Meeting needs, making changes, improving outcomes

CDI
CHILDHOOD DEVELOPMENT INITIATIVE

Evaluation of the Community Safety Initiative of the Childhood Development Initiative

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Minister's Foreword

Building, strengthening and improving communities is difficult and complex work. There are many facets that impact on and influence how it feels to live in a community: whether or not you know your neighbours, the promptness with which problems such as street lighting are resolved, personal sense of safety, knowledge of and access to local amenities, proximity to support networks – all of these, and many more, shape how we experience where we live and whether or not we actively engage as citizens and residents.

This evaluation offers some important learning for all of us interested in and concerned about communities, safety and positive relationships. There is learning here in relation to the planning and development of new areas; the report offers insights relating to mechanisms that can support and mitigate against the participation of residents in their local community; it notes approaches that could helpfully inform the work of statutory agencies, such as the local authority and An Garda Síochána; and it highlights, in particular, the value of collaborative models and a solution-focused approach.

We have a long tradition of community development in Ireland. There are many disadvantaged communities across the country, which have established and effective organisations and structures driving, leading and shaping what happens in these communities. However, all too often, these models are reliant on one or two individuals to 'champion' the work, to give their time and energy, to draw on their networks and charisma. The work of the Childhood Development Initiative and its many partners offers us some depth of understanding, as well as structures and mechanisms that go beyond individual personalities and so suggests pathways that could support improvement, even in those communities which struggle to identify local leaders.

The fact that CDI took on this challenging work, and has shared the failures as well as the achievements in such a transparent way, is highly commendable. I am pleased to recommend this report and the learning it offers us all.

Jan O'Sullivan, TD
Minister for Housing and Planning

CDI Response to the evaluation of the Community Safety Initiative

Engaging communities is hard work. Enabling the effective participation of communities in order to impact on outcomes and affect change is extremely challenging and inevitably there are complex and multiple needs in areas of disadvantage. There are no universally accepted, proven models that can be readily replicated, no commonly agreed way to ensure such engagement and no single pathway to improving safety and sense of belonging, especially in communities with long histories of difficulty and deep-rooted disempowerment. If there were, there would be no need for evaluation, test sites or demonstration projects. Instead of evidenced interventions, however, we have frameworks, principles and approaches, which we collectively understand to be useful and possibly even required elements of community safety. This emerging understanding, based on limited research, strong instinct and a growing acceptance of what constitutes best practice, fundamentally informed CDI's Community Safety Initiative.

There is a very real challenge in trying to bring the worlds of science and spirit together, combining support with scrutiny, and recognising the dual roles of accountability and autonomy. Drawing on evidence – and, indeed, the desire to contribute to our research base – is at the core of CDI's strategy. So too is the fundamental objective of improving outcomes for children, families and communities. Delivering an evidence-informed approach inevitably brings us into the realms of prescribed processes, standard measurements and a manual or guide on how to progress the achievement of outcomes.

Alongside these processes is CDI's commitment to being community-led, supporting bottom-up responses and being needs-based. This requires tailored interventions, localised programmes and flexible outcomes.

While these two approaches are not mutually exclusive, finding a common ground between them is challenging and they can often be contradictory. The fact that evidence-based responses remain relatively new to social and community initiatives adds further complexity since there can be a lack of understanding regarding the opportunities and strengths that can arise from responding to local need within the context of an evidence-informed framework. This evaluation indicates that lack of clarity regarding the relationship between these two elements, and more specifically how they can interact and support each other, remained an issue for many of the stakeholders, including the evaluation team.

None of the findings in this report are unexpected and the process of closely observing and documenting this experience has offered a deeper insight into the contextual and capacity factors that can influence effective engagement. As with other areas of CDI's strategy, identifying the difficulties and challenges, and gaining greater clarity about approaches that do not demonstrate efficacy or impact, is as important as the research which has proven the value and benefits of other aspects of our work. We welcome the lessons about what not to do, what should not be repeated, with as much vigour as those that indicate replication and inform future policy and practice. The conclusions from this report are, of course, disappointing in that there were many challenges that remained unresolved, the extent to which residents were engaged in community responses was limited and the motivation of service providers to drive change fluctuated and varied. However, we are committed to ensuring that this informs our understanding, improves our practice and shapes future policy and training.

Since the conclusion of this evaluation, there has been considerable progress in relation to the integration of those elements of the Community Safety Initiative (CSI) model which offered effective tools and structures for supporting community responses to safety. The Restorative Practice training and supports have been offered to significant numbers of those living and working in Tallaght West, resulting in a panel of local trainers, an ongoing space for reflection and sharing of learning, and the delivery of training to a number of other communities. This initiative is the subject of a separate independent evaluation, the interim findings of which suggest positive impacts. The assignment of three RAPID Coordinators to the CSI proved to be an effective mechanism through which to integrate the approach into other services and the CSI manual has now been fully tested and adapted based on this experience, and elements of it extracted to support local services to reflect on and enhance their approach.

Both the positive interagency collaboration that underpinned the work of the CSI Steering Committee and the relationships between statutory providers and residents, albeit in small numbers, have been sustained and grown.

I am proud of the integrity that has underpinned this initiative, our management of the accompanying research and the honesty with which CDI approaches its work. On behalf of the Board of CDI, I encourage you to consider the learning from this process, the insights it offers regarding the factors that impact on and influence effective engagement, and particularly to give consideration to the dilemma of managing an evidence-based approach in the context of a community-led ethos.

Joe Horan
Chair
CDI Board

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Acronyms

AP	The Atlantic Philanthropies
CDI	Childhood Development Initiative
CFRC	Child and Family Research Centre
CIPP	Context Input Process Product evaluation model
CSI	Community Safety Initiative
DCYA	Department of Children and Youth Affairs
ECCE	Early Childhood Care and Education
IIRP	International Institute of Restorative Practices
MUGA	Multi-Use Games Area
NGO	Non-governmental organisation
NUIG	National University of Ireland, Galway
PEIP	Prevention and Early Intervention Programme
RAPID	Revitalising Areas by Planning Investment and Development
RP	Restorative Practice
RPMC	Restorative Practice Management Committee
SC	Steering Committee
SDCC	South Dublin County Council
SHP	Safe and Healthy Place
SPSS	Statistical Package for the Social Sciences
TW	Tallaght West

Glossary

Acceptable Behavioural Contracts (ABCs) – In common use across the UK, ABCs are written agreements on future acceptable behaviour between police and/or Council authorities and a young person (usually) identified as being involved in anti-social activity.

Anti-social behaviour – Activity that causes harm or annoyance to other citizens, which may or may not be criminal (e.g. youths causing annoyance, illegal dumping, etc).

Community safety – A term used to describe a broad approach to the achievement of safety and security, generally in local authority housing areas. It involves focusing on a broad range of crimes and incivilities, both to reduce actual levels of crime and anti-social behaviour, and anxiety about crime impairing citizens' quality of life.

Evaluation – The systematic assessment of the processes, outputs and outcomes of initiatives, policies and practices.

Logic model – Explains how a programme may work. Usually a logic model is based on rigorous research and testing, or on careful service design using high-quality local and international research.

Mixed-methods research – Programme evaluations that employ a range of research instruments and can include both quantitative and qualitative methods.

Needs assessment – A study to determine deficiencies in the well-being and/or performance of a targeted area, community and/or social grouping.

Partnership – A relationship involving the sharing of power, work, support, information and/or resources with others for the achievement of joint goals and/or mutual benefits.

Pro-social behaviour – Effectiveness in interactions and communication with others and an ability to consider outcomes or occurrences from both one's own and others' perspectives.

RAPID – 'Revitalising Areas by Planning Investment and Development' is a focused Government initiative to target the 46 most disadvantaged urban areas and provincial towns in the country.

Restorative practice – Has its roots in 'restorative justice' and offers a structured approach to building community through strengthening relationships and resolving conflict where it arises.

Service manual – Document to be used as a reference tool containing clearly defined outcomes to be achieved, clear target group criteria, a strong logic model, programme activities and a well-designed evaluation framework.

Executive Summary

Background

In September 2008, the Childhood Development Initiative (CDI) began the 3-year process of implementing the Community Safety Initiative (CSI) in Tallaght West, Co. Dublin. Through supporting local resident interaction and promoting collaborative responses to addressing local safety issues, the CSI seeks to improve people's perceptions of safety, improve neighbour relations and promote a safe and healthy environment for children and families (CDI, 2008b). The overall aims of the initiative (CDI, 2012) are:

- to improve safety and to promote pro-social behaviour across Tallaght West;

- to improve community awareness and participation in local activities and services;

- to encourage wide community engagement in maintaining a safe environment.

Research aims and objectives

This report is the final output of the 3-year evaluation (2008-2011) of the CSI by the Child and Family Research Centre, National University of Ireland, Galway. It builds on the research from three phases of data collection in order to present a comprehensive assessment of the development and implementation of the CSI. Specifically, the report evaluates the achievement of the overall aims of the CSI in this period in order to answer the evaluation's overall research questions, which are:

1. How is the CSI being implemented and what is the value of the logic underpinning the initiative?

2. Were there any changes in (1) perceptions of safety and (2) safety and/or crime prevention within the four target areas of Tallaght West?

3. If yes, what role (if any) did CSI activities play in influencing change (e.g. increasing community engagement and enhancing a 'sense of belonging' among community members) in the four areas?

4. What are the outcomes for children, parents and the wider community?

Research methods

Qualitative data is sourced through the following research methods:

- An investigation and analysis of key documents generated by the CSI.

- A structured observation of CSI structures and processes (includes 57 hours of mostly committee meetings and several public meetings and events).

- Semi-structured in-depth interviews and focus groups with key service and community stakeholders (includes 36 one-on-one interviews, 14 group interviews and 12 focus groups).

Quantitative data is sourced through three surveys conducted in the CSI target communities during 2010 and 2011. Overall, 291 completed survey questionnaires were collected out of a sample of 600 houses, a response rate of 48.5%.

Research findings

The main research findings include:

- Community safety and local anti-social behaviour was a key concern for many residents living in the CSI's target areas in Tallaght West, as identified in significant research and consultation conducted by Dartington Social Research Unit and CDI during the mid-2000s.

- Implementing the CSI was regarded by stakeholders as representing a new way of dealing with anti-social behaviour and environmental disorder problems, and improving community safety on estates by utilising partnership and community-led approaches to working with and involving communities in solutions.

- In the third year of the CSI (October 2010 – September 2011), a review of the implementation process took place, together with the production of a CSI Logic Model and an Action Plan.

- New CSI processes in the final phase of research included the assignment of three of Tallaght West's RAPID[1] Coordinators to the CSI Community Engagement Team in May 2011 and the roll-out of the Restorative Practice training programme in Tallaght West, both of which have the potential to strengthen a collaborative partnership approach to community safety in the area.

- Low community representation in implementing the CSI in 2010 and 2011, and a reduction in service agency support for the CSI in 2010 reduced momentum and the capacity of the initiative to impact community safety in Tallaght West.

- A lack of attributable improvements in safety and a perceived distance from established community and safety structures slowed the development of the CSI initiative.

- A predetermined nature of several components associated with the initiative was identified by stakeholders as inhibiting local ownership over the CSI from developing in targeted communities and among service providers. The tension between an evidence-informed approach and a community-led response was evident.

- Pooling of resources and sharing of information and experiences were identified as benefits accruing from partnership-working on CSI structures.

- Collaboration on the Safe and Healthy Place (SHP) initiative – a substructure of the CSI targeting the MacUilliam Estate in Tallaght West – was identified by a majority of participating service providers as giving structure and focus to service provision in MacUilliam and as having helped broaden the capacity of service providers to support children and families in the area.

- A reduced level of service agency representation and commitment in 2011 and the under-representation and low input of community residents on the SHP Committee both slowed the achievement of SHP goals.

Conclusions and recommendations

In assessing overall progress made by the CSI over the course of the 3-year period, consideration is given to both intermediate and longer term outcomes and goals anticipated by the initiative. As set out in Chapters 7 and 8, on the positive side, progress has been made in achieving some of the intermediate outcomes in terms of mobilising community capacity around safety, improving perceptions of safety and the physical fabric of the area, and involving children and young people in safety-related activities. The implementation of the CSI contributed to an elevated community and service agency focus concerning many of the factors that negatively affect the quality of life for many children and families in Tallaght West. Since November 2008, active representation from the major crime prevention and public safety agencies, children and youth services, and other local support services has resulted in collaboration on several CSI structures and processes under the broad goal of improving community safety. Implemented initiatives include a range of community

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[1] RAPID (Revitalising Areas by Planning Investment and Development) is a focused Government initiative to target the 46 most disadvantaged urban areas and provincial towns in the country. The Tallaght RAPID area, granted in 2001, encompasses the areas of Fettercairn-Brookfield, Jobstown and Killinarden, as well as a part of Kiltipper.

engagement activities and events in three target areas initially demonstrating (in 2009 and 2010) the potential of community and service agency collaboration to positively impact community engagement in these areas. Research in 2010 indicated improvement in the well-being and perceptions of safety of a number of individual residents who participated in implementing the CSI in their areas, without these activities having produced wider population changes. In addition, findings suggest that interagency partnership on the Safe and Healthy Place (SHP) Committee successfully influenced statutory planning and decision-making, and therefore helped to progress several important social, infrastructural, physical and environmental improvements on the MacUilliam Estate during 2010 and 2011. There were also some early stage positive signs of involvement of a small number of local children and young people in various CSI- and SHP-sponsored events, activities and structures during 2009 and 2010.

The overall conclusion of the report is that the CSI has not improved community safety to any significant level in Tallaght West in terms of meeting its long-term goals. Core research evidence gathered from a diversity of stakeholders working in services and living in the community of Tallaght West through a range of data collection methods (observation, documentary research, interviews, focus groups and community surveys) consistently reported significant challenges in implementing the CSI. Such challenges included low community representation in the CSI, the lack of an agreed implementation framework and an insufficient level of tangible progress over the course of the 3 years, all of which weakened the capacity of the initiative to achieve its long-term safety goals during the implementation period (2008-2011). In addition, decreasing service agency commitment and difficulties in building cooperative relationships between some stakeholders were identified as limiting the implementation of the CSI. Thus the capacity of the initiative to enhance local safety and develop and improve safety structures and systems in Tallaght West was impeded during the evaluation period.

However, two noteworthy developments occurred in the implementation of the CSI in 2010 and 2011, which may aid the achievement of the initiative's longer term goals. First, the provision of Restorative Practice training to a range of service/professional and resident stakeholders and, second, the assignment of RAPID staff to the CSI Community Engagement Team may both potentially lead to enhanced collaboration in addressing safety issues in Tallaght West through partnership-working and relationship-building with key stakeholders in the local authority, the educational sector, the community and voluntary sector, and residents.

The evaluation presents the following recommendations:

- Clarity around the initiative's purpose and the roles and responsibilities of key stakeholders is necessary in order that all those who are involved understand the initiative's rationale and how it intends to achieve its aims, goals and objectives over the short, medium and long term.

- Devise an implementation pathway whereby intended aims and goals are achievable and actionable.

- Ensure the initiative has adequate local input and broad representation from the locality and that community members are sufficiently supported to engage.

- Meet stakeholders' expectations regarding safety by building and maintaining momentum among all partners through the delivery of tangible actions in target areas.

- In high-stakes collaborative endeavours such as the CSI, great care and attention is required in managing the complexities of relationships so that trust and ownership are fostered and value is added through the partnership process.

- Practise community development principles in planning and implementing the initiative whereby all stakeholders contribute equally.

- Develop alternative mechanisms outside the standard formal Committee structures to involve stakeholders.

The Community Safety Initiative

Established in 2008, the Community Safety Initiative (CSI) aims to improve safety within the home, school and wider community environment in Tallaght West, Co. Dublin. It is one part of the overall Childhood Development Initiative (CDI) outcomes-focused 10-year strategy, *A Place for Children: Tallaght West* (2005), which seeks to improve the health, safety and learning of children in the area and increase their sense of belonging to the community. CDI is one of three sites that constitute the Prevention and Early Intervention Programme (PEIP) in Ireland and is jointly funded by the Department of Children and Youth Affairs (DCYA) and The Atlantic Philanthropies. The three sites (CDI, youngballymun and Preparing for Life) were set up with '*the objective of testing innovative ways of delivering services and early interventions for children and young people, including the wider family and community settings*' (DCYA, 2011, p. 15).

CDI is based in Tallaght West and is the result of the professionalism, passion and persistence of a group of 23 concerned individuals and organisations in the community who had a vision of a better place for children. Through innovative partnerships, they brought together the science of evidence-based practice and rigorous evaluation, with the spirit of an approach focused on the identified needs of children and families. A partnership was agreed between Government and The Atlantic Philanthropies, and the consortium's first piece of work was a needs analysis entitled *How Are Our Kids?* (CDI, 2004). A number of priorities were agreed based on this research, one of which was the setting up and incorporation of CDI in 2007. Following this, a number of programmes were designed and delivered between 2007-2011.

CDI's programmes include the Early Years Programme; Doodle Den Literacy Programme for Senior Infant Children; Mate-Tricks Pro-social Behaviour Programme for 9 and 10 year-olds; the Healthy Schools Programme, a whole-school approach; Early Intervention Speech and Language Therapy; Safe and Healthy Place Initiative; Restorative Practice Programme; Quality Enhancement Programme; and, of course, the Community Safety Initiative, which is the focus of this evaluation report. All CDI programmes are evidence-informed and manualised, and are delivered through existing structures and services. CDI has a core role in promoting quality, fidelity, value for money and added value. All elements of CDI's work are rigorously and independently evaluated and CDI is committed to sharing the learning and experiences from Tallaght West in order to inform and shape future policy, practice, training and curriculum development.

Chapter 1: Introduction

This report evaluates the implementation of the Community Safety Initiative (CSI) from September 2008 to September 2011. It reports on the CSI's work to improve safety and address problems of anti-social behaviour, low social cohesion and insecurity in four areas of Tallaght West (Killinarden, Jobstown, Brookfield and Fettercairn). It provides an account of the implementation of the CSI, including a range of supporting strategies, core processes and activities employed during this period, and assesses the impact of the initiative on the safety and well-being of those living and working in the target communities. This chapter begins by summarising community safety responses to anti-social behaviour, crime and low social cohesion in disadvantaged areas generally. The second section briefly describes the CSI, detailing the initiative's aims and objectives, and long-term strategies. The final section describes the structure of the report.

1.1 Community safety: Strategies, policies and legislation

Community safety initiatives are broad-based responses to localised anti-social behaviour and crime. The general aim is to employ long-term partnership strategies that reduce anti-social activity, crime and the fear of victimisation through building stable and functioning communities in disadvantaged areas (Gilling, 2005, p. 741). By supplementing familiar State-led policing strategies with more holistic, localised and comprehensive responses, 'community safety' aims to change local conditions in order to bring about a reduction in anti-social behaviour and crime, and give the community an increased sense of safety and belonging (Ekblom and Pease, 1995; Harris, 2006). The concept commonly involves activating area-based partnerships between key local criminal justice, development and community actors (which can include residents and young people) in developing strategies and programmes promoting civil society, crime prevention and socio-economic and physical regeneration in target areas (Flint and Nixon, 2006, p. 940).

Irish Government strategy to tackle community safety, social exclusion and social disorder in the most deprived neighbourhoods recognises the importance of supporting communities. Significant legislative developments in Local Government and Justice also underpin the CSI approach to community safety in Tallaght West, most notably An Garda Síochána Act 2005 and the Housing (Miscellaneous Provisions) Act 2009. The former's significance derives from its restructuring of the crime prevention mandate of local authorities and its installation of broad-based partnership bodies, such as Joint Policing Committees, in each Local Government area (Section 36.2, 37.1). The legislation also provides for the establishment of Local Policing Forums to offer mechanisms through which the community, the Gardaí and the local authority (and public representatives, other statutory agencies and other stakeholders as required) come together on issues relating to local safety, policing, anti-social behaviour and estate management (Section 36.2).

The Housing (Miscellaneous Provisions) Act 2009 requires local authorities to draft a local anti-social behaviour strategy that, among other aspects, facilitates the coordination of services in preventing and reducing anti-social behaviour in their area of administration (Section 35).

In broadening crime prevention responsibilities, both Acts elevate interagency partnership and local decision-making on certain crime prevention and safety matters. By doing so, both link solutions to localised anti-social and crime problems with solutions to social disadvantage, low social cohesion and exclusion in these areas.

The Children Act 2001 is also significant in redefining relations between communities and the Irish justice system and the activation of early intervention and prevention methods in responding to community safety. The Act supports the rights of children through preventing juvenile involvement in crime through coordinated family, education and community support interventions. It is also indicative of a growing acceptance among policy-makers that alongside addressing individual and group criminal behaviour, responding to crime and disorder in society is a matter of improving the prospects and life chances of those living and growing up in disadvantaged circumstances (White, 2003). In addition, a broader interpretation of how the State intervenes to protect the safety of citizens is driven in part by the social changes that have taken place in Irish society over recent times. In particular, it acknowledges the significant inward migration since the mid-1990s and the need to involve (in partnership) ever-more diverse urban communities in the social and crime policies that affect their lives and communities (Mulcahy and O'Mahony, 2005, p. 31).

The CSI area-based approach to community safety conforms comfortably with current policy agendas of promoting 'partnership' in statutory efforts to streamline service delivery and of greater resident involvement in the delivery of public services. In its work to integrate local service delivery and to promote partnership, South Dublin County Council (SDCC)

supports this changing policy agenda by working to build the capacity of local groups, empower individuals and promote participation in community activity through collaborative work with a range of statutory and voluntary agencies (SDCC, 2010). Projects with a particular safety focus (including the CSI, the RAPID Programme and the SDCC Social Inclusion Unit) benefit from this SDCC strategy, as do many other community development, health, environment, youth, sports and recreational programmes. Safety and security is also a key priority area in the strategy of the South Dublin Children's Services Committee for progression to 2016.

1.2 CDI Community Safety Initiative

In September 2008, CDI began the process of implementing the Community Safety Initiative (CSI) in Tallaght West. Through supporting local resident interaction and promoting collaborative responses to addressing local safety issues, the CSI seeks to improve people's perceptions of safety, improve neighbour relations and promote a safe and healthy environment for children and families (CDI, 2008b). The overall aims of the initiative (CDI, 2012) are:

- to improve safety and promote pro-social behaviour across Tallaght West;
- to improve community awareness and participation in local activities and services;
- to encourage wide community engagement in maintaining a safe environment.

Fulfilling these long-term safety aims was linked to progress in achieving a number of anticipated outcomes during the 3-year lifetime of the implementation phase (2008-2011). In this timeframe, it was envisaged that the CSI would:

- increase the capacity of the local communities by assisting them to improve their own communities in terms of safety by taking collective action on relevant issues and also to improve perceptions of safety among residents;
- foster good partnership relations and links between communities and local service providers;
- build trust between service providers, State institutions and communities;
- improve activities for young people;
- improve the physical fabric of the targeted areas.

These anticipated outcomes were identified, in the form of an evaluation logic model, from relevant CDI and CSI strategic documentation by the Child and Family Research Centre (NUI Galway) in conjunction with CDI in 2010. The 'outcomes' clarified the focus of the evaluation in the mid- and final research phases and formed the basis of the analytical strategy used to evaluate the CSI.

The process of implementing the CSI began with the establishment in November 2008 of a CSI Steering Committee to guide a partnership, community-led approach to building community safety in Tallaght West. Subsequently, other structures were formed to support the implementation, including a Safe and Healthy Place Committee (2009-2011), a CSI Community Forum (2010), a CSI Youth Working Group (2010) and a Restorative Practice Management Committee (2010-2011).

1.3 Structure of report

Following this Introduction, the report is structured as follows:

- **Chapter 2** sets out the overarching research design, methodological and analytical approaches utilised in this evaluation.
- **Chapter 3** presents an overview of the origins and contextual background to the implementation of the CSI in Tallaght West, examining the target population and the stakeholders' motivations.

- **Chapter 4** focuses on the key inputs of the initiative by describing its development, resources and structures, and presents a detailed account of its activities from October 2010 to September 2011.

- **Chapter 5** presents the main processes in implementing the CSI, detailed through findings emerging from the empirical investigation.

- **Chapter 6** presents an analysis of findings concerning CDI's Safe and Healthy Place (SHP) activity (2009-2011).

- **Chapter 7** presents findings on the achievement of outcomes in the implementation of the CSI in Tallaght West.

- **Chapter 8** discusses the core evaluation findings and presents key learning, conclusions and recommendations arising from the research.

The report concludes with a list of **References** used to inform the report, following by a number of **Appendices** detailing various aspects of the CSI implementation process.

Chapter 2: Methodological and Analytical Approaches

2.1 Evaluating the Community Safety Initiative

The core purpose of evaluation is making informed and empirically justified judgements in determining the value of a programme, initiative or intervention (Scriven, 1967; Stake, 1995). In order to do this, evaluations describe the programmatic context and examine a programme's goals, structure and process, the achievement of objectives and outcomes. On this basis, evaluators draw definitive conclusions about the quality of a programme, its strengths and limitations (Stufflebeam and Shinkfield, 2007).

This report builds on research from three phases of data collection in order to present a comprehensive assessment of the implementation of the Community Safety Initiative (CSI) from September 2008 to September 2011. In order to assess the impact of the CSI, the research examined the extent to which the overall aims of the initiative were achieved. In terms of measuring change, an analysis was conducted of the stated intended outcomes of the CSI in comparison to what has been implemented in practice, i.e. programmatic inputs and actions with regard to building community capacity, fostering partnership-working and trust, improving activities for young people, and enhancing the physical infrastructure of the target areas in Tallaght West during the period.

From this base, the evaluation team considered the research questions agreed with CDI in 2008 as follows:

1. How is the CSI being implemented and what is the value of the logic underpinning the initiative?

2. Were there any changes in (1) perceptions of safety and (2) safety and/or crime prevention within the four target areas of Tallaght West?

3. If yes, what role (if any) did CSI activities play in influencing change (e.g. increasing community engagement and enhancing a 'sense of belonging' among community members) in the four areas?

4. What are the outcomes for children, parents and the wider community?

In answering these research questions, data were gathered in order to assess (1) the early stage, developmental aspects of the initiative (Year 1); (2) implementation of various actions and plans associated with the roll-out of initiative (Years 1, 2 and 3); and (3) the reflective experiential accounts of stakeholders as to the extent to which the initiative met its intended aims and achieved its outcomes (Years 2 and 3). The research focused on key implementation issues including: who is involved in the initiative, experiences of partnership-working, power dynamics, structures and decision-making, roles and responsibilities for implementing the initiative, and monitoring progress.

2.1.1 Final phase evaluation

This final of three evaluation reports presents a summative evaluation of the CSI (2008-2011). It presents an assessment of the effects of the initiative, taking account of its intended aims and outcomes, and the needs of intended beneficiaries of the intervention. The impacts of the initiative were assessed in terms of tracking year-on-year perceived changes in the affected communities pertaining to the various CSI interventions and related processes. The evaluation focused on intended outcomes, such as changes in perceptions of safety, levels of community engagement, experiences of crime and anti-social behaviour, and sense of belonging in the locality. As in the first and second research phases, the core focus of the empirical work in the final period examined:

*   the process element of the CSI;

*   the overall outcomes of the initiative, and its wider contextual arena, on the safety and well-being of those living and working in the Tallaght West area.

2.2 Description of data collected

In achieving the evaluation's research aims, data were collected on the following core inputs of the CSI:

- CSI structures (including the Steering Committee, the SHP Committee, the CSI Youth Working Group, the CSI Community Forum, the CSI Restorative Practice Management Committee and any other groups/committees formed in the final phase of implementation);

- CSI events and activities on the pilot sites, on the MacUilliam Estate and in Tallaght West;

- the implementation and maintenance of Community Safety Agreements;

- the completion and utilisation of a CSI Service Manual;

- wider CDI community engagement events (including the Children's Good Behaviour Awards Scheme, CSI training and support, and any other CSI capacity-building activities).

2.3 Methodological approach, methods used and sample

In determining the overall outcomes of the initiative and arriving at final conclusions, the evaluation of the CSI was based on an interpretivist approach that sought to provide a plurality of understandings and experiences from a diverse range of stakeholders, including professional, service and community arenas. Such an approach has the advantage of dealing with the complex phenomena of community programmes that involve many different individuals, groups and organisations, and differing contestations of what is to be measured, how it is to be measured and varying interpretations of outcomes (Jack, 2005).

A mixed-methods approach was utilised in the evaluation of the CSI in order to collect research material that comprised a mix of qualitative, quantitative and documentary data. Multiple methods included interviews, focus groups, observations and documentary review, with supplementary data being gathered from quantitative community surveys. The mixed-methods route supported a process of analysis that triangulated data collected through various qualitative and quantitative methods. Integrating data through a triangulation process provided the capacity to verify the validity of the analysis by evaluating findings drawn from one data source with another. This research strategy can add to the breadth and depth of understanding regarding the themes and issues under consideration, as well as providing a base on which to analyse and discuss research findings, and arrive at an overall position as to the impact of the initiative (Patton, 2002; Ritchie and Lewis, 2003). Triangulation also enhances the research's credibility by helping to authenticate evaluation interpretations as empirically based representations of programme experiences and meanings (Green, 1994).

Notwithstanding the multiple methods and types of data gathered, in the main this evaluation is of a qualitative nature, with supplementary quantitative data utilised as appropriate to complement and support overarching findings. This is common practice according to the interpretivist approach, whereby a primarily qualitative case study methodological approach yielding both objective-factual and attitudinal-experiential data is utilised in order to arrive at overall conclusions. The methodological approach comprising data collection, analysis and conclusion drawing was quality-assured by the CSI evaluation team's Expert Advisory Group in order to ensure that this process was conducted in an appropriate and rigorous manner.

A detailed account of the nature and specifics of both the qualitative and quantitative data collected for this evaluation is presented below, including a discussion of the analytic strategy used as a basis for interpreting findings and arriving at overall conclusions and recommendations.

2.3.1 Qualitative data

Qualitative data used in this evaluation were sourced through the following methods:

- The investigation and analysis of key documents generated by the CSI.

- The structured observation of CSI structures and processes (includes 57 hours of mostly committee meetings with several public meetings and events).

- Semi-structured in-depth interviews and focus groups with key service and community stakeholders, totalling 36 one-on-one interviews, 14 group interviews and 12 focus groups (*see Table 1*). In the final phase of data collection, these stakeholders included:
    - staff from front-line support services (youth, justice, addiction and community development) working in the target areas;
    - relevant stakeholders at strategic levels within the voluntary, youth, justice and statutory social support sectors in Tallaght West;
    - CDI staff members;
    - residents from the target communities in Tallaght West.

Table 1: Log of interview and focus group participants, 2009-2011

	Residents	Youth	Services – Front-line staff	Services – Management	N
Phase 1 – 2009	14	9	7	6	36
Phase 2 – 2010	12	10	31	10	63
Phase 3 – 2011	9	4	21	11	45
Total	**35**	**23**	**59**	**27**	**144**

Note: 10 people contributed to all three research phases, 18 contributed twice and 78 on one occasion.

2.3.2 Quantitative data

The quantitative data that formed part of the evidence for this evaluation were gathered in 2010 and 2011 in order to track residents' opinions of the impact of the CSI in terms of implementing activities and actions to enhance safe and healthy communities in Tallaght West. A total of three community surveys were conducted – two in the CSI pilot sites (sample = 400 houses) and one in the Safe and Healthy Place (SHP) target area (sample = 200 houses) (*see Table 2*). More specifically, these data were collected by means of door-to-door surveys on the Jobstown and Brookfield CSI pilot sites during December 2010, January 2011 and June 2011. A door-to-door survey was also conducted on the MacUilliam Estate for the SHP in June 2011. The surveys gathered the opinions and views from a total of 291 community residents concerning the impact of the CSI/SHP in terms of safety/service awareness, improved safety, pro-social behaviour and engagement in maintaining a safe community, and improvements to the physical environment locally.

A limitation of this methodology is the relatively low average response rate, at just under 50%. However, this is not uncommon in survey-based designs. The surveys were administered by a researcher from NUI Galway and community members from Tallaght West. Each survey took approximately 10 minutes to complete.

Table 2: Community Survey data collected in 2010 and 2011

Tallaght West Community Survey details	Sample size (n=houses)	Total responses (n=respondents)	Response rate
CSI Survey Dec. 2010 – Jan. 2011 on the Jobstown & Brookfield pilot sites	200	101	CSI Survey 1 50.5%
CSI Survey June 2011 on the Jobstown & Brookfield pilot sites	200	115	CSI Survey 2 57.5%
SHP Survey June 2011 on the MacUilliam Estate	200	75	SHP Survey 37.5%
Total	**600**	**291**	**Overall average 48.5%**

2.4 Analytic strategy for data analysis, interpretation and conclusion drawing

Data from all interviews and focus groups were transcribed in full and input, together with documentary and observational data, into a computer assisted qualitative data analysis software package, NVivo. The survey data were analysed using the Statistical Package for the Social Sciences (SPSS). Basic frequencies and percentages were used to describe the quantitative findings.

