Examples of Crime Prevention Projects

This document provides examples of crime prevention projects that are currently being implemented across Canada or that were developed in the past. The projects are a mix of first-level, second-level and third-level crime prevention, and many projects are a combination of first-level and second-level crime. The projects respond to one or more of Ungaluk Funding Program priorities. This document also provides examples of larger scale initiatives, such as treatment centres and holistic health programs.

All projects listed may not necessarily fit into the Ungaluk Funding Program criteria and therefore they are only to provide guidance on what is a promising crime prevention project. If the applicant wishes to develop a similar project to the ones listed below, the applicant will have to determine for him/herself if the project fits into the Ungaluk Funding Program.

FIRST-LEVEL CRIME PREVENTION

PROJECT VENTURE

First-level crime prevention

Issue: Youth at risk

Sponsoring organization : National Indian Youth Leadership Project (NIYLP)

Description: The Project Venture program is an outdoor youth development intervention that has proven to be extremely effective in preventing substance abuse by Aboriginal youth. Based on traditional Aboriginal values such as family, learning from the natural world, spiritual awareness, service to others, and respect, Project Venture's approach is positive and strengths based. It seeks to reduce negative attitudes/behaviours by helping youth develop a positive self-concept, effective social interaction skills, a community service ethic, an internal locus of control, and decision making/problem-solving skills. The central components of the program include classroom-based activities conducted across the school year; weekly after-school, weekend, and summer skill-building experiential and challenge activities; immersion summer adventure camps and wilderness treks; and community-oriented service learning and service leadership projects throughout the year.

The target population for the Project Venture program is Aboriginal youth in grades 5 through 9. However, this program can be applied to youth in grades 4 through 12. Youth who could benefit from a positive youth development experience/process are identified by teachers, counselors, social workers, etc.

The main goals of the Project Venture program are to: prevent substance abuse among

Aboriginal youth; engage youth in positive projects; develop leadership skills among Aboriginal youth; and develop and improve social skills as well as decision-making and problem solving skills.

The Project Venture program uses 4 different components:

1. Classroom-Based Activities:

In class-activities are divided into about 20 to 25 sessions delivered throughout the course of the school year. Each session lasts approximately 1 hour.

Through the classroom component, a smaller number of youth are recruited and enrolled into the program's community-based activities (including outdoor adventure-based experiential activities, adventure camps and treks, team/trust-building exercises, and other increasingly challenging outdoor activities).

2. Outdoor Activities:

Each week, after-school activities such as hiking and camping are organized (for approximately 2-3 hours). These adventure-based activities challenge youth and help them to develop problem solving and social interaction skills as well as a sense of responsibility. Outdoor activities also take place on weekends.

3. Adventure Camps and Treks:

During the summer, youth participate in adventure camps and wilderness treks that last from 3 to 10 days, depending on the age of the youth. Elders and positive role models accompany participants throughout these activities.

4. Community-Oriented Service Learning:

Youth complete approximately 150 hours of community-based activities.

These activities include meaningful service learning opportunities such as working with Elders or creating art projects for the community to enjoy (4 service-learning projects per year). These activities are designed to help youth develop leadership skills.

Evaluation studies of the Project Venture program have shown the following:

- compared with a control group, participants in the program initiated first substance use at an older age, significantly reduced lifetime alcohol and tobacco use, the frequency of inhalant use, and 30-day alcohol, marijuana and other illegal drug use;
- program participants also demonstrated less depression and aggressive behaviour, improved school attendance and improved internal locus of control and resiliency;
- the program leads to reductions in peer drug use; and
- among middle school females participating in Walking in Beauty, reductions in alcohol use in the past 30 days, stress related to drug use, future intentions to use drugs, perceived harm from drug use and attitudes toward drug use improved.

LEADERSHIP AND RESILIENCY PROGRAM (LRP)

Issue: Youth at risk

Sponsoring organization: Fairfax-Falls Church Community Service Board, Virgina, U.S.

First-level crime prevention

Description: The Leadership and Resiliency Program (LRP) attempts to enhance youths' internal strengths and resiliency while preventing involvement in substance use and violence.

The program is designed to:

- increase students' perceptions of competence and self-worth;
- improve participant identification with positive roles;
- reduce disciplinary actions in school;
- improve participants' communication and refusal skills;
- increase knowledge of and negative attitudes about substance abuse and violence
- increase community involvement in promoting the healthy development of youth and the valuing of adolescents.

