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## EX POST PAPER

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# Alienation, Identity and Intercultural working

The general objective of this ex post paper is to identify risk factors, models and practical proposals to work on the prevention of radicalisation through an intercultural lens. Nowadays, psychosocial and criminological research has provided evidence that alienation, understood as a feeling of social exclusion and marginalisation, can become a contributing factor to violent extremism. Therefore, in the context of our societies, we must pay attention to those individuals facing migration and/or acculturation processes, since they may be especially vulnerable. The 3N model (needs, narratives and networks) is used as a frame of reference, a psychosocial approach that considers the existence of three fundamental factors to explain the radicalisation process: needs, narratives and networks. Likewise, other related concepts are addressed, such as identity, acculturation, acculturative stress, prejudice, discrimination and intergroup contact. Based on this framework, practical proposals and recommendations are offered for professionals working with refugees, immigrants and their descendants.

# Introduction

Migratory movements and refugee flows are a global priority. The number of people who fled war, conflict and political persecution exceeded 70 million in 2018, the highest level of displacement ever recorded <sup>(1)</sup>. Of these, about 26 million are refugees and more than half are under 18. In the European context, the arrival of more than 1 million **asylum seekers and immigrants** in 2015 exposed **difficulties in the system** and the **need to adapt to new challenges**. To respond to this migration crisis, European institutions have been taking measures to improve the asylum system and formulate fairer and more effective policies <sup>(2)</sup>.

At the same time, political discourse that favours **prejudice and discrimination towards immigrants, refugees and other minority groups** has intensified. From different social movements and political parties, generally populist anti-immigration and/or from the extreme right, open rejection of these minorities is promoted. According to a Pew Research Center study <sup>(3)</sup>, a large percentage of Europeans consider refugees as an economic burden and associate them with crime. This report also found that 59 % of Europeans believed that the arrival of refugees would increase the likelihood of terrorism in their country.

Immigrants and their descendants, refugees and other ethnic minorities continue to face situations of harassment, prejudice and discrimination in all areas of life. In addition, victims and witnesses of racist and/or hate incidents rarely inform the authorities <sup>(4)</sup>. These indicators of prejudice and discrimination are also visible in **difficulties in accessing basic rights**, including **mental health and social care** <sup>(5)</sup>. Some of the barriers that immigrants and refugees may perceive when accessing mental health and social care services can be grouped into the following categories <sup>(6)</sup>:

- **Sociocultural barriers.** These are associated with certain culturally influenced perceptions that consider social and/or mental health problems as a weakness or something to be ashamed of. There may also be distorted conceptions of what the psychological approach to problems entails, something that can make someone prefer other types of alternative aid (usually non-scientific) rooted in their culture of origin. An example would be beliefs in voodoo or djinns, which could lead people to seek help from dubious faith healers.
- **Contextual-structural barriers.** These mainly refer to: (1) lack of appropriate resources that take into account the cultural perspective (language, characteristics of minorities, personnel); and (2) ignorance by immigrants and refugees of existing services and resources. In addition, undocumented immigrants face additional challenges (e.g. fear of deportation) and the real possibility of accessing certain social and health services.
- **Intervention barriers.** These refer to the lack of culturally sensitive mental health and social care services, possible biases of professionals and communication problems. These cultural aspects can affect the intervention process and pose important barriers between professionals and recipients.

The described scenario has important implications in the EU Member States. Throughout this ex post paper, **different aspects related to the vulnerability to radicalisation** of these groups (refugees, immigrants and their descendants) in the context of European societies will be reviewed. For this, aspects related to the **acculturation process** that can lead to people **feeling alienated** will be taken into account. The **3N model of radicalisation**, a suggestive approach with practical implications, will be used as an integrative framework. Finally, some **recommendations** that may be useful **for first-line practitioners** in the fields of social work and mental health are offered.

