Controlling risks in the safe city: The rise of pre-emptive practices in law enforcement, public surveillance and mental health and addiction care (1970–2020)

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Abstract
This article describes pre-emptive practices in law enforcement, public surveillance and mental health and addiction care in the Dutch city Amersfoort and the Netherlands in general between 1970 and 2020. These developments are driven by top-down as well as bottom-up interactions on an urban level. The development of this ‘preventive gaze’, though intensified by 9/11, has deeper origins in the urban crisis: the struggle against communal crime and the heroin epidemic in circumstances of austerity encouraged a shift from post-hoc repression to prevention of public nuisance. This shift is analysed in light of the concepts of the risk society, the culture of control and the Disneyisation of inner cities, and its legal and moral implications are assessed. Aiming at unknown future risks, the ‘precautionary culture’ itself risks encroaching on the freedoms of citizens, ultimately making cities less safe.

Keywords
culture of control, Disneyisation, precautionary criminal law, prevention, risk society, urban crisis

本文叙述了1970年至2020年间荷兰城市阿默斯福特（Amersfoort）以及整个荷兰在执法、公共监督、精神健康和戒毒方面的先发制人的做法。在城市层面，这些发展是由自上而下和自下而上的互动推动的。这种“预防性注视”的发展虽然因9/11事件而加剧，但其更深层次的根源在于城市危机：在紧缩环境下打击社区犯罪和贩毒的斗争，推动了事后镇压到公害预防的转变。我们基于风险社会、控制文化和市中心迪士尼化等概念，对这一转变进行了分析并对其法律和道德影响进行了评估。“预防文化”针对的是未知的未来风险，其本身就有侵犯公民自由的风险，最终会降低城市的安全性。

关键词
控制文化、迪士尼化、预防性刑法、预防、风险社会、城市危机
Introduction

Contemporary society is dominated by an awareness and fear of safety and security risks, as well as by the urge to prevent these risks as much as possible (Beck, 1992 [1986]; Garland, 2001). Many authors argue that this ‘preventive gaze’ (Peeters, 2013) is caused by the terrorist threat that gripped the Western world after 9/11 (e.g. Borgers and Van Sliedrecht, 2009; Zedner, 2007). But we make a different claim, arguing that, at least in the Netherlands, it is more deep-rooted in the ‘urban crisis’ of the 1970s–1980s. Urban crises can be defined as transition phases in the life of cities, posing significant problems for both residents and policy makers (McDonald, 2008: xv).

In American literature, the quintessential example is ‘the’ urban crisis, denoting a process of post-war urban deindustrialisation, suburbanisation, unemployment and deterioration, with concomitant social challenges, such as high crime rates and drug nuisance, notably concerning the remaining population, disproportionately consisting of ethnic minorities and senior citizens (McDonald, 2008: xv). Its history and prehistory, notably in relation to discrimination against Afro-Americans, are well-studied (Felker-Kantor, 2018: 1–18; Sugrue, 1996). Recent literature argues the ‘urban crisis’ was also a moralising narrative and imagery, underpinning zero-tolerance policing and an endemically racist carceral state in the 1990s (Hackworth, 2019: 55; Weaver, 2017: 10–11).

In north-west Europe, this urban crisis had some comparable features (Chronopoulos and Soffer, 2017: 856; Randolph, 2017: 165), with high crime rates (McClain, 2001: 229) but in general less suburbanisation, depopulation and unemployment (Beauregard, 2015: 918). Municipal authorities adopted the ‘urban crisis’ discourse (Le Galès, 2003: 248) but the study of especially everyday criminal justice and prevention practices within Western European cities in response to the perceived crisis is still developing (Arnold et al., 2020: 196; Weinhauer, 2013: 35–36). We contribute to this by showing how the precautionary agenda was intimately interwoven with mental health and addiction care policies in the Netherlands (Blok, 2014) and thus comprised more than a carceral state (Dolovich, 2011: 262; Gottschalk, 2009: 463) as it was not limited to law enforcement and public surveillance. These policies converged, rather than representing conflicting rationalities as in Baillergeau (2014: 363). Through an integral approach in the domains of delinquency and mental health, these policies combine elements of exclusion and coercive inclusion, into a peculiar Dutch culture of control. This precautionary culture was also stimulated by late 20th century post-industrialisation, as the nightlife economy and entertainment became dominant features of inner cities (Sassen, 1991) and policy makers increasingly felt crime and public nuisance should be banned from city centres.

Other Dutch sociologists and criminologists have described the recent rise of the precautionary policy paradigm in the Netherlands (Frissen, 2013; Kortleven, 2013; Peeters, 2013; Pieterman, 2008; Terpstra et al., 2013). This article is different because it scrutinises pre-emptive practices in law enforcement, public surveillance, mental health and addiction care in the urban context of Amersfoort to analyse how and to
what extent an ‘integral’ precautionary approach of urban criminal justice and public mental health care has emerged since the 1980s. In addition, we question the tendency in the above, as well as in urban studies of precautionary practices, to emphasise the top-down, uncontested policy process (Gressgard, 2016; Pleysier, 2015). We show how these practices are often contested, also on the top level; municipal policies also regularly result from bottom-up pressure, as ‘elites or the powerful cannot completely set the tone of a specific urban social control’ (Persak and Di Ronco, 2018: 338).

