# THE LIFE OF A TOP BOY

## On trauma and violence in the community



October 2023

Cover Image by James Hopkirk, South London Stories

## The Life of a Top Boy

*On trauma and violence in the community* 

**Dr Ron Dodzro** Clinical Psychologist, Researcher, Writer

Winston Goode, Founder, CEO Juvenis

Research funded by: University of Hertfordshire Dr Ron Dodzro Juvenis

Report designed by Sofia Akel



Juvenis, a grassroots organisation in Lambeth whose vision is a future where all young Londoners have more than one chance to fulfil their potential.

## Winston Goode

Founder, CEO

"Over the years, Juvenis has positioned itself as an organisation that reframes and challenges the harmful assumptions and stereotypes that are affecting young Black boys and men in Lambeth. This report provides an evidence base to the work we do and is the starting point for future research exploring the various factors affecting this group. Juvenis has always prided itself on providing physical and psychological spaces, where young Black boys and men can talk about the trauma and loss they have experienced."

## Duwayne Brooks OBE Chair of Trustees

"I am proud of the unique work Juvenis continues to undertake to disrupt the negative speculation, assumptions and stereotypes that affect young Black boys and men. Identifying and speaking to those directly affected by these life experiences opens up pathways for earlier intervention programmes, improved trauma identification processes and the development of future frameworks that deliver better outcomes. The recommendations presented speak to a plan that can be used to change the lives of those affected by the issues detailed in the report. I sincerely hope that going forward, further research can be undertaken encompassing all of London's boroughs."

# Dr Ron Dodzro

#### Clinical and Community Psychologist, Researcher, Writer, Lecturer and Consultant

I am a Black man. I was born in South London in the 90s. My teenage years were at a time when South London boroughs had some of the highest rates of gang-affiliated violence and murder (Pitts, 2020). Growing up, I witnessed the prevalence and negative consequences of gang-affiliated violence on my community. I have seen the impact of it on myself, family members and friends. Reflecting on my clinical experience spanning many years and locations, I have never seen anyone gang-affiliated seek formal support for their mental health. I am often left wondering about my position within a system failing in its provision of care towards these men; men I heavily relate to who are deemed 'hard to reach.' I am hoping for this research to amplify the voices of those easy to ignore, and to be used as a resource for statutory services to rethink how they engage with Young Black Men (YBM) in general.

I feel extremely fortunate and privileged to be authoring this Research Summary when my life could have been hugely different. I use my life experiences to shine a light on the marginalised voices that go unheard. My intersecting identities as a Black man, a Clinical and Community Psychologist and a Doctoral Researcher provide a sense of responsibility whereby it is my moral and ethical duty to use these identities to create reform and societal shifts in the narratives surrounding Black men. This requires me to challenge the inaccessibility of service provision and care. My anger, passion, and hopes have fuelled this research. My core values around advocating for an equitable society have been engrained throughout this project.

I want to express my gratitude to those who shared their stories. Thank you, Jamaica, Trinidad, Zambia, Ghana, Istanbul, America, Brazil, and South Africa, for taking a chance and giving up your time to discuss your experiences with me. I learned a lot from you all and will never forget your openness whilst sharing personal elements of your lives. This never would have been possible without your valuable contribution! You have done this. I feel privileged to have heard your experiences. Thank you for trusting me. This is just the beginning.

Juvenis... I don't think words can express the impact you've had on this research and report. When people talk about organisations that work with marginalised young Black men, who are authentic and genuinely trying to make a difference, Juvenis need to be part of that conversation. They put a lot of trust in me and had faith that I would create something meaningful. Thank you for seeing the value in this research and the possibilities.

I dedicate this report to Us Lot. Those from Endz. Those from The Culture. The mandem who continue to navigate spaces never designed for them. Big up yourselves! You've never been hard to reach, just easy to ignore. The world chooses to ignore you, but I will not!

Foreword - Dr Ron Dodzro	3
Acronyms	5
Terminology	6
Executive Summary	9
Introduction	13
Discourses and Stereotypes of Black Men in the UK	13
Macro-Level Narratives of the 'Gang'	14
Systemic Injustices	14
The Mental Health of Those Gang-Affiliated	15
The Mental Health of Gang-Affiliated Black Men	15
Exposure to Violence	15
Trauma and PTSD Amongst Those Gang-Affiliated	16
Methodology	17
Findings	20
The Imprint of Trauma	20
The Unspoken Normalisation of Living with Violence	22
The Tapestry of Emotional and Behavioural Responses	23
Socio-economic Struggle	25
Power and Bias	27
Systemic Injustice	29
Calm within the Storm	30
Expectations and Realities of Therapy	33
Conclusion	35
Recommendations	36
Glossary & London Idioms	40
Bibliography	42

CONTENTS

- YBM Young Black Men
- APR Annual Percentage Rate
- IPA Interpretative Phenomenological Analysis
- **PET** Personal Experiential Theme
- **GET** Group Experiential Theme
- CR Critical Realism
- DSM Diagnostic and Statistical Manual of Mental Disorders
- PTSD Post Traumatic Stress Disorder
- BLM Black Lives Matter
- MPS Metropolitan Police Service
- CJS Criminal Justice System
- BAME Black, Asian and Minority Ethnics
- PRU Pupil Referral Unit
- JE Joint Enterprise
- PT Perpetrator Trauma
- **CASP** Critical Appraisal Skills Programme
- APA American Psychological Association
- PAR Participatory Action Research
- GT Grounded Theory
- NA Narrative Analysis
- DA Discourse Analysis
- TA Thematic Analysis
- UK United Kingdom
- USA United States of America
- SUK Stick Up Kids
- TZ Terror Zone
- RTM Podcast- Realer Than Most
- EMDR Eye Movement Desensitisation and Reprocessing
- NFA No Further Action
- NHS National Health Service

Having a shared understanding of key terms and concepts is important. People have different ideas and definitions when thinking about concepts. Therefore, I encourage you to think about whether you agree with or challenge my interpretations. The terminology provided will help you see the lens and viewpoint I approached this research with.

#### Black

It's a skin colour categorisation used to describe populations with brown complexions believed to be of African ancestry. In this study, 'Black' describes people who self-identify as being of African or Caribbean descent.

#### Young

Young adulthood is used to describe those aged 18-35. The vast majority of 18–29-year-olds, and 30–35-year-olds in the UK count themselves as 'young' (YouGov, 2018). This provided rationale to use this age range and to label it 'young'. Ashby (2020) also found being male, being aged under 35 and being Black were powerful predictors of being systematically targeted by institutions such as the police, creating more rationale for using this age group and understanding their experiences.

#### Gang

Any research exploring gangs should clarify its operational definition. The term 'gang' is used haphazardly in popular discourse, the media, and the CJS with its use being stigmatising and racist (Williams & Clarke, 2016). I am aware of how emotionally-charged the word can be and understand people will have different perceptions, beliefs, and values around the word especially when we know the ramifications for YBM's lives when this label is attached to them.

The term has been used in this research because it has become increasingly used within policy documents and is a term public policy is more familiar with (Barrows & Huff, 2009). The term has also been used because one hope of this research is to change the narratives for those who tend to put YBM into groupings such as 'gangs'.

On reviewing multiple definitions, I am using the definition from Pitts (2008), based on research across three London boroughs. He identified gang as a loose, umbrella term. So, in this context I am referring to street gangs which are a street-based group of individuals of varying ages, often referred to as 'olders' or 'youngers' (Vigil, 2003), who: (1) see themselves and are seen by others as a distinct group; (2) engage in crime and violence; (3) have territory which they believe belongs to them (typically a housing estate, postcode, or town); (4) have some form of identifying feature (typically colours, signs, names); and (5) engage with conflict with other, similar, gangs.

#### Gang-affiliate(d)

The term gang-affiliate has been used to describe people who participate in gangs. It was used because its coverage is broad, and involvement can look different for people. It relates to people who may have a connection with a gang, are part of a gang, or are associated with gangs (Buckle & Walsh, 2013). Self-identification was used to determine individuals appropriate for this research.

#### Violence

This research is focused on community violence inflicted by another individual or by a group of individuals (Kilpatrick, 2004). I have concentrated on physical violence which is the intentional use of physical force or power against another person. This can be threatened or actual resulting in a high likelihood of injury, death, psychological harm, maldevelopment or deprivation (Heath, 2002).

#### Traumatic event.

The DSM-V (American Psychiatric Association, 2013) notes a traumatic event as exposure to actual or threatened death, serious injury, or sexual violence. By exposure you could be a victim, a witness or exposed via learning about something happening to a family member or friend.

#### Trauma

Trauma is a psychological and emotional response to a distressing situation which overwhelms a person's ability to cope and impacts their sense of self and who they are (Garland, 2018). This response can also harm a person's sense of safety and impact their ability to regulate their emotions and navigate relationships.

#### Post-traumatic stress disorder (PTSD)

PTSD is a psychiatric diagnosis given when certain criteria within the DSM-V are met, based on the collection of behavioural, cognitive, and emotional responses to traumatic events. These 'symptoms' are understandable and adaptive responses (Lewis & Marsden, 2021). The event itself does not determine whether something is traumatic but is dependent on the individual's experience of the event.

## **Executive Summary**

## Introduction

There is speculation that young Black men (YBM) exposed to gang-affiliated violence are likely to have negative impacts on their psychological functioning, but not enough research has explored this. It is important that we hear from YBM themselves as experts in their lived experiences. This research is the first known study focusing on the qualitative accounts of trauma responses from YBM in London exposed to gang affiliated violence, and their sensemaking within these experiences. It has brought innovation to the field, offering a rich detail of a phenomenon rarely considered within the research literature. This research offers a detailed, nuanced account of YBM's experiences of trauma related to gang affiliated violence. These accounts provide a rare opportunity for greater clarity and understanding of these phenomena.

8 YBM in London between the ages of 19-32 were interviewed in order to gather the stories of their lived experiences of gangaffiliated violence and trauma. All participants were obtained by Juvenis, an organisation that has dedicated its time and resources to working with young people, who would not typically access help within statutory services.

This study involved the recruitment of a 'hard-to-reach' population. Organisations often label YBM from low socioeconomic backgrounds as a 'hard to reach' or a 'hard to study' population. Their narratives and stories are never included. This research challenges these 'hard to reach', 'hard to study' notions by grounding itself in YBM's voices.

The research question being explored was:

What are YBM's experiences of trauma related to gang affiliated, physical violence?

This question was disaggregated into the following four research sub questions:

1. **The environment:** *How does the environment of YBM affect their trauma?* 

2. **Violence:** How do YBM make sense of their experiences of violent situations?

3. **Trauma:** How do YBM make sense of trauma/PTSD?

4. **Management:** *How do YBM manage trauma from exposure to violent situations?* 

8 themes were identified from the data. Together, the themes described the complex interlink of their experience marked by trauma, socially deprived environments, systemic abuses, discrimination, healing, and coping.

Participants attempted to make sense of their longstanding traumas and the subsequent responses. These traumatising experiences elicited fear among other emotions. The persistent nature of violence in their communities created a sense of normalisation, and behaviours were adopted to navigate these threats. These threats were not only from peers but from the police also. Attempts were then made to cope with the ongoing threats of violence.

## **The Environment**

Participants revealed the ways in which their environments impacted their experiences of violence. From hostile environments to socioeconomic struggles, their experiences shaped their worldview and their sense of self.