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<sup>(1)</sup> UNHCR. The United Nations Refugee Agency. (2019). *Global Trends. Forced displacement in 2018*. Retrieved from <https://www.unhcr.org/globaltrends2018/>

<sup>(2)</sup> European Union Agency for Fundamental Rights. (2019). *Fundamental Rights Report 2019*. Retrieved from <https://fra.europa.eu/en/publication/2019/fundamental-rights-2019>

<sup>(3)</sup> Pew Research Center. (2016). *Spring 2016 Global Attitudes Survey*. Retrieved from <https://www.pewresearch.org>

<sup>(4)</sup> European Network Against Racism. (2017). *Racism & discrimination in employment in Europe. 2013-2017*. Retrieved from [https://www.enar-eu.org/IMG/pdf/shadowreport\\_2016x2017\\_long\\_final\\_lowres.pdf](https://www.enar-eu.org/IMG/pdf/shadowreport_2016x2017_long_final_lowres.pdf)

<sup>(5)</sup> European Union Agency for Fundamental Rights. (2019). *Fundamental Rights Report 2019*. Retrieved from <https://fra.europa.eu/en/publication/2019/fundamental-rights-2019>

<sup>(6)</sup> American Psychological Association. (2013). *Working with immigrant-origin clients. An update for mental health professionals*. Retrieved from <https://www.apa.org/topics/immigration/immigration-report-professionals.pdf>



acculturation process can be stressful and result in problems of self-esteem and mental health. There is evidence that marginalisation is the most stressful orientation of acculturation. Otherwise, integration is the least stressful and, therefore, the most favourable for mental health <sup>(9)</sup>.

- **Different social and cultural groups may show different acculturation trends.** Thus, depending on variables such as language, customs and cultural practices, there may be a greater or lesser tendency towards social integration.
- **The role of the host society is essential** so that integration can take place in a positive way. In this sense, prejudice and discrimination can hinder the acculturation process. Specifically, the increase of social movements of the extreme right within the host society favours the stigmatisation of minorities and social polarisation. This scenario represents an important barrier to social integration.

## Alienation as contributing factor to violent extremism

Radicalisation leading to violent extremism is a multidimensional process, where there are many contributing factors that can influence it. From psychosocial and criminological research, one of the variables that has been proposed as a contributing factor is **alienation**, a concept closely linked to **social identity and culture**. Thus, when in the acculturation process people have difficulty adapting in a positive way, they may feel **excluded and discriminated against**. The concept of alienation has been studied for decades in the social sciences <sup>(10)</sup>, and basically refers to a state of detachment from society. This **psychological state** can become a **risk factor** for violent extremism, making it easier for certain individuals to tend to meet their needs for affiliation and search for vital significance in extremist groups. Consequently, alienated individuals and groups may be especially vulnerable to violent extremism, as well as to terrorist recruitment.

This approach is consistent with the foregoing perspective. Specifically, **perceived discrimination** has been found to be a risk factor for supporting political violence in studies conducted on European and American Muslims <sup>(11)</sup>. Along the same lines, a meta-analysis of relative deprivation found that when people felt unfairly treated they were more likely to be involved in collective mobilisations to restore perceived injustice <sup>(12)</sup>. Other investigations have related relative deprivation <sup>(13)</sup> and perceived oppression <sup>(14)</sup> to violent extremism in samples of immigrant Muslims residing in vulnerable contexts. It has also been found in samples of Muslim immigrants that **marginalisation** is positively related to **loss of significance** (i.e. low self-esteem and/or lack of personal significance), which is in turn positively related to supporting radical Islam and terrorist groups. More recently, other works with samples from different cultures have also found that **social alienation** <sup>(15)</sup> and **social exclusion** <sup>(16)</sup> are contributing factors to the radicalisation process.

In this way, alienation, understood broadly, can be a risk factor for violent extremism. But how does that process occur? What applied implications can we extract?

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<sup>(9)</sup> Yoon, E., Chang, C. T., Kim, S., Clawson, A., Cleary, S. E., Hansen, M., ... & Gomes, A. M. (2013). A meta-analysis of acculturation/enculturation and mental health. *Journal of Counseling Psychology, 60*, 15.

<sup>(10)</sup> Giffin, K. (1970). Social alienation by communication denial. *Quarterly Journal of Speech, 56*, 347-357; Lystad, M. H. (1972). Social alienation: A review of current literature. *The Sociological Quarterly, 13*, 90-113; Williams, K. D. (2007). Ostracism. *Annual Review of Psychology, 58*, 425-452.

<sup>(11)</sup> Victoroff, J., Adelman, J. R., & Matthews, M. (2012). Psychological factors associated with support for suicide bombing in the Muslim diaspora. *Political Psychology, 33*, 791-809.

<sup>(12)</sup> Smith, H. J., Pettigrew, T. F., Pippin, G. M., & Bialosiewicz, S. (2012). Relative deprivation: A theoretical and meta-analytic review. *Personality and Social Psychology Review, 16*, 203-232.

