

## Needs

## Activities

## Outputs

Public health led prevention efforts in rural and small/mid-sized communities in Nebraska do not include a strategy for countering violent extremism or prevention of radicalization.

### Public health led engagement models

- Public health community health worker chronic disease prevention model
- Public health - school partnership engagement mode
- Document the process

- Community prevention plans addressing barriers to reporting
- Evidence-based reporting structures to address community concerns
- Community plans with PTV
- Toolkits for integrating PTV in public health prevention plans and activities for rural and small to mid-sized cities

There are barriers to reporting indicators of violent extremism.

### Focused engagement activities around the barriers to reporting signs of violence

- Disseminate existing material about radicalization and extremism
- Gather perceptions about barriers
- Develop evidence-based approach to facilitate reporting
- Document the process

## Outcomes

- Increased engagement of community
- Increased knowledge of PTV warning signs
- Increased trust of reporting process
- Increased knowledge about where to report
- Increased reporting
- Effective processing of reporting
- Effective response to reports

Even if reported, there are not effective, coordinated and individualized response capabilities to violent extremism at the state or local level outside of law enforcement.

### Develop an effective and coordinated community approach to process and respond to intelligence about violent extremism

- Engage key stakeholder groups
- Create diverse community and state level threat assessment capabilities
- Document process

## Impact

Prevention of radicalization leading to safer communities