

Violence as Pandemic and Related Ways to Deal With It

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Introduction

At this global crisis moment, when the world is experiencing a major war in Europe involving actors across most of the entire Northern Hemisphere, as well as several violent conflicts in Africa, the Middle East, and other regions of the world, it is critical to look at violence from an entirely other angle, one based on the new science and proven new tactics. Violence – of all forms, including war - has the characteristic of spreading in the same way that a pathogen spreads; and likewise, if left unchecked, the violence itself leads a life of its own. Therefore, the spread of violence needs to be interrupted similarly and with the same urgency – by putting in place measures that are used to curtail the spread of viruses.

The “Cure Violence Global” approach, an epidemic interruption method, based on the methods used by the World Health Organization to reverse the spread of infectious diseases, applies three proven epidemic control strategies to stop violence. Highly selected and trained workers interrupt the transmission of violence, prevent its future spread, and transform the norms related to continued spread. The approach has been successfully applied to many diverse settings, proving its effectiveness across a variety of communities, cultures, and ethnic groups. The methods have been used effectively in Colombia, Honduras, Mexico, Trinidad, Syria, Iraq, the UK and the U.S. For example, in Cali, Colombia, in 2020 violent killings were reduced by 30% - 47% by this approach, and 90% drops were shown in San Pedro Sula, Honduras. It has also been applied to the N. Korea – U.S. conflict, as well as other conflict zones, and could be used *now* to contain the escalation of the Russia-Ukraine war and other conflicts such as in Sudan, Ethiopia and Congo, for example.

These innovative violence interruption models and methods should be an integral part of the new UN Peace Architecture - and could be a major game changer in terms of stopping many of the existing conflicts and other sources of violence.

Basic concepts

Violence is a disease, meeting the *dictionary definition of disease*: “changes in structure or function of an organ or systems, resulting in characteristic signs and symptoms, that cause disability and death”.

Violence meets the *dictionary definition of contagious* – as it “causes more of itself” – with the usual feature of *spread between people, groups, and countries*.

All population criteria of a contagious disease are met by violence with a) characteristic waves, b) clustering in time and space, and 3) transmission.

All forms of violence are contagious and “bleed” into or morph into each other: including community violence, violence in the home, mass shootings, political violence, and war. These are *syndromes of the same disease* and they cause each other. In other words, people with much exposure to and susceptibility to violence from childhood, in the community, home, or in war are more likely to be

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involved in any of the other types. Countries behave like individuals in this way as well. Most countries post-civil war tend to have high rates of homicides, not peace. Contagion continues unless abated.

Current conflicts and contagion channels

There is a natural propensity for violence to spread, grow, and worsen. We see this regularly in interstate and intrastate conflicts as we see in the ongoing conflicts at this and any moment. These are epidemic processes. The Russia invasion of Ukraine is clearly a relapse of World War I/II. Likewise for many other conflicts – epidemic relapses, variants, or new outbreaks. *The current world situation is a major pandemic of violence*, in that it is global in scope, ongoing and worsening. And with terrible effects and further risks. Tens of millions of people are directly affected and much of the world is destabilized because of the violence pandemic's unrelenting nature and waves going untreated and unmanaged. As for other epidemics, we have massive waves of effects including major food and energy crises, large migrations on multiple continents, political instability, fear and misuse of the fear. This pandemic is not being seen clearly nor is it being stopped with intensity of effort nor correct methods. The spread of the conflict and its multiple effects can be stopped, in the same way that an epidemic can be halted.

At this moment we are mostly “watching” or adding to the acceleration of spread of this disease. Most of the Northern Hemisphere and much of the world is a party to this conflict or at risk, and suffering – as a result of the disability, death and waves that surround these outbreaks. *We may actually be just at an early stage of some or all of the ongoing outbreaks* – Russia/Ukraine/NATO, Sudan, Somalia, Yemen, Syria, Myanmar, Venezuela, etc.

As a contagious disease we even know the biological underpinnings which include the copying of behaviour; dopamine pathways for acknowledgments, attention, credit, or power; pain pathways that keep this going to avoid disapproval or even worse consequences; as well as the relationships between exposure and susceptibility. Interruption of spread uses methods to change these effects and stop further events.

