

A GROWING THREAT TO LIFE: TASER USAGE BY GREATER MANCHESTER POLICE



RESISTANCE
LAB

COLLECTIVE
AGAINST STATE
VIOLENCE

ABOUT RESISTANCE LAB

Resistance Lab is a grassroots collective that uses education, technology and research to find new ways to resist state violence.

Our work is an ongoing collaboration between scholars, activists and grassroots community groups working to confront state violence in Greater Manchester.

We are committed to participatory democratic approaches that bring technology and data experts into collaborative partnership with anti-racist activists, in order to find new ways to resist state violence and create more just and equitable communities.

By creating a space for the communities affected the most by state violence to work with researchers and technologists, we believe we can find new and better ways to work together to resist the increasingly data-driven architecture of state oppression.

Affiliated organisations include Geeks for Social Change, Kids of Colour, Northern Police Monitoring Project, Race, Roots & Resistance, Sites of Resistance, and The African Pot Project

More about us on our website:
resistancelab.network

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METHODOLOGY

As far as possible this report has been created using public data sources and references. We have made the code used to gather and format this information available in our public data repository. <https://data.resistancelab.network>

The report was written and edited in an Observable Notebook, an interactive programming environment that documents and allows live manipulation of all graphs and calculations. We encourage other groups to review, modify and adapt our methodology.

CORRECTIONS AND CLARIFICATIONS

Resistance Lab is committed to producing high quality reports based on accurate data and findings. If you see a mistake, please let us know by emailing info@resistance.network.

The latest version of the report is available at: resistancelab.network/taser-report

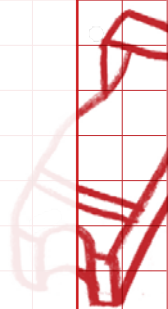
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EXECUTIVE SUMMARY

- Human rights and medical experts have raised significant concerns about the health and safety risks associated with Tasers including the potential for cardiac complications leading to death.
- At least 18 people have died after a Taser was discharged against them by police in England and Wales since 2003. Inquests have identified the use of a Taser as a cause or contributing factor in the deaths of at least three individuals – Marc Cole, Jordan Begley and Andrew Pimlott.
- The use of Tasers by police forces across England and Wales has increased by more than 500% over the last decade up from 3,573 incidents in 2009/10 to 23,451 in 2018/19.
- In the last year alone, Greater Manchester Police's use of Tasers increased 73% from 832 incidents in 2017/18 to 1,442 incidents in 2018/19. This rate of increase exceeded the national average of 39% as well as that of comparable forces such as the Metropolitan Police which reported a 49% increase in the use of Tasers.
- In 2018/19, Greater Manchester Police reported more incidents involving Tasers (1,442), whether discharged or not, than any other force with the exception of the Metropolitan Police.



- In 2018/19, Black people were subject to the use of Taser by Greater Manchester Police at nearly 4 times the rate of white people.
- In 2018/19, Greater Manchester Police reported more incidents involving the use of Tasers against children under the age of 18 than any other force with the exception of the Metropolitan Police. In total, Greater Manchester Police reported 118 such incidents including eight against children under the age of 11.
- In 2018/19, Greater Manchester Police reported that individuals perceived by the officer to have either physical or mental disabilities constituted 210 cases, 15% of total incidents involving Tasers.

INTRODUCTION

“Two coppers approached the gate and he [Jordan Begley] told them he had been accused of robbing a handbag. Next thing, armed police turned up and asked if they could have a word inside with him. Jordan thought he was going to discuss a handbag. But he never came back out... Jordan was carried out on a stretcher. And it sounds incredible, maybe it was shock but I had no clue he was fighting for his life. They took him away at 9:20pm. Jordan’s eyes were flickering and I told him I was going to get my shoes on and go to the hospital. I’ll never know if he heard me or not... A doctor took me into a room and told me he had died at 10pm. I will never be able to explain that feeling. The police took everything away from me, they didn’t give me the chance to say a proper goodbye to him. If he had heard my voice, would he have carried on fighting? I didn’t think I was going to be burying my son – it’s the hardest thing you ever

have to do and I didn't want to do it... My life just changed overnight."

Dorothy Begley, mother of Jordan Begley. Gorton, Greater Manchester (White, 2015).

"Michael [Gilchrist] did not die that day, but in many ways, he has been taken from us, his family. He is no longer able to communicate and he is largely verbally mute. Michael had a quality of life before he came into contact with Greater Manchester Police and he has suffered life-changing injuries as a result of that contact. All we have ever wanted is answers and meaningful engagement with the police. Instead, we have been made to feel sub-human. The officers on the scene did not see beyond the colour of Michael's skin."

Novlyn Graham, mother of Michael Gilchrist. Wythenshawe, Greater Manchester (Boyle, 2019).

Dorothy Begley and Novlyn Graham, two mothers whose lives have been irrevocably transformed by police contact, raise an alarm about the growing threat to life presented by Tasers in the hands of police. This is an alarm to which we should all be alert. Introduced in 2003 as a 'less lethal' alternative to firearms, Tasers have since become the widely accessible weapon of choice deployed by officers. Official statistics published each year by the Home Office show a rapid escalation in police access to and usage of Tasers with the weapon deployed, whether discharged or not, in over 20,000 incidents across England and Wales in 2018/19 alone (UK Home Office, 2019). Against this backdrop, the pain expressed in the voices of these mothers' bear witness to the devastating costs of police use of Tasers.

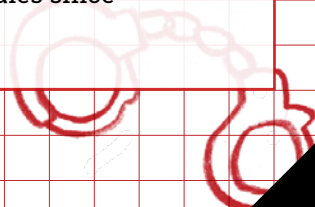
Their sons, Jordan Begley and Michael Gilchrist, had a lot in common. Both came-of-age in the working-class community of Wythenshawe in South Manchester though Jordan would subsequently move with his mother to Gorton. Both had tight-knit families with whom they spent much of their time when not at work as a factory operative and gardener respectively.

Both men suffered from underlying mental or physical health conditions: Michael was bipolar and on the autism spectrum while Jordan had complained of intermittent chest pain and blackouts in the weeks prior to his death. And, in incidents less than a year apart, these vulnerabilities – along with others of race and class – would be exploited as comorbidities in devastating encounters with Greater Manchester Police (GMP) officers armed with Tasers (White, 2015; Wheatstone 2013; Boyle 2019).

Some may be tempted to view the experiences of Jordan Begley and Michael Gilchrist as the tragic but exceptional result of the misconduct of ‘a few bad apples’ – officers who violated the policy guidelines and used Tasers in an unnecessary, unreasonable and inappropriate fashion. However, as this report establishes, Tasers pose an intrinsic and growing threat to life. Through the ‘Osman warning’, the police are required under Article 2 of the Human Rights Act of 1998 to give ‘notice’ where ‘intelligence’ suggests that a life is in danger. In this spirit, this report is written to inform members of the public of the threat to life posed by the increasing adoption of Tasers by police forces across England and Wales.

Human rights and medical experts have raised significant concerns about the general health and safety risks associated with Tasers including the potential for cardiac complications leading to death. These risks are heightened when Tasers are deployed against children or vulnerable adults suffering from underlying health issues such as cardiac and pulmonary conditions, diabetes and epilepsy. Moreover, an examination of statistical data shows that these inherent risks are compounded by discrimination and disproportionately borne by Black communities and individuals suffering from mental health conditions with potentially fatal consequences.

The first part of the report is dedicated to an examination of these broad concerns surrounding the increased access to and use of Tasers by police in England and Wales since



2003. As a Greater Manchester-based organisation we are especially concerned with how these developments have impacted the communities in which we live, study and work. With this in mind, in the second part of the report we focus on the use of Tasers by GMP drawing on statistical data followed in the third part by the personal accounts of those – including Jordan Begley and Michael Gilchrist – who have been directly impacted. In concluding, we identify several key areas of concern that demand the immediate attention of policymakers, legal professionals, advocacy groups and members of the public.

BACKGROUND

POLICE USAGE OF TASERS IN ENGLAND AND WALES

Conducted Energy Devices (CEDs), more commonly known by the brand name Taser, are potent weapons designed to transmit 50,000 volts of electricity to shock and incapacitate individuals. The weapon fires needle-tipped darts up to 21 feet, penetrating clothing and delivering an electrical charge into the body. In the drive-stun mode, the weapon is held directly against the body for greater potency to achieve pain compliance (IPCC, 2014).

CEDs, or Tasers, were first introduced into police forces in England and Wales in 2003. The nearly two decades since have witnessed a significant expansion in police access to and usage of Tasers. Initially trialed with specialist firearms officers in five forces, the weapon was made available in 2008 to non-firearms officers and subsequently rolled out to all 43 police forces in England and Wales in 2013. Deployed in the first instance as a 'less lethal' alternative to firearms, Tasers are now used by police in a much wider array of circumstances (McGuinness, 2016; UK Home Office, 2019).

Over the past year, the Home Office has redoubled its commitment to the expanded use of Tasers. In 2019, Northamptonshire Police became the first force to arm all



Image: three officers at a protest in Wales carrying Tasers

frontline officers with the weapon, a practice subsequently adopted by other forces (Baker, 2019). In March 2020, Home Secretary Priti Patel asserted that Tasers constitute a “vital option in dangerous situations,” and that forces will receive a further £6.7 million to purchase an additional 8,155 devices (UK Home Office, 2020). By April 2020, nearly a fifth of all

police officers in England and Wales were trained to use the weapons with calls growing among rank-and-file officers and some senior police figures for universal adoption (Busby, 2020).

