



A THEORY OF CHANGE TO REHABILITATING AND REINTEGRATING EXTREMIST OFFENDERS IN THE UNITED STATES

FROM ASKING “WHAT’S WRONG WITH YOU” TO “WHAT HAPPENED TO YOU”

“ There is a very simple and immutable ‘iron law of imprisonment:’ Except for those who die in prison, everyone who goes to prison ultimately returns home.¹ ”

In the United States, 27.4 percent of jihadists convicted since September 2001 have already returned home²; over the next five years, approximately 25 percent of those currently incarcerated for terrorist offences will complete their terms of imprisonment.³ With calls to expand domestic terrorism statutes⁴, we can also expect a rise in the number of far-right wing terrorism-related prosecutions—the majority of whom, too, will return to society one day. However, there remains little in the way of an evidence base for a holistic framework that can guide nascent rehabilitation and reintegration (R&R) efforts and answer pressing questions such as:

- What happens when terrorism-related offenders are released from prison?
- Do they emerge rehabilitated and prepared for reintegration?
- To what extent do they continue to pose a risk to public safety?
- Do different types of terrorism-related offenders pose (and face) distinctive challenges because of their ideological orientation, role, or time spent in their respective movement?
- Are there effective in-prison interventions that can reduce the risk of recidivism post-release?
- How can we (and they) truly know if they are effectively ‘deradicalizing’ in prison and reintegrating back into the society?

Evidence suggests that the risk of recidivism to violence for those previously convicted of terrorist offences is merely 1.6 percent. Yet, attacks in Toulouse (2012), Brussels (2014), Paris (2015), Copenhagen (2015), London (2019), and Vienna (2020) were all carried out by former detainees. Given the profound sociopolitical, financial, and human consequences associated with even small-scale violent extremist attacks, the prospect of a single event represents a costly threat.

Absent any formal in-prison or post-release program or protocol for terrorism-related offenders in the United States⁵, this population may pose a serious threat going forward. Thus, a critical need exists to identify the multi-level mechanisms, obstacles, and facilitators for effectively and efficiently supporting the reintegration of former violent extremists in a way that reduces the risk of recidivism and enhances public safety.

The goal

To facilitate the safe, healthy, and dignified rehabilitation and reintegration of violent extremist-affiliated criminal offenders while decreasing the likelihood of in-prison radicalization and increasing local resilience to violent extremism over the long term.



FROM ASKING “WHAT’S WRONG WITH YOU” TO “WHAT HAPPENED TO YOU.” APPLYING A TRAUMA- AND COUNTERING VIOLENT EXTREMISM (CVE) APPROACH TO REHABILITATION AND REINTEGRATION OF EXTREMIST OFFENDERS.

Violent extremism can be seen as a public health problem.⁶ Yet, current deradicalization-oriented paradigms are primarily concerned with individual (de)radicalization and focus on ideology as the primary factor in the radicalization process, while underestimating broader social and contextual circumstances that impair identity formation, individuation, and decision-making.

A trauma-informed paradigm grasps health in a holistic manner, as physical, mental, psychosocial, and even spiritual wellness. By appreciating the prevalence of trauma and the identification of early life adversity and toxic stress as strong precursors and predictors of negative outcomes later in life, a trauma-informed framework offers a principle-based lens that expands to include structural as well as inter- and intra-personal factors, and thereby meets the needs of individuals that differ in the degree of agency, role, commitment, drivers of radicalization, and other variables.

