

# The challenges of sustaining partnerships and the diversification of cultures

Denise Martin  
William Graham

This is the Authors' Accepted Manuscript of the book chapter:

Martin, D. & Graham, W. (2022) 'The challenges of sustaining partnerships and the diversification of cultures'. In I. Bartkowiak-Théron, J. Clover, D. Martin, R.F. Southby & N. Crofts (eds.) *Law enforcement and public health: partners for community safety and wellbeing*. Springer, pp. 125-140.

The final publication is available at Springer via DOI:  
[http://dx.doi.org/10.1007/978-3-030-83913-0\\_9](http://dx.doi.org/10.1007/978-3-030-83913-0_9)

# Chapter 9 - The challenges of sustaining partnerships and the diversification of cultures

Denise Martin, Abertay University, Dundee, Scotland

William Graham, Abertay University, Dundee, Scotland

✉ Denise Martin, [d.martin@abertay.ac.uk](mailto:d.martin@abertay.ac.uk)

Keywords: collaboration, governance, culture, silo, partnerships, crime prevention, violence

## Abstract

Collaborative working draws together institutions and actors from different sectors, spheres, and even countries who may have different traditions, different governance structures, and different values and priorities. While partnership approaches are not new and can operate successfully, there are continued challenges around sustaining partnerships in the longer term. These include short-term planning cycles, limited resources, shifting priorities and political pressures. These pressures often contribute to the re-enforcing of siloed approaches and retreatism back into organisational cultures and norms as a way of managing hurdles that these challenges raise. After developing on the Scotland model of 'Prevention First', this chapter examines two programmes based on initiatives focused on collaborative working to prevent crime and violence in Scotland (the Public Health Approach in Glasgow, and the Northampton Community Initiative to Reduce Violence), it then discusses the benefits of partnerships to resolve challenges faced by vulnerable communities. It also raises some of the difficulties to maintain these partnerships in the longer-term.

## Introduction

Previously perceived as two separate disciplines, Public Health and Law Enforcement have different approaches and priorities towards reducing vulnerability (see Chapter 3). However, increasingly, there is recognition that partnership working and the willingness of different services to collaborate is critical to the success of Law Enforcement and Public Health initiatives. Collaborative working draws together institutions and actors from different sectors, spheres, and even countries who may have different traditions, different governance structures, and different values and priorities. While partnership approaches are not new and can operate successfully, there are continued challenges around sustaining partnerships in the longer term (Crawford and Cunningham 2015). These include short-term planning cycles, limited resources, shifting priorities and political pressures. These pressures often contribute to the re-enforcing of siloed approaches and retreatism back into organisational cultures and norms as a way of managing hurdles that these challenges raise. Examining two programmes based on initiatives focused on collaborative working to prevent crime and violence, this chapter discusses the benefits of partnerships to resolve challenges faced by vulnerable communities. It also raises some of the difficulties to maintain these partnerships in the longer-term.

## The importance and emerging nature of Collaboration.

Collaboration as a way to resolve complex and challenging societal problems has existed for some time. The extension of collaboration and its use in the realm of public policy connects to broader shifts in governance where the emergence of neo-liberalism in the 1970s changed the nature and role of the state. Governments in many western jurisdictions were trying to reduce their dominant role in delivery of services and increasingly devolve more responsibility towards communities, individuals and markets. This was partly due to a failure of the state to effectively manage the cost of services where it was believed that introducing

new partnerships, for example, private providers could encourage a more competitive and effective systems of delivery and enhance the quality of the service. Collaboration has not just expanded due to changes in states dominance, but changing demands and expectations of public services are relevant too. Clarke and Newman (2009) suggests that recent agendas for public services, stress the importance on their role in the remaking of community and civil society through building capacity of communities and working in partnerships. Successful partnerships can be effective in addressing a broader range of problems that might lead to or be responsible for the engagement of individuals in negative behaviour such as criminal activity or anti-social behaviour. Often different agencies have the expertise to look at the same issue but in different ways that viewed collectively can create wider and more holistic approaches to the issue at hand meaning a better resolution for both the individual and communities.

However, Clarke and Newman (2009) also discuss what they refer to as assemblages where different policies, personnel, practices, governance structures are brought together as a way to resolve societal issues. They argue the assumed coherence of different elements misses the sometimes incompatibility and instability of these assemblages. In the field of Law Enforcement and Public Health, it is these fragilities that can lead to disruption for progress and an ability for partnerships to succeed particularly in the longer-term and when resources are precious and limited.

The purpose of this chapter is to examine two programmes where the key aim was working in partnership to reduce violence and anti-social behaviour while focusing on addressing the individual issues faced by those engaged with them. By examining these programmes it demonstrates the potential benefits in collaborative working in the Law Enforcement and Public Health area. It also addresses the challenges and questions that emerged from these programmes, critical for any initiatives that aim to work across disciplinary spaces.

