CVE | COUNTERING VIOLENT EXTREMISM

TOOLKIT

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Contents

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Introduction

This "toolkit" was designed to assist Public Health professionals work within their communities to prevent targeted violence. One type of targeted violence that is concerning to communities is "violent extremism." The toolkit* is organized in three sections.

PART I

Provides an overview of targeted violence and introduces the phrase "Countering Violent Extremism" (CVE). It also contains basic information about behavioral threat assessment – one of the ways communities and organizations organize and assess information about potential threats of targeted violence. Finally, the role of public health in this arena is introduced.

PART II

This part of the toolkit outlines key principles and approaches to engage rural communities in targeted violence prevention.

PART III

This part provides some key resources to learn more about targeted violence and violent extremism and includes definitions of key terms.

KEY:
hyperlinked resources - link to documents/sites
key terms - Part III includes definitions for terms

* All resources mentioned in this toolit are available on the Countering Violent Extremism (CVE) website at **cve.unl.edu/home/resources/#toolkit**.

Part I: Overview of Targeted Violence

Research on violence indicates that people don't just "snap" and commit violent acts out of the blue. Instead, we know there is typically a build-up to violence that takes place over time. Becoming violent is the result of a process that begins with the idea that violence is an option for solving a problem or righting a perceived wrong.

Unusual signs or behavior may be detected by family, friends, peers, and co-workers before a violent act. However, these signs may go unreported. For example, after shooting events we sometimes hear acquaintances say "I thought he was acting strange" or "I was worried about him," but no one reported what they thought or saw. Sometimes people hesitate to report "strange behavior" because they do not know who to report it to, they do not trust authority figures, or they do not want to inconvenience themselves or cause trouble. Understanding what barriers stand in the way of community members making a report is part of the first step of the **public health approach to prevention** – defining and monitoring the problem.

THE PATHWAY TO VIOLENCE

Generally, there are two types of violence: reactive (sometimes called affective) violence and targeted violence. Reactive violence is often impulsive and may be defensive in nature (i.e., when someone fights back defensively after being attacked). This toolkit doesn't focus on reactive violence. It is focused on preventing acts of targeted violence. Targeted violence involves a person of concern who has the intent and potential to cause harm to an identifiable target or objective. This type of violence includes planning, research, and other observable behaviors targeting a person, facility, or community. Acts of targeted violence may include domestic violence, workplace violence, shootings, and violent extremism.

Researchers on violence have identified what they call a **"pathway to violence" model** to help conceptualize how close a person may be to carrying out a violent act. The pathway to violence model outlines how a person's thoughts and behavior progress towards violence or an attack. The pathway model helps us identify the stages of thinking and behavior that may lead to violence, and potential opportunities to intervene before it happens.

Pathway to Violence

Adapted from Pathway to Violence, Calhoun & Weston, 2003.
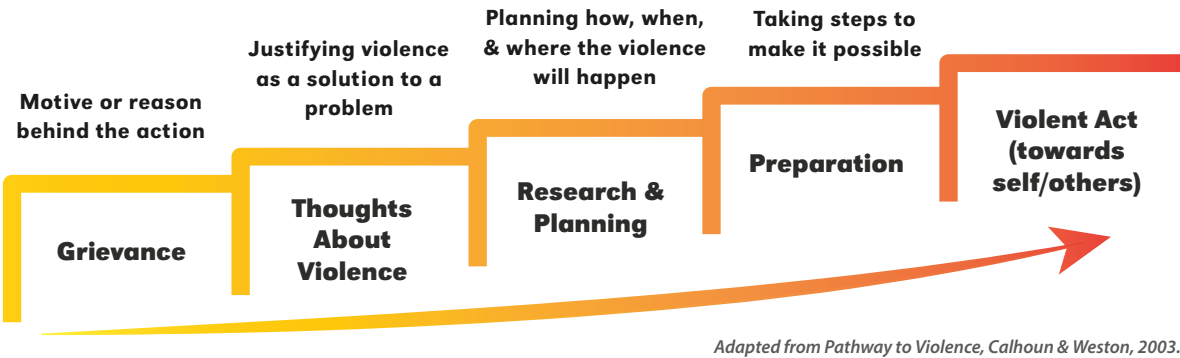
Individuals on the pathway to violence have a grievance, feel wronged, or want to further an extreme belief. Many people experience grievances, but few will move on to the next step of contemplating violence as a solution to their grievance or problem. There are often noticeable behaviors when someone is thinking about using violence to solve their grievance. For example:

- Making or posting comments supporting violence;
- Liking or sharing social media posts that glorify violence;
- Writing or drawing things with violent content;
- Talking about people or groups that use violence.

