Redefining Violence: Understanding the PAR Model

A brief description of the Violence Integrative Prevention and Restoration (PAR) Model and comparison to the traditional punitive model for preventing and responding to violence

THE INTERNATIONAL CENTER FOR
Compassionate Organizations

Nonprofit • Public Health • Public Service

It's not about hatred, getting even, what anyone deserves, settling scores, making an example, punishing some and comforting others, making anyone pay, exclusion, or wiping anyone out. It's about

RESTORATION

Healing. Making everyone whole. Wiping out the disease, not those afflicted by it. Restoring those deprived by violence of their place in the world. It's about ending the 5,000-year-old way we see and deal with violence.

What is the PAR Model?

The Violence Integrative Prevention and Restoration (PAR) Model is a demonstrated, evidence-based, cognitive approach to violence response and prevention built upon a public health foundation. The PAR Model incorporates new thinking about and language for describing violence, provides a new framework for preventing and responding to violence, and presents an effective alternative to the commonly used traditional punitive-based approaches for dealing with violence. The PAR Model integrates diverse disciplines, including social theory, neuroscience, the public health approach, developmental theory, physiology, and evolutionary psychology.

The components of the model's name and what those elements refer to are:

Violence	The model is directed toward the public health challenge of violence.
Integrative	The model integrates multiple concepts and disciplines, including researched and demonstrated elements.
Prevention	Preventing violence is a central objective of the model.
Restoration	Restorative justice (making those involved whole) is a central theme of the model.
Model	This approach is a template for describing and responding to violence.

Under the PAR Model, violence is treated as a disease with unique characteristics (in terms of how it presents in individuals and groups), how it spreads, and how it replicates itself. This "thought-borne pathogen" has its roots in powerlessness, superstition, and threat.

Human beings need to have the power to survive and thrive. Healthy examples are the power of meaning, belonging, well-being, respect, freedom from racism and persecution, compassion, creativity, and community. When healthy power is unavailable, the only source of power is unhealthy power, the most severe expression of which is violence.

The PAR Model addresses all forms of violence, from interpersonal to international.

How is the PAR Model applied?

The PAR Model uses the public health approach to respond to violence. That approach includes five steps:

1. Assessment — The first step is to assess outbreaks of violence. During the evaluation, the response team looks at how violence manifests in a community, how it is transmitted, the presence of risk factors, the types of power deprivation (poverty, joblessness, alcohol and other drug consumption, discrimination, etc.), the inventory of assets (physical, emotional, mental, situational, and transpersonal), and other factors.

2. Response Development — Working with the stakeholders in the effort to eradicate violence, the team develops a response program designed to handle the emergency requirements related to the disease, lower the risk factors for violence, increase the presence of healthy power, leverage existing assets, and secure assets unavailable in the community from outside sources.

3. Response Application — Implementing the response program takes two steps. The first is to conduct a series of demonstration applications to test the efficacy of the responses. Ineffective parts of the response program are either abandoned or revised and retested. The second step is to apply effective protocols throughout the identified population.

4. Evaluation and Adjustment — The evaluation and adjustment phase secures evidence of the efficacy of the response program and provides recommendations for changes in the program design that help create a more mature, thorough, and effective treatment.

5. Reapplication — The process has come full circle with the reapplication phase. The revised response program is applied, followed by steps three and four.

Does the PAR Model work with other violence-reduction programs?

The PAR Model provides a new way of seeing and responding to violence. Punitive-based programs will not operate successfully in conjunction with the PAR Model. The PAR Model effectively complements applications directed toward healing and establishing healthy power. These include conflict resolution programs (including mediation), restorative justice approaches, police and military training, parenting education, job skills training, case management (e.g., treatment for specific challenges such as Post-Traumatic Stress Disorder), tutoring, peer advocacy, counseling, and other programs designed to increase healthy individual and collective power.

What are the advantages of the PAR Model?