Method

- The program has four components:
 - adolescent group meetings for referred youth;
 - o community service with abused and neglected animals;
 - o performance of skits for young children
 - outdoor adventure programming

For each component there is a curriculum that provides a program description, specific descriptions of several group activities, sample forms and releases, required supplies and replication tips.

- The program is delivered after school;
- LRP requires a partnership between a high school and a substance abuse or health service agency as schools work with the agencies to identify program participants;
- Participants attend weekly in-school resiliency groups lead by a facilitator throughout the program;
- LRP students are expected to participate at least weekly in community service activities (working with animals, community beautification, skit project); and
- While there are no specific interventions for parents, communication occurs on an ongoing basis between staff and parents.

Additional Information

For best results, students should enter the program early in their high school career and remain in the program until graduation. However, participants may enter the

program at any time;

- Implementation requires that youth participate in all three program components over the course of 5 months to 1 year for each of the 2-4 years they are in the program;
- The model is developed for use in multiple settings: rural, urban, suburban;
- The start-up period for the program is generally 4 months; and
- Training in program implementation is required and a licensing agreement must be purchased in order to implement LRP.

Evaluation

A pre-test and post-test evaluation demonstrated that program participants realized:

- 75% reduction in school suspensions;
- 47% reduction in juvenile arrests;
- 60-70% increase in school attendance; and
- 100% high school graduation rates.

LIFE SKILLS

TRANING (LST)

First-level crime prevention

Issue: Youth at risk

Assistance and training provided by: National Health Promotion Associates, Inc.

Description: Life Skills Training (LST) is a school-based prevention program that targets the early drug and alcohol use of adolescents. LST mainly focuses on adolescents in junior high school (grades 6 and 7 - Youth aged 12-15). The program was primarily developed for use in middle-class schools with mainly Caucasian children; however, the efficacy of LST has been demonstrated to transfer successfully to inner-city ethnic minority populations.

The main goals of the LST program are to:

- teach prevention-related information;
- promote anti-drug norms;
- teach drug refusal skills; and
- foster the development of personal self-management skills and general social skills.

Method

The LST program does not specifically teach students about drugs. Instead it focuses
on educating them on three components found to promote drug use: drug resistant
skills, personal self-management skills, and general social skills. Research has shown
that adolescents with high skill levels in each of these components are less likely to

use drugs and alcohol and they are less likely to engage in high-risk behaviours.

- Drug resistant skills: teaches students about misconceptions about drugs and alcohol and how to recognize these misconceptions. Additionally, through practice, students learn skills that help them to resist pressure to use drugs.
- Personal self-management skills: teaches students to examine their selfimage, gain insight about their skills, set goals for their future, track their progress, embrace personal challenges, and analyze problem situations and learn how to react to them.
- o **General social skills:** teaches students to overcome shyness, gain communication skills, develop assertiveness, and to realize that there are other choices in problem situations other than passivity or aggression.
- The program lasts for three consecutive years. During the first year, the students complete 15 lessons, then 10 in the second year, and 5 in the third year.
- LST is primarily implemented by one or two teachers, who have undergone training with the National Health Promotion Associates, in a classroom setting. The program takes the form of a single course.

Additional Information

- The core LST components consist of self-image and self-improvement; decision making; smoking, marijuana, and alcohol myths and realities; smoking and biofeedback; advertising awareness; coping with anxiety; communication skills; social skills; and assertiveness;
- LST has been tested over the past 25 years in a range of small studies to large-scale randomized trials. However, the program was originally developed to prevent tobacco use among students and then adapted to encompass the prevention of a variety of drugs among different ethnicities; and
- Teachers may use infusion to incorporate the drug prevention knowledge of LST with the basic subjects in a school curriculum (e.g. English or Math).

Evaluation

- Controlled trials of the LST program have demonstrated a reduction in the use of nicotine, alcohol, and marijuana among adolescents (Mackillop et al, 2006); and
- Evaluations of LST have demonstrated that the program has resulted in sustained positive outcomes at one year, three years, and six years.

KWANLIN DUN FIRST NATION HEALTHY FAMILIES PROGRAM

Issue: Families at risk

First-level crime prevention

Location: Kwanlin Dun First Nation, Yukon

Sponsoring organization: Kwanlin Dun First Nation Health Programs

Description:

The Kwanlin Dun First Nation (KDFN) Healthy Families Program serves the Kwanlin Dun First Nation, a community of approximately 1,200 people in Whitehorse. Members of other First Nations living in the Whitehorse area are also welcome. The KDFN Healthy Families Program is based on the U.S. Healthy Families program model, but it has been adapted to meet the needs of First Nations families.