<sup>(13)</sup> Moyano, M., Bélanger, J. J., Lobato, R. M., & Trujillo, H. M. (under review). Risk of jihadist radicalization in urban environments: The case of El Puche.

<sup>(14)</sup> Lobato, R. M., Moya, M., Moyano, M., & Trujillo, H. M. (2018). From oppression to violence: The role of oppression, radicalism, identity, and cultural intelligence in violent disinhibition. *Frontiers in Psychology, 9*, 1505; Moyano, M., & Trujillo, H. M. (2014). Intention of activism and radicalism among Muslim and Christian youth in a marginal neighbourhood in a Spanish city. *International Journal of Social Psychology, 29*, 90-120.

<sup>(15)</sup> Bélanger, J. J., Moyano, M., Bangash, H., Richardson, L., Lafrenière, M-A., McCaffery, P., ... & Nociti, N. (2019). Radicalization leading to violence: A test of the 3N model. *Frontiers in Psychiatry, 10*, 42.

<sup>(16)</sup> Pretus, C., Hamid, N., Sheikh, H., Ginges, J., Tobeña, A., Davis, R., ... & Atran, S. (2018). Neural and behavioral correlates of sacred values and vulnerability to violent extremism. *Frontiers in Psychology, 9*, 2462.

## The 3N model of radicalisation

The **3N model of radicalisation** <sup>(17)</sup> is a theoretical framework used to understand the role of alienation in the process of radicalisation. There are several **benefits** to using this model:

- 1) it assumes a multifactorial view of the radicalisation process;
- 2) it assumes that radicalisation is fundamentally due to individual–group interactions;
- 3) it has been supported by high-quality scientific evidence; and,
- 4) it has practical implications aimed at counteracting violent extremism and preventing radicalisation.

In summary, the model (see Figure 2) explains the radicalisation process proposing the contribution of three fundamental factors: **Needs, Narratives** and **Networks**. These three factors contribute to radicalisation in a dynamic and interactive way. Below, we review them in more detail, explaining **how alienation can be related to the 3N model**.

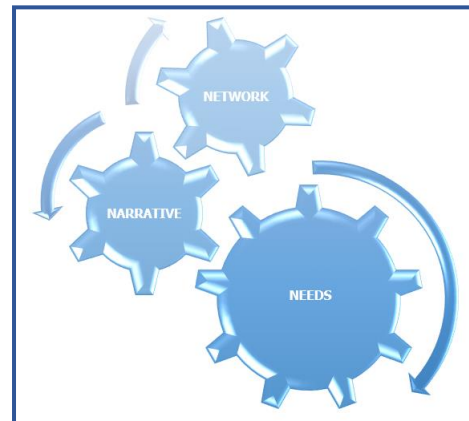


Figure 2: The 3N model of radicalisation

### NEEDS

Over the years, different motivations of violent extremists have been proposed (e.g. humiliation, injustice, revenge, economic benefits or need for filiation). However, the 3N model suggests that there is a **common motivator** that integrates them all: the **search for personal significance**. This concept refers to the **basic need** to feel meaningful, to be someone, to be respected, to be worthy of esteem. Basically, there are two ways in which the search for significance is activated:

- **Loss of significance.** When there are situations of humiliation, injustice dishonour or shame that make an individual or a group feel insignificant.
- **Opportunity to gain significance.** It refers to the gain of personal significance that an individual or group may have as a result of performing extremist actions (e.g. committing an attack), something that would turn them into 'martyrs' or 'heroes'.

From this perspective, the radicalisation process begins with some kind of triggering event that activates the motive of seeking personal significance. Once the search for significance is activated, the person will investigate different means to respond to that motivation, including options that, if appropriate circumstances present, could include violent extremism. It is necessary to point out that **alienation** can be considered **as an emotional state of loss of personal significance**, something that could encourage individuals and groups to restore it through options such as violent extremism.

### NARRATIVES

In the 3N model, narrative refers to the **ideology or set of beliefs shared by a particular group**. This ideology and its [narrative](#) may vary in its content and may be associated with different tendencies of a religious, political or ethnic-nationalistic nature <sup>(18)</sup>. Whatever its content, ideology establishes **a means** by which **personal significance** can be obtained. Thus, a radical ideology offers an interpretation of reality where it is established what must be done to achieve personal significance in a legitimate, valuable and honourable way. Additionally, ideology also offers a clear "us and them" narrative and reinforces black-and-white thinking, thus providing answers to questions or doubts someone might have and giving meaning to life.