There are significant advantages to applying the PAR Model. Some of these are:
1. It is practical, easy to understand, and valuable.
2. It can be applied to all forms of violence.
3. The model eliminates the inhibiting qualities of the punitive model.
4. It frames the nature of violence in understandable terms.
5. It makes violence manageable.
6. It is a public health rather than a judicial approach.
7. The model is flexible. It is responsive to a broad range of settings and circumstances.
8. It is solution-oriented.
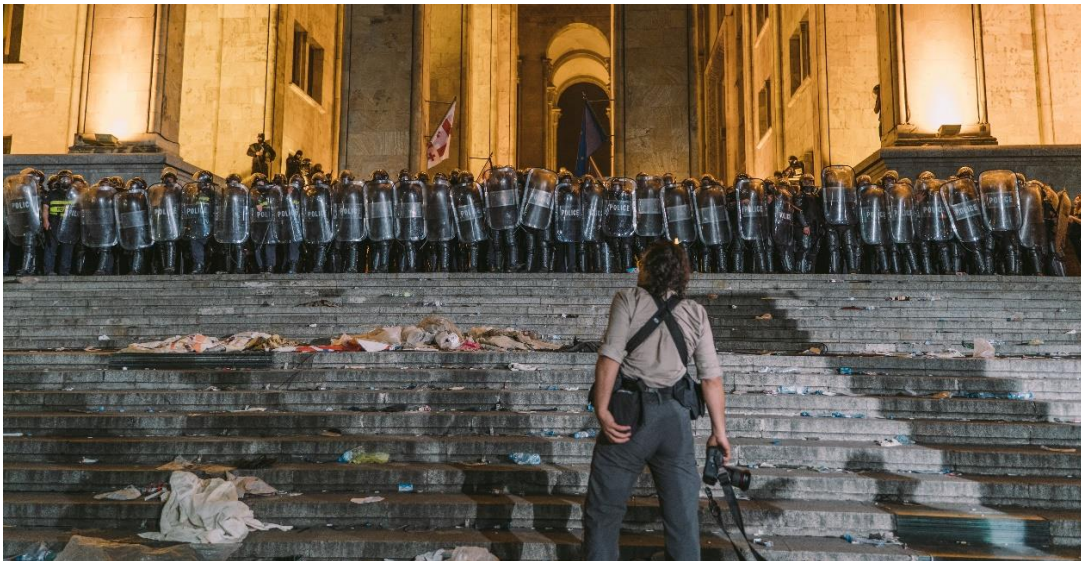
—- Tbel Abuseridze (Unsplash)

The PAR Model is effective in reducing hate and divisiveness.

What are the benefits of applying the PAR Model?

Among the wide range of benefits the PAR Model can produce are:
1. Enhanced community safety.
2. Improved relations with and opportunities for disenfranchised populations.
3. Reduced victimization.

4. Decreased health care costs.
5. Lowered need for violence-related assets for dealing with violence (militarized police forces, security systems, violence prevention, rehabilitation services, etc.).
6. Lessened overall risk-management indicators and their associated costs.
7. Reduced administrative expenses for responding to episodes of violence.
8. Decreased law-enforcement/criminal justice costs.
9. Effective assessment of the impact of violence-reduction initiatives.
10. Improved effectiveness in dealing with those involved in violent episodes (perpetrators, victims, supporters).
11. Increased job satisfaction and morale.
12. Lowered employment turnover.
13. Reduced prison recidivism.
14. Enhanced family safety.
15. Interrupted transmission of violent behavior to succeeding generations.
16. Enriched overall quality of life.

Key differences between the PAR Model and the traditional punitive model

The following table illustrates critical concepts and components of violence and how two different approaches for describing and responding to violence deal with each of these concepts and components.

Concept/Component	Punitive Approach	PAR Model
01. **Historic application**	Common forms of the approach have been used for thousands of years.	New model.
02. **Foundation**	Fear and shame-based (removal of perpetrator's power and control).	Power-based (reestablishing healthy power and control for all stakeholders).
03. **Nature of violence**	A moral and legal issue.	A health issue.
04. **Definition of violence**	Vague, varied.	Precise — differentiated from injurious (which may not be violent). Established criteria for qualifying as violence.
05. **Orientation/focus**	Protection oriented.	Solution-oriented.
06. **Response objective**	Punishment.	Prevention and restoration.
07. **Moral valuation**	Violence regarded as "bad."	Violence considered unhealthy.
08. **Acts of violence are…**	Single events	The extreme manifestation of a continuum of events
09. **Responsibility for violent acts**	Perpetrator.	Perpetrator, contributors, supportive systems, and environmental conditions.
10. **Perpetrator seen as…**	The villain.	A key stakeholder in the diagnosis, treatment, and restoration process.
11. **Violence occurs in…**	The physical body, occasionally, the emotional body.	Physical, emotional, mental, situational, and transpersonal bodies.