In completing this overall summative analytic assessment of the CSI and arriving at overall conclusions, the evaluation employed the Context Input Process Product (CIPP) evaluation model of Stufflebeam and Shinkfield (2007). A core strength of the CIPP evaluation model is its ability to take account of the unique and individual context of interventions. As the authors suggest, CIPP enables and guides comprehensive systematic evaluations of social support programmes (among others) situated in continuously evolving 'real world' settings and therefore are not applicable to controlled experimental modes of assessment.

Utilising the CIPP model, the store of formative data and analysis of findings from all three research phases was assessed, focusing on a number of key programme information areas (context, input, process and product) in order to judge the CSI's impact and value over the 3-year period. In applying the CIPP model to the evaluation of the CSI, key programme information was analysed as follows:

- **Context:** Assessing the community's needs, assets, problems, environmental and socio-economic forces.

- **Input:** Assessing the strength, responsiveness, adequacy and feasibility of the CSI's plans, interventions and resources to address local safety, and the targeting of the CSI.

- **Process:** Assessing CSI implementation, operation and actions for consistency with plans, effectiveness in achieving the core aims and objectives of the initiative, and addressing needs.

- **Product (outcomes):** Assessing the extent and suitability of intended or unintended outcomes. To gain additional insight into the initiative's outcomes, the evaluation focused on the following four areas:

    o *Impact:* The reach of the CSI into target communities; who, what groups benefited.

    o *Effectiveness:* The quality, desirability and significance of any outcomes.

    o *Sustainability:* The initiative's institutionalisation and long-term viability.

    o *Transportability:* The utility of the CSI in other settings.

In arriving at conclusions in regard to the outcomes of the CSI, the research strategy used provided a framework in which to examine safety needs in target areas, assess the appropriateness of implementation aims and objectives, report the effects of the CSI, and judge the extent to which the initiative's goals have been realised in the timeframe covered (Scriven, 1967; Stufflebeam and Shinkfield, 2007).

All interview and focus group transcripts were first read and coded by two researchers independently. The researchers then agreed on appropriate codes and categories from which to create a thematic framework to present the findings. A thematic strategy was employed in order to analyse the data (Miles and Huberman, 1994; Coffee and Atkinson, 1996; Bryman, 2008). This involved the identification of patterns within data using a mixture of both inductive and deductive techniques, whereby some of the themes arose from the data itself while others were based on core elements of the CIPP model, existing knowledge and relevant literature pertaining to the evaluation's subject area. This process thereby enabled both an exploratory, descriptive account of the data as well as a more explanatory stance (Miles and Huberman, 1994).

In order to ensure representativeness and balance in the presentation of core findings, several considerations were incorporated into the analysis strategy in order to capture the essence of what emerges from data gathered from the broad collection of stakeholders participating in the research. Both the frequency and extensiveness of what is said (content) and by whom (positioning) was taken into account in coding and analysing the interview and focus group data. This was important for presenting data on the basis of the experiences and views of the broad spectrum of stakeholder groups, and ensured the accuracy and validity of findings. *Frequency* relates to how many times something is said or a particular topic of concern is articulated, and is therefore a good indicator of a key issue. *Extensiveness* relates to how many different people say something or express a particular view on certain matters. In addition, the level of emphasis that may be given by participants to certain themes also influences how issues are interpreted. Answers that provide detailed and specific information, display personal experience (and emotion, intensity, etc) and/or offer expertise on topics of interest to the research are among the important factors guiding how emphasis and significance are attributed to certain themes and issues.

Moreover, given the highly qualitative nature of the research, the use of quotations and weighing-up of responses is bound to their direct relevance to the theme(s) under examination. The report reproduces selected quotes verbatim to ensure the context in which answers and comments were made remains and the essence of what was said is maintained. In several instances, however, quotes are not used to explicate findings described in the text due to their sensitive content and the possible effects their inclusion may have on stakeholder relations. In addition, quotes are only included if they adhere to the anonymity guidelines underlying the study's ethical and confidentiality parameters.

Chapter 3: Contextualising the Community Safety Initiative

This chapter contextualises the implementation of the Community Safety Initiative (CSI) in Tallaght West. It begins by describing the origins and background to the initiative, before presenting research findings concerning the CSI's target communities and the motivations of stakeholders. The chapter concludes by summarising key research findings to emerge from each section.

3.1 Origins and background of the CSI

The purpose of implementing the CSI (2008-2011) was to improve community safety in Tallaght West. The need for a CSI was identified in CDI-sponsored research conducted locally during the immediate years preceding the implementation (*see Table A-1 in Appendix A*). Two core reports formed the basis of this research – a baseline research report entitled *How Are Our Kids?* (CDI, 2004) and the *Community Safety Initiative: Consultation Report* (CDI, 2008a). The need for a community initiative aimed at improving community safety was identified in the former consultation process carried out by the Dartington Social Research Unit, which indicated that a common concern among residents in Tallaght West was the safety of the community, in particular children's safety. Issues such as anti-social behaviour, lack of safe play areas, crime and joyriding were highlighted as common concerns among local residents in the communities of Tallaght West. This research indicated that in 2004:

- 1 in 3 children lived in families that reported incidences of anti-social behaviour in the neighbourhood;
- 1 in 2 children lived in families that were personally affected by local crime;
- 90% of children lived in families where the respondent reported that crime or anti-social behaviour existed in their neighbourhood.

Based on these findings, a 6-stage consultation process was facilitated by CDI, lasting from October 2006 to June 2008 (*see Appendix A*), which canvassed community groups, local adults, young people and children, Government agencies and local service providers for their opinions and views on living and working in Tallaght West (CDI, 2008a, p. 5). Both the consultation process and a subsequent community survey (conducted by local residents, trained by CDI in keeping with the participatory focus of the CSI) focused primarily on safety issues and related factors that were of concern to children, adults and local service providers. The *Consultation Report*, published by CDI in September 2008, identified the following agreed areas for action:

- community engagement;
- information sharing;
- developing trust;
- young people;
- the physical environment.

Both reports found safety – and specifically children's safety – was a key concern of parents in Tallaght West. According to CDI's research, many of those consulted and/or surveyed expressed a strong desire to improve the safety aspects of their lives and the need to live and work in a safe and clean environment (CDI, 2008a). Based on this analysis of need, CDI's identified route to improving safety for children and families in Tallaght West was one of implementing initiatives that promote responsible and pro-social behaviour. Specifically, the CSI would:

- develop and implement Community Safety Agreements in targeted areas in partnership with relevant stakeholders;
- improve awareness of safety issues and develop local capacity to implement activities that may enhance pro-social behaviour locally and reduce crime;
- select and implement safety activities for children and adults to participate in throughout the four target communities;

- facilitate neighbourhood improvement, comprising a 'social' and 'physical' fabric element, e.g. healthy urban planning and generating a child and family-friendly environment on the MacUilliam Estate in Tallaght West (i.e. the Safe and Healthy Place activity).

A key element of the CSI implementation plan was to utilise partnership, community-led approaches to building community safety in Tallaght West (CDI, 2005). The intention was that this would involve facilitating and promoting collaborative ventures between residents, Gardaí, the local authority and other key service providers/NGOs in order to develop and implement the CSI. Improving community interaction and strengthening resident engagement with support services through the CSI were conceptualised by CDI as key processes to build positive relations between stakeholders (CDI, 2008a). It was envisaged that cooperative initiatives under the CSI would ultimately lead to wide participation in local activities and in the maintenance of a safe community, while implementing the CSI would build and sustain a shared sense of community spirit and strengthen local attachment among Tallaght West residents (*ibid*).

The level of difficulty in terms of achieving these aims (of improving safety and pro-social behaviour and perceptions of such, as well as enhancing a positive sense of community and encouraging more widespread community engagement in fostering a safer environment to live and work in) cannot be overestimated. There is a trend towards increased collaboration of non-statutory bodies in the community safety field with traditional agencies in the Justice sector and Local Government organisations, based on the difficulties faced in adequately addressing local crime prevention and safety issues in particular areas. These new approaches to community safety and service delivery are largely in an evolutionary stage of development and therefore not as yet 'tried and tested' in practice. Moreover, at the centre of this intervention was the intention to utilise partnership, community-led approaches to building community safety in Tallaght West, a way of working which in turn raises particular challenges (Federal Partnership Project, 2008; Barnes *et al*, 2006).

3.2 Target population of the CSI[2]

An analysis of recent research[3] indicates many children and families living in the CSI's target communities may be at risk of experiencing social disadvantage.[4] A socio-demographic profile of Tallaght West undertaken in 2009 and an analysis of Phase 1 research data found that besides the obvious implications of above-average rates for negative social indicators (including unemployment, lone parenting, educational disadvantage, and crime and anti-social behaviour), many significant and connecting contextual factors exist. These factors – low community spirit, a disconnection from support and family networks, social isolation, and low social control and the lack of positive role models for many of the area's young people – were found to heavily influence actual experiences and perceptions of safety among research participants. Such data not only highlight the level of need in Tallaght West for which the CSI was introduced, but also point to the significantly ambitious and challenging task which the intervention was attempting to address through its community safety initiative.

According to a majority of stakeholders involved in the early development of the CSI, a low level of 'community cohesion' existed in many parts of Tallaght West. As a consequence, a sense of powerlessness in the face of high levels of anti-social behaviour and crime was said to affect residents living there. Moreover, a key contextual finding in Phase 1 of the evaluation was that residents were in many instances likely to live under difficult conditions, without solid relations with local service agencies and/or broader familial support that may help to promote cooperative behaviour.

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[2] See Appendix B for a more extensive presentation of the contextual findings concerning the CSI target communities in 2009 and 2010.

[3] Conclusions are based on an analysis by the CRFC team (in 2008 and 2009) of research conducted nationally and in Tallaght West.

[4] See Appendix C for a description of the significant trends in demographic, social class composition and administrative information relating to safety in Tallaght West during the early implementation phase of the CSI.

The research identified these social challenges as limiting the efforts of service providers to initiate and subsequently maintain the traditional local connections necessary to minimise the exposure of children and families to the risks associated with crime and anti-social behaviour. In addition, residents and service providers identified an apparent lack of a sense of agency[5] among local communities to effect changes in local conditions as existing in certain areas. Indeed, a heightened fear of victimisation expressed by many living on estates was thought by a majority included in the research to have significantly reduced the capacity of communities to address safety problems happening in their locality. Perceptions held by many residents of being disenfranchised and dislocated and of feeling unsafe in their homes and on estates emerge from the research (*see Appendix C for details of findings on 'safety' perceptions of CSI stakeholders in 2009 and 2010*).

These factors are understood as symptoms destabilising local communities and decreasing local capacity to respond effectively to community safety issues.[6] The research indicates that the low level of social capital reported in the area posed a particular challenge for implementing the CSI. Moreover, it particularly highlights the difficulty of addressing community safety and a sense of belonging in areas where levels of trust, social bonds and networks, and the ability to take action are low.

3.3 Stakeholders' motivations

In Phase 1 of this research, stakeholders distinguished the CSI as a social intervention aimed at creating awareness of and accountability for the factors underlying local crime and anti-social behaviour problems. Through raising awareness of the safety problems affecting the area, research participants in general were hopeful a positive collaborative dynamic would develop through implementing the CSI. Most were of the opinion it would help to connect (or reconnect) local families, and especially young people and children, to their communities – a major need highlighted by most residents participating in the research.

In 2009, most of those involved in developing and implementing the CSI perceived the initiative as representing an opportunity to empower local residents living in targeted areas. Residents generally agreed that the initiative was about trying to address the powerlessness and fear they experienced because of feeling unsafe in the areas in which they lived. In 2011, a resident reflected on her reason for participating in the CSI since 2008:

> *'I pictured my area becoming my childhood area really, where all the neighbours spoke to each other, all the kids played together, you didn't have a fear of walking outside your own front door … so I kind of decided well nobody else is going to take responsibility for making the place better for my children, so why don't I do it?'*

[Community representative]

Those involved in 2010 agreed that the CSI was about reducing the fear and isolation that several agreed affected many families living in their neighbourhood. They indicated that personal experiences of intimidation, fear, physical and verbal assaults, threats and racism in the areas where they lived originally led them to participate in initiatives. A majority of those interviewed at this point emphasized that improving community spirit and accessing local supports were key reasons for implementing the CSI in their areas. Residents believed that rolling-out the initiative in their areas would, over time, result in a change in local attitudes and personal and interpersonal behaviour, and so improve community spirit.

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[5] A sense of agency or perceived self-efficacy to respond to problems relates in this context to people's beliefs about their capabilities to produce 'designated levels of performance that exercise influence over events that affect their lives' (Bandura, 1997, p. 71).

[6] Among the main local safety issues recorded in Phase 1 of the research are the misuse of drugs and alcohol; drug dealing; the under-reporting of crime because of, among other reasons, the fear of intimidation from others living in the community; the knock-on effect low crime reporting has on police/community relations as more interrogatory means of achieving police investigative goals are utilised by Gardaí; a perception by residents that their community received inferior services to other areas; and the fear of utilising local community venues, shops and play areas by residents.

Service providers centrally involved in the implementation of the CSI (2008-2011) were of the view that building better relationships between residents and service providers was a prerequisite for safer, more productive communities. When interviewed in 2009, several thought that implementing the CSI would lead to agreement on new ways of dealing with disorder problems (safety and environmental) on estates by involving residents directly in solutions. By working in partnership with communities, service providers thought they could develop systems and processes that address the area's crime and anti-social behaviour problems. Key service providers commented in 2011:

'The outcome we wanted is greater participation and another method of engagement with people out there.'

[CSI service provider]

'It [the reason for involvement] would be that the more confident people are to have a better quality of life, they are more likely to report crime. They are more likely to cooperate with the Guards in the investigation of crime and then again, there's a circle that again hopefully will lead back to a better quality of life and a lowering of crime and anti-social behaviour in Tallaght West.'

[CSI service provider]

Hence, initially there was a sense among those living and/or working in the Tallaght West areas who were directly involved in the initiative that people could be empowered to tackle the difficulties associated with crime and anti-social behaviour and the fear of these, and improve the community spirit in the locality. Service providers were particularly interested in working more closely with local residents in making this happen.

3.4 Summary

The aim of this chapter was to provide an overview of the origins and background to the implementation of the Community Safety Initiative (CSI) in Tallaght West. Key findings emerging from the research include:

- CDI's Community Safety Initiative aimed to promote pro-social and responsible behaviour in Tallaght West through implementing initiatives in targeted areas that strengthen residents' attachment to their community and boost community spirit.

- Through implementing the CSI, CDI sought to utilise and strengthen partnership and community-led approaches to improving community safety in Tallaght West.

- The high level of need for a safety initiative was based on the significant social problems in Tallaght West and consultation with those living and working in the area, as documented in background research conducted in the community by both CDI and the Dartington Social Research Unit during the mid-2000s.

- Relevant socio-economic data for the Tallaght West area and early stage qualitative research findings regarding perceptions of safety gathered from key stakeholders involved in the CSI indicated a series of significant social problems and challenging contextual factors. These included rates of unemployment above the national average, lone parenting, educational disadvantage, crime and anti-social behaviour, and low levels of community cohesion, all of which culminated in providing a highly complex structural environment in which the CSI was to operate.

- Research participants believed that a heightened fear of victimisation experienced by many residents has significantly reduced the capacity of communities in Tallaght West to address local safety problems.

- Notwithstanding the significant challenges facing the initiative, improving community spirit and accessing local supports were key reasons for implementing the CSI according to most residents interviewed.

- Similarly, for service providers directly involved, implementing the CSI represented an opportunity to develop new ways of dealing with anti-social behaviour and environmental disorder problems on estates. What was important in their view was that the initiative should involve local residents in finding solutions to these issues.

Chapter 4: CSI Development, Structures and Activities

This chapter describes the development of the Community Safety Initiative (CSI), its resources and structures, before a detailed delineation of its activities during the final phase of research (October 2010 until September 2011) is presented.

4.1 Development of the CSI

The implementation of the CSI began in November 2008, with the establishment of a CSI Steering Committee to guide a partnership, community-led approach to building community safety in Tallaght West. The committee started its work by identifying four pilot sites, incorporating approximately 400 houses across the four Tallaght West communities (approx. 100 houses in each site), in which to pilot the actions of the CSI. The implementation of the CSI in two of the four sites (in Jobstown and Brookfield) commenced in March 2009.

In 2009 and 2010, other structures and processes were initiated to support the implementation of the CSI and to help expand the initiative in Tallaght West. These structures and processes included a Safe and Healthy Place (SHP) Committee on the MacUilliam Estate in Tallaght West, a CSI Community Forum, a CSI Youth Working Group, a Restorative Practice Management Committee and wider CDI community activities, events and training. These wider community and interagency engagement activities were to support and strengthen the development and implementation of the CSI. In addition, the development of a CSI Service Manual depicting the CSI implementation process was concurrent through the implementation of the CSI.

From September 2008 until December 2009, a CDI Community Engagement Coordinator led the CSI implementation process. In November 2009, the post became a job-sharing position, with one Community Engagement Coordinator tasked with guiding a CSI Community Forum and the implementation of the CSI on two pilot sites in the Brookfield and Jobstown areas. The other Community Engagement Coordinator was charged with supporting the SHP activity, guiding the development of the CSI Youth Working Group and finalising the CSI Service Manual. Both Community Engagement Coordinators assist the work of the CSI Steering Committee and collaborate to implement CSI community engagement events and activities and the Restorative Practice training programme.

In May 2011, three of the four Coordinators of the RAPID Programme in Tallaght West were assigned on a part-time basis for a period of 13 months to work with the CDI Community Engagement Coordinators to develop the CSI (CDI – SDCC Memorandum of Understanding, 2011). CDI funded the salary costs of the three RAPID Coordinators' involvement in implementing the CSI. Key tasks for the new CSI Community Engagement Team in 2011/2012 included:

- supporting and enhancing current CSI community engagement work in Tallaght West;

- identifying new pilot sites in Tallaght West and establishing community safety agreements in these areas;

- testing the relevance, applicability and effectiveness of using the CSI Service Manual in this process (CDI – SDCC Memorandum of Understanding, 2011). A retrospective evaluation of this approach to mainstreaming the learning will be undertaken independently of this evaluation.

4.2 CSI Steering Committee

In September 2009, the CSI Steering Committee adopted a more strategic orientation, with the reconfirmation of the committee's support of the Jobstown and Brookfield pilot sites and the formation of CSI subgroups to deal with the wider issues highlighted in the *CSI Consultation Report* (CDI, 2008a). The restructuring was described by CDI as a necessary and pragmatic shift in the Steering Committee's focus, which occurred as the CSI moved from development towards an implementation phase during its second year (*see Appendix D for further details of restructuring*). However, support for implementing the CSI appeared to decrease in early 2010 among stakeholders (as indicated by the low attendances of community representatives at Steering Committee meetings – *see Figure 1*). Documentary analysis indicates that the Steering Committee did not meet from June 2010 to February 2011.

Figure 1: CSI Steering Committee (SC) meeting attendance in Phase 2 of implementation
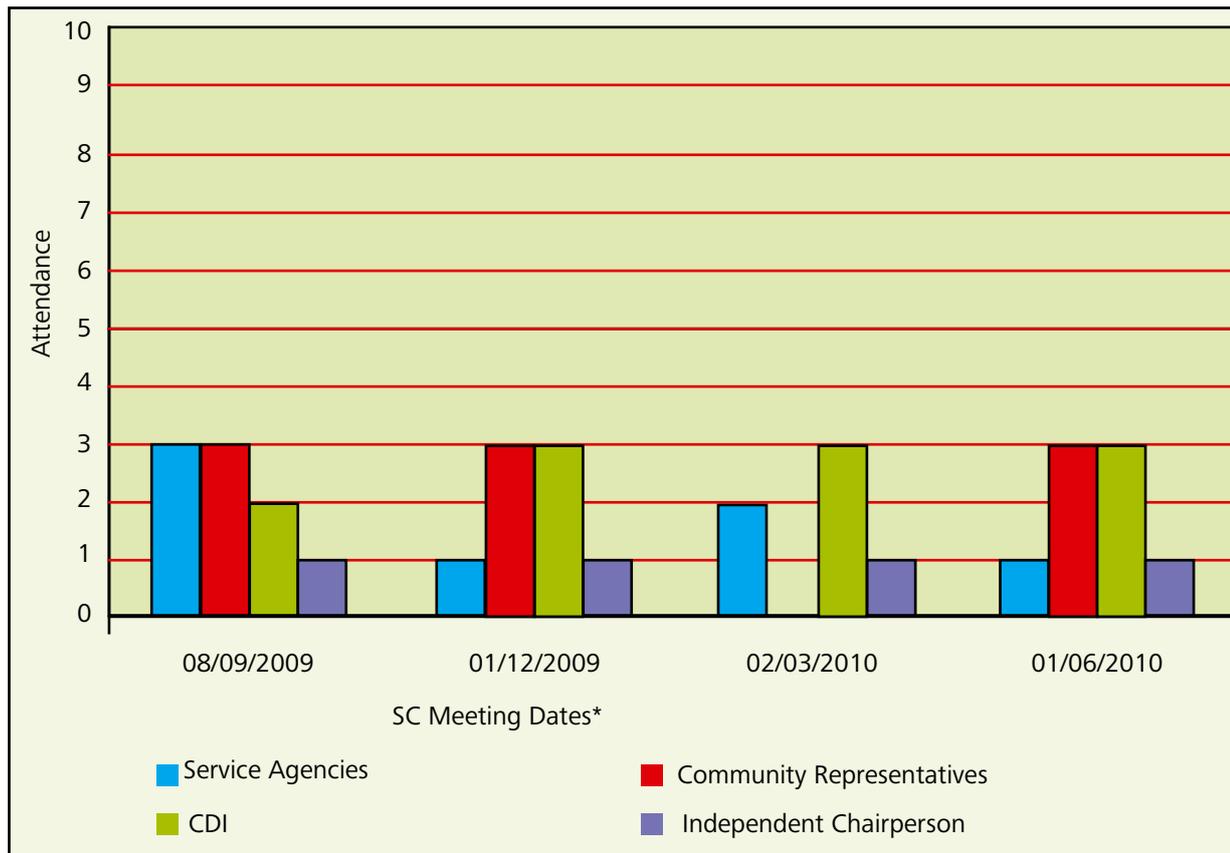
* Due to the unavailability of members, a SC meeting planned for 7 September 2011 was postponed by CDI.

In the final evaluation phase, the Steering Committee formally reconvened on 3rd February 2011. It subsequently met four times in order to re-energise the implementation of the initiative (*see Figure 2 for attendance rates at meetings in final phase*). During this period, membership of the Steering Committee consisted of:

- 2 community representatives from Tallaght West;

- 3 representatives from statutory organisations – South Dublin County Council (SDCC), An Garda Síochána and Young People's Probation Service[7];

- a representative of the non-governmental organisation, Tallaght Youth Services;

- 3 representatives of CDI (the lead organisation) and since May 2011 a representative of the three Coordinators of the RAPID Programme in Tallaght West who joined the CDI Community Engagement Team.

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[7]   A representative of the Young People's Probation Service in Tallaght West formally joined the Steering Committee at 23rd June 2011 meeting. Due to staffing and work constraints, a representative of the Probation Service had not attended meetings since 2009.

Figure 2: CSI Steering Committee (SC) meeting attendance in the final phase of implementation
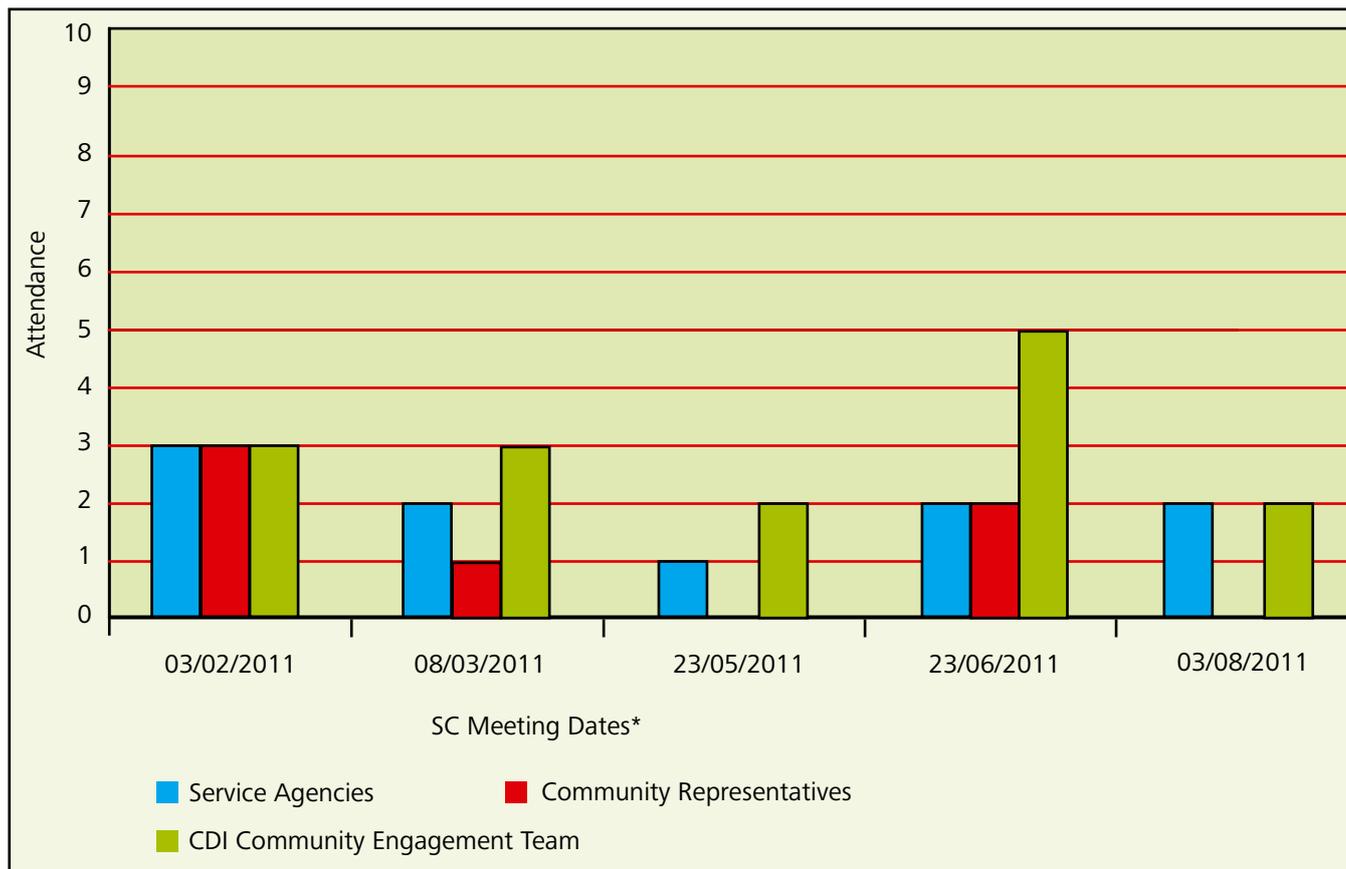
* Due to the unavailability of members, a SC meeting planned for 11 April 2011 was postponed by CDI.

The resumption of the Steering Committee meetings followed a review of the CSI undertaken by CDI in November 2010. The review process assessed CSI structures in terms of their intended purpose and their operational reality. Documentary and observation data indicate several key issues were identified in the review as impeding the development of the CSI. These included:

• low community representation in the CSI;

• the need to increase the level of commitment of service agencies in actively implementing the CSI.

In addition, certain structural issues were also identified in the review as 'concerns', including:

• the absence of a CSI work plan indicating targets, roles and responsibilities, and how this may affect the development of CSI structures and initiatives;

• how the various CSI structures 'connect' and communicate in implementing the initiative;

• the significance of not having a completed CSI Service Manual to utilise in implementing the CSI.

The review resulted in several outcomes, including:

• the production of a revised CSI Logic Model illustrating CDI's key outcomes for the CSI and a range of measures that are envisaged as leading to the achievement of these goals (*see Appendix E*);

• a CSI Action Plan incorporating a list of actions and processes for implementation by the CSI members (*see Appendix F*).

These documents were forwarded to members of the Steering Committee in January 2011, ahead of the scheduled 3rd February committee meeting. At this meeting, it was agreed that a CDI representative, currently a member of the committee, would now act as Chairperson for the remainder of the implementation period (this came about because in January 2011, the Steering Committee's Independent Chairperson, in place since the launch of the CSI in 2008, resigned the post). This, and subsequent meetings during this period, generally comprised discussions about the findings of CDI's review of the implementation and with the viability of new initiatives aimed at progressing the CSI.

Analysis of documentary and observation data indicate that the main matters and initiatives discussed at these Steering Committee meetings included:

- a review of the CFRC's End of Year 1 and End of Year 2 evaluation reports;

- a review of the CSI Logic Model and 2011 CSI Action Plan;

- ways to build momentum on the Jobstown and Brookfield CSI pilot sites;

- how to enable better linkages between the CSI and other local structures responding to community safety initiatives in the target areas, and in particular with the Brookfield and Fettercairn Local Policing Forum;

- a CDI proposal to an Assistant Garda Commissioner seeking the creation of a role for the CSI in supporting community engagement in formal community safety structures, such as Local Policing Forums;

- how to support the goal of full community and service representation in implementing the CSI;

- how to extend opportunities for residents and young people in target areas to avail of Restorative Practice training;

- the assignment of three RAPID Coordinators to collaborate in the implementation of the CSI.

4.3 Pilot sites and the CSI Community Forum

The purpose of the CSI piloting strategy was to introduce the CSI and associated community events and activities to areas where Steering Committee community representatives lived, before their eventual roll-out in the wider Tallaght West area. As stated earlier, during the first year of the CSI, the Steering Committee identified four target areas in Tallaght West (each comprising approximately 100 households) where the initiative would be rolled out. In March and April 2009, some residents living in the Jobstown and Brookfield pilot sites began actively implementing the CSI. In 2009, and to a lesser extent in 2010, residents in these two areas were active in implementing the CSI through organising and holding various community engagement events (*see Table 3*).

Table 3: Calendar of events in two CSI pilot sites, 2009-2011

	Event	Location (pilot sites)	Date
September 2008 - August 2009	Clean-up Day	Jobstown	6 May 2009
	Football Match	Jobstown	16 May 2009
	Clean-up Day	Brookfield	30 May 2009
	Sports Day	Brookfield	17 July 2009
	Summer Festival	Jobstown	15 August 2009
	Summer Festival	Brookfield	22 August 2009
	Volley Ball Match Community *versus* SDCC	Jobstown	26 August 2009
September 2009 - August 2010	Clean-up Day	Brookfield	14 July 2010
	Clean-up Day	Jobstown	24 July 2010
	Summer Festival	Jobstown and Brookfield	14 August 2010
	Volleyball Competition Jobstown *versus* Brookfield	Jobstown	26 August 2010
	Joint Sports Day	Jobstown and Brookfield	28 August 2010
October 2010 - September 2011	Clean-up Day in connection with RAPID Tallaght West area-wide environmental day	Brookfield	16 April 2011

The number of residents involved in implementing the CSI in these two pilot sites (Jobstown and Brookfield) fluctuated during this period. For example, on the Jobstown site the original Working Group implementing the CSI in the area disbanded following the first summer of CSI engagement activities.[8] The Brookfield Working Group was reduced to two members in September 2010.[9] Both sites have been inactive in terms of implementing the CSI in the final phase of the research. In 2011, one CSI community clean-up event took place on the Brookfield site on 16th April in coordination with a RAPID-sponsored environment day implemented in the wider Tallaght West area. In June and August 2011, both the MacUilliam Estate and two smaller areas in Killinarden and Fettercairn were identified as new CSI pilot sites.

The main purpose of the CSI Community Forum was to introduce and promote the initiative on the pilot sites. It was formed subsequent to the restructuring of the CSI, undertaken in September 2009, when the original working groups established during the first phase of the CSI implementation on the Jobstown and Brookfield pilot sites merged into one forum. During this final period of evaluation, documentary, interview and observation sources indicate that the CSI Community Forum had not met to implement the CSI on either site. The research indicates that in 2011 two residents living on the pilot sites can be described as involved in implementing the CSI through their attendance at several Steering Committee meetings and CDI's Restorative Practice Management Committee meetings in 2011. Moreover, survey data collected in June 2011 on the two sites indicate that of those asked (n=115) if they knew of the CSI, a majority of respondents (65%, n=75) did *not* know of the implementation of the CSI.

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[8]   Early CSI Working Group monthly meetings held during March and August 2009 on the Jobstown site were attended by between 15 and 22 local residents.

[9]   CSI Working Group monthly meetings were held during April and August 2009.

4.4 Restorative Practice Management Committee

In 2010, CDI began to roll-out a programme of training in Restorative Practice (RP), which aims to support the CSI in promoting and implementing community safety agreements on CSI pilot sites (*see Appendix G*).[10] The emergence of the RP training onto the CSI agenda is linked to CDI's introduction to Restorative Practices at the Irish Youth Justice Service Conference in February 2010 and CDI's aim to promote the CSI in Tallaght West. An interagency, community Restorative Practice Management Committee (RPMC) was formed by CDI and first convened on 16th June 2010 to support the introduction of RP training to local residents and all statutory, voluntary and community organisations working with children and families in Tallaght West (CDI RPMC Terms of Reference, 2010). A brief description of CDI's Restorative Practice training scheme is provided in Appendix G. In the final phase of the implementation of the CSI, the RPMC has convened six times in its role of overseeing the roll-out of RP training in Tallaght West. The RPMC membership includes a range of local social support and service agencies, schools, community organisations and residents (*see Table 4*).