We first describe the context of the Dutch and the city of Amersfoort to show their contribution to current discussions and explain our methodology. Subsequently, we describe the extent to which the preventive gaze is discernible in Amersfoort’s public nuisance practices in law enforcement, public surveillance and mental health and addiction care, and scrutinise these practices using thought-provoking social theoretical works. Finally, we explore the implications of these practices from both a moral and a legal point of view.

Case and methodology

Whereas in the USA the call for a ‘healthy city’ stands opposed to a repressive focus on law enforcement (Corburn, 2013), currently in the Netherlands crime and public health are both approached from a precautionary paradigm. While sometimes related to neoliberal concepts such as the responsibilisation of citizens (Neumann, 2019; Van Houdt and Schinkel, 2013), precaution also has independent explanatory power. Rather than merely constituting an exclusionary securitisation of public space, it also entails a subtle form of ‘coercive inclusion’. This concept, often used to describe welfare-to-work regimes (Huey, 2007: 15; Paz-Fuchs, 2008: 8), also applies to the pressuring of juvenile delinquents, drug addicts and psychiatric patients to participate in society through invasive care and prevention. While some see coercive care as correcting the pre-1990s Dutch tolerance of deviant behaviour (Duyvendak and Tonkens, 2001: 16), others point out how welfare state reform encourages coercive inclusion: to reduce costs people inflict on society, duties are emphasised (Jagt, 2010: 17). Since the 1980s, however, precaution increases government intervention, rhetoric to the contrary notwithstanding, as shown by Saumarez Smith (2019: 17). It activates both urban governments and citizens, rather than treating them merely as ‘urban outcasts’ (Wacquant, 2007).

We describe the emergence of the preventive gaze in Dutch urban policy, using local and national policy documents, minutes of council meetings, newspaper articles and secondary literature to empirically substantiate how national policy paradigms worked out in urban practice, which we analyse using the concepts of the risk society (Beck, 1992 [1986]), the culture of control (Garland, 2001) and the cultural process of Disneyisation (Bryman, 2004) in the Netherlands.

In urban studies and urban police history, the need to study small cities as well as metropolises is debated (Clark et al., 2018: 1490; Agee, 2017: 6). Amersfoort, a medium-sized city in the middle of the Netherlands, can be a representation for many other Dutch cities as a case study. The Dutch marketing bureau Whooz recently ranked its ‘averageness’ as 112 of 380 municipalities; its main demographic deviation group is young career-minded families, which grew substantially during our research period: in 1980 Amersfoort would have scored even higher (https://www.whooz.nl/dashboard-meest-gemiddelde-gemeente, 2019). This also makes its local politics more representative than those of, for example, metropolitan left-of-centre Amsterdam.
Amersfoort demonstrates that the urban crisis also hit smaller cities, sometimes even harder than metropolises. In 1988, its relative crime rate was 11th in cities above 50,000, outranking metropolitan Rotterdam, with a yearly rise between 1981 and 1987 of 7.85% on average (Berghuis et al., 1988: 3–5). Police commissioner Geerds (1986) elaborated on this by referring to Amersfoort’s growth into a ‘big city’. Conveniently located between Amsterdam and Utrecht, during the last decades its population doubled, to 156,000. Amersfoort’s high crime levels made it susceptible to a preventive repertoire of crime control, involving trends such as camera surveillance, quarantining of drug addicts and cleaning up its city centre.

Risk society and urban crisis

It is ‘a more or less established fact that we live in a risk society’ (Borgers and Van Sliedrecht, 2009: 172). Awareness and fear of security risks is dominant in contemporary Western urban societies, as well as the urge to control these risks as much as possible (Garland, 2001). The criminologist Zedner noticed a shift from a post-crime society, which perceives crime ‘principally as harm or wrongdoing, and in which the dominant ordering practices arise post hoc’, to a pre-crime society, which comprehends crime essentially as risk, with pre-emptive ordering practices (Zedner, 2007: 262). This shift leads to the criminalisation of preliminary stages of criminal behaviour, notably in post-9/11 anti-terrorism legislation (Borgers and Van Sliedrecht, 2009: 181). On the urban level, the pre-crime society is most apparent in the increasing presence of police, surveillance officers and cameras at crowded places, such as train stations, to spot suspicious behaviour and prevent crime before it happens.

The concept of ‘risk society’ (Beck, 1992 [1986]) was originally not applied to criminal justice. Beck argued that since the early 1970s technological innovation made Western society much wealthier but also produced ungraspable risks, such as air pollution, causing all kinds of environmental and public health problems. Where people used to fight over wealth distribution, they now fight over how these risks can be ‘prevented, minimised, (...) or channelled’ (Beck, 1992 [1986]: 19). An important difference between poverty and risks is that they strike all people equally: ‘poverty is hierarchical, smog is democratic’ (Beck, 1992 [1986]: 36). After 9/11, Beck argued that terrorism is similar to environmental risks in this respect (Beck, 2002: 39), as are epidemics, as we experience today (see, e.g., Abraham, 2009). If in the wrong place at the wrong time, we can all become victims.