Home visits are the core of the program. Women are encouraged to enter the program when they have reached their third month of pregnancy; and it is not limited to first-born children. A Healthy Families worker offers intensive support during regular visits, which takes place from twice a week to bimonthly, depending on the family's level of need. The worker builds a trusting relationship with the family and offers support that is linked to the family's strengths, needs and level of risk.

Workers discuss with parents about how to promote the healthy growth and development of their children. They support parents to adopt positive ways to interact with their children, such as reading to them. Workers also focus on parents' personal development and skills, and work with them to set goals. When needed, workers are prepared to talk about any issue that affects the family including alcohol, drugs or family violence.

They provide referrals to other programs and resources available in the community as well as practical support such as transportation to and from counselling sessions and medical appointments. The program is available to the family until the child reaches age 5. KDFN Healthy Families Program is one of three Healthy Families programs in Canada, which have been evaluated over a three-year period through the National Crime Prevention Strategy.

FIRST-LEVEL AND SECOND-LEVEL CRIME PREVENTION

The Ally Intervention

Program

Issue: Youth and families at risk and in difficulty

First-level and secondlevel crime prevention

Model program

For more information contact the: National Crime Prevention Centre (Public Safety Canada)

Description: The Ally Intervention Program is an intervention program intended for elementary school students aged 8 to 12 years old who exhibit behavioural problems at school and at home and are considered to be at risk of school and social maladjustment. It was designed to improve the range of social and interpersonal problem-solving skills for these individuals. To be beneficial in the long term, this type of program requires the direct involvement of the people who have the most impact in the lives of youths: family, school, and peers. The Ally Intervention Program makes it possible to intervene in a consistent way that is better suited to life circumstances, and to foster a sense of security in youths while creating a form of solidarity between parents and the school.

The main goal of the Ally Intervention Program is to prevent the appearance and the aggravation of behavioural problems in school-age children. Its other main objectives are to improve:

- the potential for youths with behavioural problems to help them better adapt at school (by focusing on the development of cognitive, social and behavioural skills);
- the parents' potential to help their children better adapt at home (by strengthening parenting skills);
- relations of friendships with peers (by preventing the association with deviant peers); and
- communication and consistency between the various agents of education (teachers, professionals, case workers) working with the troubled youths.

Participants are selected for participation in the program based on indicators such as aggressiveness, opposition, provocation, difficulties in social relations, the attribution of hostile and negative intentions to others, social rejection by peers, and affiliation with deviant peers. Participants must demonstrate a minimum of functional skills which enable them to benefit from group intervention.

The Ally Intervention Program features 2 intervention components:

Child component: in this first component, children with behavioural problems and some peer-helper classmates participate in a program that builds social and interpersonal problem-solving skills through 16 meetings with the children, including roughly 30 activities to help them learn social

behaviours such as controlling their emotions and conflict resolution strategies. The suggested ratio is 6 peer-helpers for 6 children with problems, although 1 peer may be paired with 2 students in his or her class.

Parent component: the second component consists of 15 2-hour meetings with parents to improve their parenting and educational skills, and foster their collaboration with the school environment. This includes 30 activities that address various themes, such as managing difficult behaviour, resolving conflicts, and negotiating.

Evaluation studies of the Ally Intervention Program have shown the following:

- participants seek more positive solutions to conflicts (student's evaluation) and are better able to resolve conflicts and show more pro-social behaviours (teacher's evaluation) than their comparative group counterparts;
- girls with behavioural problems had more benefit from the program than boys, and girls also improved their ability to control their emotions and had improved behavioural self-regulation; and
- positive effects were observed in the school environment as perceived by students with problems including a drop in victimization in girls, an increased feeling of security in girls and a greater perception of support for students with problems.

SNAP® (Stop Now and Plan)

Issue: Youth and families at risk and in difficulty

First-level and secondlevel crime prevention

Model program

For more information contact the:
National Crime Prevention Centre (Public Safety Canada)

Description: SNAP® (Stop Now and Plan) is an evidence-based, cognitive behavioural family-focused model developed at the Child Development Institute (CDI), Toronto, Canada more than 25 years ago. The SNAP® model provides a framework for effectively teaching children and their parents' self-control and problem-solving skills. The SNAP® model framework has been incorporated into various SNAP® programs based on needs and risks of different populations of children, youth, families, and communities such as the SNAP® Boys (SNAP® Under 12 Outreach Project; aged 6 to 12); SNAP® Girls (SNAP® Girls Connection, aged 6 to 12), SNAP®

for Schools (generally elementary school), SNAP® for Youth Outreach Program (aged 12 to 17) and SNAP® for Youth in Custody. The primary goal of the SNAP® program is to keep at-risk boys and girls in school and out of trouble. The other objectives are to:

- increase emotional-regulation and self-control skills (children and their parents);
- reduce aggression, criminal behaviour and antisocial behaviour;
- increase social competency;
- prevent future criminal behaviour;
- improve academic success by decreasing behavioural issues at school;
- engage high-risk children and their families in service;
- increase effective parent management skills; and
- connect children and parents to community-based resources.