#### Socioeconomic Struggle

Participants spoke to this socioeconomic struggle regarding location and the inevitability of being caught up in troubling

or challenging situations due to geographical and social associations. Gang affiliated violence was considered unavoidable, highlighting the impact of socio-geographic circumstances on life trajectories. Most of the participants expressed a sense of fatalism, noting the mere act of being born in a specific area exposes individuals to violence and the reality of constant conflict and danger in environments.

#### **Interactions with the Police**

When exploring their identities as victims and witnesses of violence, participants spoke about their violent encounters with the police, painting a vivid picture of these experiences and their profound impact. These personal encounters showcased their experiences of violent, aggressive, and confrontational policing.

#### **Racism and Being Black**

Participants drew attention to the experiences and perceived safety risks of their environment simply based on being Black. They reflected an implicit understanding of societal power dynamics and protective privileges for white people. Racial profiling was discussed which led to conversations about broader systemic and racial disparities.

## Violence

Participants spoke about their experiences of reality where gang-affiliated violence is a constant presence which they may have perpetrated, witnessed or fallen victim to.

#### Normalisation

Within their accounts, it became apparent that abnormal experiences of violence were becoming normalised due to the everyday reality of being exposed to such situations. Violence became a relentless companion to their environments.

### Trauma

Participants reflected on the intricacies of their life experiences as one of continuous fear, highlighting the deep-seated and multifaceted nature of trauma occurring from gang affiliated violence.

#### Imprint of Trauma

The imprint of trauma and its psychological consequences were explored in relation to gang affiliated violence. Participants were able to make sense of their traumatic experiences and the chronic nature of these hardships. The YBM in this research attempted to make sense of concepts such as 'trauma' and 'PTSD' and attempts were made to define them, with an emphasis on the longstanding nature of it.

#### **Trauma Responses**

Due to the constant threat of violence within their environments, participants shed light on the nature of reactions stemming from violence. They were able to reflect on the emotional impact as well as the variety of behaviours they had developed to adapt to their violent environments such as alertness, paranoia, and hypervigilance.

### Management

Participants spoke of their individual journeys of grappling with their trauma and finding ways to heal. They were optimistic about healing from their traumas and felt recovery was possible. There was hope and an optimistic outlook despite their hardships.

#### **Self-Employed Strategies**

The men in this study recognised the adaptive strategies they had employed to help them cope with their experiences of gang-affiliated violence. They had learnt many ways to adapt and manoeuvre around their traumas, using strategies to find a sense of order and direction in their lives.

#### Therapy

Some of the participants had received therapeutic input from various sources and were able to highlight their experiences. In exploring their nuanced perceptions of therapy, I was able to understand the role of therapeutic interventions in the healing process for this population.

## **Recommendations**

This research produced new knowledge about how YBM exposed to gang-affiliated violence make sense of their experiences, and the trauma responses they portray which challenge traditional perceptions of trauma and PTSD. This research has the potential to influence developments in statutory services, as well as raising awareness and inspiring action. Clinical implications for working with this population are considered. The recommendations have been geared towards mental health professionals, statutory services, and further research. However, this research and the recommendations can be used more broadly by those who work with young Black men exposed to community or gangaffiliated violence and those at policy level making key decisions about this population. These recommendations seek to address the experiences of YBM exposed to gang affiliated violence relating to the four key research sub-questions above (environment, violence, trauma, management).

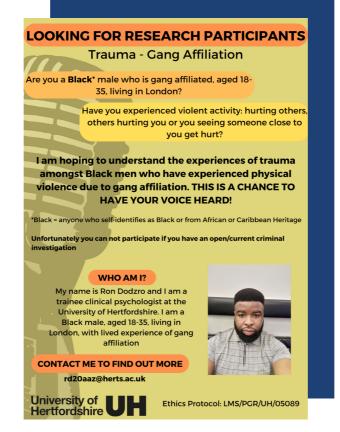


Image: Research Poster

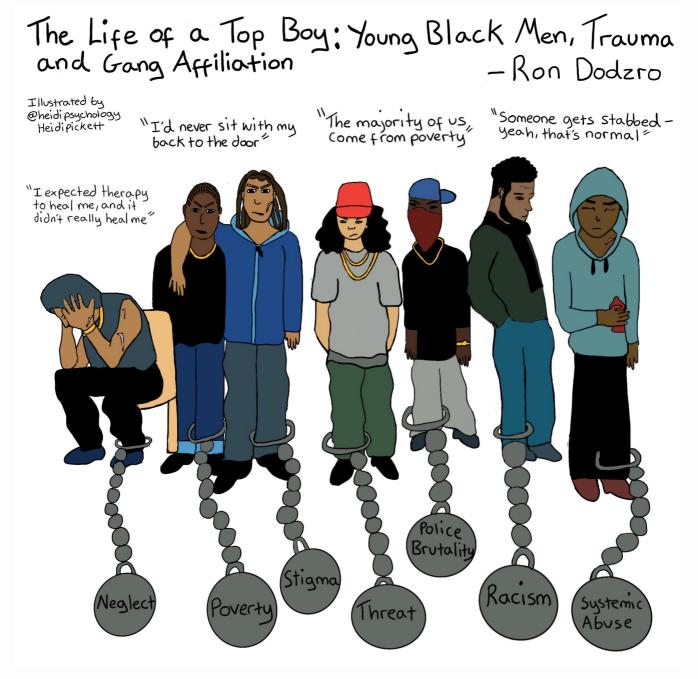


Image: Illustration highlighting trauma experienced by young Black men

## Introduction

## **Discourses and stereotypes of Black men in the UK**

A stereotype is a set of beliefs an individual or group may have about the characteristics or attributes of a group of people which then transcends to individuals within that group (Jussim et al., 2015). Stereotypes concerning Black people have become engrained within society's culture and history whereby it has become acceptable to assume that a criminal's social identity is Black even if their race is unknown (Fiske, 2017). The negative stereotypes surrounding Black men are constantly on show from the media to the wider community. The consequence of this is that Black men are exposed to increased levels of prejudice.

The police are a great example of an institution which continues to inform negative and unhelpful narratives that exist around Black men and is a powerful institution which continues to turn a blind eye to these social injustices (Shiner et al., 2018). The House of Commons Home Affairs Committee (2021) found that racist prejudice and disadvantage in all aspects of policing was an ongoing issue twenty-two years on from the Macpherson Report (Macpherson et al., 1999). The Casey Review concluded that the internal culture of the police was institutionally racist (Casey, 2023). Unfortunately, the negligent deaths of Black men such as Wayne Douglas, Mark Duggan, or Chris Kaba at the hands of the police was not enough for this review to have taken place. It took the kidnap, rape, and murder of a white woman for an independent review to occur exploring the culture and standards of behaviour from the police. The deadly oppression of Black men is not a new phenomenon, it is just one that has been actively ignored. The negative societal portrayals of Black men continue to feed into discourses and policy regimes that disadvantage and shorten their life experiences (Banaji et al., 2021). The sinister and dangerous depictions of Black men have dire consequences on their realities and how they are understood and considered within society.

Data from the Police Powers and Procedures statistics (Home Office, 2022) confirms racial inequalities within police interactions with communities. Individuals who self-identified as Black were six times more likely to be searched than those from a white background, across England and Wales. They were 3 times more likely to be arrested than those who identified themselves as white (Home Office, 2022). Between 2019-2020, 37,926 Black individuals aged 15-19 were stopped and searched in London. Of this overall figure, 36,502 were male (Metropolitan Police Service (MPS), 2020). Despite these alarming statistics, Black people had the highest outcome rates of 'No further action' (NFA) following a stop and search (73%) (Home Office, 2022). This data shows the disproportionate and systematic targeting of Black males and reinforces the unfounded notion that they are dangerous and need to be restricted.

The Lammy Review (Lammy, 2017) acknowledged that the disproportionate stereotyping of young Black boys and men as those who are gang-affiliated was a significant factor contributing to the high level of arrests, charges, prosecutions, and imprisonment of this population. As mentioned previously, Black boys and men are disproportionately labelled as being gang-affiliated, particularly in London. The Gangs Matrix is a database of suspected gang members in London. There are an estimated 3000-4000 individuals on this matrix from a London population of more than 8 million (Densley & Pyrooz, 2020). Amnesty International UK (2018) found that 80% of the individuals on this database were Black, with many having a 'zero-harm score' meaning they had the lowest risk of committing violence. Many of the issues identified in the Lammy Review remain stubbornly persistent and Black people remain overrepresented in the CJS (Ministry of Justice, 2020).

## Macro-level Narratives of the 'Gang'

Mainstream media outlets are notorious in their reporting of violence across the UK which involves knife and gun crime. This has garnered attention from academics and politicians. Documentaries and news segments have surfaced about the exploitative and evil nature of gangs involved in violence. This has increased and maintained public fears, whilst endorsing an array of government responses (Hesketh, 2021). The public's conception of gangs is one that has been fabricated and distorted by the media, leading to an increase in support for tougher legislation and more punitive measures for those found to be gang affiliated (Burney, 2009).

Continued exposure to gang violence in the media can desensitise people to its real-life impact, making it seem less serious than it really is (Fanti et al., 2009). The fear generated because of the overestimated prevalence of gang violence has led to negative outcomes like increased policing, racial profiling, and systemic racism. What the media also doesn't acknowledge is that for those who have experienced gang affiliated violence, whether that be as a victim, witness, or perpetrator, seeing this violence depicted in the media can be re-traumatising (Brown et al., 2021).

## **Systemic Injustices**

It is concerning how interventions seem to involve new powers to control and punish those affected by gang violence. Individuals are seen as the sole culprits of their actions, with families also having fingers pointed at them for enabling violence. However, gang violence is a result of political and social environments (Bacchini et al., 2020). It could be argued that instead, the problem is systemic, and the systems around young people should be held accountable for creating violent social environments (Gebo, 2016). Far too long have wider social structures escaped critical gaze. Gang violence is not a disease, but rather a symptom of an unequal society plagued with racism, inequality, and poverty (Cottrell-Boyce, 2013). While society allows communities to be plagued by these issues, the cycle of gang violence will continue. When reactive policies like heightened police presence or stop-and-search tactics are implemented, they can contribute to a sense of fear and mistrust in communities which is a form of collective trauma (Hirschtick et al., 2019). This is particularly the case in Black communities which are targeted and over-policed (Smith Lee & Robinson, 2019).

One example that demonstrates the interlink between Black and collective criminality, are the masses of YBM who have been imprisoned in the UK due to joint enterprise (JE) (Williams & Clarke, 2016). JE is a law which permits a group of people to be prosecuted for the same crime even if they had different roles in the crime, and even if they weren't in the proximity of the crime (Young et al., 2020). Nearly 79% of those from an ethnic minority convicted under JE indicated they were labelled as gang affiliated during their trial compared to 39% of white prisoners (Bridges, 2013). Feeding into this disproportionality is the overrepresentation of YBM on gang matrixes, which provide prosecutors with ammunition to allege gang affiliation (Pitts, 2014). JE has become a weapon for control and punishment; and because gang violence is racialised, JE disproportionately affects YBM (Nijjar, 2019). They are bearing the brunt of this with their rights being infringed and curtailed, which impacts their mental health.

## **The Mental Health of Those Gang-Affiliated**

An area often overlooked in research is the relationship between gang affiliation and mental health. Research is starting to evidence how gang-affiliated young people are disproportionately affected by mental health difficulties (Macfarlane, 2019). Khan et al. (2013) during health screening initiatives found 40% of gang members had severe behavioural problems and a quarter had a suspected mental health diagnosis. Coid et al. (2013) used standardised screening tools and found: 86% of gang members had antisocial personality disorder, 59% an anxiety disorder, 34% had attempted suicide, 25% had psychosis and 20% had depression. Gang membership increased the likelihood of developing all conditions except depression.

