

## CRIME

# How to Reduce Crime: Treat It Like an Infectious Disease

Once we recognize violence as a contagious process, we can treat it accordingly

By Gary Slutkin

When Rahm Emanuel assumed office as Mayor of Chicago, he inherited very tough challenges — heavier than the politics-as-usual passing of the baton from one administration to the next. He inherited a legacy of violence that had been generations in the making. That legacy can make the violence seem intractable, but it isn't.

I grew up in Chicago, but I spent much of my professional career working to control epidemics in Africa and Asia for the World Health Organization and others. When I returned home in 1995, I saw violence in Chicago spreading in the exact same patterns as diseases like tuberculosis and HIV. At the time, people used the term “violence epidemic” as a metaphor, but I and others saw parallels that could be scientifically documented. Maps and graphs that chart the spread of violence look almost identical to those that chart infectious diseases with maps showing clusters and graphs showing waves upon wave. Properties of transmission, though just as invisible as microbial counterparts, can be witnessed spreading from one individual to another, one community to the next.

It has taken years of investigation to validate these observations. For example, brain research tells us that brain cortical patterns are involved in copying behavior, and that dam-

age to the limbic system can occur by victimization. These are some of the ways in which the contagion occurs. Some of these effects can make someone lose their temper quickly and respond to a situation aggressively. They turn yesterday's victim or witness into tomorrow's aggressor.

The good news is once we recognize violence as a contagious process, we can treat it accordingly, using the same methods that successfully contain other epidemic processes — interrupting transmission, and behavior and normative change. Cure Violence and its partners have been putting this public health approach to violence into practice in Chicago, Baltimore, New York, Philadelphia, New Orleans and more than 15 cities and 8 countries by putting specially selected workers into communities to interrupt violence and encourage behavior change through outreach. Research conducted by the U.S. Justice Department, Centers for Disease Control, Johns Hopkins University and others have credited this approach with dramatically reducing shootings and killings in neighborhoods where violence had been epidemic. The Institutes of Medicine — the health arm of the National Academy of Sciences — and the U.S. Conference of Mayors have recognized the importance of using this public health model to prevent the spread of violence.

Mayor Emanuel comes from a family of doctors. He understands health very well and he values the role that the public health sector — working alongside law enforcement — can play in reducing shootings and killings, not just to help individuals but to reduce violence across an entire community. He also wants results. And we're beginning to see them.

Woodlawn is one of the communities hit hardest by violence last year. It is also one of the communities where Mayor Emanuel invested in a comprehensive anti-violence strategy that includes law enforcement and public health. We have already seen a 100 percent reduction in homicides there this year. Based on data from the Chicago Police Department from January to April 2013, there has been a 40 percent reduction in shootings and killings across the 14 communities where both law enforcement and public health strategies are being used. Every shooting that does not happen helps to create a new legacy for Chicago and for every community that is plagued by violence. Perceptions are hard to change. But we can save lives. And because we can, we must.

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*Gary Slutkin is a physician and founder and executive director of Cure Violence. The views expressed are solely his own.*