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<sup>(17)</sup> Kruglanski, A. W., Bélanger, J. J., & Gunaratna, R. (2019). *The three pillars of radicalization: Needs, narratives and networks*. Oxford: Oxford University Press; Kruglanski, A. W., Gelfand, M. J., Bélanger, J. J., Sheveland, A., Hetiarachchi, M., & Gunaratna, R. (2014). The psychology of radicalization and deradicalization: How significance quest impacts violent extremism. *Political Psychology*, 35, 69-93.



## NETWORKS

The third component of the model refers to **social networks** and/or **group dynamics**. The role of networks is essential for several reasons. Networks make it easier to cover certain basic needs (such as membership, status, personal significance); secondly, networks are a **channel of transmission** of radical ideology; and thirdly, they **offer validity** to the justifying ideology of terrorism. In this sense, in the context of extremist ideologies, the group may come to admire and respect those who commit violent acts by considering them worthy and even honourable (e.g. martyrs, heroes). It is necessary to emphasise that the **loss of personal significance** (e.g. alienation) is a **vulnerability** that can be easily exploited by manipulators and recruiters in order to legitimise political violence and inoculate grievances, perception of injustice and relative deprivation in potential recruits.

## Some practical implications

Once the 3N model has been exposed, some practical recommendations can be derived from it, as given below.

### HOW CAN ONE INTERVENE ON THE NEEDS?

When a person is in a situation of loss of significance (e.g. alienation), it is necessary to **address the motivational imbalance**. For this reason, social workers and mental health professionals should **identify the needs and support** that a child, youth or family may need and the best way to provide help. A good example of how such needs can be identified and supported can be found in the ['Right Help Right Time' guidance](#) from the Coventry Safeguarding Children Partnership. When focusing on the needs, it is important to **offer vital alternatives** and attend to dimensions such as security, identity, training, occupations, employment and leisure activities<sup>(19)</sup>. It is foreseeable that influencing these aspects **improves** the self-esteem and **personal significance** of people at risk.

**Traumatic experiences** that favour loss of significance and **other mental health problems**, such as anxiety disorders, depression or post-traumatic stress disorder, can be experienced throughout the **migration process**. Some of these experiences are associated with discrimination, stigma, abuse of gangs and manipulative networks, persecution and distrust of the authorities, stays in refugee camps, expulsion and/or deportation, separation of families, torture, and experiences of political and/or interpersonal violence. In addition to such traumatic experiences, in the migration process there may be other **negative circumstances** in the context of the **host society** that make it even more difficult to address loss of significance and mental health problems (e.g. unemployment, poverty, lack of social support). From an intervention point of view, it is essential that professionals have minimal notions of the cultural aspects associated with these dramatic realities<sup>(20)</sup>, in order to **adjust and contextualise interventions** as much as possible.

#### **METS project (Method for the Empowerment of Trauma and Torture Survivors)**

The objective of this project has been to promote good practices in different rehabilitation centres in the EU, in order to empower torture survivors and increase their capacity for integration in host countries. Within the framework of this enterprise, a transdiagnostic intervention called *"Seven Recovery Oriented Survivor Empowerment Strategies"* (7ROSES) was developed in the Netherlands. Basically, 7ROSES aims to increase self-efficacy among refugees seeking treatment on post-migration stressors. Because it can be applied by non-specialised health workers, it can be used on a large scale, something that increases the options for psychosocial support and help. The model assumes a positive approach that seeks to enhance personal significance of the recipients.

**Difficulties in obtaining personal significance** can have important effects on the process of adaptation of immigrants and refugees. Specifically, the **lack of employment and/or training** can contribute to a negative

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<sup>(19)</sup> Bélanger, J. J., Nociti, N., Chamberland, P.-E., Paquette, V., Gagnon, D., Mahmoud, A., ... & Eising, C. (2015). *Building a resilient community within a multicultural Canada: Information toolkit on violent extremism*. Université du Québec à Montréal. Retrieved from <http://trev.ugam.ca/itve/>; Moyano, M. (2019). *Radicalización terrorista. Gestión del riesgo y modelos de intervención*. Madrid: Síntesis.

