

Model Community Mobilization Funding Act

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Model Community Mobilization Funding Act

Policy Statement

It is the consensus of the Commission that the effectiveness of community anti-drug efforts depends in large part on their coordination with other entities in the community also engaged in anti-drug efforts. This Act, taken from Washington state, uses the state grant program process to establish incentives for community groups to develop effective collaborative working partnerships with education, treatment, local government, law enforcement and other key elements of the community.

The Act emphasizes coordination between prevention, law enforcement, treatment, education and community groups, in the development of anti-drug projects eligible for state funding. Coordination and collaboration between these groups, in addition to reducing the chance that various efforts will be duplicative or at cross purposes with each other, enables each group's efforts to be broadened and enriched by the perspectives of the others.

The Act seeks to include community groups in the development of anti-drug strategies at local and state levels. It is intended to foster a more constructive atmosphere that recognizes and promotes the value of community groups, and is more receptive to their inclusion in society's broader efforts to address the drug problem.

Without their inclusion, communities are missing an important ally, as well as an important constituency to support the development of larger strategic efforts. The struggle against drugs cannot be won without the vigorous involvement of neighborhood groups, who are the most invested in winning back their streets.

This Act attempts to include community groups in a rational strategic approach, that genuinely uses the unique resources that they have to offer. It uses modest incentives to encourage various constituencies within a community to merge their efforts to work together toward a goal they all support.

Highlights of the Model Community Mobilization Funding Act

- Recognizes the critical importance of community efforts in addressing the drug problem.
- Recognizes that the most effective strategy for reducing the impact of alcohol and drug abuse is through collaboration of educators, law enforcement, treatment providers and community groups
- Establishes and uses the grant program in the governor's office [or, alternatively in the Executive Alcohol and Other Drug Abuse Planning and Coordinating Council(Council)] to motivate above-mentioned groups to develop targeted and coordinated strategies.
- Requires funding applications 1) to demonstrate that the community has developed meaningful coordinated strategy of prevention, treatment and law enforcement activities and 2) to present evidence of active commitment and involvement of local leaders from the education, treatment, law enforcement and local government fields, as well as meaningful involvement from neighborhood groups, businesses, human service organizations, health organizations and job training organizations.
- Sets forth a detailed list of application requirements which serve as guidelines for effective, coordinated community-wide action. Requires, for example, a description of the extent and impact of substance abuse in the community; a detailed explanation of the community-wide coordinated strategy for prevention, treatment and law enforcement activities; an explanation of who helped develop the strategy and what specific commitments have been made to carry it out; an explanation of how the new strategy builds on existing resources and anti-drug efforts; the identification of what additional resources are needed and for what activities; and the identification of activities for which funding is requested and detailed explanations for how those activities will work.
- Requires minimum 25% local matching funds or in-kind resources.
- Prohibits use of grant funds to supplant funding for existing activities.
- States preference for coordinated activities and makes innovative approaches to chronic widespread problems a priority.
- Establishes a peer review committee to advise the governor or the Council on the extent to which eligible applicants meet statutory criteria. Directs the governor or Council to distribute funds based on committee's information.
- Directs the governor or the Council to ask communities for input about how state drug policies and practices can help them implement their strategies, and to respond to that input with changes, where appropriate.
- Permits the governor or the Council to receive private contributions from non-governmental sources, for purposes of funding grants under this Act.
- Directs governor or the Council to provide detailed report to the legislature about grants awarded, their success, an assessment of the effectiveness of this Act in encouraging and supporting coordinated community action against substance abuse, and future recommendations.

Model Community Mobilization Funding Act

Section 1. Short Title.

The provisions of this [Act] shall be known and may be cited as the “Model Community Mobilization Funding Act.”

Section 2. Legislative Findings and Purpose.

The legislature recognizes that statewide efforts to reduce the incidence of alcohol and other drug abuse must be increased. The legislature further recognizes that the most effective strategy for reducing the impact of alcohol and other drug abuse is through the collaborative efforts of educators, law enforcement, local government officials, local treatment providers, and concerned community and citizens’ groups. The legislature intends to support the development and activities of community mobilization strategies against alcohol and other drug abuse through the following efforts:

- (a) Provide funding for collaborative prevention, education, treatment, and enforcement activities identified by communities;
- (b) Provide technical assistance and support to help communities develop and carry out effective activities; and
- (c) Provide communities with opportunities to share suggestions for state program operations and budget priorities.

Section 3. Community Anti-Substance Abuse Grant Program.

There is established in the [office of the governor][Executive Alcohol and Other Drug Abuse Planning and Coordinating Council(Council)] a grant program to provide incentive and support for communities to develop targeted an coordinated strategies to reduce the incidence of alcohol and other drug abuse. Activities which may be funded through this grant program include those which:

- (a) Prevent substance abuse through educational and

self-esteem efforts, development of positive alternatives, intervention with high-risk groups, development of strategies to instill community and personal resistance to alcohol and other drugs, and prevention strategies;

(b) Increasing access to and availability of effective treatment opportunities, particularly for underserved or highly impacted populations, developing aftercare and support mechanism, and other strategies to increase the availability and effectiveness of treatment;

(c) Provide meaningful consequences for participation in illegal activity and promote safe and healthy communities through support of law enforcement strategies;

(d) Create or build on efforts by existing community programs, coordinate their efforts, and develop cooperative efforts or other initiatives to effectively use resources to carry out the community’s strategy against alcohol and other drug abuse; and

(e) Other activities which demonstrate both the feasibility of and the rationale for how the activity will achieve measurable results in the strategy against alcohol and other drug abuse.

Section 4. Priority for Community Strategies Aimed at Geographic Areas Coterminous With Counties, Municipalities or Other Units of Government.

This grant program will be available to communities of any geographic size but will encourage and reward communities which develop coordinated or complimentary strategies within geographic areas, such as county areas or groups of county areas which correspond to units of government with significant responsibilities in the area of alcohol and other drug abuse, existing coalitions, or other entities important to the success of a community’s strategy against alcohol and other drug abuse.

Section 5. Minimum Requirements of Grant Applications.