Table 4: Final phase membership of the Restorative Practice Management Committee

Residents	Probation and Welfare Service	South Dublin Childcare Committee
An Garda Síochána	Restorative Justice Project	Early Years service providers
HSE	RAPID	Primary and secondary schools
CDI	Tallaght Youth Services	An Cosán

Restorative practice (RP) training seeks to develop the capacity of communities to manage conflict and tensions by repairing harm and building relationships (see *CDI Newsletter*, November 2010 and February 2011, available at www.twcdi.ie). The training has been identified by CDI as offering 'a valuable framework and approach' to enable the achievement of CDI's strategic objectives, particularly in relation to improving community engagement and community safety in Tallaght West (see *CDI Newsletter*, November 2010). A successful and full implementation of RP training has, according to CDI, the capacity 'to provide a local framework in which practitioners, managers and organisations become explicit about what they are doing and why, focus on individual and organisational responsibility, and support and challenge each other to identify solutions' (see *CDI Newsletter*, July 2010).[11] A full evaluation of CDI's Restorative Practice Programme has been completed and published (Fives *et al*, 2013).

The RP training schedule includes an introductory one-day session to allow participants gain an understanding of restorative practice and how it may be incorporated into their daily life and work practices (*see Table 5 for RP training attendance figures in final phase of implementation of the CSI*). Further 2-day sessions target specific stakeholder groups, including school staff, community residents and local young people, and staff from statutory, community and voluntary organisations who have completed the introductory training. The 2-day follow-on training focuses on equipping participants with the necessary capacities to facilitate RP mediation circles that may encourage and allow a restorative response to conflict and relationship issues that can arise within their organisation, their practice and at community level.

Since December 2010, seven monthly Communities of Practice (COP) meetings have been held to support those who have received training in utilising RP in their work and daily life, and to provide feedback on the training. In addition, CDI began a 'Training of Trainers' programme in June 2011, one of the aims of which was to identify and train 20 individuals to deliver RP training in the Tallaght West area.

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[10] As described in a CDI Draft Proposal to An Garda Síochána re. 'Role in Supporting Community Engagement in Formal Community Safety Structures' (2011).

[11] The RP training programme in Tallaght West is coordinated through the UK section of the International Institute of Restorative Practices (IIRP).

Table 5: Restorative Practice training and attendance in final phase of implementation of the CSI

	1-day training course	2-day training course
Statutory Service agencies	44	21
Voluntary/Community organisations	43	29
Schools staff	389	54
Early Childhood Care and Education Scheme (ECCE)	21	19
Housing associations	3	0
Educational sector	5	0
Community residents	9	8
Young people	30	0
Total	**546**	**131**

Note: The figures included are based on CDI documentation supplied to CFRC on 9 August 2011.

4.5 CSI Youth Working Group

The CSI Youth Working Group aims to bring the voice of young people to the implementation of the CSI in Tallaght West.[12] In 2010, the CSI Youth Working Group consisted of three young people representing the Tallaght Youth Services (TYS) Youth Forum, two TYS youth workers, a CDI Community Engagement Coordinator, a representative from SDCC, Tallaght Community Policing Unit and the Youth Drug and Alcohol Service (YODA). The working group was not convened in the final research phase; however, the TYS Youth Forum, the Tallaght Community Policing Unit and SDCC continue to collaborate in the organisation of 'The Funky Seomra' non-alcoholic youth music events. In total, three Funky Seomra nights have been held in Tallaght West between June 2010 and September 2011.

4.6 Development and final phase inputs of the SHP

In 2009, CDI established 'A Safe and Healthy Place' (SHP) activity on the MacUilliam Estate, Fortunestown, Tallaght West. The area has been identified as a particularly vulnerable area for young families, new communities, lone parents and Travellers in terms of social and economic disadvantage (CDI, 2010a; Lynam, 2010). The MacUilliam community is culturally diverse, with a high proportion of families with young children (CDI, 2010a). Of the 75 residents surveyed in 2011 as part of the research, 58 declared themselves to be of Irish nationality, while just over one-third originated from countries outside the EU.[13] Interview findings from 2010 suggest the reasons for the SHP intervention included poor planning in terms of construction, the absence of the necessary physical and social infrastructure, housing allocation issues, disputes with developers and a shortfall in funding due to the current economic downturn.

In March 2010, CDI published the *MacUilliam Needs Assessment Report*, cataloguing the issues requiring attention in the effort to create a child-centred, family-friendly neighbourhood in this area (CDI, 2010a). The survey, conducted during November and December 2009 by a number of SHP Committee members including SDCC, the HSE, CDI and Barnardos, provides a snapshot of the issues that are common across the MacUilliam Estate among residents and service providers working with children and families living there. A SHP Committee meeting, held on 19th January 2010 with a range of local service providers, discussed and commented on an earlier draft of the *MacUilliam Needs Assessment Report*. A further meeting with several residents and services providers, held on 27th January, also discussed the findings of the

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[12]   The emergence of the CSI Youth Working Group is traced to CSI/CDI engagement beginning in January 2009 with Tallaght Youth Services (TYS) and their established local Youth Forum.

[13]   Some respondents declared Irish nationality while also naming countries outside of the EU as their place of birth.

report. The report is aimed at influencing local service provision, for example, pre- and post-tenancy support undertaken by SDCC, and with providing residents and service agencies with a useful resource in lobbying for local improvements to the estate and its surrounding environment.

An action plan was formulated in response to the findings of the needs assessment and to help achieve the projected outcomes included in the SHP strategy (CDI, 2008c and 2010a), as follows:

- review the planning process to date and identify key learning;

- identify current needs and coordinate appropriate responses;

- establish and promote effective interagency communication;

- re-focus current Council resources and community facilities;

- continue to deliver a Common Quality Standard[14] to support outcomes for children;

- consider best practice in other SDCC locations;

- ensure that planning and service delivery are child- and family-proofed.

In 2011, CDI identified a number of future targets for the implementation of the SHP in MacUilliam, including:

- having a local plan in place and implemented;

- identifying post-tenancy supports for the residents of MacUilliam;[15]

- identifying, documenting and disseminating principles of best practice in urban planning;

- developing a Community Integration Strategy with residents;

- providing committee skills training for residents;

- building relationships between the community and service providers through local events, such as a 'Welcome to the Neighbourhood Day' and a series of coffee mornings to act as information outlets for local residents;

- identifying the MacUilliam Estate as a CSI pilot site;

- developing and implementing a community safety agreement on the MacUilliam CSI pilot site.

The SHP Committee convened seven times from October 2010 to September 2011 to implement the SHP Action Plan for the development of services on the MacUilliam Estate (*see Appendix H*). Its active membership in this final phase of the CSI implementation included representatives from the following organisations: CDI, Barnardos, the HSE, SDCC Housing and Community Services Departments, County Dublin VEC (CoDubVEC), Tallaght Youth Services (TYS), the Oaklee Housing Association and the MacUilliam and Oaklee Residents Associations. Figure 3 shows attendance rates at the SHP Committee meetings across stakeholder groups.[16]

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[14] SDCC has committed in a number of ways to improving the physical fabric of Tallaght stock of local authority housing through the delivery of a Common Quality Standard across all estates. This includes installing central heating in all houses; insulation; electrical upgrades; installation of smoke alarms; and the replacement of windows to provide for double glazing in all homes.

[15] Of particular concern for MacUilliam's Oaklee Housing Association tenants is the issue of the handover of their tenancy agreement from Oaklee to SDCC. The failure to resolve a property ownership issue has resulted, according to residents, in neither organisation responding to the necessary upkeep and maintenance of Oaklee apartments and surroundings over a number of years.

[16] In the period covered in the report, the CDI Community Engagement Coordinator invited by e-mail between 14 and 17 people to upcoming SHP meetings. Several organisations including the Dodder Valley Partnership and An Garda Síochána, while officially members, did not attend committee meetings during this period.

Figure 3: SHP Committee meeting attendance across stakeholder groups from October 2009 to September 2010
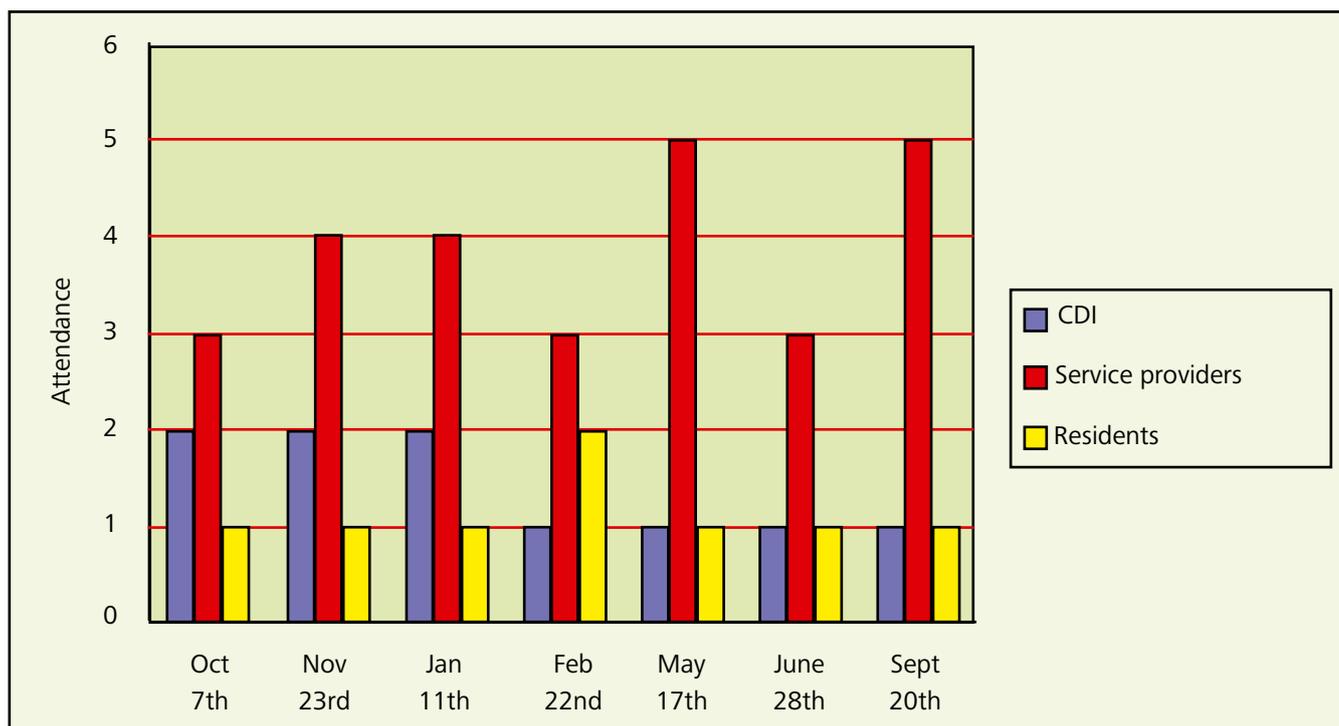
Note: Since there was less than a quorum attending the SHP Committee meeting held on 28 June, it was agreed to postpone the meeting until 20 September.

Documentary and observation sources during this period indicate that the SHP Committee has provided a forum in which service agencies and residents can share information and collaborate in addressing local issues and problems. It has also provided the scope for members to share information regarding the implementation of community engagement/ integration activities and events in the local areas of Jobstown and Brookfield as well as in the wider Tallaght West area. In addition, a number of initiatives supported by the SHP Committee have been or are in the process of being delivered locally, including:

- the provision of two sessions of intercultural training, targeting residents and service agency staff working in the MacUilliam area;

- the installation of a traffic calming 'yellow box' at the entrance to the MacUilliam Estate;

- the ongoing development of a Multi-Use Games Area (MUGA) and playground in the MacUilliam Estate;[17]

- the landscaping of open areas on the MacUilliam Estate by SDCC;

- the production of fridge magnets that include local safety-related information and telephone numbers, distributed in the MacUilliam community on 26th July 2011;

- the ongoing provision of a fortnightly Garda and SDCC information clinic held in the Barnardos premises on the MacUilliam Estate;

- the inclusion of a section in the Tallaght West local services directory (*Welcome to Tallaght*, published in September 2011) with information on amenities and services in the MacUilliam area;

- ongoing support of the MacUilliam Residents Association by SDCC and CDI (including the creation of a MacUilliam Residents Facebook page);

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17   Since June 2010, the MacUilliam MUGA and children's playground are serviced by a SDCC-operated CCTV system.

- a seminar on best practice in planning and community integration, held on 5th April 2011;

- a Family Fun Day, held on 10th September 2011.

4.7 Wider community engagement in the CSI

CDI also organised and hosted a number of community engagement and interagency-supported activities and events to strengthen the development of the CSI in Tallaght West in this final phase. Examples include:

- the Tallaght West Children's Good Behaviour Awards Scheme, which held an awards ceremony on 22nd February 2011 (the social awards scheme involves local Tallaght West residents acting as 'spies', pinpointing and recording instances of good behaviour by children);

- a National Restorative Practice meeting, held on 6th April 2011 and attended by representatives from statutory and voluntary organisations, schools and residents from Tallaght West and other areas;

- a public seminar, 'Making Tallaght West a Restorative Community', held in September 2011;

- a volleyball league, with participating teams coming from the Gardaí, SDCC, CDI, Barnardos, residents from the CSI pilot sites, local councillors and TDs;

- the *CDI Newsletter*, which publicises the CSI, its progress and associated events and activities;

- a web-texting system developed as a means to publicise the CSI locally; the system invites community members and local service providers to connect to a messaging service relaying information concerning CDI/CSI and other community events.

4.8 Summary

In this final phase of the evaluation of the CSI research from October 2010 to September 2011, the principal findings concerning the implementation of the CSI in Tallaght West were:

- A decrease in support for the CSI in 2010 among stakeholders, leading to a break in Steering Committee meetings from June 2010 to February 2011.

- A reduction in community involvement in implementing the CSI on the Jobstown and Brookfield pilot sites.[18]

- A review process assessing CSI structures and processes leading to the production of an updated CSI Logic Model and Action Plan.

- Five meetings of the CSI Steering Committee held in 2011 to reactivate and guide the CSI implementation in Tallaght West.

- The assignment of three RAPID Coordinators to the CSI Community Engagement Team in May 2011.

- The initial roll-out of the Restorative Practice training programme, targeting school staff, service agency staff and community residents in Tallaght West.

- Seven meetings of the SHP Committee in order to implement an agreed SHP Action Plan for the development of services on the MacUilliam Estate.

- The completion of several wider CDI community engagement activities and events with residents, young people and service providers.

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[18] The CSI Community Forum did not meet to implement the CSI in this final phase of research and the CSI was not known to most residents surveyed on the two pilot sites.

Chapter 5: Implementing the Community Safety Initiative

This chapter presents research findings on the implementation of the Community Safety Initiative (CSI) in Tallaght West from September 2008 to September 2011. Its purpose is to synthesise the analysis from the three phases of research in order to provide a detailed and comprehensive account of the CSI and the structures and processes utilised to implement the initiative over this 3-year period. The chapter is divided into sections that present findings concerning the process of implementing CSI plans, the structures and processes developed, their operation and subsequent actions, and summarises the key evaluation conclusions to emerge from each section.

5.1 Coordinating implementation of the CSI

KEY FINDINGS

- The research indicates active representation from the major crime prevention and public safety agencies, from local youth services and from a number of committed local residents on the CSI's Steering Committee.

- The lack of an agreed and comprehensive action plan and formal procedures concerning the assignment of roles and responsibilities among members of the Steering Committee limited its efforts to build local ownership and strengthen residents' involvement in the CSI.

- The non-representation and under-representation of residents, groups and areas on the Steering Committee during the implementation restricted the pace of CSI development and its expansion in Tallaght West.

- A lack of tangible safety-related initiatives and a perceived distance from established community and safety structures limited the development of the CSI.

The purpose of the Steering Committee is to 'advise and support the development' of the CSI, according to CDI's 2009 Terms of Reference for the project. Phase 1 research indicates that CDI had assembled a motivated and relevant team of organisations and community representatives on the Steering Committee, committed to supporting the CSI's implementation in Tallaght West. At the outset, the Steering Committee's membership comprised community representatives (5), CDI staff (2) and representatives from the statutory and voluntary sectors – SDCC (1), An Garda Síochána (1), Tallaght Youth Services (1) and the Probation Service (1). Such active representation from the major crime prevention and public safety agencies, from local youth services and from a number of committed local residents during the CSI's development phase (2008-2009) was important in providing the resources and practical know-how to support CSI actions aimed at translating safety goals into workable objectives during this period. The central purpose of the Steering Committee was identified by stakeholders as one of securing a basis to collectively transfer this knowledge and goodwill into the wider area through implementing the CSI.

Early instances of partnership-working between service providers and community representatives under the auspices of the Steering Committee were central in the positive responses to the initiative recorded in the first phase of the research. The organisation of a programme of CSI activities and events on the Jobstown and Brookfield pilot sites in 2009 initiated relationships between representatives of local residents and service agencies, and illustrated the potential of local community/service agency collaboration on the Steering Committee. These events, according to organising participants, promoted trust between CSI stakeholders since they had an opportunity to communicate with each other and work together towards shared interests and purposes. Research in Phases 1 and 2 indicates that early CSI partnership, especially when resulting in practical and demonstrable community engagement activities on the pilot sites, built motivation and confidence among those residents involved in implementing the CSI.

Research in 2010 also indicates experiences of building such collaborative relationships influenced perceptions of local safety issues for those few residents actively contributing to the implementation of the CSI. Several community representatives involved in the CSI explained that by the end of Year 1, safety issues had been highlighted in their area and that the solutions to these problems would come through building positive relationships with their neighbours and with local service providers. In July 2010, perceptions of safety were thought by a number (5) of community representatives to be changing for the better because residents on the pilot sites were getting to know one another through CSI events.

Research findings suggest a number of operational aspects limiting the Steering Committee's capacity to build on the opportunity afforded by the commitment and expertise of members to improve safety in Tallaght West. First, the committee's effort to strengthen involvement and build local ownership over the evolving CSI process was restricted by the lack of formal procedures concerning the assignment of roles and responsibilities among members. Phase 1 research indicates members had difficulty identifying *'their place'* within the Steering Committee and certain stakeholders were demotivated by being unable to identify the benefits of participating in the CSI during the initial stages of implementation. Moreover, the lack of an agreed and comprehensive action plan to guide the CSI implementation limited opportunities to motivate and commit members to agreed safety targets and priorities. Research in 2009 and 2010 concluded that the absence of this key collaborative process – of devising a response to local safety and thereby specifying coherently how and when safety issues were to be addressed – was a significant factor in limiting stakeholder engagement in implementing the CSI.

Second, the participatory effort was curtailed by a problem of assigning particular implementation tasks among Steering Committee members and therefore accountability for agreed actions and plans. Differing interpretations and understandings of the purpose, focus and roles of the committee resulted in tensions between some members. In addition, following the restructuring of the CSI in September 2009, some members became less involved or more connected to CSI work away from the Steering Committee, in, for example, the CSI Community Forum and CSI Youth Working Group. *'Everyone was out of place, everyone was misplaced'*, as one Steering Committee member commented when interviewed in 2011.

Service providers and residents also held contrasting views on their working relationships with each other, with the former being noticeably more positive than the latter. For example, observation, documentary and interview findings in 2010 all indicate that enhanced capacity and levels of confidence to participate among the two central CSI community representatives was related to their ability to communicate directly with service providers, and having the opportunity to do this via the CSI structures. However, on the whole, a level of scepticism and mistrust was found to exist between the CSI community representatives and the service providers. There was a perception that service providers were disengaged and had not delivered on commitments.

Third, through all three phases of the research, findings indicate that CSI plans and actions were frequently delayed and/or failed to develop into actions that could be implemented because of low or non-attendance of members at Steering Committee meetings or because of the 7-month break in meetings during 2010/2011. In addition, the non-representation and under-representation of residents on the Steering Committee slowed the pace of CSI development and expansion in Tallaght West by limiting the broad involvement required to access all of the four target communities.

Such implementation issues challenged and weakened the commitment to the process of both service provider and community representatives on the Steering Committee, resulting in some of the original membership withdrawing over the 3-year research period (*see Table 6*). It is instructive to look at the attendance figures for Steering Committee meetings in the final phase of the evaluation in relation to the representation figures in Table 6, where it can be seen that as CSI actions on pilot sites decreased, so too did attendance at meetings.

Table 6: Community representation on CSI Steering Committee, 2008-2011 – Numbers proposed and who attended meetings

Area/Group	Proposed in CSI Terms of Reference 2008	August 2009	August 2010	August 2011
Fettercairn	2	0	0	0
Killinarden	2	1	0	0
Brookfield	2	3	1	1
Jobstown	2	1	2	1
Traveller	1	0	0	0
Ethnic minority	1	2	0	0
Total	**10**	**7**	**3**	**2**

Stakeholder reflections in 2011

In the final phase of research, Steering Committee members were asked to reflect on their experience of the CSI and on being a member of the committee. Committee members from CDI pointed out that the committee's difficulty in developing the CSI into a structure that could operate successfully within local safety and support structures was due largely to a number of operational and relationship factors. According to CDI, a lack of leadership on the committee resulted in *'real difficulties'* in building the capacities necessary to avail of the opportunities afforded by service agency and community participation. CDI members were of the view that different stakeholder groups were not linked together in focused actions and thus the absence of tangible visible progress towards implementing the CSI demotivated members and challenged their commitment to the Steering Committee. Moreover, CDI highlighted that a lack of clarity of members' roles on the committee and a low level of active and consistent follow-up and support of agreed actions spread doubt among members as to the purpose of the committee and thus their commitment to implementing the CSI.

> *'The community and service providers both wondered why they were there at different stages. And at other stages it was very clear to them what they were doing and the purpose of them being there.'*

[CDI Steering Committee member]

CDI Steering Committee members acknowledged certain *'complexities'* in collaborating with partners that included statutory and voluntary agencies, and residents from the target communities. Efforts to implement the CSI, they felt, were sometimes frustrated because of a lack of commitment by service agencies to contribute consistently to its development and/or to follow through on agreed actions and initiatives. Invariably, according to CDI, this translated into disappointment for those community representatives closely associated with implementing the CSI on the ground in their areas.

> *'To go out to their neighbours and start a process, it's a big ask, and if we are asking people to do that we need to be sure that the rest of us are going to follow through.'*

[CDI Steering Committee member]

Representatives of service agencies on the Steering Committee held the view, in general, that while the committee provided a forum for meeting and collaborating with other local service providers and residents, it did not, however, function as a community-led partnership forum. Service providers reflected that the Steering Committee never achieved full community representation during the implementation period (*see Table 6*) and had, in fact, begun losing community representatives in the first months of the CSI implementation.

> '*I think more community representatives would have been hugely important, and I feel as well, particularly with the areas we are dealing with, that a Traveller representative is absolutely crucial and none of those have surfaced.*'

[CSI service provider]

> '*I felt we were back two years earlier and I just felt that really there had been very little or any community engagement and that what had been achieved was lost.*'

[CSI service provider]

According to service providers, the Steering Committee's capacity to drive the implementation of initiatives agreed at meetings was limited by the absence of a genuine link to bottom-up, grassroots partnership activity in the target areas. This, they concluded, defeated the objective of building relationships with the local communities in the effort to implement collaborative integrated responses to area-wide safety issues. For example, two-thirds (65%, n=75) of 115 respondents to a survey conducted on the two CSI pilot sites in June 2011 did not know of the CSI, while one-third were aware of it (33%, n=38). Thus, rather than working to respond to and address local issues of concern to residents in Tallaght West, the Steering Committee remained detached from target areas and associated with a small number of the original group of community residents.

> '*It's become so individually minded that the community-wide thing has been lost.*'

[CSI service provider]

> '*Something that should be at street level has come back to individuals, and that doesn't help it and I sometimes question what is the wider engagement of the people in those areas.*'

[CSI service provider]

Steering Committee meetings in 2010, and following their re-commencement in February 2011, generally focused on trying to re-invigorate the initiative. In particular, in 2011, attention focused on how introducing strategies could provide linkage with the Brookfield and Fettercairn Local Policing Forum, facilitate the assignment of three RAPID Coordinators to the CSI and progress the testing of the CSI Service Manual. Observation research indicates, however, that the two community representatives attending Steering Committee meetings in 2011 questioned the relevance of their presence without tangible, on-the-ground CSI implementation happening in their areas. One representative highlighted the committee's '*lack of action*' in supporting the CSI implementation and how she felt '*out of it*' at meetings because topics and discussions did not have any relevance for her position. One community representative questioned whether the committee had the commitment of all member organisations:

> '*It was only CDI that were asking. You know, if … I mean the Council and the Guards and everything were on board with this, so why weren't they coming to the community as well and saying "Well look, this is a great thing, this is something good for you". That would have been a much, much better thing.*'

[Community representative]

Service agency representatives explained that another key issue limiting the Steering Committee (and CSI) was that from the start the structure had not focused appropriate attention to building positive working relationships with established safety and community structures already in place and working with target communities. Several interviewees viewed as important the development of viable and reciprocal relations with community organisations and those support groups that they identified as being embedded in local communities. Several indicated such links perhaps could have garnered the ground-level legitimacy and support essential to sustain the implementation of the CSI in targeted areas.

> *'My concern with CSI and I feel like finally that awareness has kicked in, I would have always wondered where was it in relation to policing fora, that made no sense to me. Why were there community clean-ups that weren't linked to the other community cleans-ups, even if they wanted to stay distinctive within them, I still don't understand that. I felt it was paralleling and not linking into everything else that was going on and was very well established … Why weren't we adding value to something that was there, that had the people who have decades of community involvement linkage, community buy-in?'*

[CSI service provider]

The assignment of three RAPID Coordinators to the CSI Community Engagement Team in May 2011 was a positive move in this collaborative direction, according to several committee members. It underlined for them what they thought was the essential work of building links with relevant organisations, task forces and individuals if the CSI was to help improve community safety in Tallaght West. *'I think the advantage they'll [the RAPID Coordinators] have is that they'll be able to talk and deliver fairly quickly'*, as one CDI representative remarked. It could also bridge the gap between the Steering Committee and CSI's target communities according to another committee member:

> *'The RAPID people themselves have had huge amounts of experience with people down there on a number of projects we have done previously and continue to do, and this may give a new impetus and may give a new meaning to the CSI as well.'*

[CSI service provider]

5.2 Piloting and community engagement in the CSI

KEY FINDINGS

- Some reported positive impacts regarding community interaction at CSI events in 2009 and 2010 on the Jobstown and Brookfield pilot sites.

- The lack of tangible improvements in safety in the Jobstown and Brookfield pilot sites impeded wider community participation in implementing the CSI.

- Low community involvement constrained service provider input into the implementation of the CSI.

- Community representatives felt unsupported in implementing the CSI in their areas and under pressure to involve other neighbours.

The research indicates the utilisation of a piloting strategy to implement the CSI was to mobilise support for the initiative, build relations with residents in the target areas and facilitate direct service provider–community interaction. As stated earlier, local interaction and support accessed under the CSI took place on the sites during Year 1 and to a lesser extent during Years 2 and 3 of the implementation.

The lack of active engagement in implementing the CSI by residents living in the pilot sites has remained a significant issue, limiting the overall initiative's progress. This is notwithstanding various attempts by the CSI to address such issues through the organisation of a range of community events and activities on the two existing pilot sites in 2009 and 2010 (*see Table 3*). In addition, in 2010 and 2011, CDI widened CSI community engagement activity in the Tallaght West area through the roll-out of Restorative Practice training and the introduction of the Tallaght West Children's Good Behaviour Awards Scheme. The purpose of these actions was to facilitate community engagement among residents and direct service provider–community interaction. However, the difficulty of building and maintaining momentum among residents to participate actively in the CSI in the pilot sites was a recurring topic across stakeholder groups throughout the research period.

The research indicates that difficulties in engaging residents living in the pilot sites to participate actively in the CSI are primarily traced to a number of factors. First, despite some reported positive impacts regarding community participation and interaction in the organisation and attendance at CSI events in 2009,[19] the lack of tangible improvements on core safety issues (crime, anti-social behaviour, litter) on the Jobstown and Brookfield pilot sites has impeded wider community involvement. One CDI representative, reflecting on the reasons for the low level of community participation in the CSI, summed it up with the words, *'I think because we talked too much and delivered too little'*.

Community representatives interviewed in 2010 identified the absence of *'direct benefits'* of involvement and feelings of *'disappointment'* expressed by residents due to a perceived lack of support from service providers as the major sources contributing to the reduction in local commitment to the CSI on both sites. In addition, wider CDI community engagement events[20] did not generate higher levels of active involvement of residents in the CSI on the pilot sites. Moreover, key service providers explained in 2010 that their level of involvement is contingent on the stage of development which the pilot sites are currently at, and the more developed these become, the more they will be directly involved. Low community involvement restricted CSI development and so constrained service provider input into the CSI.

Second, incidents at CSI community engagement events in one of the sites in 2009 and 2010 created tensions between the residents and service providers (Gardaí and SDCC). Community representatives stated that they were *'let down'* by service providers because of these experiences and the relations built over the previous year were *'set back'* according to CDI.

> *'After that, they just said "What is the point, we feel we have built up connections, we feel … we're bragging to the neighbours, let's do this because we can make this phone call now". And it didn't happen. And they felt their reputation had been damaged.'*

[CDI]

Consequently, community engagement and CSI development on this particular pilot site was significantly damaged, according to CDI and the main community representative living on that site. Residents interviewed in 2010 were of the opinion that service providers were disengaged and had not delivered on commitments, as seen in the following comments from members of the CSI Community Forum Focus Group (2010):

> Resident 1: *To date, they [service providers on the Steering Committee] have done very little. And we are very unhappy about that … they do come along and sit at meetings and volunteer nothing.*
>
> Resident 2: *Or else they volunteer and they don't follow through.*
>
> Resident 1: *I think they don't know what to do. I think maybe they don't have the answers.*
>
> Resident 3: *I think they just don't care.*
>
> Resident 4: *They should be more interested in making you feel safer.*
>
> Several: *Yes, that's their job.*

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[19]   The two community representatives on the Steering Committee and leading the CSI Community Forum on the sites in 2009/2010 reported that their perceptions of safety had improved because of their involvement in the initiative and their enhanced capacity to connect with neighbours, CDI and service providers on the Steering Committee.

[20]   The Tallaght West Children's Good Behaviour Awards Scheme 2010/2011, the Pancake Tuesday and Big Breakfast community engagement activities 2010, the Volleyball leagues in 2010/2011 and various other community engagement activities.

Third, while the local presence of community representatives from the Steering Committee on each of the sites is considered paramount by the CSI for engagement with other residents, those residents involved during 2010 and 2011 were of the view that they were unsupported. Research findings in Phases 1 and 2 of the CSI implementation indicate that community representatives considered the local activities and community events as generally having been successful and saw potential for the CSI to expand. However, they also referred to being disempowered by being separated and remote from CDI and the service provider members of the Steering Committee.

In 2011, several service providers explained that in the absence of a reasonable level of local engagement and active support for the CSI, those residents who had become and stayed involved carried the considerable expectations of others. Steering Committee interviewees expressed the concern that this small number of residents shared a certain sense of burden and responsibility for implementing the CSI on the two pilot sites. Several pointed out that community representatives also shared a certain vulnerability that came with being identified with the initiative.

'They [community representatives] weren't linked into anything else necessarily going on. I felt there was an awful lot of expectation … Also I would have felt that they were put in, to be honest, I think, personally compromising situations.'

[CSI service provider]

'Brookfield has kind of, we have huge kind of difficulties there at the moment, but it's due to forces and families outside the control of residents, you know what I mean. You've kind of criminal elements get involved and it's just too big for people to deal with locally.'

[CSI service provider]

Fourth, the low numbers of residents participating in the CSI Community Forum, established in September 2009 to act as the core *'ground-level'* structure implementing the CSI on the two active pilot sites, limited the scope for promoting the CSI in these areas and thus attract a wider pool of stakeholders to the process.[21] A majority (64%) of the 101 respondents to a survey on both pilot sites during Winter 2010/2011 had not heard of the CSI Community Forum, in comparison to just 14% who had. Low community involvement in the Forum thus created several challenges for the CSI in achieving adequate representation, building support on the pilot sites and counteracting the strain and burn-out reported by some of those involved. Difficulties engaging residents restricted the CSI's capacity to gain local legitimacy and allow community ownership over the process to develop, leading to low participation rates and the non-representation of certain areas and minority groups on its structures.[22] As a consequence, the implementation of the CSI has been restricted to a small number of residents and has not permeated out into the wider pilot site communities or the Tallaght West area in general.

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[21]   The CSI Community Forum did not meet in the final phase of implementing the CSI on the Brookfield and Jobstown pilot sites.

