutory Guidance 2015](#) provides further information on the referral criteria.

Chapter four

Analysis of IPCC investigations

We analysed data from IPCC independent and managed investigations relating to use of force that were closed over a five-year period from 2009/10 to 2013/14. We collected information about the characteristics of those who had force used against them and the characteristics of officers who used force. We also looked at the circumstances in which force was used and the types of force used. Some data modelling was also conducted on this data. Finally, we considered the learning and recommendations from the conclusion of the investigations, and whether any misconduct or criminal proceedings followed.

Chapter five

This chapter examines the investigations data, focusing on a particular characteristic or circumstance. These were chosen as a result of existing concerns about police using force against these groups or in particular locations. The chapter focuses on:

- mental ill health
- children
- people from BME communities
- the custody environment

Chapter six

This chapter presents a summary of the recommendations and learning identified in the preceding chapters. It also sets out how the IPCC plans to make sure that the study leads to changes in police practice.

B. General population survey questions

The next set of questions are about circumstances in which the police in England and Wales may use force.

The police are allowed to use **reasonable force** where necessary for a number of purposes, such as self-defence, defence of another person, defence of property, prevention of crime, or during a lawful arrest. The law states that the person using force must honestly believe that it was justified.

The types of force the police are legally able to use when carrying out their duties include use of a baton, Taser, incapacitant spray, a police dog, and restraint equipment such as leg restraints.

Q1 [ASK ALL]
To what extent do you agree or disagree with the following statement?

“The police in England and Wales use force more readily now than they did ten years ago”

SINGLE CODE, FORWARD/REVERSE
ALTERNATING SCALE

Strongly agree

Tend to agree

Tend to disagree

Strongly disagree

SPONTANEOUS ONLY – Don’t know

Q2 [ASK ALL]
How concerned are you about the frequency with which police use force?

SINGLE CODE, FORWARD/REVERSE
ALTERNATING SCALE

Very concerned

Fairly concerned

Not very concerned

Not at all concerned

SPONTANEOUS ONLY – Don’t know

Q3 [ASK ALL]
Armed police are deployed to deal with certain types of incidents in England and Wales. On average, how many incidents do you think there are in a year when the police fire a gun? This excludes incidents where a gun was fired at an animal or where it was fired during training.

INTERVIEWER INSTRUCTIONS: IF RESPONDENT IS UNSURE, PLEASE ASK THEM TO GIVE THEIR BEST ESTIMATE

Record a value 0 ... 5000

SPONTANEOUS ONLY – Don’t know

Q4 [ASK ALL]
How far do you think it is acceptable for a police officer to use these methods of force against an individual in the following situations?

ASK FOR EACH STATEMENT; BATON; TASER; PHYSICAL STRIKE WITH HANDS; POLICE DOG STATEMENTS

A suspect is attempting to escape arrest

A person is threatening to harm themselves

A suspect is assaulting an officer

A suspect is attacking another person with a knife

Scale

Always

Sometimes

Never

SPONTANEOUS ONLY – Don’t know

Q5 [ASK ALL]
How much do you trust the police to use reasonable force in the course of their duties? Do you trust them...?

SINGLE CODE, FORWARD/REVERSE
ALTERNATING SCALE

A lot

A fair amount

Not very much

Not at all

SPONTANEOUS ONLY – Don’t know

C. Referrals

The figures presented in Table C.1 show the number of referrals we received from appropriate authorities over a three-month period. The table sets out how many of these related to use of force. Referral figures are dependent on a force's decision to send the matter to us in the first instance. From a recent report on [referrals](#), we know that there is a lack of consistency across police forces.

