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## CONCLUSION PAPER

RAN HEALTH

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# Violent individuals with personalised ideologies and mental health issues

## Key outcomes

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During the 2021 RAN plenary, participants observed that (extremist) ideologies have become increasingly fragmented and individualised and seem to centre more on personal, single and/or local issues. In some cases, this has resulted in violence without a clear indication of radicalisation or other noticeable reasons, an aspect which has proved a serious issue for law enforcement.

On 26 and 27 September, the RAN Mental Health working group meeting on 'the changing frameworks of (extremist) ideologies' was held in Rome. Attendees included mental health practitioners, EXIT workers, police (psychologists), intelligence personnel and local authorities. Participants discussed how this recent social and ideological fragmentation in extremist groups and on the individual level impacts their prevention and countering of violent extremism (P/CVE) work. The aim of the meeting was to better understand this phenomenon as well as how recent societal developments (e.g. COVID-19, the war in Ukraine and the energy crisis) and the deteriorating mental health of individuals can affect extremists' (personal) frameworks of action. The working group identified the emergence of a more personal ideological framework of radicalised individuals and considered the implications of these changes for mental health practitioners in the field of P/CVE (e.g. in treatment, risk assessment, needs assessments and targeted training).

Key outcomes include the following.

- Personal ideologies are difficult to detect and assess, especially when mental health disorders are also present. The detection field (police/intelligence) find it more challenging to detect potentially violent individuals when an extremist ideology is not suspected, or there is no clear indication of the individual identifying with a bigger group with a clear destabilising or subversive goal.
- Practitioners observe a rising conviction among certain individuals that the use of violence is justifiable not only when they are inspired by a broader recognisable ideology but also when angered by a single issue. Ideology sometimes serves as a conduit for anger and a justification for the conviction.
- In cases presented during the meeting, people with opposing ideological backgrounds had connected on certain issues they agreed on (e.g. antisemitism, misogyny or hate towards LGBTQ+ people). Despite the lack of a common underlying ideology, these people had in common a particular goal, driver, or means of expression.

This paper summarises the main conclusions following the discussion on this observed fragmentation of ideologies. It describes the phenomenon and its complexity, as well as the ensuing challenges that practitioners currently face. It then puts forward recommendations for risk assessment, therapy and care infrastructure and policy. Lastly, it presents follow-up ideas.

## Discussion highlights

It was noted during the meeting that practitioners are encountering individuals with particular characteristics: potentially violent, with very individualised ideologies rooted in their personal grievances (or trauma) towards different groups, and in many cases, their government institutions. The incidence of these traits has increased in severity and frequency over the last couple of years. The root cause of this phenomenon is difficult to establish, because it is intertwined with the current issues and developments in society, and it becomes even harder to pin down the cause when mental health problems come into play.

Many of these issues relate to our own societal beliefs about our role/purpose in society:

*"The Western ideal of the autonomous person who thrives best in the greatest freedom, surrounded by the greatest convenience, and striving for absolute self-determination and maximum self-actualisation. People suffer mentally because they cannot meet the high demands of a society that values the absolute ideal of individual autonomy. Since mental suffering in view of the same ideal of absolute autonomy is unacceptable, mental distress is allowed only as a psychiatric disorder for which we carry no individual responsibility and are not to blame."*<sup>1</sup>

During the meeting, participants also explored the mechanisms by which violent and non-violent groups and organisations accept and propagate new extremist ideologies, build popular legitimacy and gain significant social and political power.

The growing economic and political divide in society; the increased complexity of systems (digitalisation and required skills for its use); income disparity and the rising wealth of those already wealthy (or companies making extreme profits in times of crisis); and the broadening of the gap between the haves and the have-nots: these were identified as the main issues underlying mental health problems, arising from a sense of failure, isolation and alienation from broader society. The current energy crisis (resulting from the war in Ukraine) throws this situation into sharp relief.

### Accumulation of crisis

Crisis follows crisis, leaving people with little time to process events and causing many to feel they have lost control of their own lives. This can affect people's overall mental health and lead to feelings of anxiety, hopelessness and fear – and in many cases, extreme anger over specific issues.