[22]   Only two residents living on the pilot sites can be described as involved in the CSI through their attendance at several meetings of the Steering Committee and CDI's Restorative Practice Management Committee in 2011.

Stakeholder reflections in 2011

CSI stakeholders interviewed during April and May of 2011 reflected on the difficulties experienced in engaging the community on the sites to participate in the CSI. CDI maintains that the piloting strategy was from the outset overly ambitious and was one that was rendered impractical once committed community representation failed to emerge in the sites. *'It was like stop–start in the pilot sites, without really a clear vision'*, according to CDI. Another CDI representative commented:

> *'I think we took on too much … taking on four [pilot sites] at one time was too much, you know. We learnt that pretty quickly. I think … you need three or four people in a site who are motivated and have time and all of that … Where you have got one or two people, it's very isolating for them.'*
>
> [CDI]

Representatives of service agencies acknowledged the complexities of addressing community safety issues in the areas targeted. Several took the view, however, that safety was unlikely to be addressed in any appropriate way through the CSI because of the low level of community engagement and support for its activities on the Brookfield and Jobstown pilot sites to date. Service providers interviewed in 2011 highlighted what they perceived as an absence of a clear strategy or plan once on-site community engagement activities failed to generate the ground-level support and commitment required to implement the CSI. They questioned an approach that continued to implement events and activities that were having little impact in terms of community engagement and on implementing the CSI in these areas.

> *'I don't think they have really moved on. I know there was a couple of things that went on, clean-ups and that sort of thing. But to be quite honest, I don't think they needed CSI for that to happen; these are things that do generally happen anyway.'*
>
> [CSI service provider]

> *'Say for clean-ups and that, we were kind of leading and involved in clean-ups in areas right across Tallaght, so if CSI organised one in a particular estate, it was no different to another estate that didn't have CSI.'*
>
> [CSI service provider]

A recurring theme for community representatives through the three phases of the research was the need for on-the-ground support in mobilising residents on the pilot sites. Community representatives in 2010 and again in 2011 questioned whether it is reasonable to expect residents who may be committed to engaging in efforts to make their community safer to have the capacity to mobilise their neighbours to do likewise and participate in the CSI.

> *'Has there been a great response to the events and the activities? There's a great response from the kids. But not from the parents. I mean, yeah, the first year there was actually quite a good response from a good few of the parents. But after that, there wasn't.'*
>
> [Community representative]

Active community representatives were frustrated that they were expected to approach neighbours to organise and promote CSI events and particularly when the initial engagement in 2009 had not mobilised wide community support for the initiative. They were also of the view that CDI and Steering Committee service providers had detached themselves from implementing the CSI in the pilot site areas.

'Nobody kept the residents involved. You know, that was kind of left to us, and there's only so many times you can call on the same people before they say to you "Ah, do you know what, go away! I'm not interested".'

[Community representative]

'There should have been much more of an effort made. It shouldn't have been down to this one rep on each site to try and get all these people together ... by them [CDI, service providers] not going knocking on doors, that's been left to me and for me to organise people to do that.'

[Community representative]

5.3 Community Safety Agreement

KEY FINDINGS

- No community safety agreements were implemented in Tallaght West over the lifetime of the implementation of the CSI (2008-2011).

- Difficulties associated with the development of community safety agreements during the implementation period reduced stakeholders' confidence in the CSI.

- Stakeholders thought the safety agreement idea difficult to implement and unlikely to help in improving perceptions of safety.

- Stakeholders thought the predetermined nature of the safety agreement inhibited the fostering of local ownership over the CSI in targeted communities.

A central feature in the implementation in Phase 1 of the implementation of the CSI in Tallaght West was the objective of building momentum among stakeholders to implement a community safety agreement. It was described by CDI as constituting an evolving process, one that would develop from the communities themselves and take shape as the CSI moved forward in the target communities. The aim of the CSI community safety agreement was to inspire residents to take responsibility for safety in their local area by engaging in a process of agreeing acceptable and non-acceptable behaviour. It was envisioned as a mechanism 'to empower the community to take power and responsibility in their area' (CDI, 2007, p. 1).

The development of community safety agreements has been a difficult process for the CSI, with no agreement developed on either of the two pilot sites during the lifetime of the initiative (2008-2011). In addition, the value of the safety agreement idea has been questioned by a broad cross-section of stakeholders, with concerns regarding its purpose, targeting, feasibility, implementation, enforceability and personal security.[23] In particular, service providers interviewed in Phase 2 of the research were largely uncertain about the safety agreement's use. This was mainly because of its non-legal nature and thus its limitations as a method of enforcing accountability and responsibility for safety problems among residents. Most were of the opinion that a link between the safety agreement and current policing and crime prevention strategies would be unlikely. Such difficulties associated with the development of community safety agreements during the implementation period reduced stakeholders' confidence in the CSI and their willingness to engage in implementing the initiative.

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[23] Research conducted in Phase 1 of evaluation was unable to locate an underpinning method or evidence base in community development practice literature to indicate the safety agreement's potential as a tool to mobilise community residents in responding to community safety problems.

In 2009, for example, the safety agreement's preconceived origin was identified by several service providers as precluding stakeholder input into designing safety interventions to be implemented in target communities. Many of those consulted in Phases 1 and 2 of the research thought it did not utilise the considerable safety knowledge of CSI stakeholders. Using *'top-down'* ideas, according to one service provider, you lose that element of *'working through the issues and needs'* that may strengthen trust and build alliances between partners. This process of agreeing and devising implementation methods is considered important in determining the appropriateness and relevance of safety agreements for their target audience and, indeed, for other possible CSI interventions.

Phase 1 research concluded that greater collaboration among stakeholders in designing a safety agreement and deciding its parameters was necessary for its introduction in Tallaght West. According to a Community Garda interviewed in 2009, for the safety agreement to be successful as a way of promoting local engagement in the CSI, it must evolve organically to become a feature of the neighbourhood structure:

> *'If it's done that way, from the ground up, there's a better chance of success because it gives people maybe their own stamp to put on their own area … They might respect their own area a bit more if they have more of an input into it.'*

[Local service provider not directly involved in the CSI]

The first evaluation report recommended that to implement safety agreements in Tallaght West, their development should be a process that creates confidence and ownership over the idea among targeted communities. This was emphasized as especially important among those individuals expected to introduce it to their community and/or organisation.

Stakeholder reflections in 2011

Service provider members of the Steering Committee pointed out that having an as-yet untested engagement method at the heart of the CSI restricted the inclusion of other techniques, methods and supports perhaps useful in addressing local safety issues. In 2011, a service provider commented:

> *'I think an awful lot of time was spent on it and really, I mean, I've never had any sense that it really went anywhere or achieved anything at all. I think it might have served as a distraction from doing other things.'*

[CSI service provider]

Several service providers explained that the safety agreement idea demonstrated a lack of understanding of the target areas and, in particular, how to effectively engage with people living in communities affected by significant social disadvantage and safety problems. Some considered it counterproductive to come into a community with a strategy that assumed that the behaviour of its residents, and its young people, was unacceptable. It *'sought to point out the negatives in an area rather than seeking to model the positives in the community and encourage those'*, as one service provider not directly involved in the CSI remarked. Another commented:

> *'How do you agree with one another what are your collective standards, and in a scenario where numbers of people still may think they're transient, they are renters, they haven't invested in the ownership of a property, you know. That is a different relationship.'*

[Local service provider not directly involved in the CSI]

'I think it's interesting sometimes about how we approach things in disadvantaged neighbourhoods that we don't do for the rest of us. We expect a level of participation, a level of engagement, a level of, you know, whatever, that I don't expect entirely of my neighbourhood.'

[Local service provider not directly involved in the CSI]

Staff in several front-line services were of the opinion that the safety agreement distracted people from the CSI and discouraged involvement, particularly because target communities believed they were not offered the opportunity to contribute to its development. According to one community worker, the safety agreement and the *'predetermined'* manner in which it was conceived and then presented to those living in the pilot sites alienated residents from the CSI because they *'felt they were being told what to do, they weren't being asked what to do'*. According to other service providers, the failure of the safety agreement idea to take root in targeted areas related to the absence of the essential ground work of community development – the work of building relationships and trust with communities.

Without a demonstrable example of the safety agreement in action on the pilot sites, the agreement quickly came to represent an obstacle to implementing the CSI for those residents involved. Most residents contributing to the research found the safety agreement idea unreasonable and impracticable, and unlikely to be accepted in their areas. They also were frustrated that the safety agreement remained a core part of the CSI despite the negative reception they had experienced when initially introducing the idea to other residents in 2009.

'It's very disheartening to realise that no matter how many times you say "Look, this isn't going to work" that they're [CDI] still pushing it … That's one of the reasons that kind of makes me want to back away, where I'm like "Look, I want no part in that". I'm not going to be the one to go to my neighbours and say "Look, you have to sign this piece of paper"'.

[Community representative]

'I don't think it [the agreement] brought anything to it [the CSI]. I don't think it would have worked, it scared people.'

[CSI service provider]

Another view voiced mainly by service providers was that the safety agreement idea – to marshal behaviours in order to improve community safety in a defined area – was far beyond the scope for residents in the pilot sites to implement and agree, and then enforce.

'What this community needs is a show of confidence and pride from the agencies to kick things off and for them to show the community that they're not being left alone. But to expect the community to come out on its own and start taking on six gangster gangs and a load of young fellas and intimidation is fooling yourself.'

[Local service provider not a member of the Steering Committee]

'I think that we need a serious response, not only in this community, but in high-support communities. But it has to be led from the top. These communities … are under so much pressure that they won't be able to lead it from the bottom.'

[Local service provider not a member of the Steering Committee]

In 2010, a shift of focus occurred with regard to the community safety agreement idea. This involved CDI's introduction of Restorative Practice (RP) training in Tallaght West in July 2010 (*see Section 4.4 in Chapter 4*). Instead of seeking to introduce into CSI target areas in Tallaght West a written behaviour agreement to be signed by residents, the roll-out of RP training in neighbourhoods is anticipated by CDI as a way to promote responsibility for local safety in target areas through creating consensus regarding actions and behaviours. Those who take up RP training will 'learn how to get to know and build up relationships with your neighbours, learn how to sort out conflict when it comes up between you and your neighbours', according to CDI. The 'agreement' is now, according to one CDI representative, that *'we [residents, service providers, etc] will deal with issues arising restoratively'* and learn *'how to deal with difficulties with your neighbours or difficulties with your kids'*.

5.4 Service Manual of the CSI

KEY FINDING

- As the CSI Service Manual was developed concurrently alongside the implementation of the CSI, it was not available to stakeholders to act as a practical guide to stakeholders.

In a similar manner to other CDI intervention programmes, the CSI implementation was to be accompanied by a service manual. The purpose of a CSI Service Manual is, according to CDI, to 'be an aid in developing, implementing and evaluating a Community Safety Initiative' (CDI, 2012, p. 21). The intention was to produce a framework document setting out the key components of the initiative and how they should be implemented together and thereby develop a practical guide to implementing the CSI.

A draft document circulated among Steering Committee members in August 2009 and again in February 2011 includes an extensive review of literature pertaining to community development/safety and community partnerships and interagency approaches to delivering social intervention (McGrory and Monaghan, 2009 – unpublished CDI document). The document draws from international examples of the community safety approach to local crime prevention to illustrate the research context underlying the CSI implementation. Identifying national, regional and local policy and legislative background and context underpinning the CSI implementation, the document is proposed as a 'framework for action' to guide the delivery of a community safety initiative.

Phases 1 and 2 of the research found no evidence of the document being used in implementing the CSI. Moreover, research findings indicate the use of a CSI Service Manual was limited due to the fact it was developed concurrently alongside the CSI and was not available to stakeholders to act as a practical guide while the initiative was being developed.

'The manual began to be more of an evaluation in tracking what we were doing as opposed to informing what we were doing.'

[CDI]

A review by the CFRC of a draft manual in 2009 and 2011 concluded that the incorporation of the learning and guidance outlined in the document into CSI development and implementation processes may have assisted the CSI with the practical guidance required to ensure best practice was applied during implementation. In addition, the availability of a comprehensive CSI Service Manual to stakeholders may also have built confidence in the CSI strategy and given a focus to the inherent flexibility of the CSI's community-led, evolutionary methodological approach.

Stakeholder reflections in 2011

Findings from the final phase of research indicate that stakeholders charged with implementing the CSI would have welcomed information and material concerning similar type interventions and contexts. For example:

> *'I'm presuming that there was a literature review done and models either nationally or internationally were looked at. Like the community safety agreement, the pilot sites, that those processes had some kind of evidence base? I would have found it useful to understand that and then maybe we might have been able to be more effective in feeding into how this would apply to the community who you were talking about. I mean, I definitely felt it was a gap and without it left a sense of this was imagined up with no real basis and I suppose, from that I thought, well, give an indication why we're struggling.'*

[CSI service provider]

A major goal in assigning three RAPID Coordinators to the CSI Community Engagement Team in May 2011 concerns testing the relevance, applicability and effectiveness of utilising a CSI Service Manual in implementing CSI objectives in Tallaght West. Several Steering Committee members were cautious regarding the value of utilising a manualised approach to community development work. One remarked:

> *'How can you possibly lead the community when you give them instructions A to Z, this is what you do? I don't know … I always had issues with the manual. I do believe there should be a manual at the end, recording the process so as other people can replicate what we have done, if we've done anything.'*

[CSI service provider]

However, several service providers who expressed an opinion were generally in favour of providing a framework that records the future process of implementing a CSI in targeted communities once local residents were involved in its development. For example:

> *'This [testing the manual in new pilot sites] may give a new impetus [to the CSI] and may give a new meaning to the manual as well, even change the manual in some ways, and that there will be a community involvement in the changing of it.'*

[CSI service provider]

5.5 Summary

The aim of this chapter was to present a detailed and comprehensive account of the CSI and the structures and processes utilised to implement it over the period September 2008 to September 2011 in Tallaght West. In addition, stakeholders' views and experiences of the CSI have been outlined, using their own words. Key findings emerging from the research include:

- The major crime prevention and public safety agencies, local youth services and two local residents were represented on the CSI's Steering Committee.

- The lack of an agreed and comprehensive action plan and formal procedures concerning the assignment of roles and responsibilities to members of the Steering Committee limited its efforts to build local ownership and strengthen stakeholder involvement in the CSI.

- Despite some reported positive impacts regarding community interaction at CSI events in 2009 and 2010 on the Jobstown and Brookfield pilot sites, there has been a low level of community involvement in implementing the CSI in Tallaght West.

- The non-representation and under-representation of target areas and minority groups on the Steering Committee during the implementation impeded the pace of CSI development and its expansion in Tallaght West.

- Low community involvement in implementing the CSI constrained service provider involvement.

- Community representatives were of the opinion that they were unsupported in implementing the CSI in pilot sites and under pressure to involve other neighbours.

- Difficulties associated with the development of community safety agreements reduced stakeholders' confidence in the CSI.

- No community safety agreements were implemented in Tallaght West over the lifetime of the implementation of the CSI (2008-2011).

- The CSI Service Manual was developed concurrently alongside the implementation of the CSI (2008-2011) and was not available to stakeholders to act as a practical guide during the 3-year process.

Chapter 6: The Safe and Healthy Place Activity

In this chapter, an analysis of CDI's Safe and Healthy Place (SHP) activity (2009-2011) is provided, presenting the research findings on the impact of the SHP as a model of integrated service provision for children and families. The chapter begins by outlining the aims and objectives of the SHP, before describing the background to the initiative. It then presents findings on the process of implementing the SHP (2009-2011), followed by a synthesis of perceptual, observation and descriptive data gathered during the three phases of the evaluation. The chapter concludes by summarising the key research findings to emerge from each section.

6.1 A safe and healthy place

Established by CDI in 2009, 'A Safe and Healthy Place' (SHP) activity is an interagency community initiative with two main objectives. First, SHP utilises an integrated approach to completing the physical and social development of the MacUilliam Estate, Tallaght West's most recent Council housing development. Through interagency partnership and community interaction under SHP initiatives, it seeks to foster a culture of collaboration among stakeholders responding to social need in Tallaght West. Second, through implementing initiatives in MacUilliam, the SHP aims to create learning that may inform future social housing planning and development, and to improve service provision and procedures that seek to support community integration in such estates. Thus processes incorporated under the SHP may act as a catalyst and example that lead to embedding a safety and environment health focus into the wider work of developing and supporting local communities.

6.2 Background to the SHP

KEY FINDINGS

- Service providers' involvement in the SHP were motivated by their need to maximise available resources and local structures in the coordination of effective responses to the needs of the MacUilliam community.

- Community representatives' reasons for participating in the SHP were cited as citizenship, cultural integration and willingness to combat anti-social behaviour and criminal activity affecting the quality of life of local residents.

Service providers interviewed in 2010 and 2011 most often described their participation in the SHP as one motivated by their wish to maximise available resources and local structures in coordinating effective responses to social needs of the MacUilliam community. *'Developing better integrated planning'* was a major goal for many local support organisations, according to one agency representative. There is a need to build local attachment, as one service provider put it, since *'families aren't investing or engaging in the community'*. For most service providers, this meant coordinating the delivery of social support and the development of the physical infrastructure that will improve the quality of life of children and families living on the estate. The following comments are examples of service providers' rationale for partnership and of their vision for the SHP:

> *'It would be important to support the overall development of the community and to act as some resource in relation to that. So we were delighted to be part of the process and to look at opportunities for working across other agencies and with the community to address the wider issues in the community.'*
>
> [SHP service provider]

> *'It's part of our new approach to having an integrated kind of planning towards certain local populations in Tallaght or in South Dublin that we joined up to them, the SHP Committee, just to help set up that kind of integrated response.'*
>
> [SHP service provider]

The SHP Committee first met formally in February 2009 to begin coordinating actions towards creating a safer and healthier environment for children and families on the MacUilliam Estate. Community representation on the SHP Committee began in April 2010, when two residents representing the MacUilliam and Oaklee Residents' Associations started regularly attending meetings. Focus groups and interviews in September 2010 and again in June 2011 with 13 residents found their motivation to participate in community affairs was most frequently articulated in terms of citizenship and integration, as the following quotes illustrate:

'I wanted to get involved to make things better for people who live here and to learn and make a contribution.'

[Resident]

'It's a diverse community so the need, I want to know the cultures, how people behave and find the right way to integrate into society and make a difference.'

[Resident]

Combating a sustained level of anti-social behaviour and criminal activity affecting residents' life quality was also reported as a reason for participating. This activity includes alcohol and drug misuse (including drug dealing) and its after-effects, abusive children and adults, cars being damaged, theft of belongings and the occasional ransoming of stolen property back to owners, and general vandalism outside homes, in stairwells and hallways. Other issues raised were lack of community facilities, a significant level of racism said to exist in the area, as well as ongoing problems between the settled community and Travellers. Frustrated residents complained:

'It's everywhere, yeah. It's fear, it's fear and fear, and no, no sense of community.'

[Resident]

'There is no facility, no structures in this estate, no counselling, no offices, nothing to resolve all those issues … and they're saying why there's conflict, why there is chaos.'

[Resident]

6.3 Early implementation of the SHP

KEY FINDINGS

- The SHP broadened the capacity of participating service agencies to support residents and increased information-sharing among local service providers.

- Involvement in the SHP's assessment of need in MacUilliam created positive relations and links between front-line service providers and community representatives, and improved existing knowledge and understanding of the area.

Research evidence indicates interagency collaboration under the SHP resulted in the completion of a number of initiatives on behalf of the MacUilliam residents during its development phase in 2009-2010 (*see Appendix I*). The early implementation of the SHP strategy focused on developing, and where possible synchronising, service provision across participating service organisations in areas related to the stated outcomes of the strategy. In 2009, for example, service providers attended SDCC pre-tenancy induction events in order to publicise services available locally.[24] In addition, the second CSI evaluation report noted that the publication of the *MacUilliam Needs Assessment Report* (CDI, 2010a) expanded the scope for partnership in addressing local issues and problems (*see Section 4.6 in Chapter 4 for initiatives implemented under the SHP in 2010 and 2011*). Interagency collaboration (and in some instances community collaboration) in implementing actions included in a resulting SHP Action Plan was reported as having contributed to building trust between service providers and community representatives.

The SHP Committee has included representation from service agencies, both at management and front-line service delivery level, and since April 2010, residents representing the MacUilliam and Oaklee Residents' Associations. Community representation on the SHP is traced to the involvement in 2009/2010 of SHP service agencies in compiling the *MacUilliam Needs Assessment Report* and SDCC and CDI collaboration in reorganising and supporting the estate's two residents' organisations. Findings suggest that such SHP-coordinated community engagement activity provided a context in which service agencies could build relations with local community representatives.

For example, documentary and observation research in 2009/2010 indicated that several service agencies introduced front-line services (children and youth, community development and estate management staff) to the SHP process in order to help maximise the potential of the initiative to first identify and assess the needs of new and existing MacUilliam residents and respond effectively to these findings. The participation of such front-line staff in SHP subgroups engaged in surveying residents and gathering statistical data on MacUilliam's population allowed the service providers on the SHP Committee to build relations with community representatives and to improve their understanding of the area and the problems faced by residents. The engagement also gathered residents' feedback on the findings identified in an early draft of the assessment report in 2010 and helped to secure community representation on the SHP Committee. These front-line workers eventually replaced service provider management staff as agency representatives on the committee during 2010. In 2011, a community worker reflected on their experience of the SHP:

> *'What it has done for me is it sort of opened up the doors into the estate, you know. Which was sort of just like brand new, didn't know what was really going on in there and by being part of this group, it's actually enabled me to … tap into it and to be much more aware of … what is going on in the estate.'*

[SHP service provider]

In general, front-line practitioners with responsibility for delivering services on the estate thought the SHP broadened their capacity to support residents and led to increased links and information-sharing among local service agencies.

> *'I got to meet some community people that I might not have otherwise got to meet … and I might have gotten a couple of volunteers.'*

[SHP service provider]

> *'It creates more awareness of Tallaght Youth Services in the work that we're doing. So I'm able to sit there and say "Well, this is what is happening for young people", so … it's letting people know what's going on.'*

[SHP service provider]

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[24] This work began through the support of SDCC's 'Welcoming' of new MacUilliam tenants and induction and tenancy training between February and April 2009. Service agencies involved in the SHP also took part in a 'Welcome to the neighbourhood' event organised by SDCC Social Inclusion Unit for new and existing MacUilliam residents on 24th March 2010.

However, several service providers queried the depth of the SHP's assessment of need in MacUilliam and whether it may have *'overlooked'* or missed an opportunity to highlight issues that may evolve in this relatively new and culturally diverse Council development.

> *'I would really question the depths of the needs assessment that we have. I think the needs assessment is … very light touch, high level and safe, and really we haven't kind of looked at the issues in depth beyond.'*
>
> [SHP service provider]

> *'What do we really understand about the level of criminality that's going on in the area, about the level of racism that's going on in the area, about the level of domestic violence that's going on in the area, about the community tensions?'*
>
> [SHP service provider]

6.4 Addressing need in the MacUilliam Estate

KEY FINDINGS

- The SHP was viewed by participating service agencies as giving structure and focus to service provision in MacUilliam in 2010 and 2011.
- A reduced level of service agency representation in 2011 has limited and disrupted the implementation of agreed SHP actions.
- The non-representation and under-representation of community residents on the SHP Committee has impeded the implementation of the SHP Action Plan.
- There was a low level of awareness of the SHP among 75 surveyed MacUilliam residents.

The move from consultation with MacUilliam residents to service agency/community collaboration in responding to findings contained in the *MacUilliam Needs Assessment Report* (CDI, 2010a) was a key development in the SHP process. Stakeholders interviewed in 2011 generally welcomed the process in which agencies and residents collaborated to implement initiatives contained in the SHP Action Plan. *'There's power in combining'*, as one front-line practitioner remarked. Others pointed to the structure provided by having an agreed action plan to implement, with *'very distinctive actions that could be broken down'* as one service provider remarked. In addition, having one agency, CDI, dedicated to leading the initiative was viewed as important:

> *'When you have got a series of agencies coming together, you know, everybody is busy and everybody can be looking to everybody else to take the leadership of it and CDI actually putting the resource in there to say, here's the person who is going to take the leadership in this process and is going to ensure that the process happens.'*
>
> [SHP service provider]

> *'That level of objectivity as well, if you know what I mean, that they [CDI] can kind of slightly sit apart from the issues a little bit and overall I think the residents who are involved have responded well to that, sort of the fact that CDI have that autonomy.'*
>
> [SHP service provider]

Several SDCC physical infrastructural initiatives began in MacUilliam during 2010 and 2011, including the production of a development plan for the area; the provision of Multi-Use Games Area (MUGA) and safe play areas for children and youth living on the estate; the installation and monitoring of CCTV cameras; the addition of border railings to open spaces; and the landscaping of several open areas on the estate. In addition, some service and development-related activities have also been progressed in the area. For example, a youth work and local leadership programme (involving Tallaght Youth Services, Gardaí, Barnardos, SDCC, the FAI, County Dublin VEC, residents and young people) was also initiated in 2010 and three youth clubs have operated in MacUilliam in 2010 and 2011.[25] In addition, fortnightly information clinics are hosted by Tallaght Community Policing Unit and SDCC Anti-Social Behaviour Unit in the Barnardos offices in MacUilliam.

The findings suggest that the presence of relevant service providers in the SHP and their involvement in the committee's work in highlighting local social and physical environmental needs influenced service provision and aided progress towards implementing such improvements on the estate. It *'kept a focus there, so that there are now three kinds of youth clubs in the MacUilliam Estate'*, according to one member of the SHP Committee. Another member commented on the value of links that the SHP provided:

> *'Through the SHP, it was meeting with the groups and the local tenants and that helped us to set up a strong committee and allowed us to work with them as to specifically what they would like in the area, such as the MUGA and the playground and in enhancing the parks and recreational space around there.'*

[SHP service provider]

A number of stakeholders also highlighted the value of the SHP in contributing to an improved level of accountability in the delivery of services in the area. For example, several spoke of the utility of having an agreed action plan in securing the commitment of partners to the SHP, particularly in view of the current economic climate and recent cutbacks and pressure on available resources. According to practitioners, having a structure that committed local service agencies to addressing identified needs in MacUilliam was important in ensuring actions were implemented considering the current funding environment:

> *'If managers are put under pressure from another source, they could actually take that worker out of that project and redirect them towards some other kind of work. So unless management know and are committed to a work plan and keep their staff in that work … So I think there has to be management function and there has to be a worker function.'*

[SHP service provider]

> *'It [the SHP] helped me put together a … submission to the Department [of the Environment] that carries the strength of the other public bodies and the local community.'*

[SHP service provider]

Research findings in 2011 indicate, however, that several factors have emerged limiting the capacity of the SHP to coordinate and fully implement initiatives agreed in its action plan (*see Appendix H*). Chief among these concerns has been the level and depth of current (2011) representation on the SHP Committee. This has affected the implementation of agreed actions and consequently the SHP's capacity to engage effectively and develop relations within the MacUilliam community. Documentary and observation findings indicate that the withdrawal of direct input at management level into

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[25]   In 2010, these activities have included the involvement of 56 youth (including 8 adult leaders) from the MacUilliam Estate in a well-supported 'World Cup' football competition organised by Tallaght Youth Services and County Dublin VEC, a tour by several MacUilliam youth of SDCC headquarters and the organisation of a youth club for 10-15 year-olds from the area.

SHP Committee meetings has weakened the commitment of some agencies and thus the SHP's capacity to implement initiatives. In the final phase of the research, while some service agencies replaced management staff with front-line workers, several agencies have significantly curtailed or ceased altogether their involvement in the SHP and/or the committee meetings, most notably the Gardaí, County Dublin VEC and Dodder Valley Partnership.[26]

This combination of factors has impeded SHP development, particularly as community engagement actions have either been delayed or cancelled primarily due to falling attendance rates at committee meetings (*see Figure 4*) and/or inadequate follow-through and communication regarding the initiatives and responsibilities contained in the SHP Action Plan. For example, initiatives delayed or postponed in this period included the development of a Community Integration Strategy for MacUilliam, the provision of training in committee skills for residents, and service agency information sessions for local residents. A reduction in commitment in 2011 was said by a number of interviewees to be the result of various factors including current funding and budget cutbacks affecting many service agencies. In 2011, several service providers commented that this apparent loss of focus affected stakeholders' confidence in the SHP and their commitment to implementation of the initiative:

'I think that transition to how you move to sustainability and still keep the interagency linkage, to my mind, wasn't really being tackled. I would have also felt there were a number of actions that we saw no action on and it wasn't clear why or why not or where that was going.'

[SHP service provider]

Figure 4: SHP Committee meetings attendance rates by stakeholder groups from January 2010 to September 2011

CDI	2	2	2	2	2	1	1	2	2	2	1	1	1	1
Service providers	3	15	7	4	5	7	6	3	4	4	3	5	3	5
Community Representatives					2	2	1	1	1	1	2	1	1	1
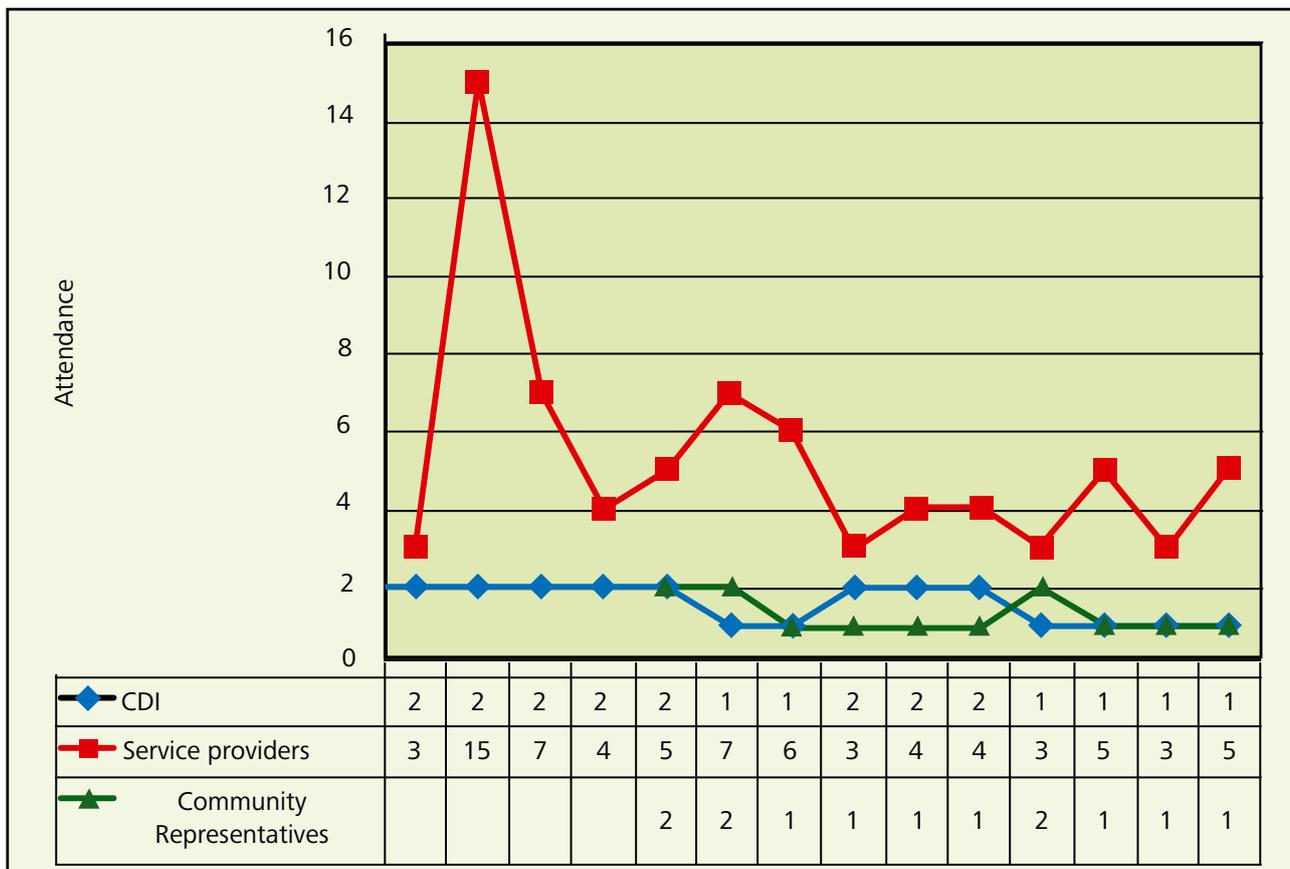
Note: Two meetings, mainly to disseminate an early draft of the *MacUilliam Needs Assessment Report* among local service providers, took place in January 2010.

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[26]   Tallaght's Community Policing Unit has held regular fortnightly 'clinics' on the MacUilliam Estate in 2011 in conjunction with SDCC's Anti-Social Behaviour Unit.

