Promising Strategies for Violence Reduction: Lessons from Two Decades of Innovation

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Project Safe Neighborhoods Case Study Report #13



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Promising Violence Reduction Initiatives

Project Safe Neighborhoods Case Study Report

Since reaching peak levels in the early 1990s, the United States has witnessed a significant decline in levels of homicide and gun-related crime. Indeed, whereas in 1991 there were more than 24,000 homicides in the United States (9.8 per 100,000 population), this number declined to less than 15,000 in 2010 (4.8 per 100,000 population) (Bureau of Justice Statistics, 2011). Similarly, the number of violent victimizations declined from more than 16 million in 1993 to less than six million in 2011 (Bureau of Justice Statistics, 2013). Although the decline is certainly welcome, violent crime and homicide continue to exact a heavy toll in terms of the impact on victims, families, offenders, and neighborhoods. Indeed, some estimates put the cost of a homicide at more than \$17 million per incident (DeLisi et al., 2010).

Given these human and fiscal costs, it becomes critical to identify evidence-based practices that local, state, tribal, and federal law enforcement agencies, criminal justice partners, community-based organizations, social service providers, governmental officials, and citizens can consider for possible implementation in their communities. Fortunately, since the mid-1990s several promising interventions have emerged with varying degrees of empirical support for their ability to prevent and reduce levels of crime and violence at the local level. These interventions share some common elements, although they vary in other respects. Different communities also make adaptations to these interventions when they implement them. This situation can make it difficult to specify the key dimensions of each intervention when transferring to other settings. To add to the confusion, two of the initiatives discussed below are commonly referred to as "Ceasefire" and some cities participating in the Project Safe Neighborhoods initiative have also used the "Ceasefire" terminology.

The following attempts to briefly describe the key elements of each intervention, their commonalities and their differences, and to summarize the existing research. Citations to the many reports that exist on these initiatives are provided so that interested readers can learn more about these efforts.

Boston Ceasefire

Chronologically, the first of these promising initiatives was Boston Ceasefire, also referred to as the Boston Gun Project. In response to a rise in youth homicides in the early 1990s, a multi-agency working group composed of the Boston Police Department, the U.S. Attorney's Office (District of Massachusetts), the District Attorney's Office, the Bureau of Alcohol, Tobacco, Firearms and Explosives, probation and parole, gang outreach workers, social service providers, and a team of researchers from Harvard University embarked on a problem-solving initiative focused on youth violence. The effort began with a careful analysis of homicides and gun crimes with the finding that youth violence was being driven by a small group of youths who, as both perpetrators and victims, shared common characteristics. These characteristics included having long histories of arrest and involvement in the criminal justice system, being involved in gangs and neighborhood crews and cliques of chronic offenders, and carrying guns illegally. Violence was often tied to these social networks of gun-carrying offenders.

The instrument developed to interrupt the violence, known as "pulling levers," involves a focused deterrence approach whereby a deterrence message is delivered in a group setting to those believed to be at most risk of being involved in gun violence as both victims and perpetrators. A key element of the approach is group accountability whereby the group, gang, or clique is held accountable for future violence involving any of its members. If subsequent violence occurs, the partnering criminal justice agencies seek to "pull" all available legal "levers" against members of the group (e.g., directed police patrol, probation and parole home visits, drug tests, and technical violations, service of outstanding warrants, etc.). The Boston Ceasefire program then combined the deterrent message with an offer of social services that included linking participants to mentors, vocational training, housing, and similar services. Additionally, the "moral voice" of the community was enlisted not only to express condemnation of the levels of violence but also to communicate a message of care and concern for those individuals at risk (see Kennedy, 2009; McDevitt et al. 2006). Thus, a highly focused deterrence message was combined with messages of social support and a respectful and fair process. The evidence from Boston Ceasefire program evaluations was compelling. Youth homicides declined by more than 60 percent, and comparisons to trends in other cities suggested the decline in Boston was much more significant than that observed in other cities (see Braga, Kennedy, Waring, & Piehl, et al., 2001a and b).