CONCERNS RAISED ABOUT POLICE USE OF TASERS

The significant expansion in police access to and usage of Tasers in England and Wales has provoked concern among human rights and medical experts as well as the families of individuals directly impacted by the weapons. Increasingly, these concerns are also being echoed by some senior police officials, the courts and agencies tasked with investigating and reviewing police conduct such as the Association of Police and Crime Commissioners (APCC) and the Independent Office for Police Conduct (IOPC).

The concerns raised relate to four overlapping issues.

1. The general health and safety risks associated with Tasers;
2. The particular risks associated with usage of Tasers against children and vulnerable adults;
3. Significant racial disparities in Taser usage;
4. The broader societal impact of excessive Taser usage on the principle of policing by consent.



Image: a Taser X26.

1. General health and safety risks

A central rationale for the use of Tasers is their perceived function as a safer, “less lethal” alternative to firearms for police seeking to “mitigat[e] the threat of violence” (McGuinness, 2016). However, human rights and medical experts have raised significant concerns about the

health and safety risks associated with Tasers including the potential for cardiac complications leading to death.

In the United States, Reuters has documented 1,005 incidents in which individuals died after police used a Taser since the early 2000s. Studies of autopsy reports obtained from 712 of these incidents revealed that in 153, or more than one-fifth, of cases the Taser was a cause or contributing factor to the person’s death (Eisler et al., 2017).

In the UK, Amnesty International reports that 18 people have died after a Taser was discharged against them by police since 2003. In official investigations, coroners’ inquests have now identified the use of a Taser as a cause or contributing factor in the deaths of at least three individuals – Marc Cole, Jordan Begley and Andrew Pimlott (Amnesty International, 2018; Dearden, 2020).

Particular concern has been raised about the health risks posed by Taser’s X26, a model still widely used by police forces in both the US and UK. Released in 2003, the X26 emerged as Taser’s most popular and powerful CED, designed to deliver 100 microcoulombs of electricity with each pulse. If the darts impale the flesh the potency increases, making the X26 capable of delivering a charge of up to 135 microcoulombs per pulse. Increased evidence of the risks associated with the X26 model have prompted declarations of concern from many human rights bodies including the United Nations Committee

Against Torture. Taser International (now Axon Enterprise, Inc.) denied the allegations but halted sales of the X26 in the United States and Canada in 2014, focusing on the production of several new lower-powered 'smart' digital weapons (Girion, 2017; UN Committee against Torture, 2007).

The Taser X26 model was the standard issue Taser employed by all 43 police forces in England and Wales until 2018 (UK Home Office, 2017). That year, Taser discontinued production of the device and Home Secretary Amber Rudd announced that forces would be authorised to replace the weapon with the new lower-powered X2 model. However, police continue to carry and use both weapons (Travis, 2017).

Indeed, the X26 model was the weapon deployed in all three of the deaths where coroner's inquests have ruled Taser as a cause of contributing factor. Those inquests' also raised additional concerns about prolonged and multiple Taser discharge as well as the weapon's use in situations where flammable substances are present (Inquest, 2015; Inquest, 2020). Following the Marc Cole inquest, Coroner Geraint Williams called for a review of Taser usage:

"In evidence it was clear that there is no understanding about the potential for incremental risk with multiple Taser activations, and no training provided as to the maximum number of activations, nor of their duration which is appropriate or safe."

(BBC, 2020)

The Independent Police Complaints Commission (IPCC, now the IOPC) has also expressed "major concerns" about police use of Taser in the drive-stun setting in which the weapon is held directly against the body of the subject. According to the IPCC, when used in this manner the Taser "does not have the incapacitating effect [...] and is purely a means of pain compliance" (IPCC, 2014).

2. Taser use against children and vulnerable adults

While Tasers present a general risk, human rights and medical experts have raised particular concerns about the enhanced threat posed by the weapon to children and vulnerable adults – particularly pregnant women, the elderly and those with underlying health problems. There are also significant issues around the disproportionate usage of Tasers against individuals with mental health conditions.



In 2012, the UK Government's Defence Scientific Advisory Council Sub-Committee on the Medical Implications of Less-Lethal Weapons (DOMILL) formally acknowledged the heightened risks associated with Taser usage against individuals with underlying health issues including cardiac and pulmonary conditions, diabetes and epilepsy. However, DOMILL's report (2012) concluded that "the risk of death or serious injury" remained "very low". Despite these findings, incidents of vulnerable adults suffering injury or death involving a Taser have prompted advocacy groups to call for reforms and, in some cases, an outright statutory ban. Epilepsy Action, for example, called for an independent review and enhanced police training following a number of high profile cases involving the use of Tasers against individuals during, or just after, an epileptic seizure (Epilepsy Today, 2011; Disability

News Service 2011). The Association of Chief Police Officers (ACPO) subsequently agreed to partner with the organisation to produce material for inclusion in national training programs (IPCC, 2014).

The 2012 DOMILL report also indicated that children may be at greater risk of cardiac incidents and other internal injuries caused by Tasers, though it did not recommend that police avoid use of the weapon in such cases. In fact, the number of incidents involving the use of Tasers against children has been steadily growing. Between April 2018 and March 2019, 1,700 incidents took place involving the use of Tasers against children under the age of 18 in England and Wales, constituting a 78% increase from the previous year. In total, children accounted for 8% of all Taser incidents where data was available. Of that total, 29 incidents appear to have involved children under the age of 11 years, though the Home Office qualified that there are problems with how data on Taser usage against children is reported (UK Home Office, 2019). The Children's Rights Alliance for England (CRAE) reports that Black children are disproportionately subjected to Taser usage with data from the Metropolitan Police indicating that Black children constituted 54% of all Taser incidents involving children under 18 years in 2017/18 (CRAE, 2019). Both the United Nations Committee on the Rights of the Child and the CRAE have called for the abolition of the use of Tasers on children (Mercer, 2018; CRAE, 2019; UN Committee on the Rights of the Child, 2008).

The escalating use of Tasers against persons with mental health conditions both in secure psychiatric settings and the community has emerged as another key area of concern. A 2018 report published by Justice Gap showed that two-thirds of people Tasered by police between 2010 and 2014 were identified as having a mental health condition (MacAttram, 2016b). Tasers have been deployed in secure psychiatric facilities for over a decade but their use was not monitored or reported until 2017 (Gallagher, 2017). A preliminary study by The Guardian revealed that in the first year of reporting, patients in secure

psychiatric facilities had a Taser drawn, aimed or fired at them on at least 96 occasions (Marsh, 2018). The human rights group Black Mental Health (BMH UK) has raised awareness about the overrepresentation of Black Britons in secure psychiatric settings and their increased chances of being subjected to coercive practices including the use of Tasers. BMH UK has joined with legislators in calling for a statutory ban on the use of Tasers against people detained under the Mental Health Act (MacAttram, 2016a).

3. Significant racial disparities in Taser usage

As the preceding discussion indicates, racial disparities are pronounced in Taser usage with Black people (meaning those of African or Caribbean heritage) being disproportionately impacted. The Guardian published a study of the Home Office's data between April 2018 and March 2019. The study found that Black people were subject to the use of Tasers by police in England and Wales at almost 8 times the rate of white people. Dr Michael Shiner asserts that it was "the failure to address these disparities and the blanket refusal to consider how police forces might regulate the use of Taser through policy"



that prompted him and representatives of several human rights groups – including Liberty, Inquest, StopWatch and The Open Society – to announce their resignation from the National Taser Stakeholder Advisory Group (NTSAG) in March 2020 (Correspondence with Dr Shiner, 2020). In their joint resignation letter, the groups argued that NTSAG is “relied on to legitimise” the use of Tasers but was “regularly sidestepped” and the contributions of members devalued (Busby, 2020).

4. Societal impact of excessive Taser use on the principle of ‘policing by consent’

Broader concerns have also been raised about the increased usage of Tasers and the implications for the principle of policing by consent.

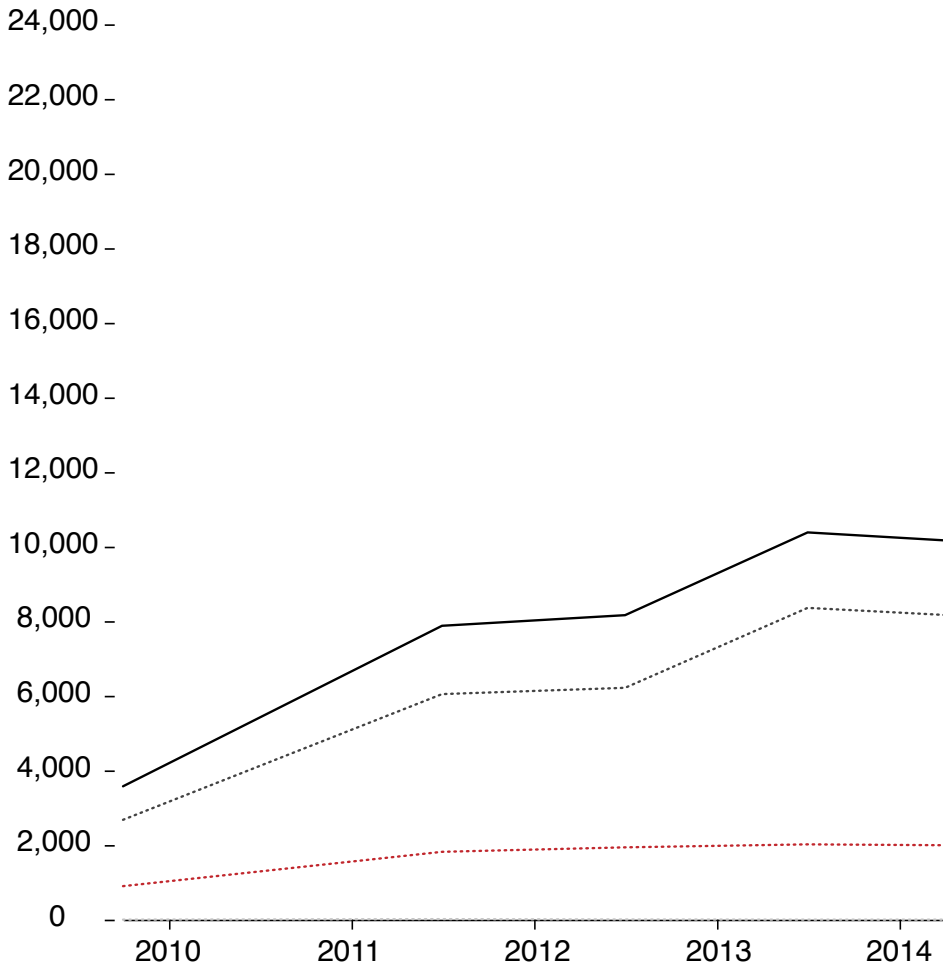
Expanded access to Tasers has contributed to a significant growth in the use of the weapon against members of the public. Home Office data shows that in the decade since Tasers were first rolled out to officers across England and Wales the total number of recorded incidents involving a Taser, whether discharged or not, has increased by more than 500% from 3,573 incidents in 2009/10 to 23,451 incidents in 2018/19 (UK Home Office 2011, 2019).