Several stakeholders also questioned the extent to which residents attending SHP Committee meetings were (or, indeed, could be) representative of the MacUilliam community. For example, the two residents attending meetings in 2011 are members of the Oaklee Residents' Association, which represents 48 of MacUilliam's 360 accommodation units. The research (in 2010 and 2011) found that the two residents directly involved had a reasonable level of awareness and understanding of the SHP and its various initiatives. However, members of the Oaklee Residents' Association interviewed in September 2010 and again in June 2011 (5 and 6 people respectively) were at best vague in their knowledge of the SHP, its overall aims and future goals, indicating a level of disconnection between both bodies. Research findings also indicate that the SHP's 'ongoing support to residents', an action included on the SHP Action Plan, has focused primarily on service providers attending and supporting MacUilliam Residents' Association (SDCC) meetings. Consequently, SHP's community representatives (both members of the Oaklee Residents' Association) and the other members of Oaklee Residents' Association expressed a sense of being isolated from the broader community and unsupported by SHP service providers in efforts to bridge this gap.[27]

> *'Those committees, they assume that when they are talking to us that information then goes to the community, but, you know. We don't have resources. I keep saying it, we don't … they don't come to us to help to bring information back, when we complain to the necessary organisations, nothing happens. We are not taken serious.'*

[Community representative]

It should be noted that the level of input from residents into the SHP Action Plan (2010) must be considered in light of difficulties in accessing local feedback and commitment in a new housing development that is in the early stages of organising community structures. For example, a public meeting to gather residents' views and opinions about the findings of the *MacUilliam Needs Assessment Report*, held on 27th January 2010, was attended by 7 people. In addition, SHP representation for MacUilliam's relatively large Traveller community was proposed at a committee meeting on 21st April 2010; however, no direct Traveller representation took place at SHP Committee meetings over the lifetime of the evaluation.

> *'I think again it's sort of been a struggle to keep the community voice at the committee. So, I think most meetings have had one resident … Getting a resident or two residents from the local authority housing [residents' association], which is obviously even much more significant, has been very difficult.'*

[CDI]

Research findings indicate that the low level of community engagement in the SHP has had implications for the SHP Committee's capacity to coordinate effective responses in MacUilliam. In 2010, the value of collaboration, according to service providers, ranged from the importance of integrating services in the area through to the need to empower the local community to define and help in solving MacUilliam's problems. In 2011, several service providers attending SHP meetings emphasized that the current depth of community representation ran contrary to the objective of building relationships with the local communities. Meetings became, according to some front-line staff, preoccupied with the individual issues of a relatively small group of residents; this, they explained, made community engagement activities more difficult to coordinate and implement, and risked detaching the SHP from its target goals and community. Several service providers commented that their attendance at residents' association meetings was better suited to hearing local issues as opposed to SHP Committee meetings:

> *'I understand the desire to include the residents. They are listened to at a different level in a different forum, so I'm not sure that it's necessary that they go to that meeting. Because it's a coordinating meeting, it's not hearing about issues. We hear about those, CDI hears about those at the residents' meeting.'*

[SHP service provider]

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27   The research found that both residents' associations are at the initial stages of development. For example, 5 residents attended the 2011 AGM of the Oaklee Residents' Association and, according to a member, meetings of the MacUilliam Residents' Association usually attract 3-4 residents.

'It's just not that relevant to me. I think that it is a positive thing, you know, and the residents seem to be getting a lot out of it. But I mean, in the last meeting, you were there, we spent the most part talking about a door that was broken or something like that.'

[SHP service provider]

One service provider also highlighted that having only community representatives from the smaller Oaklee Housing Residents' Association attending SHP Committee meetings had consequences for progressing actions (*see Figure 4*):

'Those [community representatives] just coming from Oakley wasn't really fair. I mean, that's a small portion of an entire development and obviously there were really serious issues going on there with their management – it took over. I don't know that that was really helpful.'

[SHP service provider]

Moreover, evidence from surveys conducted on the MacUilliam Estate in June 2011 suggests little awareness and recognition among residents of local improvements on the estate. A majority of those surveyed (65%, n=49) were not aware of any new support services established in the area over the past year. Survey data also suggest low levels of adult involvement in community life in the area; for example, a significant majority of respondents (83%, n=61) were not involved in any community or sports groups or activities in the locality.

6.5 Partnership and engagement in the SHP

KEY FINDINGS

- Service providers emphasize that the focus the SHP has brought to interagency partnership has been helpful in expanding their capacity to respond to local needs.

- Some stakeholders were unsure that the level of commitment by some partners was sufficient to implement the SHP's broader and long-term goals.

- Community representatives welcomed that the SHP partnership had produced improvements to the physical environment on the estate.

- In June 2011, just over half (54% n=40) of 75 survey respondents said they felt safe/very safe, in comparison to 43% (n=32) who felt unsafe/very unsafe living in the area.[28]

Research findings from 2010 and 2011 indicate that the roles of SHP Committee members evolved and changed as the SHP progressed. As stated above, the SHP began as an overtly management-focused interagency structure, seeking to coordinate service and infrastructural development on the MacUilliam Estate. An integral part of this effort to improve service provision and build community structures was the interaction of service agency staff from various levels (within organisations), many with different priorities and degrees of responsibility.

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[28] Percentages are used, unless otherwise stated, due to the generally low number of missing data.

In 2010, the research found most service providers interviewed emphasized how their capacity to respond to the needs identified in MacUilliam expanded, primarily due to the interagency focus brought to certain issues by the SHP. Partnership-working coordinated by the SHP Committee on the MacUilliam Estate in 2009-2010 initiated relationships between representatives of local residents and service agencies, and illustrated the potential of local community/service agency partnership. The SHP set in motion community development processes that have provided opportunities and venues for service agencies and local people to build relationships and respond to local issues and problems.[29]

The formation of good positive partnership relations and trust between the various stakeholders in the SHP process has, however, not been without its challenges. Issues of power, roles and responsibilities arose in terms of collaborative involvement by various organisations. In 2010, there was disagreement among SHP Committee members regarding the appropriateness of management level *versus* front-line staff participation in the committee, and the implications of this in terms of decision-making authority, making timely decisions and progressing agreed actions. In the final phase of the research, several interviewees spoke of difficulties in achieving meaningful partnership across such a large statutory organisation. In particular, some perceived a level of unwillingness on behalf of SDCC to engage in effectively creating channels which would allow the strategic objectives of the SHP to influence Council policies and practices. Several committee members also pointed out that SDCC representation had not the required flexibility and/or seniority to implement these broader SHP aims satisfactorily.

CDI staff acknowledged the many benefits of collaborating with SDCC in implementing SHP actions, which have to date coordinated significant social and physical developments on the MacUilliam Estate. However, CDI staff were of the view that SHP core objectives of informing and defining *'the core principles of planning and engaging communities and capacity building'*, as one put it, had not been progressed over the lifetime of the initiative. In addition, CDI purported that the broader aims of influencing urban planning and ensuring service delivery are child- and family-proofed had faltered because the cross-departmental support they believed was required within the Council had not happened.

SDCC considered the SHP as important in contributing to the *'whole process'* of encouraging communities to engage with Council services and facilities, and by doing so inform current and future provision. According to one SDCC staff member, creating awareness among communities of what Council services and facilities are available is central to SDCC plans to develop communities across Tallaght West and South County Dublin. Collaboration with local service providers and community representatives in initiatives such as the SHP is integral to this work. SDCC representatives considered the SHP process in MacUilliam a good example of this process:

> *'The SHP, and our involvement in MacUilliam, now we have a very strong group down there and we will continue to work with them. I think they are now strong enough to work themselves and work with us about keeping the place clean and tidy. Coming up with ideas about initiatives themselves that will help to happen. We will continue to work with them on that as we do with other estate groups and I think we can achieve a lot in terms of safety and security.'*

[SHP service provider]

> *'For me personally, it's about building – for us as an agency building up relationships in the area and … seeing first-hand the power of that combined effort and that you can actually exert some level of change if people get together and do something about it.'*

[SHP service provider]

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[29] SHP initiatives in 2010 and 2011 include the support of residents to develop local community structures, engagement with young people through local youth services, fortnightly safety clinics facilitated by SDCC and Community Gardaí, and intercultural competency and Restorative Practice training in 2010, which have included service providers working with MacUilliam communities and some local residents.

As in 2010, SDCC interviewees in 2011 pointed out that their work cannot always be funnelled through SHP plans because many of their duties are part of wider statutory service provision being undertaken in the Tallaght West area. They emphasized that, as Council staff, they collaborate as appropriate with many service providers and community representatives in the Jobstown and Brookfield areas on actions to achieve positive outcomes for local communities. *'The outcome we want is greater participation, and another method of engagement with people out there'*, as one put it. Whether this work is coordinated through their department, in partnership with other SDCC departments, the SHP or other sources relates to the specific issue or goal in question.

> *'We are always open to new ideas in trying to achieve, we are conscious that with a lot of the engagement and participation that we do get involvement there is a cohort of people that we don't engage with and it's how best we do that.'*

[SHP service provider]

Some interviewees explained that the expectations placed on service agency staff to input into the SHP were at times unrealistic and that theirs was a liaison role between service providers, communities, the Council and its various departments. They also stressed the importance that the limits of this participation need to be understood by all. Two service providers commented on their roles:

> *'We're not just based in MacUilliam. We've a lot of other work to do as well. So their work with the community, the people in the community who are engaged in the residents' group, I think, has helped the capacity of the residents' group. So that's been probably helpful. On the negative side, it can sometimes sort of be a little bit confusing because we have bosses that we have to answer to, but we're in the Safe and Healthy Place Committee with people expecting answers from us.'*

[SHP service provider]

> *'I would see our role is one of advocacy … within the Council, that you can sort of bring people's concerns and issues or whatever to the attention of … people within different departments … Like, for example, recently we had a deputation around the lack of a pedestrian crossing. So I was involved with that, working with the residents' group and another local group. So it's advocacy for groups when they maybe don't have the capacity to do it themselves.'*

[SHP service provider]

The three residents most closely involved in the SHP Committee and/or the residents' associations in general were positive about their involvement with CDI and interaction with other service providers. One member of the MacUilliam Residents' Association commented:

> *'I've made direct contacts in South Dublin County Council. I've made direct contacts with the Sergeant, with any anti-social or any problems, and I've had lots of issues with safety as regards abandoned syringes or anything like that and I can get in contact.'*

[Community representative]

However, most residents contributing to the research were circumspect as to what has been achieved for the wider community, apart from the physical improvements to the area as outlined above. In June 2011, just over half (54%, n=40) of 75 survey respondents living in MacUilliam said they felt safe/very safe living in the area, in comparison to 43% (n=32) who felt unsafe/very unsafe. A broad range of problems concerning crime and anti-social behaviour were reported as personal experiences by significant minorities of these residents over the past year (*see Table 7*). Nonetheless, several of the MacUilliam residents interviewed in 2011 stated that improvements had been made on the estate and a certain level of progress had provided optimism for the continued development of the estate.

'There's a lot of negativity among a lot of residents. So you kind of have to address that through responding to their issues, which is being done, before community spirit can kind of start to be built. And we're only … really at the start of that process now.'

[Community representative]

Most members of the SHP Committee participating in the research perceived the SHP as helping to address needs in MacUilliam. However, several also reminded us that the level of social need was quite high on the estate. Hence, improvements in the physical and social environment, while positive, were but the first elements in a process of alleviating difficulties in this *'high support community'*, as one put it.

'So obviously, that's increased awareness of services by the nature of people's children being involved in these services. There must be a huge amount of families now in the estate who are currently linked in with a service.'

[SHP service provider]

'I think it definitely increased the speed in which the services started to develop in the estate.'

[CDI]

'It was probably a little bit premature to think that you could build community spirit while there was nothing actually … no facilities there and very little in the estate except for houses, you know.'

[SHP service provider]

Table 7: Safety problems experienced by MacUilliam survey respondents from June 2010 to June 2011

	%	n=75
Property crime	26	20
Car crime	36	27
Personal assault	26	20
Personal intimidation	42	31
Vandalism	32	24
Gang activity	26	20
Graffiti	22	16
Litter/dumping	58	44
Other – noise, racism, joyriding	8	6

As in 2010, most service providers interviewed in 2011 placed particular emphasis on the need to maintain a focused and adaptable initiative. Most explained that this flexibility should, in particular, be reflective of and *'in tune'* with how needs were changing, both locally and nationally, and how this may affect the goals and priorities of service agencies. The potential of the SHP was identified by several service providers as resting on its capacity to link service providers with each other and with the residents they seek to help in MacUilliam.

'Early cross-agency integration, deep community involvement – I think those things would really make sense to me in terms of the future and again, just recognising it's a long and slow process. But, you know, it's worth it if you can alleviate difficulties within communities and help communities be part of their own solution to their own problems as well.'

[SHP service provider]

6.6 Summary

The aim of this chapter was to provide a foundation for assessing progress towards the SHP's outcomes. It has outlined the background to the SHP, described its implementation and presented stakeholders' consideration of the value and impact of implementing the SHP on the MacUilliam Estate from February 2009 to September 2011. Key findings emerging from the research include:

- Service provider involvement in the SHP was motivated by a need to maximise available resources and local structures in the coordination of effective responses to the needs of the MacUilliam community.

- Involvement in the SHP's assessment of need in MacUilliam created positive relations and links between front-line service providers and community representatives, and improved existing knowledge and understanding of the area.

- The SHP Action Plan is viewed by service providers as giving structure and focus to service provision in MacUilliam in 2010 and 2011.

- A reduced level of service agency representation in 2011 has curtailed the full implementation of agreed SHP actions.

- The under-representation of residents on the SHP Committee has impeded the implementation of the SHP Action Plan.

- The SHP broadened the capacity of participating service agencies to support residents by increasing information-sharing among service providers.

- A number of stakeholders questioned the level of commitment by key partners in implementing some of the SHP's broader strategic and long-term goals.

- Personal experiences of crime and anti-social behaviour in the year from June 2010 to June 2011 were reported by significant minorities of MacUilliam residents surveyed in 2011.

- Community representatives welcomed the fact that SHP partnership had produced improvements to the physical environment on the MacUilliam Estate.

Chapter 7: Evaluation of CSI Outcomes

This chapter presents the research findings on the impacts of implementing the Community Safety Initiative (CSI) in Tallaght West. It reports a broad range of stakeholders' opinions and views concerning the CSI, its overall value, the significance of core structures and processes, and the outcomes of the initiative. In doing so, the evaluation synthesises the evidence gathered over three phases of development and implementation, from 2008 through to 2011, via documentary research, observation, interviews, focus groups and community-based surveys in order to arrive at an assessment of the achievement of the core CSI long-term goals, namely: improving safety and pro-social behaviour, improving community engagement, awareness and participation in local activities and services, and promoting wide collaboration in maintaining a safe environment through partnership-working and relationship-building. The chapter concludes by summarising the key evaluation conclusions to emerge from each section.

7.1 Improving safety and pro-social behaviour

The primary purpose of implementing the CSI was to improve community safety and foster pro-social behaviour in Tallaght West, utilising a partnership approach based on service and community collaboration. The research indicates that while the CSI has engaged in a variety of structural and process activities in terms of increasing local capacity in several targeted areas from 2008 to 2011, it has not had any significant or direct impact on safety and behaviour in Tallaght West in this timeframe. An analysis of research data across the three phases of research identifies a number of positive safety-related developments, including enhanced interagency cooperation and examples of community and service agency collaboration. However, the research also highlights a series of significant implementation challenges and operational problems that have limited and delayed the development and roll-out of the CSI in Tallaght West.

The first research phase in 2009 reported generally positive stakeholder perceptions of the CSI and its objectives. Collaboration on the CSI's Steering Committee and the organisation of a programme of activities and events in two CSI pilot sites in 2009, and to a lesser extent over the summer of 2010, demonstrated the capacity of local residents and service agencies to act cooperatively to implement measures aimed at promoting safety. Residents actively contributing to the CSI explained that these processes were important social contact points, helping to build and maintain support networks.

Residents living on the pilot sites were reported by community representatives, directly involved in implementing the initiative in 2009, to have improved perceptions of safety because they were interacting positively at CSI events. They also cited the availability of support from CDI's Community Engagement Coordinators and accompanying access to service providers concerning local safety-related issues as an important element contributing to the improved sense of security they felt personally. Similarly, the Safe and Healthy Place (SHP) interagency collaboration in developing community structures and coordinating physical improvements on the MacUilliam Estate in 2009/2010 and CSI engagement with young people through local youth services in 2010 (e.g. the CSI Youth Working Group) illustrated the potential of local community and service agency partnership under the CSI.

However, the research indicates that low community involvement in 2010 and 2011 reduced momentum and the capacity of the initiative to build on the initial progress recorded. As the CSI remained limited to a small number of residents, service agencies decreased their involvement in implementing the initiative. Consequently, the CSI did not achieve the necessary local capacity and legitimacy needed to reach the wider communities in targeted areas or in the Tallaght West area in general. Whereas the SHP's contribution to the development of the MacUilliam Estate benefited from the commitment of local service agencies in addressing social and infrastructural deficits in the area, it has also faced significant barriers to fully achieving its objectives. These obstacles have included a reduced level of service agency representation and commitment in 2011 and the under-representation and low input of community residents on the SHP Committee.

Stakeholder reflections in 2011

In 2011, there was consensus across a broad cross-section of interviewees that the CSI had not made sufficient and tangible improvements on the ground in targeted areas with regard to safety and pro-social behaviour. It was pointed out by a range of interviewees representing the CDI and the service and community sectors that the initial 'energy' of the initiative had been lost due to the lack of progress over the past two years.

'There was no delivery really … But also you need to see things happening, do you know what I mean. You need to see progress. Tangibles.'

[CDI]

'The CSI, again there was element there, but the past year I haven't seen any evidence of the CSI working really … Well, the energy doesn't seem to be there anymore.'

[CSI service provider]

'We [the CSI] got too bogged down in that [the community safety agreement] and local issues, rather than going and saying how are we going to do small things, tangible goals … small goals with tangible results.'

[CSI service provider]

Moreover, surveys conducted in June 2011 indicate that safety in CSI target communities remains a particular concern of residents. For example, 43% (n=50) of respondents on the Jobstown and Brookfield CSI pilot sites and 43% (n=32) on the MacUilliam Estate felt either unsafe or very unsafe living in these areas. In the year up to June 2011, a broad range of problems regarding crime and anti-social behaviour were experienced by significant percentages of respondents on the two pilot sites (*see Table 8*).

Table 8: Safety problems experienced by survey respondents on the Jobstown and Brookfield CSI pilot sites from June 2010 to June 2011

	%	n=115
Property crime	30	35
Car crime	33	38
Personal assault	10	11
Personal intimidation	36	42
Vandalism	49	56
Gang activity	45	52
Graffiti	52	60
Other – including litter, joyriding, other anti-social behaviour, noise, racism	21	24

Survey data also indicate that the CSI goal of promoting pro-social behaviour has yet to impact a significant number of surveyed residents in targeted areas. In June 2011, for example, 39% (n=45) of respondents were of the view that levels of anti-social behaviour had not changed and a further 45% (n=52) indicated levels had got worse in the two pilot areas over the past 18 months. Criminal activity on the sites had not changed for nearly half of the respondents (45%, n=52) or had got worse for over one-third (38%, n=44). Similarly, approximately half of the respondents in MacUilliam believed that there had been no change in the levels of criminal activity (54%, n=40) and anti-social behaviour (49%, n=37) on the estate. In fact, over one-third indicated that these problems had got worse (34%, n=26 and 38%, n=28 respectively).

7.2 Community engagement, awareness and participation

A key element of the CSI's approach to making Tallaght West safer was to improve community awareness and participation in local activities and services, thereby enhancing a sense of belonging and community spirit. It is clear from the research that low community engagement in implementing the CSI has limited the scope of the initiative to impact on local awareness and participation in community life. While the research provides evidence of examples of community and service agency engagement and collaboration in implementing the CSI in 2008 and 2009[30], there was an insufficient level of residents' involvement required to effectively develop and progress the initiative's goals within targeted communities in 2010 and 2011. In addition, community and service agency collaboration through the SHP Committee and the CSI Youth Working Group in 2010 has not been sustained in 2011 to a level sufficient to impact residents' awareness and participation in local activities and services in Tallaght West.

Interviewees most closely involved in implementing the CSI reflected when interviewed in 2011 that the initiative had delivered various community events associated with improving community spirit and engendering a 'sense of belonging' on the Jobstown and Brookfield pilot sites in 2009 and 2010. Other community and service agency engagement activities highlighted by stakeholders were training (mentoring, coaching and Restorative Practice) and engagement events and activities (e.g. volleyball tournaments) organised by CDI (wider than those organised for the pilot sites). These initiatives were reported as up-skilling participants, and improving relations and building confidence among some local residents and service agency staff.

Findings in 2010 suggest young people's interaction with service providers (particularly Community Gardaí on the CSI Youth Working Group and at the Tallaght West Children's Good Behaviour Awards Scheme events) impacted positively on relations between participants. Similarly, collaboration through the SHP Committee (in particular, during its assessment of need in MacUilliam in 2009-2010) created positive relations and links between front-line service providers and several local community representatives, as well as improving existing knowledge and understanding of the area. In the second evaluation report, collaboration between service providers and residents in implementing several SHP initiatives in 2010 were described as promising indications of citizenship and social responsibility.

Equally, however, the implementation of the CSI, and to a lesser extent the SHP, highlighted the challenging issues that are common in community-based partnership initiatives. Securing representation from all sections of the target community, building trust and ownership among all stakeholders, and cementing local partnership relations have not been achieved to the degree anticipated by CDI.

Stakeholder reflections in 2011

In 2011, all stakeholder groups agreed that the most challenging aspect of implementing the CSI was the initiative's difficulty over the three years in achieving a wide level of participation across the target pilot sites and in Tallaght West more generally.

> 'The children's awards, the volleyball, that kind of thing … we are still talking about very small numbers, you know. The proportion of the population in Tallaght West that we have directly engaged with is still very small.'

[CDI]

> 'I think that … what went wrong was at the start – not enough community people were involved.'

[Community representative]

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[30] Examples of CSI collaboration in 2009 and 2010 include the multi-agency/community CSI Steering Committee, CSI events on two pilot sites and two residents' working groups in these areas.

Both service providers and residents interviewed in 2011 were of the opinion that the overall number of CSI-related events and activities over the course of the initiative was too low and they happened too infrequently to have any significant impact on community life. Indeed, the infrequent or 'one-off' nature of many of these events and activities was pointed out by one community representative as being detrimental in encouraging participation in the CSI:

'We're not getting people interested, because it seems like we have three or four activities maybe during the summertime and then all of a sudden – nothing, until the following summer.'

[Community representative]

'The last Good Behaviour Awards, it didn't do great. As far as I remember, there were only maybe three kids from the area [one of the pilot sites] who actually showed up … We had a clean-up as well, yeah. Again, didn't do great. Not enough community involvement, that's what it is.'

[Community representative]

Survey data collected in June 2011 on the two CSI pilot sites indicate a minority of respondents (27%, n=32) thought that community spirit had improved in the area over the past 2-3 years, in comparison to over half (51%, n=59) who did not think it had changed. Respondents from the MacUilliam Estate were less positive, with the majority (73%, n=54) stating that there had been no change regarding community spirit, while 10% (n=8) thought it had deteriorated. Consequently, the level of activity arising from the initiative was insufficient to build momentum and sustain community participation.

Moreover, while conducive to building good relations and trust between participants, community engagement events did not translate into local support and awareness of the CSI and its goals in targeted communities. The majority of survey participants on the two pilot sites and on the MacUilliam Estate had not heard of CDI, the CSI or the SHP. While many CSI events and activities did attract children, by and large, they did not result in adults from the locality becoming involved in implementing the CSI, according to several interviewees. The lack of success in translating support at CSI community engagement events into active support by adult residents was identified as a major source of the reduction in commitment to the CSI across stakeholder groups. Without such an outcome, the actual effectiveness of these events and activities was questioned in terms of contributing to the overall purpose of the CSI.

CDI and CSI Steering Committee members attributed a lack of strategic thinking and management, which existed in relation to the core aspects of the initiative, to the limited effectiveness of achieving the CSI's intended outcomes. For example, several pointed out that the focus on planning and organising CSI events and activities often became an end in itself, rather than the ultimate purpose of such processes being to achieve the longer term objective of building community involvement in maintaining a safe local environment.

'So in terms of implementation, that seems to have been quite a struggle. I don't know whether there was never kind of a clear framework or plan for actually doing it … there wasn't a clear enough plan around it, about what was to be achieved and how it was to be achieved.'

[CDI]

'I think where we have had events targeting residents, I think what's often got lost in the work is that the events are not the end destination. They are events, you know, just part of … a stop along the way, and they're part of what gets us there.'

[CDI]

The over-reliance on a small number of residents living in targeted areas and the over-burdening of these people with significant expectations and responsibilities for implementing the CSI was highlighted across stakeholder groups. Several service providers questioned the pilot site strategy: *'Are they sustainable on their own, I wonder? It's relying on just a few people to get up and make this happen'*, as one remarked. Documentary and observation findings in 2010 and 2011 also indicate low community involvement affected the work of the CSI Steering Committee. For example, as residents' membership decreased to three people after 2009, the representativeness of the Steering Committee and its consequent actions diminished.[31] One community representative commented on what she perceived had weakened the CSI's community engagement strategy:

> *'There should have been much more of an effort made. It shouldn't have been down to this one rep on each site to try and get all these people together … It's too much for one person … it's been so much stress.'*
>
> [Community representative]

Service provider members on the various CSI committees reflected on the prescriptive nature they thought pervaded the implementation of the CSI. A number suggested that the way in which many of the components associated with the initiative were introduced (e.g. the community safety agreement, Restorative Practice and the CSI Service Manual) inhibited local ownership over the CSI from developing in targeted communities and among local service providers. Several service providers interviewed suggested utilising such an approach (with solutions imported from elsewhere) made the process of developing relationships and trust within communities and with other service agencies more difficult. For example, two service providers argued that strategies and initiatives implemented in other areas, cities and countries are rarely applicable to structures and processes in place in another, and particularly if responding to local safety issues:

> *'There's different structures over there [in the UK] with regards to local authorities and policing and that, with anti-social behaviour orders … the local authority can give out ASBOs and all this kind of stuff, and it's different over here.'*
>
> [CSI service provider]

> *'You need to have community representatives themselves during that process and that's part of the understanding … Ask what would that person as a local community person would that work for them? And, will it work for the other people in their experience that live there as well?'*
>
> [CSI service provider]

Working in such a manner – where communities were not participating in the development and planning of initiatives – was considered by a significant majority of service provider interviewees as counterproductive and incompatible with how existing local agencies and groups support and work with communities in Tallaght West. Stakeholders commented that new initiatives need local residents' involvement from the start and this requires the effective support of communities in doing so:

> *'Over the years, say, way back, like the Guards would do their thing and the Council would do their thing and have all these great plans and projects. But we kind of found that for something to work long term, it really has to come from the grassroots up.'*
>
> [CSI service provider]

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[31] These three Steering Committee members were joined during 2010 by four residents from the pilot sites in the CSI Community Forum. In addition, the Steering Committee community representatives also provided community representation on the CSI's Restorative Practice Management Committee.

'Another difficulty is their [CDI] imperative to kind of influence policy competes with the current work, you know, it always … it seems to be operating at a different level, you know; they're focused very much on that next stage and they're forgetting about the actual day-to-day realities.'

[Local service provider not directly involved in the CSI]

'I'd say the intention was to be community-led, but I think maybe understanding what that means is probably where the difficulty has been … So I think there is a huge emphasis on community leading and community deciding. But community on its own … and they need support. They need the right people working with them to kind of get things happening. So maybe that's what I mean in terms of really understanding community development at the outset.'

[CDI]

In addition, the CSI's 3-year timeframe in which to improve safety was suggested by some as being unrealistic. It was generally pointed out that the type of work involved in building community safety and enhancing community spirit in targeted areas requires time to embed. For example:

'I think maybe they [CDI] went too fast. To go for the bigger projects and maybe everything, say, support of those people at a more basic level and just trying to grow things slowly within the community and let things develop at a natural pace rather than just pushing it to suit schedules.'

[CSI service provider]

'This kind of time pressure on it [the CSI], of getting things done, and yet as we know, that's not the way to do it … You have to take account of the process, you know. It has to be based on readiness as well … and the time needed to do it right. And like, there is so much to gain, but there is so much to lose as well.'

[CDI]

7.3 Promoting wide collaboration on community safety through partnership and building relationships

Another goal of the CSI was to foster and deepen a culture of collaboration among a broad spectrum of professional and lay stakeholders working and living in Tallaght West. This was articulated as a means of mobilising wide community engagement in responding to identified community safety needs in the area. Research evidence is mixed regarding the CSI's contribution to extending local collaboration in addressing local safety in Tallaght West. Findings indicate low community involvement in implementing the CSI delayed the development and roll-out of the initiative. In contrast, collaboration on the more interagency-focused SHP increased the sharing of information and broadened the capacity of participating service agencies to support residents.

Stakeholder reflections in 2011

In 2011, CSI stakeholders acknowledged the value they believed had been achieved by bringing a diverse range of people and organisations together to tackle issues of community safety identified in the locality. From September 2008, the implementation of the CSI incorporated several structural elements comprising multiple memberships, including the statutory, voluntary and community sectors, and local residents. These structures included the CSI Steering Committee (2008-2011), the CSI Community Forum (2010), the Safe and Healthy Place Committee (2009-2011), the CSI Youth Working Group (2010) and the Restorative Practice Management Committee (2010-2011).

Most interviewees agreed that the complexity of social and safety issues which were being addressed warranted input from all relevant stakeholders. As similarly recorded in earlier research phases, service agencies in 2011 particularly emphasized the need to maximise available resources and local structures in the coordination of effective responses to the needs identified, given the ongoing economic downturn.

> *'There is a real situation of increasing need and decreasing capacity.'*

[CSI service provider]

> *'It was an opportunity to say there are real difficulties about safety and building community spirit and knowing your neighbours, and how you respond and links to the Guards and the Council for communities in Tallaght West.'*

[CSI service provider]

Pooling resources and the sharing of information and experience were identified as benefits accruing from partnership-working on the various CSI structures – CSI Steering Committee, SHP Committee, Restorative Practice Management Committee and CSI Youth Working Group. These processes were acknowledged in earlier evaluation reports as achieving instances of interagency collaboration and direct community/service provider engagement, and were considered important elements to be built upon and translated into actions that furthered CSI safety goals. In addition, research in 2011 indicates general agreement among participating organisations that collaboration under the SHP gave structure and focus to service provision in MacUilliam. A significant view among service provider members of the SHP Committee was that collaborating on the SHP had broadened their personal capacity to support children and families in the area.

At the same time, important issues highlighted in research in 2010 and again in 2011 were challenges encountered in building cooperative relationships with key players in the field of community safety in Tallaght West over the lifetime of the CSI (2008-2011). Indeed, several service providers referred to the difficulty in attributing interagency/partnership-working as an outcome of the CSI. Management and front-line service staff both identified long-standing working relationships existing prior and subsequent to the establishment of the CSI in Tallaght West in 2008. One remarked, *'While it is good to be able to sit around and kind of discuss the issues, it [collaborating] was what we would have been doing anyway'*. As another service provider stated:

> *'We have a close working relationship with Tallaght Youth Services, the County Dublin VEC and the Gardaí. In all our operations, we work very closely with the Gardaí. I mean, we have collaboration with local Gardaí and with all the stations in the county on a daily basis, either through our estate management or our allocation support unit, the social inclusion unit, our sports unit, you know. We run an awful lot of joint initiatives, like the late night soccer leagues, in conjunction with the Gardaí.'*

[CSI service provider]

The added-value of implementing the CSI in Tallaght West was a notable topic for research participants and particularly whether the initiative overlapped and duplicated other initiatives already in place.[32] For example, interviewees across the different stakeholder groups had difficulties attributing change directly to the CSI, given the numerous other organisations and statutory agencies in the area working to improve safety and encouraging community engagement and participation in local pro-social events. Several such ongoing activities, structures, projects and schemes in the Tallaght West area were discussed by interviewees in this regard, including SDCC tenancy training, the SDCC Social Inclusion Unit, RAPID events and clean-up days on local authority estates, a Local Policing Forum and Joint Policing Committee, drop-in community clinics conducted by SDCC and the Community Gardaí, the CCTV system and Tallaght Mediation Services.

In addition, a complex range of issues regarding trust and commitment among partners collaborating on various CSI structures was also apparent in the research. As in 2009 and 2010, CDI interviewees in 2011 were of the opinion that there was reluctance among some participating organisations to fully support the CSI. For example, the extent to which Tallaght West Gardaí were aware of the initiative or were involved and engaged in CSI-related activities was largely dependent on their 'rank' or 'level', according to CDI. CDI interviewees indicated that while they had an excellent working relationship with representatives of the Tallaght West Community Garda Unit, Gardaí working in other units and levels within the force had little or no knowledge of or involvement in the CSI.

During the final year of the implementation, CDI interviewees thought that relationships with key service agencies had not developed sufficiently through implementing the CSI in 2009 and 2010 to facilitate the initiative's work in Tallaght West.[33] Consequently, some CDI interviewees believed this limited the CSI's involvement and input into existing policing and safety structures in the area. It was believed that stronger links between local service providers and the CSI had not deepened because agencies represented on the Steering Committee had not been held accountable for implementing the CSI. CDI interviewees highlighted a perceived lack of trust and accountability, and insufficient progress on building supportive relationships on that committee as problematic areas encountered.