The promising results of Boston Ceasefire led the U.S. Department of Justice to develop a ten-city initiative known as the Strategic Approaches to Community Safety Initiative (SACSI) in 1998. SACSI would follow a similar problem-solving model to Boston Ceasefire and apply it to the most significant crime problem in the local jurisdiction (e.g., youth violence and gun crime). Initial evidence from Indianapolis, one of the ten SACSI sites, found results similar to Boston CeaseFire, with a homicide reduction of more than 30 percent. This decline stood out from trends observed in other midwestern cities (McGarrell, Chermak, Wilson & Corsaro, 2006; Corsaro & McGarrell 2009, 2010). Additionally, a National Institute of Justice study of SACSI found that the ten SACSI cities experienced crime declines that were greater than those observed in comparable cities (Roehl, et al., 2005, 2008).

However, one of the questions arising from the Boston Ceasefire strategy relates to sustainability. Years after these successful interventions, homicides increased in both Boston and Indianapolis. Organizational priorities shifted, key personnel had been reassigned or resigned, and/or the multi-agency teams that coordinated and implemented the strategy no longer existed. A lesson learned from these experiences was that successful interventions require thinking about leadership succession, resource allocation, and long-term sustainability.

Cure Violence (formerly CeaseFire Chicago)¹

Cure Violence began in 2000 as a response to the high levels of shootings and killings in Chicago. Although it shared a name with Boston CeaseFire, Cure Violence/Ceasefire Chicago applies a public health approach to preventing firearm violence by using disease control methods to prevent shooting by changing the norms that govern violent behavior. The basic logic model of the program uses multiple methods to change norms about violence both within the community and among those most likely to be involved in shootings. These methods include the use of highly trained mediators to detect and interrupt conflicts before they turn violent, outreach workers to change individual behavior, and community events, public education, and the use of

¹ In fall 2012 CeaseFire Chicago changed its name to Cure Violence.

other community messengers to reinforce community-level norm change. The Cure Violence model is meant to complement law enforcement strategies addressing violent crime. By approaching the problem from a different angle simultaneously as ongoing law enforcement strategies, synergy and further reductions become achievable.

Cure Violence works first by detecting and interrupting potentially lethal events. Cure Violence's "violence interrupters"—specially trained community conflict mediators with strong ties to the community—address ongoing disputes to prevent them from escalating to the use of firearms. Violence interrupters detect disputes by obtaining information from community members, high-risk youth, police, and hospital emergency rooms that treat gunshot victims. They then mediate the conflict to an outcome that does not require violence by talking to the individuals involved, talking to the friends and family of those involved, and in some cases bringing the people together to air their grievances.

Following the work of the Little Village Gang Violence Reduction Project in Chicago (Spergel, 2007), which used indigenous outreach workers to successfully reduce violence, Cure Violence outreach workers engage individuals in the community who are at the highest risk for being involved in a shooting, working to change their thinking about the use of violence and to steer them onto a more positive path. High-risk individuals meet four or more of the following criteria: carries or has ready access to a weapon; holds a key role in a gang; has prior criminal history, including crimes against persons; are involved in high-risk street activity such as dealing in illegal drugs; has been the recent victim of a shooting (in the last 90 days); are between 16 to 25 years of age; and has been recently released from prison or juvenile facility for a criminal offense against another person. In addition to focusing on behavior change, outreach workers serve as mentors to help these highest-risk individuals finish their education, leave gangs, address drug abuse, cope with anger issues, and learn alternatives to the use of violence.

Cure Violence also works to change overall community norms regarding violence through community mobilization and public education campaigns. The community is mobilized against firearm violence through the use of community events and responses to shootings where the residents publicly show their disapproval of the violence. A public education campaign reinforces this message with posters and fliers challenging the norms on the use of violence in these communities. Thus, multiple messengers use social pressure to reinforce the message that violence is not acceptable behavior.

A National Institute of Justice evaluation of Cure Violence generated positive findings. Analysis based on 17 years of data showed that, as a direct result of Cure Violence, shootings decreased 16-28 percent in four of the seven sites studied (Skogan, Hartnett, Bump, & Dubois, et al., 2009: ES-17). The researchers called this decrease in gun violence "immediate and permanent" in three of the sites and "gradual and permanent" in the fourth site. Additionally, gun crime hot spots were "cooled" in terms of the size and intensity with significant results found in four partially overlapping communities. In all, six of the seven communities studied had significant findings.