At a minimum, grant applications must include the following:

- (a) Evidence that the community has developed a coordinated strategy of prevention, education, treatment, and law enforcement activities;
- (b) Evidence of active participation of the community and specific commitments to implementing the community-wide agenda by leadership from at least education, law enforcement, local government, and treatment entities in the community;
- (c) Evidence of the opportunity for meaningful involvement from others such as neighborhood and citizen groups, businesses, human service, health and job training organizations, and other key elements of the community, particularly those whose responsibilities in law enforcement, treatment, education, prevention, or other community efforts provide direct, ongoing contact with alcohol and other drug abusers;
- (d) Definition of geographic area;
- (e) Description of the extent and impact of alcohol and other drug abuse in the community, including an indication of those who are most severely impacted and those most at risk of alcohol and other drug abuse;
- (f) Explanation of the community-wide strategy for prevention, education, treatment, and law enforcement activities related to alcohol and other drug abuse with particular attention to those who are most severely impacted and those most at risk of alcohol and other drug abuse;
- (g) Explanation of who was involved in development of the strategy and what specific commitments have been made to carry it out;
- (h) Identification of existing prevention, education, treatment, and law enforcement resources committed by the community, including financial and other support, and an explanation of how the community's strategy involves and builds on the efforts of existing organizations or coalitions that have been carrying out community efforts against alcohol and other drug abuse;
- (i) Identification of activities that address specific objectives in the strategy for which additional resources are needed;
- (j) Identification of additional local resources, includ-

ing public funds, donated goods or services, and other measurable commitments, that have been committed to the activities identified in subsection (i);

- (k) Identification of activities which address specific objectives in the strategy for which funding is requested. Activities should be presented in priority order;
- (l) Explanation of each activity for which funding is requested, in sufficient detail to demonstrate:
 - (1) Feasibility through deliberate design, specific objectives, and realistic plan for implementation;
 - (2) A rationale for how this activity will achieve measurable results and how it will be evaluated;
 - (3) That funds requested are necessary and appropriate to effectively carry out the activity; and
- (m) Evidence of additional local resources committed to its strategy totaling at least twenty-five percent of funds awarded under this section. These resources may consist of public or private funds, donated goods or services and other measurable commitments, including in-kind contributions such as volunteer services, materials, supplies, physical facilities or a combination thereof;
- (n) Written agreement that the funds applied for, if received, will not be used to replace funding for existing activities; and
- (o) Identification of a fiscal agent meeting state requirements for each activity proposed for funding.

COMMENT

This section emphasizes the requirements of coordinated community participation in the development and eventual implementation of drug strategy. All grant applicants must show evidence that *all* facets of the community, including local prevention, education, treatment, and law enforcement entities, as well as neighborhood and citizens groups, businesses, social service, health, and job training organizations, religious groups, and other key elements of the community, have actively engaged in the development of the strategy and have pledged to see that strategy come to fruition. Coordination and collaboration between these groups, in addition to reducing the chance that various efforts will be duplicative or at cross purposes with each other, enables each group's efforts to be broadened and enriched by the perspectives of the others.

Subsections (d) and (m) provide the rest of the framework upon which the strategy will be built in the grant

applicant's community and describe the portfolio of programs that will be implemented to address the applicant's various alcohol and other drug problems.

Section 6. Criteria for Awarding Grants.

The [governor][Council] shall make awards, subject to funds appropriated by the legislature, under the following terms:

- (a) In order to be eligible for consideration, applications must demonstrate, at a minimum;
 - (1) That proposals submitted for funding are based on and address specific objectives contained in a coordinated strategy of prevention, education, treatment, and law enforcement against alcohol and other drug abuse;
 - (2) That there is active participation in preparation of the proposal and specific commitments to implementing the community-wide agenda by leadership from at least education, law enforcement, local government, and treatment entities in the community;
 - (3) That there exists the opportunity for meaningful involvement from others such as neighborhood and citizen groups, businesses, human service, health and job training organizations, and other key elements of the community, particularly those whose responsibilities in law enforcement, treatment, prevention, education or other community efforts provide direct, ongoing contact with alcohol and other drug abusers, or those at risk for alcohol and other drug abuse;
 - (4) That they have met the requirements listed in Section 5 of this [Act];
 - (5) That there are additional local resources committed to its strategy totaling at least twenty-five percent of funds awarded under this section. These resources may consist of public or private funds, donated goods or services and other measurable commitments, including in-kind contributions such as volunteer services, materials, supplies, physical facilities or a combination thereof; and
 - (6) That the funds applied for, if received, will not be used to replace funding for existing activities.
- (b) In order to encourage and reward communities which develop coordinated or complimentary strate-

gies within geographic areas which correspond to units of government with significant responsibilities in the area of alcohol and other drug abuse, up to fifty percent of funds appropriated for the purposes of this [Act] may be awarded on a per capita basis to eligible applicants reflecting coordinated strategy from a county area or group of county areas. The [governor][Council] may establish minimum allotments per eligible county areas up to fifteen thousand dollars; and

- (c) No less than fifty percent of funds appropriated under this [Act] shall be awarded on a competitive basis for activities by communities not participating in a county-wide strategy and activities identified by county-wide strategies but not funded through per capita grants. Eligible applications will be assessed and compared by a peer review committee whose members have experience in prevention, education, treatment, law enforcement, and other community efforts against alcohol and other drug abuse using the following criteria:
 - (1) The extent and impact of alcohol and other drug abuse;
 - (2) The extent to which key elements of the community are involved in and committed to the coordinated strategy;
 - (3) The extent of commitments of local resources to the coordinated strategy;
 - (4) The extent to which any activities in a community's strategy offer an innovative approach to a chronic, wide-spread problem.

The peer review committee will advise the [governor][Council] on the extent to which each eligible applicant has met these criteria. The [governor][Council] will distribute available funds based on this information.

- (d) The [governor][Council] shall distribute fifty percent of the initial appropriation for the purposes of this [Act] no later than, _____, 199_ and the remainder no later than _____, 199_.
- (e) Activities funded under this section may be considered for funding in future years, but will be considered under the same terms and criteria of new activities. Funding under this section shall not constitute an obligation by the state to provide ongoing funding.
- (f) All grant recipients shall agree in writing, as a condition of the grant, to report to the [governor][Council] at such times and in such manner as shall be prescribed by the [office of the governor][Council]. Such

report shall assess the achievement of the goals and objectives of the activities for which funding was received and the effect that the funded activities had on encouraging and supporting coordinated community action against alcohol and other drug abuse.