Certain methods of working were identified by stakeholders as decreasing the effectiveness of collaboration under the CSI. According to CDI, support for the CSI at senior management level within participating service agencies was important in *'opening the way for the initiative'* to link in with these organisations. Service agencies, according to CDI, *'don't see us as a support or a resource, so we need to help them see us as a support and a resource'* and that is where high ranking management could help. However, this 'top-level' approach was acknowledged by both CDI and service providers involved in the research as having alienated and damaged relations between CDI and some middle and front-line staff in several key partner organisations:

'It's not actually great at all because all I've done is earn the resentment of 40 [Council] staff.'

[CDI]

'They're [CDI] just interested in doing kind of very, very top management, I mean like, almost a national scale … local management can always be pushed aside … this was received very poorly by management at a certain level, I think, in different agencies.'

[CSI service provider]

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32 Organisations highlighted as having existing safety-related initiatives by service providers in Phase 2 of the research included Tallaght Drugs Task Force, Jobstown Assisting Drug Dependency, Brookfield Addiction Support Project, Community Addiction Response Programme, Killinarden, Parents and Kids Together, NABCo Housing Association, the Brookfield and Fettercairn Local Policing Forum and various Tallaght Youth Services' projects in Tallaght West.

33 See Chapter 5 (Section 5.1) and Chapter 6 (Section 6.5) for findings outlining operational aspects that curtailed the development of relations among stakeholders on both the CSI and SHP.

Moreover, as stated earlier in Section 5.3 (*see Chapter 5*), several service providers distinguished CDI's way of operating as 'top-down' and thus incompatible with how they support communities:

'They [CDI] rush into an area. They're in a rush, they've got targets to meet, they're being driven by different kinds of motivations for sure than the likes of the local authority staff and it's just a clash.'

[Local service provider not directly involved in the CSI]

In general, relations between service providers and the three community members of the CSI Steering Committee did not deepen sufficiently in 2010 and 2011 to enable the initiative to progress on the pilot sites. Indeed, research findings suggest a rather negative perception of the service providers existing among some residents due to a perceived disconnection by agencies in supporting the CSI pilot sites. Community representatives viewed service providers as not being as committed to the CSI process as those from the local community:

'I think it was just another meeting to them. Whereas to us, it wasn't. It was our community, our home life.'

[Community representative]

'I still think that if they agreed to get involved in this in the beginning, they should have been willing to show a lot more support and to make it easier for people to come to them when they had an issue that they could deal with.'

[Community representative]

Furthermore, one community representative was critical of a service agency because of a perceived slow response to a dispute which happened at a CSI event on the Jobstown pilot site in 2010.

However, there was recognition of the benefits of involvement in the CSI by community representatives. As one explained:

'I suppose what was positive was that I did build a better relationship with my neighbours. And a better relationship with service providers. Not the greatest, but better than it was.'

[Community representative]

Finally, as reiterated throughout this report, low community involvement in the CSI was a significant barrier to implementing the initiative and limited service agency input. These circumstances, several service providers pointed out, detached the CSI from targeted communities and associated it with the individual concerns of a very small number of community residents, rather than the process being representative of the Tallaght West targeted communities. According to key service providers involved since 2008, this deficiency was in their view the main obstacle to their organisations' utilisation of the CSI as a channel to build the relations with local communities necessary to improve safety in Tallaght West.

'We [Gardaí] can bring whatever resources to it [the CSI], but it needs to be grassroots. You need to have people on the ground, otherwise it [the CSI] … just won't work. It has to be theirs [the community's]. They have to have ownership of it.'

[CSI service provider]

'The numbers [on the pilot sites] were very small. I will always go into anything and everything if I can garner greater participation and anything that will allow greater engagement. But I haven't seen it there. Now they might change if they get Killinarden and Fettercairn on side.'

[CSI service provider]

7.4 Summary

This chapter has presented findings gathered through a variety of mixed methods from a broad range of stakeholders' opinions and views on the CSI, its overall value, the significance of core structures and processes, and the impact of the initiative. Key research findings concerning the outcomes of implementing the CSI (2008-2011) in Tallaght West include:

- The CSI has not had any significant or direct impact on community safety and pro-social behaviour in Tallaght West in this 3-year timeframe.

- Low community representation in implementing the CSI in 2010 and 2011, and a reduction in service agency support for the CSI in 2010 reduced momentum and the capacity of the initiative to impact community safety in Tallaght West.

- The lack of attributable improvements in safety and a perceived distance from established community and safety structures slowed the development of the CSI.

- Limited success in translating support at CSI community engagement events into active support by adult residents was identified as a major cause of the reduction in commitment to the CSI across stakeholder groups.

- The perceived predetermined nature of several components associated with the initiative was identified as inhibiting local ownership over the CSI from developing in targeted communities and among local service providers.

- Collaboration under the SHP was identified by a majority of participating service providers as giving structure and focus to service provision in MacUilliam and as having helped to broaden the capacity of local service providers to support local children and families.

- Pooling resources and the sharing of information and experience were identified as benefits accruing from partnership-working on CSI structures.

- A reduced level of service agency representation and commitment in 2011 and the under-representation and low input of community residents on the SHP Committee has slowed the achievement of SHP goals.

- Challenges in building cooperative relationships between some stakeholders in 2010 and 2011 were identified as limiting the implementation of the CSI.

Chapter 8: Discussion and Conclusions

This chapter discusses the research findings and presents the conclusions of the CFRC's evaluation of implementation of the Community Safety Initiative (CSI) in Tallaght West over the 3-year period 2008-2011. Its purpose is to present an evaluative account of the extent to which the initiative's overall aims have been realised in the timeframe covered. Drawing together findings of the empirical investigation and analysis of the development, implementation and impact of the CSI, the chapter highlights issues and offers understanding gained from the research. It concludes with commentary concerning key reflections and recommendations emerging from the research.

8.1 The Community Safety Initiative

The primary goal of implementing the CSI was to improve safety in Tallaght West. Through engaging communities and local support services in implementing initiatives that promoted pro-social and responsible behaviour, the CSI sought to enhance senses of safety and belonging. In adopting a collaborative strategy, the CSI aimed to build local capacity over time by expanding interagency partnership. Initiatives would create opportunities for engagement and interaction between targeted communities and the services available locally. Wide community participation creating local ownership over CSI processes, combined with meaningful partnership under its structures, were envisaged as the vital ingredients to achieving the initiative's safety goals (CDI, 2008a, pp. 4, 47; CDI, 2005). A full and comprehensive implementation of the CSI would then act as processes and practical examples that lead to embedding a safety and environment health focus into the wider socio-economic development and support of communities in Tallaght West.

8.2 What has been accomplished?

In determining the value of the initiative, over the course of a 3-year period the evaluation of the CSI has focused on the level of progress towards a set of intermediate outcomes[34] and long-term goals. The framework used was the CIPP model, which entailed an assessment of data from all three research phases focusing on key programme information areas pertaining to context, input, process and product in order to judge the CSI's impact and value over the 3-year period. The primary focus in Reports 1 and 2 was on the intermediate outcomes, while this final Report 3, covering Year 3, primarily focuses on the longer term, macro-level anticipated goals of the initiative. The intermediate outcomes are set out as follows:

- the capacity of the community to mobilise around safety is enhanced and perceptions of safety improved;
- the development of relationships and links between the community and local service providers to aid CSI implementation;
- the cultivation and promotion of trust between service providers, State institutions and communities;
- improved activities for local young people;
- improved physical fabric of the area.

The anticipated long-term goals are:

- improving safety and pro-social behaviour;
- improving community engagement, awareness and participation in local activities and services;
- promoting wide collaboration in maintaining a safe environment through partnership and relationship-building.

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34   These were sourced from relevant CDI and CSI strategic documentation and developed by the CFRC evaluation team in the form of an evaluation logic model, in conjunction with CSI staff during the spring of 2010.

In summating progress made by the CSI, there is some evidence that positive progress has been made over the course of the evaluation with regard to some of the anticipated intermediate outcomes. In particular, the CSI during the early development phase was associated with increasing the capacity of a small number of stakeholders directly involved in the initiative to mobilise around safety in the target areas of Tallaght West; improving perceptions of safety; enhancing relationships between community members and service providers; and improving the physical fabric of the SHP area. In sum, one can conclude that the implementation of the CSI has elevated a community and service agency focus concerning many of the factors that negatively affect the quality of life for many children and families in Tallaght West.

Since November 2008, active representation from the major crime prevention, public safety, children and youth services, and other local support services have collaborated on several CSI structures and processes under the broad goal of improving community safety. Programme outputs include a range of community engagement activities and events in three CSI target areas initially demonstrating (in 2009 and 2010) the potential of community and service agency collaboration to positively impact community engagement in these areas. Research findings in 2010 indicate improvement in the well-being and perceptions of safety of several residents who participated in 2009 in implementing the CSI in their areas, without these activities having produced wider population changes. Findings suggest that interagency partnership on the SHP Committee successfully influenced statutory planning and decision-making, and therefore helped to progress several important social, infrastructural and physical environmental improvements on the MacUilliam Estate during 2010 and 2011. Furthermore, there were also some early positive signs of the involvement of a small number of local children and young people in various CSI and SHP-sponsored events, activities and structures during 2009 and 2010.

In general, however, as set out in Chapter 7, the report concludes that the implementation of the CSI has not improved community safety to any significant level in Tallaght West when examined from the perspective of progress made towards the achievement of the CSI's anticipated long-term goals. Core research evidence gathered from a diversity of stakeholders working in services and living in the community of Tallaght West through a range of data collection methods (observation, documentary research, interviews, focus groups and community surveys) consistently reported on significant barriers and challenges concerning low community representation in implementing the CSI, the lack of an agreed implementation framework and an insufficient level of tangible progress over the course of the three years – all of which weakened the capacity of the initiative to achieve its long-term safety goals during the implementation period (2008-2011). Moreover, decreasing commitment by service agencies (in 2010 and 2011) and challenges in building cooperative relationships between some stakeholders limited progress towards achieving the CSI goal of encouraging wide collaboration in maintaining a safe environment in Tallaght West. Thus the capacity of the initiative to enhance local safety and development structures and systems was impeded and not realised during the evaluation period.

Towards the latter part of the evaluation period, the initiative did, however, show tentative signs of positive moves towards the goal of widening the collaborative base for dealing with local safety issues through its emerging work regarding the roll-out of Restorative Practice training and expansion of the CSI Community Engagement Team to include RAPID staff from South Dublin County Council (SDCC). For example, the establishment of a Restorative Practice (RP) Management Committee in mid-2010 and the roll-out of a programme of training in RP for local service providers, teachers and residents in Tallaght West were aimed at assisting the wording and implementation of community safety agreements on the Jobstown and Brookfield CSI pilot sites. Such developments are in line with efforts to raise the profile of the CSI and the seeking of collaborative solutions among key actors in the community (in particular, in the educational sector) on this issue. The assignment of a team of RAPID staff from SDCC to act as part-time CDI Community Engagement Coordinators in May 2011 and aid in implementing the CSI in the pilot sites is also indicative of the recognition of the need and value of working more closely with front-line staff in local government who have much experience of community-based working.

8.3 Evaluation learning

In order to assess the outcomes of the implementation of the CSI (2008-2011) for those living and working in Tallaght West, a set of overarching research questions have framed this evaluation. Over the 3-year period, this research framework guided the process of gathering data concerning how the initiative was developed and implemented, taking account of any changes (perceived or actual) in levels of safety and/or crime prevention within CSI target areas in Tallaght West. The evaluation focused on the CSI's role (if any) in terms of influencing change associated with improving safety, increasing community engagement and a 'sense of belonging' among target communities, and enhancing service agency–community

collaboration and relations, which may or may not be attributed to the initiative during this period. At the outset, it is acknowledged that the CSI undertook a particularly difficult task in terms of attempting to address the identified need for and issue of crime prevention in Tallaght West. To date, the knowledge and evidence base concerning approaches to local-level community safety in Ireland is at an early developmental stage. As a result, the level of information on good practice models and approaches in the field is limited.

In attempting to contribute to this knowledge and evidence base regarding community safety, the evaluation concludes with a discussion of core evaluation learning concerning what it considers are key factors and implementation issues impacting on the accomplishment of CSI goals, as follows:

- clarity of purpose;

- community engagement;

- investing in community capacity to address safety;

- partnerships and collaborations.

Finally, a set of recommendations is proposed, taking on board the contextual and operational challenges in which the initiative attempted to develop and implement a community safety initiative.

Clarity of purpose

The CSI's goals of promoting pro-social and responsible behaviour that would enhance senses of safety and belonging, and encourage wide community engagement, while having the appeal to elicit broad participation lacked the specificity to guide strategies and actions. Previous research links the attributes of successful collaborative relationships to a commitment to mutual goals, jointly developed structures and shared responsibility, joint authority and accountability, and shared decision-making, resources and rewards (Federal Partnership Project, 2008, p. 3).

An early finding of the research was the absence of a shared and clear vision among the partners involved in the initiative of the purpose underpinning the implementation of the CSI. The research findings indicate the overall purpose of the CSI was understood differently among professional practitioners and local residents. This disconnection of purpose weakened the strategies and methods adopted to achieve the safety and community engagement goals of the CSI since stakeholders had differing conceptions of what the initiative could actually achieve and how goals were to be attained in practice. Besides signalling the need for more dialogue with residents, such misunderstandings can result in the implementation of an initiative that is incompatible with those needs and one that most likely will not attain the required commitment and local acceptance (Richardson, 2006). The evaluation drew attention to these issues and their capacity to limit the potential of the evolving initiative to achieve its safety aims and, in particular, to develop the necessary foothold within targeted areas and with the local service community.

It was intended that the CSI Service Manual would set out the main intended outcomes of the CSI and the associated activities and inputs required in achieving these outcomes. However, the Service Manual was developed alongside the initiative and therefore could not be utilised by key stakeholders as a core reference guide in implementing the CSI. The lack of a process of agreeing a CSI plan of action among stakeholders, the assignment of and clarity around roles and responsibilities, counteracting the disconnection recorded between the pilot site community representatives and Steering Committee service providers and CDI were all important factors that undermined collective commitment to the initiative. Low community representation and falling service agency support in 2010 and the difficulties in leveraging local safety and development structures in support of CSI objectives weakened the capacity of the initiative to make tangible impacts on local safety. Indeed, the formulation of a CSI Logic Model and Action Plan in late 2010 and their presentation at a Steering Committee meeting in February 2011 owes much to learning gained from the SHP process and the progress made towards implementing agreed actions in the MacUilliam Estate.

The research findings indicate that greater coherence among stakeholders as to the overall purpose of the CSI, to help identify the achievable targets, policy, service or other outcomes for Tallaght West, was required to build on the initial progress recorded in 2008/2009. Defining and communicating a clear pathway to programme goals is of key importance in building trust and confidence among target communities and partner organisations (Kubisch, 2010, p. 121). It allows stakeholders identify and learn from the important interim 'milestones' that are vital in sustaining the development and implementation of participatory initiatives (Kubisch *et al*, 2002, pp. 70-72). The logic underpinning this approach follows the hypothesis that if people become aware that local collaboration (in this case, the CSI) can accomplish positive community change, they are more likely to become involved in that effort (Carroll *et al*, 2005, p. 6; Kubisch, 2010). For capacities to develop, consensus to emerge and relationships to grow, a common framework and attainable goals, agreed and supported by all stakeholders, are necessary to engage people and interests (Federal Partnership Project, 2008, p. 24).

Community engagement

Involving local residents in participatory initiatives is instrumental in mainstreaming community safety approaches to localised anti-social behaviour problems, crime and low social cohesion, and in strengthening the position of local partnerships as a method of supporting communities. Crawford (1997, p. 9) contends that implicit in the term 'community safety' is the idea that action to prevent crime and disorder should be local. Indeed, community participation and creating 'a sense of ownership' over support initiatives among target communities are recognised as key factors for the sustainability and effectiveness of intervention programmes at the local level (Chaskin, 2002, p. 28; Fitzgerald, 2007, p. 8; Cortis, 2008, p. 113).

The CSI's planned route to improving local safety in Tallaght West emphasized the importance of residents' engagement and of building local capacity to mobilise around community issues. Underpinning the implementation was a participatory community-led approach focused on instigating a series of community engagement initiatives to promote wide local participation in the CSI. Implemented actions and activities over the lifetime of the initiative intended to establish agreement concerning how to collectively respond to safety issues. It was envisaged that wide community engagement would create local ownership over CSI processes and initiate meaningful partnerships with local service agencies under CSI structures. The intention was that such interventions would contribute to enhanced perceptions of local safety and sense of community.

Utilising a community-led participatory methodology in order to empower local residents to collectively develop solutions to local safety issues was understandably dependent on achieving wide representation from all sections and groups in the community. Difficulties engaging residents restricted the CSI's capacity to garner local legitimacy and allow community ownership over the process to develop. Low participation rates and the non-representation of certain areas and minority groups limited the expansion of support for the CSI among communities in Tallaght West. The practicalities of implementing the initiative were consequently challenged as the assumed upward flow of solutions to local safety issues was stifled by low community involvement and backing. Moreover, a lack of support for the community safety agreement idea, perceived as 'imported' and considered 'un-implementable' in target areas, deprived the CSI of a key engagement tool expected to drive and promote awareness of its safety goals. As engagement actions did not translate into wide active and sustained support of the initiative, service agency commitment, which was dependent on wide community support, declined. Consequently, community representation and emerging CSI actions assumed a more individualist character, rather than the collective character as designed.

This research highlights the importance of adhering to the principles of community development. While the intention was to work in such a manner, in practice the research indicates some key decisions and inputs of the initiative were of a predetermined nature. Therefore, because some of the key ideas that framed the initiative were, frequently, generated externally and not locally derived, genuine local ownership and belief in the supremacy of those ideas was by and large limited. Indeed, initiatives regularly generate a great deal of expectation among disadvantaged communities (often more than is warranted), which leads to inevitable disappointment as stakeholders grapple with the reality of local barriers and the enduring influence of forces beyond local control (Joseph, 2010, p. 156). Because so few residents were involved in implementing the CSI, the underlying intention of creating bonds of solidarity through the framing of the problems and acceptable solutions (Rubin and Rubin, 2008) was weakened. Moreover, research findings in 2011 indicate a sense of disillusionment among key stakeholders at what they perceived as missed opportunities in implementing the CSI.

In sum, a perceived prescriptive approach to the implementation, a lack of real progress on the ground in pilot sites and a sense of stress and being unsupported in the implementation effort (highlighted particularly by community representatives) – all affected confidence in the process and challenged good relations built among several stakeholders.

Investing in community capacity to address safety

The implementation of the CSI (2008-2011) has not directly impacted on community safety and pro-social behaviour in Tallaght West. Such research findings are apparent despite initial indications of improvements in community capacity to address safety issues on two CSI pilot sites in 2009. Moreover, collaborative relationships were strengthened between a range of stakeholders in both statutory and community sectors on CSI structures (most notably, the SHP), as well as between some adults and young people living in the local area. While the 3-year timeframe for impacting community safety has been critiqued as unrealistic by a small number of stakeholders, the research indicates that a lack of tangible safety-related actions attributable to the CSI was a primary cause of the initiative's limited impact in targeted communities.

Research concerning area-based community initiatives highlights the need for deliberate and direct investments in programme goals, i.e. implementing initiatives that are expected to produce stated outcomes (Kubisch, 2010). A factor separating the CSI and SHP stakeholders was the capacity of the latter to appreciate progress towards mutually inclusive goals, such as enhancing interagency collaboration. While SHP stakeholders could observe progress (or not) in their lives and/or through their work (such as increasing or decreasing client referrals, enhanced service agency collaboration, the accomplishment of infrastructural improvements on the MacUilliam Estate), movement towards the CSI's less tangible community safety and engagement outcomes was less obvious. The pathway to CSI outcomes assumed implemented actions (such as community engagement events, community safety agreements, volleyball competitions) would 'spill-over' into other domains of community life to impact on local safety. An unintended consequence of this approach was that significant time and effort was invested in organising such actions and activities in the absence of a strategic approach setting out how this work could actually translate into improving safety and perceptions of safety and enhancing a sense of belonging among those living and working on the test sites. In particular, these activities and actions, while positive, did not manage to achieve their underlying purpose, which was to engage and recruit adults living in the area to become involved in the CSI. Therefore, it is clear from the research that many of the actions and processes associated with the initiative had limited impact in building the required capacity among targeted communities to achieve progress towards the CSI's long-term safety outcomes.

A point of reflective learning for the CSI was the incorporation of expertise from the local community and safety fields in the latter part of the implementation phase. This occurred through the assignment of three RAPID Coordinators to the CSI Community Engagement Team in May 2011 and the roll-out of Restorative Practice training in Tallaght West since July 2010. Such developments signify recognition of the need for increased human resources and applied practice skills to address safety in the area.

Partnerships and collaborations

Research from all three phases of the evaluation indicates that those actively participating on CSI structures generally welcomed and valued the partnership opportunities this involved. Cooperating and sharing information with other key service agencies and widening the base of collaboration on community safety to local residents and young people were identified as major strategic goals for most participating organisations. At the outset, both community and service representatives believed that the CSI's goals could facilitate such collaboration and therefore offset the significant level of distrust said to exist between service agencies and residents.

In 2009/2010, CDI, service providers and residents were collaborating in order to address specific issues regarding safety in three specific geographic sites (i.e. the two existing pilot sites and the MacUilliam Estate). Synergy gained through the sharing of resources and information were highlighted as positive aspects of partnership-working via the CSI and SHP structures. In order to build on this momentum, the second evaluation report noted that particular focus was required in strengthening collaborative working and building trust between CSI partners. It also highlighted that demonstrating tangible safety-related outcomes in target areas was an important aspect of this process. Research in 2011 indicates that the SHP interagency collaboration has contributed to infrastructural developments in MacUilliam and increased the

capacity of service agencies and individual service practitioners to support residents in this area. However, findings in 2010 and 2011 also highlight that relationships between CSI stakeholders on the Steering Committee weakened as previously high expectations and actions to specifically address safety receded in 2010 and 2011.

Effective partnership requires the participation of all important and relevant interests (Lee, 1996, p. 87). Managing these interests requires maintaining a complex web of relationships among a variety of diverse stakeholders with many, often competing interests and values (Auspos, 2010, p. 57) and in doing so providing the space to collaborate (Lee, 1996, p. 87). The current research highlights a number of key factors that undermined effective partnership-working among CSI stakeholders, including the appropriate balancing of front-line *versus* managerial level representation; trust; commitment and accountability on the CSI and SHP committees; the lack of sufficient grassroots involvement; and links to local communities. Another key concern of service providers in 2010 and again in 2011 was the importance of ensuring that economic resources are used effectively, due to the limited resources and cut-backs associated with the recent economic downturn.

Against this backdrop, the CSI's participatory methodology offered much synergistic promise, but one largely predicated on the capacity of partner organisations to take ownership and drive initiatives. This means statutory and voluntary organisations balance agency imperatives with accountability for achieving better results for communities (McDonough, 1996, p. 101; Auspos, 2010, p. 59). The challenge that faced the CSI was aligning the goals of individual agencies with the aims of the CSI. However, challenges in agreeing and then achieving shared goals multiply when spread across a variety of stakeholders who may not share a common accountability structure and value base (Okagaki, 2010, p. 64), as experienced in the implementation of the CSI.

A common issue in managing collaborative area-based initiatives is balancing the powers of the various partners (Auspos, 2010). Such challenges arose in this initiative, whereby a range of key partners were charged with existing statutory responsibilities and obligations regarding safety. In developing and implementing this initiative, CDI as the lead organisation was dependent on the performance of all partners on the various structures. The research highlights a lack of belief among stakeholders in the capacity of the CSI to deliver on its stated safety goals. In addition, the research indicates that the CSI's ability to keep partners focused on CSI goals declined as service agencies could not see how involvement in the implementation could accomplish their own goals and expectations. Whereas low community representation became central in delaying implementation, the CSI's capacity to take remedial action hinged on the effective management of ongoing and evolving relations with all stakeholders. The more structured SHP, in contrast, was equipped with more definable goals and targets, which, aligned with service agency and community members' agendas and goals, gave structure and focus to service provision on the MacUilliam Estate.

A prerequisite to achieving mutually productive partnership arrangements is strong and capable leadership that can establish the structures and processes of collaboration (Rosenbaum, 2002; Gilling, 2005). It is of vital importance that such activity results in all stakeholders having a clear sense of purpose and an agreed pathway to attain goals, built on recognition of interdependence. This invariably requires that partners, groups and agencies must feel it is in their interest to collaborate and that to fully realise their own goals they need the contribution and dedication of others (Gilling, 2005). Partnerships, thus, require general leadership and oversight to allow the effective coordination of processes that can bring stakeholders together under such circumstances. This helps to integrate partners, create ownership and reinforce the idea that programme actions must be well implemented and co-managed in order to help in achieving collective goals (Auspos, 2010).

Working from such foundations, partnerships can consolidate and expand, thereby activating structures that help initiatives (and their members) function efficiently and effectively. Such initiatives – where expectations are clear and methods are established, where clear roles and responsibilities are delineated and decision-making is formalised – set in motion a causal process that provides the capacity for partnerships to deliver services and actions on time and according to plan (Ellis and Lenczner, 2000; Rosenbaum, 2002; Weiss, 1972). Stakeholders, first through playing a supporting role and then through their experience of collaborating in implementing programme actions, assume collective leadership roles that drive them to build the initiative and its profile within their community or agency (Bruner, 2010).

8.4 Concluding remarks and recommendations

Many social support strategies aimed at building stronger, more resilient communities regularly introduce initiatives into disadvantaged areas that seek to mobilise residents and their networks to identify and strengthen civic capacity (Chaskin, 2006). Implicit in such strategies is an assumption that community-level actions will trigger significant change in difficult and entrenched problems and within available support systems (Kubisch, 2010, pp. 145-46). Therefore, responding effectively to issues of concentrated poverty, crime, drugs, educational disadvantage, and so on, demands that area-based initiatives have a deep understanding of the community and appreciate the local context. Indeed, contextual findings pertaining to the geographic area of Tallaght West indicate, in addition to historical and deeply entrenched socio-economic marginalisation, a significant number of residents living in the CSI target communities experienced a heightened fear of victimisation and of being isolated and powerless in the face of crime, anti-social behaviour and poor infrastructural services and resources. Clearly, therefore, well-intentioned CSI interventions faced considerable challenges under such circumstances.

Several of the operational difficulties experienced by the CSI are not uncommon to area-based community initiatives. Research suggests involving the 'community' in, for example, finding solutions to complex and multifaceted problems, building trust and ownership, and cementing partnership relations – all these outcomes develop over time and require great effort (Federal Partnership Project, 2008; Barnes *et al*, 2006). Community initiatives need leadership that puts in place processes that help participants agree a collective vision for the work, build consensus around defining problems and motivate those involved to participate fully in achieving those aims and responding to problems identified (Rosenbaum, 2002). Specifically, there is a need to appreciate how the challenges and problems experienced by participants occur and how the assets in place in the locality can be harnessed in response. As Feinberg *et al* (2008, p. 9) argue, alleviating complex social problems and realising community-wide change require initiatives and strategies that are in tune with and of a level to appropriately respond to local needs, dynamics and structures.

Recommendations

In order to aid such processes as discussed above, this evaluation presents the following recommendations:

- Clarity around an initiative's purpose and the roles and responsibilities of key stakeholders is necessary in order that all those involved understand the exact rationale and how it intends to achieve this in terms of its aims, goals and objectives over the short, medium and long term. Such clarity is necessary for successful implementation because it facilitates a clear plan of action from which various stakeholders collectively work. If a manual is to be utilised for this purpose, it is important that there is sufficient time in advance of implementation to develop a comprehensive best practice document, one that is internationally and nationally informed and contains relevant contextual policy and legislative information. Such a 'framework of action' may serve as a practical guide to stakeholders in clarifying purpose, outcomes and actions.

- Ensure the initiative has adequate local input and broad representation from the locality and that community members are sufficiently supported to engage. It is broadly accepted in relevant literature that addressing community safety requires direct involvement and participation of an adequate representation of members of local communities and groups who are embedded in the area. This promotes a participatory community-led approach, based on concepts of ownership, responsibility, empowerment and partnership-working. It is also necessary to adequately support local-level involvement of community members in order to maintain a sufficient number of dedicated members. Otherwise the risk is that a small number of community members directly involved will suffer stress and be over-burdened in attempting to meet the expectations placed on them as part of their role in implementing the initiative. A prerequisite of participatory and community-led approaches is that the necessary local, in-depth knowledge of and track-record of working with the communities is present. This is required both in terms of residents and services in order to build ground-level legitimacy and support, and sustain good relations within communities.

- Devise an implementation pathway for the initiative, whereby intended aims and goals are achievable and actionable. This will build confidence and trust among stakeholders since it enhances the clarity of purpose. It also enables those implementing the initiative to point to early-stage visible progress and 'quick wins' along the way, which further builds collective momentum and belief in the initiative. The absence of or a flawed implementation pathway means that there is a lack of planning in terms of how outcomes are to be realised in practice and/or a lack of follow-up of agreed actions. An implementation pathway involves a clear action plan of targets, goals, implementation milestones and outcomes, accompanied by specific inputs in the form of processes and timeframes.

- Meet stakeholders' expectations regarding safety by building and maintaining momentum among all partners through the delivery of tangible actions in targeted areas. If an adequate level of tangible action in the form of real progress is not perceived to occur among the key players involved in the initiative, the risk is that people become disengaged and disillusioned, and consequently the numbers of those who are directly involved decreases. In contrast, the demonstration of real action in the form of particular achievements and milestones on the ground in the target sites may encourage those involved to continue with collective efforts to promote community safety and a sense of belonging in the area.

- In high-stakes collaborative endeavours such as the CSI, great care and attention is required in managing the complexities of relationships so that trust and ownership are fostered and value is added through the partnership process. Effective partnership-working is challenging to achieve and necessitates particular leadership skills in managing operational factors. This includes the ability to balance competing interests in the form of hierarchical levels (managerial *versus* front-line), sectoral budgets, varying specialist expertise, interests, ethos, value bases and organisational-level *versus* initiative-level goals. Regarding relationship factors, it also requires cross-sectoral and inter-organisational agreement on core managerial issues such as accountability, roles, responsibilities and decision-making, so that all partners are satisfied with processes involved in working in a partnership manner. In the absence of such skills and agreements, collaborative working and relationships are likely to become strained and/or break down.

- Practise community development principles in planning and implementing the initiative, whereby all stakeholders contribute equally. Trust can be damaged when key decisions and inputs are decided by certain stakeholders to the exclusion or minimal involvement of others. The predetermination of core aspects of an initiative is contradictory to a community-led and participatory ethos, and therefore needs to be avoided in order to attain widespread support from all those involved.

- Develop alternative mechanisms outside the standard formal committee structures to involve stakeholders. A particular challenge is finding out what types of approach are more suited to those stakeholders in the community who may not be comfortable or familiar with formal-based structures such as committees, boards and fora. 'Thinking outside the box' is necessary in this regard. One potential solution is working more closely with those who have front-line roles and therefore more grounded expertise of what local residents and community groups particularly favour in terms of being involved in developments in their area. Flexibility in terms of altering involvement mechanisms on the basis of a trend regarding decreasing numbers is also required in order to maintain an adequate level of representation from various stakeholder groupings.

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Appendix A: CSI Early Development

In September 2008, the CDI started the process of CSI implementation. The process began with the organisation in November 2008 of a CSI Steering Committee, drawn from community representatives from the four target communities, local service providers and the CDI, to guide the implementation of the CSI. In particular, it was envisaged that the Steering Committee would direct and implement activities aimed at addressing the safety issues identified and prioritised by participants of a preceding CSI community consultation process conducted in Tallaght West from October 2006 to June 2008 (CDI, 2008a, p. 5), an overview of which is given in Table A-1.

Table A-1: Overview of the CSI consultation process

	Target audience	Aims and objectives
Stage 1 October 2006 – March 2007	Community groups and service providers	To provide information on the CDI/CSI and the community safety agreement. To identify safety issues and garner support for the CSI.
Stage 2 April 2007 – July 2007	Community groups	To network with community groups in Tallaght West. Community engagement and suggestions on how to improve the local physical environment.
Stage 3 August 2007 – November 2007	Individuals and community groups	To pilot a community safety survey. The identification of community residents willing to carry out the survey.
Stage 4 January 2008 – April 2008	Children and young people	To explore the experiences and perceptions of children and young people of safety in the community.
Stage 5 January 2008 – February 2008	Residents (both adults and young people) and service providers	Training of survey collectors. Survey information collection and analysis.
Stage 6 June 2008	Residents (both adults and young people) and service providers	To feedback survey findings through a series of public meetings. To promote local support for the CSI.

