

Risk assessment and management; a multi-agency approach on dealing with violent extremist cases



« waakzaam en dienstbaar »



Risk assessment and management in extremist cases



*Or..
the whereabouts
of Dutch police psychologists
exploring the world of terrorism*

Focus on prevention

Policing strategy extremist cases:

Prosecution

Intelligence

NEW! Threat Management → Community policing + MH



Sanctions vs. prevention

60 possible interventions

- ◆ Monitoring
- ◆ Disruption
- ◆ Prosecution
- ◆ Deportation

- ◆ **Change**

2 intervention suggestions:

- *Material help*
- *Immaterial help*



Sanctions vs. prevention

2013-2014:

- ◆ 160 registered foreign fighters
- ◆ 30 returned
- ◆ 18 killed

Prevention strategy:

suspend passport

8 juveniles + 25 kids stopped from travelling

Freeze credits

Discontinue social benefits/ allowances



Sanctions vs. prevention

Weggemans, D., De Graaf, B., 2015. Politie en Wetenschap.

After detention: an explorative study of recidivism and reintegration of jihadi ex-convicts

10 ex convicts

37 professionals

Sanctions vs. Reintegration

Injustice frames

- ◆ Current preventative measures are short term solutions
- ◆ Arbitrary
- ◆ Consistent, centrally coordinated, well thought out and long term project of practical and social guidance

Mental health issues

Premise

Terrorists are 'normal'

- ◆ *Weenink, A.W., 2015. Behavioural Problems and Disorders among Radicals in Police Files. Perspectives on terrorism: 09-02*

140 cases

Travelled to Syria or preparing to do so

- Problem behaviour
- Mental health issues

Mental health issues

Criminal records

53% convicted

22% >10 crimes or serious crime

Psychiatric disorder/ symptoms: 20%

Problematic social setting: 8%

- death of parent (6)
- homelessness
- conflicts with parents

Problem behaviour: 60%



Mental health issues

20 persons (5 women, 15 men)

serious problem behaviour + indications of a mental health problem (no diagnosis)

- Cognitive impairment: 6
- Autism related: 2
- PTSD: 2
- Child abuse/ neglect: 4
- Anger management issues: 6
- Violent ideation + stalking: 1
- Borderline traits: 1
- Psychiatric care: 7

Mental health issues

8 persons (2 women and 6 men)

6% diagnosed disorder

1. Psychosis/ Schizophrenia: 4
2. Personality disorder (narcissistic) + substance abuse: 1
3. ADHD: 1
4. Autism spectrum disorder: 1
5. PTSD: 1

The descriptions reveal comorbidity of difficulties in individuals, and many individuals come from 'multi-problem' families.

Personal motives

“The most militant participants' rationales for terrorist violence were predominantly personal and furthermore, not necessarily or exclusively tied to their extremist religious convictions”

Rationales for terrorist violence in homegrown jihadist groups: A case study from the Netherlands, Schuurman, B. & Horgan, J.G., 2016

Food for thought



Cognitive distortions

The strokes of the cane aren't that bad. People don't really scream.

We are very peaceful and open to dialogue unlike the people in Europe, who are at war against Islam. We just have to protect ourselves.

We are obliged to kill people who insult Mohammed. It is written.

Risk assessment



- ◆ **300+ cases**
- ◆ **Priority?**
- ◆ **Intervention?**

Challenges (Borum, 2015)

- ◆ No robust empirical foundation for understanding the risk of terrorism
- ◆ Radicalisation does not equal involvement in terrorism
- ◆ There are many pathways towards involvement in terrorism
- ◆ Terrorism is driven and sustained by multiple causes

Challenges

- ◆ Relevant factors are often dynamic (therefore more difficult to measure)
- ◆ Relevant factors are mostly non specific
- ◆ Relevant factors are derived from general knowledge