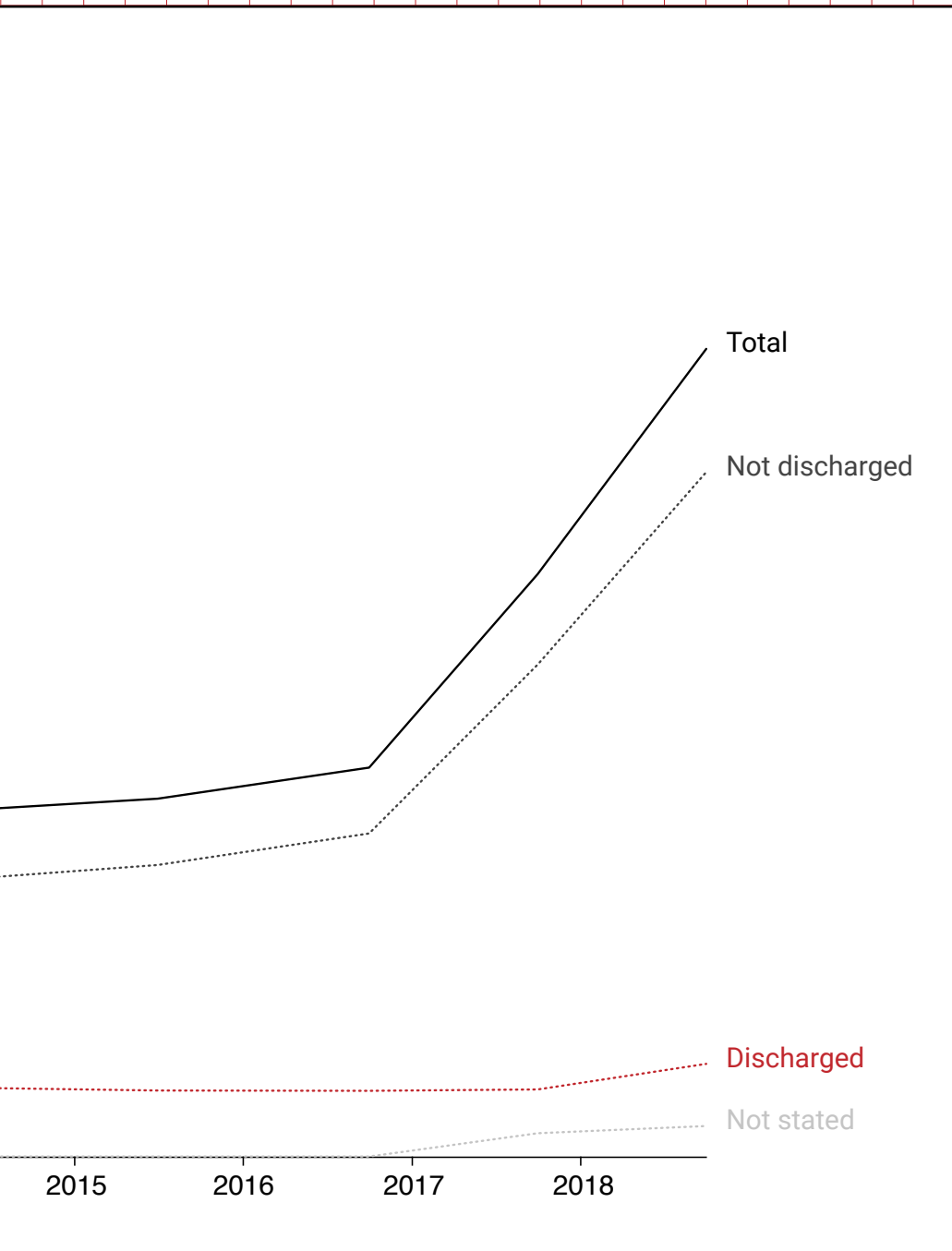
Comparing incidents of Taser usage across years is complicated by recent changes in the Home Office’s recording practices. Specifically, the Home Office collected and reported Taser usage data by calendar year (Jan-Dec) until 2017 when it shifted to a financial year basis (Apr-Mar). While acknowledging these limitations, the year-on-year growth in total Taser usage remains striking with 7,877 incidents reported in 2011 increasing to 8,161 (2012), 10,380 (2013), 10,095 (2014), 10,390 (2015), 11,294 (2016), 16,913 (2017/18) and 23,451 (2018/19). Based on these figures, police more than doubled their use of Tasers in the last three years (UK Home Office, 2017, 2018, 2019).

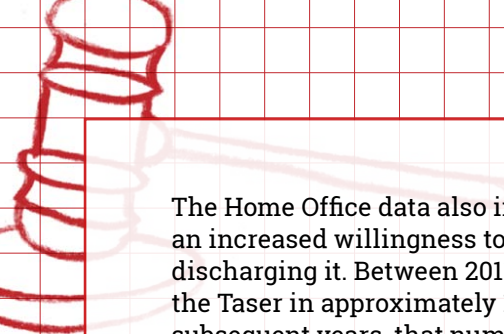
(See ‘Overall annual Taser use by England and Wales police, 2009-19’ graph on p 16 – 17)

OVERALL ANNUAL TASER USE BY ENGLAND AND WALES POLICE, 2009-19

Graph vertices are placed in the middle of each reporting period.







The Home Office data also indicates that police are showing an increased willingness to draw their weapon without discharging it. Between 2011 and 2015, the police discharged the Taser in approximately 1 in every 5 incidents. In subsequent years, that number has declined to 1 in every 8 incidents despite growing access to and use of Tasers (ibid.).

Such data raises significant concerns not only about the ballooning number of Taser incidents but also that police use of the weapon is becoming routinised to intimidate and secure compliance from the public. Amnesty International's Oliver Sprague alerted the public to these potential risks as early as 2011. Sprague asserted that police guidelines governing the use of Tasers were too broad and fostered an over-reliance on the weapon in situations where other methods might be utilised. "If you can get instant compliance by just pointing a Taser then there's a strong argument for drawing it immediately," Sprague explained. Such methods conflict with the principle of policing by consent and serve to undermine police-community relations, particularly in the wider context of institutional racism and overpolicing (LCSSA, 2011).

In rebuttal, some – including representatives of the Police Federation for England and Wales – point to the fact that Tasers are only discharged in a small percentage of cases and assert that the "mere presence of the equipment is often enough to de-escalate situations" (Police Federation, 2020). Yet, a 2018 study by University of Cambridge researchers in partnership with City of London police found just the opposite: that officers carrying Tasers were more likely to be assaulted than those on unarmed shifts (Ariel et. al, 2018). According to researchers, "Tasers can trigger the 'weapons effect': a psychological phenomenon in which sight of a weapon increases aggressive behaviour". Moreover, the study also showed that the use of force by officers carrying Tasers was 48% higher than officers on unarmed shifts. "In what researchers term a 'contagion effect', even those unarmed officers accompanying Taser carriers on 'treatment' shifts used force 19% more often than those on Taser-free 'control' shifts." In short, the mere presence

of a Taser increases the likelihood of violence to both officers and members of the public (Uni. Cambridge 2018).

In 2014, the IPCC issued its own warning against the use of Tasers on the basis of availability as opposed to necessity, encouraging the “monitoring and analysis of Taser use locally... to ensure that Taser is not being used too readily and too often by particular police officers or teams.” In that 2014 report, the IPCC also called on Police and Crime Commissions to “review data around Taser use for their police force and for most similar forces to enable them to identify reasons for any significant differences” (IPCC, 2014, McGuinness, 2016).

Earlier this year, following a series of high-profile incidents of Taser usage against Black men in London, Manchester and the West Midlands, the IOPC (formerly the IPCC) called once again for “greater scrutiny” of the weapon’s usage. IOPC Director General Michael Lockwood acknowledged that:

“more officers are now carrying Taser and there are growing concerns both locally and nationally about its disproportionate use against black men and those with mental health issues.”

Lockwood stated:

“I remain concerned that these incidents have caused damage to police and community relations and are impacting on public confidence in police. There must be more research to understand issues of disproportionality as well as assurance and scrutiny of Taser use at a local level - this means oversight, looking at complaints, talking to community members and reviewing this not just when something goes wrong, but 365 days a year. I am urging Deputy Mayors for Policing and Crime, Police and Crime Commissioners and the wider police service to listen and respond to the concerns being raised”.