From around 1970, many western European cities also faced a severe urban crisis. Deindustrialisation resulted in high unemployment rates and left considerable ‘brownfield locations’ (abandoned industrial properties) in or close to inner cities. In addition, many people left for suburban areas (Van der Wouden, 2016). Dutch cities were not left to their own devices; a left-wing urban renewal movement from the mid-1970s succeeded in changing governmental urban planning strategies toward conservation of housing and historical buildings in inner cities (Ligare Böhl, 2012: 30). Still, the 1980s economic crisis made it hard to prevent condemned buildings and neglect from dominating inner cities, which fell prey to an ‘epidemic’ of petty crime such as car thefts, burglaries and vandalism. Significantly, from the end of the 1970s, the Dutch word for nuisance (‘overlast’) became more and more prevalent, as digitised Dutch newspapers reveal (www.delpher.nl).

Amersfoort exemplified the situation. New districts were built to house the growing population, while the city was left with many abandoned properties, especially in the ‘no man’s land’ between its central
station and city centre. The 1981 unemployment rate was 8.4%. The city centre and adjacent working-class districts such as ‘Soesterkwartier’ and ‘Leusderkwartier’ struggled with petty crime. Burglaries had risen by 250% and car break-ins by 300% (Gemeentesecretarie Amersfoort, Eemland Archief (Amersfoort) (hereafter Gemeentesecretarie), inv.nr. 160, Kalkman report, 17 July 1981; inv.nr. 184, Memo 6 November 1985: 6).

While the real extent of the problems was up for debate, from the mid-1980s onwards, talk of crime created a moral panic (Berghuis and Wiebrens, 2013: 156) in the Netherlands and beyond (Bayrbag˘ et al., 2017: 2028), reflected in media reporting. Verbal abuse and pushing employees aside to steal from the register were common according to the management of Vroom & Dreesmann (a chain of big department stores), who specifically referred to its Amersfoort store (Telgenhof, 1986: 1). Amersfoort’s mayor begged the national government to extend its police capacity (Gemeentesecretarie 184, Letter Bert Schreuder, 30 May 1986).

The international heroin epidemic explained a portion of petty crime, with an increase in Dutch heroin users from 5000 to 30,000 between 1975 and the early 1980s (Blok, 2017: 108). In Amersfoort the increase was from c. 20 to over 70 in the early 1980s and was then expected to rise as the group including incidental users was as high as 150 (Gemeentesecretarie 160, Kalkman report). ‘Pale, ragged and desperate-looking street junkies’ were omnipresent in many Dutch inner cities (Blok, 2017: 106). As heroin became increasingly expensive, they either had to ‘stop using, or resort to begging, (…) criminal activity or prostitution’ (Blok, 2017: 120).

First, in addiction care, the policy shift from treating individuals to preventing public nuisance (Baillergeau, 2014; Eikenaar, 2017; Pleysier, 2015: 308) is notable. In the late 1970s large-scale methadone maintenance programmes were initiated in Amsterdam and later also in other Dutch regions (Blok, 2017: 122). They ensured that the synthetic substitute for heroin was freely provided to addicts. The treatment goal was ‘harm reduction’: minimising an addiction’s harm both to the individual and to society at large (Blok, 2017: 105). Some people thought it was morally unacceptable for the state to drug people to prevent public nuisance (Blok, 2014: 100). Around the year 2000, heroin-assisted treatment was introduced: heroin addicts visited a clinic several times a day to use prescription heroin in a controlled setting, a ‘key ingredient in decreasing public nuisance and criminality caused by hard-drug users’ (Blok, 2014: 105). In 2010, heroin users had completely disappeared from the streets. The heroin epidemic was declared officially over (Blok, 2014).

Contrary to larger cities, Amersfoort only hesitantly started methadone; heroin-assisted treatment remained controversial, reflecting the city’s more conservative municipal politics (Municipality Amersfoort, 2005a). Amersfoort created a so-called drug ‘user space’ only in 2004 (Amersfoort Municipal Council, 6 September 2004, here further AMC). After residents’ protests, the shelter for drug addicts was moved shortly after opening but remained in the city centre, where its clients were located (AMC, 21 December 2004).Infuriated residents packed the intended premises in black farm plastic as a humorous protest, which was eagerly picked up by the tabloid press (De Telegraaf, 2005). They feared the nuisance the shelter for drug addicts was meant to curb. Ironically, it was so successful that soon there were no longer enough addicts to keep it open and a ‘hostel’ was opened outside the city centre (AMC, 22 April 2008).