### **Prevention First – a new local partnership to prevent crime and anti-social behaviour**

The Prevention First model was introduced as an Operating Model in Policing utilised in New Zealand. Its introduction was not by accident, but emerged due to earlier strategic changes to the way that public services were being delivered across the country (Den Heyer 2018). Driven by a desire to reduce the cost of public services and create more effective services, the main feature of this and a previous change management programme was to shift from a reactive to preventative model of police work. A core part of this was to change the mind-set towards New Zealand Police understanding the demand for their resources, what the drivers were behind crime and to ensure that victims and prevention were central (Den Heyer 2016). There was a requirement to understand that a range of factors influenced crime including of social issues and vulnerabilities. Indeed, the strategy for the New Zealand Police from 2013 onwards was to demonstrate an awareness of and leverage community services and networks to protect vulnerable people, particularly repeat offenders, act with urgency against prolific offenders and develop innovative and sustainable, practical solutions using problem-solving approaches to manage crime hotspots and priority locations (New Zealand 2011c cited in Den Heyer 201, p539). The approach in New Zealand was underpinned by a broader shift in the Ministry of Justice to improve performance and cut crime by setting ambitious crime reducing targets, which required a joined-up approach by agencies. A critical step towards achieving these targets was a structured framework that ensured the effective management of demand and resourcing to efficiently and effectively tackle issues that arose.

This specific case study discussed here takes into account the introduction of a programme concerned with trying to reduce anti-social and violence in the west coast of Scotland. One of the authors was part of a team that conducted an evaluation of the scheme (Smith et al 2018). A Chief Superintendent who was divisional commander was keen to consider ways to reduce crime and violence in her local area particularly where part of the

county had continued to experience high levels of violence and anti-social behaviour and increasing demand on local service provision. It was believed that the existing operational model have shifted the focus away from preventative strategies and community policing to one which was very reactive. Partners from local agencies expressed their disappointment that there had been a loss of effective community policing and partnership working in the area. Prevention First was suggested as a way to re-establish this community style police and re-engage the skills of community officers with the intention of trying to:

“...prevent crime, reduce victimisation and reduce locations where offending takes place, through a partnership early intervention approach which gets to the heart of issues and identifies the best way to solve problems and tackle community concerns” (Prevention First Proposal Document, 2014 cited in Smith 2018).

### **The Scottish Model of Prevention First**

Scotland, like, many other countries were experiencing crime decreases but the demands and pressures on police and other services were continually raising and concentrated in particular areas. Other drivers meant that this type of policy made sense. It drew on recommendations from the Christie Commission (2011) which outlined a number of core principles focused on creating safer communities in Scotland through more prevention focused activities to reduce inequalities. The main aim of Prevention First in the Scottish context was that violence is preventable, not inevitable and that crime, violence and anti-social behaviour are driven by underlying social conditions.

#### **How the Prevention First Model Worked in Scotland**

A key approach in Scotland was to ensure the management of data and monitor demands coming in, this was achieved via intense daily scrutiny of incidents, crime reports and patterns of concern. This enabled partners to identify areas of common concern including, victims, offenders, repeat callers, problematic locations and emerging crime trends. Information sharing and timely referral to partners was then enacted and on-going dialogue and agreed actions taken forward. Daily communication with partners, backed up by weekly/fortnightly meetings to discuss progress also took place.

#### **Findings from the Prevention First Initiative.**

Overall, the evaluation of Prevention First in Scotland demonstrated success across a range of outcomes. Initial strong leadership and existing relationships were key to driving the initiative forward and gaining buy-in from the partners. The focus and responsabilization of middle managers in the shape of Community Inspectors meant an emphasis on local leadership and ability to manage the initiative. In relation to reducing violence and anti-social behaviour figures suggested, that crime did decline in the local authorities areas, where the Prevention First Initiative was introduced. However, it was hard to disaggregate this data from other potential impacts which could have had an reducing effect, meaning it is difficult to fully attribute the fall in incidents of crime and anti-social behaviour (see Smith et al 2018).

The qualitative data suggested that Prevention First was successful in a number of ways in particular enhancing partnership approaches to resolve issues of victimisation and address vulnerability issues. To illustrate the types of cases that came to the attention of the Prevention First Teams a couple of incidents are outlined below

**Incident 1 Drug dealing and anti-social behaviour:** This referral related to low-level anti-social behaviour. The initial referral was for a noise complaint, but it became apparent that it was a drug-dealing case. A large volume of callers to the door caused anxiety to neighbours. It transpired that the tenant was being manipulated by friends, and had no gatekeeping skills. The tenant was arrested after one incident and was bailed back to his address. Social work involvement was arranged and the tenant was placed on a methadone and rehabilitation course. He has followed advice and now has his home to himself. There is no anti-social behaviour in the street now.