(IOPC, 2020)

Phill Matthews, the Conduct and Performance lead for the Police Federation, disputed the IOPC’s statement, asserting:

“we do not recognise and disagree there is a disproportionate use of Taser against BAME communities or people with mental ill health”

(Police Federation, 2020).

However, the Association of Police and Crime Commissioners (APCC) wrote to the College of Policing and the National Police Chiefs' Council (NPCC) to ask for an urgent review of Taser use and training. Martyn Underhill, Police and Crime Commissioner (PCC) for Dorset and APCC lead on use of force, stated:

“It is clear there are concerns at [...] police use of Taser in contentious circumstances, including in relation to levels of disproportionality with BAME (Black, Asian and Minority Ethnic) communities. PCC's are responsible for holding their chief constables to account for the effectiveness and efficiency of policing across all communities and this includes their use of Taser”.

(Thompson, 2020)

It is against this backdrop of growing calls for scrutiny, that we now turn to the issue of Taser usage by the Greater Manchester Police.

BY THE NUMBERS: TASER USE BY GREATER MANCHESTER POLICE

Resistance Lab is concerned with the impact of these broader and well-documented national developments on local policing practices in Greater Manchester. By examining governmental records in tandem with the personal testimonies of individuals and families directly affected, we aim to promote better understanding of the ways in which expanded police access to and usage of Tasers has impacted the communities in which we live, work and study.

Our understanding of how GMP employ Tasers and other use of force tactics has been enhanced by recent reforms to mandated reporting practices. Since the introduction of Tasers

in 2003, all police officers have been required to complete a Taser deployment form to record any and all usage. This data is stored, compiled and publicly reported by the Home Office on an annual basis. In 2017, the Home Office expanded reporting to include all 'use of force' incidents, a term that captures a range of tactics from physical restraint to use of a baton, firearms, police dogs, irritant sprays and CEDs. According to the Home Office, this is a new and 'experimental' statistical collection that it is still working to refine. However, this data provides valuable insight into the scope and scale of police use of force in England and Wales as well as the performance of forces at the local level (excluding British Transport Police). Crucially, this data also affords the public information related to how variables such as race and ethnicity, age, gender, and disability inform encounters with police officers. (UK Home Office 2019a)

An examination of Home Office use of force data on the Greater Manchester Police (GMP) raises a number of areas of concern.

1. GMP USES TASERS MORE OFTEN THAN OTHER FORCES

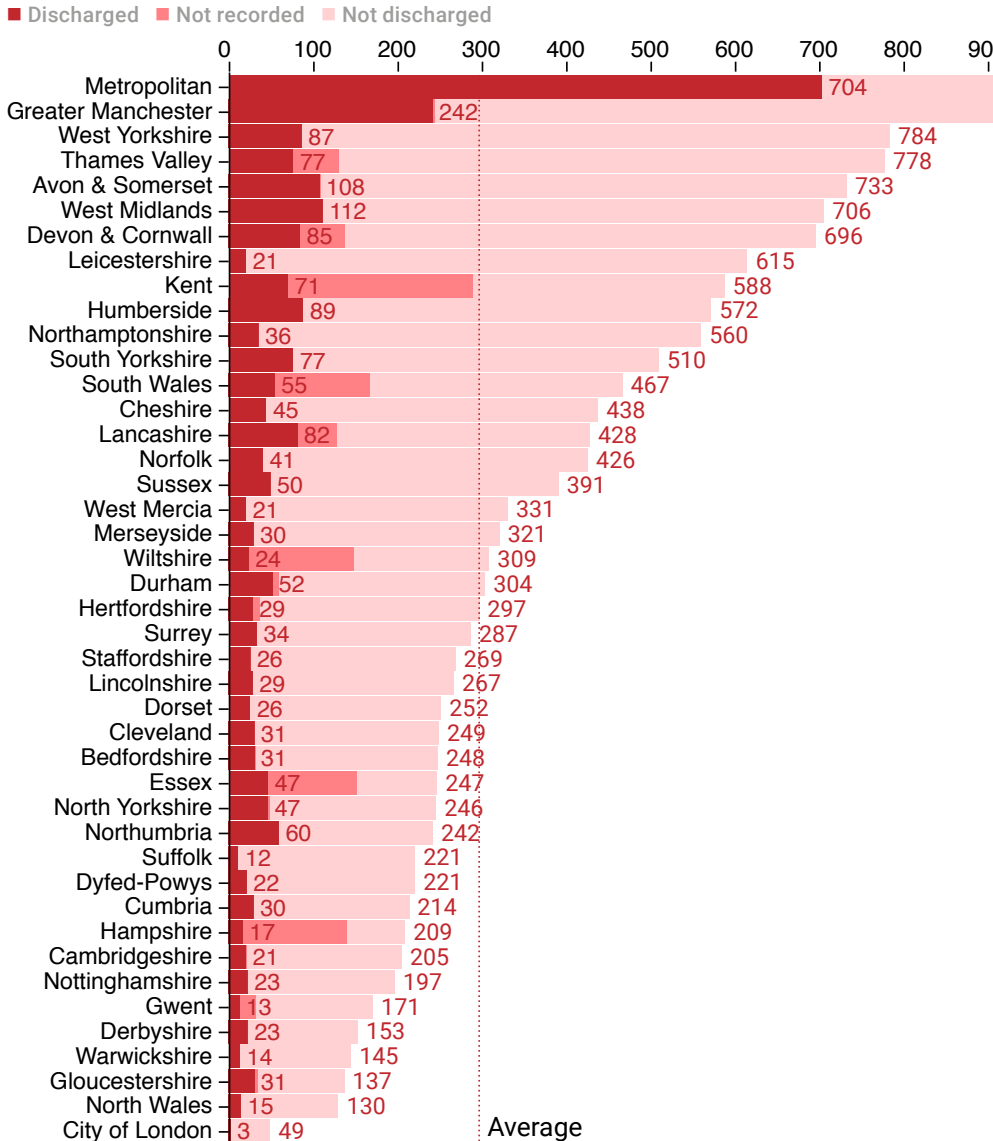
Home Office data for April 2018 through March 2019 indicates that GMP reported more incidents involving Tasers (1,442), whether discharged or not, than any other force with the exception of the Metropolitan Police (7,396). In total, GMP accounted for 6% of all incidents involving a Taser in England and Wales in 2018/19.

(See 'Police Taser use in England and Wales' graph on p 22 – 23)

It is perhaps unsurprising that police forces located in heavily populated urban areas report larger total numbers of incidents involving Tasers. However, an examination of the rate of Taser usage per 100 officers reveals that GMP ranked 11th highest out of the forty-three forces in England and Wales. In total, GMP averaged 22 incidents involving a Taser per 100 officers between April 2018 and March 2019. Northamptonshire Police – the first force to make Tasers available to all frontline officers in 2019 – had the highest rate at 47 incidents per 100 officers.

POLICE TASER USE IN ENGLAND AND WALES, 2018-19

Graph shows total count. Metropolitan Police's count has been truncated for readability.



0 1,000 1,100 1,200 1,300 1,400 1,500 1,600 1,700 1,800 1,900 2,000

7396 →

1442

(See 'Police Taser use in England and Wales per 100 officers, 2018-19' graph on p 26 – 27)

2. THE RATE AT WHICH GMP USES TASERS IS RISING QUICKLY

GMP's use of Tasers is rapidly increasing, with a total of 1,442 incidents in 2018/19 up from 832 in 2017/18, 799 in 2016, and 779 in 2015. In the last financial year alone GMP's Taser use increased by 73%. This increase comes on the heels of GMP's decision in June 2017 to double the number of officers trained to use Tasers, resulting in 1,100 of the force's 6,300 frontline officers equipped with the weapon (BBC, 2017). Though 2018/19 witnessed a significant expansion in the weapon's availability and use nationwide, GMP's rate of increase (73%) exceeded the national average of 39% as well as that of comparable forces such as the Metropolitan Police which reported a 49% increase in the use of CEDs.

(See 'The 10 UK police forces in England and Wales with the biggest increase in Taser use between 2017-18 and 2018-19' graph on p 28 – 29)

3. GMP ARE FIRING THEIR TASERS MORE OFTEN THAN OTHER FORCES

GMP officers are also more likely to discharge a Taser during the course of their duties than their counterparts in other forces. In 2018/19, GMP reported that police discharged a Taser on 242 occasions, or approximately 1 in every 6 incidents involving the weapon. During that same period, the national average was approximately 1 in every 8 incidents while the Metropolitan Police reported that Tasers were discharged during approximately 1 in every 10 incidents involving the weapon.

4. GMP ARE DISPROPORTIONATELY USING TASERS AGAINST BLACK PEOPLE

GMP also reports significant racial disparities in the usage of Tasers with Black people disproportionately impacted. In 2018/19, GMP reported 1,442 incidents involving use of a Taser in Greater Manchester. Of that total, the ethnicity of the subject

was perceived by the reporting officer to be White in 1,118 (78%); Black in 142 (10%); Asian in 94 (7%); Chinese in 2 (0.1%); Mixed in 48 (3%); Other in 20 (1%) and Don't Know in 18 (1%). Though whites constituted a numerical majority, Black people were subject to the use of Taser, whether discharged or not, at nearly 4 times the rate of white people by GMP (Office for National Statistics 2011).