Researchers also looked at Cure Violence's impact on gang members and other at-risk street youth ("clients") that the program targeted. The survey found that Cure Violence was successful in providing substantial help to their clients, with 87 percent of clients receiving the help that they needed in terms of finding employment, leaving a gang, receiving assistance for drug abuse, obtaining an education, and other needs. Clients also ranked Cure Violence outreach workers second only to parents as an important adult in their lives upon whom they could rely.

Like all promising practices, one of the questions about the Cure Violence model is its transferability to other jurisdictions. Thus far, replications of the Cure Violence model in Baltimore and New York have shown similar positive findings. In New York, the Cure Violence model was implemented in one community beginning in 2010 with significant training and assistance from the Chicago team. An evaluation of the program conducted by the Center for Court Innovation found that gun violence rates were 20 percent lower in the program site compared to control areas after implementation (Picard-Fritsche & Cerniglia, 2013). In Baltimore, the Baltimore City Health Department worked closely with the team from Chicago to implement a faithful replication of the Cure Violence model. An evaluation conducted of the program in Baltimore by Johns Hopkins University and funded by the Center for Disease Control and Prevention found significant results in all four communities examined. In the one community with full implementation, there was a 56 percent reduction in homicides and 34 percent reduction in shootings. In two other sites that only partially implemented the conflict mediation component, there was a reduction in shootings of 34 percent and 44 percent, but no significant finding for homicides. In the final community, for the first period of program implementation, there was a 53 percent reduction in homicides, including a period of 22 months without a homicide. However, during the second period, workers were diverted to another area and homicides increased. Additionally, the Baltimore evaluation found that the program had a positive effect on the acceptability of the use of guns and that the effects of the program spread to surrounding areas (Webster, 2012).

There have additionally been other communities that have implemented elements of the Cure Violence model, but did not implement the model with fidelity and have had mixed results. For example, the One Vision One Life program in Pittsburgh implemented a variation of the Cure Violence model, but failed to employ appropriate workers or work with the highest risk. A National Institute of Justice study found that the program resulted in increases in gun violence (Wilson, Chermak, & McGarrell, 2011). The Operation CeaseFire program in Newark combined the Boston Ceasefire program with elements of the Cure Violence model. An evaluation of this program found reductions in gunshot wounds, but no statistically significant results Boyle, Lanterman, Pascarella, & Cheng, et al., 2010). The Cincinnati Initiative to Reduce Violence (CIRV) program also implemented a combination of the Boston Ceasefire program and the Cure Violence model, including training workers with the Chicago team. An evaluation of CIRV found statistically significant reductions in shootings and homicides (Engel, Tillyer, & Corsaro et al., 2011). The findings, along with the results from Baltimore, suggest the importance of fidelity to the Cure Violence model.

Project Safe Neighborhoods

Unlike the other initiatives which were created in local jurisdictions, Project Safe Neighborhoods (PSN) was created as a national program. PSN was designed in 2001 by officials in the U.S. Department of Justice and coordinated through 94 U.S. Attorneys' Offices that cover the United States and its territories. United States Attorneys are federal prosecutors who are considered the chief law enforcement official within their respective federal jurisdiction. In designing PSN, the U.S. Department of Justice emphasized five core components: partnerships, strategic planning, training, outreach, and accountability. PSN proposed to increase partnerships

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² More accurately there were 93 PSN initiatives representing the 94 U.S. Attorney's Offices organized by federal judicial districts. Guam and the Mariana Islands were considered one PSN site.

between federal, state, and local law enforcement agencies through the formation of local gun crime reduction task forces. Additionally, PSN encouraged establishing partnerships with other sectors of local government, social services, community groups, and citizens to increase resources for preventing gun crime and to increase the legitimacy of interventions.

The strategic-planning and problem-solving component of PSN was designed to help jurisdictions tailor PSN to their local context. Specifically, PSN provided resources for the inclusion of a research partner. The research partner would work with the PSN task force to analyze the local gun crime problem and to share the findings with the task force for the development of a proactive plan for gun crime reduction. The research partner would also assist in the ongoing assessment of the program implementation and provide feedback to the task force. Finally, PSN included a significant commitment of resources to support training and community outreach.