**Wellbeing and mental health:** This referral related to a male who reported petrol being poured through his letterbox. Police who attended found no evidence or smell of petrol. The tenant made 2 or 3 similar calls complaining of neighbours trying to kill him. A joint visit with the council established that the man had barricaded himself into the house in apparent fear for his life. He only removed the barricades once he was convinced that it was the police. It was apparent that most of his rooms were empty and that he was sleeping on the floor. He was armed with a knife and visibly paranoid. It became obvious that mental health issues were in play. Interventions with NHS, Mental Health and his GP were arranged. It was learned that he had presented at his doctors several weeks earlier with a mass on his neck which caused pressure on his brain. It is believed that this resulted in his delusional behaviour. He was admitted to hospital and sectioned and received appropriate medical treatment. He is now back living

at home and no further issues have occurred. This partnership approach led to a letter of commendation from the Social Work Department.

## **Focused Deterrence Strategy**

The Community Initiative to Reduce Violence (CIRV) approach, pioneered in Boston, Cincinnati and Glasgow applied a focused deterrence strategy (see Kennedy et al., 1996; Braga et al. 1999 and 2001), with the aim of reducing the frequency of street violence. CIRV brings together various statutory and voluntary agencies to work in partnership using a public health approach and coordinates law enforcement, service providers, and community members to ensure that those who participate in violent gangs receive due consequences and those who choose transition to a non-violent lifestyle, receive the appropriate support in the most effective, efficient, and respectful manner possible.

The concept of focused deterrence strategy (FDS) is closely aligned with Problem Oriented Policing (POP) (see Eck and Spelman, 1987) developed in Boston in the mid-1990s by a team of academics and Boston Police Department to deal with the problem of youth and gun violence associated with gangs in the city. Braga et al. (1999) reported that from the mid-1980s continuing until the early 1990s, there was an increase in firearm homicides involving youths and in particular, young black males. They noted that between 1984 and 1994 the homicide rate for young black males, under the age of 18, increased by 418% involving handguns while the rates for the use of other guns in the same category also increased by 125%. They also realised that a small number of individuals involved in gangs or groups were responsible for a majority of crimes. (Fox, 1996a, discussed in Braga et al., 1999).

In order to address the high homicide rates, academics and police practitioners developed interventions, known as the Boston Gun Project, or Operation Ceasefire (Kennedy et al., 1996; Kennedy, 1997; Braga et al., 1999 and Braga et al., 2001). The Boston Gun Project adopted a focused deterrence strategy (FDS) to tackle gang-related violence and a 'pulling levers' strategy, described as 'using every means available to target gangs as a whole, including individual members' (Kennedy, 1997: 462) to first identify at-risk gang members and thereafter communicate the consequences of continued violence to them. Such was the success of this approach, that Boston saw a reduction of 63% in youth homicides (Braga et al., 2001).

Given the success of this project, other American cities adopted the FDS to address rising violence and homicides, across the US, including Oakland and Los Angeles (California), Cleveland and Dayton (Ohio) and Detroit (Michigan) (National Network for Safer Communities, 2014). The city of Cincinnati also adopted a FDS in 2007, following a recognition that something should be done about the high levels of shootings and gang related homicides in the city. This Cincinnati Initiative to Reduce Violence (CIRV) recorded a 34% reduction in homicides in Cincinnati over the following 2 years (see Engel et al., 2013) and it was this approach that the police in Glasgow, Scotland, sought to copy to deal with the levels of gang related violence in the city.

The city of Glasgow has long been associated with gang related violence and by the mid-2000s Glasgow had been named not only the murder capital of Britain, but also of Western Europe, largely as a result of knife crime, blamed on both alcohol consumption and Glasgow's long association with gang/group violence. Many researchers have discussed the fact that Glasgow has suffered for generations from a 'gang problem' along with the associated violence and territorialism issues (see Patrick, 1973; Davies, 2007 and 2013; Kintrea et al., 2010). In 2007, police intelligence determined that there were 55 gangs in the east end of the city, known by particular names, including, the 'Parkhead Rebels', the 'Dentoi', and the 'Calton Tongs' Gang members tended to be young males typically in their teens, but can range from aged 12 to mid-20s. The issue of territoriality or as Suttles (1972) describes it, 'defended territory', regularly led to large-scale fights and instances of violence, including serious assaults and murders (homicides) (see Kintrea et al., 2010).

Glasgow embarked on a process of policy transfer (Dolowitz and Marsh, 1996 & 2000) and initially attempted to copy the Cincinnati model in full. However, it quickly became apparent that this was not possible due to the local context and legal constraints. They thereafter engaged in a process of emulation of the Cincinnati model and established the Glasgow Community Initiative to Reduce Violence (Glasgow CIRV). The Glasgow model relied heavily on a partnership approach with multiple agencies coming together to deal with the violence problem. The Glasgow CIRV team comprised of Police, Social Work, Education, Housing and City Council officers co-located and working together in an obvious attempt to break down barriers and prevent working in 'siloes', an often cited problem with partnership approaches that attempt to reduce crime. (Crawford and Cunningham 2015).

