



POLICY BRIEFING

28 APRIL 2016

The Use of Tasers in London



Image taken by Flickr under Creative Commons Licence – the original can be accessed [here](#).

Background

Taser guns are a type of Conducted Energy Device (CED), described by the Metropolitan Police Service (MPS) as a “less-lethal single shot weapon” designed to temporarily incapacitate a suspect with an electric shock.

Tasers were first introduced in England and Wales in 2003 as part of a trial restricted to specialist firearms officers, then being rolled out in 2008 to non-specialist officers. In London, the Commissioner of the Metropolitan Police introduced a programme to provide Tasers to every borough in 2012, training approximately forty officers from each to use this weapon. The MPS states that the ‘Taser is an additional tactical option that allows officers to manage situations where violence is threatened or likely from a safe distance’. When fired, Tasers cause the loss of control of voluntary muscles, usually resulting in the subject falling to the ground.

Taser use has increased every year since its introduction, with the only exception of 2014 that [recorded](#) a decrease of 3%. According to the Association of Chief Police Officers (ACPO) the increase is due to more officers being trained to use Tasers and more being deployed to specially trained units. However, the risk of such ‘less-lethal weapons’ cannot be underestimated and they must be subject to close scrutiny. The Home Secretary herself has stated that “sensitive powers like Taser and the use of force must be used with transparency and proportionality”.

Physical Harm

The physical consequences that these weapons have on human body have been thoroughly examined only recently and [warn of a possible association between Taser exposure and cognitive impairment](#).

The Defence Scientific Advisory Council Sub-committee on the Medical Implications of Less-lethal Weapons was requested by the Home Office to report on the medical implications of Tasers. In 2011 it [reported](#) that:

- Taser discharge is capable of inducing an inappropriately high heart rate by a mechanism known as **cardiac capture**. Serious complications could arise in those individuals with impaired heart function or through the action of certain licit or illicit drugs.
- The **physiological burden** arising from the Taser-induced muscle contractions and associated pain, combined with the stressful circumstances in which Tasers are likely to be used, may adversely affect certain groups.
- Children and thin adults may be at greater **risk of internal injury**. Children and adults of short stature may also be at greater risk of injury to sensitive structures in the head and neck regions due to the closer proximity of these structures to the most commonly used point of aim (the frontal chest).
- Mental health conditions, learning difficulties and neurodevelopmental or neuro-behavioural conditions may negatively influence how affected individuals interact with the police and thereby elevate the **risk of exposure** to Taser discharge or other forms of force.

In addition Operational Guidance published by ACPO states that [‘the risk of concussive brain injury as a result of the head hitting a rigid surface is considered especially pertinent’](#).

With these statements being issued both by the most senior ranking police authority and the government’s own advisors, the many risks associated with Tasers are well known. Further in 2007 the UN Committee against Torture decided that Tasers cause pain severe enough to be considered a form of torture. In spite of this government is in the process of testing the new “X2” model, likely to be authorised by the end of 2016 which have a dual shot capacity. It seems that the government is flying in the face of these warnings and submitting to calls to hand Tasers out to an ever-increasing number of officers.

There are wider concerns surrounding the physical pain caused by tasers. Beyond being fired, the highest level of [seven categories of use](#) outlined, ethical concerns have been raised around the use of the “drive stun” technique - where the Taser is held against the subject’s body and the trigger pulled in order to inflict pain but not incapacitation. Independent Police Complaints Commission (IPCC), the police watchdog, has voiced major concerns about drive stun mode being used [‘purely a means of pain compliance.’](#)

Taser Use on Children

Figured obtained by Children’s Rights Alliance England revealed that in 2013 Tasers had been used on more than 300 children with 29% of those aged between 13 and 15 years old. StopWatch recently submitted Freedom of Information requests to the Metropolitan Police and to police forces nationally, our initial findings and concerns relating specifically to children and tasers are outlined in detail in our [UN Submission](#) to The Committee on the

Rights of the Child. Article 19 of UN Convention on the Rights of the Child (1989) which the UK ratified in 1991, states: “Governments must do all they can to ensure that children are protected from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else who looks after them” which the use of tasers clearly violates. The psychological effects that even the lower levels of taser use; *aiming*, being targeted with a *red dot* will no doubt on children; [Amnesty International](#) has urged that these implications are also considered, but substantive work is yet to be done in this area.

In spite of this, pressure to increase their use is high with recent recommendations that all front-line police in England and Wales should be offered these weapons¹. A rise in the availability and use of Tasers deprioritises the use of traditional, less tortuous alternatives for defusing conflict. Whilst there are legitimate concerns that the use of Tasers would change the face of British policing, its concept of “policing by consent” and signifies a further shift towards violent and aggressive tactics the physical and psychological effects that these weapons have on children remain a critical issue.

Guidance and Monitoring

In December 2008, ACPO published [guidance](#) stating that a ‘Taser is not a replacement for existing personal safety tactical options, but is an option that should be considered alongside other personal safety tactical options, such as negotiation’. The College of Policing has subsequently published a section regarding Tasers in the national guidance [Authorised Professional Practice \(APP\) Armed Policing](#) where it is specified that;

“The discharge of Taser is intended to mitigate the threat by temporarily incapacitating the individual, not solely to inflict severe pain or suffering on another in the performance or purported performance of official duties”

Both underline that sufficient action must be taken to defuse a difficult situation before resorting to Tasers which raises questions around why use of these weapons is increasing.

