Community Safety Indicator Project

Research Report

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Executive Summary

Background
The University of Melbourne has funded a research project, in collaboration with the Australian Institute of Urban Studies, to examine the feasibility of a common set of Community Safety Indicators for metropolitan Melbourne. “People being safe and secure” is the most commonly identified priority for citizens in the state of Victoria, Australia, and ‘safer streets, homes, and workplaces’ is one of the eleven key issues identified by the Government of Victoria for monitoring and improvement (Department of Premier and Cabinet 2005b, Department of Victorian Communities 2005). There is an emerging interest in integrated monitoring of progress at both the local and senior levels of government, with a successful environmental indicator project operating in metropolitan Melbourne over the past eight years. The provision of technically valid and policy relevant indicators would aid the both state and local levels of government in developing and monitoring policies and programs to improve community safety.

What is community safety?
Community safety is considered in some definitions to be the freedom from crime and violence as well as the fear of crime and violence. Other definitions include safety from accidents (unintentional injury). Both understandings of community safety see it as a subset of ‘health and wellbeing’ issues integral to a liveable community, and connected to broader social, environmental and economic sustainability.

Approach
The focus of this report is on metropolitan Melbourne, in consideration of significant differences in issues and resources between metropolitan and regional Victoria, as well as the precedent of the environmental indicators. Community safety plans for the 31 municipalities in metropolitan Melbourne were reviewed, in order to identify priorities for action and methods of evaluation, including indicators. Complete findings are available in the appendix of this report. These priorities were compared with Victorian state government priorities and methods of evaluation, including indicators.

Key Findings
There are significant barriers to the development of community safety indicators for metropolitan municipalities. The research indicates lack of consensus as to priorities; inadequate understanding of the potential range of local interventions; and poor usage of evaluation mechanisms at the local government level that may present significant barriers to the uptake of community safety indicators. The report also highlights the lack of consensus between the local and state government levels, and a lack of support at the state government level for local implementation and evaluation of community safety. However, there are established indicator projects, and a review of these projects suggests there is significant potential for a community safety indicator project to complement and feed into these existing projects.

Conclusions
The implementation of community safety indicators at the local and state governance levels is feasible. However, there are significant barriers that need to be addressed before such a project commences. There needs to be a greater investment in realistic evaluation of community safety efforts by State government, to promote evidence based policy development and program delivery at the local level.
Part 1: Introduction

Background to the Project

Community safety influences all aspects of daily life: where we live, recreate and socialise, learn, work and participate. It provides a foundation for our long term choices and decision-making processes at the individual, family, community and societal levels. Safety, along with shelter and food, is considered the basic pre-condition for health.

When people in Victoria were asked last year as part of the Community Strength Indicators Project what characteristics are most important for a liveable community, “people being safe and secure” was considered a priority for 95% of respondents (Department of Victorian Communities 2005: 7). Not surprisingly, the Victorian State Government has identified ‘Safer Streets, Homes, and Workplaces’ a one of 11 key issues to be monitored and improved upon in coming years (Department of Premier and Cabinet 2005b). The state government has emphasized reductions in violent crime, and reductions in fear of crime, as key progress measures, along with a reduction in traffic fatalities and serious injuries. There is, however, little coordination between state government, local government, and the private and community service sectors as to how to measure progress towards these goals.

The University of Melbourne, with VicHealth as an industry partner, has recently been awarded a three year Australian Research Council grant to work with local and senior governments on an integrated approach to violence prevention as part of community safety and public health promotion initiatives. There is also considerable interest in the related issues of violence prevention and community safety from the newly established VicHealth Centre for the Promotion of Mental Health and Social Well-being at the University of Melbourne. One of the responsibilities of this Centre is the Victorian Government’s Community Strength Indicators Project.