## **Public Health Approach in Glasgow**

A major difference to the approaches taken in Cincinnati and the USA in general, was the public health approach adopted by the authorities in Glasgow, which treats violence as a social malaise and seeks to address the key risk factors that may increase the likelihood of violent behaviour (Krug et al., 2002). This approach attempts to deal with the root causes of the violence by endeavouring to engage with young people involved in violence and gangs. Thereafter, to devise a strategy to identify the social and health factors that may lead a person to become involved in gangs and the violence associated with them and offer support and advice to those that needed them.

One of the main differences was the case management process developed by Glasgow CIRV, which was distinctly different from that operated by in Cincinnati. In Cincinnati, case management was provided by an external partner, a non-profit organisation 'Cincinnati Works', which only dealt with adult 'clients' and focussed on employability, reflecting the perceived needs of the target population (adult gang members involved in serious violence). In contrast, in Glasgow the target audience encompassed a wider range of young people, who had not necessarily come to the attention of the criminal justice system, but nonetheless wished to engage with the initiative. The in-house Case Management team thereafter addressed their needs, allocated appropriate services, and monitored their progress. By signing a pledge that they would cease their violent offending behaviour, they were able to access a range of services offered under the 'whole systems approach' (Glasgow CIRV Case Management Practice Note, 2010), where the focus was not just on employability, but included life-skills, well-being and health, personal development and skills, and anti-violence and knife awareness courses.

Glasgow CIRV launched in June 2008 and ran for a period of three years, with some success in reducing violence among those who engaged with the project. Evaluation indicated that there was an average of 46% reduction in violent offending by those who engaged with the project, a 73% reduction in gang fighting and a reduction of 85% for weapons offences. Violent offending in the area where CIRV operated also saw a reduction of 56% (Williams et al, 2014).

## **Northampton: Community Initiative to Reduce Violence (CIRV)**

Over a period of a few years from 2015, Northamptonshire County, an area in the East Midlands of England and an hour north of London, experienced a surge in violence associated with gangs and associated crime (drug dealing, acquisitive crime and county lines). In an effort to tackle the growing problem, police staff visited the Scottish Violence Reduction Unit in Glasgow and there learned of the Glasgow Community Initiative to Reduce Violence (Glasgow CIRV), that had been established in the city in 2008, to tackle gang violence. The CIRV concept had in turn been 'borrowed' from Cincinnati, Ohio, USA, by the Strathclyde Police force in Glasgow police and over a period of 3 years saw dramatic drops in gang violence and weapons offences (Williams et al 2014).

In July 2018, Northamptonshire Police employed as a consultant, one of the co-authors, Dr William Graham to consult and advise on the formation of a multi-agency and community-centred project designed to deliver significant reductions in violence and drug related criminality amongst gang members across Northamptonshire, the Northamptonshire Community to Reduce Violence (CIRV). Dr Graham is a former senior police officer from Strathclyde Police and was the Deputy Manager of Glasgow CIRV from 2008 until his retirement from the police in 2010.

The leaders of the proposed initiative recognised that the approach in Glasgow did not address the 'county lines' issues that was prevalent within Northamptonshire and so the programme was adapted to meet the needs of the local context. Partnership working is a central tenet of this type of approach and collaboration was established between agencies and the community to deliver a clear message to violent street gangs: the violence must stop.

Northamptonshire CIRV officially launched in February 2019, and by the time of writing had received over 1000 referrals since the beginning of the project. There is a wealth of anecdotal evidence indicating a drop in violent crime across the county associated with the drugs trade. An independent evaluation of the project carried out by the College of Policing in England and Wales found reduced level of violence and in numbers of gang members (College of Policing forthcoming). CIRV was having a positive impact on programme participants' relationships, health and outlook. It also helped in changing perceptions of the police and support services among young people/adults.

#### **Northampton CIRV**

As noted earlier, Northamptonshire experienced a significant rise in violence, associated with the illegal drugs market and 'county lines' operating out of London and other major conurbations in the surrounding areas from 2015. Indeed, police intelligence revealed that there were in excess of over 300 people on the intelligence systems with 'warning markers' to alert police officers and staff to risks associated with those individuals for various crimes, including the possession and use of weapons, violence, drugs and mental disorders etc. The growing issues of violence, associated with the drugs market, prompted the police to look at new, innovative practices to target the growing problem. This search for new ideas led to a visit to the Scottish Violence Reduction Unit in Glasgow, where staff learned of the work of Glasgow CIRV that had operated in the east end of Glasgow from 2008-2011 and saw reductions in violence and weapons offences.

