



Statement of Seema Gajwani
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Before the

The Committee on the Judiciary & Public Safety
The Honorable Charles Allen, Chairperson

Public Roundtable

THE DISTRICT'S CRIME PREVENTION STRATEGIES FOR SUMMER 2017

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10:00 AM
Room 120
John A. Wilson Building
1350 Pennsylvania Avenue, NW
Washington, District of Columbia 20004

Good morning Chairman Allen, Councilmembers, staff, and residents. I am Seema Gajwani, Special Counsel for Juvenile Justice Reform in the Office of the Attorney General for the District of Columbia (“OAG”). I am pleased to appear on behalf of Attorney General Karl A. Racine before the Committee on the Judiciary & Public Safety to testify regarding summer crime prevention strategies. Attorney General Racine and OAG congratulate the Metropolitan Police Department (“MPD”), the Department of Parks and Recreation, CSOSA, Court Social Services Division, the United States Attorney’s Office, and all of the stakeholders in the District’s criminal justice system contributing to the Summer Crime Initiative. It is such an impressive commitment of resources and dedication to keep youth and residents safe during these summer months that perhaps it should be called the Summer Safety Initiative.

MPD reports success over the years at keeping crime rates from spiking over the summer months. Though violence is at multi-year lows in the District, violence reduction remains of utmost concern. Violence is disproportionately high in certain neighborhoods in the District, where high rates of shootings, violent conflicts, and domestic violence are perceived to be the norm today.

In April, the *Washington Post* ran a feature story in about an 8-year-old boy living in Congress Heights. The story depicts how young Tyshaun McPhatter’s father was shot outside his school, and later died. Tyshaun had already known several adults who had died from gun violence in a matter of months. In his elementary school, he and the other young students are accustomed to regular lockdowns due to gunfire outside of the building. Most of the children in

that neighborhood cannot play outside at parks or on sidewalks because of the fear of being caught in crossfire. It is well established that exposure to violence of this kind can cause trauma in children, and makes it hard for them to concentrate, learn, and control their emotions.

Attorney General Racine has been a proponent of proven models of violence interruption and prevention such as the public health approach to violence reduction. These concepts are captured in the CURE Violence model. However, several major urban centers have utilized these concepts and tailored them to their localities, with significant success at reducing violence. For instance:

- In Baltimore, a Centers for Disease Control and Johns Hopkins University evaluation of a violence reduction effort in 4 program sites showed significant results, including a 56% reduction in killings and a 44% reduction in shootings.
- In Chicago, A National Institute of Justice and Northwestern University evaluation showed significant results across all seven communities where programs were implemented, including up to a 73% reduction in shootings and killings and a 100% reduction of retaliation killings in 5 communities.
- In New York, a Department of Justice evaluation showed a 20% lower level of shootings in the program area compared to control areas. The average monthly shooting rates in program area decreased by 6%, while three comparison areas showed increases in shootings of between 18% and 28%.

OAG's research shows that successful violence reduction models have three components:

1. Violence interruption to stop imminent and retaliatory violence;
2. Identification of those with the highest risk of perpetuating violence and linkages for them to preventative services and interventions to mitigate risk; and
3. Efforts to change community norms around the tolerance and normalization of violence.

It is important to note that in Baltimore, the violence prevention strategies were only utilized in a handful of neighborhoods due to the cost of the program. Outside of those neighborhoods, and thus citywide, violent crime has gone up. In Chicago, funding for these violence prevention programs was reduced and then cut after the evaluation/pilot stage. And, program implementation suffered from a lack of buy-in from and cooperation with law enforcement.

Chicago, Baltimore, Los Angeles, New York and other jurisdictions using these models of violence reduction all use violence interrupters. These are members of the community who have previously been involved in crime, but have the credibility to now deescalate situations and stop retaliatory violence. This is a critical component of violence reduction. I'd like to spend a few minutes talking about this important function of violence reduction – violence interruption.

Here in the District, we have a history of supporting some models of violence interruption. However, there is a reluctance to return to that model. Those efforts, executed by a couple of nonprofit organizations, were not effectively linked with law enforcement, and

therefore did not help generate important intelligence that could be used by the police. There was reported fraud and abuse by some of the nonprofit organizations doing the violence interruption work, reducing its credibility with government and the community. Moreover no data collection or analysis accompanied the work, so anecdotal accounts of self-reported successes lacked evidence and were met with skepticism. These are all legitimate issues. Certainly, these programs carry risk.

In 2005, Los Angeles developed an executive agency and infrastructure to support and oversee its violence reduction efforts, which include all three elements of the public health approach. Los Angeles implemented their violence reduction model in 13 zones across the city, covering almost all areas experiencing chronic violent crime. Specifically with respect to Los Angeles' violence interruption work, the office infrastructure is set up to mitigate the risk of fraud and abuse through training, contracting, and oversight. Since its inception, the office has worked closely with criminologists and statisticians from local universities to track and evaluate outcomes. Los Angeles's violence interrupters- called street intervention workers – must complete an extensive training program administered by an academy. Each must be certified to do violence interruption work and, every month, all street intervention workers receive continued training on fidelity of the model, use of risk assessment tools, and professionalism.

The Universities of Los Angeles and University of Southern California released a 2017 research and evaluation report on the Los Angeles violence reduction work. The study found that the violence reduction work prevented an estimated 185 gang-related violent crimes city-wide

over a two year period. They found 43.2% less retaliation compared with the control conditions not involving the violence reduction work. In addition, the evaluation shows statistically significant reductions in risk factors for youth.

It is understandable that there is hesitancy around hiring violence interrupters who have been involved in crime recently themselves. This presents some ethical concerns and the risk of exacerbating existing criminal networks. However, the violence interruption work is critical to stopping and reducing violent crime. In neighborhoods with chronic, serious violence, where children cannot play outdoors, shootings and violent crime are sticky, hard for law enforcement to predict, and not deterred by arrests and incarceration. Community members have complicated relationships with law enforcement and the justice system and are reluctant to cooperate with investigations and prosecutions.

In those areas, a new approach needs to be tried. The public health approach to combating violent crime in such communities has the benefit of building trust between residents and government, and strengthening a sense of community and ownership among residents. Given the Executive and Council's commitment to funding the NEAR Act, now is the time to learn from those jurisdictions successfully implementing a public health approach to violence reduction. Now is the time to take some calculated risk to interrupt and prevent violence in our most troubled communities.

I greatly appreciate the opportunity to testify. OAG stands ready to assist the Executive and the Council with these important programs. I am pleased to answer any questions that members may have.