Source: CDI (2008a)

The research findings from *How Are Our Kids?* (CDI, 2004) and the subsequent *Community Safety Initiative: Consultancy Report* (2008a) ensured that safety became a key theme of the CDI strategy (CDI, 2008a, p. 4). The CDI subsequently identified three key safety outcomes for Tallaght West (CDI, 2012):

* improved safety and pro-social behaviour across the four communities;
* improved community awareness and participation in local activities and services;
* wide community engagement in maintaining a safe environment.

To address these issues, the CSI utilises a partnership approach to building community safety in Tallaght West. This collaborative process incorporates community residents, An Garda Síochána, South Dublin County Council, the Probation Service and Tallaght Youth Services in a community-led intervention programme.

Consequently, the CSI is conceptualised by CDI as representing 'a new approach to building and enhancing community' (CDI, 2008a, p. 4). According to an information document distributed in the target areas, the aim of the CSI is *'to bring residents, service providers and young people together to identify ways of taking the fear out of neighbourhoods, by agreeing on acceptable and non-acceptable behaviour'*. In addition, CSI implementation is envisioned as a method of increasing awareness of the objectives underlying the CDI's work in Tallaght West. The CSI's 3-year implementation timeframe, as set out in the CSI programme methodology, is as follows:

Year 1 – Mobilising the community to select safety targets and activities.

Year 2 – Mobilising the community to develop and implement a community safety agreement and related activities.

Year 3 – Review and revision of the CSI.

The CSI engagement strategy, as outlined in CDI documentation (*see* www.twcdi.ie), incorporates four specific components:

- the development and implementation of a community safety agreement;
- the development of a service manual to describe the processes involved in planning and developing the initiative;
- selecting and implementing safety activities for children and adults to participate in throughout the four target communities;
- the improvement of the physical fabric of the target area.

Appendix B: Target Population – Contextual Findings in 2009

Throughout the empirical process, the evaluation of the CSI has sought to describe the context and background in which the initiative has developed and is now being implemented. In particular, the lived experience of those involved in the CSI, their perceptions of the community in which they live and/or work, and the safety and risk factors that may impact on these experiences and perceptions are considered important in providing the informed basis needed to evaluate the CSI.

Perceptions of community, crime and safety

Several of the residents interviewed having lived most of their adult lives in the area recalled moving to Tallaght during a time of deep recession in Ireland in the 1980s. They recalled moving into new estates with very little services, transport links or employment, and of being disconnected from services and from the State. However, the majority spoke nostalgically of the greater *'community'* of that era, looking out for each other because *'we all had nothing then'*. The recent boom years of the Celtic Tiger, from the mid-1990s to the mid-2000s, brought jobs, wealth, better transport links and amenities to some communities across the country. According to several interviewees, those who could afford to move out of Tallaght West left the area.

'We had great neighbours. We had a great community spirit, it was great but a lot of people bought their houses and moved on and then younger people moved in.'

[Resident]

According to a number of residents the *'pulling together'* and sense of community of earlier times had subsided in the better economic climate. In line with the findings outlined in the CSI *Consultation Report* (2008a), most service providers, residents and young people agreed that a lack of *'community cohesion'* exists in many parts of Tallaght West. As a consequence, children who grew up during this time were said by a significant number of interviewees to not have experienced the same level of social control as in earlier times. As one participant explained:

'I've always got the kids to bring their friends in because I knew where they were and I knew what they were up to and things like that, and I knew who they were mixing with. Nowadays because I think it's a completely different generation to years ago and there is so much drugs and drink out there that really it is getting worse.'

[Resident]

Community residents interviewed spoke of their fear of crime, intimidation and being isolated and powerless in the face of crime and anti-social behaviour. A sense of disconnection among residents within their community and the support networks and services around them permeated much of the discussion during the interview process, as the following comments illustrate:

'You're isolated because you keep to yourself and the slightest bit of trouble starts outside your house whether it's a two year old fighting with another two year old, straight away you're out to get your kids in because they're going to get pulled into it.'

[Resident]

'They know nobody, they feel isolated, they don't know what to do if something happens, they don't know who to contact and there's no sense of community spirit.'

[CDI]

'They [bullies/out of control kids] know you're on your own, you're vulnerable, you can't fight back.'

[Resident]

'There's no actual one street that kind of sticks together and each street seem to have their problem parents and problematic families.'

[Garda]

Both adults and young people interviewed highlighted a wide range of problems in the area, ranging from alcohol and drug abuse, to stolen cars and joyriding, to gangs.

CSI Project implementation: Design, development and governance

In this section, findings regarding CSI core processes, its purpose and potential, structure and methods are presented. Findings on CSI key areas of action, community engagement and partnership are also set out.

CSI: Understanding its purpose and potential – early stakeholder opinions

According to the service providers who were interviewed for this evaluation, their involvement in the CSI was considered an opportunity to build a meaningful partnership relationship with local communities and groups, which they (especially the statutory agencies) explained they do not get to perform in their normal day-to-day duties. Service providers thought the CSI may lead to agreement concerning new ways of dealing with disorder problems (safety and environmental) on estates by involving residents directly in solutions. Several felt that community participation and service interaction may facilitate accountability on all sides and among services themselves. This may help to counter any inclination by services to leave issues that may be considered outside of their remit to other services and, similarly, of residents leaving it to other residents. One stakeholder explained:

'What it does is it identifies common goals [between all stakeholders] and we all work to share resources and working towards these goals.'

[Service provider]

Another important point raised during interviews and vital to CSI implementation relates to the commitment to genuine partnership by the main organisations involved. There was general agreement among services that engagement with residents and other agencies could inspire commitment from service provider staff. For example, positive engagement may allow staff to 'feed off' the energy generated in achieving CSI goals.

'I think the CSI has to come from the ground up and as we were saying before, if it's going from the ground up, the lads [local Community Gardaí] will be all happy. The lads will be delighted to go to somebody up the road, if people are doing the hard work.'

[Garda]

Services recognised that they cannot prevent crime and anti-social behaviour alone; rather, they need to pool experience and, most importantly, connect with local residents around safety issues. *'The interagency approach is the best way where you can pool experience'*, as one service provider acknowledged when questioned on the benefits of collaboration between services with diverse objectives and who operate at different levels in the community. According to a CDI interviewee, a key aspect of the CSI approach is that it is community-led and *'a responsibility of a wide range of stakeholders'* to be successful in achieving safety objectives. Similarly, for service providers *'getting the community engaged and involved in taking responsibility for themselves and feeling that they have a role and a voice then in how the State agencies are looking after them'*, as one commented, is vital in addressing local crime and disorder problems. Both service providers and the management of the CSI spoke about the importance of having *'champions'* of the CSI among the services and agencies, and those representing the target communities. Both also noted that a key element of CSI implementation depends on whether those involved are genuinely committed to the aims and objectives of the safety initiative, and will engage proactively on behalf of the programme within their area, agency or service.

'The big fear you'd have, a couple of people, good people, if we were to lose them along the way it could wreck it.'

[Service provider]

'The other thing that we've got going for us is the stakeholders, the service providers, you know, we've got all the key players.'

[CDI]

'Albeit with some limitations, I think what we've got going for us is a core group of key residents who I think are motivated by a vision that is very complementary to CDI's vision.'

[CDI]

Several Gardaí considered the CSI as a means to help the process of addressing crime and anti-social behaviour by representing and maintaining a *'bridging link'* with the community. In particular, it was noted, from a law enforcement perspective, the CSI could help the Gardaí access hard-to-reach sections of the community and foster good relations there (CSI/Garda Meeting, 28 November 2008). Building trustful relationships between the various stakeholders involved in the CSI, according to one Garda, could help increase the

reporting of crime and intimidation, which he said was *'the big problem for us'*. The CSI, he emphasized, could represent a *'new type of way of doing things'*, one that is *'more tuned into the actual communities themselves and more bottom-up'*. It was explained that the CSI could allow the relationship between the community and the Gardaí to improve and allow residents report crime and get more involved in actively preventing crime.

> *'What we hope it will do is that it'll give people on the ground the confidence to deal with anti-social behaviour, first of all report it … if you're living on your own and there's a gang doing something, very few are confident about reporting it to the Guards or to anybody'*

[Garda]

A number of stakeholders contended that collaboration on safety would draw attention to the negative factors affecting some areas. As one service provider explained, a significant potential effect of the CSI was the visibility it could potentially bring to the safety issue. If the families of those offending became aware of the implications of the behaviour of their son(s) or daughter(s) on the community, it would be harder to ignore it and may influence future behaviour. Another service provider believed a positive dynamic may develop within target communities because of this awareness and that may popularise the initiative's safety goals.

> *'I'd hope it [the CSI] would reduce offending and that people would become more aware if anything of the impact of offending on their community.'*

[Service provider]

> *'They won't do it in their own backyard, so I think it would be important for people on the ground to hear the impact that anti-social behaviour has on a community.'*

[Service provider]

However, the risk of a new structure – the CSI – impeding rather than facilitating greater interagency work was also highlighted by some interviewees. For example, one service provider questioned whether there was a requirement for *'yet another structure'* among the range of existing programmes and arrangements already in place to manage communities. The concern here was not to separate out safety from the wider work of services in the area:

> *'How do we complement and intertwine the CSI with the AIT,[35] with the community management, estate management, with the other structures that are in place so that it becomes part of everybody's work, not just, "Oh that's the CSI thing".'*

[Service provider]

As discussed earlier, for a majority of adult and teenage residents interviewed, crime and anti-social behaviour was said to be the leading factor negatively affecting the quality of life in Tallaght West. From a community civic action perspective, most participants were positive about their involvement in an initiative to promote community safety and found the concept of collaboration with services worthwhile and beneficial for themselves and their families. All involved were hopeful that this new initiative could break new ground in addressing these issues and effect change in a meaningful way. For example:

> *'It [the CSI] could give the people a bit of pride in themselves, maybe to improve the area, and then the community spirit for the people living in the area to maintain it, to go out and say no, you can't throw that rubbish there, go drive your car somewhere else … I think if people have a bit of pride they feel a bit more able to go out onto the street and say No.'*

[Resident]

Several participants spoke of the importance of *'making a stand'* and coming together to address an issue that affects so many lives.

> *'They [criminals/bullies] have not as much power if they see the majority of people standing together, whereas normally they're the ones with the power and everybody else is isolated and keep to themselves.'*

[Resident]

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35 An Area Implementation Team (AIT) is a structure within the RAPID (Revitalising Areas by Planning Investment and Development) Programme. The purpose of the AIT is to bring a wide range of stakeholders in a particular area together (service providers, government agencies, community and partnership organisations and community residents) to prepare a plan identifying the needs of the area (www.pobal.ie).

> *'If you have a strength in the community, you can isolate that bad element because there's safety in numbers and as I said the vast majority just want respect, what they have and want to live a normal life.'*

[Service provider]

According to several of the young people interviewed, many of the teenagers involved in anti-social behaviour are invisible to services and this was a main motivation for young people's involvement in the CSI via the Youth Forum. They felt that through their participation in the CSI, they could represent young people and have the power to input into discussion, decision-making and strategic planning on behalf of local youth in order to address safety and support community engagement in their area.

> *'I also think that we'd be like the ears, like, sometimes adults, they don't listen to the opinions of young people but as young people we'd get the choice to sit down with and tell them what it is that young people think and what our friends think. That's getting our word across in a completely different way.'*

[Teenager]

Several teenagers also noted that this identification of local disorder problems was a key element of the CSI's purpose and residents need to respect the safety conditions that the community intends to impose. For example, as one commented:

> *'If it's already established when new people are moving into the house … then … it's not a choice, this is what we do in our estate, if you're part of this estate, this is what we do. It's just a community thing.'*

[Teenager]

In addition, resident interviewees (most of whom were parents) repeatedly identified a key function of the CSI must be to focus on (re)connecting local families and especially children and young people to their community. The majority of adult and young people interviewed expressed the view that the CSI should act as a vehicle that allows them become involved in their community. They were hopeful that the CSI could (re)establish the informal links and networks that encourage residents to take responsibility for what is happening in the area. It could signal the beginning of *'community'*, bringing *'the community together so that they can all stand up as one'*, as one commented. This could enable them to access the resources available in their area. When questioned on what specifically the CSI should do to address crime and anti-social behaviour in Tallaght West, several residents commented:

> *'To ensure everybody is included and feeling involved in their community and can access services if they exist. That's their target is where they're supposed to be and that everybody equally has access to them.'*

[Resident]

> *'Young children and teens if you like, start with them, get them on board, show them how to respect their community and respect people the way we were when we were kids. Give them a sense of pride in where they live and let them join in.'*

[Resident]

> *'If there is a sense of community, then you'll have more respect for what's in your area and the people in your area.'*

[Teenager]

However, while enthusiastic about the overall purpose of the CSI, residents, for the most part, were unsure of how the CSI would achieve its objectives in practice. In particular, they questioned how the CSI might attract those who they consider need to be involved and engaged. Similarly, another commented:

> *'I just don't see how they're going to target the kids that are on the corners at the moment, who are involved in robbing cars and taking the drugs.'*

[Resident]

Summary: Tallaght West and the need for community safety

Anti-social behaviour was identified as a leading factor negatively affecting the quality of life in Tallaght West. Three issues stand out in the findings as impacting safety and security in Tallaght West: drug misuse, intimidation and anti-social behaviour. Despite a fall in overall crime rates recorded for the area during 2008, recorded instances of public disorder, complaints relating to anti-social behaviour and convictions for drug offences all increased in the year. These *'major social challenges'* were said by a senior representative of An Gardaí Síochána to warrant a further increase in multi-agency approaches and community initiatives to meet these rising demands.

Fears of anti-social behaviour and of suffering through intimidation were particular concerns of the residents interviewed. Interviewees, both active in the CSI and those in the wider community, identified low social cohesion as a general problem affecting the area. People were said to be isolated on certain estates and vulnerable to crime and anti-social behaviour because *'community life'* and the networks of support it can provide were absent in many instances. Some of the related findings associated with this include low levels of social control in some areas, a lack of positive role models for children and young people, a shortage of their *'own space'* for certain groups of young people, parenting issues, problems around reporting crime and a general disconnect between services and residents.

The CSI: Understanding the initiative and perceptions of safety (2010)

A shared and clear vision of purpose and outcomes among partners is a necessary motivating factor required in order to build capacity in any collaborative initiative. The findings indicate the purpose of the CSI among stakeholders was one of providing support structures and capacity-building processes that enable residents and service agencies to engage and work collaboratively under the CSI. Those supports are provided in order to help develop neighbourhood relations and service networks, to improve community spirit in the target areas and, ultimately, to help people living and working in Tallaght West feel that it is a safe place.

> *'We're providing people with information; we're giving people an opportunity to come together … to improve perceptions of safety. That's ultimately what it is about.'*

[CDI]

Facilitating community participation is a central feature of the initiative:

> *'Being there to support them and connecting when they're having trouble.'*

[CDI]

Service providers actively engaged in the CSI felt building better relationships between service providers and residents was a prerequisite for a safer community. They described the purpose of the CSI as one resembling the introduction of a local framework, facilitating community interaction and collaboration. It is about:

> *'... taking individual streets or a couple of streets within designated communities and looking at the improvements that community members themselves can make.'*

[CSI service provider]

Service agency representatives emphasized the CSI's *'bottom-up'* nature. This meant *'being available'*, as one commented, as solutions to safety in the target areas must *'be driven from the ground'* (CSI service provider). Other comments included:

> *'The value is its grassroots and it's up to the people on the ground to make the effort to reach out to their neighbours.'*

[CSI service provider]

> *'Well, for me, I suppose, the key thing about it is that it's to try to achieve a level of community safety, but based on using the members of the community as the key leaders in that process.'*

[CSI service provider]

Residents from the CSI Community Forum understood CSI as a means of addressing local safety problems. In particular, it was about reducing the fear and isolation that several agreed affected many families living in their neighbourhood. They indicated that personal experiences of intimidation, fear, physical and verbal assaults, threats and racism in the areas where they lived originally led them to participate in the initiative. A majority emphasized that improving community spirit and accessing local supports was the key reason for the CSI, as the following comments from the CSI Community Forum Focus Group illustrate:

> *'It's to get us back together again, working together as one.'*
>
> *'That people build a community spirit, people feel safer where they live, and they have places to go or people to go to if they have problems.'*
>
> *'And connect with each other and reduce that feeling of isolation.'*
>
> *'Even if nothing gets done, you still feel you have somebody behind you.'*

To assess changes in the capacity of the community to address safety, it is important to understand what 'community spirit' and 'supports' represent for residents involved in the CSI. Residents generally agreed that the initiative was about trying to address the powerlessness and fear they felt because of being unsafe in the areas in which they lived. For example, one resident pointed out *'I live alone and sometimes I was quite frightened in the house with the children because of the intimidation I got from outside'*. Creating or improving community spirit was described as a route to addressing such safety problems. Members of the Community Forum felt implementing the CSI in their areas would over time result in a change in local attitudes and personal and interpersonal behaviour and so improve community spirit. It was important *'to have a safe place to come home to'* and of *'feeling comfortable'* in their local area, as one member remarked.

Supports are perceived by these residents as the links with other neighbours and service providers developed through CSI processes. Findings from observation and focus group research indicate that for residents actively contributing to the CSI, these processes are important social contact points that help to build and maintain support networks. In particular, the findings indicate, they represent an underlying factor in the changes reported in their personal behaviour and in their confidence levels when addressing local safety issues. The following comments from members of the CSI Community Forum Focus Group give a sense of how being involved in the CSI has affected these residents personally, and how they see *'supports'* as helping their area:

> *'I have changed my attitude. You know, we speak to the children, not roar at them. And I find since my attitude changed, their attitude changed. And we do get on a lot better now.'*
>
> *'I find now the way I react to them, they react to me, completely different you know. "Please will you get the ball and go over to the field. OK, I'm sorry". They would pick the ball up and go to the field.'*
>
> *'I have connections [to service providers] now … they [services] seem to look down on certain areas compared to other areas. But now I think that it is starting to change because they're realising that the little people have a voice now.'*

For the majority of young people participating in the CSI Youth Forum, their involvement was explained as one dedicated to bringing the voice and opinions of youth regarding safety and other matters to the CSI.

A commonly held view of those involved in implementing the CSI was that perceptions of safety in the area are improving. The CSI Community Forum members indicated that their personal sense of safety had improved as a result of the connections they made with neighbours and service providers. A caveat around perceptual change was the simultaneous assertion by interviewees from both CDI and the Community Forum Focus Group that *'nothing has happened, nothing has changed'.*

> Resident 1: *'I feel safer.'*
>
> Resident 2: *'I feel safer.'*
>
> Resident 3: *'Yes, I feel safer; I feel that I've got to know neighbours that I never knew before.'*
>
> Resident 4: *'That if there is an incident occurs in the community, say something happens to **** tomorrow, she's made connections with people in all of the service providers.'*

> *'The people as I said I'm in touch with feel safer. Now I don't know how and I don't know why because nothing has changed. But there is that sense that once you're connected with somebody that you know feels exactly the same.'*

[CDI]

Community spirit in the pilot sites was showing signs of improvement according to CDI. Perceptions of safety were thought to be changing for the better because residents in the pilot sites were getting to know one another through CSI events and because the local community now had an opportunity to improve the area through active involvement in the CSI.

Residents' access to service providers was considered by most research participants as a key asset of the CSI process to date. Observation and documentary findings indicate that providing local people, including young people, with the opportunity to have direct contact with key service provider agencies through structures such as the CSI Steering Committee, and more recently the CSI Youth Forum and the RPMC, was positive in terms of resident empowerment. In particular, the support that the CSI Community Engagement Coordinators provided was noted in this regard:

> *'It [the CSI] has given the people on the committee a voice, a way to express themselves and to feel part of the community.'*

[CSI service provider]

> *'Well, I feel I have somebody to turn to now, that's what I feel. If anything goes down, you go straight up to get to **** [the CDI Community Engagement Coordinator].'*

[Resident]

The human resource capacities of the CSI were an important topic across stakeholder groups. In this second phase of evaluation, findings indicate community representation on the CSI Steering Committee has reduced from 5 to 3 people. Several (service providers, CDI, residents) felt this placed a significant 'burden' on CDI's Community Engagement Coordinator and the two Steering Committee community representatives living in the pilot sites. Regarding the latter, the low numbers of residents involved in the CSI to date has been a major contributing factor to this pressure. One Steering Committee member commented that:

> *'At some level my concern would be, I think there's a huge amount put on the two community reps that are the regular attendees.'*

[CSI service provider]

Appendix C: Contextualising the CSI

The primary focus of this appendix is to provide the background to the CSI implementation. Beginning with a brief outline of the effects of crime and anti-social behaviour on communities, it goes on to draw out the significant trends in demographic, social class composition and administrative information relating to Tallaght West. It focuses on data that illustrates the 'safety' context in which the CSI is being implemented and draws attention to the most important observations that aid this objective. Reference is also made to relevant Government policies and legislation, policing and local authority development strategies and practices.

Crime, anti-social behaviour and community safety

Crime is linked to almost all other recognised forms of disadvantage in society – health and schooling, transport and housing, weaker social and service organisation, and disordered physical environments – which together impact negatively on the well-being of many living in areas of social and economic disadvantage. A significant body of criminological research has established definite links between high crime rates and levels of disadvantage and social cohesion found in different local areas (Hirschfield and Bowers, 1997). Ireland's independent National Crime Council[36] (2003) emphasizes that crime and the fear of crime impact heavily on democratic processes and citizen participation. This is especially true for women, young people, children and ethno-cultural minorities living in disadvantaged communities (White, 2003; UN-Habitat, 2008).

Hence socially and economically excluded communities and groups remain poorly informed and frequently outside public debate concerning vital issues affecting their area (Carely and Bayley, 2009, p. 17). Apathy towards 'the system' coupled with a widespread suspicion of statutory agencies and service providers by those living in areas of long-term disadvantage further exacerbates local attempts to respond to area risk factors, thus compounding their marginal status. The lack of lasting inclusive, durable responses and solutions to poverty in all its multiple forms, targeting those sections in society most vulnerable to structural socio-economic unevenness, prolongs and intensifies the disproportionate spatial distribution of crime, violence and anti-social behaviour (UN-Habitat, 2008). Deteriorating economic circumstances intensify the rejection of mainstream goals and values (Nolan and Whelan, 2000, p. 7), creating the context in which crime and disorder flourish. Consequently, any viable and worthwhile solution to area-based problems of crime and anti-social activity must first recognise the myriad of social problems (such as family conflict, gangs, joyriding, drugs, arson and fire hazards, abandoned buildings and spaces, racial harassment) in neighbourhoods where residents live and work. Such local contextualisation is necessary to successfully support and manage how these areas develop and are integrated into broader society (Power, 1997).

Background of the CSI target community in Tallaght West

Located at the foot of the Dublin Mountains in the south-west corner of Co. Dublin, Tallaght is 14 kilometres from Dublin city centre and is the Republic of Ireland's third largest urban area (CSO, 2006). Tallaght is one of the three original villages along Dublin's western hinterland proposed as 'new towns' in the 1967 Myles Wright Report (the other two are Blanchardstown and Lucan-Clondakin). The development of the area was envisioned by planners as providing a self-contained, self-sufficient town that would eventually create significant employment while also helping to cater for Dublin City's growing population. Its inclusion in Dublin City Council's 'master-plan' for Greater Dublin began a period of rapid growth and urban development in Tallaght. Since the early 1970s, Dublin city's continued outward expansion has meant the area has evolved from a small country village surrounded by extensive agricultural and open land into an enormous suburban area with a population of over 90,000 (*see Figure C-1*).

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[36] The National Crime Council was established in 1999 as a non-statutory body in order to facilitate broadly based informed discussion on crime issues and to aid policy formation (NCC, 2003, p. 6).

Figure C-1: Map of Tallaght West
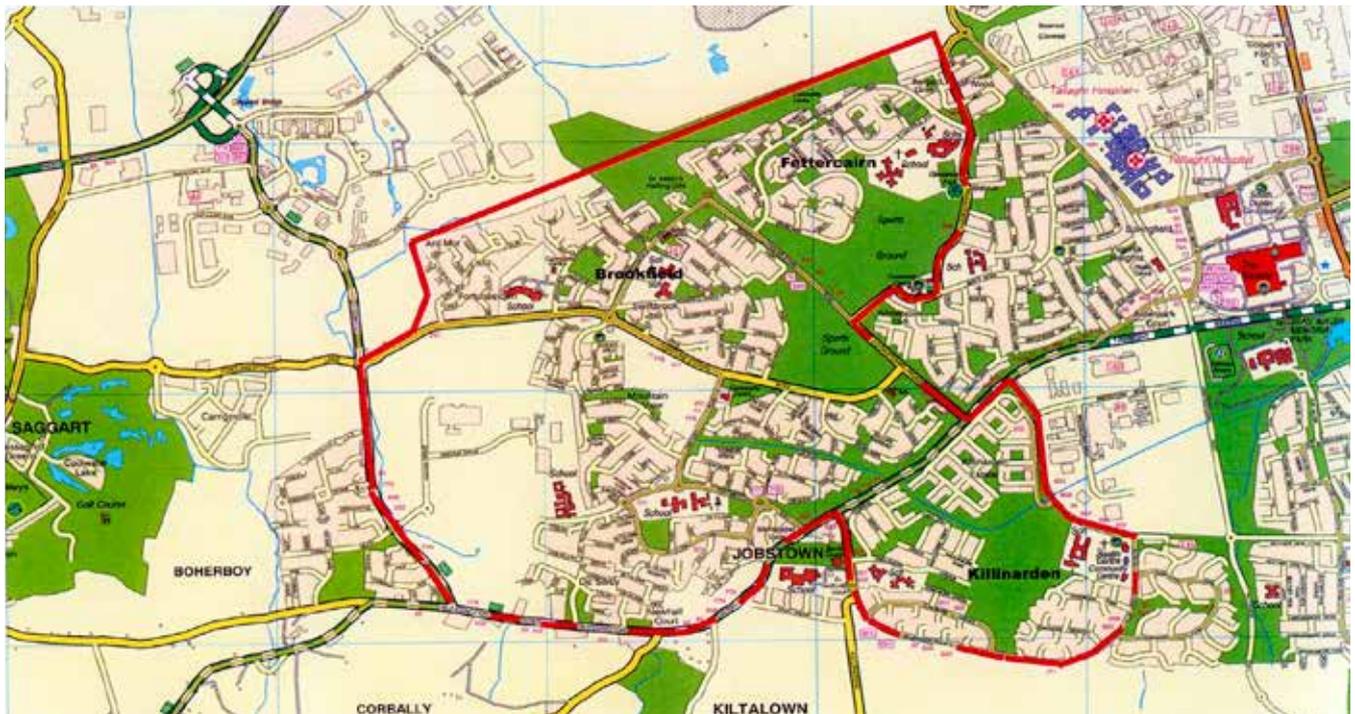
Source: Cited by South Dublin County History, available at: www.southdublinhistory.ie

The 1990s brought significant change to the area with the building of The Square Shopping Centre and the opening of a third-level institution – the Institute of Technology at Tallaght (ITT Dublin). Moreover, the reorganisation of local government in the Dublin region that led the South Dublin County Council to set up its headquarters at Tallaght in 1994 and the relocation of the Adelaide and Meath Hospital to Tallaght in 1998 were other significant milestones in a period of intensive planning, development and urban renewal. The arrival of the Luas tram line in 2004, the reopening of the County Library in 2008, Tallaght's Civic Theatre and the Big Picture, and Red Rua Arts Centre have all contributed to the creation of an urban centre with the amenities of a major city.

While Ireland's economic transformation since the mid-1990s has benefited Tallaght in many respects, a number of areas within the four communities of the Tallaght West region which comprise the current focus of the CSI – Brookfield, Fettercairn, Killinarden and Jobstown – have been overlooked by the social and economic progress experienced nationally. Indeed, Tallaght West has long been designated as a socially and economically disadvantaged area and was granted RAPID (Revitalising Areas by Planning Investment and Development) status in 2001.

Population and key socio-demographic characteristics[37]

Figures drawn from Census 2006 reveal that the overall population of Tallaght West grew in the four years since the previous Census (2002) by 13.3%, to 24,252 individuals. This represents a significant above-average population growth when considered against the 8.2% increase for the State as a whole over this period. In addition, Tallaght West's population is significantly younger than in most other areas. A total of 41.5% of the total population were 18 years of age or under in 2006 in comparison to the national average of 25.5% for this age cohort. Of these, almost one-third (31%) were under the age of 15, which was nearly 11 percentage points beyond the national figure of 20.3% for the proportion of dependent children as part of the total population (CSO, 2006). This young population has obvious implications for the level of service development and programme delivery across Tallaght West.

Another significant feature of the area is the relatively high concentration of publicly rented accommodation. In 2006, local authority rented housing accounted for approximately 43% of all households across Tallaght West compared to a national average of just 7.2%.[38] This spatial concentration of rented local authority housing in each of the four target communities is a particularly reliable guide to other deprivation indicators impacting on the lives of children and families, including educational levels and family structure (*see Table C-1*).[39]

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[37] Demographic data is sourced from the Central Statistics Office, available at: www.cso.ie

[38] A further 4% of housing in Tallaght West was rented from voluntary housing providers and another 6% of the local authority housing stock was in the process of being purchased from South Dublin County Council (SDCC) by tenants or those meeting the relevant local authority loan terms and purchasing criteria.

[39] Statistics were starker for the Killinarden and Fettercairn/Brookfield areas of West Tallaght, where the percentage of local authority rented accommodation in 2006 reached 50.5% and 53.5% respectively; over half of the total number of households was headed either by a lone mother or father.

Table C-1: Relevant socio-demographic statistics for Tallaght West in 2006

	Tallaght West 2006	State 2006
Public (rented) housing	43%*	7.2%
Unemployment	15.1%	7.2%**
Lone-parent families	39%***	18%***
Primary-level education only	19%	17.4%
Third-level education and technical or vocational qualifications	25.5%	37.5%

* Just over 4.5% of households did not state the nature of their occupancy.

** When seasonally adjusted, the figure drops to 4.5%.

*** As a percentage of all family units.

Source: CSO (2006)

Moreover, Tallaght West's educational profile is also significant in illustrating social class composition locally. The steady increase in the number of those in professional occupations and a significant decline in semi-skilled and unskilled manual workers recorded nationally during the Celtic Tiger period (1995-2007) retains a close relationship with educational achievement (Haase and Pratschke, 2008). At national level, the proportion of people employed in a professional capacity in 2006 reached 31.5% in contrast to a total of just below 13% in Tallaght West (*see Table C-2*).[40] Skilled, semi-skilled or unskilled manual workers in 2006, on the other hand, represented 36% of those heading households in Tallaght West in comparison to a national average of 37.5%. In addition, 31.5% of those employed omitted stating their employment grade. Haase and Pratschke (2008) suggest that Tallaght West's socio-demographic and employment characteristics are likely to have serious resource implications for health, housing, education and training, and crime rates experienced locally.

Table C-2: Population in Tallaght West by socio-economic group of reference person (2006)

	Employers and managers	Higher and lower grade professionals	Non-manual	Skilled, semi- and unskilled manual*	Others employed but unknown
Fettercairn/Brookfield	6%	4%	18.5%	34.5%	37%
Jobstown	10%	10%	22%	30%	27%
Killinarden	5%	3%	17.5%	43.5%	31%
State	16%	15.5%	16%	37.5%	15%

* Also includes farmers, agricultural workers and own account workers.

Source: CSO (2006)

It is noteworthy that the unemployment rate recorded for the CSI target communities during the Celtic Tiger period in 2006 averaged 15%, more than double the levels in the State as a whole at 7.2%. It is inevitable that the socio-economic ramifications of the current downturn in the Irish economy are having significant implications for Tallaght West's already marginal communities. Of particular concern is that the top three employment categories recorded for Tallaght as a whole in the 2006 Census for both women (services, retail sales and clerical/office work) and men (manufacturing followed by construction and transport) are likely to have contracted severely in the meantime. Indeed, the Organization for Economic Co-operation and Development (OCED) reports that temporary and part-time workers, migrants and low-skilled workers have borne the brunt of rising unemployment (OECD, 2009). The figures presented in Table C-3 detailing the numbers signing on the Live Register at Tallaght Social Welfare Office in August 2006 in comparison to August 2009 provide a clear indication of the severe local impact of the current economic crisis.

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[40] Refers to the lead person of households who are employers, managers or higher/lower grade professionals.

Table C-3: Unemployment Live Register at Tallaght Social Welfare Office in August 2006 compared with August 2009

	August 2006	August 2009
Under 25 years	964	2,433
25 years and over	2,818	7,195
All ages	3,782	9,628

Source: CSO

Prevalence of crime in Tallaght West

Overall crime rates for Tallaght fell in 2008 in comparison to 2007 (*see Table C-4*). There was a notable increase in the number of seizures of illegal drugs and of detections for the sale and supply of drugs. These successes alongside a 10% reduction in criminal damage incidents contributed to a significant drop in the rate of crime for Tallaght as a whole during 2008, according to the DRM Southern Division Chief Superintendent. Reporting to South Dublin County Joint Policing Committee on 15th May 2009, the Chief Superintendent conceded, however, that an increase both in recorded incidents of public disorder and in the number of complaints in relation to anti-social behaviour in 2008/2009 represented major challenges. While acknowledging the current widespread collaboration between the Gardaí and South Dublin County Council (SDCC), communities and other social services, he recommended that interagency initiatives and a multi-agency approach to problems in communities should be increased further to meet these demands.