Although there was variation across the 93 PSN task forces,³ the provided training emphasized several common features. First, it was a focused deterrence model. That is, rather than increasing the threat of sanctions for all offenders, this program was highly focused on reducing gun crime. Additionally, emphasis was placed on understanding the patterns of gun crime in the local jurisdiction so that enforcement and prevention resources could be directed to the people, places, and contexts generating gun crime. One example of an intervention that emerged in several communities was the use of a data-driven approach to identify high-risk, high-volume violent offenders upon whom enforcement resources would be concentrated (Bynum, Decker, Klofas, Hipple, McGarrell, & McDevitt, et al., 2006).

Second, resources were provided to communicate the deterrence message to those at risk for engaging in gun crime as both offenders and victims. This included a media campaign of risk messages through a variety of outlets (e.g., radio, television, billboards, and posters in jails and community centers).

Third, resources were provided for the development of intervention and prevention programs. Again, there was wide variation across the various PSN sites in terms of the nature of these programs. Following the Boston and Indianapolis programs described above (see Boston CeaseFire), a number of sites attempted to combine a deterrence message with social support opportunities specifically tailored to high-risk offenders—not only telling these individuals to stop carrying guns and to stop the violence but also offering support and the hope for an alternative set of choices. This was a common PSN strategy, using direct communication to atrisk individuals through what has become known as Offender Notification Meetings (McDevitt, Decker, Hipple, McGarrell, Klofas, & Bynum, et al., 2006). In addition to providing support (e.g., mentoring, vocational training, and job preparation), these meetings were intended to increase the participants' perception of fairness and legitimacy of the overall approach. Other PSN districts followed the experience of Richmond, Virginia's Project Exile (Rosenfeld, Fornango, & Baumer, 2005). Project Exile emphasized raising the risk for illegal gun carrying by increasing federal prosecution for illegal gun possession. Most commonly, this approach involved individuals with prior felony convictions who are prohibited from possessing a firearm or ammunition. The increased threat of federal prosecution was combined with a public education campaign intended to reinforce the message against illegal possession and use of firearms.

The evaluation of PSN involved two stages. The first was a series of PSN case studies in ten jurisdictions to test the impact of PSN on gun crime. These sites were chosen because of

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³ In a number of districts, there was more than one PSN task force operating in different cities within the district.

evidence that they were implementing PSN in a rigorous fashion. Two of the jurisdictions followed the Project Exile approach, while the other eight followed either a model similar to Boston Ceasefire or a hybrid of Boston Ceasefire and Project Exile. All ten test sites witnessed reductions in violent crime. Eight of the ten tests reached statistical significance and two were equivocal. Overall, depending on the type of violent crime, the reductions ranged from two percent to 42 percent. Given that the ten sites were not randomly selected, the results were not generalizable to all PSN sites, but they did suggest that the strategy holds promise for reducing gun crime.

The second stage in the evaluation involved a cross-city comparison of all U.S. cities with a population of more than 100,000. This resulted in a comparison of 82 PSN target cities to 170 non-target cities. PSN target cities were compared with non-target cities by level of PSN implementation or PSN dosage. Dosage was determined by combining measures of research integration, partnerships, and federal prosecution (value range of 3-9). There was also an additional focus on federal prosecution level changes per capita. The outcome variable was the annual number of violent crimes (homicide, aggravated assault, and robbery). During the years 2000 to 2006, PSN target cities in high dosage districts experienced statistically significant declines in violent crime compared to both PSN target cities in lower dosage districts and non-PSN comparison cities. PSN target cities witnessed a nearly nine percent decline, whereas nontarget cities were relatively unchanged. Perhaps most striking is that, whereas non-target cities in low dosage districts experienced a nearly eight percent increase in violent crime, target cities in high-dosage districts experienced a 13 percent decline in violent crime. Thus, when comparing high-dosage treatment sites with low-dosage comparison sites, there was a 20 percent difference in the trend in violent crime.⁵ These basic trends were further analyzed in multivariate analyses using Hierarchical Generalized Linear Models (HGLM). These models allow testing of the trend in violent crime while controlling for a variety of other factors known or believed to influence the level of violent crime (i.e., concentrated disadvantage, population density, police staffing levels, and incarceration trends). The HGLM models revealed that the relationship between being a target city, the dosage level, and the trend in crime was statistically significant controlling for these other factors. Thus, the patterns suggested that, where PSN was implemented with the greatest intensity and fidelity, it had an impact on levels of violent crime.

