









Countering Lone-Actor Terrorism Series No. 9

Lone-Actor Terrorism

Toolkit Paper 1: Practical Guidance for Mental Health Practitioners and Social Workers

Edwin Bakker and Jeanine de Roy van Zuijdewijn



About this Paper

This paper is the ninth publication in the Countering Lone-Actor Terrorism (CLAT) project, which aims to improve understanding of, and responses to, the phenomenon of (potentially) violent lone actors through analysis of comprehensive data on cases from across Europe. The eighteen-month project is co-funded by the Prevention of and Fight against Crime Programme of the European Union, and has been undertaken by a RUSI-led consortium. Partnering institutions include Chatham House, the Institute for Strategic Dialogue (ISD) and Leiden University, one of the founding organisations of the International Centre for Counter-Terrorism (ICCT) at The Hague.

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International Centre for Counter-Terrorism - The Hague (ICCT)

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ICCT

Zeestraat 100 2518 AD The Hague The Netherlands +31 (0)70 763 0050 www.icct.nl

Practical Guidance for Mental Health Practitioners and Social Workers

ONE-ACTOR TERRORISTS ARE perceived as presenting acute challenges for law enforcement practitioners in detection and disruption. By definition, they act without direct command and control from a wider network, and it is assumed that without such communications they may evade the 'tripwires' that would usually bring them to the attention of the authorities. The Countering Lone-Actor Terrorism (CLAT) project aims to investigate this assumption. Through the construction and analysis of a database of 120 lone actors from across Europe, it seeks to improve understanding of lone-actor terrorists, their behaviour and their activities in the period leading up to their intended attack.

Lone-actor terrorism is defined by the CLAT project as follows:

The threat or use of violence by a single perpetrator (or small cell), not acting out of purely personal-material reasons, with the aim of influencing a wider audience, and who acts without any direct support in the planning, preparation and execution of the attack, and whose decision to act is not directed by any group or other individuals (although possibly inspired by others).¹

The project's methodology, key findings, and recommendations for policymakers are detailed in previous CLAT publications.² The aim of this paper is to draw out the practical implications of our research for mental health practitioners and social workers. It is not intended to provide a profile of lone-actor terrorists, but rather to offer guidance that may be of use to practitioners in Europe (and beyond), supporting the development of strategies to detect and deal with potential lone-actor terrorists and to understand the possible risk posed by persons of interest.

Recognising the significant variations in the roles, responsibilities and operating practices of mental health practitioners and social workers across Europe, the guidance offered here is

^{1.} For further discussion regarding this definition and how it was established, please see Edwin Bakker and Jeanine de Roy van Zuijdewijn, 'Lone-Actor Terrorism: Definitional Workshop', RUSI Occasional Papers (December 2015), p. iii.

^{2.} See in particular, Clare Ellis et al., 'Lone-Actor Terrorism: Analysis Paper', RUSI Occasional Paper (February 2016); Jeanine de Roy van Zuijdewijn and Edwin Bakker, 'Policy Paper 1: Personal Characteristics of Lone-Actor Terrorists' ICCT, 2016; Simon Palombi and Benoît Gomis, 'Policy Paper 2: Attack Methodology and Logistics' Royal United Services Institute for Defence and Security Studies on behalf of Chatham House, 2016; Melanie Smith, Sabine Barton and Jonathan Birdwell, 'Policy Paper 3: Motivations, Political Engagement and Online Activity' Institute for Strategic Dialogue, 2016; Clare Ellis and Raffaello Pantucci, 'Policy Paper 4: 'Leakage' and Interaction with Authorities' Royal United Services Institute for Defence and Security Studies, 2016.

intentionally broad and does not refer to current practice in individual states. This paper is accompanied by a counterpart that offers guidance for security practitioners.³

This paper presents three sets of recommendations offering guidance for mental health practitioners and social workers to prevent lone actor terrorism by sharing information, fostering engagement and awareness and a multi-agency approach.

Disclaimer

Despite extensive effort by the research team, the CLAT database does not contain every lone actor terrorism plot during the period studied. First, not all plots are in the public domain, especially where they have been abandoned, or disrupted at an early stage by the authorities. Second, there are variations across Europe in the way incidents are perceived and reported; for example, some incidents may be reported as a 'hate crime', but meet the criteria for inclusion in the CLAT database.

There are also some important limitations to the data due to the use of open source reporting. First, complete information is not always available, leading to a number of variables containing high levels of 'unknown' entries. For some variables, this unavoidably limited the analysis that could be conducted and the strength of the conclusions that could be drawn. Second, there is an inevitable element of reporting bias: whether information is publically available in relation to an issue may depend on whether it was interesting to the journalists investigating the story. Finally, the research teams faced particular challenges in finding open source information in relation to mental health issues.