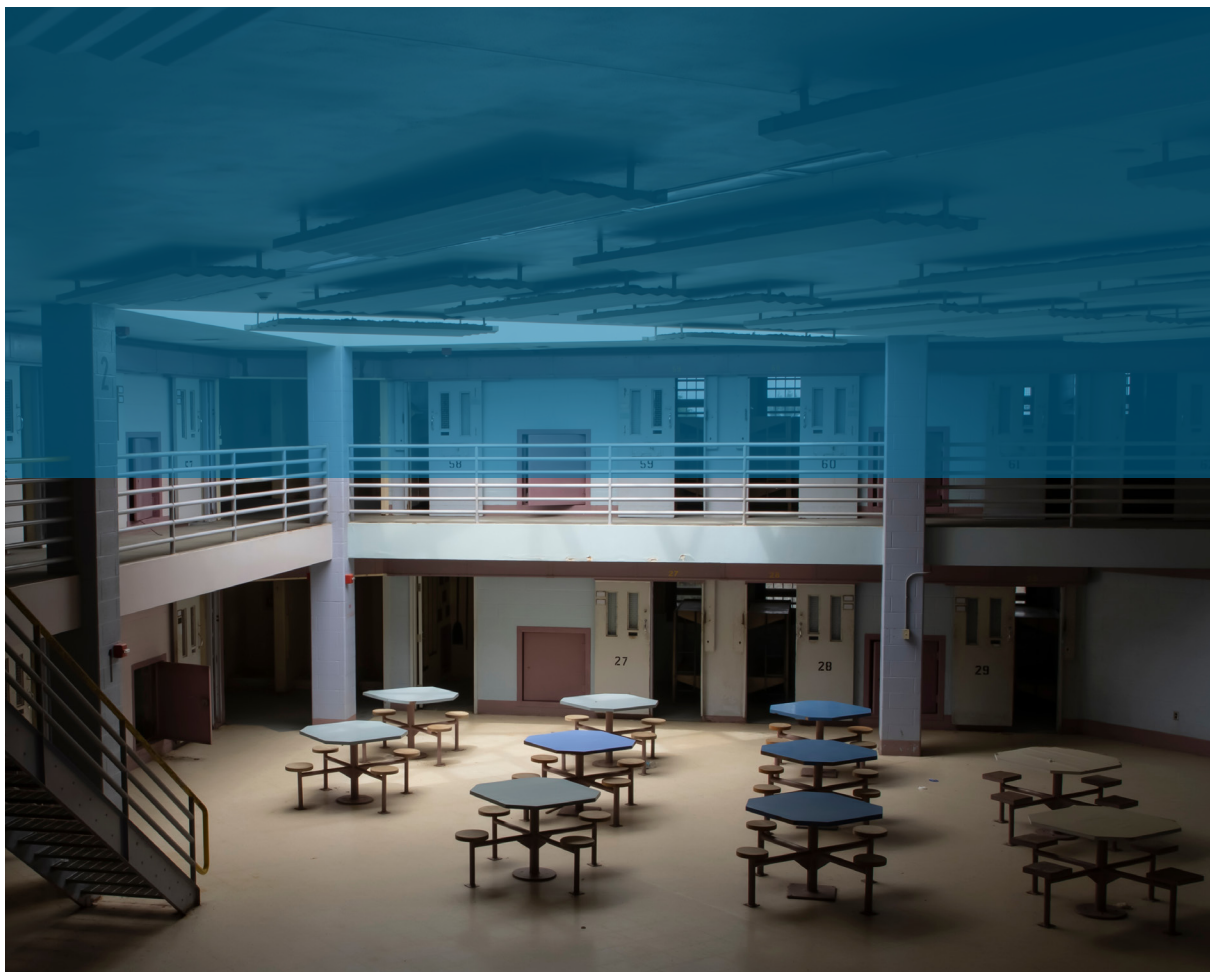
Identified connections between trauma and the commission of future violence developed a trauma- and violence-informed care (TVIC) framework, which expanded the concept of trauma-informed care to account for the intersecting impacts of systemic and interpersonal violence and structural inequities on a person’s life.⁷







Similarly, a trauma- and violence-informed vantage point suggests expanding the field of radicalization and extremism studies and practice to one that represents a trauma- and CVE-informed (TCVE-informed) framework, one that can synthesize learning from trauma- and violence-informed approaches for other populations with the nascent but growing body of evidence for CVE programming.

A trauma-informed approach acknowledges the basic needs of individuals who have been radicalized and permits an intervention that addresses them with a constructive approach. This framework will more effectively improve outcomes and address the complexities of individual (de)radicalization, while also addressing the need to treat social and structural risk factors through a complex, nonlinear systems approach, and is most appropriate for providing the culturally sensitive mental health and psychosocial support essential to effective reintegration.

By shifting the approach from “what’s wrong with you” to “what happened to you,” a TCVE-informed framework, though it preserves and acknowledges advancements in knowledge and effective P/CVE programming and practice, calls for new thinking about how positive change and interventions for these high-risk individuals can be realized, implemented, and evaluated.

