BLUEPRINT OF A REHABILITATION AND REINTEGRATION CENTER

GUIDING PRINCIPLES FOR REHABILITATING AND REINTEGRATING RETURNING FOREIGN TERRORIST FIGHTERS AND THEIR FAMILY MEMBERS

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Hedayah
countering violent extremism

ABOUT HEDAYAH

Hedayah was created in response to the growing desire from members of the Global Counter-Terrorism Forum (GCTF) and the wider international community for the establishment of an independent, multilateral center devoted to dialogue and communications, capacity building programs, research and analysis to counter violent extremism in all of its forms and manifestations. During the ministerial-level launch of the GCTF in New York in September 2011, the UAE offered to serve as the host of the International Center of Excellence for Countering Violent Extremism. In December 2012, Hedayah was inaugurated with its headquarters in Abu Dhabi, UAE Hedayah aims to be the premier international center for expertise and experience to counter violent extremism by promoting understanding and sharing of good practice to effectively serve as the true global center to counter violent extremism. For more information visit, www.hedayahcenter.org.

THE PROGRAM'S DONOR

FOREWORD

Hedayah is a small organization with an ambitious mandate and a global reach. Hedayah strives to provide governments and all relevant stakeholders internationally with the knowledge and skills necessary to effectively counter violent extremism in all its manifestations. This includes through comprehensive research and analysis, dialogue and communications, as well as through capacity building support.

The current global calls for enhanced assistance on the rehabilitation and reintegration of returning foreign terrorist fighters (FTFs) have not gone unheard. In fact, this document builds upon Hedayah's already extensive experience in the field of rehabilitation and reintegration of violent extremist offenders, returning FTFs, and their families. Since 2013, Hedayah has supported countries globally on this challenging issue. For example, Hedayah and the International Centre for Counter-Terrorism—the Hague convened an expert workshop with psychologists and prison officials that resulted in a document, "Additional Guidance on the Role of Psychologists/Psychology in Rehabilitation and Reintegration Programs" that built upon the good practices in the Global Counterterrorism Forum (GCTF)'s "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders." The findings from that workshop were presented at the GCTF CVE Working Group's Plenary Meeting on "Prison Deradicalization and Reintegration" in June 2013. Hedayah also hosts the virtual FTF Programs Catalogue, which was a deliverable from the GCTF's FTF Working Group, and tracks and describes programs that support the implementation of the "Hague-Marrakech Memorandum on Good Practices for a More Effective Response to the FTF Phenomenon."

Since 2016 in Tunisia, Hedayah has provided capacity building assistance to the National Counter Terrorism Commission on effective responses to the returning FTFs phenomenon, as well as to the Child Detention Centers and the Social Defence and Integration Centers, on how to effectively prevent, rehabilitate and reintegrate youth and children vulnerable to or affected by radicalization leading to violent extremism. In Indonesia, Hedayah has trained psychologists and social workers based in centers responsible for the rehabilitation and reintegration of families affected by violent extremism, as well as community based social workers from the most affected regions of the country. In Northeast Nigeria, Hedayah has trained local civil society organizations and community leaders on skills to support community-based rehabilitation and reintegration of former Boko Haram members. These are just some examples of the experience Hedayah has accrued in this field, which contributed to the base level of this program.

Subsequently, in 2020, Hedayah utilized its network of experts and practitioners to gain valuable insights and good practices through a series of engagements (surveys, interviews and workshops), in order to produce this set of 143 guiding principles.

Now, Hedayah is pleased to present these guiding principles which aim to support governments internationally to establish and implement a rehabilitation and reintegration Center for returning foreign terrorist fighters and their families. The knowledge and guidance contained within this document will help governments to identify the key elements which must be addressed in order to develop an effective approach to rehabilitation and reintegration. Additionally, Hedayah stands ready to further support any country in the national contextualization of these principles and the subsequent implementation.

As these experiences and this document represent, Hedayah continues to work hard to provide governments and local actors with good practices and guidance which can help to mitigate the threat of violent extremism, both nationally and internationally. Through further collaboration and enhanced support on the rehabilitation and reintegration of returning FTFs and their family members, we believe that we have a better chance of reducing the impact of violent extremism and enhancing peace within our societies and communities.

The Hedayah Team

AUTHORS

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Sara Zeiger is the Program Manager for the Research and Analysis Department, where she manages projects such as the International CVE Research Conference, the Counter-Narrative Library and MASAR, an app for monitoring, measurement and evaluation of CVE programs. She has conducted research on CVE on a variety of topics, most notably on counter-narratives, education, prison rehabilitation & reintegration, and youth & women. Prior to Hedayah, she was a researcher at the Center for Middle Eastern Studies at Harvard University and a Teaching Fellow at the Harvard Extension School. She holds her Master's in International Relations and Religion from Boston University, and graduated valedictorian from Ohio Northern University with a B.A. in Psychology and Religion.

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Hedayah also recognizes and expresses gratitude to those contributors
who requested to remain anonymous.

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ACRONYMS AND ABBREVIATIONS

BVC	Brøset Violence Checklist
CBO	Community-Based Organization
CSO	Civil Society Organization
CT	Counter Terrorism
CVE	Countering Violent Extremism
ERG22+	Extremism Risk Guidelines 22
FTF	Foreign Terrorist Fighter
GCTF	Global Counterterrorism Forum
HCR-20	Historical, Clinical, Risk Management-20
HR	Human Resources
ICCPR	International Covenant on Civil and Political Rights
IDP	Internally Displaced Persons
LSI-R	Level of Service Inventory Revised
LTTE	Liberation Tigers of Tamil Eelam
MLA	Mutual Legal Assistance
MoU	Memorandum of Understanding
NAP	National Action Plan
NCFAS	North Carolina Family Assessment Scales
NGO	Non-Governmental Organization
PCL-R	Psychopathy Checklist-Revised
PVE	Preventing Violent Extremism
R2MR	Road to Mental Readiness
RFTF	Returning Foreign Terrorist Fighter
RLVE	Radicalization Leading to Violent Extremism
SOP	Standard Operating Procedure
SPJ	Structured Professional Judgement
SSTD	Strengths and Stressors Tracking Device
SVR-20	Sexual Violence Risk 20
ToC	Theory of Change
TRAP-18	Terrorist Radicalization Assessment Protocol 18
UAE	United Arab Emirates
UN	United Nations
UNICRI	United Nations Interregional Crime and Justice Research Institute
UNOCT	United Nations Office of Counter-Terrorism
UNODC	United Nations Office on Drugs and Crime
UNSC	United Nations Security Council
UNSCR	United Nations Security Council Resolution
VEO	Violent Extremist Offender
VERA-2	Violent Extremism Risk Assessment 2
VRAG	Violence Risk Appraisal Guide
W-RRR	Way-Forward on Rehabilitation, Reinsertion, and Reintegration

GLOSSARY AND KEY CONCEPTS

Case Manager

The case manager is the central point of contact for the client that is formally or informally appointed to be responsible for the treatment plan of the client, and given the authority to make decisions related to the client. The case manager should ideally be aware of all relevant available information about the client.

Center

This document refers to a "Center" as a hypothetical prototype that may be established in any country to handle the rehabilitation and/or reintegration of returning foreign terrorist fighters and their families. The Center may be affiliated with the prison system, or may be a separate Center, depending on the local context. The principles presented in this document may be applicable to a variety of legal and technical constructs that could be deemed a "Center."

Children

For the purposes of this Guiding Principles document, children are considered to be any individual under the age of 18. This age limit means that there is a certain distinction in the potential criminal responsibilities of an individual over the age of 18 versus under the age of 18. Notably, the Committee on the Rights of the Child has recommended that "governments consider increasing the age of criminal responsibility to at least 12 years of age and do not lower the age in those countries where it is already above 12."[1]

Client

The client is the primary recipient of the Center's activities, or the individual undergoing a restorative process of rehabilitation and reintegration. In the case of this document, a client could be convicted of a terrorist offense or related illegal activity, or be voluntarily participating in the restorative program. In some cases, clients may also be the family members of an individual accused or convicted of a terrorist offense or other criminalized offense. This document chooses primarily to use the term "client" to refer to a broader range of individuals whom might benefit from the Center's activities, and chooses not to use a term that may stigmatize the individual with respect to their possible association with terrorism.

Disengagement

Disengagement refers to a restorative approach that encourages an individual to leave behind the shared social norms, values, attitudes and aspirations of violent extremism and terrorism.[2] Disengagement can be physical—i.e. the individual physically is removed from the group—and/or psychological—i.e. the individual mentally chooses to stop engaging in the group's activities. Disengagement does not necessarily mean a person has ideologically changed their beliefs, but rather their behavior increasingly removes him/her from circumstances previously affiliated with their former group.

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[1] United Nations, "Fact Sheet on Juvenile Justice," (2012). https://www.un.org/esa/socdev/unyin/documents/wyr11/FactSheetonYouthandJuvenile-Justice.pdf.

[2] John Horgan, "Deradicalization or Disengagement?: A Process in Need of Clarity and a Counterterrorism Initiative in Need of Evaluation," Perspectives on Terrorism 2, no. 4 (2008): 3-5, http://www.terrorismanalysts.com/pt/index.php/pot/article/view/32/html.

Deradicalization

Deradicalization refers to a process in which individuals reject the violent ideology they once embraced, often seen as a step further than disengagement and occurring when the individual's commitment to the group's ideological objective decreases.[3]

Intervention

Intervention refers to any activity conducted together with the client which aims to support or contribute towards the client's rehabilitation, disengagement, deradicalization and/or reintegration process. Such activities may include a combination of psychological, social, physical, educational/vocational, and creative approaches.

Needs and Strengths Assessment

These assessments are utilized to develop a profile of the client in terms of their critical needs (personal necessities that are at the core of individual behavior) or gaps between current conditions and desired conditions (goal of rehabilitation and reintegration). The assessment should also identify a client's prosocial behaviors, resiliency and protective factors that may be built upon in the rehabilitation and reintegration processes.

Practitioner

For the purpose of this document, the term "practitioner" refers to those professionals who are actively engaged in the implementation of the Center's interventions and activities which directly aim to support the disengagement, deradicalization, rehabilitation and/or reintegration of the Center's clients. Such professionals may include, but are not limited to: psychologists, social workers, CVE specialists and religious counselors.

Rehabilitation

Rehabilitation is the phase where practitioners focus on behavioral-cognitive interventions as well as preparatory activities to restore the client's personal resilience to violent extremism and prepare them for social reintegration and/or pro-social activities. This may happen after disengagement and/or deradicalization from a group and may also occur simultaneously to these processes. Notably, in the context of CVE, rehabilitation focuses on specific resilience to violent extremism, resisting the draws of their former group, and ensures the client's readiness for functional social reintegration and the desistance of criminal behavior.

Reintegration

Reintegration is the phase where practitioners help the transition of the rehabilitated client back to the "desired conditions" in mainstream society. At the same time, practitioners should also work with the specific community where that individual will eventually reside, to mitigate social stigma

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[3] Bertjan Doosje, Fathali M. Moghaddam, Arie W. Kruglanski, Arjan de Wolf, Liesbeth Mann, and Allard R. Feddes, "Terrorism, radicalization and deradicalization," Current Opinion in Psychology 11 (2016): 81, https://nvvb.nl/media/cms_page_media/694/Terrorism%2C%20radicalization%20and%20de-radicalization.pdf.

and work towards an acceptance of that individual into society. It should also be noted that in some cases, this phase may actually be considered "integration" rather than "reintegration", due to the client's previous social circumstances of not being integrated to begin with. However, whilst this is acknowledged, for the purpose of this document, the term reintegration will be used throughout.

Risk Assessment
A risk assessment is a systematic analysis to determine the level of risk and mitigation strategies. Risk can be understood as a potential threat or harm to society, others or the self. In the context of CVE, risk can also be seen in terms of potential for recidivism related to violent extremism, or for radicalizing/influencing others leading to violent extremism.

Staff
This document refers to Staff as all individuals directly employed full-time or part-time and under the supervision of the Center, or whose primary location of work is at the Center. The Guiding Principles contained in this document that apply to Staff may also apply to long-term contractors (e.g. for security).

Youth
In the context of this Guiding Principles document, youth are defined as ages 18-24 years old. This is in line with the UN definition of youth (15 – 24 years old), but de-conflicting with the definition of children listed above.

EXECUTIVE SUMMARY

Since the Islamic State of Iraq and Syria (ISIS) lost nearly all of its territory in 2017, there has been distinct concerns internationally on the handling of returning foreign terrorist fighters (FTFs) and their family members. While countries are taking different responses to the issue,[4] it is globally recognized that governments must be adequately prepared for if/when such individuals are present in their country. As noted by the United Nations Security Council: "Member States should develop tailored rehabilitation and reintegration programmes that are aligned with national priorities and sensibilities and explore community-based alternatives to detention."[5]

The potential responses by governments have also been complicated further, as countries must consider how to address the significant number of women and children that could return, especially when compared to previous conflicts. For example, Save the Children noted in May 2020 that of the 43,000 children in the Al Hol camp, there were approximately 7,000 foreign children.[6] The conditions may threaten "their mental and physical health, and risks their indoctrination with Islamic State ideology,"[7] potentially creating a new wave of individuals vulnerable to radicalization.

For those that remain in Iraq and Syria, for those that are in camps (e.g. Turkey), or for those that return to their home countries, it is clear that there is a strong need for enhanced approaches and good practices for the disengagement, deradicalization, rehabilitation and reintegration of (returning) FTFs and their family members. Additionally, nuanced approaches that take into consideration gender and age sensitivities are critical to the success of such endeavors. One potential solution to these challenges may be through a dedicated Center that provides the expertise and opportunities to manage returning FTFs and their family members in whichever country this is required. Such a Center could bring together the appropriate expertise from a variety of sectors, to include: counter-terrorism, criminal justice, psychology, sociology, social work, juvenile justice, and gender sensitivity, among others.

This document provides a blueprint for such a Center, with the intention for it to be tailored and replicated in any country that wishes to enhance their efforts and abilities to manage RFTFs and their families. Because ISIS is not the only terrorist group that involves entire families, this document has been developed to address all forms of violent extremism, and can be adapted to any local context.

Drawing on expertise collated from a literature review, a survey to experts and practitioners working with violent extremist offenders and their families, semi-structured interviews with those same experts, and a series of workshops to discuss key issues amongst these experts, this document contains a set of guiding principles to establish a Center dedicated to returning FTFs and their family

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[4] Adam Hoffman and Marta Furlan, "Challenges Posed by Returning Foreign Fighters," George Washington University (2020), https://extremism.gwu.edu/sites/g/files/zaxdzs2191/f/Challenges%20Posed%20by%20Returning%20Foreign%20Fighters.pdf

[5] United Nations Security Council, "Tenth Report of the Secretary-General on the Threat Posed by ISIL (Da'esh) to International Peace and Security and the Range of United Nations Efforts in Support of Member States in Countering the Threat," United Nations, (2020), https://www.un.org/ga/search/view_doc.asp?symbol=S/2020/95

[6] Save the Children, "Syria: Thousands of Foreign Children in Al Hol Camp Must Be Repatriated Given Coronavirus Fears," (2020), https://www.savethechildren.net/news/syria-thousands-foreign-children-al-hol-camp-must-be-repatriated-given-coronavirus-fears-0

[7] Ben Hubbard and Constant Méheut, "Western Countries Leave Children of ISIS in Syrian Camps," New York Times, May 31, 2020, https://www.nytimes.com/2020/05/31/world/middleeast/isis-children-syria-camps.html

members.

These guiding principles, while not exhaustive, provide unique guidance on specific topics that this Center should consider during the process of establishment and implementation. The guiding principles are categorized into several sections. First, the document highlights the necessary **Legal and Policy Frameworks** required at the national level, as well as the existing relevant international legal frameworks. Second, this document provides guidance on the **Governance and Oversight of the Center**, including how to conduct research on the context of the Center, the key roles and responsibilities of government entities, communications mechanisms, leadership and management, standard operating procedures, and considerations for budget and finance. Next, the **Physical Structure and Resources** are explained in further detail. Then, the **Human Resources** section details the qualifications, capacity-building needs, management and staff well-being required for the Center. After that, the **Safety and Security** section underlines considerations for safety and security management and protocols, including information management. The section on **Assessing the Client** looks at protocols for information-gathering, trust-building and intake, as well as information on risk assessments, needs and strengths assessments and client plans. The final two sections on **Center-Based Interventions: Rehabilitation and External Interventions: Reintegration** outline the necessary roles of staff, types of interventions, goals and methods for rehabilitating and reintegrating clients. In these sections, special considerations are also given for interacting with the community and preparing the community to receive RFTFs.

This Blueprint aims to support governments seeking to establish a Center for rehabilitation and reintegration of RFTFs and their family members. Such a Center may be part of the criminal justice system, social services, or can be set up in cooperation with pre-existing prisons or other rehabilitation centers. As a follow up to this document, Hedayah can offer strategic advice, guidance, and tailored capacity-building for governments, CSOs and practitioners with the aim of such a Center in mind.[8]

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[8]   For inquiries about strategic advice or tailored capacity-building, please contact info@hedayah.ae.

INTRODUCTION

This document is the key outcome of a Hedayah program, funded by the Government of the United Arab Emirates (UAE), which concluded in September 2020. This program aimed to collect and share good practices and guiding principles for governments seeking to establish and operationalize a rehabilitation and reintegration center for returning Foreign Terrorist Fighters (FTFs) and their family members (hereinafter referred to as the "Center").

As there is much existing literature which addresses returning FTFs, prison management for Violent Extremist Offenders (VEOs), the interventions needed for rehabilitation, and the means by which former VEOs may be successfully reintegrated into society, Hedayah carefully considered how to add the most value for those decision-makers contemplating the establishment of such a Center.

Therefore, the purpose of this report is to provide practical guidance to decision-makers for the creation and implementation of a Center, covering all of the key aspects, and based upon the experience of experts from many regions of the world. As such, the ideas and insights in this guide are intended to complement and expand upon the established canon of literature from experienced practitioners and experts from many reputable and distinguished organizations, both national and international.

This guide differs from previous literature in that it is designed to be a holistic reference-point for those officials and other stakeholders responsible for the establishment of such a Center. By formulating expert ideas and insights into a series of guiding principles and corresponding considerations, Hedayah hopes this document will assist the thinking and planning, and inform decision-making on the many issues that must be dealt with effectively in order to create a viable Center.

The application of this guidance, suitably contextualized, should result in a more coherent, and therefore effective, plan for the implementation of a rehabilitation center. Decision-makers can transform this guidance into an outline blueprint for the planning and implementation of their own center by providing answers to the questions raised, selecting a path when options are described, and through tailoring the principles and considerations contained herein for their national context.

USING THIS GUIDE

The document is conveniently divided into sections by topic, and within these are references and links to many related existing documents, reports and manuals that will be of much use to decision-makers. While this document is not intended to be a compendium of all relevant literature on these topics, it does make reference to relevant literature in the case that an existing document has already comprehensively covered a subject in question. Under each section, guiding principles related to that topic are set out, and many of these principles have associated considerations laid out beneath them.

The principles and considerations are numbered for ease of reference. Where possible, existing documents that also shed light on the point(s) contained in a principle are referenced in the text immediately beneath it, and footnotes fully identify the source materials and, if available, give links to the documents.

Decision-makers may find it helpful to establish a working group of all relevant parties to consider the principles contained here. It is advised that in addition to these guiding principles, countries conduct research on their own context: what exists, what gaps there may be, what is currently allowed, and what is prohibited. In this way, the guiding principles contained here are general, and countries should make decisions based on their own context, culture and challenges related to the problem. For those whose countries have an existing center, this document may still add useful knowledge and ideas that can assist them in the effective running of the Center, in the conduct of rehabilitation and reintegration activities, and in improving the Center's community relations.

METHODOLOGY

Hedayah collected and collated the good practices and guiding principles contained within this document from four main sources. First, a literature review was conducted to determine what information already existed, with the intention of identifying gaps. As a result, the program was refined, with the objective of providing practical guidance for decision-makers faced with setting up a Center.

As a second step, a group of 18 subject-matter experts from various professional and geographical backgrounds were consulted through a comprehensive survey of 147 questions, which included both qualitative and quantitative responses. The survey questions aided in developing the guiding principles as well as clarifying specific questions for the third stage of the program: semi-structured interviews.

During the third stage, 17 experts were interviewed, with three sets of questions developed on the subjects of: standard operating procedures (SOPs), staff capacity requirements, and restorative approaches. Each set of questions were matched to the professional background of the interviewee, whilst also providing the experts with the opportunity to provide insights related to the other topics.

The results of the literature review, surveys and interviews then guided the creation of three expert workshops, each spread over four days, conducted online by Hedayah, in July 2020. Each workshop covered a specific theme, namely:

Workshop 1: Policies, SOPs, and Governance of a Center
Workshop 2: Staff Capacity Requirements, Profiles, and Training
Workshop 3: Interventions, Restorative Programs, Initiatives and Tools for Rehabilitation and Reintegration

16 experts were split across the three workshops, each taking part throughout the entirety of one workshop. In addition, the last day of each workshop had a variety of observers from Hedayah partners and related organizations, including: the European Commission's Directorate-General for International Cooperation and Development (DEVCO), European External Action Service (EEAS), Federal Ministry of Interior (Germany) Global Center on Cooperative Security (GCCS), Global Community Engagement and Resilience Fund (GCERF), International Institute for Justice and the Rule of Law (IIJ), Radicalization Awareness Network (RAN), Royal United Service Institute (RUSI), United Nations Office of Counter Terrorism (UNOCT), United Nations Office on Drugs and Crime (UNODC), and the United States Department of State.