COMMENT

Subsection (a) generally restates the necessary framework through which funding for community anti-drug abuse strategies shall be awarded. Again, emphasis and priority will be given to those strategies that reflect comprehensive, coordinated community planning and implementation efforts.

Subsections (b) through (e) explain how and when the state funds shall be allocated among the different jurisdictions that apply for such grants.

Section 7. Community Input on Development of State Policies Affecting Community Anti-Substance Abuse Strategies.

The [governor][Council] shall ask communities for suggestions on state practices, policies, and priorities that would help communities implement their strategies against alcohol and other drug abuse. The [office of the governor] [Council] shall review and respond to those suggestions, making necessary changes where feasible, offering recommendations to the legislature where appropriate, and providing an explanation as to why suggested changes cannot be accomplished or acted upon.

COMMENT

This section recognizes that effective government requires meaningful input from the local level. The effectiveness of state funding under this [Act] will be improved substantially if the state solicits and receives local input on state practices, policies, and priorities that affect local strategies addressing alcohol and other drug abuse.

Section 8. Private Contributions to Grant Program Fund.

The [governor][Council] may receive such gifts, grants, and endowments from public or private sources as may be made from time to time, in trust or otherwise, for the use and benefit of the purposes of Sections 1 through 7 of this [Act] and expand the same or any income therefrom according to the term of the gifts, grants, or endowments.

COMMENT

Recognizing state budgetary constraints, this section provides states with an effective vehicle through which funds may be solicited or received to help fund community anti-drug strategies. Activist governors or executive councils should feel empowered by this section to recruit, solicit, or raise public and private funds to help fund these strategies.

Section 9. Report to the Legislature.

The [governor][Council] shall report to the legislature by [] of each year regarding the operations of the grant program authorized under this [Act]. At a minimum, the report shall include the following:

- (a) Number of grants awarded and the amount of each grant;
- (b) Recipients of grants, including the communities in which they are based;
- (c) Purposes for which the grants were awarded;
- (d) Achievement of stated goals and objectives;
- (e) An assessment of the effect that the activities of this Act had on encouraging and supporting coordinated community action against alcohol and other drug abuse;
- (f) Recommendations for further funding for the state; and
- (g) Recommendations regarding future operations of the program, including criteria for awarding grants.

COMMENT

This section holds the governor's office or the Council accountable for the execution of the provisions of this [Act]. Note that grant recipients are, under Section 6(f), held accountable and must provide full reports on funded programs to the governor's office or the Council.

Section 10. Severability.

If any provision of this [Act] or application thereof to any person or circumstance is held invalid, the invalidity does not affect other provisions or application of the [Act] which can be given effect without the invalid provision or application, and to this end the provisions of this [Act] are severable.

Section 11. Effective Date.

This [Act] shall be effective on [reference to normal state method of determination of the effective date][reference to specific date].

Appendix F

CAMPAIGNING FOR SAFT STREETS IN TACOMA, WASHINGTON

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This paper was prepared for the third meeting of the Working Group of State Drug Control Executives, November 12 - 14, 1992. The Working Group is a project of the Program in Criminal Justice Policy and Management, John F. Kennedy School of Government, Harvard University, and is funded by the Bureau of Justice Assistance, U.S. Department of Justice (cooperative agreement #91-DD-CX-K014)

Campaigning for Safe Streets in Tacoma, Washington

A block organizing meeting on the Eastside of Tacoma... it's tense in the meeting because suspected gang members are circling the block in their car, threatening to shoot at the house. Neighbors at the meeting huddle together trying to decide what to do next. They call the police to come to their aid... and the police finally show up. However, the neighbors have made some decisions... keep documenting the gang and suspected drug trafficking activity in the neighborhood, report it to the CRAK line and work with the police to eliminate the illegal activity from their neighborhood. They form a phone tree, they set up a watch schedule. They have their tools: pencils, housewatch forms, their eyes, and telephones. They are ready, they document and report. They meet again to support each other and check on progress. Something changes at their next meeting: one of the gang members joins them and says he will work with them if they will help support him to leave the gang. They agree to his proposal... he provides information that is passed on to the police. They help him get a job, and they develop a telephone support plan to help him get up in the morning, get to work, and stay healthy. Six months later, he still has his job, he's out of the gang, and the neighborhood's drug trafficking is eliminated. They are a community.¹

Crime and Violence

Approximately 562,000 people live in the Tacoma area. The community is relatively stable; some 75 percent of the residents have lived there for five years or longer. For the most part, they are neither poor nor under-educated. The community's average household income is \$33,000, and approximately 60 percent of the families own their own homes. Eighty-nine percent of the area's adults are high school graduates, and 45 percent have completed at least some college courses.²

Despite these advantages, Tacoma and surrounding Pierce County confront gangs, drugs, and violent crime. The FBI's Uniform Crime Reports show a 1989 total of 44,252 major felonies in the Tacoma Metropolitan Statistical Area.³ With a crime rate of 7,719.4 crimes per 100,000 residents, Tacoma compares unfavorably with San Diego, California (7,362.3), Detroit, Michigan (6,975.1), and Newark, New Jersey (6,622.5).⁴

¹ Safe Streets Campaign of Tacoma-Pierce County, A Biennial Assessment of Community Mobilization for Improved Community Safety, July 1991, p.1.

² Demographic data obtained from The Morning News Tribune, 1990 - 1991 Market Profile for Pierce and South King Counties, August 1991.

While Tacoma's excellent seaport is reportedly used by foreign drug cartels, such high-level wholesalers regard the city primarily as a "through point" for trans-shipment to more lucrative markets in the East.⁵ Youth gangs and street-level drug sales are far more compelling crime problems for the area's residents. Estimates from local law enforcement place current gang memberships in the 900 range, and some 400 street-level crack cocaine dealers are known to operate in the county.⁶ These individuals are violent and competitive; Tacoma and surrounding Pierce County often experience two or three drive-by shootings each night.⁷

Organizing a Counter-Attack

Anti-drug efforts — both in Tacoma and at the state capitol — gained impetus in 1988. In the spring of that year, the governor's cabinet established a subcommittee to study the growing problems created by drugs and gangs. By summer, the state had established an Interagency Task Force to gather facts and make strategic recommendations to the governor's Cabinet Subcommittee. Fall 1988 saw the establishment of a bipartisan state legislative committee to develop substantive and funding recommendations and, before the year was over, Governor Booth Gardner appointed Paul Dzeidzic to serve as Special Assistant on Substance Abuse Issues.