Urban petty crime created (feelings of) insecurity. The centre-right Lubbers government installed a commission headed by
social democrat MP Hein Roethof, which published an influential report stating that Dutch society’s evolution from a socially controlled and religion-dominated to a diverse, urbanised society had blurred public social norms (Roethof, 1984: 1). Roethof advised re-instating informal social control of youngsters acting from anger, boredom, mischief and bragging, which were the main culprits of urban petty crime besides drug addicts (Roethof, 1984: 17). Minister of Justice Korthals Altes used Roethof’s report for a landmark policy plan to integrally combat crime through increased repression (e.g. more prisons and patrolling) and risk prevention (e.g. strengthening the bond of youngsters with society through education and youth work) (Ministerie van Justitie, 1985: 8–9). The latter led to the nationwide introduction of so-called Halt- penalties in Dutch municipalities, which offered early-stage interventions and alternative punishment to youngsters (http://www.halt.nl).

Amersfoort’s urban planners and police referred to Roethof for their crime control plan in March 1987 (Gemeentesecretarie 184, memo 6 November 1985), which combined repression and prevention with stricter alcohol regulations in inner city bars to curtail violent confrontations with police (Gemeentesecretarie 156, 6 July 1988). Bar owners were pointed to their responsibility for keeping alcohol consumption indoors and in turn asked for tighter disturbance policies, because of the negative effect on the city centre’s reputation – notably in the central Hof square (Gemeentesecretarie 156, Letter to municipality, 11 October 1988). The police also raided coffee shops in case of public nuisance, usury or loitering youngsters. Progressive council members criticised the ‘witch hunt on coffeeshops’ (Gemeentesecretarie 160, E van Eijk, De toepassing van de Algemene Politieverordening).

The culture of control

From around the year 2000, overall crime rates dropped in the Netherlands. Nevertheless, around that time public security reached the top of the national agenda (Terpstra et al., 2013: 132). Dutch literature considers the 2002 policy document ‘Towards a safer society’ (Ministerie van Justitie, 2002), formulated during fierce discussions about crime by ethnic minorities (Downes and van Swaanningen, 2007: 55), an important step towards a ‘culture of control’ (Garland, 2001), which emotionally politicises and represses crime (Landman and Kleijer-Kool, 2016: 27). This culture of control was part of a broader late-20th-century change from a modern risk culture to a late-modern precautionary culture (Pieterman, 2008: 145). Whereas Beck described modern risk awareness, late-modern precautionary culture also entails an urge to control these risks: risk tolerance has decreased and preventing harm becomes an explicit priority (Kortleven, 2013: 414).

‘Towards a safer society’ proposed to tackle urban petty crime by preventing youth crime through cooperation between police, schools, welfare and youth care, and by allowing imprisonment of ‘persistent offenders’ for up to two years (Ministerie van Justitie, 2002: 29–32, 65–68). This was accomplished by the Reoffender Institutionalisation Measure,1 which came into force in 2004. It reflects the growing significance of ‘risk justice’, which does not primarily sanction people for what they have done but seeks to prevent them from committing future crimes (Moerings, 2016: 64), converting incarceration from the ultimate repressive instrument into an instrument of prevention. Although the measure mainly aims to reduce societal nuisance, it also contributes to solving personal problems via targeted interventions. Most detainees, however,
are not motivated to address their problems and are held under a more sober regime (Moerings, 2016: 65).

Empirical research reveals that virtually everyone to whom the Reoffender Institutionalisation Measure is applied has addiction problems (heroin or cocaine, sometimes combined with alcohol) and more than half also have psychiatric problems. Moreover, an estimated 15% of inmates held under this measure had learning disabilities (Moerings, 2016: 71). This makes it unsurprising that since 2002 municipalities, care providers and judicial partners have worked together integrally in so-called regional ‘security houses’ (Veiligheidshuizen), which focus on ‘complex’ problems, often a combination of criminal behaviour, addiction and, for example, parenting problems. They draw up a plan that usually combines punishment and care, and sometimes also involves housing organisations if neighbours frequently file complaints about unhygienic living conditions or noise. Those mainly in need of help get an individualised approach, which, if possible, coerces them into the care of health institutions (available at: http://www.veiligheidshuizen.nl). In 2017, the Amersfoort security house did not impose the Reoffender Institutionalisation Measure often: only 14 times (Veiligheids huis Utrecht en Amersfoort, 2017: 2). In 2018, nevertheless, it proposed to no longer use it as an ‘ultimatum remedium’ but as an ‘optimum remedium’ for young adult persistent offenders (Veiligheids huis Utrecht en Amersfoort, 2018: 14).