The SNAP® program combines interventions that target the child, the family, the school, and the community. The program uses a variety of interventions: skills training, training in cognitive problem-solving, self-control strategies, family management skills training, and parent training.

The SNAP® program includes a number of service components available to children and families based on their level of risk and need. These are:

- **SNAP® Children's Group**: focuses on teaching children self-control and problem solving skills. All SNAP® children attend SNAP® Boys or SNAP® Girls Groups once a week for 90 minutes for at least one 12-week consecutive group session.
- SNAP® Parent Group: helps parents learn self-control and problem solving skills and effective child management strategies with a special emphasis on monitoring skills. Tips for Troubled Times and Stop Now And Plan Parenting (SNAPP) are parenting resource tools developed by CDI for use in the SNAP® Parent Groups.
- Individual Befriending/Mentoring (IB): provides children with individualized support with a SNAP® Worker to enhance skills learned in the SNAP® Children's Group and goal attainment. Children are also connected to volunteers to help them join structured recreational activities within their community.
- Stop Now And Plan Parenting (SNAPP): Individualized Family Counseling. It helps families unable to attend the parent group and/or for families who need additional parenting support. Continuing service after the parent group ends may take the form of ongoing individual family counseling or monthly Family Support

Nights.

- **Girls Growing Up Healthy (GGUH)**: It is an 8 session mother-daughter group focused on enhancing relationship capacity and physical and sexual health.
- Leaders in Training Group (LIT): a group component that is
 offered in both the boys and girls programs. It is for youth who
 have completed the core components of the program and have
 demonstrated positive change, but continue to be at high risk of
 involvement in anti-social behaviours. Staff provide support in
 order to prepare at-risk youth for self-sufficiency, improve their
 workforce career trajectories and reduce their involvement with
 the law.
- **School Advocacy/Teacher Support**: ensures that SNAP® children receive the best possible education. Teachers of all SNAP® children are contacted at the start of the program to introduce the program and offer behaviour management support if needed.
- Long Term Connections/Continued Care: families may continue to be involved in all components of the SNAP® as long as there is a need and interest. In addition to previously listed components this may also include activities such as SNAP® Parent Problem Solving Groups and participation as a Peer or Parent Mentors.
- **Crisis Intervention**: available to assist parents and children involved in the SNAP® program to deal with challenging situations as they arise and/or referral to appropriate crisis services.
- The Arson Prevention Program-Children (TAPP-C): offered to children with fire interest or fire setting as a presenting problem.
- Victim Restitution: activities that encourage children to apologize to their victim, redress mischief and begin to learn how to take responsibility for their actions. Activities may include an apology letter to a victim or community service.
- Homework Club/Academic Tutoring: provides sessions for children functioning below grade level. Weekly, 1 hour tutoring sessions with teachers or specially trained volunteers are held in the child's home or community.

| Strengthening Families Program (SFP) | Issue: Youth and families at risk and in difficulty |
|---|---|
| First and second-level | |

crime prevention

Model program

For more information contact the:
National Crime Prevention Centre (Public Safety Canada)

Description: The Strengthening Families Program (SFP) is an internationally recognized evidence-based parenting and family strengthening program for families of all risk levels. SFP has been found to significantly reduce problem behaviours, criminal behaviour, and alcohol and drug abuse in children and youth and to improve social competencies and school performance. Child maltreatment also decreases as parents strengthen bonds with their children and learn more effective parenting skills.

SFP has many versions, including programs for parents and children ages 3-5, 6-11 and 12-16 in higher risk families.

SFP includes parenting skills, children's life skills, and family skills training courses taught together in 2-hour group sessions followed by a meal that includes informal family practice time and group leader coaching. SFP was designed in 14 sessions to assure sufficient dosage to promote behaviour change in high-risk families.

The goal of the SFP is to increase family strengths and resilience and reduce risk factors for problem behaviours in high risk children, including behavioural problems, and emotional, academic and social problems. The other main objectives of the SFP are to:

- reduce youths' behavioural problems (violence, delinquency, aggression, etc.);
- decrease the use and temptation to use drugs, alcohol and tobacco;
- enhance children's social and life skills;
- improve parenting skills; and
- increase family cohesion, communication and organization.