Concept/Component	Punitive Approach	PAR Model
12. **Preventive approach**	Fear, aversion-based (threat of sanctions — from economic to incarceration to death). May require temporary or permanent time in prison.	Identification and reduction of risk factors, preemptive intervention, and redirection of power and control. May require temporary or permanent quarantine.
13. **Response approach**	Punitive — characterized by punishment, righteousness, scapegoating, demonization, revenge, and retribution.	Public health approach — characterized by restoration (making whole) of all involved in the violence continuum.
14. **Intervention methods**	Interpersonal — identification, apprehension, adjudication, incarceration. International — economic sanctions, war.	Diagnosis and application of response protocols (interpersonal and international).
15. **Language used**	Personal negative descriptors — derogatory, demeaning, humiliating, condemning, depreciatory, critical, etc.	Behavior descriptors — vectors of transmission, infection rates, toxicity, trauma, addictive qualities, risk factors, etc.
16. **Structural approach**	"Drama triangle" — victim (to protect), persecutor (to apprehend), rescuer (to suppress and punish persecutor).	Public health approach — assessment, treatment protocol design, application of protocols, evaluation. Focus on accountability and restoration.
17. **Acceptance of violence**	Depends upon context — criminal violence not accepted; sanctioned violence approved.	All acts of violence require a response and treatment.
18. **The role sanctioned violence plays**	Considered a legitimate strategy for preventing and responding to violence.	Not considered a legitimate response — sanctioned violence most commonly aggravates the condition and can drive the growth and continuation of the malignancy.
19. **Application areas**	Law enforcement, corrections, international relations.	Education, healthcare, mental health, social relations (e.g., racism), interpersonal relations, law enforcement, corrections, and international relations.
20. **Effect upon resiliency**	Erodes resiliency.	Builds resiliency.
21. **Impact on management**	Reduces management choices to punitive action.	It makes violence understandable; provides a context and structure for increasing effectiveness in monitoring, preventing, and responding to violence.

Continued on the following page.

Comparing Results

The following illustrates the impact of traditional punitive approaches as well as the PAR Model methodology. The effect of these approaches upon key precursors of violence is also shown.

Positive attributes are marked with a: *****

Precursor/Outcome		Punitive Approach		PAR Model
Fear		Increases	*	Decreases
Hatred		Increases	*	Decreases
Rage		Is more likely	*	Is less likely
Resentment		Increases	*	Decreases
Scapegoating		Increases	*	Decreases
Retaliation		Is more likely	*	Is less likely
Demonization		Increases	*	Decreases
Polarization		Increases	*	Decreases
Confusion		Increases	*	Decreases
Creative solutions		Are thwarted	*	Are encouraged
Power-sharing		Decreases	*	Increases
Compassion		Decreases	*	Increases
Reconciliation		Is less likely	*	Is more likely
Openness		Decreases	*	Increases
Offender accountability	*	Increases	*	Increases
Adjunct participant accountability		Is not considered	*	Increases
Societal accountability		Is not considered	*	Increases
Victims	*	Are empowered	*	Are empowered
Offenders		Are disempowered	*	Are empowered
Society	*	Is empowered	*	Is empowered
Hope		Decreases	*	Increases
Effective management		Decreases	*	Increases
Short term safety	*	Increases	*	Increases
Long-term safety		Decreases	*	Increases
Results are…		"I win."	*	"We heal."
RANKING	**4**	out of 25	**25**	out of 25

Additional Information

For additional information, please contact the International Center for Compassionate Organizations at: support@compassionate.center.

About the PAR Model's Developer

"A new and original thinker."

Philip K. Dick
American author
*The Man in the High Castle, Do Androids Dream of Electric
Sheep (Blade Runner), The Minority Report, VALIS*

Ari Cowan is the Director-General of the International Center for Compassionate Organizations. For his work to end violence, he was awarded the 1998 National Public Health Award from the United States affiliate of the international physician organization that received the 1985 Nobel Peace Prize. In addition, he has made presentations on violence and compassion at various national and international venues, including the United Nations.

Mr. Cowan was cited — along with Nobel Prize recipient and former President Jimmy Carter and 1980 Nobel Prize recipient Adolfo Pérez Esquivel (among others) — for his assistance in bringing the first public edition of *The International Bill of Human Rights* to publication.

More information about Mr. Cowan can be found online.

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