The Australian Institute on Urban Studies (AIUS) has convened an Environmental Indicators for Metropolitan Melbourne (EIMM) project over the past eight years. The project has brought together local and state governments, along with state-wide environmental advocacy and service organizations, to develop a set of common environmental sustainability indicators, with regular progress reports. Encouraged by the success of this project, and its possible application to other issues (a set of transportation indicators are in the process of being developed), AIUS
approached the University of Melbourne Faculty of Architecture, Building, and Planning in 2005 with the idea to produce a similar mechanism to report annually on community safety. An initial feasibility report undertaken by postgraduate students suggested there was scope for a similar reporting project to be administered at the local government level for metropolitan Melbourne. This follow-up report further explores the question of feasibility.

The implementation of coordinated local and state indicators on community safety requires consensus, clarity, and resourcing capacity. The following report aims to assess the current status of these preconditions.

**Methodology**

The report sought to answer the following questions:

- How is community safety being defined internationally, nationally, and in the State of Victoria?
- How are indicators to measure community safety being developed internationally, nationally, and in the State of Victoria?
- What priority issues are emerging in metropolitan Melbourne community safety plans?
- What priority actions are being developed at the local governance level?
- What data sets and evaluation mechanisms are being used to measure progress in addressing these problems?
- Is there consensus between local governments in metropolitan Melbourne, and between local and senior governments?
- Given this information, what is the capacity to take on indicators for community safety?

In order to answer these questions, the report begins with a literature review on community safety indicators. The primary research consists of an analysis of publicly available safety plans for all 31 metropolitan Melbourne municipalities. The research assistants first undertook a desktop search of a council’s website (including ‘key word’ searches and review of relevant department’s pages), then followed up with phone calls and emails (in some cases, repeated phone calls and emails) to the council. In some cases, the research assistants were directed to other documentation, such as the municipal health plan, for relevant information. The research assistants were asked to summarize: name of document and time period covered; contact person or position; other relevant documentation; priority problems identified; priority actions identified; and evaluation data used. This information is summarized in the Appendix to this report.
Part 2: The International and Australian Context

What is Community Safety?

Internationally, there is no consensus as to the basic definition of “community safety”, much less how to achieve governance goals related to community safety. In the United Kingdom, for instance, community safety is defined as “an aspect of quality of life in which people, individually and collectively, are protected as far as possible from hazards or threats that result from the criminal or anti-social behaviour of others, and are equipped or helped to cope with those they do experience” (Community Safety Advisory Service 2006). The Victorian State Government’s emphases in community safety have been strongly influenced by policies and programs developed in the United Kingdom (Sutton and Cherney 2002). Similarly, the International Centre for the Prevention of Crime defines community safety as a more positive way of conceptualizing crime prevention, noting an international policy shift from “the relatively narrow focus on crime prevention to the broader issue of community safety and security as a public good” (Shaw 2000: iii; italics in original).

In contrast, the World Health Organization (WHO) Collaborating Centre for Community Safety, based in the Karolinska Institute in Sweden for over 20 years, defines community safety as injury prevention, including violence, suicide, and natural disaster, where action is led by the community (WHO Collaborating Centre 2006). A number of local governments in metropolitan and regional Victoria are accredited by the Karolinska Institute as ‘safe communities’, including Melbourne, Hume, and Latrobe, while Moreland, Port Phillip, and Greater Dandenong are pursuing designation. These contrasting understandings of community safety, whether it is equivalent to the prevention of crime and insecurity, or whether it encompasses all injury prevention, including intentional injury (self- and other-directed violence) as well as unintentional injury (accidents and natural disasters), has a very small area of overlap: violent crime. Property crime, traffic accidents (including culpable driving), suicide and self-harming behaviour, fear of crime, and protection from natural disaster are excluded from one definition or the other.
Within its work on injury and violence prevention, WHO has also recently launched a global campaign against violence. In its *World Report on Violence and Health*, WHO defines violence as “the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.” (Krug et al 2002: 5). This definition includes violence and fear of violence, suicide and self-harming behaviour, as well as institutional economic, political and social violence.