The relationship between gang affiliation and mental health is bi-lateral. Many of the factors attracting young people towards gangs relate to their mental wellbeing. Being in a gang may offer individuals the ability to have status, identity, and companionship (Wood, 2014). They provide support and belonging for young people who have weak relationships with family and friends (De Vito, 2020). Engaging in criminal activity is not only tolerated in a gang but becomes a group norm, providing cohesion and unity through shared risks, loyalty, and secrecy (Leverso & Matsueda, 2019). The gang provides an individual with more than just an outlet for criminal behaviours; it offers protection, social support, excitement, and the opportunity for power (Sandhu, 2020).

## The Mental Health of Gang-Affiliated Black Men

Turning specific attention to the mental health of Black men who are gang-affiliated, Black communities are often exposed to high levels of discrimination, including unwanted police attention through stop-and-search and disadvantage (Aldridge et al., 2013; Singh & Burns, 2006), which can negatively impact mental health. When a YBM has been charged with a crime and is in custody, this is usually when their mental health needs are acknowledged (Barrett et al., 2006). Being in custody and visits to A&E following gang violence may be the only times when those who are gang-affiliated encounter a health professional. The CJS and the NHS need to be better equipped to identify mental health problems relating to gang-affiliated violence (Frisby-Osman & Wood, 2020). It is unsurprising Black men have negative attitudes towards statutory services who should be supporting them, when their experiences are drenched with racism, loss of independence and autonomy, and mistrust (Keating & Robertson, 2004). Their needs are not being understood, recognised, or met which is why help-seeking rates are low amongst this population (Lindsey & Marcell, 2012).

## **Exposure to violence**

Violence is often considered the most typical characteristic of gangs and gang affiliation (Van Hellemont & Densley, 2021). Gang environments are rife with threats from other gangs, intra-gang conflict and the police, meaning those who are gang affiliated are often exposed to disproportionate amounts of violence (Decker et al., 2013). Violence also serves the function of validating masculinity, generating admiration from others and enriches reputation and status (Lauger, 2020; Harris et al., 2011). Being gang-affiliated increases the

likelihood of exposure to community violence, living in a warzone and seeing dead bodies (Kerig et al., 2016). There is also an increased risk amongst this population to be both perpetrators and victims of violence (Taylor, 2008). A consequence of exposure to violence is a negative impact on mental and physical health (Fairbrook, 2013).

#### **Trauma and PTSD Amongst Those Gang-Affiliated**

Exposure to violence amongst those who are gang-affiliated puts them at greater risk of psychological trauma (Beresford & Wood, 2016). As a result, they are more likely to experience trauma responses outlined in the diagnosis of PTSD (Harris et al., 2013), with these individuals six times more likely than those who are not gang-affiliated to experience symptoms of PTSD (Petering, 2016). The more violence someone is exposed to, the greater these trauma responses will be (Abram et al., 2004).

Individuals exposed to violence are more likely to endure trauma responses or PTSD for longer periods of time (Kulkarni et al., 2011). Common responses people often report are re-experiencing traumatic events, avoidance, irritability, anger, numbness, and dissociation (Frewen et al., 2019). Due to the devastating nature of these, people can often be left feeling their environments are unsafe and threatening (Overstreet & Braun, 2000). To manage this, they engage in strategies and behaviours to minimise the impact of these symptoms such as fight-or-flight behaviours and hypervigilance (Bovin & Marx, 2011). Despite the prevalence of gang affiliation in the UK, research is limited in comparison to the USA (Hallsworth & Young, 2004). Little is known about the mental state of those who are

gang affiliated here in the UK (Wood & Alleyne, 2010). Societal attention on gang affiliation has focused on perpetration of violence with minimal thought to the psychological wellbeing of this group (Beresford & Wood, 2016).

## Methodology

This research aimed to examine the experience of trauma relating to gang-affiliated violence for YBM in the UK and how they make sense of their experiences. The research explored the following research question:

#### What are YBM's experiences of trauma related to gang-affiliated, physical violence?

Four further sub-questions were explored:

- 1. How does the environment of YBM affect their trauma?
- 2. How do YBM make sense of their experiences of violent situations?
- 3. How do YBM make sense of trauma/PTSD?
- 4. How do YBM manage trauma from exposure to violent situations?

### **Expert by Experience Consultation**

Having individuals with lived experiences relevant to a phenomenon of interest is invaluable in improving research processes and outcomes (Trivedi & Wykes, 2002). For me it was important that the experts by experience consultants had an active role in the decisionmaking to ensure outcomes felt appropriate and relevant to YBM. Consultants were instrumental in the development, design and undertaking of the research. They helped to focus the research question to one that reflected the needs of YBM. They also informed the communication material to better suit participants and provided guidance about recruitment strategies. It was important the consultant roles did not feel tokenistic, and payment was offered for their time and wisdom in the study.

## Recruitment

Due to the target population for this research and time pressures to complete the work, it was anticipated recruitment would be the one of the biggest challenges. For this reason, the recruitment strategy was thorough, and a multitude of recruitment strategies were employed. A research flyer and research video were created emphasising the importance of distributing different forms of information.

## **Participants**

In total 8 YBM exposed to gang-affiliated violence were recruited. All participants were provided by Juvenis. All participants were male, with participants aged between 19-32. Pseudonyms and ages of participants are presented in Figure 1.

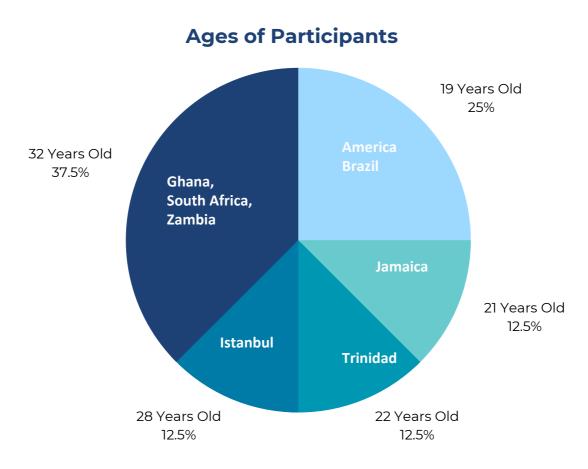


Figure 1: Ages of Participants

## **Ethical Considerations**

Ethical approval was obtained from the University of Hertfordshire Health and Human Sciences Ethics Committee (protocol number: LMS/PGT/UH/05089). Information regarding confidentiality and its limits were provided to participants, both verbally and in writing. The interviews were held with only the researcher and participant being present. The room was soundproof and was away from the entrance. Participants also had their backs to the door so if anyone walked past, they wouldn't be easily identifiable. All participants provided pseudonyms, ensuring no data was personally identifiable. They were not asked for identifiable information, with every effort made to protect their confidentiality. I informed participants that the findings would be written up in the form of a thesis, which would include anonymised interview transcripts. I also let them know of my plans to disseminate the findings at conferences, and within publications, and that their anonymity would remain intact.

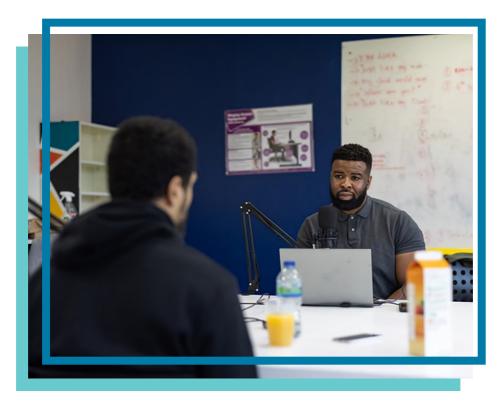
Before interviews commenced, I asked participants to share any specific needs or requests they could think of to make the interview more comfortable, and accommodations were made. Example requests included providing food and drink and reviewing the interview schedule in advance. All participants were shown the interview schedule, so they were aware of the topics being covered which put them at ease. Breaks during the interview were offered so participants didn't feel obliged to just sit with possible unease and discomfort. It was also emphasised to participants they did not have to talk about anything they did not feel comfortable with.

### **Interviews**

Semi-structured interviews were used because they allow researchers to be curious and explore lines of enquiry whilst having the flexibility to adapt questions which provides a fuller, richer account of experiences (Smith & Osborn, 2015).

Podcast equipment was used to keep the research trauma-informed. It was a positive way of inducing engagement and provided a relaxed environment to discuss intense topics. Traditional interviewing styles with the use of a dictaphone were deliberately avoided to not mimic police interviews, which participants may have been exposed to. The hope was not to mirror such traumatic environments.

Flashcards were also used for engagement and to support participants in articulating their understanding. They contained words related to the research questions (Area, Safety, Gang-affiliated, Attacked, Police, Threats, Witness, Committing Violence, Trauma/PTSD, Unusual experiences, Managing Trauma/PTSD, Talking to People, Anything Else). These were used as visual aids when questions were asked as people often struggle to articulate their involvement in violence or the emotional impact of a violent event (Harding, 2014). Interviews lasted between 22-87 minutes.



Dr Ronald Dodzro conducting interviews Credit: James Hopkirk, South London Stories

## **Findings**

Through different stages of analysis and interpretation eight themes were identified.

#### Themes

The Imprint of Trauma
The Normalisation of Living with Violence
Emotional and Behavioural Responses

 Socioeconomic Struggle
 Power and Bias
 Systemic Injustice
 Calm within the Storm

Expectations and Realities of Therapy

## **The Imprint of Trauma**

YBM exposed to gang affiliated violence in London face unique challenges which increase the likelihood of developing mental health difficulties. Listening to their voices deepens our understanding of how YBM feel in the aftermath of exposure to a traumatic event, and their traumatic stress symptoms when exposed to gang affiliated violence. Participants spoke of the profound imprint of trauma and its psychological consequences, developed from exposure to gang affiliated violence. They were able to make sense of their experiences and the chronic nature of these hardships. The YBM in this research attempted to make sense of concepts such as 'trauma' and 'PTSD'. Attempts were made to define trauma, "seeing it as consistent because if you don't deal with it or acquire help for it or process it then it's going to be with you forever... and it's very real" (Ghana). Participants articulated what trauma meant to them, with an emphasis on the longstanding nature of it. Istanbul, South Africa, and Zambia gave a similar account to Ghana, speaking about the lasting imprint of trauma. The narratives of these four participants suggest an awareness of trauma shaping their identity and psychological state over time:

"I would define trauma as more or less the harsh experiences, or the rough experiences one has ... um, something that like holds ... I would say trauma is something that stays with them, comes back ... might come and go ...um, that's part of trauma" (Istanbul).

"so, for me, I think trauma is just lived experiences that sit in your sub-conscious ... but they form part of your everyday habits without you realising sometimes" (South Africa).

"Yeah, it's just like triggers that have changed you over the course of time" (Zambia).

As a result of exposure to gang-affiliated violence, some of the participants believed they had PTSD: *"I know from past experiences that I've been through... I've got some sort of PTSD ... like you just have flashbacks, and you just think about the times that's happened before" (Jamaica).* Participants described their own understandings of PTSD, for example Brazil related it to overthinking and stress, whilst also acknowledging its wide range of potential

triggers.