Trauma- and Countering Violent Extremism-Informed Care		
Is not trauma-treatment	But rather	Integrates and understands past and current experiences of violence and trauma into all aspects of service delivery.
Does not suggest a monocausal link between trauma and radicalization	But rather	Focuses on the nexus between mental health and radicalization to violence and suggests that grasping <i>how</i> and <i>why</i> that is the case opens the arena for disengagement and deradicalization-oriented interventions to benefit from such perspectives.
Does not suggest that trauma is an omnipresent driver of radicalization to violent extremism	But rather	Would argue that those who suffer from complex trauma or PTSD are at heightened risk of accepting extremist or prejudicial narratives.
Does not suggest all extremists suffer from diagnosable trauma	But rather	Would argue that engagement in extremist ideologies or movements, particularly where the outcome is incarceration, is traumatizing.
Does not remove the role of individual agency	But rather	Seeks to understand why people were radicalized, looking at the trauma associated with the drivers of radicalization as well as the subsequent experiences in arenas of conflict.



Definitions	In practice
 Safety <p>Living conditions promote positive mental and physical health, connectedness, and resilience.</p>	<p>Focus on an offender's well-being, but also guarantee public safety against any physical or psychological harm induced by reintegration.</p>
 Trust & Transparency <p>Goals, operations, and decisions are conveyed to program participants to build trust.</p>	<p>Foster communication that addresses uncertainty, confusion, and pain but that also supports accountability and responsibility.</p>
 Peer Support <p>People from diverse backgrounds who share common experiences come together to build relationships in which they share strengths and support each other.</p>	<p>Address psychosocial needs to offer a sense of support and community, resembling the sense of belonging, meaning, purpose, and community that program participants experienced while engaged in the extremist movement.</p>
 Collaboration <p>Power differences—between staff and clients and among organizational staff—are leveled to support shared decision-making.</p>	<p>Nurture relationships that enable the communication of thoughts, feelings, and emotions associated with the significant life events and can help in coming to terms with connecting trauma, depression, and mental health concerns to violent extremist involvement.</p>
 Empowerment <p>Strengths are recognized, built on, and validated—including a belief in resilience and the ability to heal from trauma.</p>	<p>Focus on the development of skill sets so individuals can function and cope with anxiety, toxic stress, and reintegrate effectively.</p>
 Cultural, Historical, & Gender Appropriateness <p>Biases and stereotypes (e.g., based on race, ethnicity, sexual orientation, age, and geography) and historical trauma are recognized and addressed.</p>	<p>Mitigate perceptions of alienation that spark radicalization and strengthen inclusivity in the community, thus avoiding the creation of new grievances.</p>



REHABILITATION AND REINTEGRATION OF EXTREMIST OFFENDERS IN THE UNITED STATES: A THEORY OF CHANGE

Interventions are always rooted in some theory that describes how the particular implementation of a program will bring about a desired outcome. Yet, there remains little in the way of an evidence base for a holistic framework that can guide nascent rehabilitation and reintegration efforts for extremist offenders. While no intervention framework could possibly consider all potential variables to define exactly what interventions will be designed, developed, and supported, and how partners within may engage in practice, absent or poorly designed theories of change (ToCs) risk advancing programming and interventions on untested assumptions about what fosters change, consequently risking doing more harm than good.

The following ToC, specific to convicted terrorism-related offenders and those with known violent extremist affiliations in the United States, seeks to provide a conceptual framework within which rehabilitation and reintegration of extremist offenders is understood to occur. The ToC sets

out the most important elements and how these might be activated by any actor, organization, or institution engaging in the space to advance context-specific programming and supervision and to provide tailored services for the effective reintegration of this “hard to reach”⁸ population both in-prison and upon release. While the ToC does not provide a definitive intervention logic, it does accomplish the following:

- Broadens a terrorism prevention paradigm by incorporating and justifying the application of a TCVE-informed approach;
- Outlines a multidisciplinary, evidence-backed framework that will facilitate better measuring and evaluation from the outset, as it can be periodically revisited as programming evolves in any jurisdiction or setting; and
- Details how activities can promote a series of results in divergent spheres and life areas crucial to achieving the intended goal.

General assumptions

IF... A network of actors from the P/CVE landscape (including government, in-prison staff, probation officers, and law enforcement personnel) are connected with trauma- and violence-informed care (T&VIC) trainings, awareness, and tailored interventions,

THEN... A T&VIC paradigm can be integrated into P/CVE work and utilized with violent extremist offenders, their families, and the broader community.

THEN... Spiritual, psychological, and vocational pressures for recidivism will be diminished.

THEN... Violent extremist offenders will be more resilient with respect to social reintegration.

THEN... Communities can engage with them in reconciliation-oriented activities and programs.