**How Do You Achieve Community Safety?**

Despite this fundamental lack of consensus as to the definition of community safety, there appears to be a shared understanding of the mechanisms for promoting community safety. The WHO Collaborating Centre on Community Safety has six “indicators for safe communities”:

1. “An infrastructure based on partnerships and collaborations, governed by a cross-sectoral group that is responsible for safety promotion in their community;
2. Long-term, sustainable programs covering both genders and all ages, environments, and situations;
3. Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups;
4. Programs that document the frequency and causes of injuries;
5. Evaluation measures to assess their programs, processes and effects for change;
6. Ongoing participation in national and international Safe Communities networks” (WHO 2002).

The International Centre for the Prevention of Crime identifies the following distinguishing factors characterizing the evolution of ‘crime prevention’ to ‘community safety’:

- “a developing consensus about the need to work for community safety by tackling the *economic and social conditions* which foster crime and victimization;
- from seeing the primary responsibility as that of the police, to recognizing that *governments, communities, and partnerships* at all levels need to be actively engaged…
- The crucial importance of political leadership;
- Adapting strategies to local needs on the basis of good analysis and targeted plans” (Shaw 2000: iii; italics original)
• A growing emphasis on good governance, reducing social exclusion, and taking a health promotion approach to the problems of crime, insecurity and violence (Shaw 2000: 16).

These two organizations share an emphasis on community-government partnerships at the local, national, and international levels; strategies that reflect good analysis, targeted plans, and regular evaluation; an implicit or explicit use of a health promotion analysis; and programs that tackle root causes and vulnerable groups. Similarly, the World Health Organization’s six priorities for action on its global violence campaign include “increasing the capacity for collecting data on violence”, “promoting the primary prevention of violence”, “promoting gender and social equality and equity to prevent violence”; and “bringing it all together: developing a national plan for violence” (Krug et al 2004). Again, there is an emphasis on evidence-based policy, partnerships, and tackling root causes by targeting interventions at vulnerable or discriminated-against groups. The violence prevention campaign, at least at present, appears to emphasize national over local or international action, and also specifically targets gender and social equity, a more recent focus of the International Centre for the Prevention of Crime as well (Shaw 2002, Shaw and Capobianco 2004).

How Do You Measure Progress in Achieving Community Safety?

Aside from the over-arching ‘indicators of a safe community’, the WHO Collaborating Centre for Community Safety has produced over a dozen subsets of indicators, for safe transport, sports, homes, elderly, workplaces, public places, schools, waters, and children (WHO Collaborating Centre: 2006). Most of these indicators, like the example cited above, focus on process issues, and give no sense of, for instance, which data sets might be used to establish baseline measures of the problem, and how to measure progress or success of coordinated initiatives.

The International Centre for the Prevention of Crime recognizes the need for good quality evaluation tools, and have published a number of background papers on evaluating coordinated community initiatives (eg., Sansfacon et al 2002). However, they recognize that it is easier to measure process of coordinated initiatives than to measure outcomes, particularly when many crime prevention initiatives focus on long-term education, employment, counselling or housing issues.
The WHO Global Campaign on Violence similarly stresses the need for good “national and local-level information on the causes, characteristics and consequences of violence”, including the use of household victimization surveys and investigating the economic costs of violence (WHO 2005: 6), and has also published a *Handbook for the Documentation of Interpersonal Violence Prevention Programmes* (2004).

Crime Prevention Victoria published an excellent guide to *Evaluating Community Safety* (White and Coventry 2000), which includes a good discussion of performance indicators. The guide, however, does not address how local governments might evaluate the over-all success of their initiatives, focusing instead on how to evaluate particular campaigns.

In short, there is no agreed-upon set of questions to ask to determine injury, victimization, or fear rates. Evaluation techniques for coordinated community initiatives remain in their infancy. The causal relationships between a partnership approach to safe communities and improvement in defined problems simply have not been well-explored.

