OVERVIEW

Practitioner Perspectives on Counterterrorism and Neurodiversity

Nadine Salman, Zainab Al-Attar & Grace Mckenzie

INTRODUCTION

RES1

Existing research does not indicate that there is a direct causal link between neurodivergence and engagement in criminality or violent extremism in the general population. However, while estimates vary, a proportion of individuals within violent extremist populations are also neurodivergent. Within these individuals, specific symptoms of neurodivergent conditions such as autism spectrum disorder (ASD) and attention-deficit/hyperactivity disorder (ADHD) may contextualise vulnerability to such engagement, as well as resilience and disengagement, that may differ from their neurotypical counterparts.

A key limitation of existing research is the small number of cases from which information is derived. However, indirect insights from practitioners who work directly with neurodivergent individuals in extremism contexts can be a useful resource in gathering knowledge from multiple cases; a single practitioner who has interacted with several individuals may be able to provide more insights from their practical experience than a single case study. In addition, through involving practitioners in research, we can gain insights into their training experiences, needs, and barriers to implementing best practice.



OBJECTIVES

This study aims to gather knowledge from practitioners, examining the following research questions:

- 1. What do practitioners know about the functional role of ASD/neurodivergent features in the context of extremism-related risk and/or resilience?
- 2. In the experience of practitioners, which other factors can increase or decrease extremism risk among ASD/neurodiverse individuals?
- **3.** Which approaches and strategies can be effective in mitigating extremism risk among individuals with ASD or other neurodiverse conditions in at-risk populations?
- 4. What training and resources can be provided to assist practitioners' work with neurodivergent individuals who are vulnerable to extremism?

METHOD

We conducted 10 two-hour focus groups with a total of 38 practitioners from six different countries, with experience of working with neurodivergent individuals in violent extremism contexts. Practitioner roles included intervention providers, threat/risk assessors, neurodiversity advocacy and training providers, education providers, operational practitioners, and mental health professionals. Most practitioners worked in pre-crime assessment, prevention, and intervention contexts. This research adopted a thematic analysis approach of transcripts from these focus groups, with a focus on summarising recurring themes relevant to the research questions.

KEY FINDINGS

1. NEURODIVERGENCE, VULNERABILITY, AND RISK

- **Circumscribed and Restricted Interests:** Practitioners discussed the role of specific restricted interests in drawing individuals into and keeping them engaged in extremism. These interests included the Second World War, Nazis, and Hitler; fantasy, role-playing, and gaming; weapons; and conspiracy theories and politics.
- **Collecting:** Practitioners highlighted a tendency for at-risk neurodivergent individuals to collect items, images, or videos linked to their specific interests such as weapons, Nazi memorabilia, or beheading videos. In some cases, these collecting behaviours became the grounds for subsequent conviction.
- Sensory Needs and Sensation Seeking: Practitioners suggested that extreme content may provide a source of sensory stimulation and excitement, and that some cases exhibited desensitisation from repeated exposure. Conversely, over-sensitivity may drive some individuals to selfsoothe through risky interests and online spaces.

- Social and Communication Difficulties: Social difficulties were associated with experiences of social rejection and isolation, pushing individuals to turn to online spaces to form social connections, where they were exposed to extreme content and influences and may have become vulnerable to exploitation. Experiences of rejection were also associated with feelings of grievance and injustice which became linked to extremist ideologies. A lack of social awareness was also linked to referrals to authorities, where individuals "leaked" their extreme views.
- Cognitive Rigidity, Need for Structure, and Overlooking the Bigger Picture: Practitioners highlighted some links between cognitive rigidity, a need for structure, and the attraction of some violent extremist ideologies which provided a sense of order. Practitioners discussed their cases' fixations on grievances and injustices, in some cases without considering the wider context or consequences of their actions.

2. OTHER CONTRIBUTORY FACTORS

- **Comorbidities and Complex Needs:** Practitioners highlighted the presence of other comorbidities and complex needs in addition to neurodivergence. These included having multiple diagnoses, mental ill health, family issues, difficulties around sexual and gender identity, and difficulties at school or work.
- Lack of Support/Understanding Around Diagnosis: Practitioners discussed problems associated with a lack of support services, particularly for those with complex needs such as multiple diagnoses.
- Adolescence and Age-Related Factors: The majority of practitioners' caseloads were adolescents. Adolescence was often associated with increased access to support, whilst the transition to adulthood led to vulnerabilities associated with a drop-off of support.

• **Covid-19:** The Covid-19 pandemic had both positive and negative effects for neurodivergent individuals; the decreased social interaction reduced stress, whilst the increase in isolation and time spent online increased vulnerability.

3. STRATEGIES, INTERVENTIONS, AND PROTECTIVE FACTORS

- **Tailored Interventions:** Practitioners emphasised the need for approaches and interventions tailored to the individual, their traits, and their experiences.
- **Systems-Based Interventions:** Practitioners highlighted the need for interventions in wider systems around the individuals, such as school, mental healthcare, and family.
- Harnessing Protective Factors: Practitioners noted the importance of considering individual protective factors, and adopting a strengths-based approach, including leveraging strengths conferred by neurodivergent features where possible.
- Neurodivergent-Friendly Intervention Approaches: Practitioners commented on the importance of considering neurodivergent needs during interventions, including sensory and communication needs.

4. PRACTITIONER TRAINING AND RESOURCES

- Existing Training and Knowledge: Practitioners reported that the training they received was inconsistent and often insufficient.
- **Training Needs and Suggestions:** Practitioners suggested that training should improve awareness of neurodivergence, have a practical focus, and noted the value of case studies as examples.

5. ADDITIONAL EMERGENT THEMES

- Ideology: Ideology was often considered secondary to neurodivergent individuals, where many presented with mixed or unstable ideologies. Practitioners noted that far-right ideologies were becoming more common.
- Stigma and Stereotyping: Practitioners raised concerns about the harms of stigmatising neurodivergent individuals and overly attributing extremism to clinical pathology.
- Interest, Risk, and Criminalisation: Practitioners noted challenges in discerning between interests, criminal intent, and risk.

CONCLUSIONS AND RECOMMENDATIONS

Overall, the findings of this study suggest that some neurodivergent features can contextualise extremism vulnerability and risk, but do not directly cause this risk; rather, they can combine with or exacerbate other vulnerabilities. Within populations of concern, risk assessment approaches and interventions may benefit from considering how neurodivergent traits and symptoms can contextualise risk, vulnerability, and resilience; and their interaction with external and convergent factors. Tailored approaches, particularly those that harness potential protective factors associated with neurodivergence, as well as neurodivergentfriendly and systems-based approaches, are important considerations for strategies to enhance resilience against violent extremism. Practitioners would benefit from more in-depth and practical training to guide them through understanding neurodivergent needs in these contexts, and appropriate tailored interventions. As this study primarily focused on practitioners who worked in pre-crime contexts, future research could improve generalisability through insights from practitioners who work with higher risk convicted terrorists.

ABOUT THIS PROJECT

This is the Overview from the Full Report 'Practitioner Perspectives on Counterterrorism and Neurodiversity'. You can find all the outputs from this project at: www.crestresearch.ac.uk/ projects/practice-consolidation-and-assessment/

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