Risk assessment

Introducing TM- model

- ◆ Multidisciplinary

Psychology, psychiatry, theology, extremism, terrorism, intelligence, police

- ◆ Evidence based

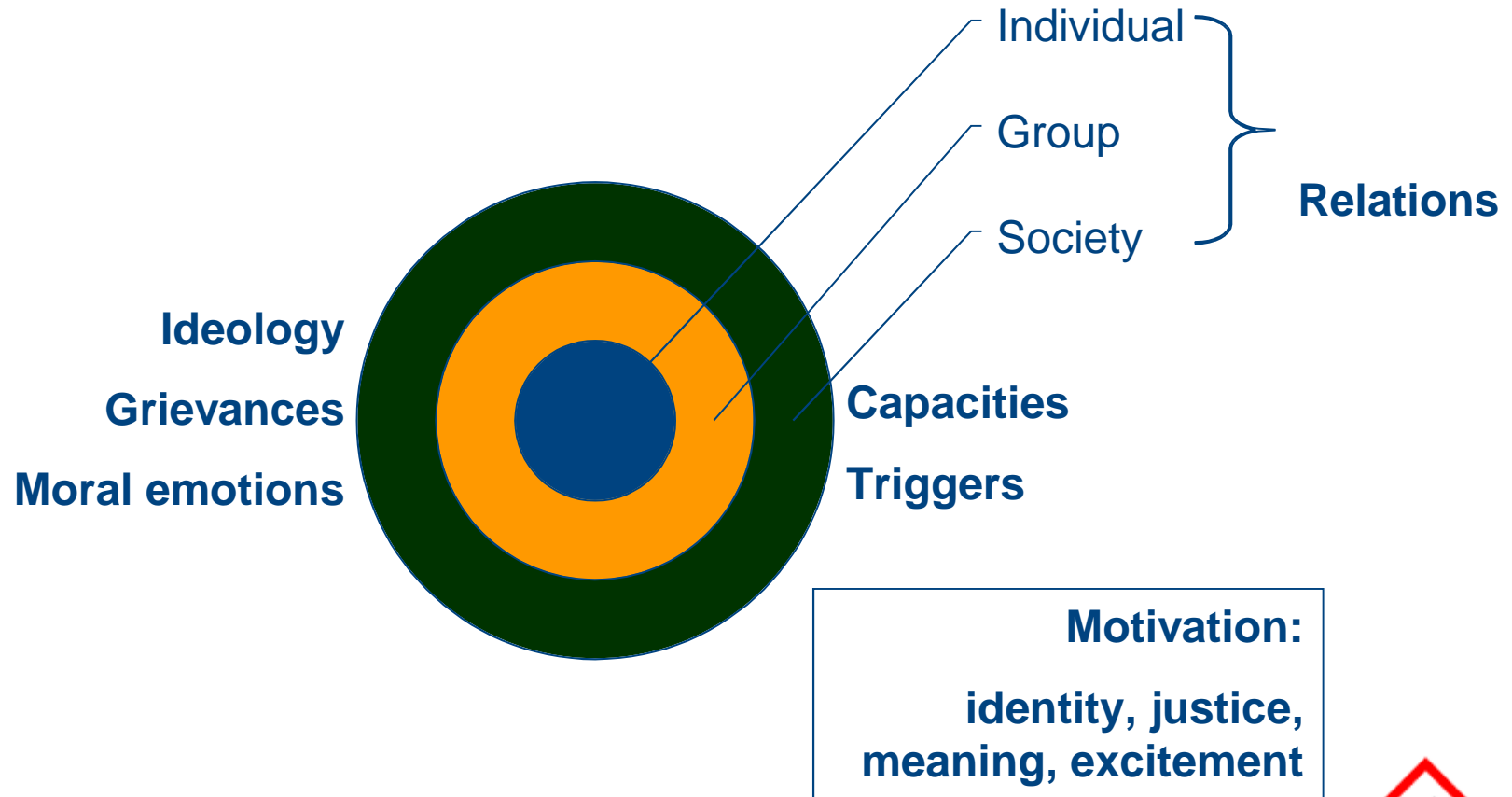
Exploration of SPJ-tools: HCR-20 V3, VERA-2, MLG
TRAP-18, MRI

- ◆ Information focused

Recent police + intelligence + mental health
Change in information gathering and structuring