**Australian Federal Responses on Community Safety**

Both the Australian Federal Government and State Governments agree that the responsibility for addressing crime and violence lies at the state level. Despite this emphasis on state-level intervention, the Federal Government coordinates an Interministerial Committee made up of Federal and State Attorneys-General (and also the New Zealand national government), and has funded both a National Crime Prevention Programme as of 1997 and a seemingly parallel National Community Crime Prevention Programme as of 2004. They have also published a guide for Evaluating Community Crime Prevention Projects (English et al 2003), and cite (unspecified) growing evidence of locally organized partnership initiatives being an effective approach.

The federal government’s priority issues are: property crime, domestic and family violence, sexual violence, and violence in indigenous communities (Attorney-General Department 2006). They appear to prefer the term ‘community crime prevention’ to community safety.
State Responses to Community Safety

The current Victorian State Government has stated that “safe streets, homes, and workplaces” are one of its 11 priorities (Department of Premier and Cabinet 2005b). The original indicators to measure progress was that “violent crime and fear of violent crime will be reduced” and that “road accidents and deaths will be reduced by 20 percent” over the years 2003-2008. However, by 2005, the priority had been restated as “building friendly, confident, and safe communities” and the first indicators was restated as generic “crime will be reduced by 5 per cent from 2003 to 208, and Victorians will feel safer” (Department of the Premier and Cabinet 2005a).

Community safety has also been mentioned in a number of key policy statements since their election in 2000, such as Growing Victoria Together, Safer Streets and Homes, and Melbourne 2030.

Growing Victoria Together (2000-present); A Fairer Victoria (2005-present)

Growing Victoria Together (Department of Premier and Cabinet: originally published 2000; revised edition 2005b) takes a health and wellbeing approach to community safety, acknowledging a “shift in people’s ill-health away from infectious diseases towards lifestyle or behaviour related illness” (ibid: 8). This shift is significant as it recognises an emerging discourse surrounding social illnesses whose cause/s may be found in socio-economic issues such as poverty, disadvantage, lack of opportunity/capacity/cohesion; illuminating the role community safety may have play in supporting strong, health communities.

To some extent, Growing Victoria Together has been superseded by A Fairer Victoria, which sets out a new set of priorities prior to an election in 2006. These priorities include a focus on preventing family violence (Department of Premier and Cabinet: 2005c).

Safer Streets and Homes/ Women’s Safety Strategy (2002-2005)

Safer Streets and Homes was the Victorian government policy document that most clearly addressed community safety. Although it took a ‘whole of government’ approach, it was auspiced in the Department of Justice and was associated with an office of the Department of Justice known as Crime Prevention Victoria. It was a three year strategy from 2002 to 2005, intended to “better integrate [an] approach to crime and violence prevention into the wider spectrum of community safety programs” (CPV: 2002, 4). SSH addressed three primary themes:
- Improving safety in streets and neighbourhoods
- Preventing family violence – safety in the home
- Reducing offending and violence by young people

The *Women’s Safety Strategy* was a parallel initiative, housed in the Department of Victorian Communities, and the responsibility of the Office of Women’s Policy. Like *Safer Streets and Homes*, it looked at violence in both public and private space and like this other initiative, it was not renewed in 2005, although the latter strategy is reflected in *A Fairer Victoria*.

**Department of Victorian Communities – Indicators of Community Strength (2004-present)**
This project reports on the long term strength of Victorian Communities, by developing and reporting on 35 indicators. These include ‘community safety’, as measured by the question: “How safe do you feel walking alone in your neighbourhood after dark?” The indicators are developed through a population survey asking questions such as how safe people feel and how much they participate in community life. This information is broken down at the local government level (DVC 2005: 9).

**VicHealth/Department of Human Services – Victorian Community Indicators Project (2005-2006)**
This project, like the one above, focuses on state-wide indicators that can also be developed and used at the local government level. There are five broad domains or themes, the first of which is ‘healthy, safe, and inclusive communities’. Under the policy area ‘personal and community safety’, the report suggests ‘perceptions of safety’ (using DVC data), incidence of crime (actually crime reported to Victoria Police), incidence of Family Violence (using regional data, collated by the Department of Health), as well as road accident death and injuries and work-related deaths, injuries, and illnesses.