Personal Characteristics of Lone Actor Terrorists and Implications for Practitioners

The focus of the research by Leiden University has been on the personal characteristics of lone actor terrorists. It has listed and studied the following variables for 120 perpetrators of lone actor terrorism: Age, gender, education, employment, relationship status, having children or not, indication of successful sibling, indication of social isolation, previous criminal sanction, previous physical violence, evidence of drug use, indication of a mental health disorder, diagnosis and treatment for mental health issues, and indications of a noteworthy life event. In addition a workshop with practitioners was organised to discuss the key findings and their implications for mental health practitioners and social workers. The workshop also allowed practitioners to share best and worst practices.

Key findings of the study of personal characteristics of lone actor terrorists were the following:

 Religiously-inspired and right-wing ideologies have very different age profiles: the majority of religiously-inspired perpetrators were less than 25 years old, with the

^{3.} Clare Ellis and Raffaello Pantucci, 'Lone-Actor Terrorism: Toolkit Paper 2: Practical Guidance for Security Practitioners', *RUSI Occasional Papers* (April 2016).

- number of perpetrators declining as age increased; this is in direct contrast to right-wing lone-actor terrorists where the majority were at least 40 years old.
- The findings indicate a possible link between social isolation and mental health disorder; this was particularly pronounced in the case of school shooters.
- Religiously-inspired perpetrators were seldom socially isolated.
- Where legally owned firearms were the chosen weapon for attack, there was an indication of mental health disorder in 53 per cent of perpetrators.

Although overall data metrics are useful, specifically focusing on certain sub-groups could provide more insight into shared characteristics of certain groups.

- In order to accurately interpret results, it is necessary to have appropriate benchmarks. For instance, we found that 35% of the perpetrators reportedly suffered from some kind of mental health disorder. The estimated percentage for the general population is 27%.
- It is relevant to look into certain combinations of variables and characteristics, rather than single ones, such as legal gun possession and mental health problems.⁴

The implications of the findings of the study for practitioners and the outcome of the workshops are presented here in the form of three sets of recommendations or toolkits to help mental health practitioners and social workers to contribute to the prevention of lone actor terrorism. The first set focuses on sharing information; the second deals with engagement with relevant communities, creating awareness of the phenomenon of lone actor terrorism, and improving conditions to work with vulnerable populations. The third set looks into a multi-agency approach to lone actor terrorism.

Sharing Information

- Detecting potential lone actor terrorists can be described as trying to find the needle in the haystack. It is difficult, but not impossible as in this case, the haystack the direct environment of the perpetrator can help find the needle. There are many cases of leakage by lone actors telling friends about their intentions or posting hints on the Internet which means the haystack could provide relevant information. Moreover, there are many cases of lone actor terrorists of which their surroundings, in hindsight, had noticed certain behaviour that should have been taken seriously.
- Investing in engagement and awareness among specific communities see below is one way to pick up signals. The other one is **sharing (sensitive) information between relevant actors**, in particular between mental health practitioners and law enforcement. Of course it is important to be aware and respect legal and ethical boundaries.
- **Be careful with hotlines for radicalisation**. Some countries (e.g. France, Sweden, The Netherlands) have already established hotlines. Others are considering to do so. Such ways of sharing information by non-professionals involves the risk of false positives.

^{4.} For the CLAT policy paper on personal characteristics of lone actor terrorists, see Jeanine de Roy van Zuijdewijn and Edwin Bakker, 'Policy Paper 1: Personal Characteristics of Lone-Actor Terrorists' ICCT, 2016.

Ideally, a set of possible key indicators is needed to be able to avoid this. Such lists are not available. The best alternative is **look for combinations of behaviour, personal characteristics and contextual factors**. Think of the combinations of being bullied, being a young male with mental health issues, and having the possibility to acquire weapons as member of a shooting club. Such combinations are the ones to look for or to be extremely worried about.

• When diagnosing people, the **behavioural aspects of a mental health disorder** should be taken on board. What does it mean for the daily life of a person (and his or her surroundings) to have a certain mental health disorder? In some countries, assessing the behavioural aspects is a standard practice, in others not. Although this analysis is sensitive information, under certain conditions, this information should be shared with the relevant surroundings in order to make sure these persons are helped not to do harm to themselves nor to others.