On returning to Northampton, work began on building partnerships with relevant agencies and funding secured to create a similar approach to that in Glasgow. Northampton CIRV is police led and is supported by a variety of agencies, including the Police and Crime Commissioner, local authorities, statutory agencies and local businesses. This approach is designed to break down barriers and prevent working in 'silos', facilitating sharing of information and ensuring that appropriate services are accessed for those engaged (clients) in the project.

One of the main issues that Glasgow CIRV discovered on trying to implement the FDS, was that the borrowing body, in that case, Glasgow, could not directly copy the approach followed elsewhere, i.e. Cincinnati, but must look to emulate the approach instead (see Dolowitz and Marsh, 1996 & 2000) and adapt it to fit the local context. Therefore, following on from the lessons learned in Glasgow, it was incumbent on the Northampton CIRV team to adapt the approach taken in Glasgow to fit the local circumstances and cultures in Northamptonshire to ensure that the approach would be relevant to the local context

The Northamptonshire team needed to consider contextual differences between their county and Glasgow, in terms of demographics, local culture and type of gang violence and associated criminal activity. For example, gang violence in Glasgow at the time was based on territorial issues with a large number of gangs involved in activities such as casual violence and alcohol abuse (Kintrea, et al, 2010). This was in contrast to Northamptonshire, where there are a smaller number of gangs and associated crime is more likely related to drug supply and county lines. The approach designed for Northamptonshire was unique because there was an absence of street based gang activity.

The identification of appropriate 'clients' is important in order to make a difference to the problems being experienced. Potential clients came to the attention of the CIRV team through two different routes.

Referral by a professional (e.g. a local school) member of the community, parent or self-referral.

Use of police or partner intelligence and crime data and by proactively searching for cases that may be suitable for inclusion in the programme.

The primary criteria for access to the CIRV programme included those individuals deemed to be at risk of criminal exploitation or already involved in or at risk of being recruited into gangs. However, there are many different definitions of a 'gang', which raises issues for academics, police and policy makers on what actually constitutes a gang. The term 'gang' and who is a member of a 'gang' is a highly contestable and debatable subject with no recognised consensus and has produced much debate over the years (see Curry and Spergel, 1990; Ball and Curry, 1995; Esbenson *et al.*, 2001; Bennett and Holloway, 2004; Spergel *et al.*, 2004; Bradshaw, 2005; Bradshaw and Smith, 2005).

The Northampton CIRV team used a tool developed by Northamptonshire County Council (the Signs of Gang Involvement Screening – SIGS) that provides two overarching indicators of gang involvement:

- Strong signs of gang involvement, for example possession with intent to supply class A drugs; associating with pro-criminal peers who are involved in gang activity; multiple mobiles/changing phones frequently.
- Moderate signs of gang involvement, for example sudden change in appearance; interest in music which glorifies weapons/gang culture; and, whether the person had committed robbery offences.

### **Case Management**

Northampton CIRV adopted a similar case management system to that operated in Glasgow, with a dedicated case manager, the CIRV Deputy, using their professional experience and judgement to assess the best possible outcomes for the clients. This reflected the bespoke and individualised nature of CIRV where all decision-making and management of programme participants was guided by three principles or 'golden rules'. These were developed by the Northamptonshire management team to help inform decision-making around allocation, delivery and deselection from the programme in recognition of the complexity of cases, where the matters considered together, provide a rich context for making a decision rather than arbitrary thresholds.

This public health approach reflects the Glasgow model by seeking to address the causes of gang membership, violence and drug misuse to make a difference in the young person's lives. A suite of options was developed for the use of the Case Manager and to allocate appropriate interventions for the clients. Furthermore, in a new development in Northampton that had not been utilised elsewhere, was addition of a business development mentor to engage with businesses and help ensure that CIRV would not only provide a model of support but also facilitate progression into training and employment.

The main method that Glasgow CIRV used to communicate the key messages to the gangs in the target area of the city was the 'Self-Referral Session' while in the US CIRV this was named a 'Call-In' session, which was also adopted by the Northampton CIRV team. The 'Call-In' approach was a major departure from routine policing and law enforcement in both Cincinnati and Glasgow.

The session was designed to suit the local context in Northampton with the main focus being to demonstrate the availability of services for those choosing to get out of 'gang life,' the expectations of the community and the consequences for them should the violent acts continue.