Even more concerning is when someone begins researching and planning violent acts. This may include:

- Searching for information about past violent events;
- Spending time on webpages that promote extreme actions and violence;
- Researching means to commit violence (weapons, their costs, and availability);
- Gathering information about their target. For individual targets, this may include stalking a person online or in real life, tracking their routes to work or daily schedules, and trying to figure out when the target is most vulnerable or alone. For targeted facilities like schools or workplaces, the person of concern may research hours of operation, the facility's security measures, and when and where people are most likely to gather.

A final step before committing a violent act is preparation. Preparation may include:

- Purchasing firearms and ammunition;
- Enhanced target practice;

- Acquiring a costume or other equipment to commit the violent act;
- Giving things away or posting/writing a suicide letter or manifesto about their planned violence.

Another troubling sign of preparation is actually testing one's approach to committing violence. The person of concern may see how close he can get to his target, driving or parking near their targeted facility or residence, and testing doors or other actions to see how they can circumvent security measures.

PREVENTING VIOLENCE

Rural community members often view **violent extremism** as something that happens in cities and not in their small, tight-knit communities. Other forms of violence are more concerning to rural residents, for example, domestic violence, criminal violence, and violence in schools. Another aspect of the first step of using a public health approach to prevention of violence is to determine the type of violence most prevalent and most concerning to community members. For example, after high profile school attacks, many urban and rural schools became very concerned about school-shootings even though the prevalence and risk of a school-shooting happening was low. As a result, many adopted tighter security measures, anonymous reporting mechanisms, and school threat assessment teams to prevent such violence. Some communities also moved forward with community wide threat assessment teams that tie school and workplace teams together and provide continuity for managing potential threats over time. This community approach to prevention of violence can also be used to recognize and prevent violent extremism, sometimes referred to as **"countering violent extremism"** or CVE. It is important to note that holding extreme beliefs is legally protected in the U.S. and is not always associated with violence. Sometimes we refer to this as **"extremism."** It is unlikely that violent extremism will be the top violence concern for most rural communities, but since it is a form of targeted violence, any prevention efforts can naturally include it. **Reframing countering violent extremism as a type of targeted violence** that is preventable allows communities and states to use broader public health approaches to educate the public and stakeholders, begin to identify risk and protective factors that influence different types of targeted violence, and interventions to prevent it from occurring. Disrupting the pathway to violence is the goal of targeted violence prevention.

BEHAVIORAL THREAT ASSESSMENT

A central component of disrupting the pathway to violence is having a viable, structured mechanism to receive and process reported concerns. Mechanisms to receive reports include apps, hotlines, text lines, web-based and email reporting, and in-person or written reporting. Processing the reports can be more daunting. The best practice for processing reports is for the receiving entity to screen reports and, if appropriate, take them to a multi-disciplinary team for review and action. Many institutions have these teams in place (e.g., school systems, hospital or healthcare settings, workplaces, and other public and private sector contexts). These are typically called "threat assessment teams" or behavioral threat assessment teams.

The principal role of a threat assessment team is to identify a potential threat of violence, evaluate how serious the threat is, and address the threat by developing an appropriate intervention. Threat assessment may be highly fluid, complex, and require quick responses. A threat assessment team must have interdisciplinary team members with sufficient expertise to rapidly evaluate concerning behavior and assess its seriousness. Depending on the situation and person(s) of concern, an assessment of a possible threat may take place once, or require sustained monitoring of a person's behavior and continual assessment for patterns of escalation.

Threat assessment teams do not work in a vacuum. For example, established threat assessment teams typically have defined guidance policies in place regarding behavior (e.g., student behavior policies in school). Although they may largely operate "behind the scenes," an established threat assessment team will also have documented procedures and mechanics, and regularly work with and educate the community to ensure they have a clear understanding of what the team's role and purpose is.