Table C.1 Referrals received by appropriate authority, 1 April 2014 to 30 June 2014

Appropriate authority	All referrals received (N)	Use of force referrals (N)	Proportion use of force (%)
Avon and Somerset	35	11	31
Bedfordshire	17	4	24
British Transport	11	4	36
Cambridgeshire	7	0	-
Cheshire	4	1	25
City of London	1	0	-
Cleveland	13	2	15
Cumbria	11	2	18
Derbyshire	10	2	20
Devon and Cornwall	26	6	23
Dorset	2	1	50
Durham	2	0	-
Dyfed-Powys	9	1	11
Essex	24	6	25
Gloucestershire	18	2	11
Greater Manchester	74	20	27
Gwent	17	4	24
Hampshire	10	2	20
Hertfordshire	12	2	17
Humberside	13	2	15
Kent	31	8	26
Lancashire	16	4	25
Leicestershire	22	3	14
Lincolnshire	4	0	-
Merseyside	17	7	41
Metropolitan	181	43	24
Norfolk	12	4	33
North Wales	24	8	33
North Yorkshire	5	2	40
Northamptonshire	3	0	-
Northumbria	8	1	13
Nottinghamshire	20	3	15
South Wales	19	3	16
South Yorkshire	28	6	21
Staffordshire	18	2	11
Suffolk	1	0	-
Surrey	26	0	-
Sussex	12	2	17
Thames Valley	29	9	31
Warwickshire	4	1	25
West Mercia	5	2	40
West Midlands	46	11	24
West Yorkshire	42	5	12
Wiltshire	20	2	10
Ministry of Defence	5	2	40
National Crime Agency	5	1	20
Home Office [^]	1	1	100
HMRC	33	0	-
Civil Nuclear	1	0	-
All Police and Crime Commissioners / Panels	11	0	-
Total referrals	965	202	21

Proportions should be taken with caution where the total number of referrals received is below ten.

[^] This includes UK Visas and Immigration (UKVI), UK Immigration Enforcement (UKIE) and UK Border Force (UKBA).

D. Appeals

The figures presented in Table D.1 show the number of completed investigation appeals over a three-month period and the appropriate authority they related to. The table sets out how many of the completed appeals related to use of force and how many we upheld.

Table D.1 **Type of upheld appeals by appropriate authority, 1 April 2014 to 30 June 2014**

Appropriate authority	USE OF FORCE			NON-USE OF FORCE			Total appeals	Overall upheld
	Upheld appeals		Total completed	Upheld appeals		Total completed		
	N	%	N	N	%	N	N	%
Avon and Somerset	2	50	4	8	44	18	22	45
Bedfordshire	0	-	1	3	43	7	8	38
British Transport	1	50	2	3	21	14	16	25
Cambridgeshire	0	-	2	2	100	2	4	50
Cheshire	0	-	1	1	33	3	4	25
City of London	0	-	0	0	-	4	4	-
Cleveland	1	20	5	0	-	0	5	20
Cumbria	0	-	0	1	100	1	1	100
Derbyshire	0	-	1	3	50	6	7	43
Devon and Cornwall	1	33	3	1	13	8	11	18
Dorset	1	50	2	1	50	2	4	50
Dyfed-Powys	2	100	2	2	100	2	4	100
Essex	0	-	1	3	43	7	8	38
Greater Manchester	2	33	6	1	13	8	14	21
Gwent	0	-	1	1	50	2	3	33
Hampshire	0	-	0	3	50	6	6	50
Hertfordshire	1	25	4	1	20	5	9	22
Humberside	0	-	1	0	-	0	1	-
Kent	0	-	0	0	-	2	2	-
Lancashire	1	100	1	1	100	1	2	100
Leicestershire	0	-	2	1	20	5	7	14
Lincolnshire	0	-	0	1	100	1	1	100
Merseyside	3	75	4	1	33	3	7	57
Metropolitan	23	49	47	77	42	182	229	44
Norfolk	1	33	3	1	33	3	6	33
North Wales	0	-	0	1	50	2	2	50
North Yorkshire	1	100	1	2	17	12	13	23
Northamptonshire	0	-	0	0	-	3	3	-
Northumbria	4	57	7	1	13	8	15	33
Nottinghamshire	1	25	4	2	22	9	13	23
South Wales	0	0	1	1	13	8	9	11
South Yorkshire	2	33	6	4	29	14	20	30
Staffordshire	1	100	1	0	-	9	10	10
Surrey	1	100	1	3	50	6	7	57
Sussex	0	-	2	3	50	6	8	38
Thames Valley	1	33	3	3	60	5	8	50
Warwickshire	1	100	1	2	100	2	3	100
West Mercia	0	-	0	2	33	6	6	33
West Midlands	5	56	9	6	55	11	20	55
West Yorkshire	2	29	7	2	22	9	16	25
Wiltshire	0	-	1	0	-	2	3	-
Ministry of Defence	0	-	0	1	33	3	3	33
HMRC	0	-	0	1	100	1	1	100
Police and Crime Commissioners	0	-	0	4	50	8	8	50
Total appeals	58	42	137	154	37	416	553	38

Proportions should be taken with caution where the total number of appeals completed is below ten.

