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Interview With: Frank Perez, National Director of Cure Violence

By Maureen Mullen

Mr. Frank Perez serves as the National Program Director for Cure Violence, an anti-violence program that reduces gun crime. Formerly known as CeaseFire Inc., Cure Violence approaches street violence with a unique strategy, employing community outreach workers and violence interrupters from the most dangerous areas of a city to intercede in potentially-violent situations and counsel at-risk individuals. This “boots on the ground” strategy is a method associated with disease control and it is Cure Violence’s position that, similar to an infectious disease, gun violence is a public health issue that can be reduced by changing behavioral norms using disease control methods. A 2009 case study by Northwestern University found that neighborhoods with a Cure Violence presence experienced a reduction in shootings by as much as forty percent.

Q: What is Cure Violence and its mission?

Dr. Gary Slutkin, an epidemiologist, founded our organization after having spent many years of his life fighting health epidemics in Africa. Upon returning to the United States, Dr. Slutkin looked at violence in our country through a different lens, believing that violence should be treated just as we would any other disease in any part of the world, because violence mimics a disease. It is within certain areas, has certain hotspots, and is passed on from one person to another. There is certain high-risk behavior that makes a person more prone to violence, just as certain high-risk behavior makes a person more prone to contracting a disease. The Cure Violence model approaches violence as if it is a disease.

Our mission is simple: to stop the shootings and the killings, period. Our pilot program took place in 2000 in the West Garfield Park neighborhood, where it achieved a sixty-seven percent drop in shootings and killings that year. Since then, Cure Violence has expanded and is presently active in eighteen Chicago communities, an additional seven communities in the state of Illinois, fifteen United States cities, and has international partners in countries across the globe.

Q: How does the model work?

The model is strictly aimed at reducing shootings and killings by targeting a narrow population of people who are causing most of the violence in these troubled areas. There are five main components to our model:

1) Boots on the Ground

We have outreach workers and violence interrupters who live in and are from these communities. They have a vested interest in their community and they want things to change. Outreach workers work with at-risk individuals over long-term periods supporting them as mentors and counselors. Also involved in the community are violence interrupters who work as mediators and are trained in conflict mediation techniques so that they can intercede before a situation becomes violent.

2) Community Mobilization

We are trying to change community attitudes around violence such that communities refuse to accept violence as the norm. It is good, old-fashioned community organizing. If enough people in a community speak out and challenge the violent norms of their neighborhood, a new normal can be possible. That new normal is simple: violence is not a normal way to live. We achieve this group of voices demanding a new normal through the third component of our program, public education.

3) Public Education

Public education works. Our public education campaign bombards the community with positive messages that violence is not normal. Through public service announcements, billboards, bumper stickers, and t-shirts, we spread the message that violence is not an acceptable way to live. Our message to folks is that they do not have to accept fear and violence as normal in their community.

Cure Violence also has a partnership with local hospitals. In Chicago, there are Cure Violence workers who are notified when gunshot victims arrive at local emergency rooms. At the hospital, we talk to victims and their families, and we encourage them not to retaliate once they have recuperated and are discharged from the hospital. Innocent people do get shot, certainly, but the bulk of the people arriving at trauma units with gunshot wounds are usually involved in some type of high-risk behavior. Because many gunshot victims are perpetrators of violence after they leave the hospital, they are an ideal population for Cure Violence to target with our anti-violence message.

4) Faith Community

In many of the neighborhoods where we work, one of the last institutions left are the churches. We need to organize those churches so that they too are helping to fight violence and help change the community mentality. If every church could adopt one high-risk individual and provide them with a part-time job, or even provide emotional support, we think that may make a big difference.

5) Law Enforcement

We are not an extension of law enforcement. We do not share information with law enforcement but it is instrumental to our model because they give us basic background information about certain neighborhoods, such as where the hotspots are, what the violence is traditionally related to, the perimeters of a neighborhood, etc. We use this information properly determine where to invest our resources.

Q: How does violence impact a community?

Violence is a devastating problem. It affects everything else in a community. Businesses flee from high-crime neighborhoods, taking jobs with them. Education suffers. Violence impacts school attendance and academic performance. Children cannot concentrate on schoolwork or sometimes cannot even attend because they are afraid of traveling to and from school. It affects health issues for adults and children. I talk to health departments all the time about violence, because many parents who live in areas with frequent gun crime, do not let their children outside to run and play for fear that they might get shot. Kids who grow up in those areas are not exercising like they should. The stress of living in a violent neighborhood likely has an impact on adults as well. Many of these communities are disproportionately affected with high blood

pressure, diabetes, and cholesterol problems. So it is clear that violence goes hand-in-hand with public health challenges.

Q: Tell me about Cure Violence's normative and behavioral work?

Unfortunately, violence has become accepted as normal in many of these communities. People grow up around it, and in some areas their parents and grandparents grew up around it. It is what they know as normal. But Cure Violence works to change that. We teach people that violence is not a normal way to live. Deeply impoverished communities abound across the globe, and in many of them, folks simply are not killing each other the way Americans are.

Q: Violence is an incredibly complex issue. Why should a solution start by targeting violence rather than underlying causes such as poverty and marginalization?

There are many underlying socio-economic and psychological reasons why a person may turn to violence. And of course, our campaign is just one part of the larger effort to reduce violence. So many institutions do a variety of great work in these communities and we need them to keep it up. We work in concert with social services, non-profits, and law enforcement to improve safety in a community.

In a way, this is a "which came first, the chicken or the egg" type of dilemma. If we can reduce shootings and killings, so many aspects of a community have the chance to improve. Businesses are not going to come back to an area that is being devastated by violence. We have to do something about the violence. We have to deal with a person's violent behavior before we can help them in other areas of their life.

Sometimes people ask us why we do not focus on preventing younger children from becoming violent, and why we focus instead on those children and adults who are already violent. Many folks think that they are a lost cause. The fact of the matter is, that many younger children who are not yet violent are looking up to these older individuals. We have all heard the phrase "children see, children do." We need to change what children are seeing. If we can change those current violent individuals, we believe this change will stop a cycle of violence. We believe the next generation will have a better chance for a constructive life if we can change the present generation.

Sources:

Interview with Frank Perez, National Director, Cure Violence, in Chicago, Ill. (Mar. 3, 2014).

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