People with mental disorders may get coercive treatment in a psychiatric hospital, psychogeriatric nursing home or a care facility. The recent entry into force of the Care and Coercion Psychogeriatric and Mentally Disabled Clients Act² and the Compulsory Mental Healthcare Act³ shows a shift has taken place, similar to the abovementioned shift in emphasis from harm to risk in criminal law: they allow coercive treatment in cases of ‘significant risk of serious harm’, where the previous Act⁴ did so if ‘safety of the person concerned or the safety of others is in danger’. Coercive care may also consist of intervention care (bemoeizorg), a concept introduced in the Netherlands in 1993 (Henselmans, 1993), aimed at people who severely neglect themselves, cause nuisance or live in extremely unhygienic conditions but do not ask for or accept care. An ‘intervention team’ of social workers regularly makes home visits to gain the confidence of the clients and either offer them care or try to convince them to accept care from others (available at: www.informatielangdurigezorg.nl/bemoeizorg). Bemoeizorg has become paradigmatic in Dutch social policy (van Doorn et al., 2013: 3).

Municipal authorities also promoted a safer society through public surveillance of railway stations, shopping malls and semi-public places (for example swimming pools) with increased security risks, through camera or ‘physical’ surveillance (Ministerie van Justitie, 2002: 70). By 2005 almost every town had ‘at least one camera watching over its citizens’ (Nouwt et al., 2005: 115). Especially in city centres, camera density became quite significant. Camera surveillance has been both socially and politically accepted since the 1990s (Nouwt et al., 2005: 123). In Amersfoort, camera surveillance is used only at fixed times during the week, usually in co-operation with the police, who are warned of suspicious behaviour, for example, vandalism, pickpocketing or bicycle theft. Discussions are more about the frequency of its use than about the principle of camera surveillance itself. Occasionally, the municipality employs it more as a response to citizen demands than an initiative of the authorities (van Aalst and Van Liempt, 2011: 9; Municipality Amersfoort, 2002a; 2003: 7). According to a national police databank, Amersfoort has only 84
municipal but 286 private cameras for every 10,000 inhabitants, making it third in the country (available at: https://www.vpngids.nl/nieuws/228530-geregistreerde-beveiligingscameras-in-nederlands-straatbeeld).

Physical surveillance also increased. Police officers trained in spotting unusual behaviour are present in crowded places. In addition (publicly or privately contracted) uniformed surveillance officers, often described as the ‘extended policing family’, have become a familiar sight since the end of the 1980s (Terpstra et al., 2013: 131). Both can order people to show their ID card, which, since 1994, people must carry with them if they are 14 + years old. Since the 2000s, municipal surveillance officers also have the power to fine for issues of physical disorder, such as littering, unleashed dogs or parking violations (Eikenaar, 2017: 176). Specifically, for rail- and subway stations, a smartcard technology (‘OV-Chipcard’) has been developed for fare collection and also to increase social safety by means of card-activated access gates (Ministerie van Justitie, 2002: 56). The Amersfoort municipality has tried to prevent this use, as it preferred to keep a public, free passage through the station, but did not succeed (AMC, 17 February 2015).

In 2000, Amersfoort agreed on a stringent nightlife policy with local bar owners (AMC, 8 June 2004; Municipality Amersfoort, 2002b). Following national legislation, the city introduced pre-emptive searching in ‘hotspots’ around the city centre and problem neighbourhoods such as Kruiskamp and Soesterkwartier, in a street safety campaign involving cameras, city wardens and street patrolling, which by 2006 allegedly reduced crime (Municipality Amersfoort, 2005c: 5). Additionally, the Amersfoort police embraced the Crime Anticipation System (CAS), a predictive policing tool that statistically predicts where and when crime will likely occur (Mali et al., 2017), a year before it was rolled out nationally in 2018 (available at: www.politie.nl/nieuws/2017/mei/15/05-cas.html, 16 May 2017). Moroccan-born council member Youssef el Messaoudi (Green party) organised a hearing with Controle Alt Delete, a pressure group which claims CAS encourages ethnic profiling, based on recent research (AMC, 28 August 2018; Landman and Kleijer Kool, 2016: 203). During the hearing, the Amersfoort Police Department acknowledged this problem (AMC, 1 January 2018). However, ‘ethnic profiling’ was absent in the Municipality’s Security Agenda 2020–2022, sparking debate between progressive and populist parties (AMC, 3 December 2019: 29).

CAS does not identify specific persons. Dutch municipalities, however, also increasingly use data-driven predictive policing in the social domain. Integration of police and social work data bases assists targeted interventions to coercively include, for example, youth offenders and curb school dropout rates (Ministry of Health, ‘Preventie met data in het jeugdveld. Een inventarisatie van datagestuurde projecten in 8 gemeenten’ (2019) 5 September. Available at: www.rijksoverheid.nl/documenten/rapporten/2019/06/07/preventie-met-data-in-het-jeugdveld). In their 2018–2022 programme, the governing parties in Amersfoort talk of using big data to ‘predict urban dynamics’, but say citizens’ privacy is the leading aspect (Municipality, 2018, Samen aan de slag voor duurzame groei. Coalitieakkoord 2018–2022, 28).