As the state's first drug czar, Dzeidzic was tasked to bring state agencies and local communities into the new initiative. His early efforts included a statewide series of community forums to focus attention on the drug problem, identify priorities, and solicit input on potential strategies.

Community leaders in Tacoma applauded the state's efforts and complemented them with their own. Elected officials, judges, the Pierce County Prosecutor, and representatives from law enforcement, the school district, the NAACP, the Black Collective, the Urban League, and others held a series of planning meetings to address the growing presence of gangs, drugs, and violence in Pierce County. As part of its strategy, the group asked community residents to suggest tactics for fighting these problems.

Many felt that planning was not enough, and four organizations (Pierce County, the City of Tacoma, the Tacoma School District, and the United Way) each pledged \$50,000 to help finance the initiative. They recruited a director to lead the effort, hired staff, and designated January 26, 1989, as the day they would begin an all-out effort to involve the community in the war on drugs and crime. More than 2,200 residents responded by attending the January 26th forum at Henry Foss High School in Tacoma. As a group, they were outraged at the explosion of drug dealing, drive-by shootings, and property destruction in their neighborhoods. They were united in their concern and determination to help make their communities safer for themselves and their children.

The governor and the legislature moved quickly to assist local efforts in Tacoma and elsewhere in the state. In fall 1988, Governor Gardner commissioned the Washington State Community Mobilization Against Substance Abuse (CMASA). Drug czar Dzeidzic helped spearhead the initiative

³ Reportable crimes include murder, forcible rape, robbery, aggravated assault, burglary, larceny, and motor vehicle theft.

⁴ U.S. Department of Justice, Federal Bureau of Investigation, Crime in the United States, 1989, August, 1990.

⁵ Interview, Pierce County Sheriff's Office, September 1992.

⁶ Id.

⁷ Id.

and, in May 1990, the bipartisan Omnibus Controlled Substance Act of 1989 (which authorized the state to help finance local CMASA activities) was signed into law. Dzeidzic played a key role in developing the CMASA and, after the Omnibus Act was passed, convened a series of 22 community meetings to answer questions about the new law and help local leaders develop implementation plans.

CMASA was designed to “provide incentive and support for communities to develop targeted and coordinated strategies to reduce the incidence and impact of substance abuse.”⁸

Its provisions include:

- Funding support for prevention, treatment, and enforcement activities identified by communities that have brought together education, treatment, local government, law enforcement, and other key elements of the community;
- Providing communities with technical assistance and support; and
- Facilitating community input on state program and budget priorities.

The state legislature appropriated \$3.7 million to support local CMASA activities during the 1991-1993 biennium (July 1, 1991 through June 30, 1993). In addition, the state developed a technical assistance network to provide ongoing support to communities seeking to organize under CMASA’s guidelines.⁹

The federal government matched the state’s investment with \$3.7 million authorized under the Drug Free Schools and Communities Act.¹⁰ Of the total funds available, 50 percent of the state funds and 100 percent of the federal funds were allocated to local communities on a formula basis. This left 25 percent of the total (\$1.85 million) available for competitive award.¹¹ The competitive funds were intended to encourage and reward communities for developing coordinated county wide strategies.¹²

Community activists from Tacoma worked closely with drug czar Dzeidzic and the Cabinet Subcommittee to develop and support the CMASA. The resources it provided enabled the initiative to develop new capabilities, and the governor’s support enhanced its legitimacy and prestige. In addition, technical assistance became readily available as state agencies and local communities began to implement — and share information about — community mobilization strategies. By June 1989, the Campaign for Safe Streets had become a potent force in Tacoma’s battle against crime and drugs.

⁸ Office of the Governor of Washington State, Omnibus Controlled Substance and Alcohol Abuse Act, Summary and Implementation, Winter 1990, p.5.

⁹ Id.

¹⁰ Office of the Governor and Department of Community Development, Community Mobilization Against Substance Abuse FY 1993 Application for Funding, p.1.

¹¹ Id. at p.2.

¹² Office of the Governor of Washington State, Omnibus Controlled Substance and Alcohol Abuse Act, Summary and Implementation, Winter 1990, p.5.

The Campaign for Safe Streets

Its leaders describe the Campaign for Safe Streets as “a process, not a program.”¹³ They recognize that no single solution exists to the problems of drugs and crime, and instead give “direction and form to citizen efforts to work together to evaluate their own problems and develop their own coordinated response.”¹⁴ Universal participation is encouraged and the ground rules are simple:

*We are all community members; we agree to behave as team members, to contribute ideas, listen to others, state our concerns openly, make commitments and carry out action steps. We encourage everyone to participate. We listen to one another as allies.*¹⁵

Fundamental questions faced the Campaign during its formative period. Organizers had to select targets¹⁶ and build consensus on the appropriate response. Neighborhood dysfunction ultimately emerged as the key criterion. The resulting mandate allows the Campaign to respond to changes as different types of problems or substances manifest health or safety problems in the community.

The Campaign is organized into block groups, apartment complex groups, and “stake holder” groups (composed of business, labor, government, schools, religious institutions, medical services, minority commissions, and community coalitions). Group leaders work with Safe Streets staff and each other to share information, develop strategies, and craft action plans to achieve the Campaign’s primary goals:¹⁷

- Maintain healthy, safe neighborhoods. Provide organization, advice, financing, and technical assistance, but let each neighborhood develop and tailor its own solutions.
- Mobilize the 560,000 citizens of Pierce County. Make everyone who lives in Pierce County a “stake holder” by creating a positive momentum, by publicizing successes, and by promoting the measures that have been proven effective.
- Prevent substance abuse and associated crime. A partnership of 92 public agencies, private organizations, and neighborhood groups has been established to help achieve this goal. Its task is to build a healthy, resilient community where drugs and crime cannot thrive.

Safe Streets’ Organization

The Campaign for Safe Streets is organized on the basis of service delivery systems and community structures. It is entrepreneurial, multi-disciplinary, and knows no jurisdictional boundaries.