Currently, the most common radicalisation path involves various kinds of organisations that provide social services associated with contexts of ideological division. Extremist narratives function as a tool to channel this anger, to address fear and anxiety, and in many cases, to give meaning to a (perceived) "unsuccessful" life.

As a consequence, some may resort to violence out of a sense of entitlement (e.g. they may feel they deserve to do this and that others have no rights, so the violence is justified). Some (e.g. groomers, extremist influencers) make

<sup>1</sup> Source: Damiaan Denys, 2022, Is the mental health crisis fuelled by our desire for individual autonomy?, *European Neuropsychopharmacology*, Volume 64, Page 1, <https://doi.org/10.1016/j.euroneuro.2022.08.004> (<https://www.sciencedirect.com/science/article/pii/S0924977X22008380>).

use of others by giving them meaning by addressing this sense of injustice (e.g. they may believe that since others have more perceived or real power, while they do not, they are justified in committing violence to acquire it).

Often, this is also a result of negative or even traumatic experiences with government. The more exposed to trauma a person is, the smaller the 'window of tolerance'.<sup>2</sup> This can lead to fast hyperarousal and engagement in risk behaviour to get aroused. So-called appetite aggression is typical of former combatants. Often, scapegoats are created so as to direct this anger towards vulnerable individuals (e.g. refugees, migrants, women, men and LGBTQ+ people).

## Catalyst(s)

Participants noted that several **catalysts** appear to have a major impact on this development.

1. The most obvious catalyst is social media and the spreading of conspiracy theories, disinformation and hate speech (e.g. QAnon) on a range of different platforms. Some of these narratives are spread with the malicious intent to destabilise Western countries (e.g. anonymous commentators who post deliberately offensive or provocative material online); others are spread by sponsors from within seeking to advance agendas fundamentally misogynistic or antisemitic, for instance (in some cases, even legitimised by parliamentarians and politicians).

Exacerbating the problem are the algorithms that cause confirmation bias by leading people down rabbit holes. One example of this is the [incel movement](#): the incels' online ecosystem fosters and encourages extreme attitudes related to suicide, interpersonal violence and violent misogyny.

2. The second **catalyst** similarly adding fuel to the fire is irresponsible, sensation-seeking media coverage which contributes to these spreading fears in order to draw an audience to a media platform. The result is often a doom-laden and hopeless portrayal of a world on fire. Anxiety and fear cause individuals to seek solutions and clarity on these issues, to create a false sense of security. Additionally, there is a trend of local problems extending into global issues (e.g. the farmers protest in the Netherlands, the Yellow Vests Protests in France, misogyny towards Finland's female-led government and the war in Ukraine).
3. The third **catalyst** is the pandemic and its strict accompanying measures, which affected people's mental, economic and social well-being. Practitioners witnessed a lot of manifestations of anger and frustration during the pandemic. Besides the protests, there were generally few actions related to it. When lockdown ended, it was assumed by some that these feelings would go away. However, many still feel traumatised and angry, harbouring anti-government sentiments that have not been dealt with.

## Justifying violence

All the above factors have resulted in a phenomenon practitioners are now seeing: a rising conviction amongst some that it is justifiable to use violence, no longer drawing from a broader recognisable ideology but rather from just one single issue that causes anger or fear.

Multiple such incidents have been recorded, some with a fatal outcome. For example, in Vilnius during the pandemic, a supermarket customer shot a security guard who asked him to wear a face covering, which was mandatory in all indoor public spaces in Lithuania at the time.<sup>3</sup> In another case in Germany, a man killed his wife and three young children before taking his own life; he had forged a vaccination certificate and feared his children would be taken away when the forgery was discovered.<sup>4</sup>

Some people are willing to resort to violence because they are dealing with significant issues which in some cases have led to mental collapse and consequently a state of psychosis. More 'established' ideologies (extremist groups and

<sup>2</sup> Read more on trauma: [https://home-affairs.ec.europa.eu/system/files/2020-09/ran\\_h-sc\\_ptsd\\_trauma\\_stress\\_risk\\_re-turning\\_violence\\_lisbon\\_10-11\\_04\\_2018\\_en.pdf](https://home-affairs.ec.europa.eu/system/files/2020-09/ran_h-sc_ptsd_trauma_stress_risk_re-turning_violence_lisbon_10-11_04_2018_en.pdf)