In accordance with the neoliberal idea of a ‘self-reliant’ society, since Roethof, citizens have also been given more responsibility for neighbourhood security. In 1984, community crime prevention (buurtpreventie) teams reappeared after a long absence (Van der Minne Frank, 1985: 5). Nowadays, they report suspicious situations to the police, confront people who cause nuisance, and provide information about fire and burglary.
protection (Van der Land, 2014: 33–34). In Amersfoort, they are sometimes started by disgruntled citizens, in other cases in collaboration with the police (AMC, 15 May 2007: 2; Municipality Amersfoort, 2005b: 23), who share CAS predictions and neighbourhood crime rates with them via Facebook (available at: http://www.facebook.com/PolitieAmersfoort) and WhatsApp.

Finally, citizens have a role in arranging coerced care. In 1993 Hotlines for Care and Nuisance (‘Meldpunten voor Zorg en Overlast’) were introduced, where, for example, neighbours, family members or housing associations can report cases where they are worried or troubled about people’s behaviour so (coerced) care can be arranged (Blok, 2014: 105–106). In the near future, a national 24/7 Hotline for Care and Nuisance will be set up (Second Chamber, 2017–2018, 32399).

**Disneyisation**

The precautionary culture evolves in the context of what urbanist Richard Florida has influentially dubbed a ‘new urban crisis’ (Florida, 2017). Housing prices in inner cities have increased so much that the middle class can no longer afford to live there. The entertainment industry and nightlife economy take over inner cities in a process sociologists label Disneyisation (Bryman, 2004: 12; Van Steden, 2009: 24): inner cities are transformed to resemble Disney World Resorts. Public space is reminiscent of a regulated amusement park, in which unexpected events are preferably eliminated (Van Steden, 2009: 17). Under the influence of ‘city marketing’, the urban domain is portrayed as an attractive theme park full of positive expressions and new experiences (Van Steden, 2009: 22).

Amersfoort’s city centre exemplifies this: since the 2000s, city marketing has sold this 1980s problem zone as a ‘total experience’, a unique combination of living, work and recreation with beautiful surroundings to attract residents, corporations and tourists (Municipality Amersfoort, 2004: 6; Municipality Amersfoort, 2009: 27). The 2017 ‘inner-city policy’ embraces the ‘experience economy’: because of internet shops, the ‘only reason to visit the city centre is to be entertained’ (Municipality Amersfoort, 2017: 12). Lighting draws attention to the beautiful medieval buildings (Municipality Amersfoort, 2017: 17), and stinky and ugly smoke pipes have not been allowed since 2018. The city centre is closed off for anything but destination-bound traffic to enrich the inner-city ‘experience’. Bicycles can only be stationed in designated areas (AMC, 3 December 2019; Municipality Amersfoort, 2019).

Tourists and other visitors like a well-kept and peaceful environment. Therefore, surveillance officers, police officers and mental healthcare providers work together to ‘clean’ inner cities of degradation and nuisance to increase (the sense of) security (Van Steden, 2009: 23). Homeless people, drug addicts and people with mental health problems are pressured into receiving care or, in the case that they systematically commit crimes, imprisoned. Under the Compulsory Mental Healthcare Act, the police can even take people with a mental disorder into temporary custody while awaiting emergency treatment if they cause public nuisance. So, as in the controlled setting of Disney parks, much effort is put into keeping the city centre safe and clean so people can have undisturbed fun (Van Steden, 2009: 23): ‘A well-kept public space, permanent surveillance and the frequent presence of maintenance workers are conducive to a feeling of security (...) in the maintenance, emphasis is on achieving the desired image (good lighting, undamaged, clean and tidy), and feeling of security’ (Municipality Amersfoort, 2016: 2.7).
Keeping public space in such a well-kept state demands much from the police, who feel overused, as police registrations of ‘nuisance from confused or overwrought persons’ increased 65% (Planije and Van Hoof, 2016). Though there are no clear numerical indications, this is often linked to the shift in mental healthcare to ambulatory care in non-hospital, communal settings, a Europe-wide trend from the 1970s onwards, which gained foothold in the Netherlands only around 2012 (Van Hoof et al., 2012: 22). The real cause is unclear but decreasing tolerance for nuisance from confused or overwrought persons is often mentioned (Planije and Van Hoof, 2016), which Disneyisation helps to explain. In Amersfoort and several other cities, a mental health ambulance (‘psycholance’) has been introduced to relieve the pressure on the police, who, to this point, were responsible for transporting people with mental health problems to psychiatric hospitals (available at: http://www.ggzvervoersdienst.nl/ggz-centraal-start-pilot-passend-vervoer-voor-personen-met-verward-gedrag). The changing expectations of the police probably also play a role in the work overload experienced. Under the influence of the culture of control, public officials view the police primarily as an instrument to control crime. They are supposed to focus on supervision and investigation and, although part of their legal task, less on assistance of the needy (Naar een veiliger samenleving, Ministerie van Justitie en Koninkrijksrelaties Den Haag, oktober 2002: 79).