¹³ Interview with Safe Streets Board of Directors, July 1992.

¹⁴ Campaign for Safe Streets Briefing Paper, July 30, 1992.

¹⁵ Id.

¹⁶ Examples include trafficking and consumption of illicit drugs, abuse of pharmaceuticals, alcoholism, and tobacco use by minors.

¹⁷ Campaign for Safe Streets Briefing Paper.

A Board of Directors has overall responsibility for the initiative's administration and policy direction,¹⁸ and the Campaign has separate steering committees organized to specifically address community mobilization, prevention, and youth.

The Community Mobilization Steering Committee is composed of representatives from participating neighborhoods. The Committee tracks policy and program decisions made at the community level, and takes an active role in making such decisions when they affect more than one geographic area.

The Prevention Partnership Steering Committee includes representatives from business, labor, schools, the county health substance abuse and parent-child divisions, minority organizations, the arts, youth, and religious institutions. It provides policy direction and guidance in the area of substance abuse prevention.

The Youth Consortium Steering Committee is composed of representatives from more than two dozen youth-serving organizations. It focuses on gang reduction, at-risk youth, proactive school and community-based prevention and intervention strategies, and youth employment and job training programs.

Each steering committee has a coordinator, and the Safe Streets executive director works with each to develop program assistance and policy direction. The three steering committees coordinate their contacts with participating citizens, public officials, and agency staffs in order to reduce the effects of conflicting priorities.

Seventeen paid employees staff the Campaign's headquarters office. The executive director is Lyle Quasim, a man who describes himself as a "recovering bureaucrat." The former three-term state mental health commissioner grew up in one of Chicago's most crime ridden neighborhoods and is no stranger to drugs and violence. He is as likely to be found talking to gang members at midnight on an East Tacoma sidewalk as working his way through lunch at his desk.

Quasim is charismatic and driven. His staff shares his motivation; when hiring, Quasim looks as much for enthusiasm and endurance as for "paper qualifications." When "burnout" does occur, Quasim rallies his team for mutual encouragement and support. The staff's role is pivotal; the Campaign for Safe Streets may be "owned" by the community, but Quasim and his staff keep the initiative focused and underway.

Safe Streets' Operations

"Block by Block Organizing" — always in capital letters — forms the cornerstone of the Campaign. Quasim points out that this technique will work only when community members are fed up and willing to help themselves. He tells prospective participants: "This is not anonymous work. You must decide how serious the problem is and how committed you are to solving it."

¹⁸ The Board of Directors is composed of ten high-level "stake holders" in community leadership positions. Its current membership includes the Deputy Pierce County Executive (who serves as Chair), the Chief of the Tacoma Police Department, the Pierce County Sheriff, the Pierce County Prosecuting Attorney, the City of Tacoma's Deputy City Manager, a member of the Tacoma School Board, the Superintendent of the Tacoma School District, an elected member of the County Council, a member of the Tacoma City Council, and the Chief Executive Officer of the Pierce County United Way. The Safe Streets Executive Director serves as staff to the Board.

The elements of Block by Block Organizing include neighborhood “phone trees” (a network of prearranged agreements to conduct telephone notifications when suspicious or criminal activities are observed), carefully documented citizen surveillance of suspected drug houses, training to describe suspects and vehicles, graffiti removal, citizen sidewalk patrols,¹⁹ and the opportunity to network for community development.²⁰ The blocks themselves are organized into geographically defined community coalitions, which are in turn supported by the Community Mobilization Coordinator and Steering Committee.

Block by Block Organizing has changed traditional neighborhood relations with law enforcement. According to Tacoma Police Chief Ray Fjetland, initial mistrust has been replaced by an active partnership in which citizens have become “an extension of police eyes and ears.” In turn, greater identification with participating neighborhoods gives police a greater sense of priority when handling calls that involve their citizen-partners.

The Campaign’s Drug House Elimination Team combines neighborhood and public agency resources to focus on the removal of identified drug dealing establishments. This initiative employs the documented observations of area residents to help target street-level drug enforcement and civil abatement resources, and is often used to enhance the effects of Block by Block Organizing.

The Campaign’s other activities are numerous and diverse. Examples include the Youth Initiative, which gives young people a role in developing intervention measures and positive alternatives for their peers; the Arts Task Force, which promotes artistic expression as a positive alternative to vandalism and graffiti; the Interfaith Task Force, which has mobilized more than 20,000 church members to prevent substance abuse and gang violence; the Minority Coalition, which was designed to improve community attitudes about cultural diversity; the Gang Informational Task Force, a coalition of government agencies and youth representatives that tracks the development and activities of gangs in the community; and the Business-Labor Coalition, which promotes drug-free workplace initiatives²¹ and provides training sessions to link employees and neighborhood projects.²²

¹⁹ Many of the Campaign’s neighborhood coalitions have organized nightly walking tours of their most blighted areas. Participating residents confront loitering prostitutes, drug dealers, and gang members. Those who cannot state a legitimate reason for being there are asked to leave.

²⁰ The Campaign for Safe Streets does not use this as a mere “catch phrase.” Networking for community development often involves creatively developing what Prosecuting Attorney John Ladenburg referred to as “infrastructure solutions.” In one example, neighborhood organizers negotiated with the local Chamber of Commerce to create 50 youth jobs. In return, community members pledged to provide transportation, child care, and ongoing encouragement and support to the new employees.

²¹ Safe Streets Prevention Coordinator Prescilla Lisicich estimates 70 percent of the community’s illicit drug users are currently employed.

²² One employer told Quasim, “I thought when Safe Streets was presented we would support our employees to go out into unsafe neighborhoods and help folks clean up their areas. I was surprised to learn that a majority of our employees lived in those neighborhoods and that the workplace had become a network to organize neighborhood cleanups and beautification. This had a positive effect on our workplace.”

These activities apparently generate widespread appreciation at the neighborhood level. Clipper Maxfield, Safe Streets organizer and resident of Pierce County's Lakewood area, noted that the Campaign provides "someone to call" when a neighborhood is in trouble; it "tells them how to get organized, gives them the tools they need and suggests specific ideas that have been used successfully in other neighborhoods." Maxfield also emphasized the Campaign's role as a facilitator between residents and law enforcement: "Deputy sheriffs come to all of our organizing meetings... they are grateful because without those forums they would be fighting crime without the help of the people." This is not mere rhetoric — the Campaign's community meetings recently led to the creation of a five-officer special patrol district in Lakewood's most seriously drug-impacted area.