Table D2 shows the number of people who had the different types of force used against them, and the total number of separate uses of the force types identified in the appeals data.

Table D.2 **Number of force types used, appeals data**

Force type	Number of people	Total uses
Physical hold	107	172
Physical strike	62	84
Handcuffs^	47	49
Taken to ground	40	45
Taser	12	21
CS spray/PAVA	12	12
Restraint equipment	10	10
Dogs	5	5
Baton	6	7
Firearm - drawn	2	2
Other*	8	9

^Handcuffs were only recorded in instances where there was a specific complaint about their use or where their use resulted in a serious injury.

* Six of these were either a grab, poke, pinch, prod, or choke. Of the remaining three, one type involved someone being lifted from their wheelchair, one person allegedly had their hair pulled, and another allegedly had their head hit against a car steering wheel.

E. Additional reading / literature review

HMIC's ten key principles governing the police use of force:

1. Police officers owe a general duty to protect persons and property, to preserve order, to prevent the commission of offences and, where an offence has been committed, to take measures to bring the offender to justice.
2. Police officers may, consistent with this duty, use force in the exercise of particular statutory powers, for the prevention of crime or in effecting a lawful arrest. They may also do so in self defence or the defence of others, to stop or prevent an imminent breach of the peace, and to protect property.
3. Police officers shall, as far as possible, apply non-violent methods before resorting to any use of force. They should use force only when other methods have proved ineffective, or when it is honestly and reasonably judged that there is no realistic prospect of achieving the lawful objective identified without force.
4. When force is used it shall be exercised with restraint. It shall be the minimum honestly and reasonably judged to be necessary to attain the lawful objective.
5. Lethal or potentially lethal force should only be used when absolutely necessary in self-defence, or in the defence of others against the threat of death or serious injury.
6. Any decision relating to the use of force which may affect children, or other vulnerable persons, must take into account the implications of such status including, in particular, the potentially greater impact of force on them.
7. Police officers should plan and control operations to minimise, to the greatest extent possible, recourse to lethal force, and to provide for the adoption of a consistent approach to the use of force by all officers. Such planning and control will include the provision to officers of a sufficient range of non-lethal equipment and the availability of adequate medical expertise to respond to harm caused by the use of force.
8. Individual officers are accountable and responsible for any use of force, and must be able to justify their actions in law.
9. In order to promote accountability and best practice all decisions relating to the use of force, and all instances of the use of force, should be reported and recorded either contemporaneously, or as soon as reasonably practicable.
10. Any decision relating to the use of force by police officers must have regard to the duty of care owed by the relevant police service to each individual police officer in the discharge of his duties. Deployment of police officers in a public order context where force may be used can carry grave risks to their own safety, and so must be the subject of rigorous control for that reason also.

HMIC (2011) The rules of engagement: A review of the August 2011 disorders

There is limited research and data about police use of force in the UK. Drawing upon international studies provides some interesting background and discussion points on police use of force. Much of the existing research is from the United States (US), and this is where a lot of the information summarised below is drawn from.

Studies from the US show that police use more force consistently on non-White individuals. Although certain studies suggest greater resistance from Black Minority Ethnic (BME) communities might be an explanation, others show minority individuals more often have increased rates of complianceⁱ. African Americans reportedly have less support for police use of forceⁱⁱ.

In cities and neighbourhoods in the US that are made up primarily of minority groups, or have greater concentrations of economically disadvantaged households, there is an increased likelihood of force being used during police contact. Similarly, those with higher proportions of BME residents reported more instances of police disrespect and use of force than those with predominantly White ethnic populationsⁱⁱⁱ. They also report greater use of force when police presence is met with resistance^{iv}. While use of force may result from the need to police higher crime areas, police tactics remained more dependent on both neighbourhood affluence and demographic composition than individual behaviour^v.