Legal and moral implications

The ‘moral boundaries’ of the post-crime society, in which ordering practices arise post hoc, are mainly determined by the harm principle, entailing ‘that the only purpose for which power can be rightfully exercised over any member of a civilised community, against his will, is to prevent harm to others’ (Mill, 2002 [1865]: 6). The concept of crime as risk and the associated pre-emptive ordering practices, dominant in pre-crime society, however, find no justification in the harm principle but seem grounded in the precautionary principle instead. The latter originates (unsurprising in light of Beck’s theory) in environmental and public health law, and allows authorities to adopt legislative and other measures when (scientific) research indicates possible dangers of a phenomenon but cannot determine the risk with sufficient certainty (Commission of the European Communities, Communication from the Commission of 2 February 2000 on the precautionary principle).

The influential American legal scholar Cass Sunstein convincingly criticises the precautionary principle as a moral ground for criminal legislation, claiming it ‘becomes operational if and only if those who apply it wear blinders-only, that is, if they focus on some aspects of the regulatory situation but downplay or disregard others’ (Sunstein, 2003: 26). Risks that tend to be downplayed or disregarded are ‘the risks associated with regulation itself’ (Sunstein, 2003: 32). Actually, criminal law based on the harm principle is also associated with risks but the problem with the precautionary principle is that it does not provide the opportunity to weigh the risks of the regulatory situation and those of regulation properly, for it allows action to be taken against unknown future risks (Pieterman, 2008: 184).

The risk associated with using criminal law to control future security risks is that it infringes upon freedom, literally when (custodial) sentences are imposed but also in a broader sense as fundamental rights prerequisite for freedom are violated. First, the principle of legality, which requires among other things that all laws need to be clear, is at stake. The criminalisation of preliminary
stages of criminal acts blurs the line between criminal and non-criminal behaviour and therefore makes it less foreseeable when someone will be arrested and sentenced (Buruma, 2005: 64). Even more problematically, such laws deny perpetrators the opportunity to change their mind while preparing to carry out the crime, thereby eroding the presumption of innocence (Borgers and Van Sliedrecht, 2009: 192; Landman and Kleijer-Kool, 2016: 67–68). Furthermore, they expand investigatory power, increasing the risk that innocent people become subjects of criminal investigations and their privacy rights are unnecessarily violated. Similar considerations apply to other pre-emptive practices. Coercive treatment of people with mental disorders to prevent public nuisance, for example, infringes upon their freedom in order to increase another’s security. Camera or physical surveillance, the OV-chipcard and Hotlines for Care and Nuisance all invade the right to privacy.

Moreover, the view of crime as a calculable risk has led to a ‘new penal logic’ (Feeley and Simon, 1992), inspired by the theory of selective incapacitation which, instead of punishing criminals for their past actions, seeks to prevent them from re-offending in the future (Mehozay and Fisher, 2019: 531), as exemplified by the Reoffender Institutionalisation Measure. Criminologically, this can be seen in the light of the ‘managerial movement’, which evaluates risk ‘on a case-by-case basis and based on clinical judgment by professionals’ (Mehozay and Fisher, 2019: 531–532). Predictive policing is part of a new actuarial phase in this movement, ‘a major evolution towards evidence-based practices and the development of sophisticated mathematical tools to measure risk’ (Mehozay and Fisher, 2019: 532). This new penology focuses less on ‘questions of responsibility, guilt, moral sensitivity, diagnosis, intervention, and rehabilitation’ and instead ‘sets out techniques for identifying, classifying, and managing groups according to risk levels’ (Mehozay and Fisher, 2019: 532). Proponents of these techniques claim they introduce a new level of accuracy and may even eliminate forms of inherent bias in previous methods of risk assessment (Mehozay and Fisher, 2019: 524). The downside of this development is that ‘the algorithms employed are often a black box, meaning it is impossible to explain how a risk score was deduced’ (Mehozay and Fisher, 2019: 533).

A pressing problem with regard to pre-emptive practices aimed at detecting risky (groups of) persons as soon as possible is that they may be (partly) carried out on the basis of generalisations related to race, ethnicity, religion or nationality, thereby increasing the possibility for ethnic profiling (Van der Leun and Van der Woude, 2011: 450). This also applies to the seemingly bias-free predictive policing algorithms; for they are trained on ‘data that is heavily infected with racism because that data is generated by human beings’ (O’Donnell, 2019: 544). Against the background of a broader process called ‘crimmigration’, which can be described as ‘the merging of migration policy and crime control’, a political discourse has developed in the Netherlands within which minority groups are addressed as ‘dangerous others’ and a relationship is assumed between ethnicity and crime and nuisance (Van der Leun and Van der Woude, 2011: 445). This has led the Dutch police, for instance, to target preventive ‘stop and searches’ at specific groups of people (Van der Leun and Van der Woude, 2011: 445). An example of this practice that provoked deep outrage was when the police signalled rapper Typhoon to halt because his ‘profile’ did not correspond to his new car. When he asked why he was pulled over, the police officers told him his skin colour stood out against the expensive car, which could have been purchased with drug money.
The preventive gaze endangers not only individual rights and freedoms, such as the right to privacy and to non-discrimination, but also the value of social justice. Social exclusion is at the basis of many pre-emptive practices. Consider, for example, people with mental health problems and addicts, who are banned from public and semi-public places because of other people’s unease when confronted with them (Franko Aas et al., 2009: 9).