While Maxfield's community is particularly violent,²³ she maintains that the Campaign's counseling, recreation, and community development activities are as important as its public safety role: "These neighborhoods need creative community solutions that go beyond calling the police... Safe Streets works with us to find those solutions."

Safe Streets' Resources

The Campaign for Safe Streets is a "Multi-Government Joint Powers Agency." It is administratively hosted by Pierce County and has an operating budget of approximately \$1,027,000 per year. Approximately \$200,000, or 19.5 percent of its funding, comes from local sources (these include Pierce County, the city of Tacoma, the United Way of Tacoma/Pierce County, and the Tacoma School District). The state of Washington provides an additional \$300,000, or 29.2 percent of the Campaign's operating budget (CMASA funds from the Department of Community Development). Federal contracts with the U.S. Department of Health and Human Services and the Office of Substance Abuse Prevention account for another \$522,000 (50.8 percent of the Campaign's budget). In addition, the Campaign receives modest cash contributions from private parties (in 1992, the Campaign received \$5,000 from private donors).

The Campaign also receives an impressive array of in-kind contributions in the form of professional services, time, and materials. Examples: the advertising firm of Cole and Weber will provide the Campaign with approximately \$250,000 worth of services in 1992; members of the local news media have pledged to donate some \$200,000 in public service coverage; the city of Tacoma provides approximately \$100,000 in staff and support services each year; and Pierce County makes an annual contribution of \$125,000 in personnel, budget, and finance department assistance. Including the time of its scores of volunteers, the Campaign enjoys in-kind contributions in the range of \$975,000 per year.

Cumulatively, the Campaign's cash and in-kind revenues will total over \$2 million during 1992. This represents a cost of approximately \$3.60 per Pierce County resident. If every community in the United States were funded at the same per capita level, the national cost would equal \$900 million per year.²⁴

²³ With only 60,000 residents, Lakewood often experiences more than 30 drive-by shootings each month.

²⁴ Estimate based on a U.S. population of 250 million.

Safe Streets' Accomplishments

Despite the normal problems of initial organization and startup, performance statistics during the first three years have been impressive:

- More than 75,000 citizens have participated in Block by Block Organizing. In 1990, blocks were organizing at a rate of six per month. By mid-1992, that rate was up to 30 blocks per month.
- Campaign volunteers eradicated virtually all of Pierce County's gang graffiti during the second half of 1989, and six area graffiti removal teams have been established to monitor and remove new graffiti as it appears.
- Complaints and emergency calls to police dropped from 133,000 in 1989 to 106,000 in 1990, allowing police to redirect resources to accommodate other pressing service needs.
- The Drug House Elimination Team has closed more than 270 drug dealing establishments since June 1990.
- In 1991, the Youth Consortium served more than 89,000 youth and families with a mix of prevention, education, employment, and recreation programs. This was an increase of approximately 32,000 from the 1990 level.

The Campaign also appears to be changing the behavior of some public institutions. Pierce County Sheriff John Shields notes, for example, that Safe Streets has helped move law enforcement from a "hunter philosophy" to a "quality of life orientation."

Attitude changes have also occurred among the community's residents. The simple act of organizing, of taking responsibility, has reduced fear and given hope. As one resident said, "It's nice to be able to wave at your neighbor and know who it is. I took a walk and saw all the Safe Streets signs — it makes you feel good."

While anecdotal information abounds, there is little direct evidence that the Campaign has reduced the community's underlying substance abuse problems. Similarly, the community's law enforcement officials are unable to credit the Campaign with any significant reduction in drug or gang-related crime. Its impact on these problems will not be known until the Campaign develops and implements an evaluation strategy.

Problems and Frustrations

The Campaign's history is not completely positive. Some residents remain concerned about retaliation.²⁵ Others are disappointed that the Campaign does not provide instant solutions and resent being called upon to make extensive personal commitments.²⁶ Some with established positions in

²⁵ These fears are usually unfounded, but there have been some horror stories. For example, Quasim once spent several weeks cajoling a restaurant owner to paint over gang graffiti on his property. The owner finally complied, and the restaurant was destroyed by arson that very night.

²⁶ Quasim noted that some residents expect the Campaign to respond like a firefighter to a plume of smoke. He related that it is difficult for these individuals to accept Safe Streets as a facilitator, and to accept personal responsibility for the health and safety of their neighborhoods.

the community are concerned that Safe Streets will undermine existing programs and threaten their resources. In addition, the staff is continuously challenged to maintain community focus and keep the Campaign's volunteers motivated and active.

On other fronts, the Campaign has fallen victim to its own success. Expectations frequently exceed capabilities, and Quasim's management style is at least partly responsible. In approaching new initiatives, Quasim likes to "throw 100 things against the wall and see what sticks." Dramatic successes often result, but the ideas that "don't stick" sometimes leave frustration and disappointment in their wake. An example is the Campaign's failed effort to "strengthen families" through a network of community support. According to Quasim: "The idea sounded great. We actively publicized the concept and held meetings to consider strategies and objectives. Unfortunately, we found ourselves unable to come up with intervention strategies to match our enthusiasm... we didn't know what to do when all these families started showing up and presenting problems that none of us could fix."

Other frustrations include the Campaign's inability to help the parents of identified gang members, to provide services to incarcerated juveniles,²⁷ to establish more effective school liaison,²⁸ and to address the problems posed by hardcore violent offenders. Quasim noted, however, that the Campaign's greatest frustration is its failure to field an effective treatment component. Drug treatment was one of the top three priorities identified during the Campaign's formative meetings,²⁹ but its integration with other Campaign services has been stalled by a lack of consensus among treatment providers.³⁰ Quasim attributes the problem to divergent treatment philosophies, conflicting organizational loyalties, and resource competition between providers. As a result, the Campaign's only connection with drug treatment is a loose affiliation with the local providers.³¹

The Drug Czar's Current Role

Judi Kosterman, a veteran educator with a Doctorate in substance abuse prevention, is Washington's current drug czar. She succeeded Paul Dzeidzic in December 1990, but was involved with the drug czar's office almost from its inception two years earlier. Dzeidzic met Kosterman while working with the Washington State Substance Abuse Coalition.³² Because his background was primarily in health services, he enlisted her help and gradually came to rely on her as his key substance abuse advisor. That early role assured a smooth transition when Dzeidzic retired and the Governor appointed Kosterman to assume his former duties.