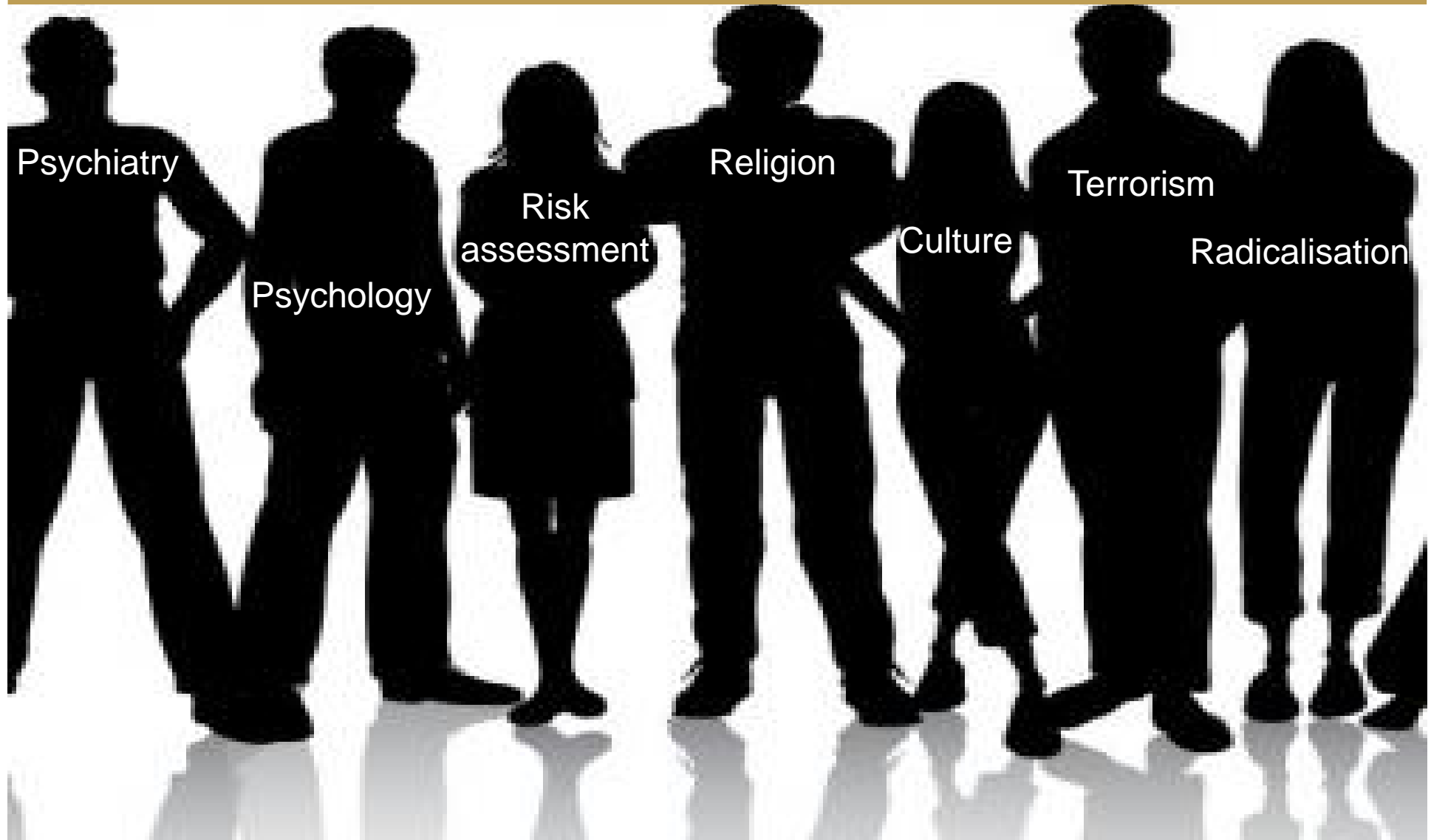
Risk factors



Proces of radicalisation



Expert group



Structured Professional Judgement

- Step 1: information gathering
- Step 2: presence of risk factors
- Step 3: relevance of risk factors
- Step 4: risk formulation
- Step 5: scenarios**
- Step 6: risk management
- Step 7: prioritisation