The target population for the SFP 6-11 and SFP 12-16 programs are high-risk children and youth aged 6 to 16 years old as well as their parents or caregivers; parents/caregivers include biological parents, step- and adoptive parents, foster parents, and grandparents. The SFP 6-11 targets children and youth aged 6 to 11 years old and SPF 12-16 targets youth aged 12 to 16 years old.

The SFP consists of child/youth sessions, parent sessions and parent and child practice time in the family sessions to develop positive interactions, communication, and effective discipline:

 Child/Youth Sessions: communication skills to improve parents, peers, and teacher relationships, hopes and dreams, resilience skills, problems solving, peer resistance, feeling, identification, anger management and coping skills.

- Parenting Sessions: teach parents to interact positively with children such as showing enthusiasm and attention for good behaviour and letting the child take the lead in play activities, increasing attention and praise for positive children's behaviours, positive family communication including active listening and reducing criticism and sarcasm, family meetings to improve order and organization, and effective and consistent discipline including consequences and timeouts.
- Family Practice Sessions: these sessions allow the parents and children time to practice what they learned in their individual sessions in exercises. This is also a time for the group leaders to coach and encourage family members for improvements in parent/child interactions. The major skills to learn are: Child's Game similar to therapeutic child play where the parent allows the child to determine the play or recreation activity, Family Meetings and effective communication exercises, and Parent Game or effective discipline. Home practice assignments improve generalization of new behaviours at home.

Evaluation studies of the SFP have shown the following:

- significant reductions in tobacco, alcohol, and drug initiation and use among the older children of drug abusers and in initiation and drug use among the parents;
- decreased use and intention to use alcohol, tobacco and drugs;
- better and stronger protective factors in youths, in particular social and life skills, resistance to peer pressure and improved communication;
- better parent-child relationship and family cohesion, communication and organization;
- improved parenting skills concerning, for example, parental supervision, effective consequences rather than extreme punishments, greater consistency including family customs, and closer bonds between parents and children;
- fewer youth behavioural problems (e.g., substance abuse, behaviour disorders, aggression, violence and juvenile delinquency) and emotional problems (e.g., depression and psychosomatic disorders); and

- a decrease in child abuse as parents learn to form a strong bond with their children and develop positive parenting skills.

MONCTON HEADSTART

First and second-level crime prevention

Issue: Children and families at risk and in difficulty

Location: Southeast region of New Brunswick

Sponsoring organization: Moncton Headstart

Description: Moncton Headstart has been delivering its comprehensive program for at-risk parents and their preschool children (from birth to age 5) for almost three decades. Most children in the program have significant behaviour problems or language delays. Others have experienced abuse or neglect – often because their parents are dealing with an addiction or have been involved in the criminal justice system. Moncton Headstart first addresses families' basic needs - food, shelter, clothing and safety. The program combines early intervention, parenting education and other supports to meet parents and children's higher level needs belonging/trust, love/caring and self. The early childhood education program fosters children's cognitive, social, physical and emotional development. The High/Scope curriculum encourages children to initiate and carry out their own learning activities, with support from adults. The goal is to prepare children for school by supporting their ability to think, make decisions and solve problems. Parents spend two days each month working in the early childhood program and participate in weekly group sessions, workshops and an annual retreat, all of which focus on improving parenting skills.

Other components, some open to other community members, include:

- a teaching kitchen where parents learn about nutrition, budgeting and other home management skills;
- a socially supported, subsidized housing program, which includes 12 long- term units situated in middle-class neighbourhoods;
- an adult literacy and upgrading program; and
- a recycling program that provides food, clothing and appliances to families in need and provides opportunities for parents to develop job skills.

SECOND-LEVEL CRIME PREVENTION

| ALTERNATIVE | |
|-------------|----------------------------|
| SUSPENSION | Issue: Youth in difficulty |

Second-level crime prevention

Location: Montréal, Québec

Sponsoring organization: YMCA of Montréal

Description: This project provides a program of activities for high school students in a Montréal neighbourhood who are temporarily suspended from school. The activities include workshops on problem resolution and active listening, group discussions on topics such as drug addiction and effective communication, visits to businesses and help with homework.

The project has been undertaken in cooperation with various community partners: local schools, the police force and private businesses. In its first phase, it was tested in a small number of schools grouped around a community centre. The project is now in its second phase and has been extended to other YMCAs on the Island of Montréal.