Table C-4: Tallaght crime statistics 2008 *versus* 2007

	2007	2008	% difference	Detection rate
Headline crime*	2,666	2,543	-5%	42%
Non-headline crime	9,690	8,249	-15%	unknown

*   Headline crime figures incorporate murder, serious assaults, rape, arson, sale and supply of drugs, burglaries, thefts, robberies and fraud offences.
Source: South Dublin County Joint Policing Committee (2009)

Policing strategy and priorities

A key element of *An Garda Síochána Strategic Goals 2008* is 'to significantly reduce the incidence of public disorder and anti-social behaviour in our communities' (DRM South Division Policing Plan, 2008). The strategy includes using problem-solving initiatives, devised in partnership with communities and local agencies, to tackle crime and anti-social behaviour through targeted enforcement and crime prevention and reduction initiatives (An Garda Síochána, 2009). Through the development of its Community Policing Units, the Gardaí aim 'to create a policing environment, where collaborative "partnerships" are fostered between An Garda Síochána and community members, in order to find workable solutions that increase safety, security and protection in our society' (*ibid*, p. ii).

Accordingly, the Gardaí are obliged to devise preventative strategies that incorporate partnership responses when dealing with issues of public order (*see Table C-5 for a breakdown of current Garda initiatives across Tallaght West*). Such policing strategies represent a more holistic approach to preventing crime and public disorder in Irish society and correspond with the wider statutory effort of coordinating more efficient and effective delivery of public services and local involvement development initiatives.[41] Partnership-oriented policing is underpinned by the Garda Síochána Act 2005, which marks the opening legislative arena for Garda/public consultation on crime matters in the history of the State (Mulcahy and O'Mahony, 2005, p. 36). The partnership element contained in the 2005 Act allows the Gardaí to adapt to the social changes that have taken place in Irish society in recent times and involve ever-more diverse urban communities in the social and crime policies.

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[41]   The Programme for Government 2007-2012 (p. 69) lists among its priorities its aim to 'recognise the need to work within communities where anti-social behaviour is more prevalent by improving and supporting community-based approaches, including family-focused solutions and community policing'.

Policing in Tallaght West

A number of Garda units operating out of Tallaght Garda Station police the four communities of Tallaght West – Killinarden, Fettercairn, Brookfield and Jobstown. These include the District Detective Unit, Drugs Unit, Regular Units and Community Policing Unit. Other units operating daily patrols in the area are the Crime Task Force, Anvil and Burglary Patrols, and Public Order Patrols. In addition, areas with particular public order, drugs, burglary problems and crime hotspots are identified weekly and subsequently targeted by mobile and foot/bike unit patrols by both regular Garda units and/or by the Community Policing Unit.

Table C-5: Garda initiatives in Tallaght West

Participation in Child Development Initiative (CDI), Community Safety Initiative (CSI)	Tallaght Community Dublin Bus Forum
Garda Youth Diversion Projects	Operation Safe Route
Liaison with the Institute of Technology, Tallaght	Youth clubs, alcohol-free youth discos
Liaison with shopping centres	Schools Programme
Hospital Watch	Public Parks projects
Liaison with ethnic groups	Participation in RAPID
Community Gardaí liaising with each Traveller halting site	Liaison with community groups and committees
Liaison with Estate Management Committees	Participation in the Local Drugs Task Force
Liaison with women's refuge (Dochas)	County Traveller Education Initiative
One People Programme	Established working relationships with South Dublin County Council and the HSE
Provision of advice by a Crime Prevention Officer	Support of CCTV schemes
Neighbourhood Watch and Business Watch	

Source: South Dublin County Joint Policing Committee (2007)

During the period covered by this evaluation, Tallaght's Community Policing Unit comprises two Sergeants and 22 Gardaí. The four communities of Tallaght West each are assigned two specific Gardaí and when shift work is considered, that leaves four Community Gardaí on the ground in Tallaght West at any one time. The Unit is mandated to liaise and engage closely with local schools, community centres and organisations, businesses and the various religious congregations. The information gathered by the Unit is shared with all other units and reports are circulated detailing the concerns of local residents, community groups and voluntary organisations. The Unit is also active in a range of summertime events and regularly assists local community organisations, estate committees and youth groups in organising and managing activities. Community Gardaí also operate Garda Clinics in Fettercairn, Jobstown and Killinarden for one hour per week. These clinics are held in areas where there is a high density of social housing, in conjunction with the South Dublin County Council's Anti-Social Behaviour Unit.

In addition to regular and community policing units, three Juvenile Liaison Officers are assigned to the Tallaght West district and work with all Garda units in identifying and supporting children and families deemed at risk. Furthermore, four out of Tallaght's five Garda Youth Diversion Projects (GYDPs) operate inside the CSI target communities.[42] Coordinated by Tallaght Youth Services, the GYDPs are community-based multi-agency crime prevention initiatives that seek to divert young people away from anti-social and offending behaviour. In 2008, the GYDPs targeted approximately 50 young people between the ages of 15 and 18 years in each of the four communities.

Other measures to counteract crime intimidation and anti-social behaviour currently being introduced in Tallaght West are the community CCTV and Garda CCTV initiatives. As of February 2009, three CCTV schemes are in place in the Killinarden, Jobstown and Brookfield/Fettercairn districts, and are waiting the necessary arrangements (between SDCC, ESB, Gardaí and Partas Ltd.) to become fully operational.

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[42] West Tallaght's GYDPs include KEY Garda Youth Diversion Projects in Killinarden and Fettercairn; JAY Garda Youth Diversion Project, Jobstown; and Brookfield Garda Youth Diversion Project.

There are also a number of initiatives operating locally that focus on the aftermath of crime and drug misuse. Supporting both offenders and victims, the Restorative Justice Service is managed by a partnership of stakeholders in the criminal justice system, including the Probation and Welfare Service, Victim Support, An Garda Síochána and the wider community. Similarly, the Tallaght Probation Project offers a range of programmes for people over 18 years of age who have offended. It also provides a Young Persons Service for 12-17 year-olds from the area who have been referred to the Tallaght Probation Project by the Probation Service. By helping those affected by illegal drug misuse, Tallaght's Local Drugs Task Force is also a key local resource in efforts to create a safer community. This partnership initiative between the statutory, community and voluntary sectors seeks to facilitate a more effective response to the drug problem in the areas experiencing the highest levels of drug misuse.

Local Authority remit for crime prevention in Tallaght

The Tallaght area falls under the remit of the South Dublin County Council (SDCC) local authority structure. SDCC's review of strategy for 2006-2008 refers to the priority of strengthening and enhancing the role of community crime prevention initiatives. The Council seeks to incorporate within its overall strategy initiatives that develop integrated responses to anti-social behaviour that increase all stakeholders' awareness and understanding of the issues involved.[43] The SDCC's focus on community and safety and its inclusion within the Council's local development strategy is in line with recent legislation (Children Act 2001; An Garda Síochána Act 2005) that advocates using multifaceted approaches and including communities when addressing problems of crime and public disorder. Indeed, Section 37.1 of the Garda Síochána Act 2005 mandates each local authority to introduce policies that 'prevent crime, disorder and anti-social behaviour in its area of responsibility'.

SDCC's Housing Department classifies anti-social behaviour across three categories:

Category A – The manufacture, production, preparation, importation, exportation, sale, supply, possession for the purposes of sale or supply, or distribution of a controlled drug (within the meaning of the Misuse of Drugs Act 1977);

Category B – Any behaviour which causes or is likely to cause any significant or persistent danger, injury, damage, loss or fear to any person living, working or otherwise lawfully in or in the vicinity of a house provided by a housing authority under the Housing Act 1966 to 2002, or a housing estate in which the house is situated and without prejudice to the foregoing includes violence, threats, intimidation, coercion, harassment or serious obstruction to any person.

Category C – Those terms within the tenancy agreement that do not fall within Category A and B.

In accordance with SDCC's anti-social behaviour policy, the Housing Department's Estate Management Team and Anti-Social Unit (ASU) investigate all complaints made against Council tenants and where appropriate conduct interviews, issue verbal and written warnings, refer to other agencies, and ultimately issue Eviction Notices. The SDCC's ASU also engages with other local agencies and groups to improve the safety experience of local authority housing tenants. This interaction includes meeting and consulting with the Gardaí, the Dodder Valley Partnership (formerly Tallaght Partnership), the Probation Service, the HSE, Dublin Bus, Social Welfare and others.

In 2008, the SDCC investigated 425 reported instances of anti-social behaviour across local authority estates in South County Dublin, a 41% reduction on 2007.[44] However, the continuing problem of anti-social behaviour is evident in the relevant statistics, which reveal that the number of anti-social behaviour registered complaints (Category B) originating on local authority estates in Tallaght West received by SDCC actually increased by 30% from 2007 to 2008 (*see Table C-6*).

Table C-6: SDCC Housing Department anti-social behaviour complaint statistics for Tallaght West 2007/2008 (*see above for category descriptions*)

	2007	2008
Category A	47	20
Category B*	380	492
Category C	250	204

*   May, June, July, August and September are the most active months by far for ASB complaints made.

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[43]   Priority 32 and 34 of *South Dublin: A Place for People, 2006-2008*.

[44]   From these, the Housing Department issued 11 Notices to Quit, obtained 7 Excluding Orders, served 10 Abandonment Notices, took 2 Pre-emptive Surrenders, issued 7 Final Warnings and 50 Formal Warnings.

Through its Community Services and Housing Departments, the SDCC employs a number of strategies and initiatives aimed at combating criminal activities and anti-social behaviour and the promotion of pro-social behaviour (*see Table C-7*). Alongside the normal upkeep of Council estates and community facilities, the SDCC also regularly upgrades the physical appearance of certain areas in order to eliminate anti-social behaviour black spots. For example, during the period of this evaluation (October 2008 to end of August 2009), pro-social behaviour improvement works were carried out in a number of areas through the RAPID Programme in Tallaght West, including the installation of MUGAs (Multi-Use Games Area) and playgrounds.[45] In addition, Council staff, including members of the Housing Estate Management Team, regularly up-skill and receive training in methods that aid the successful delivery of services on estates. Coaching and 'Copping On' training delivered by CDI to SDCC staff has been described by SDCC management as an important resource for ensuring best practice for interacting with children and young people, which is particularly relevant for Estate Management staff responding to estate problems and particularly anti-social behaviour.

Table C-7: South Dublin County Council safety strategies and initiatives

The Housing Estate Management Team	Community Liaison Committees
Dublin Bus Community Fora	Local Policing Fora
Housing Clinics	Community Liaison Meetings
Case Conferences	Regular meetings with Drug Squad and Community Gardaí
Support of Gardaí in interviewing anti-social tenants	Community organised events (community bonfires, family days, youth sports events)
Anti-Social Behaviour Unit	Schools Crime Awareness Programme

SDCC also provides pre- and post-tenancy training, which is compulsory for all prospective tenants of newly built local authority housing. Through this training, SDCC's Housing Department seeks to promote active citizenship and civic responsibility among new tenants and to nurture concepts of community development and capacity-building from the outset on local authority estates and flat complexes. The training also aims to create awareness among new tenants of the resources and services available locally and to assist residents adapt to their new homes and to integrate successfully into their new communities.

Finally, SDCC is also committed to improving the general physical environment, which has a direct impact on the quality of life and the safety experience of those living and working in Tallaght West. Accordingly, the Council carries out a programme of works under the following headings: cleaning, road sweeping, graffiti removal, litter pollution and illegal dumping enforcement.

Summary

The aim of this discussion has been to illustrate the contextual setting of Tallaght West, the target area of the CSI. It has detailed key socio-demographic and socio-economic statistics that characterise the constitution of the Tallaght West area. It has also set out the key trends and service interventions targeting crime and anti-social behaviour in Tallaght West, across both the local police and local authority structures. Notwithstanding the depth and range of positive interventions outlined, many living in Tallaght West may be at risk of experiencing social disadvantage. Specifically, its disproportionate young population and lone-parent household composition, together with its relatively weak social class profile, reveal an area that may be vulnerable in terms of the risk of crime and anti-social behaviour.

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[45] A total of 6 new children's playgrounds have been installed in the area in recent years and MUGAs (Multi-Use Games Area) have been provided in the Brookfield, Jobstown and Killinarden areas.

Appendix D: Restructuring the CSI Steering Committee in September 2009

In September 2009, the CSI Steering Committee adopted a wider and more strategy-oriented function in the CSI implementation process. At a meeting of the committee, held in the Fettercairn Community Centre on 8th September 2009, a proposal made through the Chair recommending the creation of CSI subgroups to deal with the wider issues highlighted in the CSI Consultation Report (2008) was approved. This proposal reconfirmed the Steering Committee's support of the active pilot sites and led to the formation of three new subgroups (youth, anti-social behaviour and the physical environment), which it was projected could then spearhead engagement with the broader community in Tallaght West. The strategy aimed to re-commit the focus of the Steering Committee to this wider objective. Accordingly, the CSI could utilise the resources provided by members more effectively and create structures that allowed other groups and service providers the opportunity to become involved. It was also agreed that the committee would from that point on meet quarterly in this capacity.

The proposed three subgroups eventually became two as the CSI Community Forum assumed the anti-social behaviour brief of the CSI and the CSI Youth Forum concentrated on youth safety. The subgroup proposed to address issues affecting the local environment was discontinued because it was felt the CSI could liaise with various SDCC environmental initiatives in order to avoid duplicating processes already in place in Tallaght West. A Restorative Practice Management Committee was formed in June 2010 and has met twice in the period covered to introduce Restorative Practice training to Tallaght West.

Appendix E: Development of a logic model for a community safety initiative, December 2010

The Situation – The need for a CSI in Tallaght West

In troubled neighbourhoods, improving public safety must be a key part of any plan for revitalisation. Crime is important to consider not only because of the real danger it can pose to neighbourhood residents, but also because the fear it generates deters investment by businesses and property owners. Even perceptions that a neighbourhood is unsafe can drive down property values, reduce customer traffic on a commercial strip, reduce quality of life and significantly impact on residents' sense of ownership and belonging within the neighbourhood. As a result, addressing public safety and community development goals simultaneously is crucial for sustainable development (Local Initiatives Support Corporation, 2008).

OUTCOMES

The CDI has identified three key outcomes for the Community Safety Initiative as follows:

1. Improved sense of safety and pro-social behaviour across Tallaght West.

2. Improved community awareness and participation in local activities and services.

3. Wide community engagement in maintaining a safe environment.

ACTIONS towards meeting these outcomes:

In order to work towards achieving these outcomes in Tallaght West, a number of measures are required. Each of these measures are explored in greater detail in Chapter 4. The following provides a summary of these measures:

1. Identifying key leaders and relevant stakeholders

It is necessary to identify key leaders and relevant stakeholders to lead and plan the initiative. Strong leadership is critical to the success of any initiative and, in particular, a community safety initiative requires strong, active leadership to get it up and running.

Key leaders and relevant stakeholders may include:

- community development organisations;
- childhood development agencies;
- An Garda Síochána;
- Local Authority/County Council;
- Health Service Executive;
- other statutory agencies;
- community and voluntary agencies;
- formal education sector – primary and post-primary schools;
- youth work sector;
- vocational training sector;
- business community;
- parents and the community in general;
- Church and church-based organisations.

2. Assessing community readiness and carrying out community consultation

Before any community initiative can successfully develop, it is vital to assess the degree to which the community is ready to engage with and implement the initiative. The degree of community readiness determines the approach taken to planning and implementing the initiative. Once the level of readiness has been identified and addressed accordingly, the next stage is to carry out a community consultation in order to identify the concerns, issues and priorities specific to community safety within the community.

3. Community participation, engagement

In order to ensure effective community participation in community safety initiatives, it is essential to have community engagement and empowerment. These are necessary in order to encourage and support local people to participate and be involved in decisions about local services and the delivery of such services. Active community involvement will ensure informed decision-making and opportunities to tap into local expertise and knowledge, leading to the delivery of more effective services and programmes.

4. Establishing and developing a community safety steering group

It is necessary to establish a steering group to oversee the implementation of a community safety initiative. A CSI Steering Group should represent relevant stakeholders and interested parties from the community (both local residents and service providers) who have a key role to play in implementing the community safety initiative. Critical to the success of the community safety initiative is the Steering Group's ability to engage in partnership-working and an interagency approach:

- to identify assets and resources for preventive activity;
- to enable priorities to be identified;
- to help shape a strategy that will enable those priorities to be tackled.

5. Carrying out a Comprehensive Community Safety Audit

A safety audit is a systematic analysis undertaken to gain an understanding of the crime-related problems in an area. The community safety audit will identify the issues to be addressed in the community safety strategy.

6. Developing a community safety strategy/action plan

The findings from the community safety audit form the basis for the community safety strategy, which outlines the vision, aims, objectives, targets and action plan for addressing community safety. The strategy also identifies implementation, monitoring and evaluation measures, as well as any challenges and ways to address these challenges.

INPUTS

1. Human resources
In order to initiate a community safety initiative, key individuals, with particular skills and expertise, are required. These include the following:

The Catalyst: The catalyst is the individual or group that introduces the CSI into the community. The catalyst may be:

- an employee of a service organisation (e.g. community development organisation, An Garda Síochána, school, health agency, local authority);
- a concerned community leader (e.g. parent, community activist, business leader);
- a staff person for the lead agency funding the CSI.

The Champions: Champions are community leaders having credibility and influence with their peers. The Champions use their position and standing to influence other community leaders to become involved. Examples of people who may become CSI Champions are community development workers, local authority personnel, local community Gardaí, local media personnel, teachers, home-school liaison officers, HSE staff, staff of local children's initiatives and local politicians.

The Lead Agency: The lead agency 'houses' the CSI. It often serves as the funding channel for the initiative.

The Facilitator/Coordinator: A coordinator or facilitator is critical to the CSI's success. The success of the CSI depends on the efforts of a wide range of participants: for most, involvement is added to existing job duties; for the Steering Group members, duties are often outside of regular professional responsibilities altogether. Therefore, securing a paid staff member (at least part time) is highly recommended. This post is ideally positioned within the Lead Agency. Funding for this position may come from one source (such as the local authority or lead agency) or from several sources.

The Core Work Group: Typically, the CSI is spearheaded by one or more individuals who have developed a knowledge and interest in the CSI. The challenge at the outset is to involve the 'right' group of people to determine if and how the CSI will be initiated in the community. Generally, the most effective way is to involve a small group of people who have a 'feel' for the community and can draw on others to participate. This core group typically may include any of the following:

- community development organisations;
- childhood development agencies;
- An Garda Síochána;
- Local Authority/County Council;
- Health Service Executive;
- other statutory agencies;
- community and voluntary agencies;
- formal education sector – primary and post-primary schools;
- Youth Work sector;
- vocational training sector;
- business community;
- parents and the community in general;
- Church and church-based organisations.

It is likely that the Core Work Group will evolve and develop into a community safety Steering Group, bringing in new members and additional expertise as the initiative develops.

2. Expert input

Depending on the skills and expertise within any given community, it may be necessary to engage external expertise, for example, to carry out community consultations, to conduct the community safety audit, to assist with training and capacity-building, to facilitate the development of the community safety strategy or to deliver training in specific areas for the Steering Group, such as partnership-working and committee procedures.

3. Financial input

Any community safety initiative is likely to have financial implications, including personnel, premises, consultancy fees, training and day-to-day running expenses. Generally, financial responsibility will lie with the lead agency and the CSI Steering Group. It is vital to have sound, transparent and accountable financial procedures in place.

4. Capacity-building

Critical to a community's ability to engage with and participate in community safety activities is the whole area of capacity-building. Capacity-building will involve:

- equipping people with skills and competencies which they would not otherwise have;
- realising existing skills and developing potential;
- promoting people's increased self-confidence;
- promoting people's ability to take responsibility for identifying and meeting their own and other people's needs;
- encouraging people to become involved in their community and wider society in a fuller way.

5. Training

In line with good practice in community safety initiatives, training will be required at a number of levels as follows:

- training with key leaders and stakeholders within the community in order to heighten awareness of the issue of community safety;

- training of key individuals (who may or may not be catalysts or champions) to facilitate public meetings, carry out consultations and conduct local research;

- training for the Steering Group in areas such as partnership working, committee procedures, financial management, strategy development, monitoring and evaluation.

Appendix F: CSI Action Plan February 2011

Action	Tasks	Lead	Any supports needed?
Support the two pilot sites to work towards a community agreement	Organise visit to view Garda CCTV	CDI	Gardaí. Visit one complete. Awaiting date from **** to organise another.
	Children's Awards	CDI	Complete.
	Promote events/coffee morning by circulating letters from SDCC	CDI	Obtain letters from SDCC; residents to do leaflet drop. Still awaiting letter from SDCC.
	Coffee morning to plan Jobstown event and promote RP training	CDI	Event organised, but RP not promoted as of yet.
	Coffee morning to plan Brookfield event and promote RP training	CDI	Will work with NABCO on this.
	Clean-up in Jobstown – link with the RAPID litter group	CDI	RAPID. Clean-up organised for Saturday, 16th xxx.
	Clean-up in Brookfield – link up with local environmental group	CDI	Local Environmental Group. To take place on 16th April.
	Test house alarms in pilot sites	CDI	
Ensure Committee membership is representative of the community	Identify representation from Traveller community or supports	CDI	c/o Garda Rep. CDI to give presentation to SDCC front-line workers with Travellers on 12th April. If committee member is unsuccessful, may be able to get nomination from this group.
	Invite ethnic minority representation	CDI	***** has been invited and will attend.
Identify two new pilot sites	CSI committee to consider available information and contacts	CDI	CSI Committee: SDCC and Gardaí to consider. Will do this with RAPID workers.
Incorporate MacUilliam as a pilot site and develop	Discuss implications at the SHP committee	CDI	To be discussed at SHP meeting on 17th May.
	Identify pilot site for the agreement	CDI	CSI Committee: SDCC and Gardaí to consider.
Work with CSI Youth Working Group to progress actions identified in the CSI survey	Create informal spaces for young people to hang out	CDI	
	Provide permitted walls for graffiti	CDI	
	Develop sports capacity	CDI	
	Young people shape the work of CSI	CDI	
	Young people participate in the RP training	CDI	

Action	Tasks	Lead	Any supports needed?
Progress the objective of Tallaght West as a restorative community	Finalise training schedule to end of June	CDI	Calendar complete up to June. Three new dates added for specifically targeted groups (young people, community workers and volunteers, and parents).
	Agree recruitment process for training of trainers	CDI	Agreed criteria, closing date for applications 13th April. Dates to be agreed for interviews.
	Develop and support monthly COPs (NB: May date changed)	CDI	CDI to promote attendance. Look at holding themed COPs, e.g. school, parent, etc.
	Use web text to promote RP training	CDI	
	Ongoing maintenance of the RP Management Committee	CDI	
	Agree the evaluation of the outcome and impact of RP training	CDI	CDI and NUI Galway.
	Identify training needs and plan for the autumn schedule	CDI	Work in progress.
	Plan a national opportunity for learning and sharing RP approaches	CDI	Meeting held on 6th April. Good attendance from a number of places in Ireland. Currently looking at suggestions from this meeting to incorporate into plan for Autumn.
	Develop possibilities for e-learning/virtual community of practice	CDI	Possible link with Tallaght IT.
To support formal community safety structures	Participate in the Brookfield/Fettercairn Local Policing Forum	CDI	Ongoing.
	Feed into the Joint Policing Committee	CDI	
	Undertake a community safety audit	CDI	Discuss at CSI Committee, when SDCC Assignment underway.
Submission to the Assistant Commissioner	Consider what role CDI can play in developing community readiness for participation in formal structures	CDI	
	Assess community readiness	CDI	
Take up solution-focused policing training			To be discussed by CSI Steering Committee.
Develop tenancy training modules and delivery		In collaboration with SDCC	To be discussed by CSI Steering Committee.
Monthly COPs for all community engagement staff to ensure implementation of the manual.	Identify facilitator	CDI	

Action	Tasks	Lead	Any supports needed?
Complete manual		CDI	
Develop and implement the community agreement in: Jobstown Brookfield MacUilliam Fettercairn Killinarden			To be discussed by CSI Steering Committee.
Progress discussions re balancing charges vs. summons			To be discussed by CSI Steering Committee.
Support the recruitment of Reserve Gardaí			To be discussed by CSI Steering Committee.

Appendix G: Restorative Practice Training

Restorative Practice (RP) training commenced in Tallaght West in July 2010 with a CDI-sponsored 3-day piloting of the RP training course. This followed a 2-month consultation process undertaken by CDI in order to gather views and opinions regarding the training and its introduction to Tallaght West. Those consulted included service agency management and policy-makers, front-line staff, teachers, members of the Gardaí and local residents. This consultancy work included:

- a number of seminars delivered by the Hull Centre for Restorative Practices[46] held on 5-6 May 2010 and attended by service providers and community residents;[47]
- the distribution and analysis of a questionnaire concerning the RP training programme to interested service agencies and community groups;
- the circulation of an RP newsletter to service agencies and community groups.

The training is coordinated by CDI and is delivered by the International Institute of Restorative Practices (IIRP, *see* www.iirp.edu/what-is-restorative-practices.php). The timeframe for the roll-out of RP training is as follows:

- Planning and piloting: June – October 2010;
- Training roll-out: November 2010 – May 2011;
- Review, consolidation: May – October 2011.

According to CDI's *Restorative Practice Business Plan* (2011, p. 2), by the end of 2011, 800 people (including 100 young people) living and working in Tallaght West would have received RP awareness training.[48] Of these, it was proposed, 150 would complete RP facilitation skills training and a further 20 participants would complete training that allows them train others in the RP approach (see *CDI Newsletter*, November 2010, available at www.twcdi.ie).[49] It was also proposed that RP training in Tallaght West would use Irish-based trainers whenever possible in order to build awareness and capacity in RP training both in Tallaght West and in Ireland (CDI, 2011, p. 3).

Anticipated outcomes of introducing a RP framework to Tallaght West include (CDI, 2011):

- improved interagency collaboration and improved community/service agency relationships;
- increased satisfactory resolution of neighbourhood disputes in the CSI pilot sites;
- increase in the reporting of crime and anti-social behaviour in the CSI pilot sites;
- increase in the confidence of participants when dealing with conflict situations;
- increase in the use of a common language across sectors;
- improvements in pupil attendance within participating schools;
- a reduction in disciplinary issues within participating schools;
- improved staff morale within participating organisations.

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46 The International Institute of Restorative Practices (IIRP) oversee and quality-assure the Restorative Practice training programme and Irish-based trainers are used whenever possible (RPMC, 16 June 2010).

47 Attendees included service agency management and front-line staff, residents from both CSI pilot sites, from the MacUilliam Estate and from wider Tallaght West.

48 It was proposed that participants in the RP training programme are to be drawn from Tallaght West residents, local NGO staff, and local voluntary and statutory service agency staff (CDI, 2011, p. 3).

49 Those completing the 'train the trainers' RP methods were accredited by the International Institute of Restorative Practices (*see* www.iirp.edu/what-is-restorative-practices.php).

Appendix H: Safe and Healthy Place (SHP) Steering Committee Actions and Timelines 2011

Actions	Lead organisation	Key participants

Ongoing support to residents:
    Identify training needs
    Delivery of committee skills training
    Review of Resident Support Needs
	CDI/SDCC	CDI, SDCC, An Cosán, residents

Consideration of best practice in planning and community integration in conjunction with NUI Galway	CDI	
Youth Work Programme Support for Youth Work volunteers	TYS	TYS, residents
MacUilliam playground	SDCC	
MacUilliam pedestrian crossing, yellow boxes	SDCC	
MacUilliam community celebration	CDI	SHP Committee
Provision of ESL training	County Dublin VEC	County Dublin VEC, SDCC
Local directory of services	SHP subgroup	HSE, SDCC, residents
Development of Community Integration Strategy	CDI/Residents Associations	SHP Committee
Retention of Horse Project	Dodder Partnership	
Environmental Education Programme for young people	SDCC	
Development of walking route	SDCC	
Review Terms of Reference and Aims and Objectives, and develop 2011 Action Plan	CDI	SHP Committee
'Meet your Neighbours' Day	CDI	CDI, Barnardos, SDCC, residents
Social events/coffee mornings/info sessions		CDI, Barnardos, SDCC, residents
Hand-over of Oaklee from Council to Housing Association		SDCC/Oaklee Housing Association

Appendix I: SHP Early Development and Implementation

Key actions of the SHP Committee to date include the completion and publication of the *MacUilliam Needs Assessment Report* (CDI, 2010) and agreement on a series of actions with local service providers in response to its findings. The identification of these outputs followed a period of SHP Committee meetings and interagency engagements (from February to November 2009), the main objective of which was to synchronise service provision across participating organisations in areas related to the stated outcomes of the SHP strategy. This work began through the support of SDCC's 'welcoming' of new MacUilliam tenants and induction and post-tenancy training between February and April 2009.[50]

Analysis of documentary and observation data found the SHP has assembled a motivated and relevant team of service agencies, committed to improving services for residents in MacUilliam. The findings indicate well-attended meetings have enhanced the scope for interagency collaboration on relevant local issues. For example, early observation of the process found that the SHP sought to involve participating organisations in SDCC tenancy training in order to make services 'visible' to MacUilliam residents and in doing so highlighted the need to address social and infrastructural deficits existing in the area.

Several residents living on the MacUilliam Estate became directly involved with the SHP in early 2010 through involvement in the reorganisation and support of the estate's two residents' organisations, the MacUilliam and Oaklee Residents' Associations. This engagement with service providers resulted in the commencement of negotiations between these community representatives and SHP Committee members regarding issues identified in the findings of an early draft of the *MacUilliam Needs Assessment Report* (CDI, 2010). The engagement gathered resident feedback on the findings of the report and helped to secure community representation on the SHP Committee. One service provider commented:

> *'The SHP sort of helped to re-focus the whole issue of the resident's association … and got the impetus to get an association reformed.'*

[SHP service provider]

Analysis of documentary and observation also found several service agencies introduced front-line staff (HSE and SDCC community and estate management staff) to the SHP in order to maximise the potential of the initiative to identify and assess the needs of new and existing MacUilliam residents. The SHP plan of action grew out of this *'management planning'* and a significant part of this process was, as several service agency representatives explained, clarifying *'how as organisations we can actually work together'* (SHP service provider). Another commented:

> *'The key thing has been to attempt to get a good analysis of what's going on there and then to get a strategy that starts to respond.'*

[SHP service provider]

The move from consultation with MacUilliam residents to collaboration with residents in responding to findings contained in the needs assessment report was a key early outcome of the SHP process. As stated, this primarily happened through supporting the re-establishment of the two housing associations and the subsequent involvement of several members in training opportunities offered by CDI.

These activities impacted on the work of the SHP in a number of ways. First, the introduction of front-line agency staff and their work in SHP subgroups on the ground in MacUilliam has allowed the SHP Committee (e.g. service providers) build relations with resident leaders and gather community feedback concerning the needs assessment findings. For example:

> *'A key element of this is getting somebody out there on the ground, to just walk the streets and talk to people and get to know the community and work with the community.'*

[SHP service provider]

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[50] Service agencies involved in the SHP also took part in a 'welcome to the neighbourhood' event organised by SDCC Social Inclusion Unit for new and existing MacUilliam residents on 24 March 2010.

Second, it has provided an opportunity for some residents to give their input to the SHP Action Plan and ensured a level of accountability in addressing identified local needs across participating service organisations. However, it should be noted that the level of input from residents into the SHP Action Plan must be considered in light of difficulties in accessing local feedback and commitment in an area that is in the early stages of organising community structures. For example, a public meeting to gather residents' views and opinions on the findings of the *MacUilliam Needs Assessment Report* held on 27th January 2010 was attended by 7 people. Furthermore, Traveller representation was proposed for the SHP at a committee meeting on 21st April 2010; however, as of the end of September 2010 no direct Traveller representation had yet taken place at meetings.

Third, the successful implementation of the SHP depends on the participation of the local community. This means the SHP Committee functions as an access point and a coordinating structure for stakeholders in the community development process on the MacUilliam Estate. While several interviewees noted the early *'top-down'* nature of the SHP, a majority of committee members emphasized the need to maintain and further develop SHP links into the MacUilliam community:

> *'At a certain stage along the way, we took a very strategic decision to stop doing that [an agency-led approach] and to seek to engage the community and to support the development of community structures here.'*

[SHP service provider]

Most service providers placed particular emphasis on the need to maintain a focused and adaptable initiative. Some felt that this flexibility should, in particular, be reflective of and 'in tune' with how needs were changing both locally and nationally and how this may affect service agency goals and priorities. The potential of the SHP was identified by several service providers as resting on its capacity to link service providers with residents in MacUilliam. Several committee members felt that in order to achieve the goals set by the SHP, links ought to be expanded further with residents and with service providers in the area. The necessity of maintaining clear and transparent communication among partners and the development of new arenas of collaboration between organisations (in particular, schools servicing MacUilliam's 750 children and young people) were identified as areas of importance as the SHP moves forward.

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