Studies in the US have shown that perceived danger has a significant impact on the type and degree of force used by an officer^{vi}. This is particularly true when there is anticipated danger in officer-initiated or emergency calls, or during vehicle response when lights and sirens are used^{vii}. Taken together, neighbourhood characteristics and anticipated resistance link with stronger types of force used^{viii}.

Major force, as defined in one US study as punching, kicking, and baton use, was found to be most often used at night and in public spaces, with the use of force highest during

evening and early morning^{ix}. The expectation of threat may also predetermine officer action. There is some indication that an officers preconceived judgement may mean that they interpret environments and individuals as threatening before actual encounters^x.

Some literature from the US suggests that stereotyping of people and environments may be useful to police officers attending a situation. However, consistent negative biases towards some sections of society can lead to greater levels of force becoming the normal practice. These behaviours then become reinforced rather than challenged^{xi}.

Experiences from Australia and the US show that those with mental health disorders who encounter the police have an increased risk of harm. This is partly explained by use of restraint and related factors such as excited delirium or positional asphyxia^{xii}. In order to respond more effectively to mental health related incidents, officers would benefit from increased scenario-based training in communication and verbal de-escalation techniques. This is particularly useful during times when misidentifying mental illness as intoxication might encourage use of force^{xiii}.

During physical restraint, officers should consider that a person struggling may indicate the inability to breathe rather than resistance, and sudden compliance may be a medical emergency such a loss of consciousness or cardiac arrest. It is possible that pre-existing conditions predispose some individuals to harm from restraint, regardless of what techniques are employed or correct use. In one US study, restraint was applied correctly in 57 of 63 restraint-related deaths^{xiv}.

Restraint death is often accompanied by “resisting interaction with police, erratic behaviour, violent behaviour, suspected or known drug intoxication, cessation of breathing immediately following a struggle”^{xv}. There are ongoing concerns with restraint and the connection between stimulating hormones, due to legal and illicit drug use or psychiatric illness, overexertion, and heart failure^{xvi}.

Research in the US and Switzerland suggests that a small number of officers are responsible for a large proportion of force used by police^{xvii}. In one such study, 10% of officers accounted for half of all use of force incidents. Research from Europe and North America suggests that the presence of ongoing stressful situations associated with police work, is correlated with both increased aggression and a greater reliance on force^{xviii}.

In the US, there is some indication that younger, less experienced officers rely more on physical force^{xix}. In addition to employing force more often, these individuals escalate force more rapidly than experienced or older officers do. However, other research suggests that officers considered highly skilled resort to force more often yet are able to gain control over situations faster and with fewer injuries to either officer or subject^{xx}. Therefore, it is the officer's skill, as opposed to their age

or experience, that is the important feature in the application of force. Younger officers and those identified as highly skilled may be chosen to patrol higher crime areas and shifts, when use of force is more likely^{xxi}. By contrast, in the US and Caribbean, officers with higher educational backgrounds are believed to rely less on force and more on conflict resolution and non-physical strategies^{xxii}.

Studies in the US and Europe have shown that rigorous training, proactive supervision, strict disciplinary procedures, knowledge sharing between officers, and role-playing, help establish less force-dependent organisational cultures^{xxiii}. In addition, systematic recording practices help flag patterns of excessive force and allows for analysis of a variety of person, officer, and situational characteristics. Some evidence suggests a correlation between history of force use and prior complaints^{xxiv}.

ⁱ Garner et al. 2002; Terrill and Mastrofski 2002; Mastrofski et al 2002; Smith 1986.

ⁱⁱ Elicker 2008; Halim and Stiles 2001.

ⁱⁱⁱ Brunson and Miller 2006; Halim and Stiles 2001; Liska and Yu 1992; Smith 1986; Mastrofski et al. 2002; Smith and Holmes 2014; Terrill and Reisig 2003.

^{iv} Lersch et al. 2008.

^v Smith and Holmes 2014.

^{vi} Terrill and Reisig 2003.