"It's what PTSD means innit ... get me ... you're just over-thinking ... you're stressed ... after a while it's gonna take an effect on you.... but the thing is, PTSD ... it can be caused by anything really. It's like it just depends on who you are and how you take things" (Brazil).

Brazil's excerpt emphasises the importance of individual interpretation and emotional processing in the development of PTSD.

Istanbul was diagnosed with 'PTSD' and Trinidad with 'Complex-PTSD' which he said was a *"disease"* that *"infested your mind and body"*, and one in which *"you can't escape"*. This suggested a sense of powerlessness and lack of control over his own thoughts and emotions.

"It can be like you're re-living completely something that's happened in the past... and it can fuck up your sleep, it can break you down, it can even make you more violent, it can even make you suicidal because it's like you keep re-living these traumas, and it was already as bad as it was the first time" (Trinidad).

Istanbul suggested there was a significant shift in his mental state following his introduction to the concept of trauma and PTSD; the knowledge gained appeared to have made him more aware of his psychological experiences, causing a shift in his internal narrative and self-perception.

"Since I was stabbed, I didn't really think I had it – and I feel like because this was kind of even thrown on me and I started LISTENING to it ... it started messing with me because up until the stages of the trauma I dealt with, if I didn't know anything about it, I felt like it wouldn't have been on my mind, the mental side of things" (Istanbul).

Ghana explicitly linked gang affiliation and the potential for trauma:

"I guess being gang affiliated would mean you would have naturally been through things that you shouldn't have been through or shouldn't have experienced ... it can be something as simple as someone getting stabbed in front of you, where, because you're gang affiliated, you can get stabbed by being affiliated. You could be there when your people are stabbing people".

His comment asserts that being gang-affiliated would often entail experiencing situations inherently traumatic, reflecting an understanding that the connection between gang involvement and trauma is highly likely and an ordinary part of life for those gang-affiliated.

All the participants spoke about the profound and enduring impact of trauma resulting from gang affiliated violence, stating "some of these things have stayed with us for years" (Istanbul). They acknowledged the presence of trauma in their lives and the inevitability of it, seeing it as a "part of life everyone goes through" (Brazil). They showed an understanding that "everyone just takes it in differently" (Brazil), and that "it'll just come out in various ways, at different times and like at different points in different situations" (Ghana).

Trauma impacting individuals differently was a sentiment also acknowledged by Istanbul. However, his understanding of trauma emphasised its ability to shape one's identity: "Trauma is something that can affect someone in so many different ways ... um, trauma plays with a person's identity" (Istanbul).

Brazil described a deep-seated fear and stress linked to the environment he grew up in. This was reflected in the physical symptoms of a racing heart experienced as soon as he got back to his local area:

"It's got to the point now my heart just races naturally... soon as I touch the area or if I know I'm coming to the area, my heart's racing. I've left the area once, yeah... the calm I felt like I didn't have to worry about NOTHING because I knew that I was just good, just in a good place. Touch the area again (clicks his tongue) ... boy! Heart was racing. I didn't want to leave the house" (Brazil).

There seemed to be a consensus that trauma is not just about the superficial scratches visible struggles leave, but also about the deep indelible marks engraved into people's lives. Istanbul was grappling with the effects of trauma due to his daily reminder in the form of his physical scars after being stabbed multiple times. The frequency of similar violent incidents in his environment would often trigger painful reminders of his own experience:

"I feel like in your mind, you feel like, yeah – it's happened – even though you're dealing with it ... "ah, yeah, but it's happened already like, why are you still talking about it?" ... that sort of attitude. Not for me inside, not for me internally ... I think about this every day ... I deal with it every day. I look at my scars in the mirror every day and even if I don't think about it, it's going to come eventually" (Istanbul).

Continuing to illustrate the theme of the imprint of trauma, Jamaica described the harrowing reality of living amidst deaths, potential imprisonment, police brutality and *"other traumas"*. His tone and language hinted at being overwhelmed by his exposure to traumatic events.

"You know how it gets with deaths and ... going to ... like going to jail and all these things like that ... it's those ... you've got them traumas and other traumas in the ends and that...it's just so much" (Jamaica).

## The Unspoken Normalisation of Living with Violence

Participants spoke of a harsh reality where gang-affiliated violence is a constant presence leading to issues with trauma and PTSD. They discussed a reality where the abnormal becomes normalised; violence becomes a relentless companion to their environments: *"It's normal innit... because after a while, you're just immune to it ... it's just like everything is normal ... some people will say like this life is not normal, but I think it's normal" (Jamaica).* Normalisation appeared to help participants navigate their everyday lives within a context of constant threats to their safety and well-being. America referenced his block as a *"fucking shoot-out range"*, indicating the extreme violence he is privy to. His interview presented his ongoing awareness of violence in his environment which is constantly heightened by the presence of death and danger, which he perceives as a normal part of life. The language he used demonstrated his internalisation and acceptance of violence and death as part of everyday existence: *"We hear it like, it's local you get it... its around us... So, we're alert ... A couple hours later you see the news ... you see reh teh teh is dead ... like it's life ... it's normal" (America).* Ghana's interview also expressed viewing gang-affiliated violence as the norm and an accepted behaviour within his community. He reflected on his conditioning, revealing how his prior experiences have shaped his responses:

"You know when you hear that so-and-so got stabbed, or so-and-so died, or so-and-so got shot ... it's a story that you keep hearing over and over again. So, you start to normalise it. You know, it's not a shock to me. I'm not surprised. I'm not ... and that's being a product from the environment... we've been exposed to so many things so young that everything becomes normal to you ...that's how we live, that's where we're from, so, yeah, that's normal. Someone gets stabbed – yeah, that's normal" (Ghana).

Istanbul, Brazil, and Trinidad all attempted to better understand this normalisation and reported their perceptions. Istanbul alluded to the harsh reality that the normalisation of violence *"makes us tougher"*, suggesting a form of resilience borne out of necessity.

#### "You know when you've been through those sort of things and you've accumulated a number of them incidents, it's like you kind of just live through it, like it's nothing, even though it is something. It makes us stronger in a way because we dealt with that very early" (Istanbul).

Brazil shared generational differences in the perception of what is considered 'normal'. He suggested older individuals recognised certain experiences or conditions as abnormal, while his own generation considered them as normalised.

#### "Probably like the older lots, yeah, they would call it that innit because they know that's not normal innit ... our generation, they just ... it's normalised" (Brazil).

YBM within this research had become accustomed to violence. Desensitisation is likely to be masking the trauma experienced by those exposed to gang affiliated violence (Kerig et al., 2012). The lack of a holistic, conceptual framework explaining different responses of exposure to violence, means trauma responses from gang affiliated individuals are labelled as sociopathic or antisocial.

## The Tapestry of Emotional and Behavioural Responses

Individuals caught amidst this violence experience a range of emotional upheavals. These emotional responses, in turn, manifest in a variety of behaviours. The avoidance, hypervigilance, and fear participants articulated are adaptive coping strategies within the context of chronic threats to physical and psychological safety in their environments (Gaylord-Harden et al., 2008). The constant state of alertness, paranoia and hypervigilance in participants led to feelings of unsafety and failure to feel secure: *"you could probably*"

*never feel safe living in the ends" (Istanbul).* Both America and Istanbul spoke thoroughly about paranoia. America felt he was constantly *"Paranoid 24s"* and equated this with PTSD. The interview with Istanbul also highlighted the persistent *"element of paranoia"*, which indicated his past traumas continue to influence his present. Living in an environment with chronic, persistent gang-affiliated violence will cause individuals to develop a heightened sense of threat, which promotes the development of paranoia (Wood & Dennard, 2017).

Trinidad and Istanbul reported feeling shocked by the gang affiliated violence they had experienced: *there was a lot of shock, and it was like a word of depleted, it takes away a certain amount of energy" (Istanbul)*. Trinidad's shock and surprise from his stabbing occurred *"because it was from someone that I was cool with"*. It also came from seeing his own flesh, indicating a detachment from his own body and a sense of disbelief. He could have been dissociating from the physical reality of the injury to distance himself from the pain and trauma associated with the event.

## "When I got shanked in my hand, I remember seeing my flesh, and the first thing I'm thinking is... "Rah why's it white like that?" It was just mad... it didn't hit me straight away" (Trinidad).

Some of the participants spoke about fear. They acknowledged fear is often perceived as a negative emotion but can also serve a positive function keeping people alert and prepared in potentially dangerous situations. "So, I don't walk in fear. No ... let me not lie, men like to do bravado ... there is fear, but it's calculated fear ... like you'd be a fool not to be scared" (South Africa). Trinidad reflected on the universal nature of fear, suggesting no one can be truly fearless in the face of a threatening situation involving a weapon. Rather, individuals act in self-defence out of fear of harm or death.

"A lot of guys won't mention it because fear is perceived as a bad thing. If you get in a shank fight, or a man's got a knife, and you got a knife, you're going to stab that person because you'd rather not get stabbed yourself – you want to live – that, there, is fear. You are fighting in fear. People just perceive fear as– RUN! It's not the case" (Trinidad).

Trinidad and Ghana engaged in perspective-taking and reflection, considering the consequences of the violence they have perpetrated towards others. Emotions such as guilt, embarrassment and shame were mentioned when they spoke about the gang affiliated violence they had enacted which they perceived to be unjust.

#### "Just imagine if my family knew what I did – do you know what I mean? And how I would feel if somebody did that to my child and them kind of things there" (Ghana).

"So, if I feel I've overdone to you, compared to what you did to me, I will feel bad, or if it's someone that I know and like I just let out my anger on them unjustly and like I did it over the top, then yeah, I feel guilty" (Trinidad).

All participants revealed certain behaviours reflective of heightened vigilance and cautiousness. There was an exaggerated intensity of behaviours to detect threats, which in

an environment such as theirs could be seen as a survival instinct.

"I always park my car in a way that's easy to get out. I do a reverse park into a space; I make sure it's a thing where I can just drive and go. I'm not trying to come and do a manoeuvre ... in case anything happens, it's easy access out" (Ghana).

"So, when I step into a room now, I need to know where the exit is. I need to know everyone in the dance... I can't be caught by surprise" (South Africa).

"I'd never sit with my back to the door ... even right about now I'm sitting with my back to the door ... when someone walks past, I can FEEL it" (Zambia).

These protective measures depict their continuous strategic efforts to minimise potential threats. There was a personal code of caution and vigilance in the face of potential danger, seeing these behaviours as necessary for self-preservation. They all emphasised the importance of strategic thinking and deliberate choices to minimise risk. Ghana, South Africa, and Zambia wrestled with whether these behaviours were manifestations of trauma or PTSD, or simply streetwise behaviour. There was a degree of disconnection from the idea their behaviours could be trauma responses. They didn't acknowledge the need for precautions may itself reflect living in a threatening environment which can be traumatic.

"Being from the ends ... ANYTHING can happen so, prevention is better than cure, park the car in a way where it's (makes a speeding off noise) ... and don't park right outside... is that PTSD? Is that trauma? I don't know, or am I being street-wise? ... am I just being street-wise if I need to come for my car?" (Ghana).

"When it's past 12 midnight, and I'm coming home and there's no one on the street and I'm about to enter my house, I always look over my shoulders. Because I feel like there might be someone lurking outside. I don't think that's PTSD" (South Africa).

### Socio-economic Struggle

Low socioeconomic environments are identified as areas where residents are more likely to be exposed to gang-affiliated violence and traumatic stress (Raby & Jones, 2016). Participants spoke about individual and community struggles with poverty, growing up in poor communities and the interlink with gang-affiliated violence (Beech et al., 2021). The experiences of participants highlight location and environment as chronic stressors with profound implications for mental health recovery. Participants in this research had limited opportunities to access mental health services which meant they were left to struggle independently with unaddressed trauma.