Drawing upon all of these sources, the Hedayah team then collated and analyzed the materials, seeking insights that could provide decision-makers with practical assistance on how to set up and run a center that meets their needs. All principles were then assessed against the literature, and adjusted if necessary to complement existing principles or guidance. Where the material allowed or the principle benefited from expansion, to either supplement the thought expressed in the principle, or to complement it with associated ideas, these points were captured as considerations for the reader.

1

LEGAL AND POLICY FRAMEWORKS

> Relevant International Frameworks
> National Legislation and Policies

This chapter outlines the international legal frameworks and compliance guidelines for the rehabilitation and reintegration Center. A comprehensive list of the relevant international legal frameworks can be found in Annex I. Subsequently, this section then provides guidance and recommendations for the creation of a legislative framework for the Center at the national level.

RELEVANT INTERNATIONAL FRAMEWORKS

GUIDING PRINCIPLE 1

Ensure national legislation frameworks are in compliance with the body of international criminal law against terrorism.

National governments should actively review the compliance of their existing legislation with the United Nations' (UN) International Legal Instruments, consisting of 19 conventions and protocols, as well as the relevant UN Security Council Resolutions (UNSCR), to include UNSCR 1373 (2001), 2178 (2014), and 2396 (2017), many of which have been adopted under Chapter VII of the UN Charter (a legally binding obligation for UN Member States). Ensuring such compliance will enable national legislation to establish sufficient and clearly defined criminal offences in order to prosecute and penalize Foreign Terrorist Fighters (FTFs), in a manner which reflects the seriousness of the acts.[9]

CONSIDERATION 1.1

UNSCR 2178 recognizes the need for a comprehensive approach to rehabilitate and reintegrate FTFs. Furthermore, it calls upon the UN Member States to develop and implement prosecution, rehabilitation and reintegration strategies for returning FTFs.[10] The United Nations Security Council (UNSC) adopted Resolution 2178 under Chapter VII of the UN Charter on 24 September 2014; hence, all Member States are legally obligated to develop and implement such strategies. The subsequent guiding principles within this document will support a country's fulfillment of this obligation.

CONSIDERATION 1.2

Also adopted under Chapter VII of the UN Charter was UNSCR 2396, which obliges the UN Member States to develop comprehensive and tailored strategies, and that these strategies and protocols should additionally address the spouses and children of returning FTFs. Furthermore, UNSCR 2396 obliges its Member States to "do so in consultation, as appropriate, with local communities, mental health and education practitioners and other relevant civil society organizations and actors."[11] Similarly, this document will also provide guidance for consideration on how to tailor and adapt the national strategies, as well as potentially useful approaches for engaging with the local communities and relevant stakeholders.

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9   United Nations Security Council, Counter-terrorism Committee, "Madrid Guiding Principles: A Practical Tool for Member States to Stem the Flow of Foreign Terrorist Fighters," United Nations (2016), https://www.un.org/sc/ctc/wp-content/uploads/2016/10/Madrid-Guiding-Principles_EN.pdf.
10   United Nations Security Council, "Resolution 2178," United Nations (2014), https://undocs.org/S/RES/2178(2014).
11   United Nations Security Council, "Resolution 2396," United Nations (2017), https://undocs.org/S/RES/2396(2017).

CONSIDERATION 1.3

Safeguards and legal protections should be put in place to ensure that appropriate actions are taken for cases involving children, thereby ensuring the relevant authorities wholly respect and promote the rights of the child. Further information on the necessary safeguards and protections can be found within the 2018 "Addendum to the 2015 Madrid Guiding Principles" by the UNSCR Counter-Terrorism Committee, in particular, Guiding Principle 7.[12]

CONSIDERATION 1.4

Countries must also consider their obligations related to legal acts and laws under their membership of an intergovernmental union or similar institution. For example, the "Organization of African Unity Convention on the Prevention and Combating of Terrorism"[13] is for Member States of the African Union which have ratified the convention and the "Directive (EU) 2017/541 of the European Parliament and the Council of the European Union" is for EU Member States.[14]

GUIDING PRINCIPLE 2

Ensure all programs aimed at the rehabilitation and reintegration of FTFs are consistent with international human rights law, and meet at least the standard minimum rules for the treatment of prisoners, and allow for targeted responses for special categories of individuals.

Any program or center established for the rehabilitation and reintegration of FTFs and their family members, whether within the criminal justice system or not, should fully align with international human rights law, as well as the "UN Standard Minimum Rules for the Treatment of Prisoners" (also known as the "Nelson Mandela Rules").[15] The Nelson Mandela Rules comprehensively outlines the requirements for the management of people deprived of their liberties, including elements which address the legal and policy frameworks and the specific importance of rehabilitation and reintegration.

CONSIDERATION 2.1

In order to align with international human rights law, there is a need to establish safeguards which, inter alia, protect freedom of opinion and expression, the right to be free from arbitrary or unlawful interference with privacy, the freedom of religion or belief, and the freedom from torture and inhumane or degrading treatment.

CONSIDERATION 2.2

There are specific elements within the international human rights legal framework which also directly address the circumstances of rehabilitation, for example, the "International Covenant on Civil and Political Rights (ICCPR) (UN General Assembly Resolution 2200A (XXI))," Article 10.3, which states that "the penitentiary system shall comprise treatment of prisoners the essential aim of which shall be their reformation and social rehabilitation."[16]

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12   United Nations Security Council, "Annex to the letter dated 28 December 2018 from the Chair of the Security Council Committee established pursuant to resolution 1373 (2001) concerning counter-terrorism addressed to the President of the Security Council: 2018 Addendum to the 2015 Madrid Guiding Principles," United Nations (2018), https://www.un.org/sc/ctc/wp-content/uploads/2018/12/2018-Addendum-to-the-2015-Madrid-Guiding-Principles_as_adopted.pdf. Guiding Principle 7 outlines the specific safeguards that should be put into place in order to meet the conditions of international law that protect the rights of the child.

13   African Union, "OAU Convention on the Prevention and Combating of Terrorism," (2017), https://au.int/sites/default/files/treaties/37289-treaty-0020_-_oau_convention_on_the_prevention_and_combating_of_terrorism_e.pdf.

14   European Parliament and European Council, "Directive (EU) 2017/541 of the European Parliament and of the Council on Combating Terrorism and Replacing Council Framework Decision 2002/475/JHA and Amending Council Decision 2005/671/JHA," European Union (2017), https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32017L0541.

15   United Nations, "Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules)," adopted by United Nations General Assembly resolution 70/175 (17 December 2015), https://www.unodc.org/documents/justice-and-prison-reform/Nelson_Mandela_Rules-E-ebook.pdf.

16   Office of the United Nations High Commissioner for Human Rights (OHCHR), "International Covenant on Civil and Political Rights," United Nations (1966), https://www.ohchr.org/en/professionalinterest/pages/ccpr.aspx.

CONSIDERATION 2.3

Any rehabilitation program which involves female offenders must take into consideration the gender-specific needs of women and be in full alignment with the "UN Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders" (The Bangkok Rules).[17] The Bangkok Rules include requirements such as: making arrangements for caretaking responsibilities for children both within and outside of the Center, accommodating the personal hygiene and healthcare needs of women, gender-specific procedures (e.g. searches by other females), among many others.

CONSIDERATION 2.4

Specific international requirements should be considered when engaging with women and children. The UN's "Key Principles for The Protection, Repatriation, Prosecution, Rehabilitation and Reintegration of Women and Children with Links to United Nations Listed Terrorist Groups"[18] provides a set of principles which addresses the humanitarian and human rights obligations, and specific principles addressing the rights of children and women.

CONSIDERATION 2.5

For the case of juveniles, the "UN Minimum Rules for the Administration of Juvenile Justice" (the Beijing Rules),[19] the "UN Rules for the Protection of Juveniles Deprived of their Liberty" (the Havana Rules),[20] the "UN Guidelines for the Prevention of Juvenile Delinquency" (the Riyadh Guidelines)[21] and the "UN Guidelines for Action on Children in the Criminal Justice System,"[22] provide clear guidance on the necessary policies and procedures for this category of individuals, including specific considerations for the difference in services and facilities required to match their specific needs, thereby supporting their effective rehabilitation and reintegration.[23]

CONSIDERATION 2.6

The "UN Standard Minimum Rules for Non-Custodial Measures" (The Tokyo Rules)[24] also provides an international framework for developing and implementing alternative non-custodial sentencing options, which supports alternatives to custody when appropriate and the overall reintegration processes for offenders.[25]

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[17] United Nations, "Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (the Bangkok Rules)," adopted by United Nations General Assembly resolution 65/229 (16 March 2011), https://www.unodc.org/documents/justice-and-prison-reform/Bangkok_Rules_ENG_22032015.pdf.

[18] United Nations, "Key Principles for the Protection, Repatriation, Prosecution, Rehabilitation and Reintegration of Women and Children with Links to United Nations Listed Terrorist Groups," United Nations (2019), https://www.un.org/counterterrorism/sites/www.un.org.counterterrorism/files/key_principles-april_2019.pdf.

[19] United Nations General Assembly, "Resolution 4033," United Nations (1985).

[20] United Nations General Assembly, "Resolution 45/13," United Nations (1990).

[21] United Nations General Assembly, "Resolution 45/12," United Nations (1990).

[22] United Nations Economic and Social Council, "Resolution 1997/30," United Nations (1997).

[23] Global Counterterrorism Forum (GCTF), "Addendum to the Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," GCTF (2016). https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/Addendum%20to%20the%20Rome%20Memorandum%20on%20Legal%20Frameworks%20ENG%20(1).pdf?ver=2020-01-13-154324-110.

[24] United Nations, "Standard Minimum Rules for Non-Custodial Measures (The Tokyo Rules)," United Nations (1991), https://digitallibrary.un.org/record/105347?l-n=en.

[25] GCTF, "Addendum to the Rome Memorandum."

GUIDING PRINCIPLE 3

Utilize the available tools to enhance international cooperation, mutual legal assistance, and extradition related to crimes committed by FTFs.

Cases regarding FTFs are international by nature. Therefore, in order to ensure the effective prosecution, rehabilitation and reintegration of returning FTFs, there will often be a need to engage with national counterparts in other countries and jurisdictions. It is recommended that the national authorities make use of the available multilateral conventions and bilateral treaties, as well as other international mechanisms, which can be powerful tools for international cooperation.

In many countries, the prosecutions of FTFs have been proven unsuccessful, often due to a lack of admissible evidence. Through utilizing existing international tools, not only would the extradition and prosecution of an individual be supported, but critical information for the individual's rehabilitation and reintegration may also be gathered, such as details related to the individual's experiences whilst in the foreign territory.

CONSIDERATION 3.1

It should be noted that some treaties may oblige the parties to cooperate under international law, dependent upon the scope of the treaty and assistance requested.[26]

CONSIDERATION 3.2

Multilateral conventions are potentially powerful for international cooperation; however, the specific circumstances should be considered. The UN Anti-Terrorism Conventions, for example, may only address particular offences.

CONSIDERATION 3.3

If it is considered necessary to draft a new treaty document, this process can be supported internationally. For example, UNODC's "Model Treaty on Mutual Assistance in Criminal Matters"[27] and subsequent technical assistance may be leveraged.

CONSIDERATION 3.4

In light of the substantial increase in digital data, national authorities may benefit from a review of their Mutual Legal Assistance (MLA) laws and mechanisms.[28]

CONSIDERATION 3.5

Designating a central authority for MLA, which receives appropriate training, resources and legal support may enhance and expedite international cooperation.[29]

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[26] United Nations Office on Drugs and Crime (UNODC), "Foreign Terrorist Fighters Manual for Judicial Training Institutes South-Eastern Europe," United Nations (2017), https://www.unodc.org/documents/terrorism/Publications/FTF%20manual/000_Final_Manual_English_Printed_Version_-_no_foreword.pdf.

[27] United Nations General Assembly, "Resolution 45/117: Model Treaty on Mutual Assistance in Criminal Matters," United Nations (1990), https://www.unodc.org/pdf/model_treaty_mutual_assistance_criminal_matters.pdf.

[28] United Nations Security Council, Counter-Terrorism Committee, "Madrid Guiding Principles."

[29] United Nations Security Council, Counter-Terrorism Committee, "Madrid Guiding Principles."

GUIDING PRINCIPLE 4

National authorities should familiarize themselves with all available guiding principles on the rehabilitation and reintegration of FTFs and contextualize the principles to their own country.

Whilst this document includes a comprehensive set of guiding principles, it is also complemented by the existing international body of literature. Other international entities have developed their own guiding principles related to the rehabilitation and reintegration of FTFs and their family members, including, but not limited to: the UNSC's "Madrid Guiding Principles" and the Global Counter Terrorism Forum's (GCTF) "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders,"[30] its Addendum,[31] the "Hague Marrakech Memorandum on Good Practices for a More Effective Response to the FTF Phenomenon,"[32] and its Addendum.[33]

CONSIDERATION 4.1

Such guiding principles may provide useful guidance for the establishment of a rehabilitation and reintegration center; however, they are often developed through an international perspective. Therefore, it will be critical for the national authorities to adapt and tailor these recommendations to their given context, in order to enable effective implementation.

CONSIDERATION 4.2

Even if all relevant documents and principles are taken into consideration, there will likely remain a gap related to certain aspects of the rehabilitation and reintegration processes. Therefore, the full body of literature should not be considered to be a complete framework, and governments should conduct a comprehensive analysis of what else would need to be considered within their context.

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[30] Global Counterterrorism Forum (GCTF), "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," GCTF (2016), https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/GCTF-Rome-Memorandum-ENG.pdf?ver=2016-09-01-121309-677.

[31] GCTF, "Addendum to the Rome Memorandum."

[32] Global Counterterrorism Forum (GCTF), "The Hague-Marrakech Memorandum on Good Practices for a More Effective Response to the FTF Phenomenon," GCTF (2019), https://www.thegctf.org/documents/10162/140201/14Sept19_The+Hague-Marrakech+FTF+Memorandum.pdf.

[33] Global Counterterrorism Forum (GCTF), "Addendum to The Hague-Marrakech Memorandum on Good Practices for a More Effective Response to the FTF Phenomenon, with a focus on Returning FTFs," GCTF (2020), https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/Addendum%20to%20The%20Hague-Marrakech%20Memorandum%20EN.pdf?ver=2020-01-13-163556-773.

NATIONAL LEGISLATION AND POLICIES

A Center may be established within the criminal justice system or exist outside the criminal justice system and only handle those clients who never entered the system and/or those who voluntarily attend having already served their sentence. The principles in this document may apply, perhaps with adaptations, to both types of center.

> **GUIDING PRINCIPLE 5**
>
> Build on existing mechanisms and frameworks that govern correctional facilities and social welfare institutions, where practicable

The establishment of the rehabilitation and reintegration Center for returning FTFs and their families should build upon existing legal frameworks (policy layering). Rather than establishing the center outside of the existing system, the language used within the national law should refer to a general rehabilitation and reintegration response implemented at the relevant institution responsible for correctional activities (for those entering the criminal justice system), as well as the institution under the responsibility of the government agency responsible for the social welfare of its citizens.[34]

It will be necessary for any government to have a clear understanding of the existing laws and policies, including awareness of any constraints or obstacles. In fact, many of the elements are often already covered under existing national laws. For example, the definitions of related terms or the management of detainees may already be legislated. The principles of equality before the law must be respected under all circumstances, without any discrimination and without any distinction. Therefore, the available criminal procedural law, prison act and other related laws will need to be applied and considered. If a government already has a robust criminal justice legal framework for counter-terrorism, there is often only a need to develop some new aspects which directly relate to the establishment of a Center.[35] See the section "Defining the Context of the Center" under the chapter, "Governance and Oversight," for further guidance on the available methods for identifying the needs prior to the Center's establishment.

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[34]   Aisyah Q. Yuliani, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
[35]   Yuliani, "Contribution to Hedayah's Program."

CONSIDERATION 5.1

The government may have a National Action Plan (NAP) or strategy on P/CVE. Such action plans and strategies often contain a component on the subject of rehabilitation and/or reintegration. The establishment of a Center should build upon and be aligned with any existing NAP or strategy.

CONSIDERATION 5.2

An additional or unique governmental regulation may be required to ensure the inclusion of returning FTFs and their families as recipients of services provided by social welfare institutions, as well as the different and elaborated qualification requirements for staff working with this population, the goals and objectives of the Center, indicators of success, and the types of program provided. These details could be established with institutional-level guidelines.

CONSIDERATION 5.3

Utilizing the existing legislative framework may be particularly important when attempting to define complex terms. For example, many countries have faced difficulties in defining the term terrorism, which often has political connotations. In this regard, it may be more appropriate for policies to refer to the offences and/or definitions provided under existing laws, rather than explicitly defining the terms necessary for the establishment of a Center.[36]

CONSIDERATION 5.4

Relevant ministries and agencies may only need to issue new regulations that support and complement existing regulations related to policies derived from the national counter terrorism law. For example, the Ministry of Social Affairs may need to develop a regulation which addresses case management, but only for clients during reintegration, as there could be an existing regulation on case management within a detention setting under the Ministry of Justice.

CONSIDERATION 5.5

Concerning the establishment of a specific Center, it may also be recommended to use existing regulations for rehabilitation and reintegration that, for example, have been established for prisons and/or socially disadvantaged populations. However, if a new agency has been established under the national law or the responsibility has been given to an agency that has never held a position related to this field, then there will be a need to establish a new set of regulations to support the national law.

CONSIDERATION 5.6

A government could build upon an existing system or start anew. Building upon an existing system may be a practical approach when resources for the establishment are low. However, dependent upon the circumstances and client profiles, the government should consider whether the individuals will require housing in a separate Center. For example, clients may need separate housing due to a considerable inconsistency between the proposed clients' profiles and the existing center's mandate, objectives or current clients.

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36   Yuliani, "Contribution to Hedayah's Program."

CONSIDERATION 5.7

In some contexts, rehabilitating and reintegrating clients through the prison system can be a complicated process. Therefore, having a separate Center that is governed by specific laws and regulations can give greater latitude and continuity for the practitioners, including the continuation of caseworkers' engagement with the client throughout the rehabilitation process and into community reintegration. This was found particularly to be the case in Pakistan for youth and children, where individual caseworkers of the Sabaoon Center are enabled by the policy framework to continue their engagement and support to clients at all stages of the rehabilitation and reintegration process, whether Center-based or community-based.[37]

CONSIDERATION 5.8

If clients are to go through a social welfare system, rather than the criminal justice system, it will be important for the government to establish clarity on how the individuals would be bound to the process, noting that it may be a voluntary process and the client could have the right to refuse assistance.

CONSIDERATION 5.9

The national approaches to rehabilitation and reintegration will likely be embedded in "complex legal and bureaucratic frameworks and are subjected by infrastructural constraints."[38] Within an integrated approach to rehabilitation and reintegration there will usually be various program components under multiple legislations and different government sectors, which may create a possible disconnect between the goals and overarching national strategy. A thorough review of existing laws and regulations should be conducted to identify any policies that may constrain the creation and running of the Center, or implementation of interventions. Such research should also address the capacity of State institutions and relevant stakeholders to take on additional mandates and roles.

CONSIDERATION 5.10

No matter how clearly drafted a legal provision may be in any legal system, there will usually be an element of judicial interpretation. Therefore, there will be a need for the clarification of ambiguous points and for adaptation to changing circumstances. While certainty is desirable, it may also imply rigidity, the relevant law(s) must always adapt to changing circumstances.[39]

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37 Feriha Peracha, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

38 Tinka M. Veldhuis, "Designing Rehabilitation and Reintegration Programmes for Violent Extremist Offenders: A Realist Approach," The International Centre for Counter-Terrorism (ICCT) — The Hague Research Paper (2012): 23.

39 Susana Sanz-Caballero, "The Principle of Nulla Poena Sine Lege Revisited: The Retrospective Application of Criminal Law in the Eyes of the European Court of Human Rights," European Journal of International Law 28, no.3 (2017): 787–817, https://doi.org/10.1093/ejil/chx049.

CASE STUDY: HANDAYANI CENTER, INDONESIA[40]

Since 1959, the Service and Rehabilitation Center for Children in Need of Special Protection (Handayani Center) in Jakarta, Indonesia, has addressed children in need of social rehabilitation support for issues related to violence, drug use, and trafficking, among other reasons. In 2016, the center received the mandate to also support children and families affected by violent extremism.

Based on referrals by the Indonesian Police for counter-terrorism (Densus 88), Handayani now provides rehabilitation and reintegration support to children and families who have been part of a terrorist network, including those who traveled to the conflict zone in Syria and Iraq.

This approach has enabled the Government of Indonesia to build upon the existing social welfare system already in place, rather than establishing a whole new center.

Now, the Government of Indonesia is also preparing the remaining seven such centers throughout the country, in order to provide social rehabilitation to children and families affected by violent extremist, at locations closer the clients' communities.

GUIDING PRINCIPLE 6

Ensure a layered approach to the legal and policy framework(s) that allows for clear segregation of policy and implementation, and ensures flexibility in the responses of the Center.

Rigid policies can be counterproductive for a comprehensive approach to the rehabilitation of returning FTFs, especially for specific categories of individuals, such as youth and children. In this regard, the national authorities should develop a policy framework which allows for a case-by-case response, based on assessments, as well as alternatives to prosecution in appropriate cases.[41]

The implementation of rehabilitation and reintegration should be seen as a dynamic system, which depends on the local context in which they are implemented and evolves over time.[42] For a Center to remain flexible to the potential changes in circumstances and available approaches, the full spectrum of the national policy hierarchy should be utilized. Guidelines could be changed at the level of the Center, whilst regulations might be changed at the ministerial level, and relevant laws would be at a higher level. Hence, it is essential for the national authorities to understand where each element to be regulated should be framed.[43]

40 Joseph Gyte and Aditya Gana, "Hedayah's Supporting Families in Countering Violent Extremism in Indonesia: Capacity Building Program, Narrative and Evaluation Report," Hedayah (2020).
41 United Nations Security Council, Counter-Terrorism Committee, "Madrid Guiding Principles."
42 Sanjeev Sridharan and April Nakaima, "Ten steps to making evaluation matter," Evaluation and Program Planning, 34 no. 2 (2011): 135–146.
43 Yuliani, "Contribution to Hedayah's Program."