^{vii} Garner et al. 2002.

^{viii} Crawford and Burns 2008.

^{ix} Friedrich 1980; Phillips and Smith 2000; Sherman 1980.

^x Bayley and Mendelsohn 1968; Chen and Bargh 1997; Crank 1998; Herbert 1997; Meehan and Ponder 2002; Smith and Holmes 2014.

^{xi} US, Terrill and Reisig 2003; Holmes and Smith 1998; 2012; Bolton and Feagin 2004; Liska and Yu 1992; NAACP and the Criminal Justice Institute at Harvard Law School 1995; Smith and Alpert 2007.

^{xii} US, Mohr et al. 2003, Australia, Kesic et al. 2013.

^{xiii} Kesic et al. 2013.

^{xiv} Mohr et al. 2003.

^{xv} Hall and Butler 2007: 47; Hall et al. 2013.

^{xvi} Mohr et al. 2003.

^{xvii} Grant and Grant 1996; Lester 1996; Manzoni and Eisner 2006.

^{xviii} Bornewasser et al. 1996; Gershon et al. 2002; Kop and Euwema 2001; Kop et al. 1999; Maibach 1996; Anshel 2000; Biggam et al. 1997; Violanti and Aron 1995.

^{xix} Brandl and Strohshine 2013.

^{xx} Bayley and Garofalo 1989.

^{xxi} Brandl and Strohshine 2013.

^{xxii} Caribbean, Bennett 1997; US, Weisburd et al. 2001.

^{xxiii} Bayley and Garofalo 1989, Bennett 1997; Europe, Stenning et al. 2009.

^{xxiv} Brandl and Strohshine 2013; Terrill et al. 2003; Walker and Alpert 2000.

References

- All-Party Parliamentary Group for Children (APPGC). 2014. *"It's All About Trust": Building Good Relationships Between Children and the Police*. London, UK: National Children's Bureau
- Anshel, M.H. (2000) "A conceptual Model and Implications for Coping with Stressful Events in Police Work." *Criminal Justice and Behaviour* 27: 375-400
- Bayley, D.H. and Mendelsohn, H. (1968) *Minorities and the Police: Confrontation in America*. New York, NY: Free Press
- Bayley, D.H. and Garofalo, J. (1989) "The Management of Violence by Police Patrol Officers." *Criminology* 27(1): 1-24
- Bennett, R.R. (1997) "Excessive Force: A Comparative Study of Police in the Caribbean." *Justice Quarterly* 14(4): 651-686
- Biggam, F.H., Power, K.G., MacDonald, R.R., Carcary, W.B. and Moodie, E. (1997) "Self-perceived Occupational Stress and Distress in a Scottish Police Force." *Work & Stress* 11: 118-133
- Bolton Jr., K. and Feagin, J.R. (2004) *Black in Blue: African-American Police Officers and Racism*. New York, NY: Routledge
- Bornewasser, M., Eckert, R. and Willems, H. (1996) *The Police in Contact with Foreigners: Problems, Stressful Situations and Assaults*. Munchen, Germany
- Brandl, S.G. and Strohshine, M.S. (2013) "The role of officer attributes, job characteristics, and arrest activity in explaining police use of force." *Criminal Justice Policy Review* 24: 551-572
- Chen, M. and Bargh, J.A. (1997) "Non-conscious Behavioural Confirmation Process: the Self-fulfilling Consequences of Automatic Stereotype Activation." *Journal of Experimental Social Psychology* 33: 541-560
- College of Policing. (2013) *Public Order: Police Use of Force*. London, UK: College of Policing
- Crank, J.P. (1998) *Understanding Police Culture*. Cincinnati, OH: Anderson
- Crawford, C. and Burns, R. (2008) "Police Use of Force: Assessing the Impact of Time and Space." *Policing and Society* 18(3): 322-325
- Elicker, M.K. (2008) "Unlawful Justice: An Opinion Study on Police Use of Force and How Views Change Based on Race and Occupation." *Sociological Viewpoints*
- Friedrich, R.J. (1980) "Police Use of Force: Individuals, Situations and Organizations." *Annals of the American Academy of Political and Social Sciences* 452: 82-97
- Garner, J.H., Maxwell, C.D. and Heraux, C.G. (2002) "Characteristics Associated with the Prevalence and Severity of Force used by the Police." *Justice Quarterly* 19(4): 705-746
- Gershon, R.R., Lin, S. and Lin, X.B. (2002) "Work Stress in Aging Police Officers." *Journal of Occupational and Environmental Medicine* 44: 160-167
- Grant, J.D. and Grant, J. (1996) "Officer Selection and the Prevention of Abuse of Force." Pp. 150-164 in *Police Violence: Understanding and Controlling Police Abuse of Force*, edited by W.A. Geller and H. Toch. New Haven, CT: Yale University Press