A common mistake teams make when first forming is to assume that one short training session will equip them to do this work. Training and working together as a team will help you build expertise in threat assessment and management, but it takes time to acquire confidence and competence in this area. Finding a competent, experienced threat assessment and management professional to assist the team is helpful during this period. **The Association of Threat Assessment Professionals (ATAP)** has a certification program that provides credentials to experienced threat professionals. **Certified Threat Managers** have passed a test and have met experience criteria, so you can be assured they have knowledge of threat assessment and management. Many of the Certified Threat Managers have backgrounds in law enforcement, security, or mental health.

THE ROLE OF PUBLIC HEALTH IN PREVENTING TARGETED VIOLENCE / CVE

Public Health Departments are concerned about furthering health and well-being of the whole community. They typically address this in communities through prevention and intervention efforts in partnership with community members. The **Centers for Disease Control (CDC)** defines the public health approach as occurring in four steps.

1. Define and monitor the problem
2. Identify risk and protective factors

3. Develop and test prevention strategies
4. Assure widespread adoption

Violence is complex, but so is smoking, obesity, and cardiovascular disease – all of which have been tackled using a public health approach. Prevention of targeted violence can involve primordial prevention (e.g., assuring access to treatment in rural areas), primary prevention efforts (e.g., decreasing children's exposure to trauma), secondary efforts (e.g., identifying and intervening with persons at risk for violence), and tertiary prevention (e.g., monitoring a person of concern over time). This toolkit focuses on experiences with secondary prevention by equipping the community to identify individuals at risk, report them to trusted entities, and creating community-based structures to assist in mobilizing protective factors to prevent the violence from occurring.
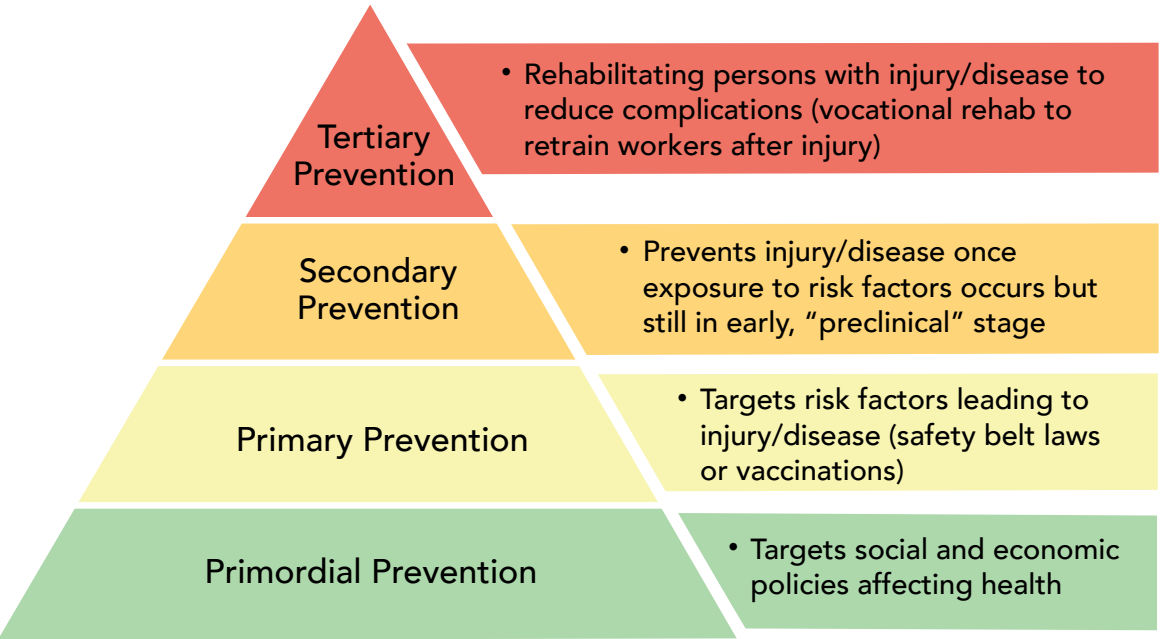
SOURCE: EISENMAN PRESENTATION, SEPTEMBER 8, 2016. FROM: **5, APPLYING PUBLIC HEALTH MODELS AND APPROACHES TO COUNTERING VIOLENT EXTREMISM**