The aim of the policy framework should be to provide a comprehensive set of laws, regulations and guidelines for the rehabilitation of returning FTFs, whilst simultaneously enabling the implementation of an adaptable program which can be easily revised and addresses the specific circumstances of each individual.[44] For example, when considering the specific needs, strengths and risk assessment tools to be used, it may be easier if they are regulated by the Center's guidelines, as this field is dynamic and would allow for easier change.
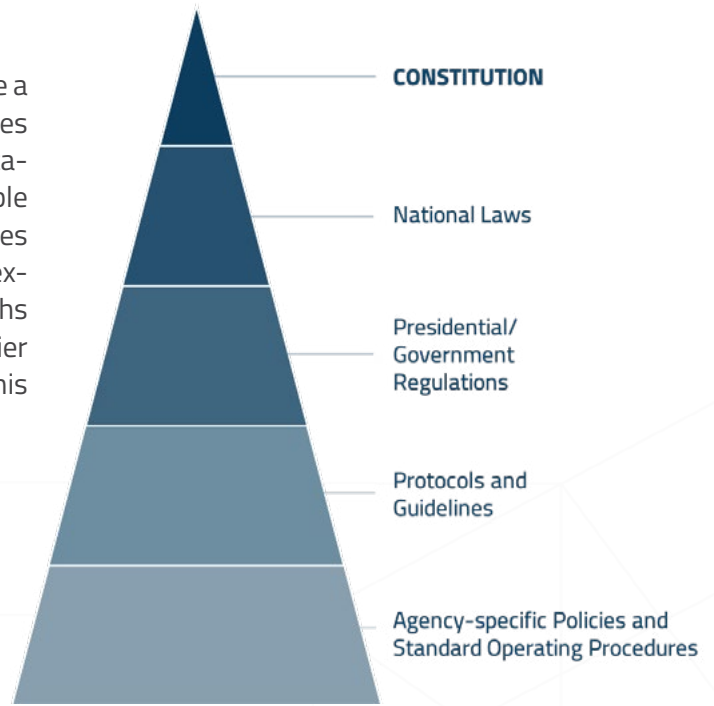
FIGURE 1   Hierarchy of Policy Frameworks

CONSIDERATION 6.1	CONSIDERATION 6.2
The national law should clearly establish the aims and objectives for rehabilitation and reintegration. In this regard, the law should address the aims not only for when an individual is inside the Center, but also for post-release, including reintegration into the community.	It is crucial for the national authorities to select which definitions to include at the national law level. For example, if disengagement and deradicalization are included in national law, there is a potential risk of limiting the rehabilitation process exclusively to these terms. In this regard, if there is a requirement to define relevant terms at the national law level, it may be considered appropriate only to define rehabilitation and reintegration, so that the Center's approaches may remain flexible. Furthermore, these terms should be defined separately, but their relationship and interconnectedness should be addressed. The national level should also refer to the processes and procedures of these concepts in general terms, whilst the specifics should be addressed at the lower levels.

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[44]   Abiye M. Iruayenama, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

CONSIDERATION 6.3

Despite being aware of improved tools, some countries are bound to using specific tools for the rehabilitation processes due to these being prescribed in the law, e.g. a particular risk assessment tool. In response to this challenge, a government may wish to consider whether the relevant law would instead contain a clear article only stating that the rehabilitation methods and tools should be implemented with the purpose to enable the offender/client to lead a life in a socially responsible manner without committing criminal offences in the future (objective of treatment). In this manner, it is not necessarily required to outline which tools and techniques are to be used, rather they must only be implemented with the specified purpose in mind. This would provide flexibility for the tools which can be used, including those that were originally designed for other fields, but ensures that any tools and methods used are legally required to only be implemented for the purposes of safety, security, CVE, rehabilitation and reintegration.[45]

CONSIDERATION 6.4

The national level should also outline the responsible agency as well as the appropriate mandates. For example, the national law may provide the mandate to a social affairs agency, a ministry of justice, the prisons agency, or multiple agencies. At this stage, it should be considered critically important to be clear on the responsibilities of any ministry or agency referenced within the legislation. If the mandate and responsibility are provided to a particular entity within the policy framework, it should also provide synergy with regulations under other relevant ministries and agencies. Whilst providing clear mandates to specific ministries or bodies, it will be important to not inadvertently exclude cooperation amongst such bodies or otherwise constrain useful collaboration. In this context, it has to be considered that agencies in charge are often subordinated authorities, and as such will need the adequate financial means to achieve the desired goals.

CONSIDERATION 6.5

The regulations level of the hierarchy should be the first level within the policy hierarchy that includes in-depth reference to the steps involved within the rehabilitation process. For example, at this level, the assessments and activities may be discussed; however, the specific types of activities and responses should be covered by a lower level document that may be easier to amend.

CONSIDERATION 6.6

The government should also consider the need for regulations that separately address clients within the criminal justice system as well as those not going through the criminal justice system. It may prove essential to have separate documents which can be edited more efficiently without requiring a full revision of a regulation which address separate topics and approaches.

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45   Anonymous, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

CONSIDERATION 6.7

CONSIDERATION 6.8

The lower levels, to include Policies, Guidelines and Standard Operating Procedures (SOPs), may be considered the most critical levels in the policy framework. These levels should go into more detail on the specific procedures and activities, as well as the systems involved (e.g. social welfare and criminal justice). Essentially, these are the levels that explain the "how" of rehabilitation and reintegration. At these levels, the government should start to address all mechanisms involved for an individual's participation in the rehabilitation and reintegration activities, as well as monitoring indicators of success. See the section on "Development of Standard Operating Procedures" under the chapter on "Governance and Oversight" for more information.

The security of a Center should be addressed at the SOP level. Social welfare facilities and prisons are often particularly concerned about security, and the SOPs should outline whether the center would train staff on safety and security or have secondees from security agencies. The mandate(s) pertaining to the Center's security may be also enshrined at a higher level of the framework (e.g. National Law or Regulations). See the chapter on "Safety and Security" for more information.

> ## GUIDING PRINCIPLE 7
>
> Prioritize staff safety, security and well-being in all policies.

Principle elements which should be addressed within the relevant policies include: allowing the individual to live a law-abiding life, the provision of rehabilitation, and the protection for society. However, all policies, including SOPs, must also focus on the safety and security of staff. Without adequate safeguards to protect the security and mental well-being of all staff involved, the center would not be able to rehabilitate any clients in the long-term effectively. See the relevant chapter on "Safety and Security," as well as the section on "Staff Well-Being" under chapter on "Human Resources" for more information.

> ## GUIDING PRINCIPLE 8
>
> The Center could serve as an alternative to imprisonment, where appropriate.

Whilst recognizing that the Center could be established outside of the criminal justice system, it is important to note that it could also be established within the criminal justice system as an alternative to imprisonment, where appropriate. Especially for the juvenile criminal justice system, governments should strongly consider alternative justice through a rehabilitation and reintegration program instead of imprisonment. It may be important that both law enforcers and local communities apply restorative justice principles, shifting from a punitive approach to restorative mechanisms. The national policy framework should regulate the prosecutors to apply restorative justice through a diversion system at all stage of legal processes. In this regard, it will also be important to develop guidelines on the implementation of diversion approaches and case handling, especially for children.

CONSIDERATION 8.1

The "UNODC Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups: The Role of the Justice System" states that "specific incentives should be in place to award primary consideration to measures providing for the treatment of children without resorting to judicial proceeding or deprivation of liberty."[46]

CONSIDERATION 8.2

The derivative regulations should enable for the decision on restorative or alternative justice to take place in any step of the legal processes.

CONSIDERATION 8.3

In the application of restorative justice, the law enforcement and prosecution services play important roles to promote the use of diversion measures. However, the parole officers, probation officers and/or social workers responsible for case handling and case management also play key and strategic roles by ensuring comprehensive information is included in the social inquiry report, thereby contributing towards the development of proposed measures of diversion or alternative justice at the pre-adjudication, adjudication and post-adjudication phases. For example, customized rehabilitation and reintegration programs could be developed based on the social inquiry report conducted by parole officers at the post-adjudication phase. The correction research may reveal the background of the criminal act committed, identify the level of risks and the needs of the inmates or suspects, determine the programs for detainment services and rehabilitation at the correction or rehabilitation centers, evaluation of the program implementation, and determine the success of the interventions.[47]

CASE STUDY: WAY-FORWARD ON REHABILITATION, REINSERTION, AND REINTEGRATION (W-RRR) PROGRAM, SRI LANKA

The W-RRR program under Sri Lanka's Bureau of the Commissioner General of Rehabilitation was established in 2009, following the military defeat of the internationally proscribed terrorist group: the Liberation Tigers of Tamil Eelam (LTTE). This program is considered one of the world's most developed rehabilitation programs for radicalized combatants and has reportedly demonstrated the effectiveness of rehabilitation and reintegration centers as alternatives to imprisonment.[48]

This program consisted of 24 Protective Accommodation and Rehabilitation Centres (PARCs) in different regions of Sri Lanka. By January 2013, a total of 11,481 former LTTE members had been reintegrated through the program, including 594 children who had been recruited as child soldiers. Adults underwent a 2-year stipulated program, while children underwent a 1-year program.

While the centers were managed by Sri Lankan Army personnel, the approximately 254 staff who directly engaged with the clients were professional educators and counselors. It is reported that

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46 United Nations Office on Drugs and Crime (UNODC), "Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups: The Role of the Justice System," United Nations (2017), https://www.unodc.org/documents/justice-and-prison-reform/Child-Victims/Handbook_on_Children_Recruited_and_Exploited_by_Terrorist_and_Violent_Extremist_Groups_the_Role_of_the_Justice_System.E.pdf.

47 Mira Kusumarini, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

48 Malkanthi Hettiarachchi, "Sri Lanka's Rehabilitation Program: A New Frontier in Counter Terrorism and Counter Insurgency," Prism, 4, no. 2 (2012): 105-121.

one of the keys to the success of the W-RRR program was the holistic approach to the issue of rehabilitation and reintegration of former radicalized combatants through different components tailored to the individual's needs and interests. These components include educational rehabilitation for beneficiaries under 18 years of age, vocational rehabilitation, social, cultural, and family rehabilitation as well as spiritual and religious rehabilitation.[49]

GUIDING PRINCIPLE 9

National legislation should mandate the multi-agency approach, including communication and information-sharing, in line with the data protection regulations.

The rehabilitation and reintegration of returning FTFs and their family members will likely involve a vast array of various agencies and experts. Policies and procedures governing the Center should institutionalize and operationalize the collaborative approach which will lead to effective facilitation of the interventions and a positive working culture.[50]

In this regard, there is a need for clear legal guidance on inter-agency communication and information sharing, in line with the national data protection law and international human rights law. The legal frameworks should encourage coordination and collaboration, and contain clear objectives for the programs and interventions, as well as the mandates and responsibilities of each agency involved. [51]

Sharing information can help to prevent duplication of efforts, reduce resource burden and provide clarity on the operations of the Center, the progress of the clients and each agency involved. However, this often needs to be driven by the central government and enshrined within the national legislative framework.

CONSIDERATION 9.1	CONSIDERATION 9.2
It may be advisable to leverage existing multi-agency bodies or mechanisms set up through existing related policies. For example, the national strategy or NAP for P/CVE may already have a coordination body that could be leveraged for this type of Center.	When determining which agency is responsible for overseeing the coordination of the inter-agency approach, it will be important to understand how this will affect the willingness and trust to share information between the various agencies. The type of information shared and the approach taken by each agency will likely be significantly impacted by who is responsible for the coordination.

[49] Iromi Dharmawardhane, "Sri Lanka's Post-Conflict Strategy: Restorative Justice for Rebels and Rebuilding of Conflict-affected Communities," Perspectives on Terrorism, 7, no. 6 (2013): 27–57.

[50] Håkan Järvå, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[51] GCTF, "Addendum to the Rome Memorandum."

CONSIDERATION 9.3

The level of the coordinating agency should also be considered (e.g. whether it is a ministerial agency coordinating the information sharing at the Directorate General level, a coordinating ministry, or an office at the Executive level). The original purpose and mandate for the agency will also be an important consideration, for example whether it is an intelligence agency that will take responsibility.

CONSIDERATION 9.4

If the coordination of information sharing is mandated to existing agencies, then the relevant policies can be addressed within the lower levels of the policy hierarchy. However, if the coordination relates to a new agency, it may be necessary to include this in the national law.

CONSIDERATION 9.5

In relation to rehabilitation and reintegration, it is not necessarily only one agency giving information to another. Instead, the process is likely to be collaborative and discussion-based. Therefore, a communication approach should be embedded within the inter-agency mechanism that encourages two-way information-sharing and collaboration.[52] The appropriate protocols and procedures should be established to share information, and the framework should encourage the information-sharing to be reciprocal.[53]

CONSIDERATION 9.6

It will be important for the Center to be connected with the security services. The Center does not necessarily need to be a part of the security environment, but there will likely need to be policies that ensure the Center is updated by the security environment and continuously nourished with relevant information. The reality of a client's situation can often be very different from what may be observed within the Center. The Center itself may be seen as a valuable source of information and intelligence, and the Center should coordinate with other agencies about the information and intelligence collected within its walls.[54]

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[52] Peter Knoope, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[53] The International Institute for Justice and the Rule of Law (IIJ), "Prison Management Recommendations to Counter and Address Prison Radicalization," IIJ (2020), https://theiij.org/wp-content/uploads/Prison-Recommendations-FINAL-1.pdf.

[54] Yuliani, "Contribution to Hedayah's Program."

| CONSIDERATION 9.7 | CONSIDERATION 9.8 |

Within the criminal justice system, intelligence is a critical element for prison management. Prison intelligence can support a number of activities through an individual's incarceration, such as their intake and assessments, restorative programs, and maintaining their security. Furthermore, information-sharing can also assist the decision-making process related to the operation of the Center, including the provision of resources. It will be important for the policy framework for the Center to reflect these elements and objectives for information-sharing.[55]

The "EU Directive 2016/680 on the Protection of Natural Persons With Regard to the Processing of Personal Data by Competent Authorities for the Purposes of the Prevention, Investigation, Detection or Prosecution of Criminal Offences or the Execution of Criminal Penalties, and on the Free Movement of Such Data, and Repealing Council Framework Decision 2008/977/JHA" is a useful framework to implement a multi-agency communication approach in line with national legislation, and could be considered to be a beneficial blueprint for other jurisdictions.[56] For example, as a response to EU Directive 2016/680, the German federal states have submitted a model law to the Conference of Ministers of Justice. The model law takes into account the case-law of the Federal Constitutional Court, implements the Data Protection Directive (Directive 95/46/ EC) and thus provides a legal framework for co¬operation between the prison system and the security authorities.[57]

GUIDING PRINCIPLE 10

Engage civil society throughout the development of relevant policies, and during the monitoring of the implementation of the policies for feedback.

Government should consider the whole-of-society and multi-stakeholder approach to the development of policies, including policymakers, parliamentarians, relevant international and regional organizations, but also, importantly, civil society. Any formation of a law or regulation should include civic engagement. The government should provide civil society and the general public with ample opportunity to deliver inputs, either written or orally. Furthermore, the regulations should be accessible to the public.

[55] The International Institute for Justice and the Rule of Law (IIJ), "Prison Management Recommendations to Counter and Address Prison Radicalization," IIJ (2020), https://theiij.org/wp-content/uploads/Prison-Recommendations-FINAL-1.pdf.

[56] European Parliament and Council of the European Union, "Directive (EU) 2016/680," Official Journal of the European Union (2016), https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32016L0680&from=EN%20Torben.

[57] Torben Adams, "Approaches to Countering Radicalisation and Dealing with Violent Extremist and Terrorist Offenders in Prisons and Probation," Radicalisation Awareness Network (RAN) P&P Practitioners' Working Paper (2019), https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/networks/radicalisation_awareness_network/about-ran/ran-p-and-p/docs/ran_wrk_pp_pract_3rd-2018_20190606_en.pdf.

CONSIDERATION 10.1

The government, therefore, may choose to host public hearings on the development of new policies, thereby providing opportunity for citizens to share their comments. Efforts should be made to conduct such activities, particularly for the populations who may have an interest in the relevant regulation.

CONSIDERATION 10.2

Appropriate civil society organizations (CSOs) should be involved throughout the process of policy development. CSOs can have unique and important perspectives, as well as the necessary skills and expertise, to support a government in the development of regulations, SOPs and safety and security protocols for the rehabilitation and reintegration of those affected by violent extremism.

CONSIDERATION 10.3

CSOs can work directly with ministries to conduct research related to the development of the policies. Due to their relationship with local communities and perceived separation from the State, CSOs may be able to support the data collection which otherwise may be challenging for government representatives. CSOs often also have analysis skills to provide evidence-based insights which can contribute towards the development of effective legislation.

CONSIDERATION 10.4

CSOs can also participate in the drafting committees, which may support the awareness-raising on key topics which need to be addressed, and produce civic perspectives on the draft regulations. Such guidance may help the government to put the focus on the main issues to be included within the regulation.

CONSIDERATION 10.5

CSOs can also provide the necessary resources, both human resources and tools, to effectively support the monitoring of the implementation of rehabilitation and reintegration policies.

CONSIDERATION 10.6

National legislation should enable and ensure that CSOs are engaged throughout the rehabilitation and reintegration process, where relevant and appropriate. Governments should consider the establishment of joint SOPs or Memoranda of Understanding (MoU) between CSOs and multiple relevant ministries. For example, it may be advisable for the Ministry of Social affairs to have an SOP/MoU with CSOs for the reintegration phase, which can relieve the resource burden on the government for active, consistent engagement in local communities.

CONSIDERATION 10.7	CONSIDERATION 10.8
Efforts should be made to promote the enhanced inclusion of women within the policymaking process, to include the provision of opportunities for women's civil society groups.[58]	For cases where the rehabilitation and reintegration programs are for youth, it may be important for a government to establish a youth advisory group from the relevant communities who can provide their perspective on important considerations for policy development which impacts the rehabilitation and reintegration of young people.[59]

GUIDING PRINCIPLE 11

Address social welfare outside of the Center through the policy framework in order to ensure the effective implementation of rehabilitation and reintegration programs.

FTF returnees and their families may come from marginalized groups in society with limited economic opportunities. In particular, children who are affiliated or associated with violent extremist offenders (VEOs) are often those without adequate care and support systems. Without adequate public policies that can provide social services and support to VEOs and their families during and after their time in the center, the correctional services and rehabilitation centers risk perpetuating cycles of criminal behavior, recidivism and potentially exacerbating poverty and inequality. Having comprehensive policies based on internationally agreed norms and standards is essential in today's era of sustainable development that pledges to leave no one behind; and these policies would offer a better chance for rehabilitated FTF returnees and former VEOs to be productive members of society.[60]

Policies related to rehabilitation and reintegration should not only focus on the individual's social and psychological readiness to be able to reintegrate to the society, but rather, they should also support the individuals' access to the social welfare system. This would allow any vulnerable individual or group to, for example, access the national health care system, education system (a priority for children, but also important for adults who have not completed compulsory education), national identification, and unemployment compensation (either during detention or post-release), among other forms of support. By enabling the public services through policies, this may also support the addressment of the clients' potential grievances towards the government.

However, developing the above services alone does not guarantee the handling of security risks of violent extremism. Therefore, it is essential to consider the potential risks in the rehabilitation and reintegration programming and misuse of some services, especially financial support services. The risk management for the provision of services should be adequately embedded within the relevant policies.[61]

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58 United Nations Security Council, Counter-terrorism Committee, "Madrid Guiding Principles."
59 Oomar Shariff Mulbocus, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
60 Social Rehabilitation Center for Children in Need of Special Protection Handayani, "Rehabilitation and Reintegration Risk and Needs Assessment Tool for Individuals already exposed to Violent Extremism Ideology," Ministry of Social Affairs, Government of Indonesia.
61 Kusumarini, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 12

Prioritize the security of those being reintegrated into society, and of the communities they are being integrated into, through the policy framework.

In addition to a government's responsibility to protect its citizens, including the communities where clients will be reintegrated, the social services, the national authorities should also ensure that the policy framework provides for protective and security measures for individuals upon reintegration into the local community. There may be a risk of retaliation for former violent extremist offenders or clients of the Center when entering the community. Such risks may be posed by their former affiliates or due to the acts they committed or were associated with whilst involved in violent extremism. Hence, the national authorities should establish what options could be available for protection under their policy framework.[62] It will be important to assess the potential risks associated with their release at an early stage. All possible information available regarding any history of conflict, violence or threats by or against individuals in the community should be taken into consideration.[63]

Furthermore, while the reintegration program should ensure that the police and/or security services are alerted in the case that a client may encounter violence, this should be conducted in a manner that prevents the client from becoming or being perceived as sources for criminal intelligence collection or counterterrorism operations. The reintegration program should guarantee some separation from the security actors so that the clients are given the opportunity to rehabilitate and reintegrate without additional pressures such as compulsorily engaging with security actors.[64]

Policies should also focus on the communities into which these clients will be placed at the completion of their rehabilitation, to ensure that their security is taken into account by the relevant authorities. (See the section "Preparation for Release" in Chapter 7 and "Community Engagement" in Chapter 8).