What all these legal and moral issues come down to is that we can trade neither freedom for security nor security for freedom. In our democratic constitutional state, which values civil liberty, we must face a certain level of insecurity to avoid ending up in a police state, where individual rights and liberties barely exist (Blad, 2007: 33). We argue that the value of security should not only be balanced against those of individual freedoms and social justice but also against itself. The culture of control, rooted in the risk society, is part of the broader cultural process of Disneyisation. The cleansing of inner cities of degradation, crime and nuisance so people can have fun in a controlled setting, risks resulting in a security paradox. On the one hand, a society without ragged edges makes its people vulnerable. They can no longer deal with irregularities, panic easily; although security increases, their feelings of insecurity also increase (Van Steden, 2009: 30). Moreover, increasing security can also breed more insecurity. A society that smuggles the dark side of life away lacks room for sickness, loss and other grisly experiences people will have anyway. They may resort to alcohol and drug abuse, which can lead to violence and nuisance and eventually more insecurity (Van Steden, 2009: 27).

Conclusion

We have argued that the precautionary culture and the pre-crime society it brings about are not (only) caused by the terrorist threat that gripped the Western world after 9/11 but have, in the Netherlands at least, firm roots in the urban sanitisation of the past 40 years. Through the lens of concepts such as the risk society (Beck, 1992 [1986]), the culture of control (Garland, 2001) and the cultural process of Disneyisation (Bryman, 2004), we have shown how the Dutch precautionary agenda resulted from the high crime levels and drug nuisance that afflicted cities such as Amersfoort during the ‘urban crisis’.

In the mid-1980s, with urban crime and drug problems at their peak, forms of administrative prevention through curtailing bars and coffee shops, methadone maintenance programmes, the rise of prevention in urban design and the early policing of youngsters were among the measures taken. The tendency towards ever-increasing securitisation through camera surveillance, pre-emptive body searching and predictive policing increased in the 1990s and finally peaked after 2002. Since 2004, the Reoffender Institutionalisation Measure has allowed for the incapacitation of persistent offenders for up to two years, not for committing a crime warranting such a prison sentence but because they are considered a nuisance to society. Nuisance-causing mental health patients are subjected to invasive interventions to prevent harm to themselves but most of all for the risk they pose to their surroundings.

Amersfoort shows how a city whose centre drew headlines only for petty crime and angry shopkeepers now proudly proclaims its high quality of living conditions and tourist appeal. The city also shows that the measures taken to reach this point can be
controversial. Sometimes they are discontinued, even though the trend is towards acceptance by the municipal council and citizens. The sanitisation of the city centre is not primarily a top-down process. Citizens actively shape precaution: neighbourhood watches were a response to angered citizens’ vigilantes. In addition, because of citizen action, camera surveillance has been (re)introduced despite the municipality not believing in it or finding it too expensive. In the case of shelter for drug addicts, the removal from the city centre of (groups of) people causing nuisance was the result of citizen protest, as was the introduction of a nuisance hotline. In addition, in Amersfoort, shopkeepers lobbied for the sanitisation of the city centre.

Since the mid-1980s, citizens’ emotions have underpinned the paradigmatic shift from ‘crime’ to ‘risk’ in urban safety management. In Disneyised inner cities, where the experience economy dictates that the prime reason to visit the city is to be entertained, ‘pleasure’ management becomes a top priority. Taking subjective security as a benchmark, though, is highly dubious as people’s standards for sufficient precaution may change. In the 1980s in Amersfoort, nuisance from junkies was somewhat just part of city life. It is worth pondering on whether responsibilising citizens fails when it goes hand in hand with a culture of control, which ironically might end up creating more vulnerable citizens.

The legitimisation of the culture of control is that it increases the positive liberty of ordinary citizens, who are restricted in their movement by crime. The emphasis on intervening in risk-producing behaviour, be it from nightlife visitors, citizens walking in the street or youngsters suspended from school, however, has in itself risk-producing features, by invading privacy and encroaching on personal liberty with dubiously grounded interventions, eroding the presumption of innocence. These arguments were and are brought forward against precautionary measures in an ongoing public debate.

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Notes
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2. Wet zorg en dwang psychogeriatrische en verstandelijk gehandicapte cliënten, 24 January 2018, Stb. 2018, 36.
3. Wet verplichte geestelijke gezondheidszorg, 24 October 2018, Stb. 2018, 37.
4. Wet BOPZ, 29 October 1992, Stb. 1992, 669.
5. Wet op de identificatieplicht, 9 December 1993, Stb. 1993, 660, entry into force 9 March 1994, Stb. 1994, 190.
6. Wet van 13 juli 2002 tot wijziging van de Gemeentewet de Wet wapens en munitie in verband met de bestrijding van wapengeweld, Stb. 2002, 420.
7. Article 7:3 of the Compulsory mental healthcare act and Explanatory Report, Kamerstukken II, 32399, nr. 3.

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