Countering Violent Extremism Through Public Health Practice: Proceedings of a Workshop. National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Sciences Policy; Forum on Medical and Public Health Preparedness for Disasters and Emergencies. Washington (DC): **National Academies Press (US)***; 2017 Feb 17.*

Part II : Engaging Rural Communities in Targeted Violence Prevention

WORKING WITH RURAL STAKEHOLDERS

Many rural communities have existing collaborative networks with diverse stakeholders and strong leaders in place, particularly in the areas of community health and well-being. Prevention of targeted violence efforts can build on these networks, and offer opportunities for new collaborations and creative thinking around important issues. Important points to emphasize with rural stakeholders in generating support and involvement for targeted violence prevention activities include:

• Targeted violence can occur anywhere, regardless of the size or location of a community.

• Rural residents who may be on the pathway to violence may lack the support or awareness of peers or family who can help them.

• Rural communities can develop local resources to prevent violence. Education and awareness (e.g., concerning behaviors on the pathway to violence), and development of a local structure for reporting and responding to concerns are critical assets to prevent violence locally.

• Rural communities have **trusted institutions** and tight networks in place to support targeted violence prevention.

PRINCIPLES OF ENGAGEMENT

Financial and human resources are usually stretched in rural communities, so it is important to leverage or augment existing networks and partnerships as much as possible. This is not a new challenge for rural community leaders and policymakers, who have to work with continuously shrinking budgets and scarce resources on a normal basis. Within the field of rural community development policy, experts have identified **best practices and principles** that apply to any community-building initiative, and these lessons can certainly apply to violence prevention and CVE efforts.

Identifying stakeholders is a key first step. Stakeholders – generally speaking – are any individuals or organization that can potentially impact, or be affected by acts of targeted violence. Identifying stakeholders begins with persons who have interests in the shared problem and goal of preventing targeted violence. Identifying this goal as a long-term community problem should supersede organizational or individual agendas. Engage stakeholders early and inclusively.

Keeping stakeholders together over the long run can be challenging. Fostering communication and building trust strengthens collaborative efforts. Relationships are fundamentally personal, and developed through positive interactions that occur over time. Some rural communities may have the advantage of building from already existing social networks. However, rural communities may also be insular in nature and exclusionary of perceived 'others', particularly with newly arrived immigrant groups. Fostering individual trust through relationship building should be a priority. From an organizational standpoint, efforts to engage and organize diverse stakeholders around the shared goal of preventing targeted violence should be done in a fully transparent manner with a goal of sharing power and responsibilities, decision-making, and voicing opinions. Secretive processes that lack transparency and genuine inclusiveness can easily derail the potential to engage diverse stakeholders.

Finally, identifying **consistent and dedicated leadership** is a key factor in initiating and maintaining a successful prevention effort. Leadership should be local, as well as dedicated to principles of collaboration across different interests towards shared goals.

Examples of stakeholders

- Cultural Centers and Organizations
- Law Enforcement
- Public Health
- Community Action
- Social Service Agencies
- Medical Providers
- Domestic Violence Shelters
- Advocacy Groups
- Faith Communities
- Schools, Universities, Community Colleges

ASSESSING BARRIERS TO REPORTING

Once assembled, stakeholders should direct the prioritization of needs in their community. High civic engagement leads to ownership of solutions and strategies for improving life for community members, which enhances community resilience in a sustainable manner. The US approach to countering radicalization locally is built around the experience of metro areas (Los Angeles, Minneapolis/St. Paul, Boston, and Washington DC) and that of other large communities (e.g., Dearborn, MI). The approach centers on having informal systems of service provider networks and key stakeholders with trusted relationships in potentially at-risk groups. A recent study discovered that despite these efforts, individuals in at-risk groups often went first to friends and family rather than to the trusted, more formal gatekeepers.[1] Despite strong partnerships and trust building with at-risk groups in these cities, many were still reluctant to report their concerns to any of the service providers or their partners, predominately due to fear (e.g., embarrassment, looked down upon). This study suggests that barriers to reporting are both systemic and locally driven, influenced by culture. Engagement of community members around the topic of local barriers to reporting creates a non-threatening way to begin addressing this gap.