GUIDING PRINCIPLE 13

Build a system which recognizes that the rehabilitation and reintegration of FTFs must be agile and adaptive.

The policy framework should ensure that interventions are supported in a sustainable manner, providing for appropriate resource mobilization and budget allocation. The circumstances surrounding the rehabilitation and reintegration of returning FTFs are often changing, including in restorative approaches and context. Therefore, the national policy framework will need to be structured in a manner that allows it to respond quickly to such changes, including the provision of new services, the potential expansion of the Center's, or even the revision of legislation, to ensure it is appropriately addressing the most current issues faced.

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[62] GCTF, "Addendum to the Rome Memorandum."
[63] United Nations Office on Drugs and Crime (UNODC), "Introductory Handbook on the Prevention of Recidivism and the Social Reintegration of Offenders," Criminal Justice Handbook Series (2018): 138.
[64] Georgia Holmer and Adrian Shtuni, "Returning Foreign Fighters and the Reintegration Imperative," United States Institutes of Peace, Special Report (2017): 16.

CONSIDERATION 13.1

A government may consider establishing a time-frame and phased approach to the establishment of a center within the lower levels of the policy hierarchy. This may include, for example, the staff requirements during initial establishment and then the requirements after effective operationalization.

CONSIDERATION 13.2

The international, regional and national contexts of violent extremism, including the underlying drivers, are often rapidly evolving. The national legal framework should take this into consideration, in order to enable a flexible and sustainable approach over the long-term.

CONSIDERATION 13.3

The policy framework should include requirements for appropriate review of the policies. The policies should have a mechanism built in which allows for a regular review, in order to ensure that policies are able to address developments in the field.

GUIDING PRINCIPLE 14

Ensure regulations are developed at the local level of government in alignment with, or connected to, the central government.

Central governments should ensure that policies are established which provide clear mandates and responsibilities to those operating at the local level. Furthermore, the local government policies need to effectively connect with the policies at the central level, in order to ensure that the transition between rehabilitation and reintegration is smooth, without confusion related to which agency should be responsible for the reintegration phase and community level activities.

CONSIDERATION 14.1

Where relevant, the local regulations should be aligned with national strategies and/or NAP for P/CVE.

CONSIDERATION 14.2

CSOs can also support the policy development at the local level, working with the local government to develop, for example, governor/mayoral regulations.

CONSIDERATION 14.3

It is likely that the national law does not provide for the specific operational aspects within each local community. Therefore, these should be contained within the local level regulations. For example, the central policies may state that local grievances within recipient communities are to be addressed prior to reintegration, however, the local-level policies may provide the mandate to a specific agency as well as outline the activities to be conducted to ensure community grievances are addressed.

GUIDING PRINCIPLE 15

Approach all forms of RLVE, as well as those affected by RLVE,
through the policy framework.

Having a policy framework which addresses all potential forms of RLVE not only enables the rehabilitation and reintegration processes to remain flexible to external developments, but can also help to mitigate any potential stigmatization for those involved. Developing a framework which minimizes the risk of stigmatization will likely increase the program's chances of success for effective reintegration.[65] The Aarhus Model from Denmark, for example, emphasizes that the measures taken are not about ideology, right-wing/left-wing politics, or religion, so as to mitigate the risk of stigmatizing groups of citizens.[66] Rather this model focuses on the involvement of communities, personal relationships, providing education and employment opportunities, as well as a particular attention to life skills.[67]

The government should also consider whether the policy framework would only address those who have been radicalized to violent extremism to the point of committing a crime or whether the framework would allow for a center to also support those affected by RLVE, but have not committed a crime. For example, in Indonesia, the legal framework covers all individuals exposed to violent extremist ideology. This enables the government to provide support to individuals who are not necessarily going through the criminal justice system and are referred to the rehabilitation center instead (e.g. by concerned family members or local security agencies).[68] It is also important to consider that the radicalization process is not always related to the criminal justice system, especially for those in an early vulnerability stage of radicalization, and that a rehabilitation center may also be able to support the prevention of violent extremism as well.

GUIDING PRINCIPLE 16

Support the work of religious and theological scholars, where appropriate,
through the development of the policy framework.

In many contexts, it may be essential to include religious and theological scholars within the multi-agency approach to rehabilitation and reintegration of returning FTFs. Therefore, it will be important to adequately address their potential role in the relevant guidelines and SOPs. However, governments should be aware of the potential implications the policy framework can have for the work of religious and theological scholars. Establishing a strong framework which institutionalizes their work without unintentionally, negatively impacting their contributions will be an important consideration for any government.[69] For example, it will be important to consider whether the established policies impede the religious/theological leaders' ability to disseminate counter narratives in a manner that is effective and interpreted as independent of the government by their clients and followers.

[65] Organization for Security and Co-operation in Europe (OSCE), "Non-custodial Rehabilitation and Reintegration in Preventing and Countering Violent Extremism and Radicalization That Lead to Terrorism: A Guidebook for Policymakers and Practitioners in South-Eastern Europe," OSCE (2020), https://www.osce.org/files/f/documents/d/7/444838.pdf.

[66] Preben Bertelsen, "Danish Preventive Measures and De-radicalization Strategies: The Aarhus Model," Panorama: Insights into Asian and European Affairs, 1 (2015): 241-253.

[67] Arsla Jawaid, "From Foreign Fighters to Returnees: The Challenges of Rehabilitation and Reintegration Policies," Journal of Peacebuilding & Development, 12, no. 2 (2017): 102-107.

[68] Kusumarini, "Contribution to Hedayah's Program."

[69] United Nations Interregional Crime and Justice Research Institute (UNICRI), "Building on the GCTF's Rome Memorandum: Additional Guidance on the Role of Religious Scholars and other Ideological Experts in Rehabilitation and Reintegration Programme," UNICRI and the GCTF (2013), https://toolkit.thegctf.org/Portals/1/Documents/En/UNICRI_SPAIN_Religious_Scholars_in_Rehab.pdf.

GUIDING PRINCIPLE 17

Enable and support public-private partnerships in rehabilitation and reintegration through the national policy framework, where possible and appropriate.

The term public-private partnership in this guiding principle does not refer to for-profit outsourcing or privatization of services provided for the clients, but rather the involvement of business sectors, which could include: a role within the multi-agency committee, engagement with the Center through their corporate social responsibility program, or even the possibility of the clients' internship or apprenticeship with the business. The inclusion of businesses serves to provide additional perspectives insights, particularly when it comes to employable skills programs and potentially innovative approaches. The possibility of apprenticeships for clients may also enhance future employment opportunities for the clients.[70]

Businesses have a high interest in the success of the program, as failed reintegration of the clients could negatively impact the environment where the company operates. The inclusion of business engagement within the lower levels of the policy hierarchy will strengthen their role and support to the rehabilitation and reintegration programs, and may enable and encourage the provision of additional responses and approaches for the clients.

GUIDING PRINCIPLE 18

Consider incorporating into the policy framework the use of incentives and sanctions for participation in rehabilitation and reintegration.

Motivation to change is a powerful and important element for the rehabilitation process. The GCTF's "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders" emphasizes the importance of potentially including the use of incentives, as appropriate, for individuals to participate within the rehabilitation program, particularly for those sentenced to prison.[71] Examples of incentives could include: financial remuneration in the case of work programs, the reduction of a sentence, or additional visits, among others. The addendum to the Rome Memorandum also elaborates that "States also should address any consequences for non-compliance with the conditions of a rehabilitation or reintegration program. Sanctions should be proportional to the infraction. Incentives and sanctions should have a legal foundation, be clearly described, and have a nexus to the offender's rehabilitation."[72]

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[70] Yuliani, "Contribution to Hedayah's Program."
[71] GCTF, "Rome Memorandum."
[72] GCTF, "Addendum to the Rome Memorandum."

CASE STUDY: GEORGIA'S IMPRISONMENT CODE[73]

Enshrined in the Law of Georgia's Imprisonment Code are a number of possible incentives for convicted persons who display model behavior and an honest attitude to the work, as a means of motivation.

Article 603 outlines those incentives for convicted persons placed within a low risk facility, including: early lifting of an imposed disciplinary sanction; an additional short visit; an additional short leave from the facility; an additional long visit; and an additional video visit, among others.

Article 63 provides incentives for convicted persons placed in a semi-open prison facility, including many of the abovementioned incentives, with the addition of an additional telephone conversation, and an additional family visit (for convicted women).

Within a closed type prison facility, the following incentives are provided under Article 66: the right to use a personal TV or radio; the right to use a personal computer; as well as additional telephone calls; a short visit; video visit; and the early lifting of a disciplinary sanction.

For those placed in a special risk prison facility, Article 664 allows for the following incentives: early lifting of an imposed disciplinary sanction; an additional telephone conversation; an additional short visit; the right to a long visit; and the use a personal TV or radio set.

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[73]   Parliament of Georgia, "Law of Georgia, Imprisonment Code 2010," Parliament of Georgia (Consolidated Publication, 2019), https://matsne.gov.ge/en/document/view/91612?publication=31.

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GOVERNANCE
AND OVERSIGHT

> Defining the Context of The Center

> Roles and Responsibilities of Government Entities

> Coordination and Information-Sharing

> Leadership, Management and Structure of a Center

> Development of Standard Operating Procedures

> Budget and Finance

This chapter provides guiding principles on the governance and oversight required for the Center. This includes: defining the context of the rehabilitation and reintegration Center from a management perspective; different roles and responsibilities of government entities; mechanisms for coordination and information-sharing; the structure, leadership and management of the Center; the development of standard operating procedures (SOPs); and some guidance for budgeting and finance.

DEFINING THE CONTEXT OF THE CENTER

This section will provide guidance on conducting research and defining the context in preparation for the creation of the Center and on the techniques to be used within the Center.

GUIDING PRINCIPLE 19

Involve in the research and design process all the stakeholders that have a potential role to play in the Center.

During the design phase, it will be important to gain the perspectives from all stakeholders that will be involved in the Center and its programs. This approach will help identify the most-appropriate processes, structure, management, resources, needs and goals/objectives of the Center. It is important to include perspectives and opinions on the Center from representatives of the government, community leaders, politicians and the private sector. The Center can be seen as part of a conflict resolution mechanism, in which case the arrangement and structure must reflect that ambition and meet the conditions that guarantee that the Center is a contribution to that mechanism from multiple perspectives. For example, Sri Lanka's Way-Forward on Rehabilitation, Reinsertion, and Reintegration (WFRRR), which can be assessed as successful, involved a wide variety of stakeholders in the research and design process of each component of the program, including international and national non-governmental organizations, private businesses and other civil society representatives.[74]

GUIDING PRINCIPLE 20

Research and understand the context of potential clients of the Center, and tailor the approaches to their primary needs.

Violent extremism takes a number of different forms and manifestations. It is important that the Center takes into consideration the political, social, cultural, economic, religious and ideological context for the clients that it will host. Understanding the needs of the clients at the outset will help to shape the procedures, activities, physical structure, security and interventions of the Center.

CONSIDERATION 20.1

An understanding of the potential motivations for the clients' participation in violent extremism is critical for designing any intervention. Research is needed into the push factors (structural and environmental factors) and pull factors (social and psychological factors) that may contribute to the potential clients' RLVE processes, as well as any community resilience mechanisms which may contribute towards a client's rehabilitation and reintegration process.

CONSIDERATION 20.2

An understanding of the political or religious ideology related to the clients' radicalization has implications for potential interventions. Expertise (e.g. staff or outside experts) with a firm understanding of this ideology may be important to consider as a priority resource to support interventions.

CONSIDERATION 20.3

Social and cultural expectations of clients may impact the types of activities that can be offered within the Center. For example, expectations of gender segregation for religious reasons may impede activities where families interact with each other. As another example, a Center that includes members of radical right violent extremist groups may want to consider having a tattoo artist available for removing or reshaping symbolic tattoos of affiliated groups. Language spoken by clients may also impact the qualifications of the staff or availability of certain resources.

CONSIDERATION 20.4

The Center should consider the legal status of the clients, including how their rehabilitation and reintegration relate to the criminal justice system. Clients that voluntarily participate in a program that is not mandated by a court may have different considerations than convicted prisoners. Clients that are not mandated to be part of the correctional institutions can deny the assistance requested by the Center. In addition, clients which are part of the criminal justice system may be mandated to participate in rehabilitation and reintegration, but may not be motivated to do so (additional incentives may be useful for such cases; see the section on "National Legislation and Policies" under the Chapter "Legal and Policy Frameworks" for more information on incentives).

CONSIDERATION 20.5

The Center should consider if and how children, juveniles and family members will be part of the rehabilitation and reintegration process. For example, it is important to consider if family members should be rehabilitated together or separately. In addition, it is important to consider how dependent children may be part of the rehabilitation and reintegration process, including making sure the needs of those children are met.

CONSIDERATION 20.6

Conducting socioeconomic profiling of the potential returning FTFs may enable the rehabilitation and reintegration programs to incorporate a degree of flexibility in the assistance offered and increase the sustainability of the Center's approaches.[75] For example, understanding the employment, education and training and other experiences that the clients may possess can usefully influence the selection of vocational and other training that the Center provides to them.

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[75] Ana Fonseca, Laurence Hart, and Susanne Klink, "Reintegration - Effective approaches," International Organization for Migration (IOM) (2016): 40.

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GUIDING PRINCIPLE 21

Separate convicted and non-convicted clients into different
Centers or units of the Center.

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Convicted and non-convicted clients should be separated into different centers, or at least into different units and programs.[76] Since remanded clients should be treated as innocent until the verdict is issued, the Center should separate and handle such clients according to their specific circumstances.[77] Moreover, if the client is not charged or never convicted, but it is still determined that they should participate in a rehabilitation and reintegration program, that client will have specific requirements and needs related to their relationship to the criminal justice system.

CONSIDERATION 21.1

The Nelson Mandela Rules state that "untried prisoners shall be kept separate from convicted prisoners;"[78] and that untried prisoners "shall benefit from a special regime."[79] The Nelson Mandela Rules (111 – 120) subsequently lay out the essential requirements for such individuals.

CONSIDERATION 21.2

Ensure the timing of the intervention by the Center is appropriately tailored to the needs of the client. Ideally, rehabilitation measures are implemented as early as possible. However, this may be problematic pre-conviction (e.g. remanded in pre-trial detention). The legal mandate might not be clear, and there may be ethical questions for beginning a program for someone whom is eventually found to be innocent. However, if there is a consensual assessment by security agencies and independent CVE experts of an individual as being radicalized but they are not yet convicted, these individuals might be included in a program, separate from that of convicted prisoners.[80] Participation in a program pre-conviction may also be done on a voluntary basis with the consent of the individual, their legal representative, or their guardian/family members. For example, an individual's lawyer or legal representative may request to start the rehabilitation process prior to sentencing. "The UN Standard Minimum Rules for the Treatment of Prisoners" (Nelson Mandela Rules) provides that any prisoner under arrest or awaiting trial shall be offered the opportunity to participate in certain activities, such as work, but shall not be required to. Accordingly, physical and mental health services must be provided, including allowing the prisoner to be visited and treated by their own doctor, provided there are reasonable grounds.[81] Furthermore, governments must take into account the potential risks involved in pre-trial treatment or referral to a rehabilitation and reintegration program. There is potential risk of misidentification that can lead to significant stigmatization of innocent individuals. Moreover, if such misidentification is perceived to be frequent amongst a particular minority group, this can further ostracize the target communities and instill mistrust between the communities and government bodies, such as law enforcement agencies or even health care providers.

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[76]   Survey Responses, "Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and Their Family Members: Restorative Approaches," Hedayah (July 2020).

[77]   Robert Örell, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[78]   United Nations, "Standard Minimum Rules for the Treatment of Prisoners," Rule 11.

[79]   United Nations, "Standard Minimum Rules for the Treatment of Prisoners."

[80]   Dennis Walkenhorst, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[81]   United Nations, "Standard Minimum Rules for the Treatment of Prisoners."

CONSIDERATION 21.3

The security of the Center may be more thorough or visible for convicted clients. For non-convicted clients, engaging with staff in a security-centric environment may be hostile and unnecessary. The staff and approaches to rehabilitation and reintegration may be similar in custodial versus non-custodial Centers, but the physical structure and set-up may be different.[82] Clients that enter a program on a voluntary basis may feel that the environment is overly-securitized, and may be less inclined to continue their program if the Center is designed with the same security approaches as a Center for convicted individuals.

GUIDING PRINCIPLE 22

Consider whether convicted violent extremists are to be segregated from the general prison population or integrated.

This is in alignment with Good Practice Number 4 of the "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," which mentions that "States could carefully consider how inmates going through the rehabilitation programs are housed, and whether they should be segregated from or integrated into the general prison population."[83] In general, there is not a consensus of evidence on whether segregating VEOs is more successful or less successful in terms of rehabilitation and reintegration.[84]

CONSIDERATION 22.1

Segregating clients with violent extremist backgrounds or convictions from the general prison population may reduce the possibility of other prisoners being radicalized or recruited, as they will not be exposed to these individuals. On the other hand, segregation of clients with violent extremist backgrounds may reinforce a social culture that perpetuates violent extremist ideologies, and limit rehabilitation and reintegration processes.

CONSIDERATION 22.2

Not segregating violent extremist clients may have the added benefit of exposure to other types of individuals, which could have a neutralizing effect on strong ideological or behavior claims of violent extremist groups. On the other hand, integrating clients into the general prison population, especially those with strong recruitment backgrounds, may provide such individuals with fertile ground for recruitment and opportunities to spread their violent extremist narratives.

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[82] Rachel Bryson, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[83] GCTF, "Rome Memorandum."

[84] Beverly Powis, Keely Wilkinson, Sinead Bloomfield, and Kiran Randhawa-Horne, "Separating Extremist Prisoners: A Process Study of Separation Centres in England and Wales from a Staff Perspective," Ministry of Justice, UK (2019), https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/818624/separating-extremist-prisoners.pdf; Tinka Veldhuis, "Captivated by fear: an evaluation of terrorism detention policy," University of Groningen (2015), https://www.rug.nl/research/portal/publications/captivated-by-fear(b3538ab9-231c-4d03-aca0-d684ad5a6337)/export.html; Tinka Veldhuis, "Designing Rehabilitation and Reintegration Programmes for Violent Extremist Offenders: A Realist Approach," The Hague: ICCT (2012), https://www.icct.nl/download/file/ICCT-Veldhuis-Designing-Rehabilitation-Reintegration-Programmes-March-2012.pdf; Andrew Silke, and Tinka Veldhuis, "Countering Violent Extremism in Prisons: A Review of Key Recent Research and Critical Research Gaps," Perspectives on Terrorism 11, no. 5 (2017): 2-11, www.jstor.org/stable/26297927.

CONSIDERATION 22.3

It is also possible that clients with violent extremist backgrounds may self-segregate; that is, they may naturally or purposefully form groups within a prison or Center setting around common interests.[85]

CONSIDERATION 22.4

It may be worth considering segregation of high-risk individuals—particularly those that have been involved in a violent extremist or terrorist organization at a leadership level or those with a history of recruitment.

CONSIDERATION 22.5

Clear criteria should be established for how to separate or segregate violent extremist clients. The UNODC "Handbook on the Management of Violent Extremist Prisoners and the Prevention of Radicalization to Violence in Prison" gives the following factors to be considered when determining if the segregation of violent extremist clients is necessary:[86]

- The size of the violent extremist prison population to be segregated or dispersed;
- The state of the prison infrastructure and the administration's ability to ensure secure custody if violent extremists were dispersed to a number of prisons;
- The capacity, size and skills level of staff;
- The financial resources available to manage the violent extremist prisoner population;
- The legislative framework and responsible authorities;
- The cultural, political and social context;
- The risk that an individual presents for being further radicalized, or for radicalizing others to violence;
- The modus operandi and organizational structure of the violent extremist group.

85   UN Office on Drugs and Crime (UNODC), "Handbook on the management of violent extremist prisoners and the prevention of radicalization to violence in prison," UNODC (2016), https://www.unodc.org/pdf/criminal_justice/Handbook_on_VEPs.pdf.
86   UNODC, "Handbook on the management of violent extremist prisoners," 47.
87   This chart was adapted from one found in: Radicalization Awareness Network (RAN), "RAN Manual: Responses to returnees: Foreign terrorist fighters and their families," RAN (2017), https://ec.europa.eu/home-affairs/sites/homeaffairs/files/ran_br_a4_m10_en.pdf.

The following table contains a summary of advantages and disadvantages for segregating clients or dispersing clients within the general prison population:[87]

TABLE 1: **ADVANTAGES AND DISADVANTAGES FOR CLIENT HOUSING**		
MODEL OF CLIENT HOUSING	**ADVANTAGES**	**DISADVANTAGES**
Segregation of clients convicted or suspected of VE offense	▪ Close monitoring; ▪ Little effect on the mainstream prison population; ▪ Focused interventions, tailored for individuals; ▪ Specialized staff; ▪ Reassuring to public safety.	▪ New and potentially stronger bonds formed among clients; ▪ Potential mistrust and suspicion between staff and clients; ▪ Potential for oppositional mind-set of the clients; ▪ Effects of labelling and stigmatizations; ▪ Social status affiliated with being part of a "special" unit; ▪ Difficulties finding qualified staff; ▪ High financial cost per prisoner.
Integration of clients convicted or suspected of VE offense within criminal justice system	▪ Less stigmatization and marginalization; ▪ No social status for being placed in a "special" unit; ▪ Opportunities for positive experiences when interacting with others.	▪ Generalized staff, with higher costs for training; ▪ Difficult to ensure high quality intelligence and information-sharing on the particular needs of clients; ▪ Risk of radicalization or recruitment in the prison of general population; ▪ Risk of influence by organized crime or criminal gangs.
Combination of approaches, depending on each case	▪ Tailor-made to individual needs and risks.	▪ Selection criteria is imperfect; ▪ Higher cost for maintaining both options.