The project's main objective is to reduce the number of repeat suspensions by offering students the opportunity to make the time while they are suspended a positive experience that fosters personal development and empowerment, by putting them in an environment that encourages a sense of personal worth, the acquisition of social skills and greater respect for oneself and others.

SECOND-LEVEL AND THIRD-LEVEL CRIME PREVENTION

| Family Group | |
|-------------------|--|
| Conferencing – 'A | Issue: Youth and families in difficulty or gaining stability |

Sacred Family Circle'

Second and third-level crime prevention

Location: Edmonton, Alberta

Sponsoring organization: Native Counselling Services of Alberta (NCSA)

Description: Family group conferencing is a collaborative dispute resolution process, which empowers families to make and implement decisions regarding the care and protection of children experiencing maltreatment, or at risk of neglect and abuse.

A family conference involves a formal meeting where members of the immediate family come together with extended kin and community members to solve problems and develop care plans in a collaborative fashion. The plan, once approved by the referring caseworker, can be presented in court and/or be used to formulate the service plan.

Currently, NCSA provides facilitation services for Alberta Child & Family Service Authorities as well as for Delegated First Nations Agencies (DFNAs). The pre-conference planning phase can take anywhere from between four to six weeks. The facilitator engages family members in planning the conference, and addresses any barriers to participation. The conference usually occurs in a single day but may extend to 1.5-2 days. Cultural, spiritual or religious practices as identified by the family are incorporated into the family conference.

Family group conference objectives often include, but are not limited to the following:

- To re-establish and maintain a child's connection to their family, culture, and community for children living in care.
- To develop a concurrent permanency plan, and achieve permanency for children in care, which is defined in the Child, Youth, and Family Enhancement Act, 2004 as being 'placement other than in the care of the Director'.
- To prevent the occurrence and reoccurrence of child abuse and neglect.
- To ensure children, youth and families have a voice in the decision making process.
- To prevent children from experiencing multiple placement, either in or outside the family.
- To assist in the successful transitioning of youth into adult independence.
- To quicken the court process by presenting agreed upon plans in court or diverting cases from court. Post-conference review meetings are often held to accommodate changing circumstances

| 1 |
|---------------------------|
| and achieve plan goals. |
| i and achieve plan goals. |

THIRD-LEVEL CRIME PREVENTION

If the applicant is interested in developing a project for Aboriginal offenders using Section 81 and Section 84 of the Corrections and Conditional Release Act, please visit this site for more information:

http://www.csc-scc.gc.ca/aboriginal/002003-3000-eng.shtml.

For examples, see: Stan Daniels Healing Centre (Edmonton), Buffalo Sage (Edmonton) and Waseskun House (Montreal).

Circles of Support and Accountability (COSA)

Issue: Youth/adult male offenders at high risk of re-offending

Third-level crime prevention

Description: COSA involves a group of 4 - 7 trained volunteers who commit themselves to support and hold accountable a person who has been detained to the end of sentence because of a sexual offence history (called core member) who is returning to the community. The Core members' participation is voluntary. The main purpose of COSA is to promote successful integration of released men into the community by providing support, advocacy, and a way to be meaningfully accountable in exchange for living safely in the community.

COSA involves the following:

- The Core member commits to openly relating to the group ("Circle") regarding identified needs;
- The Circle meets together regularly and is guided by a written and signed agreement called a covenant. Individual volunteers also meet with the core member on a daily basis and provide assistance with re-entry challenges;
- COSA volunteers are professionally supported and work in conjunction with community agencies, treatment providers like psychologists, sometimes parole or probation officers, the police, and the courts;
- Circle members receive extensive training, are continually supported, and make a one year commitment;
- COSA's key roles include:
 - o journeying through difficulties and emergencies;
 - o confronting inappropriate attitudes or behaviours;
 - advocating with treatment providers, community groups, police services and other professionals in the community;
 - o mediating community concerns; and celebrating the Core members' successes and anniversaries.

VICTIM-OFFENDER MEDIATION FOR YOUTH

Issue: Young offenders

Third-level crime prevention

Location: Belgium, France, and Sweden

Description: Victim-offender mediation has a long history in countries such as Belgium, France, and Sweden, and is based on the principles of

restorative justice. It offers the victim an opportunity, under the right circumstances, to work through the damages caused by the crime, by meeting, talking, and searching for an acceptable solution with the offender. Mediation focuses primarily on the restoration of the losses suffered.