(See 'Relative chance of being involved in a police Taser incident in England and Wales: Black (or Black British) vs White, 2018-19' graph on p 30 – 31)

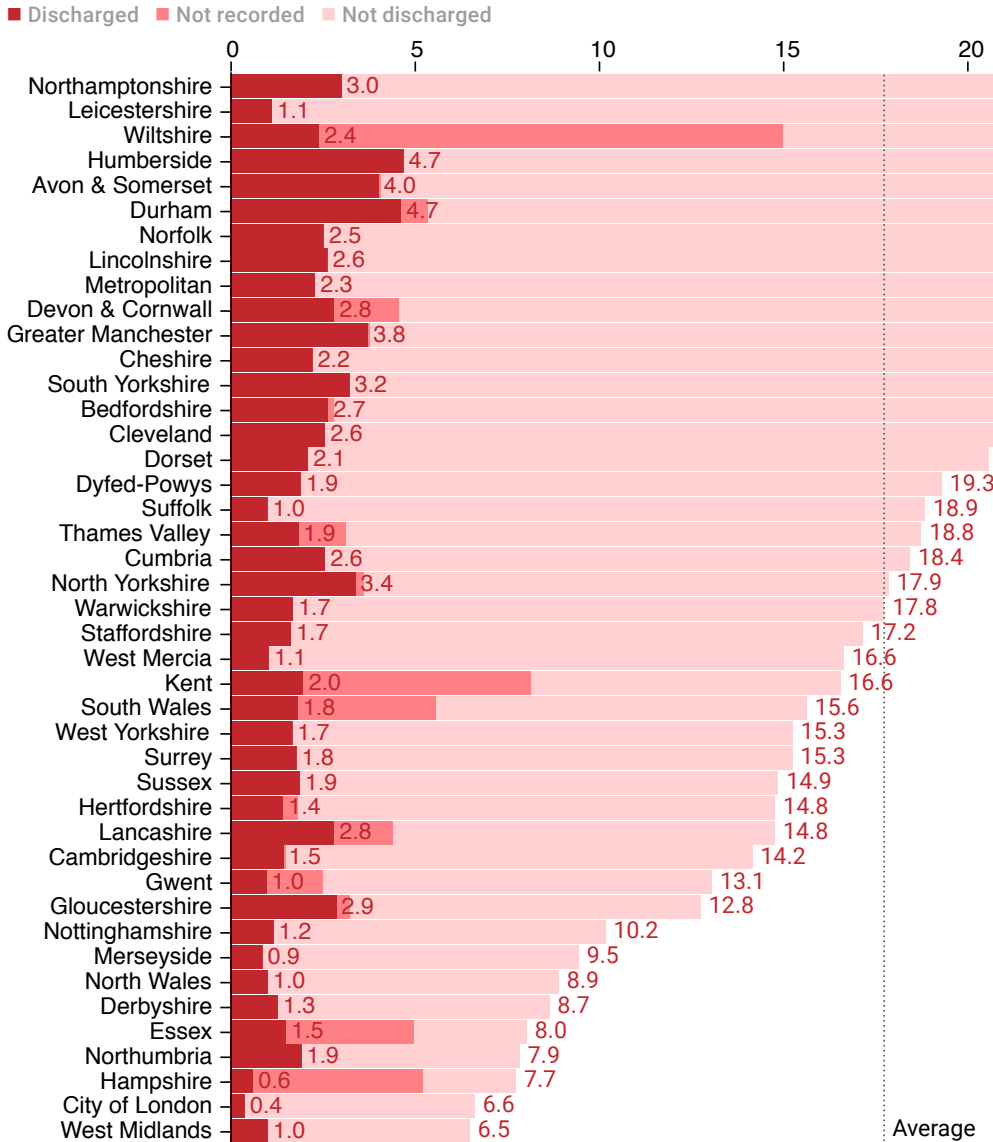
5. GMP ARE USING TASERS AGAINST CHILDREN AT HIGH RATES, EVEN THOSE UNDER THE AGE OF 11 YEARS

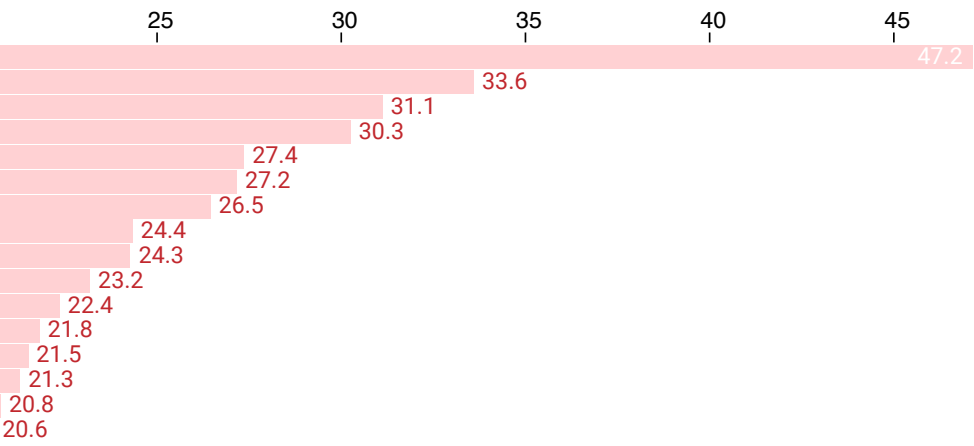
GMP also reports high rates of Taser usage against children. In 2018/19, GMP reported more incidents involving the use of a Taser against children under the age of 18 years (118), whether discharged or not, than any other force with the exception of the Metropolitan Police (783).

As with general Taser usage, it is perhaps unsurprising that police forces located in heavily populated urban areas like London and Manchester report higher numbers of total incidents. However, an examination of the rate of Taser usage per 100 officers reveals that GMP ranked 6th highest out of forty-three forces in England and Wales. Between April 2018 and March 2019, GMP averaged 1.8 incidents involving the use of a Taser against children under the age of 18 per 100 officers. This average exceeded other forces with a commensurable number of officers such as the West Midlands Police which reported a total of 38 incidents for an average of 0.35 incidents per 100 officers. The highest rate of Taser usage against children under the age of 18 years was reported by Northamptonshire Police which averaged 3.8 incidents per 100 officers.

Unfortunately, we do not have data that considers age in relation to other characteristics such as race and ethnicity. However, studies of comparable forces such as the