- Halim, S. and Stiles, B. (2001) "Differential Support for Police Use of Force, the Death Penalty, and Perceived Harshness of the Courts: Effects of Race, Gender, and Region." *Criminal Justice and Behaviour* 28(3): 3-23
- Hall, C. and Butler C. (2007) *National Study on Neck Restraint in Policing*. Canadian Police Research Centre. Ottawa, ON: Government of Canada
- Hall, C., Votova, K. and Wood, D. (2013) *Prospective Analysis of Police Use of Force in Four Canadian Cities: Nature of Events and Their Outcomes*. Defence Research and Development Canada, Ottawa, ON: Government of Canada
- Hannan, M., Hearnden, I., Grace, K. and Bucke, T. (2010) *Deaths In or Following Police Custody: An Examination of the Cases 1998/1999–2008/2009*. London, UK: IPCC
- Herbert, S. (1997) *Policing Space: Territoriality and the Los Angeles Police Department*. Minneapolis, MN: University of Minnesota Press
- Her Majesty's Inspectorate of Constabulary (HMIC). (2009) *Adapting to Protest*. London, UK: HMIC
- Her Majesty's Inspectorate of Constabulary (HMIC). (2011) *The Rules of Engagement: A Review of the August 2011 Disorders*. London, UK: HMIC
- Her Majesty's Inspectorate of Constabulary (HMIC). (2015) *The Welfare of Vulnerable People in Police Custody*. London, UK: HMIC
- Holmes, M.D. and Smith, B.W. (2012) "Intergroup Dynamics of Extra-Legal Police Aggression: An Integrated Theory of Race and Place." *Aggression and Violent Behaviour* 17: 344-353
- Independent Advisory Panel on Deaths in Custody. (2010) *Report of the Cross-sector Restraint Workshop held in May 2010*. London, UK: Independent Advisory Panel on Deaths in Custody
- Independent Commission on Mental Health and Policing*. (2013) London, UK
- Independent Police Complaints Commission (IPCC). (2014) *IPCC Review of Taser Complaints and Incidents*. London, UK: IPCC
- Ipsos-MORI for the IPCC, (2014) *Public confidence in the police complaints system 2014*
- Kesic, D., Thomas, S.D.M. and Ogloff, J.R.P. (2013) "Estimated Rates of Mental Disorders in, and Situational Characteristics of, Incidents of Nonfatal Use of Force by Police." *Social Psychiatry and Psychiatric Epidemiology* 48: 225-232
- Kop, N., Euwema, M. and Schaufeli, W. (1999) "Burnout, Job Stress and Violent Behaviour Among Dutch Police Officers." *Work and Stress* 13: 326-340
- Kop, N. and Euwema, M.C. (2001) "Occupational Stress and the Use of Force by Dutch Police Officers." *Criminal Justice and Behavior* 28: 631-652
- Lersch, K.M., Bazley, T., Mieczkowski, T. and Childs, K. (2008) "Police Use of Force and Neighborhood Characteristics: An Examination of Structural Disadvantage, Crime, and Resistance." *Policing and Society* 18(3): 282-300
- Lester, D. (1996) Officer Attitudes toward Police Use of Force. Pp 180-190 in *Police Violence: Understanding and Controlling Police Abuse of Force*, edited by W.A. Geller and H. Torch. New Haven: Yale University Press
- Liska, A.E. and Yu, J. (1992) "Specifying and Testing the Threat Hypothesis: Police Use of Deadly Force." Pp. 53-68 in *Social Threat and Social Control*, edited by A.E. Liska. Albany, NY: State University of New York Press
- Maibach, G. (1996) *Polizisten und Gewalt Innenansichten aus dem Polizeialltag (Everyday-life Perspectives from the Police)*. Reinbek, Germany: Rowohlt