Treatment of the epidemic: interrupting the violence

How do we treat epidemics, what have we learned about treating violence epidemics, and what should we do now?

Treating epidemics requires 1) detection and interruption of next events, 2) interruption of spread, and 3) changing community or country norms. This is applied differently for different modes of spread. Specific infrastructures and systems are built to do this; some epidemic systems can be used for others.

Methods of epidemic control are time tested, not always applied correctly but time tested and responsible for some of the major achievements of the last couple centuries.

How are violence epidemics treated and how does it work?

Regarding its application to violence, there is now 20 years of experience. More than twenty studies and ten independent evaluations show *40-70% drops in lethal violence for different forms of violence* in different countries including with non-state actors and with experience in major conflict zones. It works through having specifically recruited, trained and maintained highly selected violence interrupters as well as persons with other roles with very high access, credibility and trust among

and specific to key belligerents. They are maintained as a system, not as ad hoc actors, and specific to each situation.

This works from having a *system which is already in place*, continuous, non-stop, nonjudgmental, independent of political forces, and confidential, which stops things earlier and/or at any stage called upon. This is a standing system. *Proven Effective violence interruption methods need to be urgently set up by the UN in parallel with other organizations to stop major conflicts - now and in the future.*

New Urgent System: We must be clear about our goal: to stop the violence first. Other things can be sorted out later. We need: infrastructure and networks, using some systems that already exist, building others – at multiple levels as for any epidemic (global, regional, country, community); the right people (access, strong prior relationships, credibility, and trust *with those that need to be reached*); full-time *commitment (not just delegations)* but in highly persistent and continuous contact with the key actors or potential actors, those around them, as well as the new support system; the management and capacity to coordinate full time. There are training methods available that can be adapted for any conflict. Everyone involved in violence including those who appear to be causing it, are in a fix and need help through methods of perspective changing and shifts in emotional content, with key support.

Conclusion: A new approach and system

We have greatly misunderstood both prevention and violence itself. Prevention changes the now. It has urgency. Epidemic spread is slowed and stopped anywhere and immediately when there is effective interruption.

Violence needs to be considered outside of political and moralistic frameworks and as a contagious disease. This is not about mediation primarily but about cessation and interruption of violence; mediation is added about half the time. We focus on the processes, not the “bad people”, or blame.

This New System can be effectively built in part with or within the UN but mostly in parallel. It is too risky for the world to depend on one organization, even though it is the central organization we all love and respect and have worked for and need.

Selected References:

Slutkin, G.. Reducing violence as the next great public health achievement. *Nature (Human Behaviour)*, 1, 0025. (2017)

Slutkin, G. “Violence Is a Contagious Disease.” *The Contagion of Violence.* National Research Council/Institute of Medicine. www.cureviolence.org/wp-content/uploads/2014/01/iom.pdf. (2013): 94-111

Ransford, Charles, R. Brent Decker, Guadalupe M. Cruz, Francisco Sánchez, and Gary Slutkin. "El modelo Cure Violence: reducción de la violencia en San Pedro Sula (Honduras)." *Revista CIDOB d'Afers Internacionals* 116 (2018): 179-206.

Ranford, C., & Slutkin, G. Seeing and treating violence as a health issue. *In Eds. Brookman, F., Maguire, E., and Maguire, M. The Handbook of Homicide.* New York: Wiley. (2017)

Slutkin TED Talk: <https://www.youtube.com/watch?v=CZNRozgNWf4>

Slutkin, G., Ransford, C. L., Decker, R.B., Volker, K. "Cure Violence – An Evidence Based Method to Reduce Shootings and Killings." World Bank. (2015).

Slutkin, G. "Treatment of Violence as an Epidemic Disease." in John Snow's Legacy, Epidemiology Without Borders, (2013) Lancet 381 (9874): 1302 - 11.

World Health Organization Definition of Violence (The signs and symptoms)

<https://www.who.int/groups/violence-prevention-alliance/approach#:~:text=%22the%20intentional%20use%20of%20physical,%2C%20maldevelopment%2C%20or%20deprivation.%22>