THEN... Communities increase support for the reintegration of violent extremist offenders.

THEN... Recidivism and extremism are reduced, and social cohesion is increased.

THEN... Reintegration of violent extremist offenders will be more sustainable.

IN PRACTICE

OBJECTIVE 1: FRAME THE CONTEXT APPROPRIATELY AND CREATE A SYNCHRONOUS ECOSYSTEM OF ACTORS

The competent delivery of services is contingent on whether a system for communication of overlapping activity and service delivery in different objective areas, often provided by diverse individuals, institutions, and organizations can be established effectively and, ideally, synergistically over the long term. Yet, while expert recommendations include the use of psychologists, social workers, religious scholars, former violent extremists, aftercare experts, prison officials, correctional officers, probation officers, and even family members and community leaders, they fail to recommend mechanisms that would make sure such a diverse range of actors are coordinating, operating, learning, and sharing information with each other.⁹

Therefore

IF...

Efforts enable key actors to have a clear understanding of the violent extremist offender landscape, with the ability to identify mechanisms for multisectoral efforts that synergistically support short, intermediate, and long-term goals and objectives,

THEN...

Key actors can build a fluid, collaborative, informed, and effective programmatic space that can better facilitate multisectoral, transdisciplinary collaboration as well as permit co-creation and knowledge transfers that enhance capacity, learning, and the implementation of evidence-based practices over the long term.

BECAUSE

Ongoing communication and effective systems that guarantee that each approach operates simultaneously without impinging on the others' activities can make efforts complimentary, preserve the civil liberties and dignity of individual persons of interest, and can deliver on their need for affirmation, hope, and belonging, thus avoiding creating further grievances.¹⁰

OBJECTIVE 2: OFFER INDIVIDUAL PHYSICAL, MENTAL, AND PSYCHOSOCIAL SUPPORT

Altering context, or what happens outside oneself, can dramatically alter one's internal condition, attitudes, perceptions, narrative, and behavior. This tracks well with the history of radicalization research, which has identified that violent extremism is not a mental health condition nor is there a set terrorist profile, but that instead radicalization pathways and processes are marked by complexities largely subject to setting events and circumstance.¹¹

Therefore

IF...

Treatment and interventions provide access to individualized TCVE-informed pre- and post-release services and interventions for extremist offenders and those susceptible to radicalization in prison settings to recover from developmental, psychological, and sociological injuries and to establish and maintain physical, mental, and spiritual health and psychosocial support,

THEN...

The causality of any act of human violence becomes more complex, with internal and external variables and influences intersecting, and programming can address psychosocial needs and adjust programming dynamics so that they might offer a sense of support and community, resembling the sense of belonging, meaning, purpose, and community that program participants experienced while engaged in the extremist movement.

BECAUSE

A TCVE-informed approach opens up the arena to a better appreciation of complexity and establishes a better client-centered system that enables the communication of thoughts, feelings, and emotions associated with significant life events and can preserve dignity, establish trust and rapport, and appreciate that individual agency is at least impacted by experiences outside one's control (i.e., environmental, structural, and inter- and intrapersonal factors) and can thus help in coming to terms with connecting trauma, depression, and mental health concerns to violent extremist involvement.

OBJECTIVE 3: ADVANCE AND CONNECT SOCIAL, EDUCATIONAL, AND ECONOMIC CAPITAL

Because the extremist identity is one that merges the self with a group, rehabilitation and reintegration efforts will require the creation of positive social and learning environments in which extremist offenders can reintegrate the connection between concepts of self, state of mind, meaning-making, narrative, and community.

Therefore

IF...

R&R efforts advance social, educational, and economic capital for extremist offenders and those susceptible to radicalization in prison settings perceive them as building in-community networks to advance social capital for rehabilitating and reintegrating extremist offenders and exploit their interrelationships to fulfill unmet needs, construct positive narratives, establish connection to prosocial networks that enhance quality of life, and facilitate meaningful resocialization,

THEN...

Interventions address individual risk-factors but also reorient radicalization by shifting an individual's perceptions or past experience so that they can acknowledge the falsity of extremist narratives and identity or address legitimate grievances through non-violent methods of political or social contestation, so that risks of recidivism, or re-radicalization into violence, are diminished.

BECAUSE

Contrary to the lens applied to deradicalization programs, which is deficit-based and focused on radicalization, a trauma-informed approach advances key principles of asset-based program development, which concentrate on identifying skills and interests, cultivating visions for growth, and sharing core understandings of empowerment as being both internal and external, benchmarked by external outcomes and impact (i.e., performed, tangible actions that lead to change), thus promoting mental wellness for those experiencing challenges.