<sup>(20)</sup> PROTECT. Process of recognition and orientation of torture victims in European countries to facilitate care and treatment. Retrieved from <http://protect-able.eu/wp-content/uploads/2013/01/protect-global-eng.pdf>; Van Heemstra, H. E., Scholte, W. F., Haagen, J. F. G., & Boelen, P. A. (2019). 7ROSES, a transdiagnostic intervention for promoting self-efficacy in traumatized refugees: A first quantitative evaluation. *European Journal of Psychotraumatology*, 10(1), Art. 1673062.

affective state and social alienation. According to the 3N model, **employment and training** could help the process of immigrant adjustment as follows:

- 1) reducing feelings of loss of significance;
- 2) providing opportunities to build a new personal narrative (cultural and language learning); and
- 3) contributing to the construction of new social networks and friendships.

Therefore, it is a priority to **offer advice, guidance and opportunities to people at risk of alienation**. There are different practices in the EU that aim to promote the inclusion of immigrants and their descendants. Thus, by way of example, the Dutch government has designed the "*Further Integration into the Labour Market programme (2018-2021)*". This initiative is composed of different actions that seek to prevent social exclusion and focus on issues such as discrimination, education of the most vulnerable groups and the participation of families. The programme is based on an evidence-based approach and tries to create **synergies between employers and local authorities** <sup>(21)</sup>. Also, there are different **local radicalisation prevention plans** that have **prioritised Needs** as a strategic axis; see the example below.

The "[Transversal Plan for Coexistence and Prevention of Violent Radicalisation in the City of Malaga](#)" is a project that, in addition to being an example of multi-agency working, prioritises different actions such as interreligious dialogue, the creation of spaces for sharing experiences and expressing needs, and intercultural mediation. In this way, psychosocial intervention professionals have different scenarios to help meet certain basic needs of vulnerable people. The goal is to build a resilient and cohesive society that avoids social alienation, something that will be a protective factor against violent extremism.

## HOW CAN ONE INTERVENE ON THE NARRATIVES?

To intervene on the narrative implies addressing the ideological aspect. **Dismantling stereotypes and prejudices** and **offering resources** to have a more open understanding of reality are elements to consider. In therapeutic and psychosocial intervention contexts, the ideology can be approached **through dialogue and communication**. Occasionally, cognitive biases and distortions will have to be worked on, as well as evoking certain themes of the personal biography in order to restructure and provide the individual with a more adaptive sense to the prevailing circumstances.

### Using dialogue

When intervening on the ideological aspect, several approaches can be considered:

- encourage **intercultural and interfaith discussions** that underscore the common values;
- Encourage people to look at an issue from **different angles**, by asking what the issue is about, what the arguments are, what is assumed or how arguments are manipulated.

See the 2018 RAN Issue Paper '[Discussing Taboos and Controversial Issues](#)' for more suggestions and methods of such conversations. The handbook on '[The contribution of youth work to preventing marginalisation and violent radicalisation](#)' from the European Commission's Directorate-General for Education, Youth, Sport and Culture is a **practical toolbox** targeting social and youth workers. The toolbox offers different approaches to prevent marginalisation and radicalisation leading to violent extremism.

Naturally, the **narrative** is also capable of being **addressed in the host society**, especially to counteract ideologies that enhance reductionist views of reality and favour the stigma of minorities. It is also important to note that in intervention contexts, we can meet people who openly sympathise with violent extremist ideologies <sup>(22)</sup>. Given these situations, it is necessary to **promote critical attitudes towards violent ideologies** and to expose and [favour non-violent alternative narratives](#). Although it is not an easy task, this will involve generating cognitive dissonance and critical attitudes towards unique and exclusive thinking.

Very related to the above, the **communicative aspects** are fundamental, especially when there are cultural differences between professionals and recipients. In order to minimise misunderstandings and facilitate the intervention process, it is recommended to: **(1) listen to and understand the recipients;** **(2) build relationships based on trust;** and **(3) keep open and honest lines of communication**. Beyond cultural differences, in therapeutic contexts it is worth emphasising the aspects that unite us and the common needs of people of all cultures. Likewise, it is advisable to minimise ethnocentric biases and the erroneous expectations that

<sup>(21)</sup> See: <https://ec.europa.eu/social/main.jsp?langId=en&catId=1047&newsId=9428&furtherNews=yes>

<sup>(22)</sup> Canters, F., & van de Donk, M., [Building bridges](#), Ex Post Paper. Prague, Czech Republic: RAN Centre of Excellence, 2019.

are sometimes stereotyped about certain cultural groups. In certain situations, the collaboration of intercultural mediators, translators and interpreters who facilitate basic communication with the recipients of the intervention will be necessary.