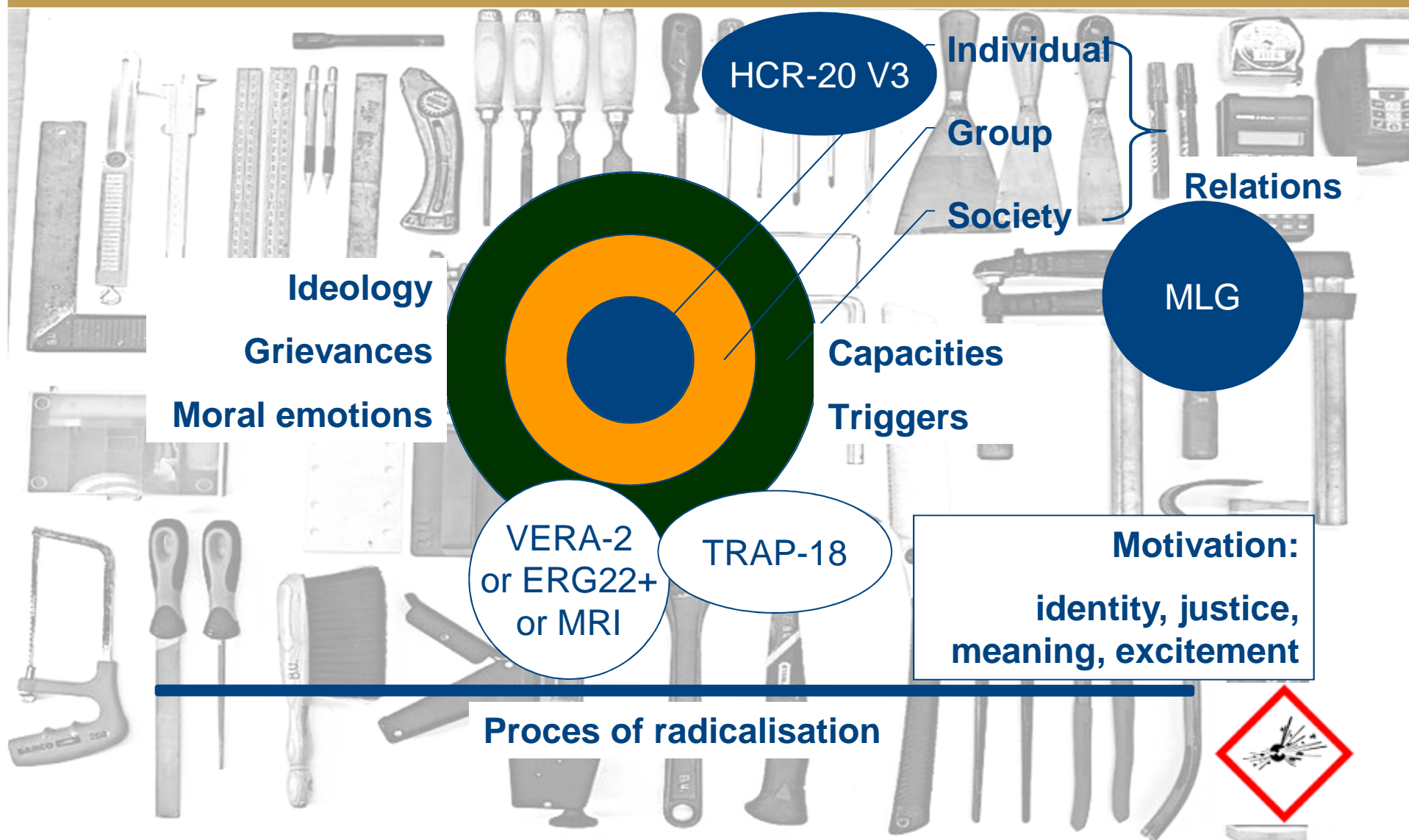


	Ideology (Intentions)	Social Context (Capabilities)		
Phase	5 items	4 items	Jihad/ extremism (intention to use violence)	
	15 items	6 items	Jihadization (accepting the use of violence)	
	6 items	5 items	Social alienation	
	5 items		Preliminary phase	