Goals include:

- To provide an opportunity for young offenders to take responsibility and understand the consequences of their actions.
- To give the victim an opportunity to work through the damages caused by the crime by meeting, talking, and searching for an acceptable solution with the offender.

The mediation projects involve different partners, such as the police, prosecutors, social services, other local authorities, schools and victim support agencies. Since 2008, municipalities have the responsibility for making mediation available for young offenders.

The mediation process:

The young offender is offered, generally by the police, the possibility of participating in Victim-offender mediation. If he or she is interested, a mediator explains to them the proceedings, and then asks if they agree to participate. When the offender has accepted, the mediator asks the victim, following the same steps. When both parties are prepared after previous discussions with the mediator, the mediation meeting takes place. The victim and the offender discuss the crime, and describe and explain their respective versions of the event. Both parties can be accompanied by their legal guardians or other support persons. During the meeting the participants, supported by social services, try to reach an agreement by defining how the offender will make up for the damages he/she inflicted. This can be achieved through work, economic compensation, or a contract binding the offender's future behaviour. These agreements are legally binding, even verbal agreements. To foster Victim-offender mediation the prosecutor takes the young offender's participation in a mediation process into consideration.

Outcomes/Outputs:

In 2006, mediation involved more than two-thirds of the entire Swedish offending population, varying from small projects to regional initiatives. The 2008 municipal obligation to propose mediation to young offenders will certainly extend this process further. 74% of the mediation process has been deemed satisfactory, 40% of which through a contractual agreement. The majority of the offenders concerned were between the ages of 14 and 17 years old, involving a high proportion of boys. Mediation was largely applied in cases of shoplifting, assault and vandalism.

The Male Adolescent Program for Positive Sexuality (MAPPS)

Issue: Young offenders

Third-level crime prevention

Location: Melbourne, Australia

Description: This program is an alternative to imprisonment, and focuses on the rehabilitation of convicted youth sex offenders (aged 14-17) and the reduction of violence in the community. The program emphasizes the importance youth sex offenders taking responsibility and making the necessary changes for controlling their behaviour with the goal of building a crime-free future. Participation is voluntary, but most offenders are required to attend as a condition of their court order. Those who are unable to function in a group setting or to participate in interventions due to severe psychiatric illnesses or disability are referred to agencies that are equipped to meet their needs.

MAPPS is based on a relapse prevention model. Participation is usually for the duration of the court order, averaging around 11 months of weekly attendance. Group therapy is the preferred treatment mode, although individual and family sessions are conducted when appropriate. To account for adolescents' developmental needs and deficits, interventions tend to be multi-systemic and holistic. Attempts are made to establish a support network with good communication channels between MAPPS staff, caseworkers and families or caregivers, who can provide support and supervision when the offender re-enters the community. Services for parents and caregivers include information nights, seminars, support groups and result attendance at the group therapy program.

Treatment was associated with a reduction in sexual re-offending:

- Only five percent of the 138 offenders committed further sexual offences;
- Treatment completers were over eight times less likely than non-completers to re-offend sexually (0.7 percent versus four percent);
- Treatment completers were six times less likely to re-offend nonsexually (32 percent versus five percent);
- Treatment completers were twice as likely not to reoffend at all (27 percent versus 14 percent); and,
- Over half (53 percent) of all clients had no recorded offences.

The Intensive After Care Program (IAP)

Issue: High-risk young offenders

Third-level crime prevention

Description: The IAP targets high-risk young offenders and promotes the identification of high-risk offenders. There is an emphasis on the preparation, transition, and re-entry of these youths back into the community following a period of secure confinement. The model is an example of "re-integrative confinement", an imprisonment experience that includes a major focus on structured transition and a follow-up period of aftercare characterized by both surveillance and service provision in the community.

The stages of the process include: (1) pre-release and preparatory planning during confinement; (2) structured transition that requires the participation of institutional and aftercare staff prior to, and following re-entry into the community; and, (3) long-term re-integrative activities that ensure adequate service delivery and the necessary level of social control.

ADDITIONAL THIRD-LEVEL CRIME PREVENTION INITIATIVES

| Aboriginal Restorative Justice Program - Onashowewin Inc. | http://www.onashowewin.com/ |
|---|--|
| Waseskun House, Montreal | http://www.waseskun.net/eng/index.html |

LARGER – SCALE PROJECTS (e.g. treatment centre, holistic health program)

| Aboriginal Legal Services of Toronto (ALST) | |
|---|---|
| | Issue: Individuals in difficulty or gaining stability |

Second-level and third-level crime prevention

Location: Toronto, Ontario

Description: ALST was set up in 1990 following a needs assessment by the Native Canadian Centre of Toronto, which showed that an agency offering legal-related programs for Indigenous people in the city of Toronto was needed. ALST provides assistance to indigenous people requiring access to legal resources, as well as information on the justice system and available options. ALST supports alternatives to the justice system as a means of preventing recidivism and dependency.