**Summary of Literature Review**

This overview suggests that there is no consensus definition of community safety. In some circles, community safety has become a preferred term to crime prevention because of its emphasis on the local ‘community’, its potential to include perceptions of crime as well as reported crime, and its positive vision. In other circles, community safety has been a phrase that encompasses unintentional as well as intentional injury. Both community safety and violence
prevention campaigns share growing commitments to a health promotion approach, targeting vulnerable groups and environments and tackling root causes, including in some cases an explicit commitment to gender and social equity.

Whatever its definition, community safety has a shared connotation of coordinated action at the local and senior governance levels, and a commitment to evidence-based policy. However, actual techniques and tools for this evidence base are in their infancy.

Victoria has shown an interest in integrated violence prevention. The state also has the potential to integrate indicators of community safety at both the state and local level, particularly through the Victorian Community Indicators Project, but there might need to be additional data available at the local government level.
Part 3: Review of Metropolitan Melbourne Community Safety Strategies

Results
The review results can be found in their entirety in the Appendix of this research report. The following is a ‘snap shot’ of metropolitan Melbourne as of October 2006.

Of Melbourne’s 31 metropolitan municipalities:

- 24 have safety plans available for the general public and two others address community safety as part of their Municipal Public Health Plan;
- Of these 24, only 19 are available on their council’s website, and several are hard to find by ‘key word search’ or other mechanism;
- 17 community safety plans are current (dated to 2006 or beyond);
- 17 have Local Safety Committees.

Of the 26 readily available community safety plans:

- 14 municipalities mention violence prevention as a key priority;
- 21 mention a violence prevention initiative.

Of the 26 readily available community safety plans

- 19 discuss evaluation in some form;
- 16 identify at least one indicator;
- 11 mention evaluation of previous plans having influenced the current plan;
- 6 (Port Phillip, Yarra Ranges, Maroondah, Knox, Moreland and Hobson’s Bay) are partners with The Victorian Community Indicators Project.

Themes
The review reveals more uncertainty than answers. Community Safety Plans have different priorities, reveal different themes and demonstrate different approaches to problem solving.

The review of community safety plans found there is no consensus across metropolitan Melbourne regarding how to define community safety. There was a lack of consistency when it came to defining, addressing, reporting and measuring community safety. Local responses to community safety were largely disconnected from senior governmental responses. Furthermore, programs and initiatives were poorly evaluated (if they were evaluated at all), with no clear targets or ways to measure progress towards the targets of family violence or violence prevention.
Community Safety plans covered a wide range of areas and issues. Crime and violence were often cited as municipal priorities, but so was graffiti and traffic safety. Perceptions of safety received consistent attention and many local governments made use of community safety surveys to inform strategic planning. How priorities were addressed revealed a great amount of uncertainty regarding what was possible at the local level. Specific initiatives/actions were often unclear, ambiguous or non-existent. The central themes to emerge from the review are discussed below.

1. Resourcing and Capacity

*Of Melbourne’s 31 metropolitan municipalities:*

- 24 have safety plans available for the general public and two others address community safety as part of their Municipal Public Health Plan;
- Of these 24, only 19 are available on their council’s website, and several are hard to find by ‘key word search’ or other mechanism;
- 17 community safety plans are current (dated to 2006 or beyond)
- 17 have Local Safety Committees.

This result suggests there are resourcing and capacity issues effecting community safety at the local level.

In the case of several municipalities, it took repeated calls to obtain a copy of a community safety plan. One municipality told a researcher to go to the police for a local community safety plan. Another municipality received four emails and one phone call before providing a response, which was that their division (social services) did not know what a community safety plan was. Several community safety plans received have not been updated since the late 1990s.