POLICE TASER USE IN ENGLAND AND WALES PER 100 OFFICERS, 2018-19





THE 10 UK POLICE FORCES IN ENGLAND AND WALES WITH THE BIGGEST INCREASE IN TASER USE BETWEEN 2017 – 18 AND 2018 – 19

2017-18

Greater Manchester 832

West Yorkshire 425

Leicestershire 242

Cheshire 188

Northamptonshire 183

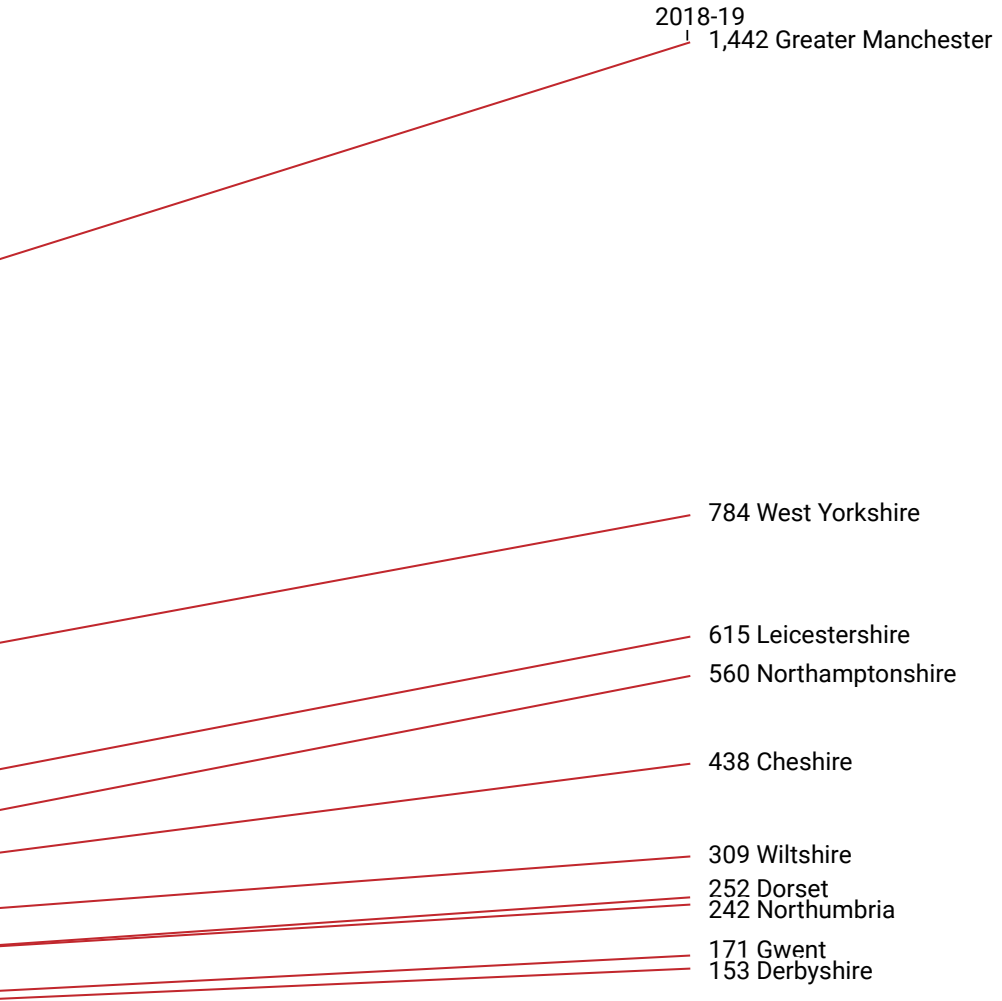
Wiltshire 164

Northumbria 125

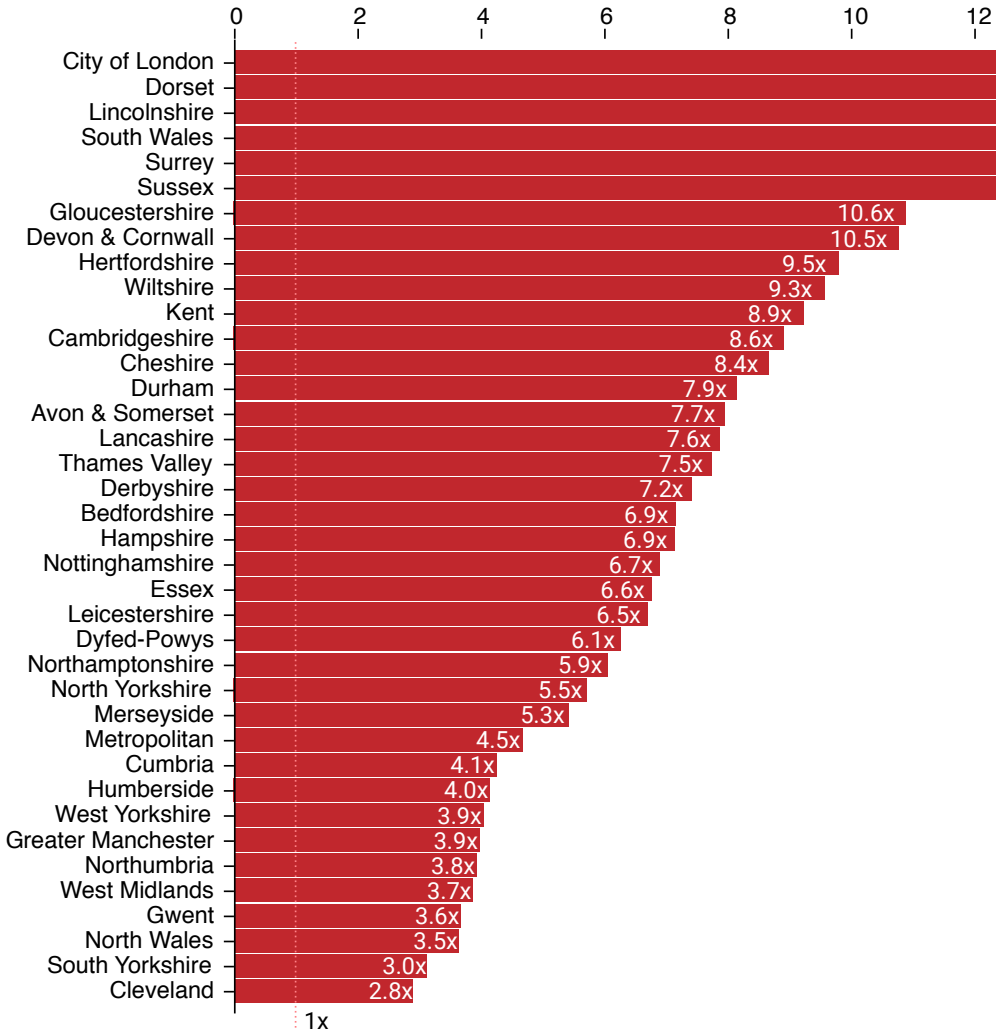
Dorset 118

Gwent 72

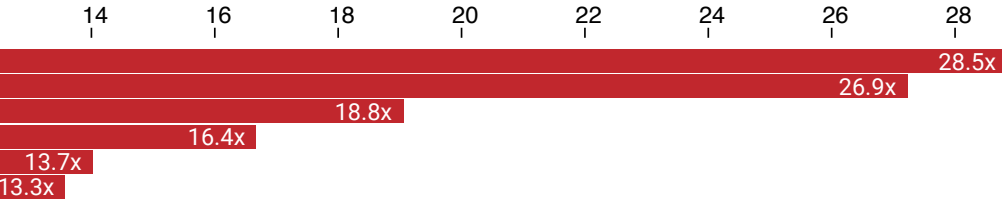
Derbyshire 68



RELATIVE CHANCE OF BEING INVOLVED IN A POLICE TASER INCIDENT IN ENGLAND AND WALES: BLACK (OR BLACK BRITISH) VS WHITE, 2018-19



Ethnicity is officer-defined as the police do not capture self-identity for race. Rate is proportional to racial demographic breakdown in each Police Force Area. No force-specific data is available for Staffordshire, Warwickshire, West Mercia, Norfolk and Suffolk.



Metropolitan Police indicate that Black children are grossly overrepresented in incidents involving the use of Tasers (CRAE, 2018).

The situation is even more troubling when considering the specific experiences of children under the age of 11 years. Between April 2018 and March 2019, the Home Office reported 29 incidents of Tasers being used against children under the age of 11 years in England and Wales. Of those incidents, GMP was responsible for a total of 8 – more than any other force in the country. The Home Office cautions that there are “known errors in the under 11 data”, including instances of Taser usage against animals and other cases that have been “incorrectly categorised”. However, such findings demand urgent clarification and are indicative of a culture in which the threat and use of violence against children is increasingly normalised.

(See ‘Police Taser use against children age 17 and under in England and Wales, 2018-19’ graph on p 34 – 35)

6. GMP ARE USING TASERS AGAINST PEOPLE WITH DISABILITIES AT HIGH RATES

Home Office use of force statistics include data related to disability. However, as with other variables considered in this report (e.g. age, race and ethnicity) data on disability is recorded from the perception of the reporting police officer and is therefore less reliable than might initially appear. Moreover, many disabilities are invisible and thus underrepresented in the data.

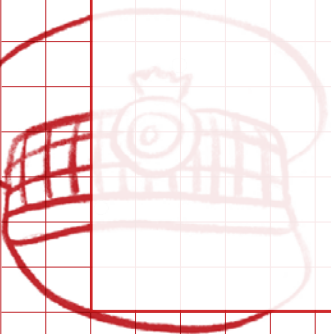
Despite these challenges, Home Office data does provide a window into some of the disparities that exist in Taser usage related to people perceived by officers as having “physical or mental disabilities.” In 2018/19, GMP reported that individuals perceived to have either physical or mental disabilities constituted 210 or 15% of all Taser incidents (1,442). An examination of the rate of Taser usage against such individuals reveals that GMP ranked 23rd highest out

of forty-three forces in England and Wales. Between April 2018 and March 2019, GMP averaged 3.3 incidents involving the use of a Taser against an individual with mental and/or physical disabilities per 100 officers. Particularly high average rates of Taser usage against individuals with disabilities were recorded by smaller forces – such as Devon & Cornwall (9.4 per 100 officers), Dyfed-Powys (8.8 per 100 officers) and Northamptonshire (8.9 per 100 officers).

(See 'Proportion of Police Taser use in England and Wales against those identified by the officer to have a disability, 2018-19' graph on p 36 – 37)

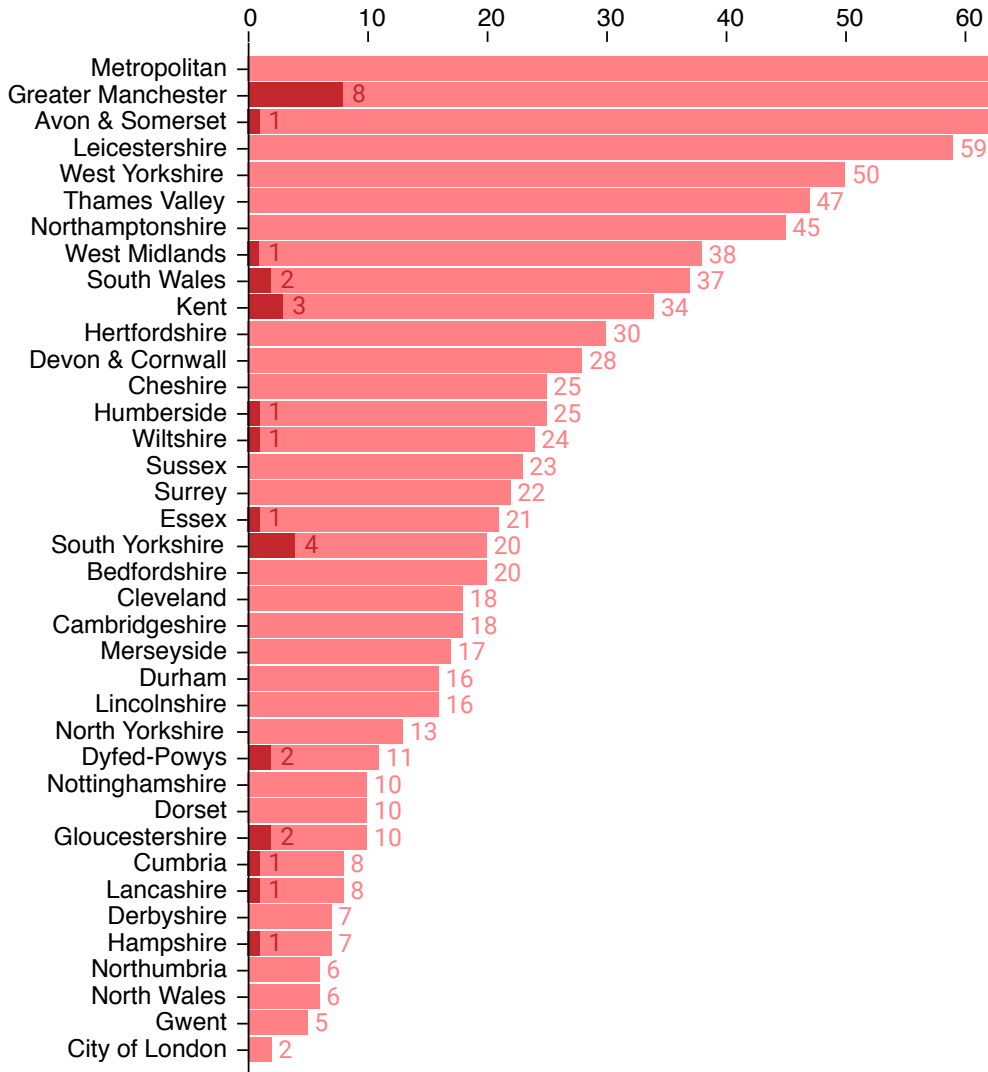
THE IMPACT: TASER USE BY GREATER MANCHESTER POLICE

The Home Office's data paints a stark picture of the rapid growth and racially disproportionate usage of Tasers by GMP officers with potentially deadly consequences especially for children and vulnerable adults. A weapon initially conceived as a 'less lethal' alternative to firearms now presents a growing threat to life and public safety in the hands of Greater Manchester Police. That threat is best understood by the victims of Taser use and their families who, in many cases, have fought protracted battles for justice. This section of the report aims to shed greater light on the devastating impacts of Taser use by foregrounding the experiences of three Mancunians between 2009 and 2014 – Howard Swarray, Jordan Begley and Michael Gilchrist.