The agency offers court workers, Gladue caseworkers, a legal clinic, information on victim rights and at times intervenes in cases, among other services. Within ALST is the Toronto Aboriginal Community Council - a criminal diversion program for Indigenous offenders (youth included). It removes offenders from the criminal justice system to develop a plan with members of the Indigenous community to address the issue, root causes, and reintegrate the offender into the community.

For more information:

http://www.aboriginallegal.ca/

Tungasuvvingat Inuit (TI)

First-level, second-level and third-level crime prevention

Issue: Inuit at risk, in difficulty or gaining stability

Location: Ottawa, Ontario

Description: Tungasuvvingat Inuit, an organization geared toward empowering and enhancing the lives of Inuit, was established in 1987. TI offers a wide array of integrated services to Inuit:

The Family Resource Program offers services to families with children under the age of six who are at risk. This program offers advice on child development and nutrition, cultural development and retention, parenting and caretaking skills, and community development and healing. Parent Relief Care is also

available.

The Health Promotion Program offers services to all Inuit, regardless of age. The program encourages healthy living by educating clients about nutrition, physical activity, and other healthy lifestyle choices.

The Cultural Education Centre Program offers traditional Inuit activities for Inuit and all citizens of Ottawa, such as traditional sewing, cultural camps, and music events.

The Community Support Program offers various Inuit services, such as settlement assistance, agency referrals, individual support, language interpretation, short-term crisis support and emergency food assistance.

The Employment and Learning Centre assists Inuit throughout Ontario in finding employment. The Employment and Training Program helps Inuit define their employability skills, their vocational and educational needs, and assists them with job placements. Services offered include employment counseling, reading and writing skills, resume and cover letter assistance, computer and telephone access, computer skills, human relations skills and conflict resolution workshops, to name but a few.

The Tungasuvvingat Inuit Family Health Team offers culturally appropriate health care to Inuit in Ottawa. Primary care is provided to the patients, and particular attention is given to Inuit health priorities, such as Tuberculosis, Sexually Transmitted Infections, Mental Health, Pre-Post Natal, Hepatitis, Diabetes, Complex Morbidity, Mortality, and Traditional and Complementary Medicine. A Health Research project was also undertaken in collaboration with the Ontario Ministry of Health and Long Term Care.

The Mamisarvik Healing Centre offers culturally appropriate services to Inuit in need of addiction and trauma treatment. The Centre runs a 53-day treatment program to Inuit over 18 years of age suffering from addiction or mental health problems stemming from physical and sexual abuse. Support is also offered to survivors of Residential Schools.

The Transition House is located next to the Mamisarvik Healing Centre and offers accommodation for up to ten Inuit per year. An abstinent environment is provided for Inuit struggling with addiction and trauma.

The Housing Support Program offers assistance to Inuit in need of housing, medical, legal and financial advice. Housing Support Workers assist Inuit in finding accommodation, filling out forms, and also provide assistance in times of crisis.

For more information:

http://www.tungasuvvingatinuit.ca/eng/ti.htm

ADDITIONAL PREVENTION PROJECTS CAN BE FOUND AT THE FOLLOWING SOURCES:

| International Centre for the Prevention of Crime | http://www.crime-prevention- |
|---|--|
| (ICPC) International Compendium of Crime | intl.org/fileadmin/user_upload/Publications/Intern |
| Prevention Practices (2008) | ational Compendium of Crime Prevention Pract |
| | ices ANG.pdf |
| National Crime Prevention Centre (NCPC) | Volume I : |
| Promising and Model Crime Prevention Programs | http://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/p |
| (2008) | rmsng-mdl-vlm1/prmsng-mdl-vlm1-eng.pdf |
| | Volume II : |
| | http://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/p |
| | rmsng-mdl-vlm2/index-eng.aspx |
| Pauktuutit - Violence and abuse | http://pauktuutit.ca/abuse-prevention/ |
| prevention initiatives | |
| The Aboriginal and Torres Strait Islander Healing | http://healingfoundation.org.au/wordpress/wp- |
| Foundation (Australia) - The Intergenerational | content/uploads/2013/05/Implementing-Healing- |
| Trauma Initiative | for-Children-and-Young-People-Putting-Evidence- |
| | Into-Action.pdf |