Furthermore, despite the number of Tasers deployments being recorded by the Metropolitan Police Service, its monitoring is still patchy and inconsistent. Whilst the total number of Taser deployments received through StopWatch’s FOI requests is 2542, the numbers showed on the MPS website amount to 3882 for the years 2014 and 2015. Data shown on the website does not include age, gender and ethnicity of individuals that have been Tasered, limiting analysis and police accountability on this power.

¹ Dodd, V. Police Federation votes for Tasers for uniformed officers (2015) Available at: <http://www.theguardian.com/world/2015/feb/09/police-federation-votes-tasers-uniformed-officers> accessed 14th April 2016

Research and Analysis

StopWatch asked the Metropolitan Police Service (MPS) to provide data around the use of Tasers in each London borough from January 2014 to November 2015, specifying age and ethnicity of the individuals against whom Tasers have been used. The data received has given us a clearer picture of how these weapons are being used in London.

- Tasers have been deployed* 2542 times in two years
- Tasers have been used 185 times against minors and 16 times against children 14 years old or younger
- Across London black people are 4.3 times more likely to be targeted than white people
- More than 50% of Tasers deployments have been against BME persons

Findings

The number of deployments varies greatly across boroughs, often, as you might expect, reflecting population size. For instance Lambeth, one of the most densely populated boroughs in London, has the highest number of total deployments (212) and the highest number against children (16). Southwark, similarly is highly populated and it has deployed Tasers 125 times during this period, with Kingston, one of the least populated boroughs, accounting for 45 times. However Croydon, which has an even higher population than Lambeth has used Tasers less than half as much. Camden and Islington have similar population sizes yet differ significantly in their taser use; 123 in Camden compared to 51 in Islington, with children targeted 12 times in Camden and three times in Islington.

Taser Deployments against Black or Minority Ethnic Communities

In London as a whole BME communities, when grouped together, are almost twice as likely to have a taser deployed against them than their white counterparts. When distinguishing between ethnic groups however, the situation differs greatly. Compared to white people, Asians are in fact less likely to be targeted (0.59 times) and the rate for mixed groups is close to parity with white (1.23x more likely). This is in stark contrast to the black community who are 4.3 times more likely to have a taser used against them across London, with rates of ethnic disproportionality creeping even higher at borough level; in Lambeth a black person is 6 times more likely to have a taser deployed against them. In Brent and Barnet with overall numbers slightly lower than 100, it was more than 7 and 8 times respectively. Along with Camden (5x), Lewisham, Tower Hamlets and Westminster (all 4x); Hackney, Haringey and Southwark (all 3x) these figures suggest that a more aggressive style of policing is being pursued towards the black community in these boroughs. This raises concerns of [implicit bias](#), wherein police more readily use force against black people as they perceive the threat posed by them to be greater than from other ethnic groups.

There are a number of boroughs where the use of tasers is low (less than 80 over 2014/15) but where it is unduly concentrated on BME communities. In Kensington, for example, they account for 23 of the 33 taser deployments recorded (15 of them against black people) and in Waltham Forest 35 of 61 deployments were directed at BME groups. As the overall numbers are low we would infer with caution but BME groups in these areas are potentially subject to more aggressive policing than their white counterparts.

Taser Deployments against children

The **Metropolitan Police Service (MPS)** has deployed Tasers against children **185 times** in less than two years. According to [CRAE](#), only 9 deployments against children were recorded in London in 2008 but the number increased to 53 in 2012 highlighting that their use has risen considerably in the past years. Out of these 185 deployments detailed, 16 have been against children aged 14 or younger and the weapons have been fired 10 times against minors, including once against a 13 year old.

However, considering that in 4 London boroughs Tasers have been used against minors only once or twice in two years and without firing, the high degree of variation across boroughs suggests that use of Tasers is not essential to the policing of children behaving violently. It has been suggested elsewhere that the introduction of Tasers has '[relegated the skills required to de-escalate violent or potentially violent situations to a much lower level](#)' and analysing the numbers this may be especially pertinent to minors.

Implications and Recommendations

The use of Tasers in London in the past few years highlights an increasing trend and potential reliance on this weapon as a means to mitigate dangerous situations. Urgent intervention from the Home Office and greater **accountability is required** to guard both the physical damage caused by tasers and psychological consequences for vulnerable individuals, limiting their use only to critical situations. In addition, given the data received on the use of Tasers against BME groups, the Home Office should track ethnic disproportionality in the deployment of tasers through systematic monitoring of their use as part of the Ministry of Justice Statistics on Race and Criminal Justice (Section 95 series).

Use of tasers should therefore be regulated by **specific guidance** issued by the Home Office on how to deploy Tasers safely and in which situations it is proportionate and legitimate to do so. Guidance should also promote safer alternatives for police officers to defuse violent situations, especially in encounters with minors. This must be complemented by training on these alternatives if required. These recommendations echo the IPCC's comments calling for "greater emphasis placed on the initial stages of the decision-making model used by officers, using communication and the information they have rather than a quick escalation to use of force".

Following the results of the studies around the effects of Tasers on children, StopWatch deems it necessary to **prohibit firing them against children** who look 14 years old or younger.

StopWatch

Ferguson House 5th Floor

124 -128 City Road

London

EC1V 2NJ

Telephone: +44 (0)20 7377 9222

Email: info@stop-watch.org

Twitter: [@StopWatchUK](https://twitter.com/StopWatchUK)