<sup>3</sup> Read more: <https://www.lrt.lt/en/news-in-english/19/1523924/shopper-shoots-security-guard-after-told-to-put-on-a-face-mask>

<sup>4</sup> Read more: <https://www.reuters.com/world/europe/man-killed-family-then-self-over-faked-vaccine-pass-german-prosecutor-2021-12-07/>

individuals) are facilitating this where they can, joining the bandwagon of issues linked to peoples' personal grievances or trauma. This may lead to unexpected situations. For example, practitioners described encountering people with opposing ideological backgrounds connecting on the issues they agree on (e.g. antisemitism, misogyny, hate towards LGBTQ+ people). While there is no common ideology, there is a common destabilising or subversive goal.

## Challenges for practitioners

For practitioners, these developments bring several new challenges.

- For the detection field (police/intelligence), it is much more difficult to detect potentially violent extremists when an extremist ideology is not suspected (due to personal ideologies). This is especially the case when mental illness also comes into play. The result is that security forces do not put in place any precautionary measures, for example asking the police to look into the case.
- Cases are more difficult to assess because these individuals with fragmented ideologies lack a clear-cut ideology, which makes them uncategorisable under the framework of the risk assessment tools used by police. This makes it more complicated for police to determine if they are a potential threat, a potentially violent individual or a violent extremist.
- It is especially challenging when mental illness is present (which tends to be increasingly the case). While psychologists can assess such cases to establish if there's a risk for violence, they often cannot confirm whether the violence is inspired by an extremist ideology.
- From a prison perspective, holding group interventions is difficult if individuals lack a common ideology, so this might need to be done individually (which leads to capacity problems).
- As a government institution, it is challenging to combat anti-government sentiments when working with individuals holding these beliefs. The government institution will be perceived to be interfering in the individual's life (again), reinforcing the idea that the government's influence is pervasive.
- The principal partners (police, public prosecutor and local government triage) are often missing mental health information which can't be shared for confidentiality reasons. These laws are important; the question is how to make the situation workable for all parties.
- In triage settings, labels are generally not helpful, narrowing rather than expanding the potential for tailor-made approaches.
- A significant challenge is the lack of prevention efforts as compared to security efforts. Civil society is not always readily available or involved to handle these cases and some practitioners indicated that the world of prevention of violent extremism (PVE) is still not collaborating effectively with the CVE world. Counterextremism has taken more prominence, and as a result, risk assessments are the norm, while needs assessments seem to be a rarity.
- Given that a key concern of those working to tackle radicalisation and violence is the process by which people are attracted and drawn to extreme beliefs and the social settings in which they are shared, expressed and lived out, maybe the principal focus is not ideology per se, but rather the new ways of revealing or relating to new societal problems (crisis) and how it can affect the most vulnerable people (in terms of mental health).

## Recommendations

### Risk assessment beyond labels

- Risk assessments need to be connected more to psychologists as assessors. Mental health is always a basic consideration when dealing with potentially violent people; a trained mental health professional<sup>5</sup> is needed to make a good judgement call and arrange any follow-up.
- In risk assessment, practitioners need to broaden their horizon/perspective to consider the person on an individual level and move beyond ideologies and label discussions. Many risk assessment tools do not use/focus on ideology or are ideology based but instead focus on behaviour and its consequences.

### Therapy and care infrastructure

- Practitioners repeatedly noted that in their respective countries there is a lot of focus on risk, while very little is being done to safeguard vulnerable individuals. Risk approaches can result in more dangerous individuals as they confirm to the at risk person what was already believed about authority. This is especially true when applied without proper care and PVE approaches. Instead, a caring authority is needed to rebuild the trust that has been lost. **Needs assessments** could prove a good tool to address the care aspect needed to help vulnerable individuals with significant personal issues.
- Many of these individuals with fragmented ideologies have had **traumatic experiences** with government institutions, often in their childhood. Physiological responses to trauma can give people a sense that they are losing control. But given their engagement with child services, mental health services, security services, etc., their recent experiences are actually likely to have been controlled by others (lack of self-determination). This trauma needs to be addressed. Given the past experience of such cases, a **sense of empowerment** is required if they are to succeed in managing their trauma and to rebuild trust in the government.
- In therapy, it is important to address any serious mental health disorders that may exist. Furthermore, for many of these individuals, it is important to pay attention to their **search for meaning and belonging**. Additionally, any **identity issues** that are present must be explored.
- Due to the sense of insecurity of such individuals, it is also crucial to address the **need for structure**. For some, prison settings provided this structure, stabilising the symptoms of their mental illness and reducing violent behaviours (whether a result of ideological drivers or more personal grievances).
- A returning recommendation in this working group is to look at any **attachment issues** that may exist (**see attachment theory<sup>6</sup>**). Many of these individuals have had an unstable family structure. For some, this could result in a need to be needed or to belong, which could be addressed through many forms of treatment.

