



TARGETED VIOLENCE INTERVENTION BEST PRACTICE SUMMIT

After Action Report



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BACKGROUND

From September 10th through 11th, 2015, the Rutgers Institute for Emergency Preparedness and Homeland Security (IEPHS) and the University of Illinois at Chicago College of Medicine Department of Psychiatry (UIC), in collaboration with a local government partner, convened a Targeted Violence Intervention Best Practice Summit. Held in Chicago, Illinois, attendees consisted of more than 40 members of Federal, State, and local government agencies, as well as representatives from the academic, non-profit and private sectors, all of whom have been involved in working to address issues related to targeted violence. The overall aim of the summit was to articulate a whole community targeted violence intervention model that both draws on existing efforts and is tailored to the local level.

PROBLEM

Individuals and groups motivated by a range of ideological beliefs and individual factors have undertaken and continue to undertake violence against communities across the United States. Some individuals may act independently of any formal organization or direct command structure. Moreover, individuals may find motivation or resonance with their beliefs through social media or other online resources or through association with individuals – either virtually or in-person – who share, espouse or indicate shared ideas, values, or motivations. In other instances, individuals may find inspiration through other mediums or materials. These factors, as well as others, may – in turn – motivate someone to undertake a targeted attack.

Targeted violence, often directed at communal spaces, to include schools, houses of worship, as well as other public/shared spaces, have increased in both frequency as well as lethality over the last fifteen years. Targeted violence poses a significant threat not only to those specific ethnic and religious communities and institutions that are most frequently targeted by such violence, but to the broader community as well. Moreover, traditional law enforcement responses to attacks, or attempts to prevent the same, have frequently focused on enhancing surveillance or investigations of specific ethnic and religious communities. This approach has, in turn, securitized relationships, enhanced mistrust of law enforcement and government and decreased information sharing between law enforcement and communities that may be aware of and or able to identify or prevent attacks.

OVERVIEW

While certain behavior may require traditional law enforcement and prosecutorial responses, localities should enhance community capabilities for steering persons away from targeted violence, attempting to engage them in more positive outcomes, if such options are viable for the individual in question. This can be achieved through forming multi-disciplinary teams that are community-based and focused on multiple forms of targeted violence. The teams should be capable of identifying at-risk behaviors, accepting referrals from both law enforcement, communal leaders as well as members, conduct effective and efficient initial assessments of individuals followed by – where appropriate – comprehensive threat evaluations, arrange for ongoing support and treatment, and conduct follow-up evaluations, as well as offer out-reach, education and resources for communities whose members are placed through such processes.

NEED FOR DIVERSION AND REHABILITATION

In localities throughout the United States, an increasing number of individuals are being identified by both community members and law enforcement as potentially being on a pathway to adopt violent extremist beliefs and/or undertake targeted violence. In certain instances, options other than criminal prosecution may be both more viable and appropriate, leading to better short and long-term outcomes for individuals and community members, alike. Current options for addressing individuals in the pre-criminal space, however, are limited; law enforcement often lacks sufficient knowledge, skills, abilities or capacity – singularly – to provide alternatives other than investigation, arrest and prosecution. Thought leaders are calling for drawing upon various community resources to confront such issues, but developing comprehensive strategies, to include rehabilitation of those individuals, has not yet been a major focus.

EXISTING CAPABILITIES

While many local, state, and federal, agencies have engaged in different types of interventions aimed at diverting individuals from an apparent path to violence on an ad hoc basis, and while some have created specially-designed programs for this purpose, no agency – local, state, or federal – has yet built a specially-designed, comprehensive, and systematic intervention program for this purpose.

BEST PRACTICE AREAS

The utilization of intervention processes – to include those made up of a team whose members have either personal knowledge of the individual who is the focus of the intervention or subject matter expertise in a relevant field of study – to address areas or issues of personal, family or societal concern are not new. Indeed, from alcohol to narcotics as well as various personal issues to gang memberships, there has been substantive development work and analysis of various intervention models for different issues. Summit participants agreed that best practices from other intervention efforts should be examined and reviewed for potential utilization or incorporation into any intervention effort dealing with people who may be motivated through extremist ideology or other means to become violent.