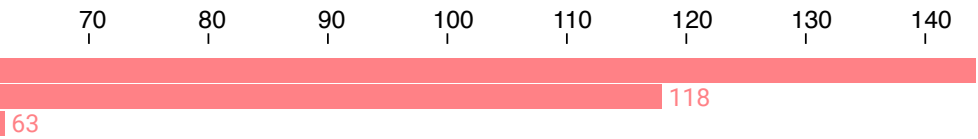


POLICE TASER USE AGAINST CHILDREN AGE 17 AND UNDER IN ENGLAND AND WALES, 2018-19

■ Under 11 years old ■ 11 – 17 years old

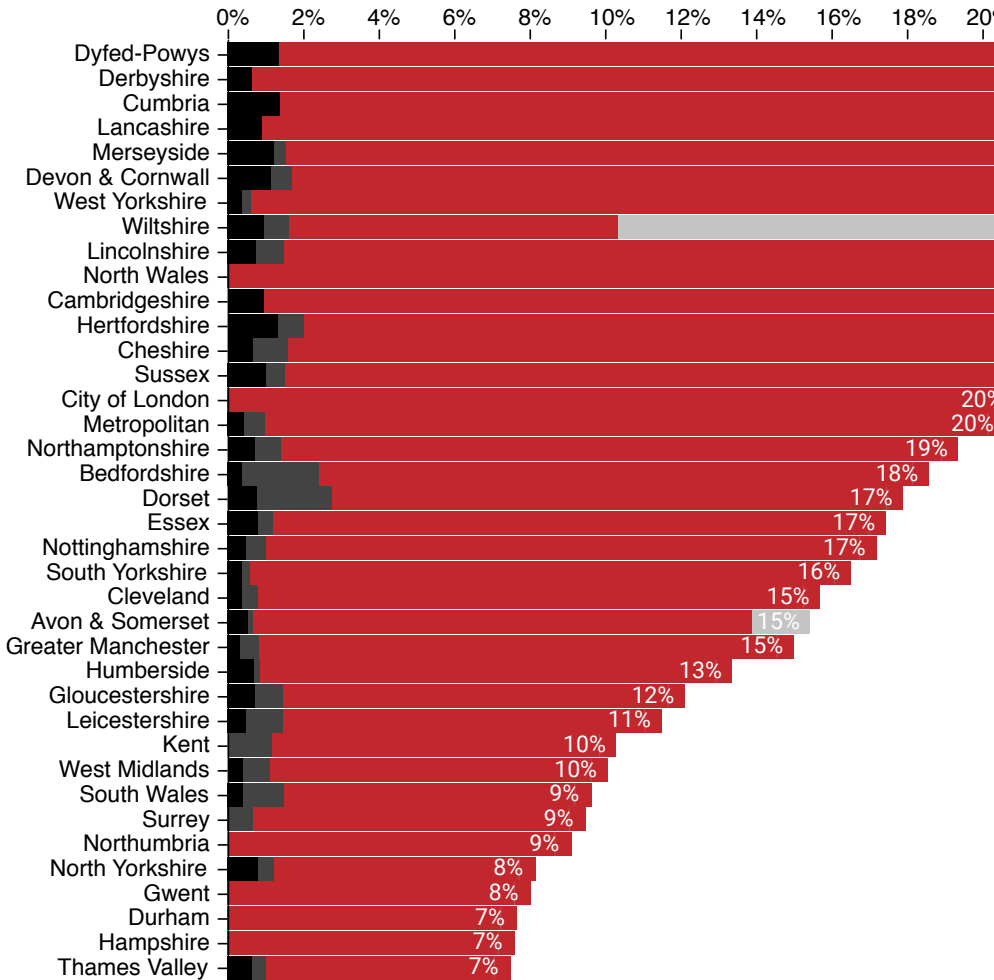


Graph shows total count. Metropolitan Police's count has been truncated for readability. No force-specific data is available for Staffordshire, Warwickshire, West Mercia, Norfolk and Suffolk.

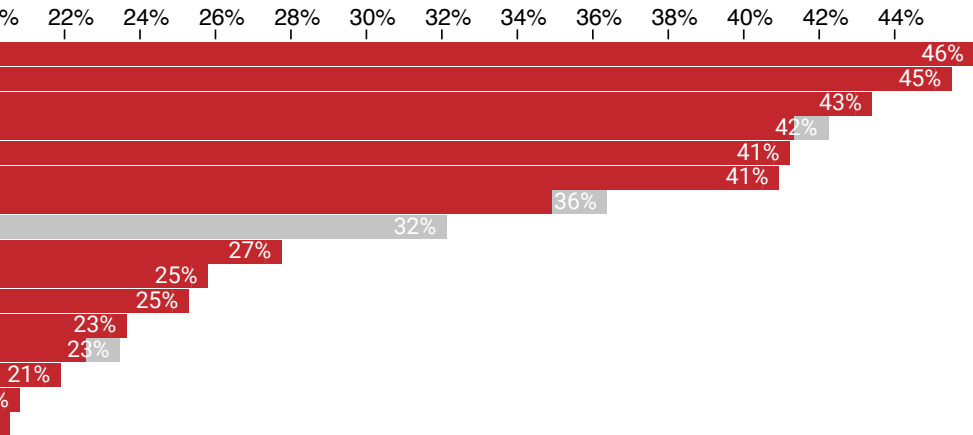


PROPORTION OF POLICE TASER USE IN ENGLAND AND WALES AGAINST THOSE IDENTIFIED BY THE OFFICER TO HAVE A DISABILITY, 2018-19

■ Mental and physical disability ■ Physical disability ■ Mental disability ■ Not recorded



Disability status is officer-defined as the police do not capture self-identity for disability status. No data is available for Staffordshire, Warwickshire, West Mercia, Norfolk and Suffolk.



HOWARD SWARRAY (2009)

In the early hours of November 23, 2009, 41-year-old Howard Swarray threw on his gym clothes and made his way to the Whalley Range Powerhouse Gym for his regular morning workout. Within a few minutes, he began to feel light-headed. Having been diagnosed with epilepsy, Howard recognised this sensation as the onset of a seizure which he attributed to stress related to the one-year anniversary of his daughter's death. As he collapsed to the ground, gym staff and fellow customers rushed to help. Fifteen minutes later paramedics were on the scene checking Howard for injuries and evidence of underlying health problems that might have triggered the events.

In the next few moments, Howard lashed out in a postictal state of confusion and disorientation. Unaware of his actions or surroundings, he struggled with the paramedics and others trying to assist him before climbing atop a reception desk. It was at this point that paramedics felt it necessary to call GMP for assistance. On the drive over, one officer asserted:

"If he is getting aggressive, I am sure 50,000 volts will stand him up."

Upon arrival police attempted to physically restrain Howard, kicking his legs out from under him. The officer who had made the aforementioned threat then drew and fired his Taser twice, the second time in the controversial drive-stun mode with the weapon held directly against Howard's body. The other officers stood on Howard's legs and bent back his toes until they could place him in restraints. Howard was subsequently taken to the Manchester Royal Infirmary where he was sedated and spent eight days in an induced coma (Wired Gov, 2011; MEN, 2011).

In the aftermath, Howard was diagnosed with renal failure stemming from the physical exertion and muscle contractions caused by the epileptic seizure and subsequent struggle with police. Medical professionals explained that Howard would not have been in control of his actions during this postictal phase

and, for his part, Howard claimed no recollection of the events at all. "I nearly died," he explained. "All I remember is waking up in intensive care. I wasn't being violent, I was having a seizure" (MEN, 2011; BBC, 2011; Wired Gov, 2011). Beyond the physical effects, Howard's experience also left him suffering from panic attacks and prolonged bouts of depression. "When I go out now, I'm scared. I hope nothing happens to me and I have a seizure in the street because I may have to go through what I was put through last time waking up in intensive care." (LCCSA, 2011)

While police and politicians often extol the virtues of Tasers in the battle against terrorism and violent crime, Howard's experience – an unarmed Black man experiencing a medical emergency – tells a different and increasingly common story. As the preceding Home Office data shows, Black men like Howard are already four times more likely to have a Taser drawn on them by GMP than their white counterparts. For Howard, this risk was further compounded by his invisible disability which could manifest in unexpected seizures leading to disorientation and perceived aggression. The availability of Tasers in the hands of police heightened these risks turning what had initially been a call for medical assistance into an event that nearly cost Howard his life.