PSN continued to evolve to include a specific focus on reducing gang crime: the Comprehensive Anti-Gang Initiative (CAGI). CAGI was implemented in 20 cities across 13 U.S. Attorney's Offices that included significant support for developing enforcement, prevention, and re-entry programs aimed at gang members and those considered at risk for gang involvement. An evaluation of CAGI found results similar to the findings of PSN in that the level of implementation was associated with impact. Specifically, high levels of enforcement were associated with a fifteen percent reduction in violent crime when CAGI cities were compared to other similar U.S. cities (McGarrell, Corsaro, Melde, Hipple, Bynum, & Cobbina, et al., 2013).

One of the strengths of PSN and CAGI is that it allowed a national program to be adapted to the local context and that it included local research partners who could conduct local-level problem analyses to support this local adaptation. However, this strength also made it difficult to

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⁴The comparisons differed from site to site. In some cases, comparison neighborhoods were available; in others, it was the trend in the rest of the city or the trend in nonviolent crime. In most sites, the comparisons were not ideal from a methodological standpoint, but the consistent patterns were suggestive of impact.

⁵ This part of the analysis used level of federal gun prosecution as the measure of implementation dosage. See McGarrell, et al. 2009 for full details.

provide a generalized description of specific interventions, as they tended to vary from jurisdiction to jurisdiction.

Drug Market Intervention

Drawing on their successful experience in addressing gun and gang violence through adaptation of the Boston Ceasefire model, police officials in High Point, North Carolina embarked on a new problem-solving approach that sought to permanently shut down illegal, open-air drug markets. Under this strategy, which has come to be known as the Drug Market Intervention (DMI) model, High Point officials sought to incapacitate chronic drug-selling offenders involved in violence, divert and deter lower-level dealers, and build community partnerships to reclaim neighborhoods so that the short-term enforcement gains were accompanied with an increase in collective efficacy and informal social control to prevent the drug market from re-emerging.

The High Point DMI model began with a systematic problem analysis to better understand the nature of specific, geographically defined drug markets. This included developing an understanding of who is involved in the drug market and their network connections. After selecting a specific drug market (ideally a few blocks in size), the police proceeded with a traditional undercover operation. The purpose of the undercover operation was to build cases against those individuals identified as being active in drug sales within the particular market. Once all the cases were established, a systematic review of all the dealers was conducted to distinguish between those with records of violence and those with less chronic and less severe records of criminal activity. Those offenders deemed too serious to be diverted from prosecution and incarceration were handled through traditional prosecutorial processes, which might have involved federal prosecution if the case warranted it. Those considered "redeemable," that is, not showing signs of violence and not having a serious and chronic record of offending, were included in a group who were diverted from prosecution. These individuals were invited to attend a meeting along with family members or other significant people in their life, also known as "influentials." At the meeting, the evidence developed against them was summarized and law enforcement informed the offenders that they could be arrested and prosecuted immediately but were being given a second chance instead. In exchange for this second chance, the drug market in which they current work was now permanently closed. Should the market re-emerge or the individual continue their dealing, then they were subject to the original criminal charges that were being held as well as any new charges. There were also social services personnel on hand to inform the offenders of available social support and legitimate opportunities (e.g., drug treatment, vocational training, housing, mentoring, etc.).

During the time that the undercover operation was wrapping up and officials were preparing for the call-in meeting, the police met with local residents, family members, and social service providers. These meetings had multiple objectives. First, the police hoped to have local residents participate in the meeting and express their concern about the drug dealing and the associated neighborhood problems. They also hoped that local residents would communicate a message of care and redemption to the diverted dealers (i.e., "you are valued members of the community but the drug dealing must stop"). Second, the police felt that by showing their concern with the problem of drug dealing, as well as their concern with the people involved in drug dealing, local residents would be more likely to work with the police to "co-produce" order

and prevent the drug market from re-emerging. Third, the police sought to identify formal and informal social service providers who could work with the diverted offenders.