OBJECTIVE 4: PROMOTE FAMILY COHESION

Despite evidence that extremist groups turn to the family unit for recruits¹², good practices related to violent extremist offender reintegration highlight that, because of the inherent social component to reintegration, connecting family members to extremist offenders prior to release or engaging them in rehabilitative efforts will help the family understand and be sympathetic to what the inmate is going through and be more readily able to provide a supportive environment for the inmate once they are released.¹³

Therefore

IF...

Efforts promote family unity through education, counseling, and therapy, extend the parameters and definition of family to look at the crucial role extended family members can play in facilitating the reentry process, serve to identify and bridge to in-community psychosocial supports and help implement individualized treatment plans (particularly where they involve redefining the sense of self, identity, and the role former extremist offenders play in society),

THEN...

Opening spaces for prosocial engagement between returning extremist offenders and community members can prepare communities and families to address the psychosocial needs of returning persons, build capacity and trust, strengthen resilience and social cohesion, and foster reconciliation and prosocial engagement, all of which are necessary to advance familial, societal, and national bonds and to acquire the cognitive, social, and vocational skills that would enable extremist offenders to more easily adjust to society and replace their violent identities with new ones.

BECAUSE

Family members and significant others (e.g., employers, teachers, mentors, spiritual leaders, etc.) can best support offenders when they are aware of the work program participants are undertaking, skills they are developing, and can support offenders as they practice these new competencies upon release. Also, while healthy family support has been linked to developing a sense of responsibility, a sense of family obligation can also enhance cognitive control and render individuals less susceptible to engaging in risk-taking behaviors.¹⁴

OBJECTIVE 5: FACILITATE RESOCIALIZATION BY DECREASING COMMUNITY RESISTANCE AND STIGMATIZATION

Stigmatization is a major hindering factor to effective community reintegration.¹⁵ Thus, to be effective, interventions and programming should borrow from other areas of stigma research that focus on increasing coping mechanisms and self-esteem and must address the stigma that can surround reintegrating former extremists within their communities, since it can prevent them from trusting any intervention or reintegration-related programming, and provide services that meet the expectations of participants.

Therefore

IF...

Efforts enhance community awareness, resilience, and belonging and minimize self, social, and structural stigmatization of extremist offenders and families by creating pathways to healthy, productive, and non-stigmatizing pro-social engagements while reducing barriers to participant interest in pre- and post-release programming engagement,

THEN...

Socialization programming can offer an alternative meaning, purpose, and significance that erodes the black-and-white thinking formulated and sustained by in-group/out-group dynamics and biases that underlie extremist thinking, thus promoting dignified and legitimate reintegration, mitigating further or future radicalization and enhancing long-term national-level resilience to violent extremism.

BECAUSE

The path to rehabilitation in a TCVE-informed approach then becomes not merely about the alteration of mindset and belief, but also about shifting social relationships and personal circumstances in a manner that dismantles the entrenched support and commitment that results from experiences as a perpetrator within or supporter of a violent extremist movement, especially from the sense of loyalty and devotion to fellow extremists.¹⁶

OBJECTIVE 6: INFORM THE BROADER FIELD OF PRACTICE

Intuitively, it makes sense that advancing one-on-one interventions, in particular those conducted by former extremists, would prove effective. Yet, that proposition has hardly been tested with scientific rigor. Anecdotal and qualitative case study-derived evidence abounds, but the evaluation of disengagement-deradicalization programming for extremist offenders has hardly been subject to empirical inquiry.¹⁷

Therefore

IF...

Efforts create and sustain the ecosystem of actors to include local representatives from each of the U.S. Department of Homeland Security's local prevention framework arenas to advance understanding and programming for extremist offender rehabilitation and reintegration and for assessing, preventing, and countering radicalization into violence in general over the long term,

THEN...

Programming will constitute the empirical bedrock of evidence-led practice, actionable knowledge, and the necessary building blocks for long-term strategic development, particularly as case studies, intervention techniques, approaches, and delivery mechanisms are identified as promising, and additional efforts document outcomes (i.e., successes and failures) or identify myths or faulty assumptions, difficulties, or barriers.

