RETHINKING HOW WE VIEW VIOLENCE

Karen Volker
Director of Partnership and Violence Prevention
Applying a Health Approach to Reducing Religiously Motivated Violence

Create Cultures of Peace, Justice, and Healing

End Religiously Motivated Violence

Promote Enduring Daily Interfaith Cooperation

Note: We are focused on all interfaith efforts to reduce violence
The health approach to preventing violence is based on the approach developed by Dr. Gary Slutkin, founder of Cure Violence Global.

www.cvg.org
Proven Results & Many Adaptations
“Cure Violence….the approach that will come to prominence.”
- The Economist
Cure Violence San Pedro Sula, Honduras

Average shooting & killing reduction = 73%

89% Drop
64% Drop
74% Drop

## Measured Success - Global

<table>
<thead>
<tr>
<th>Location</th>
<th>Shootings and Killings</th>
<th>Other</th>
<th>Ref</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ciudad Juárez, Mexico</td>
<td>- 50% to -75% killings</td>
<td>Community much safer</td>
<td>Observatorio Ciudadano, 2016</td>
</tr>
<tr>
<td>San Pedro Sula, Honduras</td>
<td>-88% shooting &amp; killings (avg. 5 sites)</td>
<td>Streak to 17 mos.</td>
<td>Ransford, 2017</td>
</tr>
<tr>
<td>Trinidad</td>
<td>- 38% shootings</td>
<td>-50% violent crime</td>
<td>Maguire, 2018 (unpub)</td>
</tr>
<tr>
<td></td>
<td>- 39% killings</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- 45% violent crime</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cape Town, S. Africa</td>
<td>-14% killings</td>
<td>-29% attempted killings</td>
<td>Ransford, 2017 (unpub)</td>
</tr>
<tr>
<td>Halifax, Canada</td>
<td>-100% killings</td>
<td>Pro-social attitudes, more</td>
<td>Ungar, 2016</td>
</tr>
<tr>
<td>Puerto Rico</td>
<td>- 53% killings</td>
<td></td>
<td>PR site reports</td>
</tr>
<tr>
<td>UK prison</td>
<td>-51% violence</td>
<td></td>
<td>UK Prison eval, 2014</td>
</tr>
<tr>
<td></td>
<td>-95% group attacks</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If Violence is an Epidemic Health Problem…

Then it can be treated with a health approach…
What as a Health Approach?

Violence is a *BEHAVIOUR*

...that can be *PREVENTED*

...that acts or spreads like a *CONTAGIOUS PROCESS*
Multiple Studies have demonstrated the contagious nature of violence
Exposure to Violence ➔ Perpetration of Violence

Child Abuse Victims Becoming Abusers

30%

Chronic Exposure to Community Violence Associated with Perpetration

No/Low/Moderate Exposure

Chronic Exposure

Community Violence Increases Post War (WW1 & WW2)

# of Nations

Increase Decrease No Change

Combat Nations

Non-Combat Nations
Methods of Exposure to Violence

Community
- Group/Gang Violence
- Collective
- Interpersonal Violence
- Civil War
- Riots

Media
- TV
- Movies

Family
- Parental violence
- Child Abuse

School
- Bullying

State Sanctioned
- Police violence
- Institutional violence

Outcomes
- Perpetuate violence (violent act, attempted violence, threat of violence)
- Additional victimization

Susceptible

Witness

Victim
Transmission across Syndromes

Community Violence

Note Perpetrations for males and females, higher risk for males.

P, V, O

V, O

Family Violence (P, V and child)

P, V

Suicide

Note Perpetrations for males and females, higher risk for males.

Barkin et al 2001, Hanson et al. 2005
Violence is contagious in all syndromes

- COMMUNITY
- RELIGIOUSLY MOTIVATED
- SPOUSAL
- FAMILY
- CHILD
- SUICIDE
- MASS SHOOTING
- WAR
- VIOLENT EXTREMISM
Violence as a Contagion

Population characteristics

- Clustering
- Spread
- Transmission
Scientific Understanding of Violence

Violence has all three characteristics of an epidemic disease.

1. Violence clusters like a disease

2. Violence spreads like a disease

3. Violence transmits

Through exposure, modeling, social learning, and norms.
Means of Transmission

 Violence
 Transmission
 Observing
 Witnessing
 Trauma

 Brain Processing
 Intake → Processing → Disease

Modulating factors: age, prior immunity, type of exposure, dose, context, other
What is Known About the Transmission of Violence?

