

STRATEGIES FOR MENTAL HEALTH PROFESSIONALS

Mental health professionals—such as school counselors, mental health counselors, clinical psychologists, marriage and family therapists, and clinical social workers—may be called upon to work directly with youth who are becoming radicalized. Unfortunately, treatments incorporating deradicalization lag behind other modalities in the field of mental health. While PERIL and SPLC strive to center the needs and experiences of victims and survivors of bias incidents, resources for mental health professionals working with such patients are beyond our professional expertise. Therefore, the best practices offered in this insert focus predominately on mental health professionals working with young people who are vulnerable to or have already begun radicalizing:

Uncover the traumas and vulnerabilities that can put your patient at risk for radicalization in the first place. These are the driving force behind extremism. Much as drug or alcohol abuse can mask depression, so too can extremist attitudes and ideologies serve to cover and even “self-medicate” intense personal suffering. It may be necessary first to break through the armor of extremist attitudes and ideology, or you may be able to address the underlying drivers at the same time as you challenge extremist beliefs. But it is unlikely that deradicalization will take place, and even less likely that it will sustain, unless its underlying issues are treated.

Experiment with different treatment strategies. Some extremists or individuals who are radicalizing may respond better to an empathic approach. Others respond to reason and debate. Some hold authority in great respect while others will respond to authority with contempt. Some may respond positively to the inclusion of family in the treatment process. Others, such as those with radicalized family members or family members who contributed to trauma, will not. As you sift through the layers of ideology that cover an individual’s underlying vulnerabilities, be ready to vary your approach and change tactics when necessary.

Look into parallel approaches. Since no specific protocol exists to treat radicalization, look for aspects of your patient’s extremist attitudes that resemble pathologies for which there are treatment approaches. If your patient is involved in misogynistic or “incel” ideology, then it may prove worthwhile to explore strategies for treating perpetrators of intimate partner violence. If your client is fascinated by militias or street fighting groups, then you may find success adapting gang exit treatments. See how therapists and other practitioners treat less explicitly political expressions of hatred and violence and decide what you can apply to your own work.

Create trust through an inquisitive, constructive, and non-accusatory therapeutic process. Treatment and intervention should always proceed in a fair, open, and professional manner. Adopt an emotionally supportive yet nondirective point of view. Instead of seeking to prove your patient wrong in their political beliefs, encourage self-directed exploration and analysis of their personal beliefs and/or attitudes. As mentioned above, be prepared to change tactics in order to achieve this open and trusting relationship and look to parallel treatment methods for guidance.

Appreciate the role that historical and structural injustice plays in the radicalization process. Vulnerabilities that can lead people to extremism could have led them into gang activity, substance abuse, or other self-destructive, antisocial lifestyles. However, because of the social biases toward (for example) white supremacy, patriarchy, anti-immigrant hostility, and more, some individuals are instead drawn in the direction of extremism. If you understand the role that structural and historic injustice play in increasing the risks of radicalization, it will be easier to understand and perhaps even divert your patients.



Understand that extremist radicalization is not a mental illness or a personality disorder in itself, although it can co-occur with these pathologies. It is easier for a young person who is in the process of radicalizing to deceive you about their abandoning of such attitudes than it would be for a person living with a mental health disorder to feign recovery. It can be extremely dangerous to take a radicalized individual at their word that they have deradicalized. This is why you should seek to go beyond the ideologies and discover the emotional roots of the radicalization.

Reach out for help and support. Therapeutic treatment of radicalized individuals is a new and undeveloped field. It is inevitable that you will encounter questions and dilemmas with no clear solution. Talk to your colleagues and share your experiences and wisdom. Given the private setting of mental health support, always be aware of your own safety and wellbeing. If you are unsure how to proceed, reach out to the experts referenced at the end of the guide.