CASE STUDY: THE NETHERLANDS - SEGREGATION

In the Netherlands, the segregated approach to rehabilitation and reintegration is used. By isolating terrorism offenders from the regular prison population in segregated high-security facilities from 2005-2012, the Dutch authorities aim to closely monitor terrorism offenders and prevent them from radicalizing other prisoners. This segregated approach may bring the advantage that violent extremist offenders have no contact with other categories of offenders, and that both their internal and external communication are strictly monitored.[88]

CASE STUDY: CANADA - INTEGRATION-SEPARATION

Through an Integration-Separation Accommodation Model, the Correctional Service of Canada integrates violent extremist offenders within the same prisons as other offenders, in an open general population environment. However, physical or geographical separation of these offenders may be applied, if it is determined that the violent extremist offender poses a potential threat to other offenders, the institution or staff. This type of separation may be conducted through assigning the offender to another living unit or a different institution/correctional setting. This approach helps to prevent the offenders receiving status affiliated with their placement, while also minimizing the risk of potential radicalization of other offenders.[89]

GUIDING PRINCIPLE 23

Consider segregating clients internally based on affiliation,
and address all forms of RLVE.

The rehabilitation Center should address all forms of RLVE in the case that multiple forms of violent extremism exist in that local context, but may consider splitting out clients by groups or affiliation in the internal structure of the Center.[90] Practices, principles, and policies targeting these different target groups can be similar, however, the communication and responses to the each target group need to be adapted and specific to enhance credibility, trust, and to reach each individual.[91] This principle is in alignment with Guiding Principle 15; see the section on "National Legislation and Policies" for more information.

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88 Tinka Veldhuis and Siegwart Lindenberg, "Limits of tolerance under pressure: a case study of Dutch terrorist detention policy," Critical Studies on Terrorism, 5, no. 3 (2012): 425-443.
89 UNODC, "Handbook on the Management of Violent Extremist Prisoners."
90 Survey Responses, "Hedayah's Program survey."
91 Örell, "Contribution to Hedayah's Program."

CONSIDERATION 23.1

The drivers of RLVE often interact with each other across different groups. Having different centers that address only one form of RLVE might lead to a forced reductionist classification of offenders/clients that could be counterproductive to the rehabilitation or reintegration process due to pre-determined bias or stereotypes.[92]

CONSIDERATION 23.2

Working with RFTFs is, in its essence, the same for all forms of RLVE and highly dependent on the individual's needs (psychological, social, etc.). However, it is useful to separate or classify clients by forms of RLVE, since the initial contact-building might demand specific qualifications (e.g. religious counseling).[93]

CONSIDERATION 23.3

Radicalization is an individualized process, and not one person will fit into a single category. Therefore, having sufficient resources to manage a variety of reasons for radicalization is important.[94] Violent extremism is also constantly changing, so rehabilitation centers ought to be equipped with knowledge of how ideology (in general) affects and shapes behavior. It should never be focused only on one type of radicalization or ideology, though demands and events of a particular time in history may dictate this.[95] The Center should keep up to date with all changes in violent extremism, especially the forms most relevant to the population that the Center is currently serving or could potentially serve in the future.

GUIDING PRINCIPLE 24

Segregate children and juvenile clients from adult clients.

The Center should take into consideration all relevant international laws and good practices related to the treatment of children and juveniles in the criminal justice system, including the Universal Declaration of Human Rights[96] and the Convention on the Rights of the Child.[97] The Center should also take into consideration relevant local laws related to bringing charges against juveniles and children. For example, in the European Union, children under the age of 12 cannot be held responsible for their actions, whereas those aged 12 to 18 can be charged with juvenile crimes.[98] The United Nations considers anyone under the age 18 as children.[99] In certain contexts, such as Tunisia, children are able to be charged with terrorism-related crimes, and there are specific legal steps and protections that are to be considered for these cases.[100]

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[92]   Iruayenama, "Contribution to Hedayah's Program."
[93]   Walkenhorst, "Contribution to Hedayah's Program."
[94]   Bryson, "Contribution to Hedayah's Program."
[95]   John Horgan, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
[96]   Office of the United Nations High Commissioner for Human Rights (OHCHR), "Universal Declaration of Human Rights," United Nations (1948), https://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf.
[97]   UN Commission on Human Rights, "Convention on the Rights of the Child," United Nations (1990), https://www.unicef.org/child-rights-convention.
[98]   Adams, "Approaches to Countering Radicalisation."
[99]   Yuliani, "Contribution to Hedayah's Program."
[100] Group Discussion, "Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

A comprehensive set of considerations for children and juvenile clients can be found in the "Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups: The Role of the Justice System"[101] by the UN Office on Drugs and Crime (UNODC) and the GCTF's "Neuchâtel Memorandum on Good Practices for Juvenile Justice in a Counterterrorism Context."[102] For a focus on ensuring basic human rights for children and minors, see the publication on "Children Affected by the Foreign-Fighter Phenomenon: Ensuring a Child Rights-Based Approach"[103] and the "Key Principles for the Protection, Repatriation, Prosecution, Rehabilitation and Reintegration of Women and Children with Links to United Nations Listed Terrorist Groups."[104]

CONSIDERATION 24.1	CONSIDERATION 24.2
The well-being of the child should be the primary concern regarding any procedures related to them; the child's physical safety and emotional security should be protected. This may include, for example, reducing ways in which they are subjected to stigma or social isolation, or preventing traumatizing situations (e.g. by considering how to appropriately and effectively interview a child by one or more adults), and addressing any post traumatic stress disorder that may occur due to their experience. Children should also be protected from influences towards radicalization.[105]	Child-friendly programs for children and juveniles who might be recruited whilst in detention or who are already radicalized or vulnerable to radicalization should be developed. These programs must focus on rehabilitating and protecting children from exploitation.

CONSIDERATION 24.3	CONSIDERATION 24.4
Additionally, programs should take into account children accompanying their parent(s) in detention, children whom may have been born in conflict zones (and may not have citizenship), and children who are born as a result of rape by members of a violent extremist group.	Children may have impulsive behavioral patterns and emotional states, self-harming behavior, different perceptions of time and shorter concentration spans. In addition, they are also more vulnerable to contamination from criminal influences they encounter.[106]

101   UNODC, "Handbook on Children."
102   Global Counterterrorism Forum (GCTF), "Neuchâtel Memorandum on Good Practices for Juvenile Justice in a Counterterrorism Context," GCTF (2016), https://www.thegctf.org/Portals/1/Documents/Framework%20Documents/2016%20and%20before/Neuch%C3%A2tel%20Memorandum%20on%20Juvenile%20Justice%20ENG.pdf?ver=2020-01-13-153528-460.
103   UN Counter-Terrorism Centre (UNCCT), "Children Affected by the Foreign-Fighter Phenomenon: Ensuring a Child Rights-Based Approach," UN Office of Counter-Terrorism (UNOCT) (2018), https://www.un.org/counterterrorism/sites/www.un.org.counterterrorism/files/0918_ftf_handbook_web_reduced.pdf
104   United Nations, "Key Principles for the Protection."
105   Council of Europe, "Council of Europe Handbook for Prison and Probation Services Regarding Radicalisation and Violent Extremism," Strasbourg: Council of Europe (2016), https://rm.coe.int/16806f9aa9.
106   Australian Law Reform Commission, "Separation of adults and juveniles in detention," Australian Government (2010), https://www.alrc.gov.au/publication/seen-and-heard-priority-for-children-in-the-legal-process-alrc-report-84/20-detention/separation-of-adults-and-juveniles-in-detention/#_ftn234.

GUIDING PRINCIPLE 25

For families that may have participated in terrorist activity together, consider carefully the amount and types of contact they should have in the rehabilitation and reintegration processes.

Family contact has been shown to have a positive effect on the processes of rehabilitation and reintegration. However, in circumstances where an entire family was participating in terrorist activities, contact with the family could be counter-productive to their process of rehabilitation and reintegration. For example, if older siblings and or other family members are high risk and ideologically motivated towards leadership roles, then their influence would be difficult to negate.[107] It is important to involve the family, but to also find a balance so that the individual can work on him/herself and reflect on their own.[108]

CONSIDERATION 25.1

For families which travelled to a conflict zone together, it would be advised to rehabilitate the individuals separately. However, it may be beneficial for joint rehabilitation activities, reconciliation and reunification once the family has stabilized and achieved sufficient progress towards the goals in their client plans.[109]

CONSIDERATION 25.2

The Center may want to consider assigning a single case manager for the whole family, someone who is knowledgeable about the individual processes of each family member.[110]

CONSIDERATION 25.3

The family may require group therapy in addition to individual therapy. An assessment on arrival for each case is essential.[111]

CONSIDERATION 25.4

The dynamics of the family should be part of the assessment, including any considerations for women being tricked or forced into marriage.[112]

CONSIDERATION 25.5

Mothers and very young children should not be separated. Mothers and their young children (toddlers and babies) should remain together because of the attachment and nursing needs of the young child.

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107 Perarcha, "Contribution to Hedayah's Program."
108 Margaux Bennardi, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
109 Anonymous, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
110 Anonymous, "Contribution to Hedayah's Program."
111 Bryson, "Contribution to Hedayah's Program."
112 Järvå, "Contribution to Hedayah's Program."

ROLES AND RESPONSIBILITIES OF GOVERNMENT ENTITIES

This section will outline how to determine the roles and responsibilities of different government entities (to include ministries, agencies, departments and sections) in the Center's structure and processes.

GUIDING PRINCIPLE 26

Given the cross-cutting nature of rehabilitation and reintegration, consider adopting a multi-agency approach to its governance and oversight.

There are many agencies that have a "stake" in the success of a rehabilitation and reintegration Center. As such, it is advised that government agencies should at least be kept informed and at best be consistently involved in the processes, governance and oversight that are most relevant to that particular ministry or entity. For example, a ministry of justice may lead the decision-making and oversight of the Center, but supported through a panel of strategic advice from other relevant ministries.

There are numerous benefits and challenges that a multi-agency body can face. For example, a multi-agency body can provide different perspectives to the Center that are important to consider. Practitioners can offer practical advice on the needs and challenges related directly to clients, whilst policymakers can offer a top-down perspective on how legislation and policy mandates can aid in the implementation of a Center's activities, and community members such as religious institutions or NGOs can offer specific topical expertise or perspectives on how the community will receive requests for reintegration. All of these perspectives are important to consider in terms of the impact of the rehabilitation and reintegration of clients into broader society.

CONSIDERATION 26.1

A multi-agency body could include: the national authority mandated with counter-terrorism, ministry of justice, ministry of interior and/or intelligence services, ministry of defense/military, ministry of health, ministry of education, ministry of labor, ministry of social policy/affairs, national authorities for religious affairs and relevant judicial, legislative or executive arms of the government, as well as civil society representatives.

CONSIDERATION 26.2

The multi-agency body may also consider child protection services/agencies and/or ministries relevant to women, gender and families. This is especially important in the case that children are involved as clients, family members of clients, or as visitors. In addition, it is important that gender perspectives for clients, staff and visitors are accounted for through the representation on the multi-agency body.

CONSIDERATION 26.3

Governments should consider designating a point of contact or taskforce at the national level to ensure the coherence of policies and measures across all agencies involved and to support coordination.[113]

CONSIDERATION 26.4

Local entities that may comprise a multi-agency body could include: local police, municipal authorities, municipal centers for social welfare, probation services, vocational training entities, and community-based organizations (CBOs).

CONSIDERATION 26.5

A multi-agency body may also want to consider roles for non-government entities, to include: UN agencies, international NGOs or local NGOs, national or local religious or community leaders, and not-for-profit social welfare centers.

CONSIDERATION 26.6

The multi-agency body may include conflict transformation experts. Rehabilitation and reintegration may serve a wider purpose and contribute to the reduction of overall drivers and motives for violent action in the community. Therefore, it may require a holistic and conflict analysis approach, to include lessons learned from demobilization, disarmament and reintegration (DDR) programs.

CONSIDERATION 26.7

The private sector may be involved, if relevant to providing work inside the Center, or during the community reintegration process (e.g. finding clients employment after release). There may also be a consideration for public-private partnerships with specific businesses, where possible and appropriate.[114]

CASE STUDY: SAFETY HOUSES IN THE NETHERLANDS

The Safety House Model is based on the Dutch counter terrorism policy framework and is an integral approach that combines several interventions. Whilst being a national approach, it relies on the localized and contextualized implementation within each municipality, to build a network of local professionals and relevant stakeholders.

In this regard, the Safety House consists of key partners sitting at one table, including: the local municipality, key coordinators from the prison services, police and law enforcement agencies, representative from the national counter terrorism coordinator's office, and various other partners when relevant. For example, a local NGO working on reintegration or the client's family may be

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[113] RAN, "RAN Manual: Responses to returnees."
[114] Kusumarini, "Contribution to Hedayah's Program."

brought into the discussion, if relevant. There is an emphasis placed on the importance of identifying the right partners for each case. Then these partners develop a collaborative implementation plan which is tailored for the specific circumstances, working together towards a common goal to make sure that each entity is able to support and meet the client's needs. The lead coordinator of the Safety House is usually from the municipal government.[115]

In addition, the Family Support Centre, established in 2015, brings together health workers, psychiatrists, mentors, researchers, theologians, and other experts for meetings twice a week to discuss cases. This model ensures communication between the Centre, family members, and the local municipality. Information is shared with the municipality or police only in the case of a safety risk or after the family has granted permission.[116]

GUIDING PRINCIPLE 27

Define the mandate, goals and structure of the multi-agency body supporting the governance and oversight of the Center.

The multi-agency body could have several different purposes. For example, the multi-agency body could provide oversight and governance to the Center, with a clear legal mandate to guide and direct the Center overall and have some level of decision-making power. Alternatively, the multi-agency body could play an advisory role, with the Center's leadership and management holding the decision-making power.

The multi-agency body should have a clear mandate as to which authority and power it holds. This mandate should cover all potential aspects of its role, from strategic oversight to involvement in the rehabilitation and reintegration process.

CONSIDERATION 27.1	CONSIDERATION 27.2

The structure of the multi-agency body and involvement of different government entities should be assessed based on relevance to the subject, as well as risk and consequences to that government entity related to the processes or outcomes of the Center. For example, a ministry of justice or its equivalent may play a critical or central role in decision-making because of its mandate in the criminal justice system. A ministry of labor representative may have a "stake" in the process because their ministry would be consulted during the reintegration process, but their role on the multi-agency body may not come with decision-making authority.

Roles and responsibilities, including delegation of decision-making authority, should be well-defined. Decision-making authority could be delegated to one or two government entities to allow the Center to remain flexible and swift to respond to new challenges. On the other hand, a more inclusive decision-making body could be created that facilitates the official participation of more government entities, but this could have the effect of slowing down the decision-making processes and leave the Center less able to adapt to change.

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[115]   Anonymous, "Contribution to Hedayah's Program."
[116]   OSCE, "Non-custodial Rehabilitation and Reintegration," 142.

CONSIDERATION 27.3

Any established body for multi-agency coordination will require a clear mandate, goals and structure, in order to effectively coordinate the work of different government agencies.[117]

CONSIDERATION 27.4

The cooperation of the multi-agency body should consider a legal mandate under which the body is allowed, and obligated, to operate.[118] This could also be in the form of a non-binding mandate, such as a Memorandum of Understanding (MoU).

CONSIDERATION 27.5

The multi-agency body should have clear limits on its authority, especially when it comes to individual clients' needs. It is essential that the practitioners and case managers that are familiar with the client are able to shape the intervention in a way that is most beneficial to that client. However, advice from and coordination with the multi-agency body may aid in determining what is feasible and realistic for the client, based on the available resources and structures in place in the country.

CONSIDERATION 27.6

It may be considered suitable to have a tiered approach to the multi-agency body. One committee may be closer to the implementation of the Center's activities, consisting of practitioners and stakeholders engaging with the clients, which could be responsible for the decision-making related to the practical implementation of interventions and addressing the everyday needs of the center. While another committee may consist of representatives from ministries and central government, which could be responsible for policy development and oversight, thereby taking a more strategic role, similar to that of a steering board. If this approach were to be adopted, there would need to be a clear mechanism for coordination and information sharing between the different types of multi-agency committees established.[119]

CONSIDERATION 27.7

Besides the legal framework, trust is another key issue for information sharing. Agencies need to be confident in each other's expertise, reliability and ability to determine what information is relevant and can be legally shared. Transparency on the structure of information sharing is helpful, too. Instead of all actors exchanging all data, agencies would be aware of who possesses what kind of information.

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117 RAN, "RAN Manual: Responses to returnees."
118 For some examples of existing legislation for the information-sharing infrastructure in Germany and France, see: Adams, "Approaches to Countering Radicalisation," 9-10.
119 Örell, "Contribution to Hedayah's Program."

COORDINATION AND INFORMATION-SHARING

This section will outline how to determine the roles and responsibilities of different government entities (to include ministries, agencies, departments and sections) in the Center's structure and processes.

> **GUIDING PRINCIPLE 28**
>
> Develop a clear mechanism and process for information-sharing between different entities to avoid negative consequences for the client, and to promote seamless transitions to maximize the clients' chances of success.

Good communication between agencies can aid in the rehabilitation and reintegration process. For example, a client that is being released from the Center into society may have more success if there is a seamless handover between the ministries responsible for care inside the Center and ministries and local authorities responsible for care outside the Center. Good communication may be able to identify challenges and obstacles for the client in the transition process, and find practical solutions before those obstacles could impede the process of rehabilitation or reintegration.

On the other hand, poor communication can lead to negative consequences for clients. For example, a client may be subjected to repeated interviews, interrogation and/or assessments, leading to fatigue or frustration. Lack of communication between entities could also lead to missing critical intelligence information that could prevent a client from, for example, reconnecting with previous inappropriate contacts or even carrying out a terrorist plot or attack.

The process for information-sharing, data collection and communication should also be well-defined, have the assent of all of the involved parties and be disseminated within their organizations to all relevant persons.

Processing of personal data by law enforcement authorities and other eligible stakeholders has to fit to the purpose of the law and the respective regulations. Personal Data in this regard could mean any information relating to an identified or identifiable person; a natural person is considered identifiable, if they can be identified directly or indirectly, in particular by means of assignment to an identifier such as a name, an identification number, location data, an online ID or to one or more specific characteristics, the expression of the physical, physiological, genetic, mental, economic, cultural or social identity of this person.[120]

Processing and sharing of data in the multi-agency context relates to any procedure carried out with or without the help of automated methods or any such series of procedures in connection with personal data such as the collection, recording, storage, modification, reading, consultation, and/or disclosure of such information.

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[120] European Parliament and of European Council, "Directive (EU) 2016/680."

Ownership of tasks, including responsible ministries/departments and specific people, should be delegated, and the multi-agency body should put in place mechanisms to ensure the accountability of all relevant ministries, agencies and departments responsible for the sharing of information. See the sections on "Information and IT Security" and "Dynamic Security" under the chapter on "Safety and Security" for more information.

CONSIDERATION 28.1

It is important to consider local and national data protection laws and regulations as part of the information-sharing process. For example, within the European Union, the information-sharing procedure must abide by the EU Directive 2016/680.[121] It will be important for all governments to have clarity on their obligations related to information-sharing within their context.

CONSIDERATION 28.2

When setting up the safety and security procedures for the Center, it is essential to consider the necessary legal status and security clearances regarding information-sharing for staff and external experts. Legal status of the staff members and external experts has an impact on what information can be shared. For example, if information is classified and can only be shared with government entities and personnel with a particular clearance, external experts may not be able to have access to information that could be critical to a clients' intervention, or to their own security.

CONSIDERATION 28.3

In accordance with Radicalisation Awareness Network (RAN)'s "Approaches to Countering Radicalisation and Dealing with Violent Extremist and Terrorist Offenders in Prisons and Probation,"[122] knowing what information is relevant to share requires that the members of the multi-agency body are knowledgeable about the phenomenon of violent extremism. As such, consider regular capacity building opportunities for the members of the multi-agency body on these topics.

CONSIDERATION 28.4

The design of effective rehabilitation and reintegration programs will likely require the sharing of information on the client's background and living circumstances prior to being placed within the Center.[123]

CONSIDERATION 28.5

It may be possible to have a unit or certain staff within the prison or Center with the authority to declassify pertinent information, in order to be able to share such information with relevant stakeholders who may not have the necessary clearance. Where the prison service or Center is lacking the necessary clearance to conduct the declassification, a system should be implemented within the relevant governmental body in charge, e.g. Ministry of Interior, Ministry of Justice or the Intelligence agency, in order to provide important information to the Center or prison service, where appropriate.

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[121]   European Parliament and of European Council, "Directive (EU) 2016/680."
[122]   Adams, "Approaches to Countering Radicalisation."
[123]   RAN, "RAN Manual: Responses to returnees."

LEADERSHIP, MANAGEMENT, AND STRUCTURE OF THE CENTER

This section will outline suggestions and recommendations for establishing the leadership and management of the Center.

> **GUIDING PRINCIPLE 29**
>
> Ensure the leadership, management and structure of the Center abide by relevant international standards for prison management and correctional facilities.

The leadership and management of the Center should abide by international laws, for example, the "UN Standard Minimum Rules for the Treatment of Prisoners" (Nelson Mandela Rules)[124] and the "United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (Bangkok Rules),"[125] and consider, if applicable, the legally non-binding standards on good principles and practices in the treatment of detainees and the management of detention facilities, regional principles, recommendations and resolutions relating to prisons and community sanctions and measures (e.g. the European Prison Rules and conventions).[126]

> **GUIDING PRINCIPLE 30**
>
> Mandate regular, external inspection by appropriate authorities, in alignment with national laws and international frameworks.