Gang-affiliated violence in the community is exacerbated by structural violence and social determinants of health (Eitle et al., 2006). The findings provide insights into how violent environments contribute to traumatic stress symptoms amongst YBM. America, Ghana, Jamaica, and South Africa all spoke to this socioeconomic struggle regarding location and the

the inevitability of being "caught up" (America) in troubling or challenging situations due to geographical and social associations you "get involved with" (America). Gang-affiliated violence was considered unavoidable "because of the area we lived in, we couldn't avoid it" (Brazil) and the "birth lottery" (South Africa), highlighting the impact of socio-geographic circumstances on life trajectories. Most of the participants expressed a sense of fatalism, noting the mere act of being born in a specific area exposes individuals to violence and the reality of constant conflict and danger in environments: "it's a warzone, innit. Everywhere around me is a warzone... I just know like the borough that I'm in – it's a warzone" (Jamaica).

#### "I just get caught up, like where you live ... and then other people out there from other blocks say you're from this block ... then you get involved... its long" (America).

Trinidad and Ghana both used imageries to describe the negativity and bleakness of their environments. *"Concrete"* came up for both participants, symbolising a harsh, chaotic, challenging environment. Ghana touched on the presence of drugs, crime, and poverty, implying these were commonplace and expected elements of his environment and how criminal activity offered immediate gratification due to a lack of long-term prospects.

"But the area itself – it's sad to say – but a typical story of an area filled with drugs, I guess money but money in a negative way ... but it was a lot of lost young boys and girls who are in search of instant gratification with a lot of things – whether that be make money to go and buy a car, to go out and buy a chain, or to buy nice clothes. So, the area itself was always like a concrete jungle in a way where we're here, but this is all we know. So, crime was there, poverty was there" (Ghana).

#### "Because it's a shithole! It's ugly! It's just blocks and surrounded by drugs, thieves, violence, police, you know. If I'm going to be poetic here – Black and grey, concrete – everything's just miserable" (Trinidad).

Istanbul used the metaphor of a *"cage"* to describe his environment, an image denoting confinement, and a lack of freedom.

"My ends ... I don't live there anymore thank God for that ... It's like it's a cage ... when you're living and where I'm from ... you don't get to really SEE the other side. Or you don't understand that there's an extended part of the environment ... we're more caged into our neighbourhood and the people that are in it, and the type of people that are in it as well" (Istanbul).

Due to the harsh environment filled with gang affiliated violence and trauma, participants expressed a common aspiration to escape this challenging environment. Physical relocation was seen as a symbol of personal growth and progress. Ghana and Trinidad emphasised the social and cultural importance of *"getting out of the ends"*, signifying the achievement of socioeconomic progress and avoidance of violence.

"As I get older, nah, I don't want to be in run-down hood areas, like, I want to leave ... I can't say me growing up in these areas was good for me" (Trinidad). Poverty, as connected with the class system in the UK, consistently came up amongst the participants' accounts: "our crud comes from poverty … there's a class war …it's a class thing" (South Africa); "Someone gets stabbed – yeah, that's normal. Whereas from someone else's area, let's say somewhere like Kingston, or Twickenham, them areas there you're not going to hear them kind of things" (Ghana).

Due to socioeconomic struggles, it was common for participants to engage in criminal activity to lift their economic standing: *"it makes life ... it makes things easier ... it makes things easy, because a man's living a shit life already, you think I care about selling drugs? I just wanna make bread. I just wanna get rich – that makes things easier" (Zambia).* This points to the intersection of socioeconomic status and criminal activity.

The impact of race/institutional racism was also linked to socioeconomic differences, where some participants compared their experiences to white individuals. For example, America contrasted his life of hardship and struggle, to the experience of white people: "A black guy that's been through it... most of these white yutes won't get it – they've had it easy, they've got it on the table for them... they can go to mumsy or a family member that's got them. We can't do that ... we gotta go out there, get it". This reveals a perceived lack of familial support and resources, leading to a sense of necessity to fend for himself in a challenging world. Living in low socioeconomic environments with chronic violence offers no respite from traumatic stressors and can increase risk of re-traumatisation and future violent events. The narratives of the YBM in this sample articulate that when it comes to violence, psychological distress and wellbeing, location matters.

### **Power and Bias**

In this research, YBM's narratives regarding police violence provided insights into the relationship between their trauma experiences and their interactions with the police. Police interactions were seen as a chronic and traumatic stressor. The presence of police signified danger amongst participants (Staggers-Hakim, 2016). The inability to resist or exert violence again police victimisation meant participants were left feeling helpless and out of control. Brazil, Istanbul, South Africa, Trinidad, and Zambia all illustrated their personal encounters with the police, showcasing experiences of violent, aggressive, and confrontational policing. Not only were participants needing to be hypervigilant for gang affiliated violence but also for violence perpetrated by the police.

#### "Rugby tackling, like when they rush you and they put the cuffs on you. Or like gripping you up bare, moving you here, moving you there, like violently, like pushing and stuff" (Trinidad).

Istanbul, Trinidad, and Zambia reflected on police group violence, questioning the necessity of it particularly when there was an imbalance in numbers and age:

"I feel like if there's bare of you, you have no need to do that – to have six of you ... at the time I was 19, if there's like six of you, why are you lot all roughing up one human being for... I just view it as unnecessary (Trinidad). "But because of my size, my name and everything that comes with it, they called like 15 officers just to stop and search me! Yeah, it just went left, next thing you know they're trying to drag me to the floor and stuff like that over a e-scooter, I was flabbergasted" (Zambia).

Istanbul believed the force used by the police was excessive, especially given his age at the time, highlighting an imbalance of power and a strong sense of injustice. He attempted to consider the perspective of the police officers involved, but still questioned the necessity of their actions against a young boy. The perception of the incident as traumatic is implied by his use of the word *"force"*, suggesting physicality and the use of overwhelming power.

"The force that was used. Remember, I said I was only 14 – young, vulnerable boy, the amount of police they use to like tackle you – I'm not with someone who has a weapon or something like that ... so, that's part of why I say 'abuse of power'... a 14/15-year-old boy, like what could be done to prevent this from happening, or how could this be avoided is how I would be looking at it" (Istanbul).

South Africa described a strong resistance to the excessive force employed by the police, emphasising a systematic flaw in the understanding and application of this power. He indicated a keen awareness of the social contract theory, emphasising that the police's authority is derived from the people. This theory stipulates that individuals have created an agreement with the police in which they agree to give up their power to enforce their own rights and entrust this power to the police for it to be used to benefit the public (Cohen, 2022). South Africa perceives the police as failing in this agreement, resorting instead to undue violence and force. The emphasis on appropriate use of power underscores his desire for a fair, just system where the police are respectful of individual rights and dignity.

"I've said this to police officers a few times... You lot have the power to enforce the law – we don't! We gave you that power so remember how you are using your power ... all these situations where you are using excessive force, it's not necessary. You lot have the power, but you're misusing the power. I don't understand why you lot think it's necessary to be using excessive force and then use the fact that, "Oh you don't know how dangerous the person is." Well, that's why we've given you the power, so you find measures and means to be able to do it, correctly. DO YOU KNOW WHAT I MEAN? For me that's a very, very poor excuse and you should figure out ways to do this in a manner that is appropriate" (South Africa).

Brazil equated the presence and role of the police with opposing gangs, "*Opps*", viewing them as an additional threat rather than a source of protection. He implied the police abuse their power and act arbitrarily, leading to a perception of unjust targeting and discrimination.

"It's the same thing as like the opps will pull up or whatever. This time, yeah, it's not a thing where like you can run and do all of these things or jump in and that. They're just another opp ... they just got the authority to actually do something to you... they can literally spot a guy and just be like, "Yeah (clicks his tongue) ... don't like him, he's hitting a cell tonight" ... he didn't even have to have anything on him" (Brazil). Trinidad spoke in detail about the perceived freedoms of police officers and his acceptance of this reality. His interview expressed a normalisation of police misconduct due to its frequency with no negative consequence. There is a lack of accountability for police actions and victims of police violence feel powerless to seek justice. Trinidad also mentioned a lack of trust in the justice system to hold police officers accountable for their actions.

"I know the police have certain freedoms where they can push it a bit and get away with it because they are police officers. It's just how it is but the thing is, unfortunately, a lot of us on the outside, don't know the laws of what the police can actually do. They can bend it to a certain extent, they can push you around, they can rough you up a little bit, hold your hand, pin you to the car and stuff like that and we've seen that so like its accustomed as police behaviour and they never get into trouble, so I'm assuming they are legally allowed to do that... And you can't go to the court and say, "They pinned me to the car", "So what!" Or "They rugby tackled me to the ground and cuffed me", "So what!" (Trinidad).

The power differential of having authority figures impose their dominance exacerbated the traumatic nature of these police interactions. Participants felt powerless to hold the police accountable for their actions.

## **Systemic Injustice**

Participants drew attention to the experiences and perceived safety risks of their environment simply based on being Black. Istanbul and Jamaica acknowledged YBM face significant scrutiny and potential conflict when navigating unfamiliar environments. Istanbul suggested other demographics, like older white women, may not face the same degree of conflict or risk, reflecting an implicit understanding of societal power dynamics and protective privileges for white people.

"So, like another young Black man that's not from my area ... not anyone could just come in because someone's going to check you, and ask you what ends you're from, and if they don't recognise you are from this area it could cause some conflict and problems. But if we are looking at sort of anyone, like maybe an older white lady, I wouldn't really say she would share the experience of being robbed or mugged, or anything like that" (Istanbul).

Trinidad described a sense of self-stereotyping among YBM, where they question and profile other YBM but do not do the same to white or Asian individuals. This creates an environment where individuals from those demographics can feel safer, while YBM face scrutiny and potential danger. Trinidad saw this as the result of subconscious biases and stereotypes individuals may not be aware of.

"It's funny because you see like road yutes and stuff ... if you're a white boy, you're pretty much fine. Black yutes will stereotype their own people or even yutes that are mixed with Black ... man see a Black yute – "where you from? Where this? Where that?" If you're white, or even if you're Asian, sometimes it's like you're just a civilian" (Trinidad). Both Brazil and Istanbul offered a candid account of racial profiling. Brazil shared experiences of being targeted due to being Black and his age, associating his identity with suspicion and criminality. The comparison to *"white kids"* emphasises his belief in racially biased treatment.

"They violated ... we were walking from a shop, and they see us. They're saying, "we're stopping you because of robberies... there's robberies happening and murders" ... we literally had just come from the shop ... they pull up, they see two black kids, black yutes together ... pulled us. It's bullshit ... started searching my shit... seeing if our phones were stolen ... it's mad ... just because we're black. You know, if that was two white kids, they would have just LEFT them" (Brazil).

Istanbul also made a comparison to the experiences of a white man, indicating a shared experience and understanding within his community.

"Absolutely, absolutely. I'm sorry, but we hear this all the time – we're not going to find them act like this to a white man and he's clearly panicking about something ... they're going to leave him alone or they're going to be concerned" (Istanbul).

Istanbul used the phrase "trained from young" to indicate the racial divide as an integral part of his upbringing and shared communal knowledge. "I don't think any young Black male will tell you of a decent encounter with the police" generalises his experiences and emotions, pointing to broader systemic issues and racial disparities. "They're not our friends" strongly illustrates the emotional divide and perceived adversarial relationship between the police and his community.