Understanding concerns within your community about reporting concerning behaviors helps you assess the community's overall understanding of what reporting involves, and what happens after reporting. It is also important to assess concerns that specific segments of your community may have, and identify possible solutions. For example, members of immigrant communities may lack in-depth knowledge about community institutions, whether that be school or healthcare systems, or law enforcement agencies. Similarly, it is important to keep in mind that those community institutions may lack knowledge or connections with the immigrant communities.

> **Case Example**
>
> 'A public health department in rural Nebraska conducted an online survey of residents and stakeholders about reporting behaviors of concern related to violence. Over 85% of respondents indicated that reporting behaviors anonymously or confidentially were very or somewhat important to them. When asked to identify barriers to reporting, the most frequently identified barriers were lack of trust in community institutions (18%), being put at risk for reporting (17%), and not wanting to be involved in the situation (13%).'

[1] Williams, M. J., Horgan, J. G., & Evans, W. P. (2016). The critical role of friends in networks for countering violent extremism: toward a theory of vicarious help-seeking. Behavioral Sciences of Terrorism and Political Aggression, 8(1), 45-65.

One way to gather data on barriers to reporting is through an online survey. A survey should only take a few minutes, can be confidential or anonymous, and potentially reach a wide number of people.

Another means of gathering information is through focus groups and interviews, or other formal or informal discussions with community members. These discussions have the benefit of obtaining much more detailed and nuanced information than a survey, but can also take more time and may be less protective of confidentiality.

Regardless of how you assess barriers to reporting in your community, it can lead to a productive next step of identifying solutions to those barriers. Stakeholders can help inform the development of a survey to detect barriers to reporting. **Sample survey questions** used in the case study can serve as a starting point.

DEVELOPING PREVENTION SOLUTIONS

Present stakeholders with data from surveys, surveillance, or focus groups. Having a facilitator will help move the discussion toward identifying potential prevention solutions. Once barriers to reporting are known, discussion may center on reporting mechanisms or how they want to respond to the reports. This process will take time, in some cases over a year.

Before a community threat assessment team is assembled, the stakeholders must agree that this is the option that works best for their community. The assessment team itself should be composed of people with sufficient expertise and time to serve, and a medium- or long-term commitment to understanding and evaluating potential violence within the community.

Keep in mind that not all stakeholders are members of the community threat assessment team. Some stakeholders will lack the expertise or time to serve on a team. They may feel more comfortable supporting the effort more generally, such as by promoting your community's educational efforts, or serving as a possible point of referral.

Two preliminary questions guide the development of your team: 1) Who is on your team? 2) How does the team want to be perceived by the community?

Who is on your team?

How and who to involve as core community assessment team members will depend on your community. Consider the entire spectrum of targeted violence issues that are relevant to your community's concerns, and who within your community could help provide expertise and perspectives to assess and evaluate concerning behavior. Three to five members of the team will be "core" to its functioning and should include members with investigative experience, mental health knowledge, and knowledge of key resources in the community (e.g., domestic violence). An additional seven to ten members should have access to resources that enhance protective factors (e.g., social services, schools, workplaces, cultural groups). This can include resources at a regional or state level as well, such as a nearby college or university or healthcare system.

How does the team want to be perceived by the community?

It is critical to highlight that violence prevention strategies should be presented to communities to reinforce values consistent with the dignity of all concerned. This implies that the intent of prevention efforts is to provide assistance and mitigate discomfort for all concerned—especially the persons of concern. Relatedly, it is important to not assume that the person of concern referred for services or assessment is "an extremist" or the next "school shooter" without compelling evidence. Given the low base rate of such activity, it is worthwhile to view concerns raised about community members as opportunities for assessment and early intervention rather that "rooting out extremists" within a community. Reinforcing the values related to dignity of all concerned as well as the preventive nature of the community outreach will help in mitigating any apprehension of community stakeholders.

Team members need to be seen as trustworthy, credible, and knowledgeable about targeted violence, and most importantly – devoted to community well-being and helping people. A threat assessment team – and a community's prevention strategy as a whole – is not a forum to "get people in trouble." Poor messaging or impressions can undermine your efforts and create suspicions or mistrust. Your targeted violence prevention initiatives can be undermined by lack of community buy-in, particularly if it is perceived as a hidden means to monitor behavior, gather intelligence, and single out specific groups (e.g. Muslims, immigrants, etc.). Keep in mind that youth – particularly male youth – can be considered a high-risk group for **radicalization**, and may already have histories of distrust with authority figures and law enforcement.