There should be a regular inspection of the Center and its services by appropriate staff through standard processes and mechanisms. Consistent inspection and oversight, with appropriate opportunities to make adjustments, is important to maintaining legal, ethical and operational standards in custodial and non-custodial settings. This will ensure that these institutions are administered in accordance with existing laws and regulations, and with a view to achieving the appropriate standards and the objectives of the Center. Regular inspection also helps to emphasize a continuous commitment to improving the practices and quality of services provided. Each department should also develop quality assurance processes for measuring performance against these standards and principles.[127] The UN "Prison Incident Management Handbook" emphasizes the importance of regular internal and external inspections "particularly from the judiciary and human rights organizations."[128]

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124 United Nations, "Standard Minimum Rules for the Treatment of Prisoners."
125 United Nations, "Rules for the Treatment of Women Prisoners."
126 Council of Europe, "Compendium of Conventions, Recommendations and Resolutions Relating to Prisons and Community Sanctions and Measures," Council of Europe Publishing (2020), https://rm.coe.int/compendium-e-2020-final/16809f3927.
127 Subramaniam, "Contribution to Hedayah's Program."
128 United Nations, "Prison Incident Management Handbook," United Nations (2013). https://www.un.org/ruleoflaw/files/Prison_Incident_Management_Handbook_OROLSI_Mar2013.pdf.

CONSIDERATION 30.1

Inspections and evaluations may help to determine the effectiveness of ongoing programs and the center's implementation, thereby contributing towards the enhanced planning and conduct of the center and its staff in the future.

CONSIDERATION 30.2

Inspection reports should be shared directly with the ministry or agency mandated for oversight, as well as the directors of the center, in order to support the implementation of any recommendations. Subsequently, the staff should be thoroughly briefed on any potential changes, and any guidance documents should be updated, where necessary.

CONSIDERATION 30.3

The UN "Standard Minimum Rules for the Treatment of Prisoners" (Nelson Mandela Rules) are the minimum standards for the management of prison facilities and the treatment of prisoners. These rules have been influential in the development of prison laws, policies and practices globally. The checklist "Assessing compliance with the Nelson Mandela Rules: A checklist for internal inspection mechanisms"[129] is a useful resource, which provides for technical assistance geared at reducing the scope of imprisonment, improving prison conditions and strengthening prison management, and supporting the social reintegration of prisoners upon release. This resource should be considered for conducting internal inspections.

GUIDING PRINCIPLE 31

Ensure the management of the Center has decision-making abilities that are independent of any external body.

One of the main stumbling blocks in rehabilitation work can be dependency on outside institutions. The Center should be set up in such a way that all ingredients deemed necessary for rehabilitation are under the control of the Center.[130]

CONSIDERATION 31.1

The Center should ideally be independent to make their own decisions, within their legal mandate, for what is best for the clients.[131]

CONSIDERATION 31.2

Avoiding political or religious affiliations for the Center can help to maintain its neutrality and independence.

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[129] United Nations Office on Drugs and Crime (UNODC), "Assessing compliance with the Nelson Mandela Rules: A checklist for internal inspection mechanisms," Criminal Justice Handbook Series United Nations (2017). https://www.unodc.org/documents/justice-and-prison-reform/UNODC_Checklist_-_Nelson_Mandela_Rules.pdf.
[130] Järvå, "Contribution to Hedayah's Program."
[131] Järvå, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 32

Define the vision, mandate, goals and objectives of the Center.

In alignment with the first principle of the "Malta Principles for Reintegrating Returning Foreign Terrorist Fighters" to "establish clear goals and objectives to identify success and failure,"[132] it is important for the Center to determine their main goals, and also how they will monitor and measure success.

Some of the guiding questions that may be useful for setting overarching goals and objectives for the Center include:

What is the main purpose of the Center?

What does the Center mean by key terms, to include: disengagement, deradicalization, rehabilitation and reintegration?

What is determined as successful? How will the Center measure progress toward success?

Will the Center be custodial or non-custodial? Will clients reside at the Center, or will they attend the Center from their communities or elsewhere?

Will the Center conduct tailored interventions for individual clients, will interventions be aimed at a whole group/community, or will the Center used a mixed approach?

CONSIDERATION 32.1

It is important to ensure that the identified goals and objectives are observable and measureable. The use of quantitative measurements will also support the evaluation processes, especially in relation to identified benchmarks.

CONSIDERATION 32.2

There are a variety of approaches and methods that can be used in the Center to ensure that the client does not continue to support or participate in violent extremism. The Center should determine if its interventions will focus on approaches to disengagement or deradicalization, or a combination of both.[133] There is disagreement on which methods are most successful, and therefore the Center should choose the methods that best fit their own context.

132 GCTF, "Malta Principles for Reintegrating Returning Foreign Terrorist Fighters," GCTF (2016), https://s3-eu-central-1.amazonaws.com/hedayah-wp-offload/hedayah/wp-content/uploads/2019/07/09143258/File-26102016223519.pdf.
133 See Section "Glossary and Key Terms" for the definitions of disengagement and deradicalization.

CONSIDERATION 32.3	CONSIDERATION 32.4
The Center should determine the custodial and residency requirements of the clients in the Center, and how these affect the objectives.	Terminology is important in setting up the goals and objectives of the Center, and there should be clear guidance on what terms mean in the local context, and how they are applied in practice at the Center.

CONSIDERATION 32.5
Goals and objectives directly relate to how progress and success are determined at the Center. It is advised that the final objective of the Center is not simply focused on the recidivism rates, but considers the progress that individual clients make towards their individual goals.

In some circumstances, it was determined that the goal of a rehabilitation and reintegration program was mostly focused on disengagement. In general, disengagement programs focus on preventing the individual from using violence in the future to achieve their aims, and instead provide more constructive ways to address grievances, frustrations, anger and other emotions. For example, the Centre for the Prevention of Radicalization Leading to Violence (CPRLV) in Canada approaches their programs through disengagement, with the main objective to prevent the client from using violence in the future to carry out their ideological objectives. The CPRLV takes this approach because they handle diverse clients, including right-wing extremists, politico-religious extremists, left-wing extremists and single-issue extremists, and therefore, their practitioners are trained on psychological and social restorative methods, rather than religious scholarship for example.

In other circumstances, deradicalization may be the main goal. Deradicalization programs generally focus on cognitive changes that include de-constructing the ideological justifications and narratives for violence. For example, in Malaysia, the Royal Malaysian Police (RMP) and the Department of Islamic Development (JAKIM) manage a deradicalization program at the Kamunting Prison. The objectives of this program are to: 1) undermine the radical ideology motivating the prisoner; 2) instill appropriate civic values in the client; 3) provide psychological support to increase self-worth and self-esteem; and 4) provide vocational training for life after release. The program focuses on religious classes, which take place every day and include both internal experts as well as guest talks by outside experts.[134] It should be noted that for deradicalization programs to be successful, it should first be determined that the motivations behind radicalization in the first place are largely ideological, and not motivated by other political, economic or social grievances. See the chapters on "Center-Based Interventions: Rehabilitation" and "External Interventions: Reintegration" for more information relevant to terminology, interventions and the measures of success.

GUIDING PRINCIPLE 33

Consider institutionalizing a special department/team within the Center or separate outreach center for community engagement and buy-in.

When the client is released from the Center and returns to a community, there needs to be preparations for both the individual and the community. A specialized department or outreach center could focus on

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[134] Subramaniam, "Contribution to Hedayah's Program."

restorative and reconciliation work with the community, support reintegration, and build or re-build trust with the receiving communities. The focus should be on preparing and developing a process built on restorative justice principles and practices aiming at reconciliation. See the section "Community Engagement" under the chapter on "External Interventions: Reintegration" for more information on the potential approach and roles for such a department/center.[135]

135 Örell, "Contribution to Hedayah's Program."

DEVELOPMENT OF STANDARD OPERATING PROCEDURES (SOPs)

This section will provide guidance for what considerations should be made in developing standard operating procedures (SOPs) for the Center.

> **GUIDING PRINCIPLE 34**
>
> Establish Standard Operating Procedures (SOPs) that cover all aspects of the Center's operations.

In alignment with the "Prison Management Recommendations to Counter and Address Prison Radicalization" to "ensure that there are clear and transparent management policies in place that are fully implemented,"[136] the procedures in place should be clear and transparent to all relevant parties involved in the Center. It is advised that the SOPs are signed-off by all relevant staff members after they are trained on them to ensure accountability.

When developing SOPs for the Center, a non-exhaustive list of topics that should receive focus is:

○ Reference documents for the Center's goals, objectives, vision and mission.

○ Processes and procedures for liaising with any multi-agency or oversight/coordination body.

○ Structure and hierarchy of the staff of the Center, including clear supervisor and management roles.

○ Structure and hierarchy of external experts, contractors and other visitors, including clear management, authority and decision-making roles.

○ Structure and hierarchy as well as processes of reporting problems, challenges, issues and successes of client behavior.

○ Procedures related to human resources to monitor staff's performance and progress regularly, including identifying future training needs.

○ Code of ethics and professional conduct in alignment with all international, national and local laws. It is advised that this code of ethics is publically-available to support transparency.

○ Procedures for holding staff accountable, specifically to combat corruption, violation of human rights and/or negligence.

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136 International Institute for Criminal Justice and Rule of Law (IIJ), "Prison Management Recommendations."

○ Legal status and necessary security clearances and protocol for information-sharing, for Center staff and external experts.

○ A process for transparent advertising and hiring of full-time and part-time employees that includes sufficient information provided to candidates about the nature of the work. The Center may want to consider entry assessment procedures to screen potential staff.

○ A training plan for induction-training for new staff, as well as ongoing capacity-building and advanced-training to ensure staff are up-to-date on the latest techniques and treatments, where relevant.

○ Security procedures and protocols for staff, clients and visitors, including for IT and information security.

○ Processes and procedures for internal communications between staff members and external experts, including how to manage cases, structure meetings, share intelligence, and otherwise share information that can benefit the rehabilitation and reintegration process for the client.

○ Standardized formats for record-keeping and intelligence gathering that maintain confidentiality and accuracy.

○ Procurement processes for purchasing equipment and materials in line with safety and health standards.

○ Processes and procedures for financial management, reporting and oversight.

○ Processes and procedures for external communications, including to visitors, family members, government entities, and the press/media. This may include a dedicated outreach team that helps to secure buy-in and involvement from the community.

○ Procedures for intake, risk assessments, needs and strengths assessments and continuous monitoring/assessments of clients. These procedures should take into consideration the "United Nations Standard Minimum Rules for the Treatment of Prisoners" (Nelson Mandela Rules)[137] and the "United Nations Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders" (Bangkok Rules),[138] including any relevant regulations for female or child clients as well as dependent children.

○ Rules, regulations and expectations for client conduct and behavior.

○ Processes and procedures for implementing different types of interventions, to include psychological, social, educational, religious and recreational types of interventions.

○ Processes and procedures for transitioning the client to the community. This may include specific criteria for access to funding, loans, grants or a livelihood package.

○ Disciplinary procedures including written specific, transparent, and appropriate sanctions and safety precautions in case the client does not follow set rules and regulations.

○ Processes and procedures for monitoring, measurement, evaluation and reporting (financial, operational, and in terms of the Center's impact).

○ Quality assurance processes that match performance with relevant established standards and principles for correctional facilities.

○ Processes and procedures for regular inspection, feedback and oversight.

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137 United Nations, "Standard Minimum Rules for the Treatment of Prisoners."
138 United Nations, "Rules for the Treatment of Women Prisoners."

GUIDING PRINCIPLE 35

Prioritize the safety and security of staff, visitors and
clients through all SOPs.

When developing SOPs for the Center, the safety and security of all staff, visitors and clients should be paramount and well-documented. All relevant staff, visitors and clients also should be made aware of the procedures that may impact them.

CONSIDERATION 35.1

Appropriate delegation of authority should be given to staff members and visitors that are interacting with clients at the Center. The delegation of authority should be sufficient to act or react with decision-making power if the safety or security of any staff, visitor, or client is threatened, especially violently.

CONSIDERATION 35.2

Appropriate mechanisms should be put into place to create a reporting environment where concerns can be raised early to management and supervisors, with time to act.

CONSIDERATION 35.3

Appropriate procedures should be developed and implemented to ensure that staff are protecting their mental health. They should be confident to talk about their needs, receive counseling where necessary, receive appropriate training on mental health issues, and be provided opportunities and time for self-care.

CONSIDERATION 35.4

Specific considerations for safety and security related to dependent children of clients, or juvenile clients, should be put into place.

GUIDING PRINCIPLE 36

Standardize interventions and approaches provided within the Center through SOPs, and develop a manual for these approaches.

The SOPs should include the development of a manual for staff training, as well as a manual for the implementation of interventions which they are trained to follow. There should be a scientific approach to implementation, and the SOPs should ensure that all staff are trained consistently. Establishing these types of systems and models will greatly support the center to overcome the challenges faced by the individualization of treatments. In this regard, an overarching approach would be prescribed within a manual, however, the SOPs should also ensure the tailoring of responses based on assessments.

The benefit of having a model is that staff can be trained on the program and then deliver individualization at the client level. The overall program could be prescribed and then the necessary elements for individualization would be constructed within the programmatic framework.[139] Furthermore, the standardization of interventions and procedures may provide a basis for planning, evaluating, and guiding the development of future initiatives.[140]

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[139] Patrick Tyler, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
[140] John Horgan and Kurt Braddock, "Rehabilitating the Terrorists?: Challenges in Assessing the Effectiveness of De-radicalization Programs," Terrorism and Political Violence, 22 no. 2 (2010): 267-291.

BUDGET AND FINANCE

This section will outline key considerations and principles for setting up a budget and financial process for the Center, with a focus on the elements that may be different than other basic budgetary considerations and unique to the rehabilitation and reintegration theme.

GUIDING PRINCIPLE 37

Ensure sufficient resources are dedicated to the requirements of the interventions conducted at the Center.

The resources available should support the rehabilitation and reintegration processes. See the chapters on "Physical Structure and Resources" and "Human Resources" for more information on the resources likely to be required for the Center.

CONSIDERATION 37.1

The independence of the Center's decision-making should be protected from the funding source. Ideally, the source of the funding should not be able to significantly influence the details of rehabilitation and reintegration methods, by either withdrawing it if they are unhappy about the work or make demands connected with the funding.[141] However, usual oversight of a government-funded entity should still apply.

CONSIDERATION 37.2

Decision-making related to a client's intervention should not be determined solely on the budget available.

CONSIDERATION 37.3

Ensure there is sufficient funding available to support the staff salaries, well-being and ongoing training. Staff are the critical component that will ensure the Center's success.

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[141] Järvå, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 38

For contexts where funds are lacking, consider combining
local funds with international funds.

Adequate funding should be consistently available from the host country to ensure sustainability of the Center for the duration of its tenure. However, in many circumstances it may be feasible to secure additional funding from external and international sources.

CONSIDERATION 38.1

Funding from external donors may only be available for 1-2 years at a time in terms of commitment. Center management should prioritize mobilizing multiple donors that can share the burden or coordinate when funding from one donor is no longer available. Center management may also advocate for longer-term funding, with stipulations for how the funding can be audited and re-approved every year.[142]

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[142] Bryson, "Contribution to Hedayah's Program."

3

PHYSICAL STRUCTURE AND RESOURCES

> Location of the Center

> Center Infrastructure

> Materials and Consumables

This chapter provides guidance on the physical structure and resources required for a rehabilitation and reintegration center. This includes principles for where the Center could be located, requirements for the Center's infrastructure, and guidance on the materials and consumables which may be required.

LOCATION OF THE CENTER

This section will provide guidance on conducting research and defining the context in preparation for the creation of the Center and on the techniques to be used within the Center.

GUIDING PRINCIPLE 39

Consider a variety of factors in selecting the location for the Center.

Selecting the location for the Center may have potential impacts on the types of activities and engagements the center are able to implement.

CONSIDERATION 39.1	CONSIDERATION 39.2

One critical factor to consider is the Center's proximity to the communities of origin of clients and potential recipient communities for reintegration. Having a Center based near such communities may support the process of involving family and community members during the rehabilitation process. If the Center is too far from such communities, there may be a financial burden on these individuals when traveling to the Center, and the government may need to consider whether to provide financial support.[143] Additionally, having the Center close to the community may help to demystify the process and support community acceptance.[144] However, if the community are determined to be a contributory factor towards the radicalization or sympathetic to the Center's clients, this may bring risks for the Center and these should be considered within a wider threats and risks assessment.

The location of the Center in relation to the courts and relevant government agencies may be important. If the clients are likely to visit other government institutions, it may be appropriate to host the Center in close proximity. The cost of regularly transporting clients between institutions may become costly if the distance is vast.

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[143] Group Discussion, "Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[144] Järvå, "Contribution to Hedayah's Program."

CONSIDERATION 39.3

Consider whether it would be beneficial to be in close proximity to other practical establishments or organizations that could assist with rehabilitation and reintegration, such as: universities, sports facilities, library, vocational training locations, and businesses for work, among others.

CONSIDERATION 39.4

The location of the Center may also have potential impacts for the engagement of staff and external experts. Whilst hosting the Center in a remote area may be considered appropriate for security reasons, it may reduce the potential pool of external experts willing to support the Center's programs.[145]

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[145] Shah Salman Khan, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

INFRASTRUCTURE OF THE CENTER

In order to be effective, the physical structure and layout of the Center must support the delivery of key services to the clients and support the efficient running of the Center, whilst simultaneously ensuring a secure environment.

GUIDING PRINCIPLE 40

The infrastructure of the Center should contain suitable physical spaces for the effective delivery of key client services and supporting services.

When considering the spaces and rooms to be included within the Center, considerations should not only focus on safety and security, but also the interventions and activities being conducted in pursuit of effective rehabilitation and reintegration.

CONSIDERATION 40.1

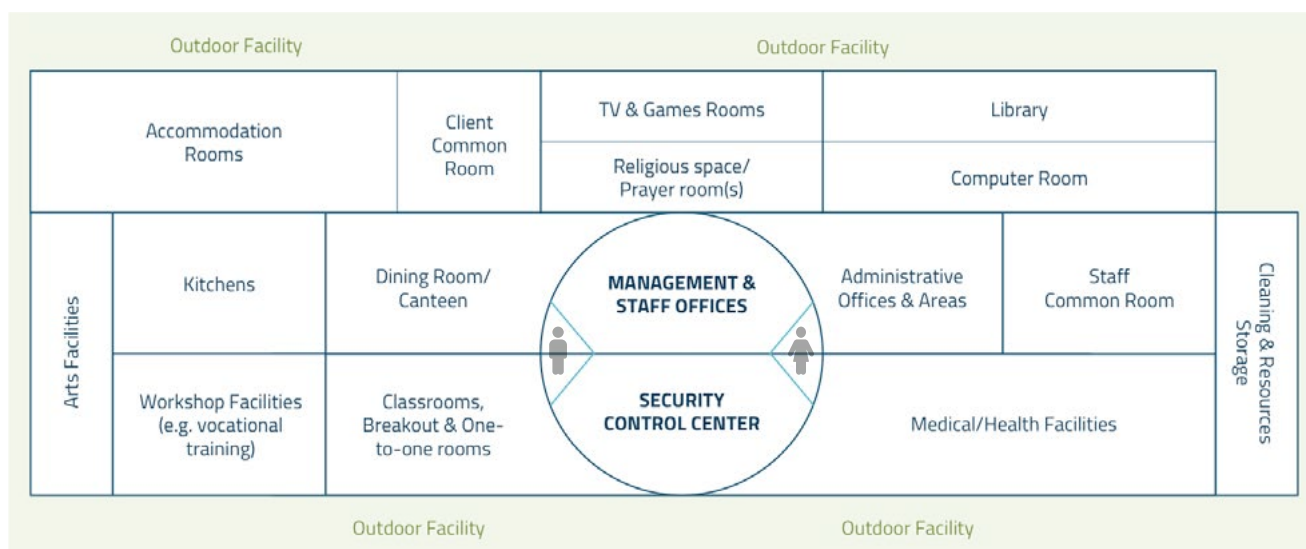The Center could contain the following rooms/areas*:

FIGURE 2 Infrastructure of the Center

This diagram is for illustrative purposes, and should not be considered an accurate representation of a facility layout.

All of the above should take into account the appropriate gender separation options and the needs of children, if they will receive services in the Center.

CONSIDERATION 40.2

The location of the Center could make use, when appropriate, of nearby public spaces and facilities, including: indoor and outdoor sports facilities, parks, library, cafes, and cinema.

CONSIDERATION 40.3

Dependent on the security risks, it may be necessary to have staff accommodation available on site for temporary or permanent use. This factor should be included in the threats and risk assessment for the Center.

GUIDING PRINCIPLE 41

Ensure the physical set up and equipment available at the Center are conducive towards the intended effects of rehabilitation and reintegration.

This principle is not just limited to the necessary rooms available, but how that space available can influence the rehabilitation and reintegration processes. This principle also relates to materials and consumables (see the section "Materials and Consumables" under this chapter).

While the presence of equipment or space may meet certain minimum criteria in alignment with international or national standards, there should also be a reflection on how the availability of such space and equipment can either facilitate or impede the rehabilitation or reintegration process. For example, living or sleeping areas that do not meet minimum standards of space for sleeping or living can impede psychological progress; children that do not have access to safe play areas will experience limited learning or growth; and if the facilities provided for one-on-one conversations present a hostile environment, this may be counterproductive to building trust and holding effective conversations with clients.

MATERIALS AND CONSUMABLES

The efficient and effective running of the center will rely upon the timely provision of necessary materials and consumables.