Actions, communication campaigns and interventions aimed at combating prejudice and discrimination assume contextualised approaches and a local character, with the support of institutions and administrations being fundamental. In this sense, the **role of the attitudes and discourse of political leaders** is essential to generate a favourable environment to carry out comprehensive actions to reduce prejudice. Finally, it is necessary to dismantle and counteract campaigns and fake news that relate immigration to certain social problems through the dissemination of manipulated and biased data.

[Obama's Speech in Cairo](#) ('A New Beginning') can be considered a paradigmatic example of political communication that aims to delegitimise terrorism and dismantle this narrative. It also represents an attempt to reduce intergroup prejudice between Western countries and the Arab-Muslim world.

## HOW CAN ONE INTERVENE ON THE NETWORKS?

The fundamental objective is that people at risk **receive (and perceive) social support**. For this, the links with **constructive social networks** and tending towards **social integration** should be encouraged and/or strengthened. Likewise, those social ties that connect people with radical individuals and groups or with anti-integration trends should be hindered. Intervening on networks also means taking into account friends, loved ones and the community in general. All this is done in order for people at risk of alienation to feel that they are welcome in the host society and that, although there are sectors that show rejection, the support of the institutions and the majority of society is solid. Some examples of good practices have been developed in the fields of [sports and leisure activities](#), education, communication (awards on prosocial values, anti-discrimination days, conferences, campaigns), and in [local authorities and communities](#).

Prejudice and discrimination, closely related with social networks, also have important implications for mental health and psychosocial adjustment. In order to counteract their negative effects, it is advisable to **strengthen the personal coping resources of people at risk of alienation**. The 3N model can be useful to use as a reference when addressing this social problem. But also, from a social and community point of view, it is convenient for developing interventions to reduce prejudice in the host society. In this sense, there is evidence that prejudice can be reduced through **positive intergroup contact** <sup>(23)</sup>. To optimise this intergroup contact, the following conditions must be promoted:

- favouring the **equal status** of the groups;
- setting **common goals**; and,
- especially, seeking **institutional support**.

Different research, peace programmes and practices have found that positive intergroup contact is associated with a **reduction of prejudices between opposing groups**. This has been confirmed even in experiences developed in contexts that have suffered and/or suffer political violence, such as Bosnia-Herzegovina and Croatia, Northern Ireland, Israel, Rwanda and Sri Lanka <sup>(24)</sup>.

### **The role of Erasmus+ projects in building positive networks between youth, communities and countries**

Erasmus+ KA229 "*We are European, We are Equal*" (2018-2020) is a 2-year project on **social inclusion** partnered by three schools (3rd Gymnasio of Naoussa, D'Alessandro Vocino and IES Guadalquivir) located in socially deprived areas of Greece, Italy and Spain, respectively. Through the study of seven themes that favour the **development of personal significance**, the project aims to educate youth on citizenship values related to cultural, ethnic and religious diversity. This project intervenes transversally with social and health services, the local community and NGOs. Amongst the beneficiaries are groups of immigrants and refugees at risk of alienation who may become vulnerable targets for radicalisation.

<sup>(23)</sup> Pettigrew, T. F., & Tropp, L. R. (2006). A meta-analytic test of intergroup contact theory. *Journal of Personality and Social Psychology*, 90, 751-783.

<sup>(24)</sup> Al Ramiah, A., & Hewstone, M. (2013). Intergroup contact as a tool for reducing, resolving, and preventing intergroup conflict: Evidence, limitations, and potential. *American Psychologist*, 68, 527-542.



# The road to intercultural work

The approach to the factors contributing to violent extremism, in this specific case alienation, is a complex process — much more if the recipients of the interventions belong to other cultures than the professionals themselves. Listed below are some useful aspects for first-line practitioners to consider. These suggestions are applicable to any type of psychosocial and clinical approach, but we will try to emphasise the **cross-cultural awareness** and the potential recipients (immigrants and their descendants, refugees, minorities) that we are addressing.