### Policy

- People are increasingly angry with government policies, which in turn creates a **pool of anger and hopelessness** derived from a sense of social-economic-judicial injustice. Extremist groups channel this anger towards these institutions and/or scapegoats to further their own agenda. Currently, much of the funding goes to security services; relatively little targets care services or civil society, which could address this anger and rebuild trust between government and its citizens. Policy should redirect its focus towards providing socio-economic security (and consequently mental well-being), especially during these times of crisis.
- Although we do not expect to resolve the problematic relationship between extreme views and violent behaviour, the current framework may go some way towards **bridging the gap** between belief and action by connecting what is transmitted (ideological content), with how and why it is shared and practiced, and by whom and in what contexts (ideological practice). Policymakers should focus on the new forms of expression (hatred and sympathy) in the face of the current crises that surround us, since these forms of expression may represent the beginning of a new phenomenon of radicalisation, or new arguments justifying violence.

<sup>5</sup> Read more: [https://home-affairs.ec.europa.eu/system/files/2022-02/ran\\_health\\_training\\_for\\_mental\\_health\\_practitioners\\_p-cve\\_4-5\\_112021\\_en.pdf](https://home-affairs.ec.europa.eu/system/files/2022-02/ran_health_training_for_mental_health_practitioners_p-cve_4-5_112021_en.pdf)

<sup>6</sup> Read more: [http://www.alexandrastein.com/uploads/2/8/0/1/28010027/jump-2020-abgelegt.abgereist.ausgestiegen\\_perspektiven\\_der\\_ausstiegsarbeit-1\\_as.pdf](http://www.alexandrastein.com/uploads/2/8/0/1/28010027/jump-2020-abgelegt.abgereist.ausgestiegen_perspektiven_der_ausstiegsarbeit-1_as.pdf)

## Follow up

- Due to the complexity and relative novelty of the topic, more practical recommendations cannot be made. However, practitioners agreed that by focusing on building adequate care infrastructures alongside the security and judicial structures, we will have more success in dealing with this issue. A cross-cutting event with security and mental health care professionals could address these issues.
- This could be followed up with another event in the near future with other relevant stakeholders and working groups like Youth and education, or Families, communities and social care.
- RAN policy could address this topic from a policy point of view, focusing on the growing resentment towards government institutions as a result of previous or existing policies, and on addressing this with the aim of eliminating the fertile ground extremists can recruit from.

## Further reading

The COVID-19 pandemic and measures to counter it and their impact on populations have created an opportunity for new dynamics of development in violent right-wing extremism (VRWE). Utilisation of the 'corona-crisis' is typical of various forms of violent extremism and terrorism globally (including violent religious extremism). The specific threat of VRWE is characterised by various manifestations of violent behaviour (so-called corona hate crimes, violent demonstrations and riots, discussions about terrorist attacks, etc.) and by VRWE's interconnection with a [broader spectrum of mass protests over responses to the COVID-19 pandemic and with mass propagandist campaigns in new social media](#).

Both trauma awareness and recognition of trauma signals are important skills in the toolbox of a mental health professional. This requires equipped support structures and services, as well as cooperation between professionals in law enforcement, justice, prison and probation, social services, health and education. More information on [how to address trauma and PTSD](#) is available here.

The incel phenomenon is increasingly studied, including from a P/CVE perspective. As there are links between certain parts of the incel movement and (other) types of extremism, it is important to try to understand this mostly online world. The [RAN Communication and narratives \(C&N\) working group meeting on the incel phenomenon](#) focused on exploring the underlying issues and root causes that result in the potential threat incels pose to themselves and others.