- Manzoni, P. and Eisner, M. (2006) "Violence Between the Police and the Public: Influences of Work-Related Stress, Job Satisfaction, Burnout, and Situational Factors." *Criminal Justice and Behavior* 33: 613-645
- Mastrofski, S.D., Reisig, M.D. and McCluskey, J.D. (2002) "Police Disrespect toward the Public: An Encounter-based Analysis." *Criminology* 40(3): 519-551
- Meehan, A.J. and Ponder, M.C. (2002) "Race and Place: The Ecology of Racial Profiling African American Motorists." *Justice Quarterly* 19: 399-430
- Mind and Victim Support (2013) *At Risk, yet Dismissed: The Criminal Victimisation of People with Mental Health Problems*. London, UK: Mind
- Mohr, W.K., Petti, T.H. and Mohr, B.D. (2003) "Adverse Effects Associated with Physical Restraint." *Canadian Journal of Psychiatry* 48(5): 330-337
- National Association for the Advancement of Colored People (NAACP) and the Criminal Justice Institute at Harvard Law School. (1995) *Beyond the Rodney King Story: An Investigation of Police Conduct in Minority Communities*. Boston, MA: Northeastern University Press
- Phillips T. and Smith, P. (2000) "Police Violence Occasioning Citizen Complaint." *British Criminological Journal* 40: 480-496
- Sherman, L.W. (1980) "Causes of Police Behaviour: The Current State of Quantitative Research." *Journal of Research in Crime and Delinquency* 17(1): 69-100
- Smith, D.A. (1986) "The Neighbourhood Context of Police Behaviour." Pp. 313-341 in *Crime and Justice: A Review of Research*, vol. 8, edited by A.J. Reiss Jr. And M. Tonry. Chicago, IL: University of Chicago Press
- Smith, M.R. and Alpert, G.P. (2007) "Explaining Police Bias: A Theory of Social Conditioning and Illusory Correlation." *Criminal Justice and Behavior* 34: 1262-1283
- Smith, B.W. and Holmes, M.D. (2014) "Police Use of Excessive Force in Minority Communities: A Test of the Minority Threat, Place, and Community Accountability Hypotheses." *Social Problems* 61(1): 83-104
- Stenning, P., Birkbeck, C., Adang, O., Baker, D., Feltes, T., Gabaldon, L.G., Haberfeld, M., Machado, E.P. and Waddington, P.A.J. (2009). "Researching the Use of Force: The Background to the International Project." *Crime, Law and Social Change* 52: 95-110
- Terrill, W., Alpert, G.P., Dunham, R.G. and Smith, M.R. (2003) "A Management Tool for Evaluating Police Use of Force: An Application of the Force Factor." *Police Quarterly* 6(2): 150-171
- Terrill, W. and Mastrofski, S.D. (2002) "Situational and Officer Based Determinants of Police Coercion." *Justice Quarterly* 19: 101-134
- Terrill, W. and Reisig, M.D. (2003) "Neighborhood Context and Police Use of Force." *Journal of Research in Crime and Delinquency* 40: 291-321
- Violanti, J.M. and Aron, F. (1995). "Police Stressors: Variations in Perception Among Police Personnel." *Journal of Criminal Justice* 23: 287-294
- Walker, S. and Alpert, G. (2000) "Early Warning Systems for Police: Concept, History and Issues." *Police Quarterly* 3: 32-152
- Weisburd, D., Greenspan, R., Hamilton, E., Bryant, K. and Williams, H. (2001) *Abuse of Police Authority*. Washington, DC: Police Foundation

Independent Police Complaints Commission (IPCC)
90 High Holborn
London
WC1V 6BH
Tel: 0300 020 0096
Email: enquiries@ipcc.gsi.gov.uk
Website: www.ipcc.gov.uk

Copyright IPCC © 2016
ISBN: 978-0-9573365-4-4

March 2016