The session speakers asked to take part in Northampton came from a variety of backgrounds to reflect the local community. The session followed a similar pattern as set out in Glasgow, to ensure that the Northampton CIRV key messages were communicated to those attending the session. It was the stated expectation in the session that those in attendance would pass on those messages to their peers. The key messages delivered in the session focused on



emphasising that this was a new law enforcement strategy intended to target subsequent violence through effectively applying and using police powers if necessary, the community had had enough of the violence and finally that there was support and help available to move people away from involvement in crime. (see Glasgow CIRV Self-Referral Session Practice Note, 2010 for a full description of the process)

## **Discussion and Lessons from the Case Studies**

While both the outcomes of these programmes were positive a number of challenges also emerged. One challenge often cited in cross partnership working is the division of work cultures that can have an impact on the ability of initiatives to succeed. While the overall sense was one of positive partnership relationships throughout the evaluation of Prevention First, there was some mention of the sometimes more challenging relationship with social work in the partnership. Overall partners were supportive and praised colleagues from social work but commented that they were the partner less likely to attend meetings regularly. There was recognition that this was probably as a result of demands already on social work. One or two participants noted that the physical separation of social work teams meant they had developed their own autonomy and work practices. One council respondent commented that, historically, there has been institutional resistance from the Social Work Department to exchanging information, because they believe it to be private and sensitive and that to share such information would be breaking client confidentiality (Smith 2018, p95).

Despite the success of Prevention First and the positive creation of genuine partnership working, there was real concern for the longevity of the project. A similar evaluation has also been made of the model used in New Zealand (Den Heyer 2020). There are a couple of issues that are critical here, firstly the programme did involve a lot of dedication of those working at a local level particularly those who invested a substantial amount of effort and time into identifying local issues and working hard with partners to resolve community and individual cases. Secondly, the amount of resources utilised to make the approach work particularly when other police priorities also need attention. Den Heyer's (2020) evaluation of the New Zealand approach suggested that while the project initially worked and there seemed a demonstrable decline in crime occurrence in key areas being measured, this was only temporary, longer-term the impact police were having on prevention eventually reached a point of diminishing returns. This is not to say that prevention should not be seen as ineffective but programmes such as Prevention First may have to be adapted and changed or combined with other responsive forms of policing. It has the potential to be effective but only if aligned as part of an overarching strategy This is important for longer-term planning and success.

Like the Prevention First Project described above, one of the key challenges experienced in Glasgow and Northampton was the breaking down of barriers and cultural differences between the various agencies involved in the programmes. In Glasgow and Northampton this was achieved through an Information Sharing protocol that was agreed on where all agencies undertook to work together. Even though the police took on the lead role, incorporating key workers from the other agencies in the joint teams ensured partnership working. The sharing of information by police, especially with Social Work and Education, in both Glasgow and Northampton, was believed to be a breakthrough, as all agencies saw the benefits of working together in the public health approach to help young people. However, this was not the case in Cincinnati, where the police tended to retain information. This can often act as a barrier to effective partnership working where one partner dominates, potentially undermining the development of trust and reciprocity. Glasgow CIRV ceased to operate in July 2011 due to various factors, not least in the change of direction for the initiative away from establishing the programme in existing city structures. This failure led to a lack of funding and a cessation of the programme. However, this approach has continued to be utilised in Scotland with the establishment of a Scottish Violence Reduction Unit that follows a similar public health approach.

From both of the case studies what was relatively clear was that each area adopted parts of different initiatives and not the precise system or programme. In the Prevention First project this meant that each local authority involved in the police area, slightly adapted the approach to account for their circumstances. Similarly, in the CIRV project, Northampton Police recognised that their county lines issues meant that the focus and context was different for them. One critical issue that often emerges when policies are transferred from one area to another, is the need to consider why a programme works somewhere may be determined by specific local and cultural context. Graham's (2017) analysis of the transfer of the CIRV programme was the need to adapt the project in Scotland as a result of different legal systems and powers of the police. Often in adopting programmes these differences are forgotten and programmes are deemed a failure even though they have been successful elsewhere potentially undermining their potential. In the era of 'what works' and evidenced-based policing, the need to remember adaptability and context are critical for those adopting innovative ideas from elsewhere. Added to this is the challenges of appropriate evaluation of programmes, as pointed out by Graham (2017) the outcomes of the CIRV programme were not fully evaluated meaning that when it came to funding cuts it proved difficult to justify the demonstrable positive outcomes it was having. This might have been likely to add to the decisions to cut the funding for the programme.

An analysis of both these case studies shows that great effort and resources are required to enable these approaches to be successful. It also demonstrates that this is possible in the short-to medium term. Longer-term success of these partnership approaches is harder to establish. For example examining the longer-term impact of Prevention First in New Zealand Den Heyer (2020) commented that eventually after the first few years there was no evidence from the data that the Prevention First initiative had ongoing impact. The Glasgow CIRV did come to an end, but was a legacy for the establishment of a similar approach being adopted throughout Scotland and as a case study it demonstrates the success of partnership working. It has not stopped violence completely but has reduced particular forms of violence and reduced weapon carrying that meant a reduction in homicides overall. One obvious challenge for partnerships and public health initiatives that adopt the types of model discussed here is the ongoing challenge of resources. Both programmes often rely on a small number of dedicated staff members, which places them under stress with high workloads. Also, if one person leaves a programme or moves roles (as happened in both these initiatives) the partnerships developed can be lost. The Cincinnati initiative demonstrated that what is critical for the longevity of the project is attention to organisational structures is as important as focusing on reductions in crime and violence. In their evaluation of the programme Engel et al (2013) argue that in the early phases of the project strategic planning was critical to address institutionalization and accountability challenges that inevitably arise with turnover in key leadership positions'. Often crime reduction approaches are seen as failing when the reality is that more holistic structural mechanism also need consideration.