Ideally, every municipality would have a council officer responsible for a community safety plan, either a designated community safety officer, or a social or health planner whose responsibilities encompassed community safety, and a local community safety advisory committee. In conversation with several municipalities, the loss of the LoGICS Network, an information sharing network of local government community safety officers that had been resourced by Crime Prevention Victoria, was mentioned as a key blow in resourcing and capacity building.
2. Priorities

14 municipalities prioritise violence prevention in either the community safety plan or the municipal health plan

At first glance, this may appear impressive. However, 14 municipalities also prioritise graffiti in their community safety plan. Priorities ranged widely, from property crime (car theft, shop stealing, vandalism and graffiti), to violence (family violence, sexual abuse, racial violence, use of weapons, self-harm and suicide), to perceptions of safety, to substance abuse (ranging from tobacco smoking to alcohol abuse and liquor licensing; drug abuse, trafficking, manufacture, syringes), and also included unintentional injury prevention (general traffic accident ‘hot spot’ issues, speeding, underage driving, drunk driving, pedestrian and bicycle safety, industrial health and safety, skateboarding on sidewalks, fall prevention, drowning and water safety, sports injuries, food safety, fire prevention), emergency management (fire and flood response), gambling, and other issues.

While the 31 municipalities in metropolitan Melbourne are diverse, and a ‘one size fits all’ approach would be inappropriate, the lack of congruence with the three State government goals of improving safety in streets and neighbourhoods; preventing family violence – safety in the home; and reducing offending and violence by young people should be noted.

3. Actions

21 mention a violence prevention initiative.

The majority of municipalities have fairly specific policies and programs to address community safety in public space, including crime prevention through environmental design guidelines, footpath improvement and falls prevention, lighting, removing overhanging branches, safety audits, drink driving campaigns, closed circuit television, fire safety campaigns, walking school bus, flood risk guidelines, and by-laws on dangerous dogs.

The most common action related to violence prevention is a taskforce or network to bring together service providers. While this is a very useful intervention, there may be others that are equally useful. For instance, the City of Banyule provides parenting skills programs; Cardinia Shire supports anti-bullying school programs; the City of Casey has a “Promoting Peace in Families Working Group”; the City of Frankston mentions linkages between social support and employment programs; the City of Greater Dandenong uses community grants to promote
community safety; and the City of Hume provides community development and leadership programs.

4. Evaluation

- 19 discuss evaluation in some form;
- 16 identify at least one indicator;
- 11 mention evaluation of previous plans having influenced the current plan;
- 6 (Port Phillip, Yarra Ranges, Maroondah, Knox, Moreland and Hobson’s Bay) are partners with The Victorian Community Indicators Project.

Evaluation plays a pivotal role in planning for safer communities. Evaluation of a community crime prevention programs can provide valuable information about the way it was conducted and its context, improve outcomes and efficiency, and help to plan program changes. Evaluation of a strategy can not only inform future strategies, but could ideally allow learning between local governments, as well as between local and state governments in a coordinated strategy.

Many community safety plans do discuss evaluation, highlighting it as a priority. However, there is often inconsistent or nonexistent information indicating what exactly is being evaluated, for what purpose, by whom, for whom and over what time frame. Data used ranges from community perceptions of crime survey (done in conjunction with Crime Prevention Victoria, and often quite out of date when released), to hospital and ambulance data, number of safety audits, a reduction in complaints, awareness of programs in the community, VicRoads accident database, City Pride Award entries, costs related to shop stealing and property damage, and number of people attending forums.

Both the Victorian Community Indicators Project (2006) and the Department of Victorian Communities Indicators of Community Strength (2005) address community safety as part of their respective scopes (Health and Well-being and Community Capacity/Strength). There are a couple of examples of metropolitan municipalities (excluding those already associated with the VCI project) using indicators to monitor and report on community safety, the Moreland Indicators of Wellbeing being a particularly well established example.
Part 4: Summary and Conclusion

During the course of the research, the research assistants heard a number of concerns (off the record) that the Department of Justice had not shared information, built local capacity, or showed leadership in developing a shared vision during the three year life of the Safer Streets and Homes strategy, 2002-2005. Both Safer Streets and Homes and Safer Cities and Shires, the Victorian community safety/crime prevention strategy of the previous government in the late 1990s, placed emphasis on:

- An integrated outcomes approach that articulated what a safer community will look like: “a society where people participate fully in community and public life, anywhere and anytime, without being constrained by the fear of violence and crime” (Johnson: 1998).
- Developing leadership capacity of local governments in community safety planning
- Local Government as custodians of safety, crime and health data, with responsibility to incorporate data into strategic planning

These qualities have similarly been identified in this research report as essential for the implementation of community safety indicators. These comments also indicate the importance of state government in developing local level capacity, and supporting local government action.

