

Assessing Levels of Violent Crime in Winnipeg, Manitoba

Introduction:

Recent global protests have called for an end to police brutality, which has in turn prompted a broader questioning of the effectiveness of the police force in controlling crime. This questioning is also underwritten by data which evidences that “the ever-increasing amount of money spent on policing has borne little relationship to crime rates” (Covert 2020). If the efficacy of the police in controlling crime can be questioned, which, in light of recent events and data, seems easy to challenge, the question remains as to how best we can control rates of crime in our communities. This question is of particular significance when we speak of trying to address violent crime in our communities. Violent crime is crime which “intentionally threatens, attempts, or actually inflicts physical harm” on others (Short 1997). This type of crime is of social concern because it poses a real threat to the safety of those in our communities, particularly with respect to vulnerable populations. For instance, those who are from poorer socio-economic backgrounds tend to be at highest risk of experiencing and/or witnessing violent crime (Haynie et al. 2006).

In Canada, various types of violent crime have been increasing at an alarming rate in the city of Winnipeg, Manitoba. In 2019, Canada’s overall violent crime severity index totaled 89.67. In comparison, Winnipeg’s own violent crime severity index totaled 173.96, which itself is almost double the total index for Canada as a whole nation (Statistics Canada 2019). In addition, the city’s Monthly Statistical Reports states that homicides have increased on average by nearly 62% and various assaults by nearly 20% over a 5-year period (Winnipeg Police Service 2020), showing that the deadliest crimes are on the increase in Winnipeg too. Researchers suggest that these increases may in part be due to the prevalence of a distinctive gang culture in Winnipeg (Curran 2020). Moreover, these statistics reflect that violent crime is a growing social problem for those living in Winnipeg, resulting in death in the most extreme cases, and social unease and tension in the least extreme cases. Examining these statistics highlights the urgent need for successful intervention strategies in Canada for violent crime. Here we provide 2 recommendations: 1. Investing in the Cure Violence Project in Winnipeg, and 2. Combining the Cure Violence project with increased police presence.

Recommendation 1: Introducing the Cure Violence Project

The Cure Violence (CV) project is an initiative that was founded in early 2000s focusing on violence in Chicago. CV assesses violence as a public health issue, and addresses violence as an infectious disease using specific disease controls. Specifically, the CV uses three main strategies: 1. Detecting and interrupting conflicts. 2. Identifying and treating the highest risk individuals. 3. Changing norms. The first strategy relies on trained “interrupters” and outreach workers to prevent potential retaliations in communities, mediating ongoing conflicts, and following up with individuals to ensure situations do not become violent. Identifying and treating high-risk individuals involves outreach workers establishing relationships with those at high risk of

violence, helping to change behavior of committing violence, and assisting clients in needs such as drug treatments and employment. CV changes norms by having workers respond to any shooting in their community and helping to spread positive norms in the community that violence is not acceptable (Cure Violence Global 2020). What is unique about CV is that it implements interventions at the community level and is adapted to various needs including: domestic/gender-based violence, prison violence, suicides, and belief-inspired violence. CV also actively works with local stakeholders in a community to reduce violence including the police, schools, prisons, courts, and even local park services. Since then, the program has been replicated in dozens of cities internationally including: The United States, Canada, United Kingdom, Argentina, and Colombia. Given the program's feasibility to be adapted to different environments, the CV project can certainly be tailored to the needs in Winnipeg. Furthermore, as a sizeable amount of violence in Winnipeg is attributed to gang violence, can recruit former gang members as "interrupters", as the CV project has done in other cities.

As an example of the program's success in a real-life setting, a 2017 evaluation was conducted by the John Jay Research and Evaluation Center in New York (NY). The evaluation looked at two neighborhoods in NYC that received a type of CV intervention and compared them to nearby neighborhoods with similar socio-demographic makeup and similar crime levels. Specifically, in one area the CV intervention was Save Our Streets (SOS) in the South Bronx which was compared to East Harlem. Another CV program Man Up! (MU) was conducted in Brooklyn and was compared to the Flatbush area of Brooklyn, NYC. The evaluation assessed two primary outcomes: measure of gun violence and measures of social norms for male residents aged 18-30 years. Data sources came from NY Police Department (NYPD) and the NY State Department of Health for violence, and surveys regarding social norms. This evaluation specifically assessed monthly gun violence from 2005-2016 for all 4 neighborhoods. After accounting for other relevant factors such as age, employment, and trust in police, the authors found major differences in gun violence and social norms regarding violence. The MU intervention reported a 50% reduction in gun injuries while the comparator had a reduction of 5%. Similarly, the SOS region's intervention reported declines in gun injuries and shooting victimization by 37% and 63% respectively. In contrast, the SOS' comparator had reductions of 29% and 17%, respectively. For social norms, males in the CV intervention had a propensity for violence that was 33% less at the start of the evaluation. This was in contrast to the comparator which was 12% regarding violence and gun injuries. As such the authors concluded that the CV intervention appeared to be an effective intervention for these neighborhoods.

Recommendation 2: Combining the Cure Violence Project with Increased Police Presence

It is important to note that the CV project alone might not be sufficient in reducing violent crime rates. As such, other studies have trialed CV interventions in conjunction with others, namely increased police presence. Cerdá et al. (2019) conducted a simulation of the CV program of a hypothetical population of New York City. While this was a simulated study, the authors attempted to make the study as representative as possible using Census and epidemiological data to match characteristics of various NYC neighborhoods over 30 years. In the simulation, all neighborhoods with above-average violence levels received interrupters from the CV project in a

proportionate level. The study found that the direct patrol strategies by police reduced violence by 10%. The study also found that if interrupters came in and addressed 10 violent incidents per year, then violence would be reduced by 20%. Furthermore, connecting the interrupters with outreach workers further reduced probabilities of violence for civilians by an additional 75%. Ultimately, the paper assessed three strategies: First was doubling the size of police force and implementing a hot-spot strategy for 10 years, which reduced victimization by 11% after 10 years. Second was a CV project which reduced victimization by 13% or 2 percentage points compared to the police-only intervention. However, the CV project showed meaningful reductions in homicides after 10 years of implementation. The most effective intervention was combining CV with a 40% increase in police. This was projected to decrease victimization by about 24% over the 10-year period. Thus, the authors concluded that the most effective method was investing in both CV but also utilizing police in hot-spot areas. Additional analyses showed that deploying 2 interrupters with one outreach worker for 5 years reduced victimization by 7.7%; combining it with a 40% increase in hot-spot policing reduced it by 10.9% or 3.2 percentage points.

Conclusion:

The statistics emerging from Winnipeg depicting disproportionate rates of violence, in comparison to other Canadian provinces, highlights the need for appropriate intervention strategies to reduce levels of violent crime. The first recommendation entailed the implementation of the Cure Violence project to address increased incidences of violence by treating violence as an infectious disease with appropriate disease control measures. This intervention in Winnipeg can involve employing residents who were formerly incarcerated to work in the Cure Violence program, as exemplified by the success of the Man Up! program in Brooklyn, NYC. The second recommendation proposes combining the suggestions of the CV project with an increased police presence to reduce levels of violence in the city, such as centralizing police in high-risk areas of crime. These recommendations have statistical data to support their efficacy and can be tailored to be implemented in Winnipeg.

Works cited:

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