One strong theme that was evident in analysing these programmes was the continued dominance of the police as a key agency in leading preventative programmes. This is not to undermine the role of police in supporting prevention activities but when prevention is followed up by enforcement or the threat of enforcement there is a potential for undermining the development of trust. Den Heyer (2020) notes other social agencies may well be better placed to resolve vulnerability and community problems. This is also supported by the current 'defund' the police movement which has become more prominent since the death of George Floyd in the summer of 2020. This view is supported by academics like Vitale who discusses the End of Policing and suggests "any real agenda for police reform must replace police with empowered communities working to solve their own problems." (2017: 30). However, while the sentiment that we need to reduce police responses to social problems and instead shift resources to other more appropriately equipped agencies, there is still a requirement for police services. These police services would look significantly different to the one witnessed in the killing of George Floyd and would encourage effective partnership with other services with police in a supportive rather than enforcement role (Fleetwood and Lea 2020). It would also

see the rebalancing of funds away from criminal justice towards improving health, education and wellbeing across society. Both cases we discussed have elements of this caring role embedded in them and need to be viewed as longer-term solutions rather than initiatives adopted to resolve issues in the short-term. Additionally who leads on these programmes and the distribution of power might be other considerations that need further thinking. Police tend to dominate and lead many of these initiatives primarily due to cuts elsewhere and as a result of other organisational factors such as their availability as a 24 hour social service (Punch and Naylor 1973) or the only response available out of hours. This refers back to the point made by Clarke and Newman that often it is broader structures and embedded organisational routines that create challenges to enabling better partnership initiatives to work effectively.

## Conclusions

It is clear that partnership working can be successful. What both these initiatives indicate is that successful partnerships that focus on reducing crime applying a broader preventative framework that focus not on the misdeeds of people but that construct people as vulnerable are more likely to have an ongoing impact on people's life. Additionally, outcomes both for the individual and for their communities are likely to be better with more productive solutions, for example, people not being evicted from their property or reducing the likelihood of gang violence. The police can effectively engage in preventative programmes that support a shift away from enforcement towards support. While enforcement is still applied as a mechanism for security purposes and still see as a core aspect of the police role, moving more towards a preventative space can and does occur. Despite this optimism, what we have also learned is that pre-existing organisational cultures and structures can create a barrier to reform. Funding and cuts to services can also have a negative impact. We would argue that rather than embedded in some programmes, prevention needs to be embedded as part of collaborative endeavour over the longer-term. Currently in Police Scotland where both the programmes discussed were ran, the strategic approach (SPA 2020) has shifted away from enforcement towards improving the safety and well-being of people, places and communities in Scotland. This feels like a refocusing and a step in the right direction towards embedding a more public health approach into organisational thinking. This is critical for the ambition of intersecting Law Enforcement and Public Health is to be realised.

## References

- Ball, R. A. and Curry, D. G. (1995) 'The logic of definition in criminology: Purposes and methods for defining gangs', *Criminology*. 33.2, 225
- Bennett, T. and Holloway, K. (2004) 'Gang membership, drugs and crime in the UK', *British Journal of Criminology*. 44(3), 305-323
- Bradshaw, P. (2005). Terrors and young teams: Youth gangs and delinquency in Edinburgh. In S. H. Decker and F. M. Weerman (eds) *European street gangs and troublesome youth groups: Findings from the Eurogang research program*, 241–74. Walnut Creek, CA: Alta Mira Press
- Bradshaw, P. and Smith D.J. (2005) 'Gang Membership and Teenage Offending'. The Edinburgh Study of Youth Transitions and Crime. Number 8. University of Edinburgh
- Braga, A. A., Kennedy, D.M., Waring, E.J., and Piehl, A.M. (2001) 'Problem-oriented policing, deterrence, and youth violence: An evaluation of Boston's operation ceasefire', *Journal of Research in Crime and Delinquency*, 38, 195-225
- Braga, A., Kennedy, D. and Piehl, A. (1999) Problem-Oriented Policing and Youth Violence: An Evaluation of the Boston Gun Project. Washington, DC: Unpublished Report to the National Institute of Justice
- Crawford, A. and Cunningham, M., 2015. Working in Partnership. *Police leadership—Rising to the top*, pp.71-94.