Effective branding of your efforts is an important early step, as it communicates a sense of focus and mission. For example, many people associate the term "violent extremism" with political or religious extremism only. A community effort branded as targeting "violent extremism" may thus give the impression the community is only concerned about political or religious radicalization, or targeting minority groups. On the other hand, an effort focused on targeted violence more broadly may get better involvement and interest from the community. Branding your efforts should include developing an outreach strategy to inform the wider community about the mission of your initiative and the role of the threat assessment team. Again, it is critical to impress upon stakeholders and the public a clear understanding of what the team's mission and responsibilities are, and address concerns and trust issues that people may have.

Case Example

'Two Rivers Public Health Department initially chose to brand the program as 'Disrupting the Pathway to Violence', and advertised it as a violence prevention program. This allowed the program to align with other public health activities, including emergency preparedness, as they are both preventative based programs that work upstream of natural disasters or mass violence/fatalities. Public health was able to link the violence prevention program to our disaster related programming, by making the link that it was prevention based.

However, halfway through implementing the program, we began referring to it as a 'Violence Prevention Program'. The previous name, Disrupting the Pathway to Violence, almost required a more technical understanding of the documented pathway towards violent extremism. Framing the program as a violence prevention program allowed the program to broadly address all types of violence that our communities experienced.'

TRAINING THE TEAM

Threat assessment team members should train together. This helps ensure they all have the same baseline knowledge of threat assessment and management. It also helps cement working relationships and allows them to make decisions about team functioning along the way. Besides getting trained in basic threat assessment and management principles and strategies, the team must understand how and when to access outside help, how they will document their work, who maintains responsibility for the case, and how they will monitor cases over time.

Training should include time to practice using plausible scenarios. This will help the team identify who else should be at the table and what additional resources or knowledge they need. Team training should be delivered by a qualified threat assessment professional who is available locally for consultation. Alternatively, there are conferences and team-training sessions offered in many states that team members could attend outside their home area.

State government role in supporting community efforts?

Local resources in rural areas are often supported in some way by government agencies. For example, local public health departments may receive support from state public health. The same can be said about law enforcement, mental health, social services, and even some private entities such as domestic violence shelters. As local capabilities develop in threat assessment, state capabilities must also develop. Typically, each function seeks technical assistance from their state partner. If the state partner is not aware of what targeted violence is, the best practices for preventing it, and how to support threat assessment teams, they will not be able to provide any meaningful assistance. State agencies should identify key personnel who will learn more about targeted violence and serve as resources to local areas.

State agencies should model best practices by standing up their own multi-disciplinary teams to manage threats at the state level. The state core team should include human resources, state police/patrol, mental health, and a high-level official. Other state agencies can be brought in as part of the broader team. Like local teams, they should train together and be sanctioned by the Governor or high-level authority with a mission.

State agency personnel should be empowered to report, just as locals are. Additionally, they should be educated and empowered to assist local agencies who seek assistance when faced with a reporting dilemma, potential threat, or barrier to accessing services that could mitigate a potential threat. Generally, threats are managed locally, but state agencies may be brought in at any point. The most likely scenario is that a local entity would reach out to a state agency for support when deciding how to handle a report or emerging threat.

Process for Community-Driven Targeted Violence Prevention

- Assess Barriers to Reporting
- Engage & Educate Stakeholders
- Empower Stakeholders to Create Solutions

Individual Reporting | Local Agency Receiving | State Agency Supporting | Threat Team Evaluating | Local Agency Preventing | Safe Community

- Empowered Reporters
- Trained Local Interdisciplinary Team
- Continual Evaluation of Strategies and Results

EMPOWERING RESIDENTS TO REPORT

Once a community has identified how reports will be received, who receives them, and how they are processed, it is time to empower residents. This requires a broad communication strategy focused on addressing the barriers to reporting discovered with surveys, focus groups, or interviews. For example, one of the barriers to reporting may be that residents don't know what to report. Getting the word out about what to report can include traditional media use or development of written materials. In our demonstration project, the community decided the messages had to be delivered by individuals trusted by different sectors of the community. We developed a simple **"training of trainers"** package to empower trusted leaders to talk with their constituents about the pathway to violence and what to report. This also included information about how to make a report and what to expect from the team assessing the report. Community partner websites can also feature **handout material and information** for residents and stakeholders who want to know more about targeted violence, radicalization, and threat assessment.