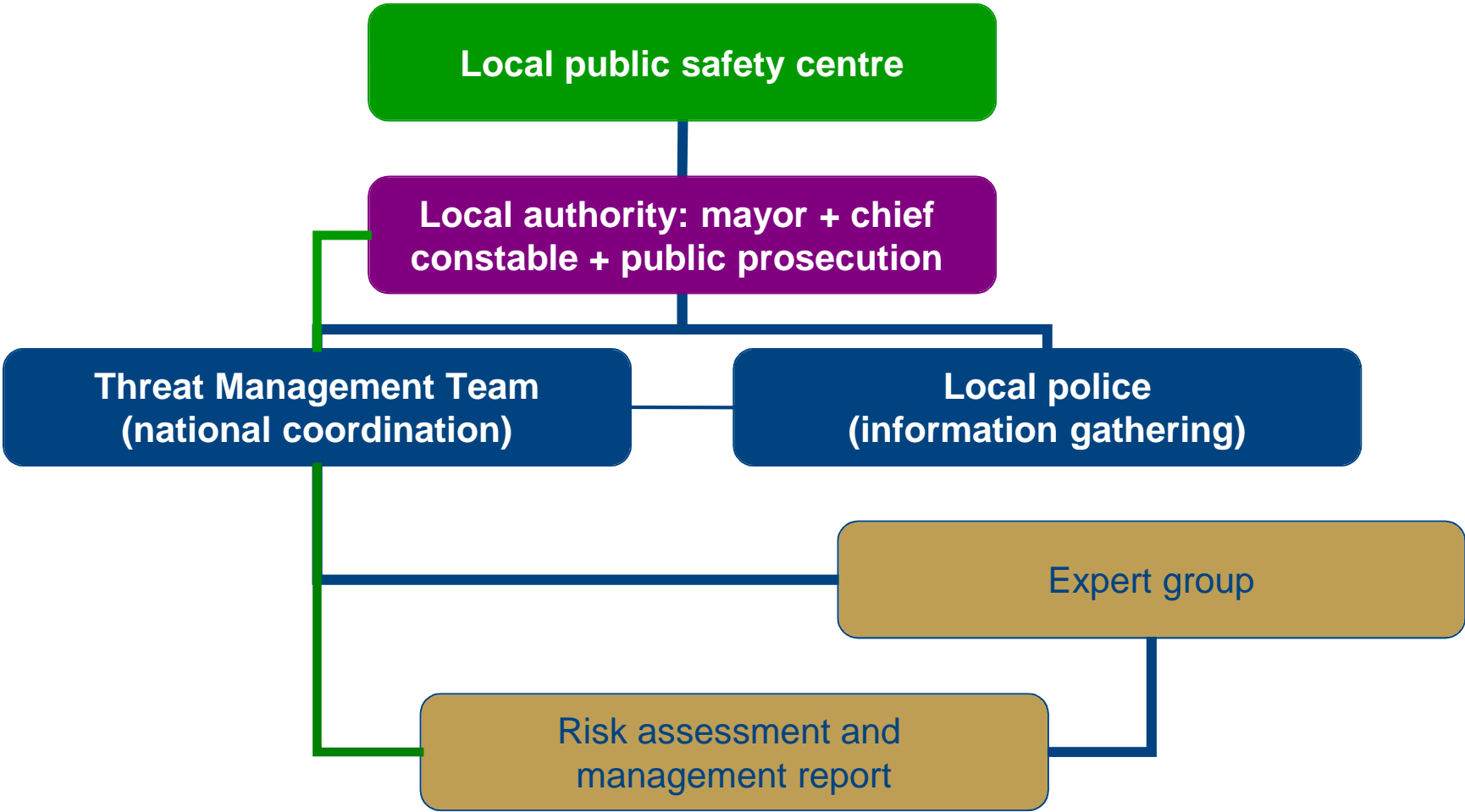
For more information, please contact the.
 Central Unit of the Dutch Police
 Center for Counter Terrorism
mailboxipolterrorisme@politie.nl
 +3188 6629368
 The Netherlands



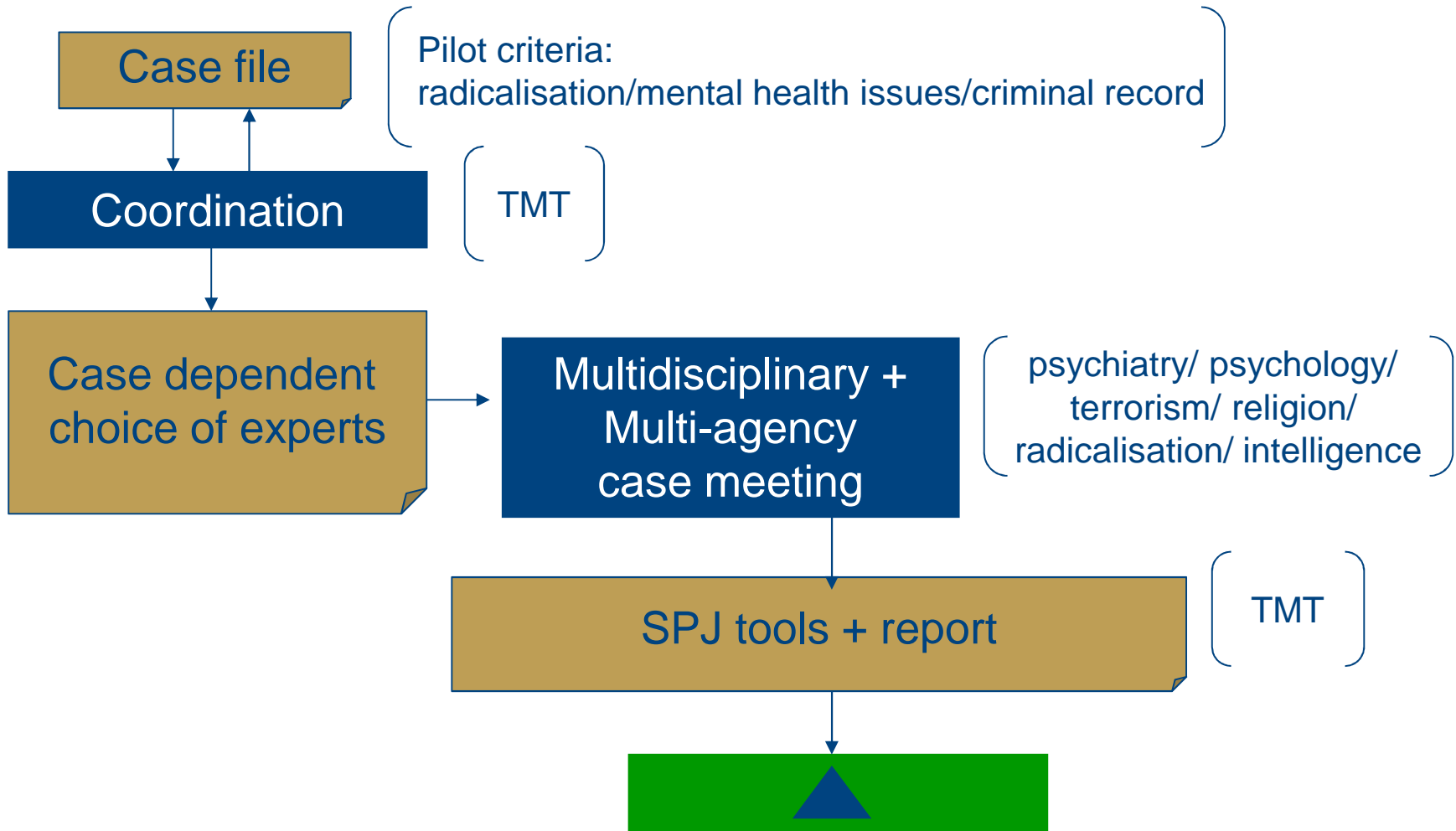
Risk factors (existing tools)