BECAUSE

Efforts would help construct a 'community of practice,' for P/CVE and terrorism prevention interventions—particularly those focused on reducing recidivism risks for reintegrating extremist criminal offenders—that would improve the tools, skill sets, and measurability of the terrorism-prevention infrastructure in the United States.

ENDNOTES

1. Joan Petersilia, "Beyond the Prison Bubble," *Federal Probation: A Journal of Correctional Philosophy and Practice*, Vol. 75, No. 1, 2011, pg. 50-55, http://www.uscourts.gov/sites/default/files/75_1_1_0.pdf; Joan Petersilia and Kevin R. Reitz, eds, *The Oxford handbook of sentencing and corrections*, OUP USA, 2012, <http://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780199730148.001.0001/oxfordhb-9780199730148>.
2. Omi Hodwitz, "The Terrorism Recidivism Study (TRS): Examining Recidivism Rates for Post 9/11 Offenders," *Perspectives on Terrorism*, Vol. 13, No. 2, April 2019, pg. 54-64, https://www.jstor.org/stable/26626865?seq=1#metadata_info_tab_contents.
3. Jesse Morton and Mitchell D. Silber, "When terrorists come home: The need for rehabilitating and reintegrating America's convicted jihadists," 2020, https://www.counterextremism.com/sites/default/files/CEP%20ReportWhen%20Terrorists%20Come%20Home_120618.pdf.
4. Barbara McQuade, "Proposed Bills Would Help Combat Domestic Terrorism," *Lawfare Blog*, August 20, 2019, <https://www.lawfareblog.com/proposed-bills-would-help-combat-domestic-terrorism>.
5. Morton and Silber, see footnote 3.
6. *Countering Violent Extremism Through Public Health Practice: Proceedings of a Workshop*, National Academies of Sciences, Engineering, and Medicine, 2017, <https://www.nap.edu/read/24638/chapter/5>.
7. Denise E. Elliott, Paula Bjelajac, Roger D. Fallot, Laurie S. Markoff, and Beth Glover Reed, "Trauma-informed or trauma-denied: Principles and implementation of trauma-informed services for women," *Journal of Community Psychology*, Vol. 33, No. 4, 2005, pg. 461-477, <https://onlinelibrary.wiley.com/doi/10.1002/jcop.20063>.
8. "Research and Evaluation on Domestic Terrorism Prevention," U.S. Department of Justice, accessed August 10, 2022, <https://nij.ojp.gov/sites/g/files/xyckuh171/files/media/document/NIJ-2019-15303.pdf>.
9. Jean Lave and Etienne Wenger, *Situated learning: Legitimate peripheral participation*, Cambridge University Press, 1991.
10. "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," Global Counterterrorism Forum, accessed August 8, 2022, <https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/GCTF-Rome-Memorandum-ENG.pdf?ver=2016-09-01-121309-677>.
11. Jennie Williams and Jenifer Paul, *Informed gender practice: mental health acute care that works for women*, National Institute for Mental Health in England, 2008.
12. Mohammed M. Hafez, "The Ties that Bind: How Terrorists Exploit Family Bonds," *Combating Terrorism Center at West Point, CTC Sentinel*, Vol. 9, No. 2, February 2016, <https://ctc.westpoint.edu/the-ties-that-bind-how-terrorists-exploit-family-bonds/>.
13. "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," Global Counterterrorism Forum, accessed August 8, 2022, <https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/GCTF-Rome-Memorandum-ENG.pdf?ver=2016-09-01-121309-677>.
14. Eva H. Telzer, Andrew J. Fuligni, Matthew D. Lieberman, and Adriana Galván, "Meaningful Family Relationships: Neurocognitive Buffers of Adolescent Risk Taking," *Journal of Cognitive Neuroscience*, Vol. 25, No. 3, 2013, pg. 374-387.
15. James D. Livingston, Teresa Milne, Mei Lan Fang, and Erica Amari, "The effectiveness of interventions for reducing stigma related to substance use disorders: a systematic review," *Addiction*, Vol. 107, No. 1, 2012, pg. 39-50, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3272222/>.
16. J. M. Berger, *Extremism*, MIT Press, 2018.
17. Adrian Cherney and Emma Belton, "Evaluating Case-Managed Approaches to Counter Radicalization and Violent Extremism: An Example of the Proactive Integrated Support Model (PRISM) Intervention," *Studies in Conflict & Terrorism*, Vol. 44, No. 8, 2021, pg. 625-645, <https://www.tandfonline.com/doi/full/10.1080/1057610X.2019.1577016>.