²⁷ Quasim complained that neither state nor local detention facilities have been willing to grant Campaign staff regular access to incarcerated juveniles.

²⁸ School liaison has been hampered by inadequate staff on the school district side. Conflicting priorities have prevented the hiring of a teacher to act as liaison between Safe Streets and the schools. As a result, the Campaign provides no services in 11 of the community's 15 school districts.

²⁹ The other two were drug interdiction and community mobilization. *Safe Streets Action Plan*, June 1989, p.9.

³⁰ Interview, Lyle Quasim, July 1992.

³¹ Id.

³² The Washington State Substance Abuse Coalition is a grass roots community-based organization. Kosterman joined the Coalition in 1983 and Dzeidzic began working with it shortly after his drug czar appointment in 1988.

Kosterman believes that the mobilization of local communities is the most promising long-term strategy to control substance abuse.³³ She sees her job as centered on two primary tasks:

- Challenge every citizen of the state to become personally involved in reducing substance abuse; and
- Coordinate the efforts of state agencies in support of community efforts to reduce substance abuse.

Kosterman's approach to community mobilization involves a process that provides local leadership with incentives to collaborate on and commit to sustained substance abuse reduction efforts. She believes that community ownership of the process is essential, and that the dimensions of the problem can be addressed only through a complementary mix of long-term strategies.

As Kosterman notes: "It is not a simple process for either state agency personnel or key leaders in this state's communities to leave behind the competitive, single-focus approach to substance abuse reduction and move to a non-competitive, community-determined approach."³⁴ To help achieve this objective, she has joined the Washington Department of Community Development and the State Interagency Workgroup (which includes representatives from 13 state agencies) to:

- Develop a community grant incentive program;
- Provide technical assistance to each mobilizing community;
- Implement a public relations campaign (with a statewide message that can be adapted to the needs of each community); and
- Develop a range of individual initiatives to encourage particular groups (e.g., businesses, youth groups, and minority associations) to join and support the community mobilization process in their areas.

As the governor's representative, Kosterman must often take a more direct role in advancing mobilization objectives. The governor's office has great prestige throughout the state, and gubernatorial proclamations, letters of support, and personal encouragement can be decisive in helping communities get through the conflict that often accompanies early mobilization efforts.

Kosterman also actively participates in the state's technical support network. In that capacity she facilitates local planning groups, coordinates state aid, and helps community organizers find solutions to inter-agency conflicts and turf concerns. Kosterman has been described as a "leader of the state's community development cult." She brings spirit and passion to the initiative, and plays a key role in advancing progress on this front of the Washington drug war.

³³ Kosterman also emphasized the importance of coordinating state agency efforts to ensure that they are compatible with and support effective and cooperative local community solutions.

³⁴ Kosterman, Judi, *Reducing Substance Abuse: A White Paper*, November 1991, p.6.

This leadership is often crucial when resource competition and conflicting service demands make it difficult for local governments to maintain a consistent focus on the drug abuse problem. As Quasim notes:

It's difficult to be an expert in your own home town. Intervention by the drug czar adds credibility to the cause and offers the validation of a statewide perspective. By serving as a "friend of the court," the drug czar has often affected the outcome of City Council and School Board policy and resource debates.

A drug czar's tenure may be quite limited, but the state bureaucracy endures. Kosterman reasons that planning for a sustained effort requires deep organizational "buy in," and has spent considerable effort embedding the community mobilization concept in participating state agencies. She has paid particular attention to Washington's Department of Community Development, influencing it to adopt community mobilization support as part of its basic mission. The fruits of that investment may prove to be her most enduring legacy.

Community Mobilization Chronology of Events

State Action	Pierce County Action
Spring 1988	
Governor establishes Cabinet Subcommittee on Drugs and Gangs	
Summer 1988	
Interagency Task Force established to develop recommendations for Cabinet Subcommittee	
Fall 1988	
State establishes bipartisan legislative committee	Planning meetings held in Pierce County
Governor commissions the Washington State Community Mobilization Against Substance Abuse (CMASA)	
Winter 1988	
Paul Dzeidzic appointed as state's first drug czar	\$200,000 raised by local agencies to finance community mobilization efforts - Tacoma's Campaign for Safe Streets is born
	Lyle Quasim hired as Safe Street's executive director

State Action	Pierce County Action
January 1989	
	Over 2200 residents attend community meeting at Henry Foss High School
Spring - Summer 1989	
Paul Dzeidzic works with legislative committee to craft 1989 Omnibus Bill; convenes 6 community forums across the state	
June 1989	
	Campaign for Safe Streets becomes fully operational
Summer 1989	
	Campaign volunteers eradicate virtually all of Pierce County's gang graffiti
May 1990	
Omnibus Controlled Substance Act signed into law; Paul Dzeidzic holds implementation meetings in 22 communities	Tally shows complaints and emergency calls to police have dropped by 27,000 for the year
June 1990	
	Drug House Elimination Team becomes operational; closes 270 sites by summer 1992

State Action

Pierce County Action

December 1990

Judi Kosterman replaces
Paul Dzeidzic as drug czar

July 1991

State legislature appropriates
\$3.7 million to support CMASA
activities for 1991-1993 biennium;
federal government matches that
amount

December 1991

Annual tally shows Youth
Consortium to have served
over 89,000

July 1992

Safe Streets organizes blocks
at a rate of 30 per month

LESSONS LEARNED:

CASE STUDIES OF THE INITIATION AND MAINTENANCE
OF THE COMMUNITY RESPONSE TO DRUGS

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Executive Summary

In response to the illicit drug trade that became especially troublesome in the late 1980s and early 1990s, a remarkable community anti-drug movement has sprouted, even in some of the most afflicted neighborhoods. Citizens, armed only with their courage and imagination, have devised a variety of clever strategies and tactics to reclaim their streets and parks from drug traffickers.

A literature search and eleven on-site case studies revealed evidence of grassroots community responses to illicit drugs. This study examines a number of factors that gave rise to these community anti-drug efforts and sustained them over time.