## **Calm within the Storm**

From a young age, boys are socialised to reject vulnerability and to be tough. For YBM exposed to gang affiliated violence, toughness is a key protective strategy (Lawson, 2013). This protective strategy and perceived masculinity could be masking the presence of trauma symptoms, especially in environments with chronic threats of danger (Slegh et al., 2021).

Talking as a coping strategy came up frequently for Ghana, Jamaica, Trinidad, and South Africa, but this differed: "*If it's to a loved one, a close friend, family member or getting professional help*" (South Africa). They recognised the limitations of traditional gender roles and sought to break away from expectations they should be stoic. Ghana pointed out the coping mechanism of humour and banter to process past traumatic events with his male friends. His recurring use of phrases such as "*jokey way, banter and buss joke*" signals the reliance on laughter as a tool to cope with and discuss past occurrences to neutralise their emotional gravity. The minimisation and trivialisation of circumstances surrounding traumatic experiences appears to be an effective way of discussing such events.

Ghana also described his positive experience with a podcast recording, drawing parallels between this experience and therapy. He perceived the podcast as therapeutic because it allowed for the expression of thoughts and feelings, leading to a process of self-reflection and discovery. Ghana expressed a preference for a relaxed, informal setting, which promotes a sense of comfort and encourages open conversation.

"But at the same time, that [the podcast] was therapy. Because I got to get things off my chest ... I got to speak on my thoughts and that helped me to process things. I remember answering some questions thinking, "Oh, that was actually mad!" Because I'm actually talking about it, as opposed to like internalising it" (Ghana).

There was a willingness to seek emotional support, with it being a protective factor against the debilitating nature of trauma and PTSD (Ozer et al., 2003). Trinidad and Zambia sought emotional support from women to cope with emotional distress: *"I have female friends who I will lean to for more emotional support than I would my bredrins" (Trinidad)*. Despite Zambia's inclination towards maintaining a tough, unyielding persona, there was an underlying need for emotional support. His desire for comfort expressed as wanting *"a little cuddle"* represents his search for solace and reassurance during times of distress.

"I'm feeling a bit sensitive ... I'm feeling violated, might not be the most confident ... yeah, a little cuddle, maybe something else might brighten my day ... I'm just trying to brighten my day because it's not a nice feeling at the end of the day... You're a bit sad, so you're just trying to do shit to brighten your day" (Zambia).

Whilst some turned to talking, others remained silent. Jamaica suggested a familiarity with mental health struggles among his peers, but also noted a reluctance and inability for individuals to articulate their experiences: *"like even my friends and that, they deal with mental health and that, but they never say they're dealing with mental health."* He emphasised a barrier to discussing these issues and a culture of silence surrounding mental health issues in his social environment. This could be an extension of societal discourses regarding who can express emotions or talk about their feelings. With this came a façade to hide inner turmoil. Jamaica implied this phenomenon of masked emotional struggle was widespread. Trinidad implied he went through a similar process, underscoring the need to release emotions when he returned home:

#### "I'll randomly, sometimes just start crying ... be on the verge of a breakdown, and I'll hold it until I get home and then I'll release it" (Trinidad).

"I realised like you see people that are mad-happy, they're not really happy ... I used to be mad-happy but now I said to myself, "I'm putting on a front ... for what?" It doesn't make sense! Man's got so much going on but man's trying to smile ... I'm not happy" (Jamaica).

Relocation was a strategy used by the older participants to manage their responses to traumatic events. Zambia, Ghana, Istanbul, and South Africa all distanced themselves from he violent, gang affiliated environments contributing to the lasting effects of trauma. This points to the impossibility of overcoming trauma when continuously exposed to triggers:

The environment is definitely a way that can be affecting someone if they don't get out of it soon enough... sometimes you need to change your environment that you're in. Take yourself out of it they say" (Istanbul).

"I moved away ... that was to help with the PTSD, I moved away, yeah. Like I don't live in the thick of it... But you can't heal in the place that you was hurt" (Zambia).

### **Expectations and Realities of Therapy**

America, Zambia, and Brazil were very sceptical when talking about therapy and mental health professionals: "obviously there's therapy and stuff, but I'm kind of on the fence on it" (Zambia). They didn't see the benefit, especially as they saw trauma and PTSD as an unvoiced reality where its implications are privately endured. America felt these issues occurred "behind closed doors" in secrecy and privacy, pointing towards a reality where the impact of gang-affiliated violence is typically unshared. Trinidad also shared this sentiment: "like how many times you seen someone have a mental breakdown – probably not a lot but they probably have it a lot of the time when they're at home". Brazil felt it was a pointless process because mental health professionals wouldn't be dealing with the core issues at hand, such as the violent environment they are frequently exposed to: "There's no point still ... you're telling them – what can they do about it? They ain't gonna do anything" (Brazil).

Black men are less likely to access formal help-seeking practices to address mental health issues (Lindsey & Marcell, 2012; Keating, 2021). However, some of the participants showed interest in seeking professional help for their trauma symptoms and posttraumatic stress. Jamaica and Ghana expressed an explicit desire to talk about their experiences and feelings, and the potential value of speaking to a professional who could provide advice on managing their trauma and PTSD resulting from gang-affiliated violence. Jamaica's use of phrases like *"get off my chest"* and *"things can change"* reflected a yearning for relief of his current emotional and mental state. He also felt if he had a positive experience, he could inform his peers for them to also try it out.

"There are some things that I need to speak about to someone, to get off my chest ... I already feel like I know what I need like. Therapy or counselling – that's what I feel like I need... sometimes, you just need someone to speak to or that's professional so they can give you advice and what's the best way to deal with how you're going through things" (Jamaica).

Ghana valued the idea of having someone just listen without judging. He considered professional intervention as beneficial, indicating his belief in the effectiveness of formal therapeutic interventions in managing and overcoming trauma and PTSD from gang affiliated violence: "getting professional help I guess to find steps and ways to now eradicate that ... that's where the professionals come in. And then obviously give you the steps and guidance".

Therapy was experienced as a complex process laden with individual expectations and beliefs. Ghana and Trinidad shared their expectations and disappointments about therapy. Trinidad had high expectations for therapy, hoping it would heal him completely but found it did not. His account portrays the complexity of the therapeutic process, and how it may not always bring about the desired outcome but can still have positive effects.

#### "Actually, it did, but it helped it in a weird way. I expected therapy to heal me, and it didn't really heal me, so, I was like, "Fuck it, I'll just live with it." But what therapy does do is help me deal with it better" (Trinidad).

Participants spoke about their individual real-time experiences within therapeutic interventions, from their interactions with professionals to their feelings of progress or stagnation. America, Ghana, and Trinidad conveyed their dissatisfaction with the therapeutic approaches employed by mental health professionals. America viewed traditional therapeutic methods as impersonal and futile, given the perceived lack of understanding by the therapist regarding his lived experiences.

"I've tried ... It's dead man. They asked me personal questions, asked me how my lifestyle is. I don't know how its gonna benefit man, benefit man's mental health. You're not there when I'm going through my shit you get me ... pointless, I'll be real it's pointless... they aint lived the life ... we're literally speaking to a professional and he's writing down... he ain't lived the life you've lived ... he ain't gone through the things you've gone through" (America).

Participants also wanted mental health professionals to be active collaborators within the healing process as opposed to simply listening and wanting the individual to dictate the topic of conversation. This is an important finding for how mental health professionals respond to the needs of this population. Ghana reflected on the existing stigma surrounding therapy among Black men and how his experience served to reinforce these prejudices rather than challenging them. His account implies the need for therapists to be aware of the cultural nuances and challenges facing Black men in therapy. Asking open-ended questions left Ghana feeling very frustrated and disillusioned with therapy. With Black men struggling to articulate their feelings and experiences due to their gender and culture, this approach appears counterintuitive. Guided therapeutic experiences may be more beneficial in the first instance, directing the conversation and teasing out feelings and experiences.

#### "At the start of every single session, and maybe it's the protocol, but I don't think it's right – they ask you, "So what do you want to talk about today?" And the reason I don't think it's right is because, naturally, Black men, in general, DON'T WANT TO TALK! Me getting there already is a plus! I find it hard to talk" (Ghana).

Where therapy was useful, strategies were employed to provide a sense of comfort and relatability. Going out to eat during sessions was an example mentioned. Trinidad's dissatisfaction came from the traditional, NHS' way of providing therapy and counselling. This way of working was not helpful and did not recognise the challenges of YBM not wanting to talk. Trinidad appreciated unique therapeutic strategies, which contributed to a sense of comfort and made the process more enjoyable.

"I think the NHS way of they put you in a white room, and just you and someone who you don't know at all ... it can be a bit disconnected. Because I feel with like psychologists, therapists – they're robotic, they're very cliché-like. It's like they're programmed to say things dependant on what you say, and it's like they have it written down where they say it to everybody but when [professional] gave me this person that I'm with, it feels WAY more genuine. I feel like I'm speaking to a human being. Plus, I like being in there, I feel more comfortable in this environment than I would do in the fucking hospital talking to somebody... Sometimes he'd even take me to go and eat whilst we were having the therapy sessions, so it made it more comfortable. I like more unique strategies to therapy instead of the BASIC fucking thing you know you're going to get, and it makes it easier because you're enjoying the food whilst talking about something horrible, instead of just sitting there in a room ... just silence, talking to a robot about horrible things. They make it more realistic" (Trinidad).

Participants' accounts show the immense effort required for individuals to recover from trauma and PTSD from gang affiliated violence. It is not a quick or simple process. The YBM in this study emphasised the importance of support in the healing process, reinforcing the idea that trauma recovery isn't a solo endeavour but one requiring a network of supportive individuals and resources.

"It's a strong and a long-winded effort to do so, and for me the person needs a lot of support ... needs to process a lot of things ... and they need to be willing to commit to what it's going to take to allow themselves to be better" (Istanbul).

## Conclusion

This research analysed the individual, subjective experiences of eight YBM exposed to gang affiliated violence. The study did a deep probe into understanding trauma, PTSD, and gang affiliated violence. Listening to their narratives provided further clarity of traumatic stress symptoms portrayed by YBM. Doing this helps us to challenge the utility of current diagnostic descriptions of trauma which feel irrelevant for this population.

Most importantly, this research amplifies the voices and stories of YBM's experiences of trauma from gang affiliated violence. These voices tend to be ignored and invalidated. This research has provided key findings which should motivate future research to continue expanding our understanding of trauma and violence. These experiences challenge the assumptions and stereotypes held by researchers, clinicians and policy makers concerning this population. Hopefully this research has confronted societal discourses about who these YBM are and how they live their lives.

"Trauma is personal. It does not disappear if it is not validated. When it is ignored or invalidated, the silent screams continue internally heard only by the one held captive. When someone enters the pain and hears the screams healing can begin." (Bernock, 2014).

# Recommendations

The following recommendations are based on this research. They are non-exhaustive and should be taken as an initial guide.

### **Mental Health Professionals**

It is vital the conceptualisation of trauma and PTSD is adapted to encompass the lived and living experiences of Black men living in violent communities. Currently, PTSD frameworks tend to focus on past traumas, thereby failing to validate and acknowledge the current, real danger Black men must navigate on a consistent basis (Singletary, 2020). It does not capture the significant current traumas and the traumas yet to occur.