> **GUIDING PRINCIPLE 42**
>
> Furnish and equip the Center's building(s) to support the effective delivery of client services and supporting services.

The Center should be suitably furnished and equipped in a manner that ensures the consistent safety and security of all individuals within the center, including visitors, as well as the effective implementation of rehabilitation and reintegration programs.

A non-exhaustive list of materials and consumables for consideration is provided below:

TABLE 2: **MATERIALS AND CONSUMABLES TO BE CONSIDERED FOR THE CENTER**	
SUBJECT	**POTENTIAL EQUIPMENT NEEDED**
SECURITY	▪ Fire and emergency alarms ▪ Security systems, including access control, locks, alarms and CCTV ▪ Firefighting equipment, sprinkler systems and fire extinguishers
INFORMATION	▪ The Center's regulations through an accessible notice or hardcopy ▪ Daily routine, through an accessible notice or hardcopy
FURNITURE	▪ Desks, tables and chairs for offices ▪ Desks, tables and chairs for classroom-style set-ups ▪ Sofas, armchairs and tables for work areas, common rooms and one-on-one meeting rooms ▪ Tables and benches for dining area ▪ Shelving for storage and library ▪ Beds and storage for accommodations ▪ Benches and lockers for changing rooms and showers

MEDICAL	- Medical beds, sheets and pillows - Standard medical equipment - First aid kits - Lockable cabinets for medical supplies
KITCHEN	Kitchen fittings and equipment such as cutlery, crockery, serving trolleys and trays, water dispensers
HYGIENE AND CLEANING	- Toilets, stalls - Showers, locker areas - Cleaning equipment such as mops, floor cleaners
IT	- Computers or laptops and printers - Security-related equipment such as displays for CCTV and security software - Cameras and memory cards - Televisions, projectors, stereos
RECREATIONAL	- Arts and craft equipment and tools - Equipment for sports (indoor and outdoor), including hoops/goals, nets, balls, protective equipment, sports clothing and footwear - Books, movies and other library items, including for language learning, educational textbooks, religious texts and vocational training - Theatre stage and props - Toys and play equipment for clients and/or visitors (if relevant)
CONSUMABLES *i.e. items in need for regular restocking*	- Catering needs, including food and water - Cleaning materials - Medical supplies - Hygiene materials - IT and electronic items such as batteries, printer ink and paper - Art materials (e.g. paint, brushes, paper, etc.) - Hobby or vocational training materials (e.g. wood for woodworking)

> **GUIDING PRINCIPLE 43**
>
> Ensure that safety and security measures are at the forefront of the Center's design, including limiting clients' access to dangerous or harmful materials.

Equipment that could be leveraged as a weapon or otherwise used to cause harm to self or others should be stored appropriately and not accessible to clients without appropriate permissions. This could include locking away chemicals or medicines, storing sharp objects such as knives or kitchen equipment appropriately (and with security procedures in place for anyone with access), or avoiding glass materials that could easily be broken. As the risk level related to violent extremism may be higher than average, it is important that these details are not overlooked in the procurement processes for equipment and materials. Appropriate risk assessments should be conducted in reference to any materials stored or placed in locations accessible to the Center's clients.

CASE STUDY: SERENDI CENTER, SOMALIA[146]

In Somalia, the main rehabilitation center for terrorists is called the Serendi Center. Prior to 2016, this center was only minimally furnished, for example with basic mattresses, sheets and mosquito nets. However, a renovation in 2016 took place to ensure adequate security, nutrition, healthcare, and physical facilities that also improved the quality of rehabilitation for clients. The dormitories were equipped with new bunk beds and lockable personal storage boxes. The vocational skills workshop spaces also received renovations, including the establishment of a barbershop as an alternative option. The center also gained a remodeled medical center, canteen, kitchen block, leisure room, and sports facilities, including football and basketball courts. This allowed clients to access more opportunities for their processes of rehabilitation.

During a review of the center, all interviewees who visited the center acknowledged the significant improvements, in comparison to the year before. In fact, during October 2016 to September 2017, 91% of the residents (64 out of 70) reported during interviews that they were satisfied with the facilities. This was a sharp increase compared to 60% (50 out of 83), when interviewed before the refurbishment. In fact, according to the Royal United Services Institute for Defence and Security Studies, the center has become much more functional since the changes were implemented.

146 James Khalil, Rory Brown, Chris Chant, Peter Olowo and Nick Wood, "Deradicalisation and Disengagement in Somalia Evidence from a Rehabilitation Programme for Former Members of Al-Shabaab," Whitehall Report 4-18, Royal United Services Institute for Defence and Security Studies (2019), https://rusi.org/sites/default/files/20190104_whr_4-18_deradicalisation_and_disengagement_in_somalia_web.pdf.

4 HUMAN RESOURCES

> Qualifications, skills and profiles
> Capacity-building and training needs
> Management of human resources
> Staff well-being

This chapter describes the necessary human resources needed for the Center, to include qualifications, capacity-building and training, management processes for human resources, and approaches to mental well-being. This section does not cover all general HR aspects related to the Center, rather only those that are unique to the circumstances of a rehabilitation and reintegration Center. Standard HR practices should also be established, applied and implemented at the Center. Other relevant documents, such as the UNODC Handbook on the Management of Violent Extremist Prisoners and the Prevention of Radicalization to Violence in Prisons and the EU Guidelines Regarding Recruitment, Selection, Education, Training and Professional Development of Prison and Probation Staff, would be complementary to this section and provide recommendations which could be tailored to the local context and situation where relevant.

QUALIFICATIONS, SKILLS AND PROFILES

This section covers the qualifications, skills and profiles of both the Center's core staff and external experts or practitioners that may be needed to run the rehabilitation and reintegration work.

GENERAL PRINCIPLES

This section provides an overview of the traits and qualities related to the personnel and human resources of the Center.

GUIDING PRINCIPLE 44

Ensure all core staff and external experts, particularly those who interact directly with clients, have a general sense of empathy, compassion, altruistic tendencies, and humanistic qualities.

Because of the nature of violent extremist offenders and clients, it is important that core staff are able to view the clients as fellow humans. The clients will already be facing large obstacles related to stigma and shame, and in order to facilitate a successful rehabilitation and reintegration process, the core staff should be able to create a supportive environment where bias and judgement are reserved. Staff should also be able to model anti-extremism behaviors, to include open-mindedness, tolerant behavior and respect. Moreover, it will be critical for the core staff to genuinely believe that rehabilitation and reintegration are possible.[147] Where possible, recruiters and trainers interested in enhancing positive behaviors of new recruits and existing staff should be aware that implicit attitudes are often better predictors of behavior than reported explicit attitudes.[148]

CONSIDERATION 44.1	CONSIDERATION 44.2
Questions about empathy and bias can be embedded in the interview questions for core staff and experts. These values can also be tested in the procurement process for contractors and core values can be embedded in the language of the contracts to ensure integrity, empathy and respect for clients.	Regular training for core staff should be provided on how to manage bias and stigmas throughout the process of rehabilitation and reintegration. As a result of this training, staff should be able to embody these skills through their own behavior.

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[147] Iruayenama, "Contribution to Hedayah's Program."
[148] Mahzarin Banaji and Anthony Greenwald. "Blindspot: Hidden biases of good people," New York: Delcorte Press (2013).

> ## GUIDING PRINCIPLE 45
>
> Ensure the staff have resilience qualities and skills that protect them from attempts by clients to manipulate, or in some cases radicalize them.

Clients may be hostile to the Center staff, and may attempt to manipulate or corrupt staff. High ethical standards of those recruited to work in the Center are therefore necessary. It is important that anti-corruption measures and accountability are put in place to make sure that staff are not manipulated in this way. Manipulation and corruption can lead to unfair treatment or advantaged treatment of certain clients, which may in turn jeopardize the processes of rehabilitation and reintegration being undertaken by other staff members.

In addition, staff of the Center may be subjected to personal attacks. For example, staff members of a different religion or sect may be antagonized, or female staff members may receive derogatory treatment from some clients.

In some cases, the staff may be subjected to ideologies or coercion that increases the risk of staff themselves becoming radicalized. In fact, some violent extremist leaders train their recruits to resist efforts of deradicalization and disengagement, or trick the system into thinking they have made progress.[149] This means the Center staff may be unknowingly subjected to highly-radicalized individuals, even if the assessment of those clients is that of low risk. For these reasons, staff should also use complementary observational methods when working with clients and be ready to update the profiles of clients in light of new information or observations.

Appropriate screening of potential staff members on their personal resilience is crucial. Human resource policies should contain safeguards that ensure recruited staff do not have any previous affiliations with violent extremism, terrorism, gangs or organized crime. In addition, sufficient check-ins from management on staff mental health and appropriate accountability procedures may help identify potential signs of radicalization early and facilitate non-punitive measures to ensure the staff is back on the correct track. The Center may also consider the importance of providing training to the staff, in order to recognize the recruitment and radicalization techniques employed by violent extremists[150] and to develop or enhance their resilience and skills that may help them avoid manipulation by clients. See the section "Staff Well-Being" within this chapter, for more information on staff resilience and mental health.

CORE STAFF

This section highlights the qualifications, skills and profiles of the Center's core staff. The core staff include full-time and part-time work that regularly participate in the Center's activities. This includes administrative, security and management staff, as well as practitioners involved in the interventions.

> ## GUIDING PRINCIPLE 46
>
> Promote a hiring policy that focuses on diversity, including the diverse needs of clients.

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[149] Group Discussion, "Hedayah's Program on Rehabilitation and Reintegration."
[150] Christopher Dean and Eelco Kessels, "Compendium of Good Practices in the Rehabilitation and Reintegration of Violent Extremist Offenders," Global Center on Cooperative Security (2018): 68.

Hiring policies should comply with local and international anti-discrimination laws. At the same time, having a diverse staff can aid in the rehabilitation and reintegration process for various reasons. In addition, diversity of staff also helps in ensuring needs of clients are met appropriately.

CONSIDERATION 46.1	CONSIDERATION 46.2
Diversity in terms of ethnic, racial, religious and cultural backgrounds can expose clients to different experiences and reduce binary or "black and white" thinking that de-humanizes people other than those in their "in-group."	The language (and dialect) needs of clients should also be considered when recruiting staff.

CONSIDERATION 46.3	CONSIDERATION 46.4
Diversity aids in relationship-building with diverse clients. Having staff that are able to connect with clients on cultural or ethnic background can aid in the transition process where trust is not easily developed.[151] For example, a client may find common ground with someone of similar ethnic background, even though they represent a government as a corrections officer, which could come with mistrust and skepticism.	Diversity in staff helps to overcome cultural blind spots or inherent bias. A diverse staff may be better able to find solutions and opportunities to help a client.

CONSIDERATION 46.5	CONSIDERATION 46.6
Diversity in terms of gender ensures that clients that may be sensitive to gender differences can be accommodated. For example, certain facilities for female clients such as showers and changing rooms may only be accessed by female staff, and therefore it is important that there are sufficient female staff to access and monitor those areas (to include, for example, coaches, mentors, cleaners and security guards). Notably, gender diversity should take into account the actual needs of clients, and not assign gender roles based on pre-conceived notions. For example, it may be the case that a female client prefers a male psychologist, but a female sports trainer. Allowing the client to have a say in these options may increase opportunities for bonding.	Diversity in the staff as a whole helps the reintegration process because it prepares clients for real life. Access and exposure to individuals with different cultural backgrounds present in the community can help with this process.

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[151] UNODC "Handbook on the Management of Violent Extremist Prisoners."

It may be beneficial to recruit international experts who directly or indirectly engage with clients, especially in the early stages of the Center's start-up. As the capacity of national staff are built, the international experts may be reduced.

GUIDING PRINCIPLE 47

Require appropriate experience and qualifications for core staff working with clients that have exposure to violent extremism.

This is particularly important if some of the clients are assessed as "high risk" in terms of radicalization or in terms of safety. The staff should meet minimum educational requirements, complete specialist accredited programs (where possible), and also meet state or national government licensure requirements for the work performed. If not appropriately accredited or trained, Center staff could risk violating the "do no harm" principle. This is in alignment with the "Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders," Good Practice Number 5, which states: "Ensure, as appropriate, that all relevant staff are professionally trained and educated to deal with the complexities of reintegration or rehabilitation efforts."[152]

CONSIDERATION 47.1

CONSIDERATION 47.2

In the absence of appropriate accreditation, a university degree or vocational training in a subject related to their area of expertise is recommended. In the case that educational requirements are not able to be met in certain contexts, Center management should make a concerted effort to train the Center staff with appropriate skills using resources from appropriate national/international bodies and partners. It may be the case that willingness and ability to learn new material are more critical than a degree or accreditation if resources or available talent are scarce.

Not all Center staff need to be accredited for the rehabilitation and reintegration interventions, but should at least be provided training on these techniques. This means that the Center management should consider also hiring staff with technical or contextual knowledge of the local working environment (e.g. sports trainers, vocational experts) and provide appropriate training to assist in their work with the specific cohort of clients in the Center.

CONSIDERATION 47.3

In the case that resources are not sufficient, national officers (such as prison officers or corrections officers) may be loaned to the Center on a temporary basis until appropriate staff are hired or trained. In the case that local knowledge is not sufficient to support the full staff of the Center, international experts may be

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152 GCTF, "Rome Memorandum."

considered to fulfill roles on a temporary basis. Where international experts are employed, they should then prioritize transferring relevant knowledge and skills to local staff for sustainability. International experts may also be engaged to develop training manuals and operational protocols, which can be further contextualized by other local experts.

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A sample list of qualifications for Center staff is listed in the following table. This list should not be seen as exhaustive, but may provide some suggestions for staff qualifications that can be adapted to the local country context. This list was collated from discussions throughout Hedayah's program,[153] with references to the EU "Guidelines Regarding Recruitment, Selection, Education, Training and Professional Development of Prison and Probation Staff."[154]

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[153] Iruayenama, "Contribution to Hedayah's Program."
[154] Council of Europe, "Guidelines Regarding Recruitment, Selection, Education, Training and Professional Development of Prison and Probation Staff," Council of Europe (2019), https://rm.coe.int/guidelines-training-staff/1680943aad.

TABLE 3: **EXAMPLE LIST OF QUALIFICATIONS FOR THE CENTER'S STAFF**		
PRACTITIONER	**ROLE OR SERVICES**	**SAMPLE REQUIREMENTS**
CORRECTIONAL EXPERTS	Manage the day-to-day interactions and activities of the Center.	▪ In many countries, a formal degree is not required, but training should be provided upon hiring. It is recommended that the education should be at least a high school level for non-managerial staff and higher for managerial staff. ▪ Training should focus on security and correctional practices, and can take place either on the job or in specialized academies. ▪ Extra care should be taken to screen the capabilities of rehabilitation and reintegration Center staff, and it is advised to use experienced correctional officers for the Center.
PSYCHOLOGISTS/ COUNSELORS	Provide counseling and individualized interventions to clients based on fundamental understandings of motivations, ideologies, psychological constructs and attitudes. These practitioners generally work to reduce risk factors and needs, and build protective factors intrinsically within the client.	▪ Higher-educational degree in counseling, psychology or a related field. Most countries require a Master's or Doctorate level degree for professional counseling. ▪ Licensing requirements vary across jurisdictions and types of services. The Center should employ psychologists that meet minimum licensing standards. ▪ Due to the high-risk nature of the clients, it is advised that more experienced psychologists or counselors are employed, or that psychologists or counselors with specific experience working with violent extremist clients are employed at the beginning.
SOCIAL WORKERS	Complement the psychologists and counselors by addressing external psychological constructs related to social interactions, and reinforce protective factors that result in pro-social behaviors. In many countries, social workers are also trained mental health therapists/ counselors.	▪ Bachelor's or advanced degrees in a related field to youth or social work is recommended for this type of position. ▪ Depending on the national context, social workers may also be licensed professionals. ▪ Social workers should also be trained on how to build pro-social skills within clients, and particularly how to deal with aggressive or violent attitudes and behavior.
TEACHERS	Provide instruction and guidance in independent learning skills. May be especially important for Centers that include children.	▪ Bachelor's or advanced degrees in education. ▪ It is recommended that the teachers employed by the Center have experience dealing with the general cohort of ages of the children at the Center. For example, if a majority of the children are in primary school, a teacher with primary school experience is advised. ▪ A basic knowledge of developmental psychology or child development is also useful for this position, especially related to violent or aggressive children, or how to handle trauma.

COACHES, TRAINERS, ART INSTRUCTORS, MENTORS, VOCATIONAL EXPERTS	Provide technical knowledge and skills related to sports, arts, music or other outlets that can help clients express grievances or frustrations. Provide technical skills related to vocation, such as welding, carpentry, mechanics, to assist with the client obtaining employment after being released from the Center.	▪ Some education or experience in their area of work should be required. For example, a coach or trainer should have at least several years of experience successfully training individuals or a team of a similar age category to the clients in the Center. An artist or musician should have sufficient talent to teach their profession to the clients. Vocational experts should have the ability to both operationalize their craft, as well as teach their craft. ▪ Official accreditation is not required for this category of staff, unless required by law, although it may be advantageous to recruit those who are members of relevant bodies – e.g., professional associations. ▪ Practitioners in this category should build on teachable moments to impart interpersonal relationship skills as well as other prosocial skills and anger management.
RELIGIOUS ADVISORS OR RELIGIOUS LEADERS	Provide religious mentorship to clients, open dialogues about ideological and religious issues.	▪ Appropriate certifications or qualifications under the national or local religious authorities for the country. As this varies from country-to-country and between religions, the criteria may not be as clear-cut as in other staff circumstances. ▪ Strong foundational knowledge in their own religion, and respect within the local religious community. ▪ Religious leaders working with clients should have specific knowledge of counter-arguments to claims by violent extremist organizations. Clients with strong ideological beliefs will challenge and test religious leaders for their credibility before forming any sort of attachment to them.[155] ▪ Special considerations for religious leaders may be further found in the "Additional Guidance on the Role of Religious Scholars and other Ideological Experts in Rehabilitation and Reintegration Programmes,"[156] created by UNICRI for the GCTF.
COMMUNITY LIAISON OFFICERS	Provide contextually relevant information to the community and to the Center. Acts as the go-between for ensuring a smooth transition for reintegration when it comes to communication and media relations.	▪ Degree or other qualifications in communications. ▪ Knowledge or experience with communications campaigns that involve sensitive topics, especially for governments. ▪ In-depth knowledge of historical and contemporary grievances in communities of interest. ▪ In-depth knowledge of historical and contemporary drivers of radicalization leading to violent extremism in communities of interest.

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155 Group Discussion, "Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
156 UNICRI, "Additional Guidance on the Role of Religious Scholars."

AFTER-CARE EXPERTS, PROBATION STAFF (MAY BE EXTERNAL), AND LAW ENFORCEMENT OFFICERS	Provide psychological and/or social care to the client as they are transitioning out of the Center, and for a specific time period after release. Interview the client and/or assess readiness for release.	- Bachelor's or advanced degree in criminology, sociology or related field is recommended for this type of position. Probation staff can be trained on building trust and social connections to clients, how to handle cases, and most importantly, how to monitor clients for potential recidivism. - In some national contexts, aftercare specialists may be social workers that require a professional license. - Aftercare may also be overseen by the responsible case manager, whose role continues from the rehabilitation phase into reintegration. These categories of staff are often licensed professionals.
MEDICAL PROFESSIONALS	Provide physical health care to client to ensure their physical well-being. Provide mental health care to client, in coordination with Center psychologists, in the case of a mental health disorder.	- Advanced degree in medicine as regulated in the country. Appropriate certifications and licenses should also be obtained to ensure the medical professionals can practice medicine inside the Center. A candidate with general practice knowledge is preferred. - Ideally, medical professionals within the Center should also have expertise in dealing with violence and trauma, as well as some knowledge of mental health and/or substance abuse.
ADMINISTRATIVE STAFF (E.G. COOKS, CLEANERS, SECRETARIAL**)**	Provide logistical and operational support to the Center's main functions.	Depending on the job and responsibilities, at least a basic high school education may be required for these positions. Alternatively, for specialized jobs (such as cooking), some minimum training or experience and certification in the appropriate field should be required. For administrative staff, it may be that education is not as important to the position as the staffs' attitude, literacy and numeracy skills, ability to learn and eagerness to support the Center.
MANAGEMENT	Oversee the day-to-day operations of the Center (including operations and budget), review and oversee client cases, manage interactions with the community, and liaise with the inter-agency body and/or oversight committee for the Center.	Management positions in the Center should be held by individuals with at least a university degree in management, and/or significant experience (10+ years) managing correctional facilities. Building on other principles in this document, the potential candidates should be screened to align with values and working culture that are determined priorities for the Center. For example, the management should understand the advantages of dynamic security, and aim to create a culture of feedback in the Center. The management should also be screened for values such as diversity, non-judgement and inclusivity. Finally, the management should consider the safety, security and mental well-being of their staff, clients and visitors as a priority.

EXTERNAL SPECIALISTS AND PARTNERSHIPS

GUIDING PRINCIPLE 48

Leverage local talents and skills from the community to fill specific roles where Center staff are unable to meet clients' needs.

Needs and strengths assessments may reveal a variety of potential options for interventions with clients, but the core Center staff may not have the background or talent to facilitate those types of interventions. As such, the Center can leverage contracting opportunities to allow certain individuals to visit the Center on a part-time or ad hoc basis to help facilitate entry points for rehabilitation and reintegration. For example, the vocational aspirations of clients may be very diverse, and it is unlikely that the Center would have a staff that could train clients on all different types of vocational opportunities. In this case, it may be useful to partner with local businesses or business associations to provide tailored training for clients based on their aspirations or abilities. As the client transitions back into the community, these external contacts can also be leveraged to help facilitate a smoother reintegration process.

