

Cure Violence (formerly CeaseFire)

cureviolence.org

Comprehensive; Ages 16–25

Effectiveness

(Read the criteria for these ratings)

- Effective gang program
- Effective adult program

Risk Factors

Individual

Exposure to firearm violence
 Fearless
 Few social ties (involved in social activities, popularity)
 Gang involvement in adolescence
 High alcohol/drug use
 High drug dealing
 Illegal gun ownership/carrying
 Physical violence/aggression
 Violent victimization

Family

Delinquent siblings
 Family history of problem behavior/criminal involvement
 Family poverty/low family socioeconomic status
 Family violence (child maltreatment, partner violence, conflict)
 Living in a small house
 Poor parental supervision (control, monitoring, and child management)

School

Frequent truancy/absences/suspensions; expelled from school; dropping out of school
 Low school attachment/bonding/motivation/commitment to school
 Poor school attitude/performance; academic failure
 Poorly organized and functioning schools/inadequate school climate/negative labeling by teachers

Community

Availability and use of drugs in the neighborhood
 Availability of firearms
 Community disorganization
 Economic deprivation/poverty/residence in a disadvantaged neighborhood
 Exposure to violence and racial prejudice

- Feeling unsafe in the neighborhood
- High-crime neighborhood
- Neighborhood physical disorder
- Neighborhood youth in trouble

Peer

- Association with antisocial/aggressive/delinquent peers; high peer delinquency
- Association with gang-involved peers/relatives
- Gang membership
- Peer alcohol/drug use

Description

Cure Violence (formerly CeaseFire) is another effective broad community approach to preventing and reducing gang violence. Undergirded by the public health model, the program approaches violence as an infectious disease. The program tries to interrupt the next event, the next transmission, the next violent activity” (Kotlowitz, 2008). The program targets a small population: members of the community with a high chance of “being shot or being shooters” in the near future. This model prevents violence through a three-pronged approach.

Detection and Interruption: Cure Violence is a data-driven model. Statistical information and street knowledge helps identify where to concentrate efforts, focus resources, and intervene in violence. This data identifies communities most impacted and provides a picture of those individuals at the highest risk for violence.

Behavior Change: Cure Violence intervenes in crises, mediates disputes between individuals, and intercedes in group disputes to prevent violent events. Outreach workers counsel clients and connect them with services; violence interrupters engage members of the target population on the street, mediating conflicts between gangs and working to prevent the cycle of retaliatory violence from starting after a violent incident. The core training for employees is related directly to the work and focuses on conflict mediation and response.

Changing Community Norms: Cure Violence works to change the thinking on violence at the community level and for society at large through the use of public education, community-building activities, and motivational interviewing with the highest risk. For disproportionately impacted communities, violence has come to be accepted as an appropriate—even expected—way to solve conflict. At the street level, Cure Violence provides tools for those most likely to be involved in altercations to resolve conflicts in other ways.

Researchers from Northwestern University conducted evaluations of Cure Violence programs at multiple sites. The outcome evaluations revealed that there were significant changes in gang homicide patterns (e.g., decreases in gang involvement in homicides and fewer retaliatory killings) that could be attributed to the program, but no individual site improved on all outcome measures (Skogan, et al., 2008).

The evaluation of Baltimore’s Safe Streets program (July 2007 through December 2010) is the first rigorous evaluation of a replication of Cure Violence. Safe Streets outreach workers mediated 276 incidents. “Safe Streets was fully implemented in four of Baltimore’s most violent neighborhoods, engaging hundreds of high-risk youth and mediating over 200 disputes with the potential to lead to a shooting. The program was associated with less acceptance for using guns to settle grievances in the one intervention neighborhood where attitudes were studied in two waves of community surveys. Program participants are benefiting from their connections to outreach workers in numerous ways that are likely to be protective against involvement in violence. Because gun violence extracts such enormous loss of life and social costs, efforts to prevent it should be high priorities, even when public and private resources are scarce. The Cure Violence program model represents a very promising strategy for reducing gun violence and changing social norms surrounding violence” (Webster, et al., 2012).

Endorsements

National Gang Center: Effective program

Contact

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References

Skogan, W. G.; Hartnett, S. M.; Bump, N., and Dubois, J. (2008). *Evaluation of CeaseFire-Chicago*. Chicago, IL: Northwestern University.

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All CeaseFire reports are available at the evaluator's organization: <http://www.ipr.northwestern.edu/publications/papers/urban-policy-and-community-development/ceasefire/index.html>