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LAB

Violence Prevention through Community Policing

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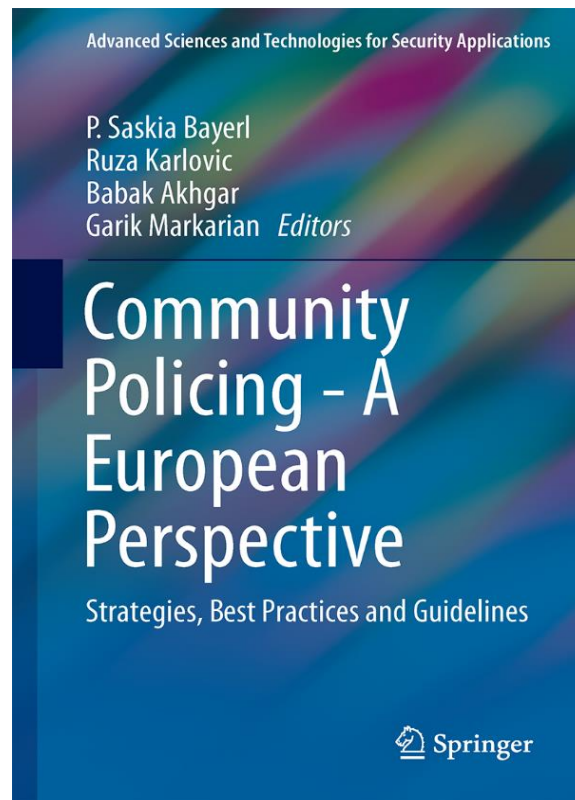


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What is Community Policing?

CP is a concept that aims to bring communities and the police together to enable co-creation of safety and security.

CP is commonly introduced as the policing cure to contemporary problems of crime and safety and has even been called the “most important development in law enforcement in the past quarter century” (Skogan, 2006)





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- Crime prevention is an important pillar of a main Internal security strategy and can contribute to citizens' safety and security in the European Union.
- an important organization in the field of crime prevention is the **EUCPN**



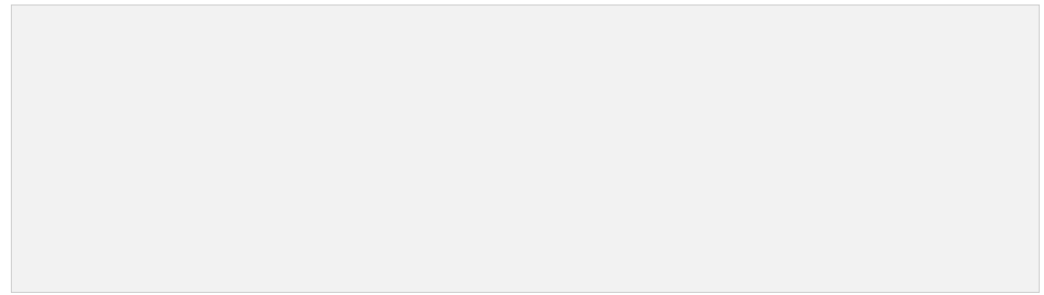
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6 pillars of CP in EU

- **trust and confidence building**
- **accountability**
- **information sharing and communication**
- **addressing local needs**
- **collaboration**
- **crime prevention** (H2020 EU Unity project)



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CP

Observing the connection between the incidents not only to maintaining order and peace but also to connect a little deeper whether something happened for the first time or is repeated



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<https://www.youtube.com/watch?v=RduvYOxSuSM> prof Sheperd who is creator of this preventive model



it is not fatal but it's got huge social consequences and





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THE CARDIFF MODEL FOR VIOLENCE PREVENTION TOOLKIT

- provides a way for communities **to gain a clearer picture about where violence is occurring by combining and mapping hospital and police data** but also providing framework for hospitals, law enforcement agencies, public health agencies, community groups, and others interested in violence prevention
- Unreported crime?



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How does it work?

- The Cardiff Model **is a multi-agency approach to violence prevention that relies on the strategic use of information from health and law enforcement organizations to improve policing and community violence prevention programs.**
- **It relies on sustained partnerships** between healthcare, law enforcement, public health agencies, other government agencies, and community organizations.
- **The basis of the model is information sharing.**



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- If the **time, date, and location of violent incidents** are captured through the Cardiff Model, a community can develop a greater understanding of how and when violence is occurring which is critical to understanding and developing violence prevention programs and strategies within the community.
- **The Cardiff Model is not intended to be used to investigate individual cases but rather improve understanding of geographic patterns of violence in the community.**



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Specific information collected

- **When** the injuries occurred (date and time)
- **Where** the injuries took place (business name and/or street address)
- **How** the injuries happened and/or weapons used (e.g. hit, stabbed with a knife)
- No other personal information (i.e., name, date of birth, social security number) is collected, shared, or used.



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- Through the **community safety partnership (CSP)**, law enforcement works hand-in-hand with the hospital and public health agency partner (at a minimum) to identify potentially new and existing violent injury hotspots.
- After identifying injury hotspots, the CSP develops innovative ways to address the specific hotspot needs.
- **HOW OFTEN DOES VIOLENCE INFORMATION GET SHARED?**
- Violence information can be shared on any mutually agreeable timeframe within the CSP. Past partnerships have found monthly sharing to be useful, although more frequent sharing could occur.



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**The evidence that the
model is effective for
violence prevention**

- 32% reduction in police recorded injuries
- 42% reduction in hospital admissions for violence



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Key steps to starting the Cardiff model in our community

1. RELATIONSHIP BUILDING

- a. Establish a violence prevention partnership with the local hospital and public health agency
- b. In collaboration with hospital partner, determine most useful injury information to collect and map

2. LAW ENFORCEMENT AGENCY BUY-IN AND SUPPORT

- a. Obtain law enforcement leadership buy-in and support
- b. Obtain permissions for sharing crime incident data with partners
- c. Provide support as need to assist public health agency or relevant partner in producing hotspot maps

3. TRAINING AND TECHNICAL PROCESSES

- a. Identify a lead point of contact for collecting law enforcement data
- b. Establish procedures for sharing data and maps



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4. INJURY INFORMATION AND MAP SHARING

- a. Establish procedures for sharing injury information and maps
- b. If necessary, develop and sign a shared data use agreement with the partners

5. COMMUNITY SAFETY PARTNERSHIP ACTIVITIES

- a. Work with hospital and other partners to establish a broader community board to review the maps on violent injury
- b. Help to develop a culture of decision-making based on real-time data
- c. Assist in implementing multi-agency prevention programs and initiatives at locations identified in the mapping of the data



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BUILDING PARTNERSHIPS

- **WHO NEEDS TO PARTICIPATE IN THE CARDIFF MODEL TO CREATE A COMMUNITY SAFETY PARTNERSHIP (CSP)?**

Strong Cardiff Model **Community Safety Partnerships** will likely involve, at minimum, public health agencies, hospitals, and law enforcement organizations.

Based on violence maps, the CSP may bring in other government agencies and community organizations.

Partnership Members may include:

- Hospitals
- Law Enforcement Agencies
- Public Health Department
- City Planning/Zoning Officials
- Mayor's Office
- Faith Based Organizations
- Business Associations
- Other Community Organizations

<https://www.cdc.gov/violenceprevention/pdf/cardiffmodel/what-is508.pdf>

Thank you for your attention!



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