The implementation of a community safety indicator project requires consistent, reliable and technically valid data. The review suggests there are a couple of logistical requirements to address before the proposed indicator project could progress. First and foremost is a shared definition of community safety priorities between local and state government. Second, is a well-resourced network on community safety. At present, the Victorian Safe Communities Network is under-resourced (largely volunteer-based), does not place a high emphasis on violence or on crime prevention, and does not provide sufficient leadership on the development of an integrated community safety strategy and indicators to measure progress of this strategy. The LoGICS network, for local government community safety officers, is no longer in operation, although the Victorian Local Governance Association has a Community and Social Planners Network that might be used as a networking mechanism. Third, and perhaps most difficult, is an increased understanding of the relationships between coordinated community initiatives and results, either
in the area of reported crime or in the largely underreported crimes of violence in private space. This work is not very well developed internationally.

A community safety indicators project might provide the locus for this kind of dialogue, particularly if auspiced within a neutral organization such as the Australian Institute of Urban Studies. However, there is at present a greater knowledge base to build upon in the areas of environmental sustainability and transportation. Certainly at present, the Victorian Community Indicators Project provides the best possibility of inserting a dialogue on community safety, linked as that project is with the notions of social inclusion, health promotion, and planning for greater equity outcomes.

There are two other suggestions in relation to integrated good practice on evaluation and indicators. First, local community safety plans should ideally be reviewed as part of the cycle which includes the Council Plan, the Municipal Public Health Plan, and the Municipal Strategic Statement, and should be linked with all three statements. Indeed, community safety could be encompassed within a Municipal Public Health Plan as much as within a Community Safety Plan. The importance of community consultation, particularly with local community agencies, cannot be overemphasized.

Second, community safety should be seen as a long-term commitment to community health. Short-term ‘quick fixes’ should not be expected. However, progress indicators towards the goals of a safer locality (within a safer society) could be developed, including:

- Increasing rates of reporting to police and agencies (as measured by victimization surveys and local police and agency stats);
- Better knowledge and use of local services (also, services meeting gaps as identified through community consultation);
- Better coordination of services (as measured by anonymous tracking of use and response of police, health, agency, and court services, perhaps with a small sample to begin with, this might be a goal of a two to three year project or a network);
- Reduced rates of violence and injury, especially repeat offending and victimization (this might be a goal of a two to three year project with a specific group, but would require regular victimization surveys at the local level for a larger sample);
- Improved attitudes towards community safety – a sense that progress is being made.
Specific program or project data could be related to these progress indicators.

Local government simply does not have the resource base to undertake this kind of research without senior government support, first as a pilot project in participating municipalities, and then rolled out across other local government.

There are also broader indicators of community strength that are indirectly related to community safety, including:

- Trust in and knowledge of neighbours;
- Trust in local institutions (including police);
- A reduction in unemployment and housing stress (proportion of household income spent on housing costs), and an increase in educational attainment;
- A reduction in problem drinking, drug use, and gambling;
- Knowledge of and use of local services (including shops, public transport, and community organizations);
- A reduction of fear of violence in public space.

To conclude, community-government partnerships, sustainable programs, targeted interventions, better information as to the extent of injuries, and better sharing of information between local governments and between levels of government, have all been identified as signs of good practice in community safety. The extent to which the impact of these good practices can be measured at the local level is still in question. But a community safety indicators project that attempted to answer these questions could be a valuable mechanism in improving the effectiveness of local governments’ community safety efforts.
References