Part III: Resources

- Online and in-person trainings from the National Consortium for the Study of Terrorism and Responses to Terrorism (START) based at the University of Maryland:

  https://www.start.umd.edu/FEMACVEtraining

- Program overview of a community-led CVE pilot program in the Minneapolis-St. Paul metropolitan area:

  https://www.justice.gov/usao-mn/file/642121/download

- Program overview of a community-led CVE pilot program in the Greater Boston area:

  https://www.justice.gov/sites/default/files/usao-ma/pages/attachments/2015/02/18/ framework.pdf

- Program overview of a community-led CVE pilot program in the Los Angeles area:

  https://www.dhs.gov/sites/default/files/publications/Los%20Angeles%20 Framework%20for%20CVE-Full%20Report.pdf

- Webpage of the Association of Threat Assessment Professionals:

  https://www.atapworldwide.org/

- Community-based threat assessment teams: Partnerships for safer communities (presentation from Association of Threat Assessment Professionals 2015 conference):

  https://cdn.ymaws.com/www.atapworldwide.org/resource/resmgr/Okada_-_ Community_Based_Thre.pdf

- Enhancing school safety using a threat assessment model: An operational guide for preventing targeted school violence (U.S. Department of Homeland Security):

  https://www.dhs.gov/publication/enhancing-school-safety-using-threat-assessment- model

- School and youth violence fact sheets and data (U.S. Centers for Disease Control and Prevention):
  https://www.cdc.gov/ViolencePrevention/youthviolence/schoolviolence/index.html

- Striving to reduce youth violence everywhere: prevention information and resources for preventing youth violence (U.S. Centers for Disease Control and Prevention):
  https://vetoviolence.cdc.gov/apps/stryve/

- Creating and sustaining a positive and communal school climate: Contemporary research, present obstacles, and future directions (report from U.S. Department of Justice):
  https://www.ncjrs.gov/pdffiles1/nij/250209.pdf

- Sharing ideas and resources to keep our nation's schools safe, vol. 5 (report from National Law Enforcement and Corrections Technology Center System & Justice Technology Information Center):
  https://www.justnet.org/pdf/Sharing-Ideas-and-Resources-Schools%20Safe_Vol5.pdf

- Development of a standard model for school climate and safety assessment (report sponsored by U.S. Office of Justice Programs):
  https://www.ncjrs.gov/pdffiles1/ojjdp/grants/251102.pdf

- More information about the Two Rivers Public Health Department experience in Nebraska:
  http://cve.unl.edu/wp-content/uploads/2019/06/Case-Study-Two-Rivers-Public-Health-Dept.pdf

- Making prevention a reality: Identifying, assessing, and managing the threat of targeted attacks (report of the National Center for the Analysis of Violence Crime, Federal Bureau of Investigation):
  https://www.fbi.gov/file-repository/making-prevention-a-reality.pdf/view

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DEFINITIONS

- **Extremism -** refers to holding extreme political, social, or religious beliefs different from conventional norms. Holding extreme beliefs is a legally protected right in the United States.

- **Radicalization -** is the process of a person moving from their ideas or beliefs to actions driven by extreme beliefs that may include violence. During radicalization, a person's thoughts and behavior typically changes and becomes much different from his/her previous behavior and general community norms. Radicalization may result in the person believing that acts of violence are legitimate, acceptable, or necessary to further their extreme beliefs.

- **Violent Extremism -** is the actual use of violence to achieve a political, social, or religious objective related to an extreme belief. There are many forms of extreme beliefs, and any extreme belief can lead to violent extremism. Acts of violent extremism threaten lives, public safety, and fundamental values of free and democratic societies.

- **Countering Violent Extremism (CVE) -** encompasses activities aimed at preventing the process of radicalization in order to prevent extremist violence. Countering Violent Extremism "encompasses programs, policies, and activities intended both to prevent individuals and groups from radicalizing to facilitate or commit violence, and to disengage individuals and groups who are planning to commit or facilitate, or who have already engaged in, extremist violence." (Beutel et.al. 2015)

SEE THREAT ASSESSMENT FULL GLOSSARY OF TERMS
cve.unl.edu/home/resources.

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