Developments



Developments



Developments

NIEUWE SITUATIE

1 politieregio met 10 gebieden

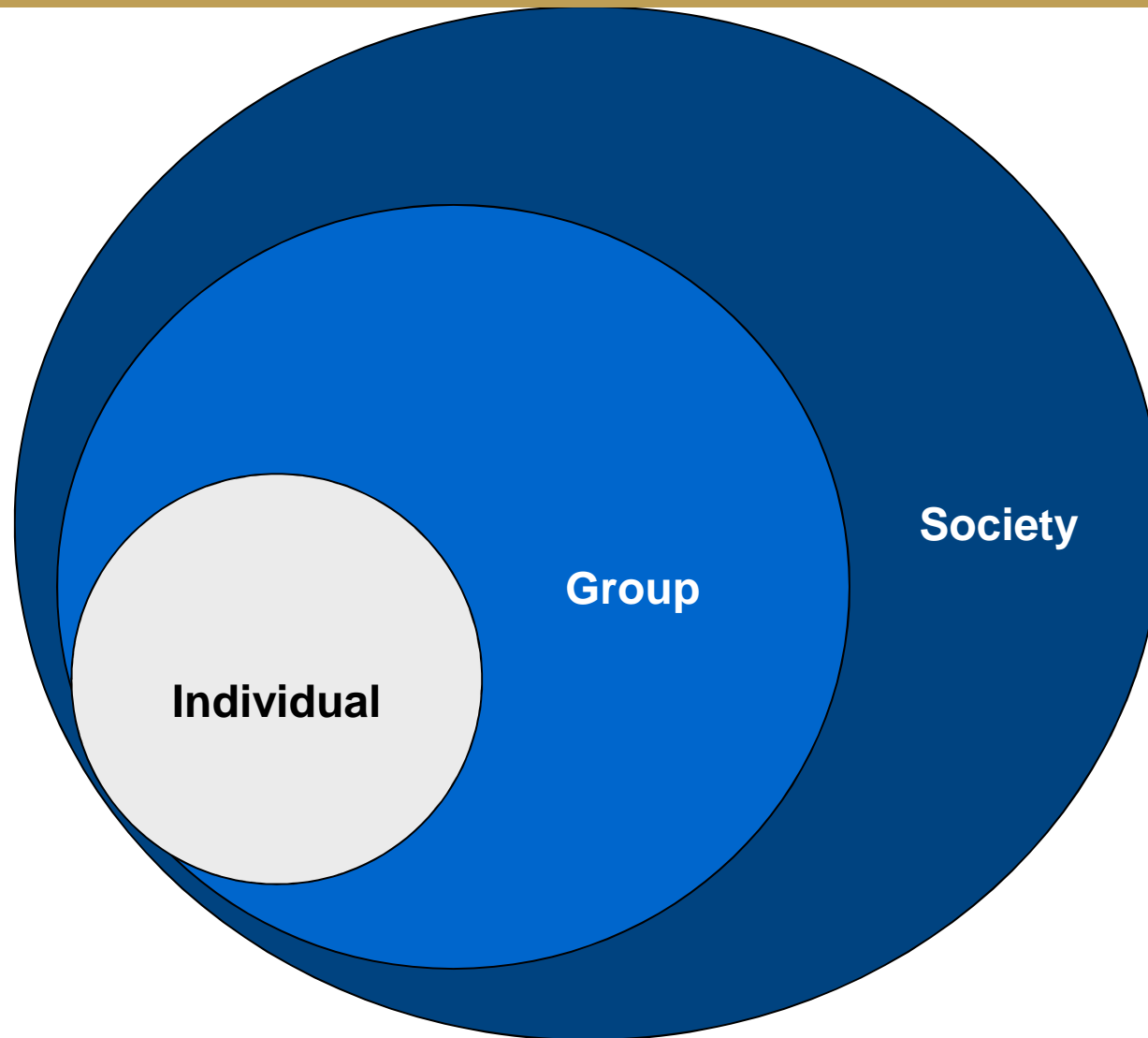
- 1 Noord-Nederland
- 2 Oost-Nederland
- 3 Noord-Oost
- 4 Noord-West-Nederland
- 5 Amsterdam
- 6 Haaglanden
- 7 Rotterdam-Rijnmond
- 8 Zuidoost-Nederland
- 9 Oost-Nederland
- 10 Limburg