The final stage of the intervention, the maintenance phase, involved an initial display of increased police presence in the neighborhood. This has varied from community to community but it typically involves some level of increased police presence and certainty of police response to calls for police service. The temporary increased police presence was intended to convey the message that the police and the community will not tolerate a return of the drug market. Gradually, the police withdrew their visible presence and, as planned, relied on local residents to assert control over public space, similar to the situation in so-called "healthy neighborhoods" where residents would never tolerate open-air drug sales (Kennedy, 2009; Kennedy & Wong, 2009; Hipple, Corsaro, & McGarrell, 2010; Corsaro, Brunson, & McGarrell, 2010; Frabutt, Shelton, DiLuca, Harvey, & Hefner, et al. 2009).

High Point has implemented the DMI intervention throughout the city in a number of specific neighborhoods suffering from open-air drug markets. Basic pre-post intervention comparisons have indicated significant reductions in crime following the implementation. A recent analysis of the initial DMI intervention using time series evaluation techniques indicated that the initial West End Neighborhood treatment area experienced a substantial decline in violent and drug-related crime and a more modest decline in property offenses. When assessed in terms of the autoregressive integrated moving average (ARIMA) time series analysis, both the decline in violent and drug-related offenses were statistically significant (Hipple, Corsaro, & McGarrell, 2010).

Two additional evaluations of the DMI approach have been conducted in Rockford, Illinois and Nashville, Tennessee. In Rockford, both property and violent crime declined, although only the property crime decline was statistically significant. In Nashville, crime declined in the four categories examined (violent, property, narcotics, and drug equipment) as well as in calls for police service. Only the narcotics and drug equipment crime decline proved to be statistically significant. In all three communities, interviews with local residents revealed a perceived decline in crime and disorder, reported improvement in the quality of neighborhood life, and a greater appreciation for the police (Frabutt, et al. 2009; Corsaro, Brunson, & McGarrell, 2010, forthcoming).

Given the promise of these findings, the Bureau of Justice Assistance established a training and technical assistance program to support communities interested in the DMI approach (see www.dmimsu.com). To date, 24 communities have completed the training, and approximately 20 communities have self-implemented DMI. Additionally, the National Institute of Justice has awarded a grant to the RAND Corporation to conduct a rigorous evaluation of DMI. The results from the RAND study will be important in determining the level of evidence behind the DMI model as well as better understanding its impact on violent, property, and drug-related crime.

One question that has arisen in the Bureau of Justice Assistance program is the applicability of the model to contexts where drug dealing is not conducted in an overt, geographical hot spot location but instead is being conducted largely through the use of cell phones with mobile locations of actual drug transactions. Several medium-sized cities have noted the emergence of these highly mobile drug market contexts where drug-selling networks operating in multiple locations are the focus of the intervention. It remains unclear how much of an impact the DMI strategy has on these mobile markets.

Summary

Figure One summarizes the key components of these four initiatives as well as several of their distinguishing characteristics. Thus, for example, all of the initiatives put a premium on establishing new partnerships focused on reducing violent crime and all rely on research and analysis to support a data-driven approach to violence prevention and control. All of the programs include an emphasis on delivering a risk communication message to both the general public and those believed to be at greatest risk of being involved in violence either as a perpetrator or victim. Three of the programs tend to be driven by either local law enforcement or the U.S. Attorney's Office, typically working closely together, whereas the Cure Violence/CeaseFire Chicago program can be led by a mayor's office, health department, university, or nongovernmental or community agency. The PSN and DMI programs borrow from Boston Ceasefire by taking a focused deterrence approach. For PSN, there was a heavy emphasis on increasing levels of federal prosecution for gun crimes, with three programs giving great attention to communicating a credible threat of increased prosecution at federal and/or local levels. Cure Violence relies on direct interruption of shootings or killings, behavior change, and direct communication on the streets of credible messaging to highest-risk populations, and all the programs seek to link at-risk individuals to legitimate services and social support.

Additional detail on these programs, including information about where they have been implemented and evidence of their impact, is provided in Figure Two. Although there remains a need to develop additional evidence on the impact of these strategies and on the key ingredients that are generating violence reduction, they clearly offer a series of promising practices that local jurisdictions can consider as they take problem-solving steps to prevent and reduce violent crime.