INTERVENTION PROCESS

Participants of the summit reached consensus on the value of a multi-disciplinary model, custom-suited to meet the needs of a particular community. Such a process would require interactive dialogue between law enforcement officials, community members, religious leaders, mental health and public health professionals and legal experts to implement a viable strategy that would succeed in providing for the possibility of rehabilitation of at-risk individuals and their reintegration as well as productive participation in the community. It is critical to note that key components of the process would need extensive pre-implementation review and concurrence by involved parties; notably, the role, manner, and level of engagement from law enforcement in this process may be determinative both to community buy-in and trust as well as overall success. Where relationships are tense, damaged, or non-existent, extensive efforts to build relationships of trust may be required; these relationships must be both developed in an environment of honest

dialogue and be based on mutual interest and support. This may require a broad consideration of community concerns and issues – to include those outside of the control or mission of law enforcement – that must be addressed in order to create the foundation critical to ensure collaboration. Conducive to the success of an intervention process of the type contemplated is the existence of communities of trust between law enforcement and residents. The targeted violence intervention model must also incorporate best practice approaches consistent with operating protocols, risk assessment tools and legal obligations to address individuals who are on the continuum from vulnerable to being prepared to conduct acts of violence. Key elements of this process include: 1) outreach and education to community members and law enforcement to inform them about how to identify at-risk behaviors; 2) accept referrals from community and law enforcement; 3) effective and efficient initial assessments of individuals followed by – where appropriate – comprehensive threat evaluations; 4) arrange for ongoing support and treatment in the community; 5) conduct follow-up evaluations of individuals receiving intervention services.

MULTIDISCIPLINARY TEAM

Solutions to the threat of targeted violence need to be held by community-based multidisciplinary teams who draw upon mental health, public health, religious, and education frameworks and remedies. The overall purpose of these teams is to conduct intervention activities in collaboration with community and law enforcement assets. The capacity of a team must be built through providing cross-training of team members regarding different content areas and regarding multidisciplinary team roles and functions. Given the need for a whole-community approach to the issue of targeted violence, and trends that have been identified amongst those who undertake attacks, the engagement of mental and public health officials will be critical to ensure that individuals are appropriately engaged. Moreover, religious figures may provide added value where individuals are reachable through the same; these communal leaders can also, where individuals are being motivated to violence through religious justifications or motifs, provide valuable counternarratives and perspectives. Peers, friends and others who an individual perceives to have social credibility may provide valuable insight and can deeply impact choices of individuals; where possible and appropriate, these perspectives should be involved. Individuals who were previously associated with violent extremist movements but now work to offer counternarratives to the movements of which they were formerly associated offer one potentially impactful perspective. While individuals who may be motivated to violence may be unreceptive to traditional community leaders or family, former extremists may have an ability to reach these individuals and affect their life choices. While concerns may exist with certain individuals who indicate past affiliation with violent extremist movements or criminal entities, where former extremists can be relied upon, and are appropriately vetted, they may play a particularly meaningful and viable role as a component of the multi-disciplinary team.

EXECUTING THE MODEL

The summit explored how the model may be executed within the communities of the participants and beyond. Law enforcement or governmental agencies may be the initiators, and may – in some cases – be contributing significant resources; this may be in instances where law enforcement or governmental agencies become aware of an individual but feel that an approach other than a traditional criminal one would be appropriate. Provided that efforts at relationship

building and trust are effective, the majority of cases will likely come from community; friends, family, teachers and religious leaders may be in the best position to recognize changed or concerning behavior. In either instance, the most successful multidisciplinary teams will be those that are located in community-based institutions, and linked with broad community-based networks of other professionals or community advocates. Individual communities and/or leadership must decide upon the criteria for membership in the multidisciplinary teams; a general consensus arose that members should have professional qualifications as well as community acceptance and should participate in standard mandated trainings.

COMMUNITY-LAW ENFORCEMENT COLLABORATION

Summit participants expressed the importance of community-law enforcement collaboration that is based on true, genuine partnerships between providers and community. These partnerships must be founded on inclusiveness, trust, and transparency, and focused on shared goals, rather than introducing a ready-made solution that comes from outside the community. This includes both how the problem is defined (e.g. what forms of targeted violence), and how it is approached. So as to avoid singling out any one community, it is preferred to take a multi-community and interfaith approach. Moreover, partnerships that are effectuated at the local level – between law enforcement and community members – are most likely to succeed; these efforts are most likely to guarantee consistency of actors and the ability to develop long-term, substantive relationships, thereby ensuring ongoing and continuous engagement in a positive and proactive manner.

CIVIL LIBERTIES ISSUES

Participants at the summit were also cognizant of the legal limitations and restrictions to any program due to civil liberties and privacy considerations. For example, numerous potentially suspicious activities are protected under the first amendment and care must be taken to ensure that training as well as activities meet constitutional muster; the preservation of rights and maintenance of privacy standards are critical. Additionally, there are limits as to how much information is available as well as what can be done with juveniles in addition to rules and regulations related to the protection of medical records and limits on how public actors may deal with the same. Given the aforementioned summary of issues, as well as other concerns, the ability to effectively navigate legal requirements for any program will be a necessity.