Pilot phase:
The Hague

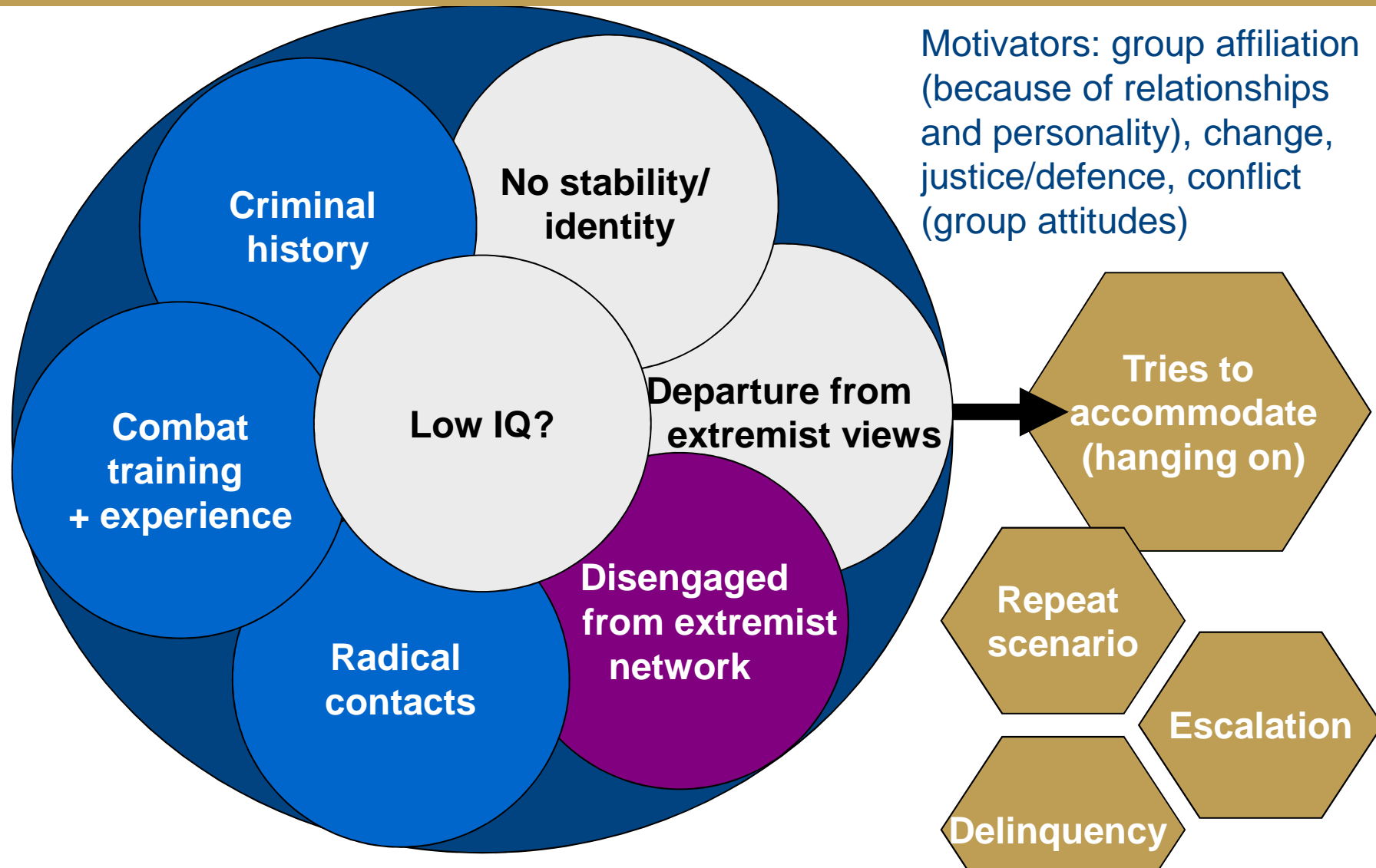
East NL

Case: Amir



**Multi Level
Guidelines**

Case: Amir



Case: Amir

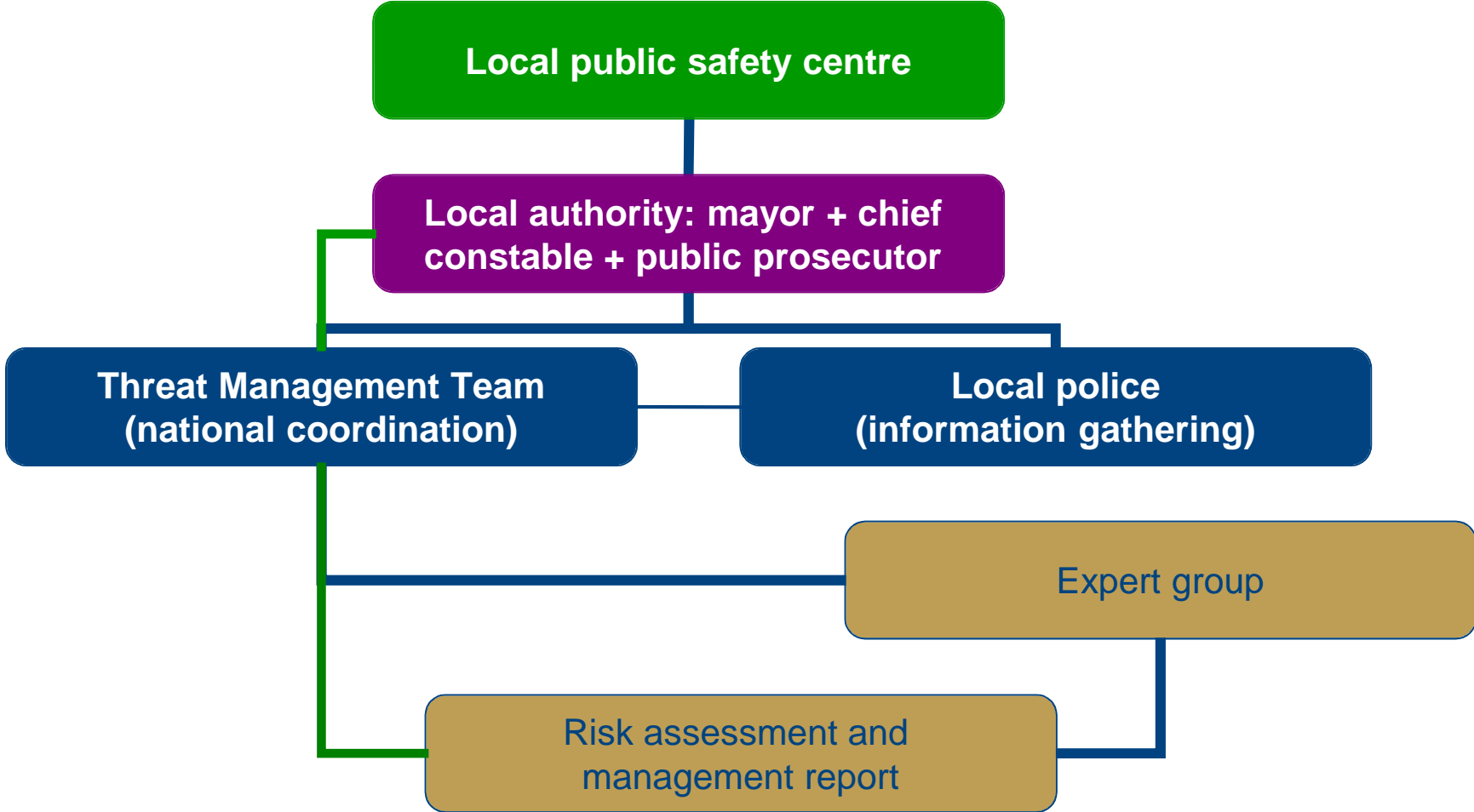
Management:

- N** Prosecution
- Y** Supervision
- Y** Support
- Y** Treatment
- Y** Monitoring

Treatment + discuss
professional suspicion,
stability (job, family
support, housing)



Developments



Closing remarks

Questions?

Ideas and suggestions?

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