## CULTURAL PERSPECTIVE IN CASE EVALUATION AND DIAGNOSIS

Any intervention must be based on an adequate evaluation and diagnosis. For this, it is necessary to have elements that support the decision-making process and **minimise personal bias**. As a general criterion, it would be desirable for this **assessment** to be based on empirical knowledge and scientific evidence, and not on intuitions and speculations. This requires incorporating certain **cultural variables in the evaluation process**, and thus in the assessment instruments <sup>(25)</sup>. Some of the issues that can be addressed are, among others, gender, family and intergenerational conflicts, identity conflicts, lack of social support (loneliness, isolation), and ideological aspects (e.g. culture of honour, religion). On the other hand, professionals can show **ethnocentric biases**, so it is important that they examine and be critical of their own prejudices and expectations in order to mitigate their effect, as far as possible. A possibility for softening the risk of these prejudices would be through **organised intervention** or **supervision** among professionals. Such support structures are not only beneficial for mitigating ethnocentric bias but also for the overall well-being of healthcare professionals working in preventing and countering violent extremism.

## DETECTING VIOLENT EXTREMISM

In contexts of intervention with socially alienated people (or at risk of being), it is necessary to have **basic knowledge and training** to detect possible indicators of violent extremism. In fact, in some countries such as the United Kingdom, health, social work or education professionals have been jointly responsible for detecting and reporting on early indicators of radicalisation <sup>(26)</sup>. However, on many occasions, **stereotypes** can hinder intervention. Thus, by way of example, a survey of 329 NHS employees in the United Kingdom to assess the effectiveness of the government's official Prevent Training package found that professionals showed significant biases in distinguishing normal behaviours from indicators related to the radicalisation process <sup>(27)</sup>. Therefore, it is advisable to be careful with the **possible biases** involved in making assessments, since there is a possibility that stereotypes of popular culture influence the perception of radicalisation. Even though there are different instruments that can help in decision-making, all of them require further verification and empirical validation <sup>(28)</sup>. Among the available resources, we can mention both psychometric instruments to assess risk such as VERA-2R <sup>(29)</sup> and another type of practical barometers <sup>(30)</sup> that offer indicators to attend to.

## CULTURAL COMPETENCES FOR PROFESSIONALS

Cultural competence is not equivalent to simply knowing stereotypes about certain cultures, many of which can be erroneous and biased. Thus, social and psychological intervention in cultural diversity contexts requires specific skills. **Cultural competence** implies, among other aspects, the cultural knowledge of professionals, an

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<sup>(25)</sup> Yeh, C. J., & Kwan, K. (2010). Advances in multicultural assessment and counseling with adolescents: An ecological perspective. In L. A. Suzuki, Casas, J. M., Alexander, C. M., & Ponterotto, J. G. (Eds.), *Handbook of multicultural counseling* (pp. 637-648). Thousand Oaks, CA: Sage.

<sup>(26)</sup> Heath-Kelly, C., & Strausz, E. (2019). The banality of counterterrorism "after, after 9/11"? Perspectives on the Prevent Duty from the UK health care sector. *Critical Studies on Terrorism*, 12, 89-109.

<sup>(27)</sup> Heath-Kelly, C., & Strausz, E. (2018). *Counter-terrorism in the NHS. Evaluating Prevent Duty safeguarding in the NHS*. Retrieved from <https://warwick.ac.uk/fac/soc/pais/research/researchcentres/irs/counterterrorisminthens/>

<sup>(28)</sup> Scarcella, A., Page, R., & Furtado, V. (2016). Terrorism, radicalisation, extremism, authoritarianism and fundamentalism: A systematic review of the quality and psychometric properties of assessments. *PLoS ONE*, 11(12), Art. e0166947.

<sup>(29)</sup> See <https://www.vera-2r.nl/>.

<sup>(30)</sup> Centre for the Prevention of Radicalization Leading to Violence (CPRLV). *Behaviour barometer. How to recognize radicalization behaviours leading to violence*. Retrieved from [https://info-radical.org/wp-content/uploads/2019/10/BAROMETRE\\_2019\\_ANG\\_2.pdf](https://info-radical.org/wp-content/uploads/2019/10/BAROMETRE_2019_ANG_2.pdf)

**awareness of attitudes and beliefs**, and the skills to **develop culturally appropriate interventions** <sup>(31)</sup>. In this sense, it is interesting to introduce the concept of cultural intelligence, closely related to the skills described.