UNRESOLVED ISSUES

Funding. Lack of funding thus far has hampered addressing targeted violence. Intervention programs will require funding to secure professional participation, training, and treatment resources.

Engagement. Initial engagement with an individual who is believed to be motivated to violence or violent extremist ideology is critical; first encounters can set the tone for the entire interaction, as well as the overall effectiveness of the intervention process.

Handoff. A critical issue concerns the handoff of a person of interest from law enforcement to the multidisciplinary team: from whom to whom, at what point in time, under what conditions, with what understandings, and to what end?

Sustainability. Because multidisciplinary teams are intended to be long-term, it is important to consider how to ensure their long-term sustainability, such as through demonstrating their effectiveness through research and through durable funding.

Risk Indicators. To assist the multidisciplinary teams in determining those at risk it will be necessary to create a matrix of threats and vulnerabilities for assessment and referral purposes.

Prevention. It is unclear whether the multidisciplinary teams will also engage in prevention activities, which are another necessary component of addressing targeted violence.

We would like to thank the more than 40 persons who participated in the summit, as well as all of those who contributed to this report. The authors of this report are Stevan Weine, Michael Masters, and Linda Tartaglia.

Stevan Weine MD is Professor of Psychiatry at the University of Illinois at Chicago College of Medicine, where he is also the Director of the International Center on Responses to Catastrophes and the Director of Global Health Research Training at the Center for Global Health. Weine is author of two books. When History is a Nightmare: Lives and Memories of Ethnic Cleansing in Bosnia-Herzegovina (Rutgers, 1999) and Testimony and Catastrophe: Narrating the Traumas of Political Violence (Northwestern, 2006).

Michael Masters is a Senior Vice President at The Soufan Group, a strategic security consultancy offering advisory services, policy and research analysis, as well as training programs and technical services to public and private sector clientele across the globe. Previously, he served as the Executive Director of the Cook County Department of Homeland Security and Emergency Management where he oversaw the development of one of the most comprehensive United States Department of Homeland Security grant-funded programs to address targeted violence in the country.

Linda Tartaglia is the Director of Rutgers University Police Institute. The Police Institute works in collaboration with community and law enforcement partners as a neutral convener of criminal justice and community partners, assisting agencies and communities in analyzing and solving problems. Ms. Tartaglia has over 35 years of experience in the development and implementation of criminal justice policies and practices on the federal, state and local level.

APPENDIX

Participant Roster

Name	Organization
Dr. Bambade Shakoor Abdullah	Leadership Development Institute
Barbara Abrajano	Interfaith Engagement Advisor
Junaid Afeef	Common Good Advocates
Salam Al-Marayati	Muslim Public Affairs Council
Lieutenant Ronald Beggs	Dearborn Police Department
Dr. Tony Beliz	Beliz & Associates
Alejandro Beutel	START Consortium
Sydney Black	The Soufan Group
David Brannegan	Argonne National Laboratory
Sergeant Jonathan Cameron	Cambridge Police Department
Dr. Ami Carpenter	University of California San Diego
Patrick Daly	Cardinal Point Strategies
Lieutenant Leonard DiPietro	Cambridge Police Department
Dr. Heidi Ellis	Boston Children's Hospital
John Farmer	Rutgers Institute for Emergency Preparedness and Homeland Security
William Flynn	GARDA Risk Management, LLC
David Gersten	U.S. Department of Homeland Security
Zachary Ginsburg	Strategic Policy Partnership, LLC
Paul Goldenberg	Cardinal Point Strategies
Lawrence Hester	Progressive Community Church
Dr. Mohammed Kaiseruddin	Council of Islamic Organizations of Greater Chicago
Nicholas Larma	Federal Bureau of Investigation
Rev. Gregory Livingston	The Coalition for Global Peace, Justice and Community Safety
Michael Masters	The Soufan Group
Thomas O'Reilly	Rutgers University - Police Institute
Dr. Ira Packer	University of Massachusetts Medical School
Morris Pasqual	U.S. Attorney's Office, Northern District of Illinois
Christian Picciolini	Life After Hate
Chloe Polutnik	University of Illinois at Chicago
Jacquelyn Rose	Cambridge Police Department
Stephanie Samoska	Federal Bureau of Investigation
Patrick Skinner	The Soufan Group
Dr. Susan Szmania	START Consortium
Linda Tartaglia	Rutgers University - Police Institute
Karen Volker	Cure Violence
Robert Wasserman	Strategic Policy Partnership, LLC
Dr. Stevan Weine	University of Illinois at Chicago College of Medicine
Dr. Michael Williams	University of Massachusetts Lowell
Ahmed Younis	Chapman University