Howard filed a complaint against GMP alleging that the officer's use of the Taser had been inappropriate and excessive. The process was long and arduous, ultimately resulting in an IPCC investigation that vindicated the officers in 2011. Though some of their behaviour may have been "questionable", IPCC Commissioner Naseem Malik found that "nothing within either ACPO or GMP policies [...] prevents the use of Taser against a person who has suffered an epileptic seizure" (Carter, 2011; MEN, 2011). When DOMILL reviewed the medical implications of Tasers that same year they found that individuals with epilepsy (and other underlying medical or mental health conditions) faced an "elevated risk of exposure to Taser discharge" due to their seeming non-compliance or aggression. DOMILL also found "equivocal evidence" to suggest

that Tasers could even trigger epileptic seizures. And yet, as with their findings on the particular vulnerabilities of children to Taser usage, DOMILL failed to call for an end to the practice (DOMILL, 2011). In the aftermath, ACPO did work with Epilepsy Action to implement new training for officers but the rollout of Tasers to forces around the country continued apace.

JORDAN BEGLEY (2013)

It was against this backdrop that 23-year-old Jordan Begley tragically lost his life after being Tasered, struck and restrained by GMP officers at his home in Gorton on July 10, 2013. His mother Dorothy Begley had called 999 when her son became upset following a neighbour's accusation that he had stolen a handbag. On the emergency call, she told police that Jordan had threatened to get a knife because men were coming to the house. When police arrived a few minutes later, Jordan was reportedly unarmed and calm, prompting the officers to ask if they could go inside and speak with him about the allegations. Much of what transpired over the next few minutes remains unclear. Yet, what is uncontested is that the interaction culminated in PC Terence Donnelly firing a Taser for nine seconds, almost twice the recommended limit, before other officers struck Jordan and tried to restrain him. In the aftermath, Jordan suffered cardiac arrest and died at Manchester Royal Infirmary later that night (White, 2015; Bunyan, 2015; Challand, 2015; Kee Ling 2016; Wheatstone 2013).

An investigation by the IPCC cleared GMP of any responsibility in Jordan's death (White, 2015). However, that initial investigation would come under judicial review after a June 2015 inquest ruled that Jordan had been "inappropriately and unreasonably" Tasered. The inquest – attended by Dorothy Begley, GMP officers and representatives of Taser International – provided an opportunity for the consideration of new evidence and witness testimony. Speaking with Resistance Lab, one juror recalled being alarmed by what appeared to be a "total unnecessary use of force and harm".

“The police turned up - a male and female. She stayed at the front and the male officer went in the house. After a minute or so he had calmed Jordan down and knew he wasn’t a threat. He then radioed to control to say back-up wasn’t needed, or something to that effect. As he calmed Jordan down the Taser Officer ran into the house and took over, shouting ‘stay where you are’. Jordan began getting agitated again. He said, ‘take your hands out of your pockets’. Jordan had no pockets. He took two steps forward and he was Tasered twice. He must have fallen and hit his head from what I saw from the photos... A minute or so after he had been tasered four firearms officers burst in. They restrained Jordan face down on the floor one 16-stone officer on each of his limbs. He was given full force blows to the back. The injuries he sustained by these officers were just astonishing. The next thing an ambulance is called, Jordan is brought out on a stretcher and later dies.”

(Begley Inquest juror, 2020)

Following deliberations, the jury delivered an unprecedented narrative verdict expressing concern about the use of Taser as well as officers’ decision to leave Jordan in a prolonged restraint position with his hands cuffed behind his back. These actions, the jury asserted, demonstrated that the officers were “more concerned about their own safety than his [Jordan’s]”. Though the initial Taser shock may not have caused Jordan’s heart to stop, the jury concluded that the weapon’s use combined with restraint were stressor factors that “more than materially contributed” to his death. This possibility was reinforced by the fact that Jordan was of slight build and had reported experiencing blackouts and chest pains in the weeks prior to his death (Hurst, 2015; Gander, 2015).

Significantly, this was the first time in British history that an inquest ruled the police’s use of a Taser to be responsible for a death (White, 2015). The inquest also raised serious questions about the conduct of GMP officers and the IPCC during the subsequent investigation. As one of the jurors recalled,

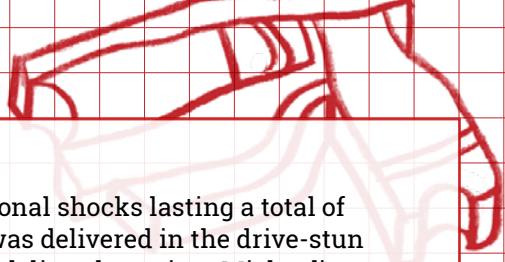
“The events that followed this involved evidence going missing, the police officer that calmed Jordan down being almost bullied and silenced [...] The police officers stories were all different, it seemed the IPCC were covering things up. It was [an] appalling abuse of power in all aspects.”

(Begley Inquest juror, 2020)

The subsequent judicial review also found flaws in the original IPCC investigation and, ultimately, quashed its decision that the officers involved had no case to answer relating to disciplinary charges of misconduct (Aston, 2016). As a result of this ruling, a second IPCC investigation was opened into Jordan Begley’s case. When the final report was published in October 2018 – more than five years after his death – it concluded that PC Donnelly had used “excessive force” and should have faced misconduct proceedings. However, PC Donnelly had resigned from GMP in March 2018 and would never face criminal prosecution. No charges were filed against the other four officers under investigation. When Dorothy Begley learned of the decision she declared it ‘a whitewash’, telling reporters that she would continue to pursue justice for her son. “Five years later, I’m still fighting for him,” she declared. “I’ve never been this angry in my life. Where do I go from here? It’s not going to go away” (Robson, 2018; BBC 2018).

MICHAEL GILCHRIST (2014)

Novlyn Graham would face a similar uphill battle following her son’s brutalisation by police in Wythenshawe on June 6, 2014. Fifty-three-year-old Michael Gilchrist had suffered a mental health episode, slashing his hands by breaking two windows. A concerned neighbour called the police after seeing Michael walking around covered in blood from his injuries. GMP officers arrived on the scene and within two minutes had deployed CS gas and fired a Taser twice, a flammable combination discouraged by police guidelines. Michael’s brother rushed to the scene and tried to explain to officers that Michael suffered from mental health problems and not to hurt him. Shortly after, PC Samuel Schofield arrived drawing his



Taser and delivering eight additional shocks lasting a total of 72 seconds. The seventh shock was delivered in the drive-stun mode in which the Taser was held directly against Michael's upper back for 13 seconds. The eighth and final shock was delivered while Michael lay prone on the ground. He was taken to hospital and left catatonic following the incident (Gilchrist v Greater Manchester Police, 2019; Boyle, 2019).

Novlyn Graham filed a complaint against GMP in 2014 but claims that she was ignored.

“They treated him like an animal. They didn’t go to see him like he was a person needing help... They just thought he was just another Black lad, he was nothing. And, when you live on a council estate you are absolute trash.”

(ITV News, 2019)

In the absence of an independent investigation, Graham filed a civil case on behalf of her son charging GMP with battery and negligence. In May 2019, High Court judge Justice O’Farrell ruled in the family’s favour, asserting that PC Schofield had used “unnecessary, unreasonable and inappropriate” force. Justice O’Farrell raised concerns about PC Schofield’s use of the Taser against an identified vulnerable adult, particularly given that it followed the deployment of CS gas and two other Taser discharges. O’Farrell also criticised PC Schofield’s use of the Taser against Michael when he was on the ground and could have been physically restrained by officers. This final shock, O’Farrell asserted, would have “inflicted unnecessary pain”. In concluding, O’Farrell stated that “PC Schofield’s use of Taser was not justified and the extent of the force used, namely eight cycles for a cumulative period of 72 seconds, was not justified” (Gilchrist v Greater Manchester Police, 2019; Boyle, 2019). Michael Gilchrist’s case is still working its way through the courts.

DISCUSSION & RECOMMENDATIONS

Taking place less than five years apart, the devastating encounters of Howard Swarray, Jordan Begley and Michael Gilchrist should have prompted a national reckoning on police use of Tasers.

These stories powerfully illustrate the concerns of researchers, human rights and medical experts and even some senior police officers and regulatory agencies highlighted in this report. They show that Tasers pose an intrinsic threat to life and public safety, and that those threats are borne disproportionately by Black communities and those with mental health conditions. And that the inherent risks associated with Taser use are heightened when deployed against children or vulnerable adults suffering from underlying health issues such as cardiac and pulmonary conditions, diabetes and epilepsy.

In each incident GMP were contacted by a family member, neighbour or medical professional concerned for the safety of a person in a state of medical or emotional distress. Upon arrival, officers – often within minutes or seconds – deployed a Taser, escalating the situation with lethal consequences for the victims. As the jury in the inquest to Jordan Begley's death concluded, the officers appeared 'more concerned about their own safety' than that of the person they had been contacted to assist.

Few are likely to disagree that the actions of the officers in question broke with the foundational principle of minimal force, which establishes that "[w]hen force is used it shall be exercised with restraint" and that "[i]t shall be the minimum honestly and reasonably judged to be necessary to attain the lawful objective". Or, that the officers' violated the mandate to "take into account the implications [and] potentially greater impact of force" on vulnerable adults (HM Inspectorate of Constabulary, 2011).

Yet despite the Herculean efforts of the surviving victims and their families, no officers were held accountable for their role in these tragedies and the national reckoning on Tasers never took place.

OUR DEMAND

With Tasers being rolled out around the country, we can only expect to see more cases in which members of the public suffer serious injury or loss of life.

Resistance Lab stands in solidarity with the victims and families impacted by police usage of Tasers and with this report we make one simple demand: the abolition of Tasers.



To find out how you can support our campaign, and for updates on this report visit: resistancelab.network

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