- Curry, D.G. and Spergel, I. (1990) 'Strategies and Perceived Agency Effectiveness in Dealing with the Youth Gang Problem' in Huff, (1990) *Gangs in America*
- Davies, A. (2007) 'Glasgow's 'Reign of Terror': Street Gangs, Racketeering and Intimidation in the 1920s' and 1930s', *Contemporary British History*, 21: 4, 405-427
- Davies, A. (2013) *City of Gangs; Glasgow and the rise of the British Gangster*. Hodder and Staughton, London
- Den Heyer, G. (2016). Ghosts of policing strategies past: Is the New Zealand police 'prevention first' strategy historic, contemporary or the future? *Public Organization Review*, 16(4), 529–548
- Den Heyer, G. (2018). Policing excellence and prevention first: A model for transforming police service delivery. *European Journal of Police Studies*, 5(4), 90–108.
- Den Heyer, G. (2020): Police strategy development: the New Zealand police prevention strategy, *Police Practice and Research*, published online July 2020.
- Dolowitz, D. and Marsh, D. (1996) 'Who learns what from whom? A review of the policy transfer literature', *Political Studies*, 44, 343-357
- Dolowitz, D. and Marsh, D. (2000) 'Learning from abroad: the role of policy transfer in contemporary policy-making', *Governance*, 13, 5-24
- Eck, J.E., and Spelman, W. (1987) *Problem-Solving: Problem-oriented policing in Newport News*. Washington, DC. Police Executive Research Forum
- Engel, R., Tillyer, S.M. and Corsaro, N. (2013) "Reducing Gang Violence Using Focused Deterrence: Evaluating the Cincinnati Initiative to Reduce Violence (CIRV)". *Justice Quarterly*. November 2011, pp. 1-38
- Esbensen, F., Winfree, L.T., Ni He, and Taylor, T.J. (2001) 'Youth Gangs and Definitional Issues: When is a Gang a Gang and Why Does it Matter?' *Crime and Delinquency*. 47, 105
- Fleetwood, J. and Lea, J., De-funding the Police in the UK. *British Society of Criminology Newsletter*, p.25.
- Glasgow CIRV Case Management Practice Note (2010) <http://www.actiononviolence.co.uk/content/cirv-case-management-practice-note>
- Glasgow CIRV Self-Referral Session Practice Note (2010) [http://www.actiononviolence.co.uk/sites/default/files/CIRV\\_practice\\_note.pdf](http://www.actiononviolence.co.uk/sites/default/files/CIRV_practice_note.pdf)
- Graham, W., 2017. Global concepts, local contexts: a case study of international criminal justice policy transfer in violence reduction. *The Police Chief*, 84(7), pp.16-17.
- Head, B.W. and Alford, J., 2015. Wicked problems: Implications for public policy and management. *Administration & society*, 47(6), pp.711-739.
- Kennedy, D., Piehl, A and Braga, A. (1996) 'Youth Violence in Boston: Gun Markets, Serious Youth Violence, and a Use-reduction Strategy'. *Law and Contemporary Problems*. Vol. 59 , No. 1 , pp 147 – 196
- Kennedy, D. M. (1997)"Pulling Levers: Chronic Offenders, High-Crime Settings and a Theory of Prevention". *Valparaiso University Law Review* 31: 449-484
- Kintrea, K., Bannister, J. and Pickering, J. (2010) 'Territoriality and disadvantage among young people: an exploratory study of six British neighbourhoods', *Journal of Housing and the Built Environment*. 25, 447–465
- Krug, E., Dahlberg, L.L., Mercy, J.A., Zwi, A.B. and Lozano, R (2002) World Report on Violence and Health, World Health Organisation, Geneva
- National Network for Safer Communities (2014) <http://nnscommunities.org/impact/cities>
- Newman, Janet and Clarke, John (2009). *Publics, politics and power: Remaking the public in public services*. London: Sage.
- Patrick, J. (1973) *A Glasgow Gang Observed*. Glasgow. Neil Wilson Publishing.
- Punch, M. and Naylor, T., 1973. POLICE-SOCIAL SERVICE. *New society*, 24(554), pp.358-361.

- Smith, R., Frondigoun, L., Martin, D., Campbell, R., & Thomas, L. (2018). An independent assessment of the 'prevention first' crime prevention strategy in Ayrshire: Full Report. Police Scotland.
- Suttles, G. (1972) *The social construction of communities*. Chicago: University of Chicago Press
- Williams, D.J., Currie, D., Linden, W. and Donnelly, P.D. (2014) Addressing gang-related violence in Glasgow: A preliminary pragmatic quasi-experimental evaluation of the Community Initiative to Reduce Violence (CIRV). *Aggression and Violence Behaviour*. 19:6, 686–691
- Vitale, A. (2017) *The end of policing*. London: Verso