Language also needs to be considered. The current framework does not include an understanding of the ways Black men describe their mental health symptoms and their use of culturally rich terminology (Richardson et al., 2020). The alternative expressions of traumatic stress amongst Black men may be overlooked by clinicians. Screening and assessment tools should be informed by language that Black men use to describe traumatic stress symptoms (Smith & Patton, 2016).

Adaptations need to be made to conceptual frameworks to explain the numerous trauma responses from this population. If this doesn't happen, many of these behaviours and 'symptoms' are likely to appear to others as sociopathic or antisocial, limiting the support they should be receiving (Singletary, 2020).

#### **Statutory Services**

Service providers need to develop therapeutic spaces that allow Black men to feel safe to discuss their violent experiences. Policy responses should focus on building safety and establishing trust. Given Black men frequently move within and across systems such as education, and the CJS, the fact that trauma responses remain undisclosed is problematic and emphasises the need to develop better systems of care for this population (Smith, 2013). Since those who are gang-affiliated come in to contact with health services through various entry points, there needs to be an effective way to ensure their mental health needs are being met (Coid et al., 2013).

If services were to view police violence as a traumatic stressor, this could support the detection of PTSD symptoms and trauma responses occurring from police interactions. This would advance understanding of the impact of this on communities, particular the Black community who are systematically targeted by the police. An outcome could be co-creating interventions aimed at healing Black men from the resulting pain of police violence, and protecting them from trauma perpetrated by statutory services.

The YBM hesitant of NHS practices spoke about their rationale for working with third-sector organisations and charities in the healing process. Developing closer relationships between the NHS and third sector organisations would benefit the lives of YBM exposed to gang affiliated violence. This relationship should be bi-directional where there are opportunities for growth, shared learning, and support (Goodwin et al., 2012).

Build relationships with gatekeepers and individuals. Based on centuries of racism, discrimination, and violence, it is understandable that Black communities are suspicious of statutory services (Boyd-Franklin, 2013). This mistrust is justified! If it is your aim to work with this population, you need to demonstrate yourself as trustworthy. You need to go where YBM are.

# Community

There needs to be a consideration of frameworks that go beyond the individual and account for systemic and community-based trauma. The impact of trauma extends beyond individuals and individual interventions should only be part of a comprehensive solution. The Adverse Community Experiences and Resilience Framework (Pinderhughes et al., 2015) advances the understanding that violence in the community contributes to trauma at the individual and community levels. This framework describes how trauma manifests and can be addressed at three levels of the community environment (socio-cultural; physical/built; economic). By providing services to individuals closely impacted by the violent event as well as attending to the community, the cumulative effects of violence and trauma are mitigated against.

# **Clinical psychology**

Given there is evidence of police brutality, poverty and racism which cause and perpetuate trauma responses, clinical psychology should be operating within the macrosystem to create public policy and shine a light on systemic racism and discrimination impacting YBM in general, as well as those exposed to gang affiliated violence. This top-down approach can then infiltrate statutory services like the police and mental health systems whom participants mentioned are guilty of perpetuating posttraumatic stress amongst this population.

### Research

Funding for a more comprehensive and comparative analysis of young Black men's experiences across London boroughs is necessary. Future research will play an important role in providing understanding around gang-affiliated violence and the resulting trauma.

Participants spoke frequently about utilising hypervigilant behaviours as a form of survival and self-preservation. Mays et al. (2007) found that hypervigilance as a stress response can shape poor health, disease, and mortality. Future research could examine the relationship between physical and mental health implications of the trauma responses portrayed by YBM exposed to gang-affiliated violence. The chronic nature of this violence exposure is likely to lead to serious physical health issues.

There is an increased presence of girls and women being gang affiliated and their roles might differ (Sutton, 2017). There does not appear to be much research exploring this in the same way this research has been conducted. This narrative could also add a rich understanding to the literature and how they make sense of their experiences which could be similar or completely different to the experiences of men.

If these recommendations are ever considered, YBM exposed to gang affiliated violence need to be in the room when these discussions take place. After all, who knows what they best need than they themselves.



GLOSSARY

Mandem - an association to a group of friends/gang/family. The culture - the community; our people. **Endz** - your zone, your streets, your area that you live in. **Big up** - an expression of support or encouragement; to give respect or to acknowledge someone. **Shoutout** - a public expression of thanks or gratitude. **Ride out** - going to a rival area to do harm. **Civilian** - someone who is not aware of the roads, is not streetwise. **Caught slipping** - to be caught off guard in a very bad way. About that life - means to live a certain kind of way. Tapped - not all there in the head. Touch the area - to arrive; to display one's presence. **Bust** - to incur severe physical damage; to violently hit someone. **Yute** - meaning young adult or a child; term used to address someone. Wet you - to harm someone in a severe way making their clothes all wet from blood. Split - to cut. 24s - 24/7; every single hour of every single day. Shanked - to be stabbed. Shank - any crude, sharp weapon. Hit the streets - appear on the streets, hanging out. **On point** - on top of things, in control of the situation; cautious. **Caught up** - dragged into a situation through no fault of their own. Hood area - a lower income crime-riddled area, an undesirable area.

Check you - questioning/interrogating someone.

Crud - violence, aggression.

**Rush** - getting beaten up by a group of individuals.

Hungry - to want lots of money and wealth.

Well-fed - to have lots of money and wealth.

Feds - the police.

**Gripsin** - to grab some one or hold on to someone who doesn't want you to.

**Opp** - short for opposition; anyone against you.

**Violated** - when someone steps over the line, does or says something disrespectful; to take full advantage.

**Roughed up** - the object being described has been subject to physical violence.

**Buss joke** - to create laughter and to talk about something in a humorous way.

**Bredrin(s)** - a very good friend of yours; a close group of friends who you treat as family.

**Crackhead** - a habitual user of cocaine in the form of crack, who relies on it to sustain daily life.

**Dead** - something that is extremely bad or boring.

Firm it - to take something that is hard to bear.

Abram, K. M., Teplin, L. A., Charles, D. R., Longworth, S. L., McClelland, G. M., & Dulcan, M. K. (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. *Archives of general psychiatry*, *61*(4), 403-410.

Aldridge, J., Medina, J., & Ralphs, R. (2013). Dangers and problems of doing 'gang'research in the UK. In *Street gangs, migration, and ethnicity* (pp. 44-59). Willan.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.)

Ashby. (2020). Stop and search in London July to September 2020. Institute for Global City Policing. UCL. <u>https://discovery.ucl.ac.uk/id/eprint/10115766/1/2020-Q3.pdf</u>

Bacchini, D., Dragone, M., Esposito, C., & Affuso, G. (2020). Individual, familial, and socio-environmental risk factors of gang membership in a community sample of adolescents in southern Italy. *International journal of environmental research and public health*, *17*(23), 8791.

Banaji, M. R., Fiske, S. T., & Massey, D. S. (2021). Systemic racism: individuals and interactions, institutions, and society. *Cognitive research: principles and implications, 6*, 1-21.

Barrett, B., Byford, S., Chitsabesan, P., & Kenning, C. (2006). Mental health provision for young offenders: service use and cost. *The British Journal of Psychiatry*, *188*(6), 541-546.

Barrows, J., & Huff, C. R. (2009). Gangs and public policy: Constructing and deconstructing gang databases. *Criminology & Public Policy, 8*(4), 675-703.

Beech, B. M., Ford, C., Thorpe Jr, R. J., Bruce, M. A., & Norris, K. C. (2021). Poverty, racism, and the public health crisis in America. *Frontiers in public health*, *9*, 699049.

Beresford, H., & Wood, J. L. (2016). Patients or perpetrators? The effects of trauma exposure on gang members' mental health: A review of the literature. *Journal of Criminological Research, Policy, and Practice.* 

Beresford, H., & Wood, J. L. (2016). Patients or perpetrators? The effects of trauma exposure on gang members' mental health: A review of the literature. *Journal of Criminological Research, Policy, and Practice.* 

Bovin, M. J., & Marx, B. P. (2011). The importance of the peritraumatic experience in defining traumatic stress. *Psychological bulletin*, 137(1), 47.

Boyd-Franklin, N. (2013). *Black families in therapy: Understanding the African American experience*. Guilford Publications.

Bridges, L. (2013). The case against joint enterprise. *Race & Class, 54*(4), 33-42.

Brown, M. E., Dustman, P. A., & Barthelemy, J. J. (2021). Twitter impact on a community trauma: An examination of who, what, and why it radiated. *Journal of community psychology, 49*(3), 838-853.

Buckle, M. E., & Walsh, D. S. (2013). Teaching responsibility to gang-affiliated youths. *Journal of Physical Education, Recreation & Dance, 84*(2), 53-58.

Burney, E. (2009). Making people behave: Anti-social behaviour, politics, and policy. Routledge.

Casey (2023). An independent review into the standards of behaviour and internal culture of the Metropolitan Police Service.

Cohen, G. (2022). In Pursuit of Police Ethics: An Analysis of Ethics Content in State-Mandated Basic Police Training Curricula. *Public Integrity*, *24*(3), 292-305.

Coid, J. W., Ullrich, S., Keers, R., Bebbington, P., DeStavola, B. L., Kallis, C., ... & Donnelly, P. (2013). Gang membership, violence, and psychiatric morbidity. *American journal of psychiatry*, *170*(9), 985-993.

Coid, J. W., Ullrich, S., Keers, R., Bebbington, P., DeStavola, B. L., Kallis, C., ... & Donnelly, P. (2013). Gang membership, violence, and psychiatric morbidity. *American journal of psychiatry*, *170*(9), 985-993.

Cottrell-Boyce, J. (2013). Ending gang and youth violence: A critique. *Youth Justice, 13*(3), 193-206.

De Vito, K. (2020). Seeking a secure base: Gangs as attachment figures. *Qualitative Social Work, 19*(4), 754-769.

Decker, S. H., Melde, C., & Pyrooz, D. C. (2013). What do we know about gangs and gang members and where do we go from here? *Justice Quarterly, 30*(3), 369-402.

Densley, J. A., & Pyrooz, D. C. (2020). The matrix in context: Taking stock of police gang databases in London and beyond. *Youth justice, 20*(1-2), 11-30.

Eitle, D., D'alessio, S. J., & Stolzenberg, L. (2006). Economic segregation, race, and homicide. *Social science quarterly, 87*(3), 638-657.

Fairbrook, S. W. (2013). The physical and mental health effects of community violence exposure in pre-adolescent and adolescent youth. *Journal of Student Nursing Research, 6*(1), 6.

Fanti, K. A., Vanman, E., Henrich, C. C., & Avraamides, M. N. (2009). Desensitization to media violence over a short period of time. *Aggressive Behavior: Official Journal of the International Society for Research on Aggression, 35*(2), 179-187.

Fiske, S. T. (2017). Prejudices in cultural contexts: Shared stereotypes (gender, age) versus variable stereotypes (race, ethnicity, religion). *Perspectives on psychological science*, *12*(5), 791-799.

Frewen, P., Zhu, J., & Lanius, R. (2019). Lifetime traumatic stressors and adverse childhood experiences uniquely predict concurrent PTSD, complex PTSD, and dissociative subtype of PTSD symptoms whereas recent adult non-traumatic stressors do not: Results from an online survey study. *European Journal of Psychotraumatology, 10*(1), 1606625.

Frisby-Osman, S., & Wood, J. L. (2020). Rethinking how we view gang members: An examination into affective, behavioural, and mental health predictors of UK gang-involved youth. *Youth Justice, 20*(1-2), 93-112.

Garland, C. (2018). Understanding trauma: A psychoanalytical approach. Routledge.