This study focuses on efforts that were citizen-initiated and citizen-controlled. The operating assumption is that the unit of analysis in this project is the citizen anti-drug “initiative”: a collection of individuals who joined together to participate in an activity oriented against drugs. Several computerized newspaper and magazine indices were used to identify 170 articles about neighborhoods and drugs that were published between January 1986 and June 1990. These articles described 218 individuals or groups in twenty-five states and the District of Columbia that had planned or participated in a grassroots anti-drug activity. Based on several select criteria, as well as information gleaned from telephone interviews, seven case study sites were chosen: Ad Hoc Group Against Crime (Kansas City, MO); Allerton Neighborhood Anti-Crime Committee (Bronx, NY); Brotherhood Crusade (Los Angeles, CA); Fairlawn Coalition (Washington, DC); Hill Street Crime Watch Committee (Boston, MA); United Neighbors Against Drugs (Philadelphia, PA); and Whittier Block Watch (Denver, CO). To this sample were added cases that had been prepared for a 1990 National Institute of Justice-sponsored pilot study of community responses to drugs: Philadelphia Anti-Drug Coalition (Philadelphia, PA); REACH (Detroit, MI); Stella Link Revitalization Coalition (Houston, TX); and The Blockos, 210 Stanton, At-Taqua Mosque, and Umma (Manhattan and Brooklyn, NY). The case studies are the foundation of this study.

Community anti-drug efforts show wide variations in institutional robustness and in the breadth of approach to drug problems. The more comprehensive efforts — those that are able to develop and operate from institutional strength, see drug problems from a variety of perspectives, have access to a spectrum of resources, and connect responses to broader neighborhood quality of life issues — seem more likely to perdure and to keep citizens effectively together around other issues that negatively impact them. Despite general agreement among organizers and researchers that anti-drug efforts addressing a variety of related problems from a more comprehensive perspective are more desirable, citizens do not always aspire to create robust and long-lasting institutions. The informally organized efforts of citizens also offer an important drug-fighting capacity.

The hallmark of the “new” citizen drug-fighting initiatives is an unprecedented shift in the locus of responsibility for dealing with the problem away from the formal, constituted authority of the police department to the citizens themselves. Generally, the citizens form partnerships with police and city agencies, in which they demand and play an integral role.

When citizens take responsibility for the neighborhood drug problem, they challenge the conventional idea that more police protection is the only way to suppress crime and drugs. Redefining their responsibility to address the problem often creates the opportunity to develop novel approaches to drug fighting. If Washington, DC's Fairlawn Coalition had agreed with the prevailing wisdom that the principal problem facing the neighborhood was that the police response was inadequate to address the growing drug trade, there would have been little for them to do beside clamor for more police services. Instead, the Coalition members decided that the principal problem was a failure to communicate citizens' stake in the neighborhood to drug traffickers. In Houston, the diagnosis of the problem by police and the Stella Link Revitalization Coalition led to the development of an integrated strategy to beat the drug market there. Police worked to reduce drug demand rather than drug supply — without utilizing arrests — while community members improved the physical appearance of the community to create an environment that looked less neglected and that offered traffickers fewer convenient places to do business.

The level of violence endemic to the local drug market often translates into the level of fear in the neighborhood. Some drug markets create so much fear among residents of the community that the ability to mount a community response is severely compromised. The Boston and Los Angeles cases provide compelling examples of the way that drug-related violence can profoundly decrease citizens' willingness and ability to organize effectively against drugs. In both Boston and Los Angeles, citizens' expectations about the risks they would run as drug fighters restricted the kinds of activities that they felt they could safely undertake.

Other markets, though they may engender some fear among residents, do not have such a chilling effect on citizen action. In the Washington and two Philadelphia initiatives, citizens took to the streets in their effort to fight drugs, placing themselves in a most vulnerable position. In Washington, citizen drug fighters patrolled the streets in small groups. In Norris Square, Philadelphia, violent attacks on two key participants initially quieted United Neighbors Against Drugs' (UNAD) anti-drug organizing efforts. But later, following a path blazed by the Philadelphia Anti-Drug Coalition, citizen activists in Norris Square set up late-night vigils on street corners where drugs were traded. In each of these examples, a doggedly persistent citizen presence on the street managed to effectively close down a street-level drug market.

Community efforts that are specifically and primarily focused on drugs are tenuous by nature. Rather than robust, durable, and well-established corporate entities, community anti-drug groups are often small, informal associations. Groups like Manhattan's Blockos or Denver's Block Watch stay in existence only long enough to achieve their objectives. Others, like Philadelphia's UNAD, have dormant periods, either as a result of their own success or because their members were intimidated by threats and violence. Dormancy can represent a state of readiness, in which the community capacity for drug fighting exists but is not currently mobilized.

It is surprising that citizens who live in neighborhoods that have suffered many of the atomizing effects of drugs, crime, fear, and disorder often possess sufficient leadership and local, institutional, and political resources to enable the community to fight back. Some community drug fighters have previous professional experience battling community problems, while others are concerned citizens who simply have had enough of the effects of the drug problem on their neighborhood.

Community institutions also step forward to provide resources, including use of telephones, meeting space, and photocopy machines. Citizen drug fighters need and will utilize a significant variety of unconventional resources if presented with them.

Of the resources that citizen groups utilize in their assault on drugs, the police play a particularly pivotal role. Because citizens and police share a common interest in the reduction of crime, drugs, and disorder in the neighborhood, police and citizens seem like natural allies. Unfortunately, many problems plague the relationship between police and citizens. The relationship often is established almost by chance, with little coordination or thought on the part of the police. However, when police listen to and begin to work with citizens, early reservations often give way to hearty enthusiasm. "Before the project, I felt it was my sole responsibility to clean up the drug dealers," said a Houston police sergeant. "Now I have a different concept. I don't think any of it will work, unless you have community involvement." A conventional law enforcement approach, in which police retain all the power and responsibility for fighting drugs and crime, is likely to undermine citizen initiative and contribute to the persistence of drug trafficking in the neighborhood.

The community is under-utilized as a resource because many public agencies, particularly police departments, think of working with the community on what are considered "soft" problems rather than "tough" problems like drugs. These case studies demonstrate, however, that citizens are valuable and creative partners in the effort to rid communities of drugs.