Engagement and Awareness

- Lone actors are rarely solitary actors. In other words: they act alone, but are not alone. They are part of society: have neighbours, colleagues, family members and many have friends as well. This makes it worthwhile to **invest in sensors within various communities** by way of community engagement and awareness programmes. For youngsters and young adults, this means raising awareness of the phenomenon of lone actor terrorists at school or among youth workers. For the relatively older vulnerable groups, possible sensors include social welfare organisations and private business (employers).
- In order to increase awareness of possible relevant combinations of indicators, it is recommended to **develop anonymised biographies** of lone actor terrorists and use them in training sessions with relevant actors.
- Investing in sensors within various communities requires **building trust** between vulnerable communities and individuals on the one hand, and professionals on the other; and between various relevant actors, for instance between private business and the mental health sector.
- Lowering barriers to mental health services is also very important. Part of this effort should be focused on removing taboos on speaking about mental health problems in certain communities. Trust and openness play a crucial role in this regard.
- When trying to raise awareness it is important to see the issue of radicalisation and radical behaviour by lone actors as **part of a larger debate on violence** within society. This means the issue of radicalisation should be seen as part of a larger debate on violence, aggression and exclusion. A relevant example in the case of school shooters is the earlier mentioned bullying at school.

Multi-Agency Approach

• It is important to distinguish different types of cooperation between relevant actors: from cooperation aimed at helping people in dealing with mental health issues and preventing

- radicalisation and radical behaviour, to cooperation aimed at removing potentially dangerous people from society. **Each type of cooperation needs different platforms**.
- When working together, it is important that everybody is on the same page and everyone has the same goals, and that people know and respect each other's roles.
- For the fixated, clearly mentally ill it is oftentimes quite clear what to do. Doing the right thing is much more difficult when mental health issues become less clear and the radical behaviour is more politically or ideologically motivated. Moreover, these potential lone actor terrorists operate more secretly, with less possibilities for early prevention and detection. It is important to realise the limitations of any preventative multi-agency approach. Some cases can only be detected by intelligence agencies.
- An important issue with cooperation between different actors on potential lone actor terrorists is that of access to data and safely storing data. The various partners must know who has access to what (part of the) data and where it is stored (and for how long).
- Regarding the latter and other aspects of multi-agency cooperation, it is important to be aware of and discuss ethical and legal issues.

Concluding Remarks

In this toolkit paper we have identified a number of key recommendations for mental health practitioners and social workers involved in dealing with (potential) lone actor terrorists. We should, however, be modest when assessing the chance of success in trying to prevent lone actor terrorism. It is, and will remain a difficult undertaking. However, against the backdrop of the enormous impact that some acts of this particular type of violence have on our societies, think of the attack by Anders Breivik, it is of utmost important to try to find ways to improve our efforts in countering lone actor terrorism. Many individual actors and agencies could contribute to this effort. Multi-agency cooperation and information-sharing are very important in this regard.



About the Authors

Prof. Dr. Edwin Bakker is Professor in Terrorism and Counter-Terrorism at Leiden University, Director of Leiden University's Institute of Security and Global Affairs and Research Fellow at ICCT. He studied Economic Geography (Netherlands) and Political Geography (Netherlands and Germany). In 1997, he defended his PhD thesis on minority conflicts in Slovakia and Hungary. He taught classes in international policies on preventing and managing separatism and intra-state war in the Balkans at the Centre for International Conflict Analysis and Management (CICAM), Nijmegen University. Between 2003 and 2010 he was a fellow at the Netherlands Institute of International Relations 'Clingendael' where he headed the Clingendael Security and Conflict Programme (since 2007). His research interests at Leiden University and the ICCT are, amongst other, radicalisation processes, jihadi terrorism unconventional threats to security and crisis impact management.

Jeanine de Roy van Zuijdewijn is a Research Fellow at ICCT. She is also a Researcher at the Institute of Security and Global Affairs (ISGA) of Leiden University. Jeanine studied International Relations in Historical Perspective at Utrecht University and finished her degree with a thesis on foreign fighters (cum laude). At ICCT, she has continued this research on foreign fighters which has translated into a number of publications. Jeanine also assists in two projects: Countering Lone Actor Terrorism and Transitions from Military Interventions to Long-Term Counter-Terrorism Policies, focusing on Libya (2011- now). She also helps Prof. Dr. Edwin Bakker with a MOOC – a massive open online course – called "Terrorism and Counterterrorism: Comparing Theory & Practice" and assists in teaching this course in blended learning format at Leiden University. Furthermore, she is Editorial Board Member of the Leiden Safety and Security Blog.