Gaylord-Harden, N. K., Gipson, P., Mance, G., & Grant, K. E. (2008). Coping patterns of African American adolescents: a confirmatory factor analysis and cluster analysis of the Children's Coping Strategies Checklist. *Psychological Assessment, 20*(1), 10. Gebo, E. (2016). An integrated public health and criminal justice approach to gangs: What can research tell us? Preventive medicine reports, *4*, 376-380.

Goodwin, N., Smith, J., Davies, A., Perry, C., Rosen, R., Dixon, A., ... & Ham, C. (2012). Integrated care for patients and populations: improving outcomes by working together. *London: King's Fund.* 

Hallsworth, S., & Young, T. (2004). Getting real about gangs. *Criminal justice matters, 55*(1), 12-13.

Harding, S. (2014). The street casino. Policy Press, 265-286.

Harris, D., Turner, R., Garrett, I., & Atkinson, S. (2011). *Understanding the psychology of gang violence: Implications for designing effective violence interventions.* London: Ministry of Justice.

Harris, T. B., Elkins, S., Butler, A., Shelton, M., Robles, B., Kwok, S., ... & Sargent, A. J. (2013). Youth gang members: Psychiatric disorders and substance use. *Laws*, *2*(4), 392-400.

Heath, I. (2002). Treating violence as a public health problem: The approach has advantages but diminishes the human rights perspective. *BMJ*, *325*(7367), 726-727.

Hesketh, R. F. (2021). Its scouse soldier's lad init! An examination of modern Urban street gangs on Merseyside. *Journal of criminological research, policy, and practice, 7*(4), 355-372.

Hirschtick, J. L., Homan, S. M., Rauscher, G., Rubin, L. H., Johnson, T. P., Peterson, C. E., & Persky, V. W. (2019). Persistent and aggressive interactions with the police: potential mental health implications. *Epidemiology and psychiatric sciences*, 1-8.

Home Office (2022). Police Powers and Procedures: Stop and Search and Arrests, England and Wales, year ending 31 March 2021 (2nd edn).

https://www.gov.uk/government/statistics/police-powers-and-procedures-stop-and-searchand-arrests-england-and-wales-year-ending-31-march-2022/police-powers-and-proceduresstop-and-search-and-arrests-england-and-wales-year-ending-31-march-2022 (accessed 26 September 2022).

House of Commons Home Affairs Committee. (2021). The Macpherson report: Twenty-two years on.

Jussim, L., Crawford, J. T., & Rubinstein, R. S. (2015). Stereotype (in) accuracy in perceptions of groups and individuals. *Current Directions in Psychological Science*, 24(6), 490-497.

Keating, F. (2021). Black men's conversations about mental health through photos. *Qualitative Social Work, 20*(3), 755-772.

Keating, F., & Robertson, D. (2004). Fear, black people, and mental illness: a vicious circle? *Health* & social care in the community, 12(5), 439-447.

Kerig, P. K., Bennett, D. C., Thompson, M., & Becker, S. P. (2012). "Nothing really matters": Emotional numbing as a link between trauma exposure and callousness in delinquent youth. *Journal of traumatic stress, 25*(3), 272-279.

Kerig, P. K., Chaplo, S. D., Bennett, D. C., & Modrowski, C. A. (2016). "Harm as harm" gang membership, perpetration trauma, and posttraumatic stress symptoms among youth in the juvenile justice system. *Criminal Justice and Behavior*, *43*(5), 635-652.

Khan, L., Brice, H., Saunders, A., & Plumtree, A. (2013). A need to belong: what leads girls to join gangs. *London: Centre for Mental Health*.

Kilpatrick, D. G. (2004). Interpersonal violence and public policy: what about the victims? *Journal of Law, Medicine & Ethics, 32*(1), 73-81.

Kulkarni, M. R., Graham-Bermann, S., Rauch, S. A., & Seng, J. (2011). Witnessing versus experiencing direct violence in childhood as correlates of adulthood PTSD. *Journal of interpersonal violence, 26*(6), 1264-1281.

Lammy, D. (2017). The Lammy Review: An independent review into the treatment of, and outcomes for, Black, Asian, and Minority Ethnic individuals in the Criminal Justice System. *London: Lammy Review.* 

Lauger, T. R. (2020). Gangs, identity, and cultural performance. *Sociology Compass*, *14*(4), e12772.

Lawson, R. (2013). The construction of 'tough' masculinity: Negotiation, alignment, and rejection. *Gender and Language*, 7(3), 369-395.

Leverso, J., & Matsueda, R. L. (2019). Gang organization and gang identity: An investigation of enduring gang membership. *Journal of quantitative criminology*, *35*, 797-829.

Lewis, J., & Marsden, S. (2021). Trauma, Adversity, and Violent Extremism. *Lancaster: Center for research and evidence on security threats.* 

Lindsey, M. A., & Marcell, A. V. (2012). "We're Going Through a Lot of Struggles That People Don't Even Know About" The Need to Understand African American Males' Help-Seeking for Mental Health on Multiple Levels. *American Journal of Men's Health, 6*(5), 354-364.

Macfarlane, A. (2019). Gangs and adolescent mental health: A narrative review. *Journal of child* & adolescent trauma, 12(3), 411-420.

Macpherson, W., Cook, T., Sentamu, J., & Stone, R. (1999). *The Stephen Lawrence Inquiry: Report of an Inquiry by Sir William Macpherson of Cluny, CM 4262-I*. Stationery Office.

Mays, V. M., Cochran, S. D., & Barnes, N. W. (2007). Race, race-based discrimination, and health outcomes among African Americans. *Annu. Rev. Psychol.*, *58*, 201-225.

Metropolitan Police Service. (2020). Metropolitan Police Stop and Search Dashboard. <u>https://www.met.police.uk/sd/stats-anddata/met/stop-and-search-dashboard/</u> (accessed 29 November 2022).

Ministry of Justice. (2020). *Tackling Racial Disparity in the Criminal Justice System: 2020 Update*. <u>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_dat</u> <u>a/file/881317/tackling-racial-disparity-cjs-2020.pdf</u> (accessed 11 March 2023)

Nijjar, J. S. (2019). Echoes of Empire: Excavating the Colonial Roots of Britain's" War on Gangs". *Social Justice*, *45*(2-3), 147-163.

Overstreet, S., & Braun, S. (2000). Exposure to community violence and post-traumatic stress symptoms: Mediating factors. *American Journal of Orthopsychiatry*, *70*(2), 263-271.

Ozer, E. J., Best, S. R., Lipsey, T. L., & Weiss, D. S. (2003). Predictors of posttraumatic stress disorder and symptoms in adults: a meta-analysis. *Psychological bulletin*, *129*(1), 52.

Petering, R. (2016). Sexual risk, substance use, mental health, and trauma experiences of ganginvolved homeless youth. *Journal of adolescence*, *48*, 73-81. Pinderhughes, H., Davis, R., Williams M. (2015). *Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma*. Prevention Institute, Oakland CA.

Pitts, J. (2008). *Reluctant gangsters: The changing face of youth crime.* Taylor & Francis.

Pitts, J. (2014). Who dunnit? Gangs, joint enterprise, bad character, and duress. *Youth and Policy*, *113*(1), 48-59

Pitts, J. (2020). Black young people and gang involvement in London. *Youth Justice, 20*(1-2), 146-158.

Raby, C., & Jones, F. (2016). Identifying risks for male street gang affiliation: A systematic review and narrative synthesis. *The Journal of Forensic Psychiatry & Psychology, 27*(5), 601-644.

Richardson Jr, J. B., Wical, W., Kottage, N., & Bullock, C. (2020). Shook ones: understanding the intersection of nonfatal violent firearm injury, incarceration, and traumatic stress among young black men. *American journal of men's health*, *14*(6), 1557988320982181.

Sandhu, J. (2020). Youth gang membership: mental health problems and perceptions of social support (Doctoral dissertation, University of Birmingham).

Shiner, M., Carre, Z., Delsol, R., & Eastwood, N. (2018). The colour of injustice: 'race', drugs and law enforcement in England and Wales.

Singh, S. P., & Burns, T. (2006). Race and mental health: there is more to race than racism. *Bmj*, 333(7569), 648-651.

Singletary, G. (2020). Beyond PTSD: Black male fragility in the context of trauma. *Journal of Aggression, Maltreatment & Trauma, 29*(5), 517-536.

Slegh, H., Spielberg, W., & Ragonese, C. (2021). Masculinities and Male Trauma: Making the Connections. *Promundo-US: Washington*, DC, USA.

Smith Lee, J. R., & Robinson, M. A. (2019). "That's my number one fear in life. It's the police": Examining young Black men's exposures to trauma and loss resulting from police violence and police killings. *Journal of Black Psychology*, *45*(3), 143-184.

Smith, J. A., & Osborn, M. (2015). Interpretative phenomenological analysis as a useful methodology for research on the lived experience of pain. *British journal of pain*, *9*(1), 41-42.

Smith, J. R. (2013). *Peer homicide and traumatic loss: An examination of homicide survivorship among low-income, young, black men* (Doctoral dissertation, University of Maryland, College Park).

Smith, J. R., & Patton, D. U. (2016). Posttraumatic stress symptoms in context: Examining trauma responses to violent exposures and homicide death among Black males in urban neighborhoods. *American journal of orthopsychiatry, 86*(2), 212.

Staggers-Hakim, R. (2016). The nation's unprotected children and the ghost of Mike Brown, or the impact of national police killings on the health and social development of African American boys. *Journal of Human Behavior in the Social Environment, 26*(3-4), 390-399.

Sutton, T. E. (2017). The lives of female gang members: A review of the literature. *Aggression* and violent behavior, 37, 142-152.

Taylor, T. J. (2008). The boulevard ain't safe for your kids... 1: Youth gang membership and violent victimization. *Journal of Contemporary Criminal Justice*, *24*(2), 125-136.

Trivedi, P., & Wykes, T. (2002). From passive subjects to equal partners: qualitative review of user involvement in research. *The British Journal of Psychiatry*, *181*(6), 468-472.

Van Hellemont, E., & Densley, J. (2021). If crime is not the problem, crime fighting is no solution: policing gang violence in the age of abolition. *Journal of aggression, conflict, and peace research, 13*(2/3), 136-147.

Vigil, J. D. (2003). Urban violence and street gangs. *Annual Review of Anthropology, 32*(1), 225-242.

Williams, P., & Clarke, B. (2016). Dangerous associations: Joint enterprise, gangs, and racism. *Centre for Crime and Justice Studies*, 1-24.

Wood, J. L. (2014). Understanding gang membership: The significance of group processes. *Group Processes & Intergroup Relations, 17*(6), 710-729.

Wood, J., & Alleyne, E. (2010). Street gang theory and research: Where are we now and where do we go from here? *Aggression and violent behavior*, *15*(2), 100-111.

Wood, J., & Dennard, S. (2017). Gang membership: links to violence exposure, paranoia, PTSD, anxiety, and forced control of behavior in prison. *Psychiatry*, *80*(1), 30-41.

Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology and health, 15*(2), 215-228.

YouGov. (2018). How young are "young people"? And at what age does a person become "old"? YouGov. https://yougov.co.uk/topics/politics/articles-reports/2018/03/06/how-young-areyoung-people-and-what-age-does-perso

Young, T., Hulley, S., & Pritchard, G. (2020). A 'good job' in difficult conditions: Detectives' reflections, decisions, and discriminations in the context of 'joint enterprise'. *Theoretical Criminology*, *24*(3), 461-481.