Finally, Figure Three presents a logic model based on the strategic problem-solving framework to assist communities move from the local analysis of their gun crime problem to implementation and evaluation of impact. Problem analysis of the gun crime issue should isolate the key risk factors driving violent crime that in turn suggest specific strategies. Thus, for example, if the analysis indicates that much of the violence is associated with gangs or networks of offenders, then the Boston Ceasefire and Cure Violence models offer evidence-based approaches. Victims and offenders with prior felony convictions who are illegally carrying guns may have their behavior influenced through the deterrent threat of federal prosecution for such offenses. A significant proportion of street-level disputes resulting in shootings and homicides would indicate the promise of the Cure Violence model. Violence, crime, and disorder associated with overt drug markets call for the DMI approach. To the extent that violent crime is associated with geographically defined hot spots, these models can be supplemented by evidence-based interventions such as directed police patrol and nuisance abatement targeted at problem properties. Finally, it should be noted that communities may find that their serious violent crime problem is driven by several of these causal factors and thus multiple interventions may be warranted. Indeed, cities like Cincinnati, Cleveland, High Point, Milwaukee, and Providence, among others, have implemented both the group-based intervention associated with Boston Ceasefire and the DMI intervention. Cure Violence has also been replicated simultaneously with PSN in several cities. When coupled with the participation of a research partner, this type of experimentation and ongoing assessment can result in continual refinement of these practices to achieve the ultimate goal of enhanced community safety and reduced victimization.

Figure One: Key Components of Violence Reduction Initiatives

	Boston	Cure Violence/	Project Safe	Drug Market
Component	Ceasefire	CeaseFire Chicago	Neighborhoods	Intervention
Law enforcement driven	X		X	X
Public health driven		X		
Focused deterrence	X		X	X
"Pulling levers" approach	X		In some jurisdictions	X
Linkage to services	X	X	X	X
Violence interrupters		X		
Data driven	X	X	X	X
Partnerships	X	X	X	X
Communication strategy	X	X	X	X
Community-wide intervention		X		
Use of outreach workers	X	X		
Local organization driven		X		

Figure Two: Comparison of Promising Violence Reduction Initiatives

Initiative	Focus	Objective	Strategy/Methods	Organizational Locus	Sample Jurisdictions	Initial Time Period & Impetus	Evidence of Impact
Boston Ceasefire	Youth gun violence	Reduce homicide and shootings among youths and young adults	Problem-solving model that involves identifying groups most at risk for involvement in gun violence and employing "pulling levers" strategy	Multi-agency working group (police, U.S. Attorney's Office, BATF, county prosecutor, probation and parole, social services, community and faith-based partners)	Boston, Minneapolis, SACSI sites (Albuquerque, Atlanta, Detroit, Indianapolis, Memphis, New Haven, Portland, Rochester, St. Louis, Winston- Salem), Cincinnati, Lowell, Stockton	Mid-1990s High levels of youth gun violence in Boston	Statistically significant declines in homicides and/or gun crime in jurisdictions evaluating program

Figure Two: Comparison of Promising Violence Reduction Initiatives (continued)

Initiative	Focus	Objective	Strategy/Methods	Organizational Locus	Sample Jurisdictions	Initial Time Period & Impetus	Evidence of Impact
Cure Violence/ CeaseFire Chicago	Firearm violence Gang violence	Change operative norms regarding violence Provide onthe-spot alternatives to violence with gangs and individuals Increasing the perceived risks and costs of involvement in violence	Outreach workers and violence interrupters used "theory driven" interventions based on a public health model to interpret the cycle of violence and to change norms about violent behavior	Outreach workers and violence interrupters from the community, police/local law enforcement, community organizations, local faith leaders	Chicago, Baltimore, New York, Pittsburgh, plus 13 additional sites	High levels of firearm violence	Evaluation of Cure Violence/CeaseFire Chicago indicates reductions in 4 out of 7 target areas (from a total of 13), with shootings decreases of 17-24%. Evaluations from Baltimore and New York City indicate reductions in gun violence. Study of a Pittsburgh program modeled on Cure Violence finds unexpected increase in violence in target neighborhoods. Questions arise as to that program's fidelity to the Cure Violence model. Blended models in Newark (not statistically significant) and Cincinnati (reductions in shootings and homicides) yield inconsistent results.