1. Social Learning

2. Social Norms

3. Neurological Effects

4. Modulation Factors
Stopping Epidemics

- Interrupt Transmission
- Prevent future spread
- Change group norms
Public Health Methods

- Detect events early
- Prevent spread
- Work with community in acceptable ways
- Reach hardest to reach
- Change behaviors
- Change norms
- *Focus*

The public health approach is inherently grassroots!
The 3 components of the Health Approach to violence interruption

- Detect and Interrupt
- Change Behavior of Highest Risk
- Change Community Norms
1. Detect and Interrupt

Where is the violence happening and how can it be interrupted?
Interrupt Transmission
Could CC members become violence interrupters?

- **Criteria**
  - From inside/same group
  - See that/want violence to stop
  - Trust, access, credibility

- **Mode**
  - Total transparency
  - Nothing to be found out
  - No betrayal possible
  - Assigned to look for way out

*Could CC members become violence interrupters?*
2. Behavior Change

Identifying those at highest risk for violence and working to change their behavior.
Religious leaders are in key positions to change norms related to violence.
Re-Understanding Violence
Reduces current inequity and promotes understanding

Moralism
(not helpful)

Bad People

Bad Choice

Adverse Circumstances
(contribute)

TRANSMISSION
exposure

SCIENCE
After Decades of Effort, Why is Violence Still a Serious Issue? Because we have misdiagnosed the problem…

<table>
<thead>
<tr>
<th>Old Thinking</th>
<th>New Scientific Understanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moralistic judgments</td>
<td>The latest brain research on thinking and decision-making</td>
</tr>
<tr>
<td>“Bad” Individuals</td>
<td>Learned (contagious) behavior (which can be unlearned)</td>
</tr>
<tr>
<td>Gang-related</td>
<td>The power of group and community norms</td>
</tr>
<tr>
<td>Imprisonment</td>
<td>Prevention through changing behavior and influences</td>
</tr>
</tbody>
</table>
# Health Epidemic Approach Adds New Synergies

<table>
<thead>
<tr>
<th>1. Police and military Efforts</th>
<th>2. Political and Diplomatic negotiations</th>
<th>3. Adding public health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kills and apprehends offenders, enemy</td>
<td>Addresses grievances (some)</td>
<td>Focuses on Violence First</td>
</tr>
<tr>
<td>Some – but not all</td>
<td>Not everyone agrees</td>
<td>Prevents lethal events</td>
</tr>
<tr>
<td>Major hostilities remain as well as reprisals</td>
<td>Takes years or decades</td>
<td>Prevents retaliations</td>
</tr>
<tr>
<td>Displaces</td>
<td>While violence, death, etc. continues as talking does or does not occur</td>
<td>Offers face saving</td>
</tr>
<tr>
<td>Recruits new combatants</td>
<td></td>
<td>Reverses social pressure to perform acts</td>
</tr>
<tr>
<td>Perpetuates contagion</td>
<td></td>
<td>Mobilizes whole community</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Changes norms</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Simultaneously increase impact of other programs and the potential for diplomatic and police / military approach to succeed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Can prevent violence outbreak relapses</td>
</tr>
</tbody>
</table>
Potential credible messengers have to be identified to help achieve goal of preventing violence of all types.

In most cases the “credible messenger,” will have lived the same type of life as those who are leading or doing the violence (have prior ties to the groups, responsible, are still known to the target population, and reside in the target area).

Religious leaders are well positioned to help identify these individuals.
In Order to Prevent Violence, We Must First Understand the Context in Which It Is Happening

Can it be interrupted locally?

- Where is it happening?
- When is it happening
- Who is doing it?
- Is it in retaliation for another event?
- What groups are involved?
- Who is influential with these people?
Discussion

• What of this resonates with you?
• What does not?
• Do you believe the URI network members could be or already are key influencers?
• Think of the main instances of religiously motivated violence:
  • Who are the key people that need to be reached to stop the violence?
  • Who can reach these people
  • Who is following and could be persuaded not to follow?
  • Who can reach those people?
  • What norms are supporting this behavior
  • What are the specific roles for religious leaders
  • How can they best be utilized to prevent the violence?