**Cultural intelligence** is an extension of modern approaches to intelligence, complementing other perspectives essentially focused on cognitive and/or academic aspects. It could be defined as the **ability of people to adapt effectively in situations characterised by cultural diversity** <sup>(32)</sup>. In addition, cultural intelligence favours improvement of the ability to adapt on different levels (metacognitive, cognitive, motivational and behavioural). These cultural competences could be taken into account for training programmes and the assignment of positions and responsibilities in intercultural intervention contexts <sup>(33)</sup>.

## Final remarks

European societies are characterised by their cultural diversity. Thus, social and psychological interventions must necessarily assume an **intercultural perspective**. Throughout the report, models and practical recommendations for social care and mental health professionals involved in working with immigrants and their descendants, refugees and other ethnic minorities have been reviewed. Public institutions and administrations should develop policies and interventions that pay attention to people at risk of alienation, which should lead to preventing these people from radicalisation leading to violent extremism. To this end, it's important to **reduce the dynamics of prejudice and discrimination, provide** people with **personal significance** to face a reality that can be hostile, and **favour social integration**. Finally, although this report has focused on the concept of alienation as a risk factor, we should not forget that migrants and refugees usually show a remarkable pattern of strengths. In general, they are often highly motivated to learn the language and culture of host societies and have high levels of social participation. Greater **family cohesion** and the availability of **community support** can contribute to the possibility of recovery and resilience. Therefore, it is essential to **empower** these groups in the process of social and psychological intervention, give them an **active** (vs passive) **role**, and promote life stories that have led to a positive and successful social integration. As we move forward with these goals, we will be able to build more resilient and cohesive societies.

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<sup>(31)</sup> American Psychological Association. (2002). *Guidelines on multicultural education, training, research, practice, and organizational change for psychologists*. Retrieved from <https://www.apa.org/about/policy/multicultural-guidelines-archived.pdf>

<sup>(32)</sup> Earley, P. C., & Ang, S. (2003). *Cultural intelligence: Individual interactions across cultures*. Palo Alto, CA: Stanford University Press.

<sup>(33)</sup> Fang, F., Schei, V., & Selart, M. (2018). Hype or hope? A new look at the research on cultural intelligence. *International Journal of Intercultural Relations*, 66, 148-171; Moyano, M., Tabernero, C., Melero, R., & Trujillo, H. M. (2015). Spanish version of the Cultural Intelligence Scale. *International Journal of Social Psychology*, 30, 182-216.

## Suggested further reading

American Psychological Association. (2013). *Working with immigrant-origin clients. An update for mental health professionals*. Retrieved from <https://www.apa.org/topics/immigration/immigration-report-professionals.pdf>

Bélanger, J.J., Moyano, M., Bangash, H., Richardson, L., Lafrenière, M-A., McCaffery, P., Framand, K., & Nociti, N. (2019). Radicalization Leading To Violence: A Test of the 3N Model. *Frontiers in Psychiatry, 10*:42. <https://www.frontiersin.org/articles/10.3389/fpsy.2019.00042/full>.

Kruglanski, A. W., Bélanger, J. J., & Gunaratna, R. (2019). *The three pillars of radicalization: Needs, narratives and networks*. Oxford: Oxford University Press.

Lenos, S., Haanstra, W., Keltjens, M., & van de Donk, M., [RAN polarisation management manual](#), Ex Post Paper. Amsterdam, the Netherlands: RAN Centre of Excellence, 2017.

Lyons-Padilla, S., Gelfand, M. J., Mirahmadi, H., Farooq, M., & van Egmond, M. (2015). Belonging nowhere: Marginalization & radicalization risk among Muslim immigrants. *Behavioral Science & Policy, 1*, 1-12. [https://behavioralpolicy.org/wp-content/uploads/2017/05/BSP\\_vol1is2\\_-Lyons-Padilla.pdf](https://behavioralpolicy.org/wp-content/uploads/2017/05/BSP_vol1is2_-Lyons-Padilla.pdf)

Smit, Q., & Meines, M., [RAN Policy & Practice Workshop – Narratives and strategies of far-right and Islamist extremists](#), Ex Post Paper. Amsterdam, the Netherlands: RAN Centre of Excellence, 2019.

Trujillo, H. M., & Moyano, M. (2018). Towards the study and prevention of the recruitment of jihadists in Europe: A comprehensive psychological proposal. In I. Marrero y H. M. Trujillo (Eds.), *Jihadism, Foreign Fighters and Radicalisation in the European Union: Psychosocial, Legal, Political and Functional Responses*. London: Routledge, Taylor & Francis Group.