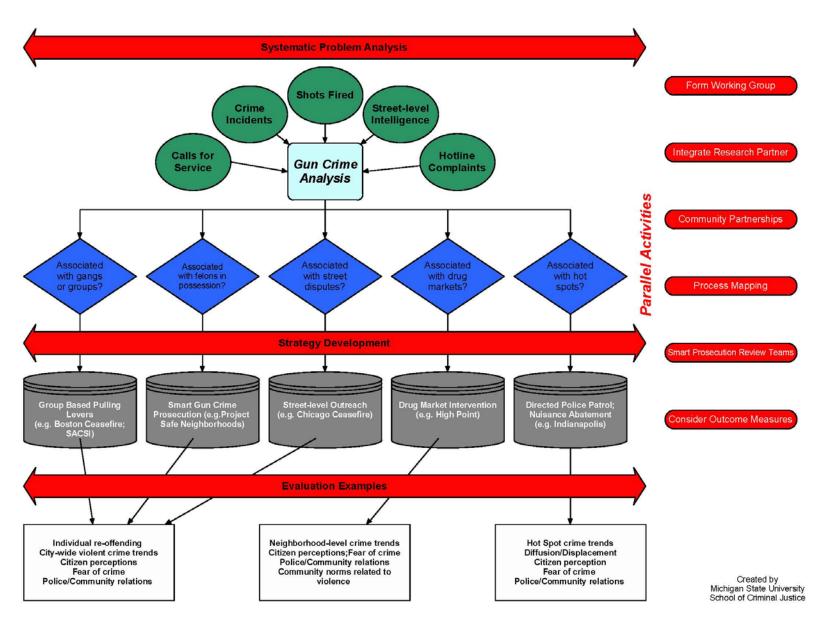
Figure Two: Comparison of Promising Violence Reduction Initiatives (continued)

Initiative	Focus	Objective	Strategy/Methods	Organizational Locus	Sample Jurisdictions	Initial Time Period & Impetus	Evidence of Impact
Project Safe Neighborhoods	Gun crime (later expanded to gang crime)	Reduce homicides and gun crime	Increased federal prosecution of gun crime coupled with partnerships Data-driven problem-solving Communication strategy Two common approaches involved adaptation of Richmond's Project Exile and Boston's Ceasefire	Task force convened by U.S. Attorney's Office including multi-agency partners (local, county and state police, federal law enforcement, county prosecutor, probation and parole, variety of community partners depending on jurisdiction, a media partner, a research partner)	Task forces in the 93 U.S. Attorney's Offices; 82 target cities; case studies conducted in Middle District of Alabama, District of Massachusetts, Eastern District of Missouri, District of Nebraska, Southern District of Alabama, and Middle District of North Carolina	High levels of gun crime	PSN target cities in higher-implementation districts experienced statistically significant declines in violent crime compared to PSN target cities in lower-implementation districts and in non-PSN comparison cities; homicide and/or gun crime declined in all case study cities with evidence of impact in 8 of 10 sites CAGI finds higher enforcement cities experienced 15% decline in violence crime

Figure Two: Comparison of Promising Violence Reduction Initiatives (continued)

Initiative	Focus	Objective	Strategy/Methods	Organizational Locus	Sample Jurisdictions	Initial Time Period & Impetus	Evidence of Impact
Drug Market Intervention	Overt drug markets	Permanently shut down drug market Reduce crime and disorder in neighborhood Improve police-community relationships	Focused deterrence strategy aimed at all individuals involved in illegal drug sales in specific market "Pulling levers" approach; police-community collaboration	Typically police or sheriff's department, but in some jurisdictions the county prosecutor's office has led; partners include drug courts, probation and parole, federal law enforcement, social services, community and faith-based partners	High Point, NC plus approximately 20 additional communities	Noticeable association between overt drug markets and violence in High Point	Initial studies in High Point, Nashville, and Rockford reveal consistent evidence of impact on drug offenses with some promising evidence of impact on violent and property offenses Subject to current NIJ evaluation being conducted by RAND Corporation

Figure Three: Violence Reduction Strategic Problem Solving Models



NOTE: The U.S. Department of Justice, Bureau of Justice Assistance, provides support to local, state, tribal, and federal law enforcement agencies seeking to develop evidence-based violence prevention and reduction strategies. Information is available at:

http://www.ojp.usdoj.gov/BJA/tta/index.html

One of the PSN Training and Technical Assistance providers is Michigan State University. For further information, contact:

Heather Perez MSU PSN Training and Technical Assistance Coordinator perezh@msu.edu

Note: This section includes references included in this document as well as other related references the authors thought might be useful to those interested.

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