CONSIDERATION 48.1

One group of individuals that may be influential with the rehabilitation and reintegration processes is former violent extremists. It may be the case that former violent extremists that have been through the process of disengagement, deradicalization, rehabilitation and reintegration can serve as mentors to clients at the Center. Testimonials and stories of their process and progress can be inspiring to clients and help with their own processes. At the same time, formers may be seen as "traitors" to the cohort of clients at the Center, so it is important that the individual interaction between clients and formers is evaluated regularly and steps are taken toward protecting the personal information of formers, such as their home or work address. Finally, it is critical to vet former violent extremists to ensure they are not at-risk to being radicalized again, or that they are not posturing in order to infiltrate the system.

CONSIDERATION 48.2

A second group of individuals that could be influential to the process is victims of terrorist attacks or community violence. Victims' voices and stories can have an impact by providing a human face to the consequences of terrorism, with the aim that clients may disengage from violence if they see the effects first-hand. Engaging with victims also provides opportunities for both clients and the victims themselves to approach reconciliation. It is important that if a Center leverages the presence of victims and their stories, that special attention is paid to avoid re-victimization in the case that certain clients cannot appropriately interact with the victims and/or the presence of the clients act as a trigger for mental health distress in the victims.

CONSIDERATION 48.3

There is a role to play for private sector partnerships, which is especially critical for vocational training, apprenticeships, and connections for jobs after the client exits the Center.

CONSIDERATION 48.4

Religious leaders may be sourced from outside the Center, and can serve as mentors and religious counselors on a regular basis. In addition, guest lecturers may be used for more ad hoc or specialized topics.

CONSIDERATION 48.5

Sports coaches and trainers may also be leveraged from outside the Center to provide physical recreational activities for clients, particularly for less common sports. Other physical activities such as yoga or dance may also be incorporated into the clients' plans, where appropriate.

CONSIDERATION 48.6

Artists and musicians may also be an important part of external experts that can aid in an intervention. In particular, art therapies have been used by centers for rehabilitation and reintegration.[157]

CONSIDERATION 48.7

Other experts may also be engaged on an ad hoc basis, and participate in the Center's activities. For example, for radical right violent extremism, tattoos are common symbols of belonging to a particular group. A tattoo artist may be sourced to either remove or re-work tattoos that are symbols of the terrorist or violent extremist organization the client is no longer affiliated with.

CONSIDERATION 48.8

UNODC recommends to develop profiles of potential external partners, to identify those who have both the respect and competency to engage with individuals radicalized to violent extremism.[158]

CASE STUDY: RELIGIOUS REHABILITATION GROUP, SINGAPORE

The Religious Rehabilitation Group is a voluntary group of ulama and community Islamic scholars and teachers. The Group was initially established in order to support the rehabilitation processes of detained members of Jemaah Islamiyah. Theses well-respected religious leaders work to address the detainees' misinterpretation of Islam.

This program has also proven flexible to the evolving circumstances of radicalization in Singapore. For example, due to the increased spread of violent extremist narratives online, the Group has adapted to include younger, tech-savvy counselors who are more familiar with the concepts and terminology being used online. In addition, this Group now also includes female counselors in order to support female detainees as well.

Singapore's approach to rehabilitation of violent extremist offenders has been reported to be exceptionally successful, with a particularly low rate of recidivism.[159]

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157 Peracha, "Contribution to Hedayah's Program."
158 UNODC, "Handbook on the Management of Violent Extremist Prisoners."
159 Kumar Ramakrishna, "A Holistic Critique of Singapore's Counter-Ideological Program," Combatting Terrorism Center Sentinel, 2, no. 1 (2009).

GUIDING PRINCIPLE 49

Prioritize potential external partners that are well-respected in the community over partners with specific content knowledge of rehabilitation and reintegration.

Since the connection with the community is critical for the rehabilitation and reintegration process, the Center may consider prioritizing partnerships with local CSOs that are well-respected in the community where the client(s) will need to reintegrate. CSOs have the advantage, in some circumstances, of being more neutral than government entities (and perceived as such), and this may facilitate a smoother rehabilitation and reintegration process through quicker trust-building. Moreover, the CSO may be able to act as an advocate for the client, especially during the reintegration process. In instances where CSOs are engaged, they should, at least, adhere to the guiding principles of humanity, neutrality, impartiality and independence.

GUIDING PRINCIPLE 50

Ensure sessions with external specialists are supervised and/or managed with Center staff in the room that are fully aware of the clients' needs and cases.

Through supervision, the Center's management can ensure that interventions by external partners are in line with the client's needs and that the external specialists are not manipulated or radicalized by the client(s).[160] This is especially important in circumstances where external specialists are not trained on rehabilitation and/or reintegration approaches. For example, a case manager can be part of the external stakeholders' session, where their role would be to observe and make sure nothing is being done to derail any progress towards rehabilitation and reintegration. The case manager can also intervene if there is a conflict, and help the external specialist guide clients towards successful management of challenges and obstacles.

CONSIDERATION 50.1

Establishing trust with clients may be more difficult for external experts who do not engage with the clients on a regular basis. It may be considered more appropriate to utilize external experts for activities which the clients can join voluntarily. For example, an art therapist may set up their equipment and start painting by themselves in a common area accessible to the clients, in order to allow them to join by their own volition.[161] Where feasible, clients can be given psychoeducation on the advantages of art and other forms of expressive therapy first before voluntary participation, this will enable the clients to make an informed choice.

CONSIDERATION 50.2

In the case of religious leaders, it may be inappropriate for the case manager to be in the same room when certain activities are being conducted. Some activities could be considered confidential, for example, Confession.

160 Sipco Vellenga and Kees De Groot, "Securitization, Islamic chaplaincy, and the issue of (de)radicalization of Muslim detainees in Dutch prisons," Social Compass, 66 no. 2 (2019): 224–237.
161 Peracha, "Contribution to Hedayah's Program."

CAPACITY-BUILDING AND TRAINING NEEDS

> **GUIDING PRINCIPLE 51**
>
> Plan relevant courses to train staff in the areas of rehabilitation and reintegration, security, management, mental health, self-development and interactions with clients as needed for the Center's success.

Investing in the expertise of staff is critical for the Center's success. Programs designed by non-experts are at risk of having ill-conceived responses and interventions, and can potentially do more harm than good. Knowledgeable and skilled staff are vital resources for any rehabilitation and reintegration Center. They should be equipped with the appropriate abilities to make informed decisions, especially decisions that may be related to the physical or mental well-being of clients, other staff, or the community at large.

There are a variety of needs that staff may have for training. The Center's management may want to consider providing different levels of training on certain subjects for different staff members. For example, there may be a set of trainings that are a requirement for all staff members, but more advanced trainings are provided for specialists and staff in supervisory and managerial positions.

A non-exhaustive list of training for consideration is summarized in the below chart, summarized from the discussions during Hedayah's program conducted to draft this document, UNODC's "Handbook on the Management of Violent Extremist Prisoners and the Prevention of Radicalization to Violence in Prisons"[162] and the EU's "Guidelines Regarding Recruitment, Selection, Education, Training and Professional Development of Prison and Probation Staff."[163]

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[162] UNODC, "Handbook on the Management of Violent Extremist Prisoners."
[163] Council of Europe, "Guidelines Regarding Recruitment, Selection, Education."

TABLE 4: **SAMPLE CAPACITY-BUILDING AND TRAINING REQUIREMENTS**	
ALL STAFF	▪ Mission and mandate for the Center ▪ Basic concepts in preventing and countering violent extremism ▪ Basic functional training for their role ▪ Practical skills, including report-writing, basic IT requirements for the Center ▪ Code of ethics and professional conduct ▪ Security processes and procedures for the Center ▪ Dynamic security and information-sharing ▪ Confidentiality and handling sensitive data ▪ Introduction to self-care and mental health ▪ Introduction to criminal justice system and laws in local context ▪ Introduction to human rights laws, resolutions and guiding principles (including relevant child protection and considerations) ▪ Gendered approaches and gender sensitivity to rehabilitation and reintegration ▪ Introduction to interacting with families ▪ Situational awareness, problem-solving, conflict management and decision-making ▪ Communications and interpersonal skills ▪ Stress management, mental health awareness and self-care ▪ Introduction to risks of suicidal ideation, violence and self-harm among clients ▪ Understanding of radicalization leading to violent extremism, key concepts, key terminologies, key symbols/worldviews/ideologies of cohort of clients ▪ Introduction to monitoring and evaluation for rehabilitation and reintegration
CORRECTIONAL EXPERTS	▪ Advanced physical security courses ▪ Advanced dynamic security and information-sharing ▪ Country specific policies as it relates to violent extremism
PSYCHOLOGISTS/ COUNSELORS AND SOCIAL WORKERS	▪ Advanced training on radicalization and recruitment, key symbols/worldviews/ideologies of cohort of clients. Notably, since violent extremism evolves, this training may be conducted yearly to keep up with trends. ▪ Advanced training on working with child returnees, where relevant ▪ Advanced dynamic security and information-sharing ▪ Basic understanding of extremist propaganda and dissemination tools ▪ Narratives and counter-narratives to violent extremism in their context ▪ Needs, strengths, reslience, risk and vulnerability assessments ▪ Advanced case management and case studies ▪ Emotional intelligence and/or social and emotional learning ▪ Therapeutic communication and addressing trauma ▪ Advanced training on suicidal ideation, violence and self-harm ▪ Advanced training on monitoring and evaluation for rehabilitation and reintegration ▪ Advanced training on family therapy and working with families affected by CVE. ▪ Advanced training on psychosocial intervention techniques to be implemented by the Center. ▪ Practical skills in the use of psychological services and psychosocial support management tools. ▪ Expressive therapy (e.g., art therapy), especially when working with children with selective mutism

TEACHERS	- Advanced training on radicalization and recruitment, key symbols/worldviews/ideologies of cohort of clients. Notably, since violent extremism evolves, this training may be conducted yearly to keep up with trends. - Advanced training on working with child returnees, where relevant - Narratives and counter-narratives to violent extremism in their context - Developmental stages of children, and the impact of conflict and trauma - Emotional intelligence and social and emotional learning - Critical thinking - Therapeutic communication and addressing trauma
COACHES, TRAINERS, ART INSTRUCTORS, MENTORS, VOCATIONAL EXPERTS	- Therapeutic communication and addressing trauma - Advanced mentorship (active listening, empathy, paraphrasing, coaching) - Advanced training on emotional intelligence and interpersonal skills - Advanced training on working with child returnees, where relevant
RELIGIOUS ADVISORS OR RELIGIOUS LEADERS	- Basic psychology and counseling - Role of religious leaders in P/CVE - Narratives and counter-narratives to violent extremism in their context - Therapeutic communication and addressing trauma - Advanced training on working with child returnees, where relevant
COMMUNITY LIAISON OFFICERS	- Advanced communication and interpersonal skills - Advanced training on working with child returnees, where relevant - Peace and conflict mediation skills
AFTER-CARE EXPERTS, PROBATION STAFF AND LAW ENFORCEMENT	- Advanced training on radicalization and recruitment, key symbols/worldviews/ideologies of cohort of clients. Notably, since violent extremism evolves, this training may be conducted yearly to keep up with trends. - Narratives and counter-narratives to violent extremism in their context - Needs, risk and vulnerability assessments - Advanced case management and case studies - Emotional intelligence and/or social and emotional learning - Therapeutic communication and addressing trauma - Advanced training on monitoring and evaluation for rehabilitation and reintegration, especially to be aware of signs of potential recidivism - Advanced communication and interpersonal skills (especially on how to outreach to the community) - Advanced training on suicidal ideation, anger management, violence and self-harm - Advanced training on working with child returnees, where relevant
MEDICAL PROFESSIONALS	- Therapeutic communication and addressing trauma - Basic psychosocial support skills
ADMINISTRATIVE STAFF	- Advanced courses on allocation and management of resources (if applicable, especially for staff supporting management) - Basic program-cycle management - Basic application of data analysis tools
MANAGEMENT	- Advanced training on radicalization and recruitment, key symbols/worldviews/ideologies of cohort of clients. Notably, since violent extremism evolves, this training may be conducted yearly to keep up with trends. - Needs, risk and vulnerability assessments - Advanced courses on allocation and management of resources - Basic program-cycle management

GUIDING PRINCIPLE 52

Conduct regular assessments of staff to determine ongoing training needs.

In order to determine what knowledge, skills and abilities are needed by staff, there should be a regular assessment of the staff, to include their performance but also to include identifying opportunities for continuous growth. This regular assessment should influence and determine the training plan for the staff. In the initial phase, when staff are new to the Center, the training should be more frequent. Once there is experience, routine and practice established the training and assessments may shift to every six months.[164] It is recommended that regular training sessions should be built into the culture of the Center, where more experienced staff can facilitate these sessions in a manner that incurs no extra costs for the Center.

CONSIDERATION 52.1

It is important to ensure that trainings and capacity building support do not interfere with the clients' progression through the rehabilitation and reintegration process. If not planned effectively, there is a risk that trainings could leave clients without their trusted case managers or practitioners for significant periods, which could damage their progress.[165]

CONSIDERATION 52.2

Assessments should also account for new developments (internal or external), challenges or situations, and any need for ad hoc training to manage these, and should be clearly identified in the assessment report.[166]

GUIDING PRINCIPLE 53

Leverage suitable adult learning methods that help to internalize concepts and skills for the capacity-building of staff.

Suitable learning methods should include hands-on, practical, dynamic and interactive training sessions. It is advised that the capacity-building is largely not lecture-based, and instead focused on interactive sessions, role plays, brainstorming discussions, and action-based presentations. Mentorship and shadowing within the Center, and visits to other centers may be good practices for enhancing the practical learning process.[167]

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[164] Robert Örell, Dennis Walkenhorst, and Anonymous, "Contributions to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[165] Peracha, "Contribution to Hedayah's Program."

[166] Torben Adams, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

[167] Örell, "Contribution to Hedayah's Program."

Seeing staff interacting with the clients onsite will likely be a good model for teaching and learning. Lessons in different contexts may make staff pause and reflect on their own process and biases, as well as offer the opportunity to adapt and contextualize new methods and approaches.[168]

Where possible and relevant, approach training for intervention programs through a tiered model as follows:

a) **Training Level 1:** Staff participate in the intervention as if they were the client.
b) **Training Level 2:** Staff practice conducting the new skill with each other.
c) **Training Level 3:** Staff practice conducting the new skill with the clients, with guided supervision.[169]

GUIDING PRINCIPLE 54

Provide external experts with appropriate orientation on the nature of radicalization and rehabilitation and reintegration processes.

In general, external experts would be leveraged for their unique skills and talents related to their field, and are not necessarily trained or experienced on processes of radicalization and reintegration. At a minimum, the specialized external experts should be briefed on the general nature of radicalization and the fact that they may be handing particularly difficult clients. While on one hand it is important not to create bias or stigma against the clients in the external experts by providing too much detail, this should be balanced with providing sufficient information to specialists so that they are aware of the seriousness of the intervention and risks. As mentioned in the previous section on "External Specialists and Partnerships," ensuring supervision by a full-time Center staff during the sessions with external experts is critical to ensuring the intervention does not go off track or that the client or specialist is at risk of being negatively impacted.

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[168] Rachel Bryson and Abiye M. Iruayenama, "Contributions to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
[169] Peracha, "Contribution to Hedayah's Program."

MANAGEMENT OF HUMAN RESOURCES

GUIDING PRINCIPLE 55

Ensure there are sufficient numbers of qualified staff available
at the Center at all times.

It is important that there are a sufficient number and variety of staff available at the Center 24 hours a day, especially in a residential setting where the clients are housed within the Center. This also includes having appropriate staff available, or on call, during nights and weekends. Some examples of different considerations for an appropriate number of qualified staff are mentioned below:

CONSIDERATION 55.1

One professional psychologist, social worker or counselor that focuses on one-on-one or group therapy sessions can typically manage 8-10 clients/ cases at a time. When it comes to professionals that work with families, one specialist can manage approximately 4-6 families at a time for 2-6 hours per week (per family). The case load for these professionals should abide by local health and professional standards suitable for their position.

CONSIDERATION 55.2

Educators, coaches and mentors that are approaching clients in a classroom-style environment can typically manage 20-30 clients in a session. These professionals may provide support through training on areas, such as: vocational skills, life skills, art therapy or sports/physical activity. It is advised that there are a reasonable number of sessions expected out of that professional per day. For example, a vocational trainer may be able to host 3-4 sessions with clients per day. The case load for these professionals should abide by local educational and professional standards suitable for their position.

CONSIDERATION 55.3

Medical professionals should be available for clients according to appropriate rations mandated by local health authorities and regulations. It is advised that medical staff, including mental health professionals, are on call and available for emergency situations at all times. This is especially important in the case that clients become violent or at risk towards harming themselves or others.

CONSIDERATION 55.4

Administrative and functional staff that allow the normal Center operations to be completed should be in alignment with local health, safety and security regulations. For example, sufficient number of cooks and cleaners should be made available to maintain a safe, clean environment for the clients. In a custodial setting, a limited number of cooks and cleaners may need to be made available during nights and weekends, whereas in a non-custodial setting, the shifts for administrative and functional staff would need to be set up around meal times.

CONSIDERATION 55.5

Security guards and internal and external security personnel should be sufficient to carry out the safety and security protocols of the Center, to include any extreme circumstances.

GUIDING PRINCIPLE 56

Ensure that administrative support includes adequate training, consultation, evaluation, and data support for practitioners to deliver effective services.

Rehabilitation and reintegration programs should include centralized administrative components to promote effective services. The HR policies and procedures should be clearly described to ensure services "do no harm" and protect the safety of clients, practitioners, and the community. This includes client rights and reporting guidelines for safety and ethical concerns for both clients and staff that are monitored consistently by supervisors and administrative personnel.

Core components needed for implementation include staff selection and training, agency consultation, evaluation and data support.[170] Manuals should be utilized to provide clear guidelines that describe acceptable conduct and the implementation of an intervention to ensure program fidelity.[171] The manual and training should define factors related to program effectiveness such as delivery of the amount of the intervention (i.e., duration, total contact hours), quality of implementation of the intervention (e.g., training and monitoring of the service), and expected outcomes based on the service.[172] See the section "Development of Standard Operating Procedures" under the chapter on "Governance and Oversight" for more information on the development of manuals and relevant SOPs.

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[170] Dean Fixsen, Karen Blasse, Sandra Naoom and Frances Wallace, "Core implementation components," Research on Social Work Practice, 19, no. 5 (2009): 531-540, doi: 10.1177/1049731509335549.

[171] Albert Bellg, Belinda Borrelli, Barbara Resnick, Jacki Hecht, Daryl Minicucci, Marcia Ory, Gbenga Ogdegbe, Denise Orwig, Denise Ernst and Susan Czajkowski, "Enhancing treatment fidelity in health behavior change studies: best practices and recommendations from the NIH behavior change consortium," Health Psychology, 23 (2004): 443–451, doi: 10.1037/0278-6133.23.5.443; Frank J. Moncher and Ronald J. Prinz, "Treatment fidelity in outcome studies," Clinical Psychology Review, 11 (1991): 247–266.

[172] Mark W. Lipsey, "The primary factors that characterize effective interventions with juvenile offenders: A meta analytic overview," Victims and Offenders, 4 (2009): 124–47.

Data monitoring and documentation systems include ongoing data collection of client needs, progress, significant incidents, and outcomes. Quality improvement tools[173] should be used to monitor data and determine changes that need to be made to promote positive program outcomes.[174] Creating a system that gathers ongoing data collection along with routine practitioner and client input should be used to monitor day-to-day practices related to the desired outcomes.[175]

GUIDING PRINCIPLE 57

Promote a culture of dynamic security and communication for
all staff working within a rehabilitation center.

When working with returning FTFs and VEOs, the concept of dynamic security will likely be very important. Dynamic security focuses on building positive relationships and communicating with the clients of the center, in order to reduce tensions and gain useful information. The staff of the rehabilitation center or prison should prioritize the creation and maintenance of everyday communication and interaction with clients/prisoners based on professional ethics.

This approach will help to engage with clients in meaningful ways and to reduce potentially destructive behaviors and attitudes, whilst simultaneously reinforcing constructive efforts. In this regard, there should be a mechanism which provides for operational oversight in relation to dynamic security, in order to avoid complacency and damaging attitudes or treatment. See the section on "Dynamic Security" under the chapter on "Safety and Security" for more information.

CONSIDERATION 57.1	CONSIDERATION 57.2
It should be noted that not all applicants or workers will have these skills or an appetite for dynamic security. For example, not every staff member will know how to work effectively with different categories of clients, to include women and children. Therefore, staff will need to be supported in order to enhance their understanding of the different needs for each category of client.[176]	The rehabilitation center will be in constant collaboration with experts from various institutions. Therefore, the performance of dynamic security will depend upon the close coordination and communication between all involved. The management of the center should take this into consideration and provide a mechanism whereby the staff are able share information which can support the positive interactions with clients. Partnership and the sharing of knowledge and data between all relevant institutions and CSOs involved will be critical for effective implementation of dynamic security.[177]

[173] Ronald D. Moen and Clifford L. Norman, "Circling back: Clearing up myths about the Deming Cycle and seeing how it keeps evolving," Quality Progress, 43, no. 11 (2010): 22-28.
[174] Valerie L. Forman-Hoffman, Jennifer C. Middleton, Joni L. McKeeman, Leyla F. Stambaugh, Robert B. Christian, Bradley N. Gaynes, Heather Lynne Kane, Leila C. Kahwati, Kathleen N. Lohr and Meera Viswanathan, "Quality improvement, implementation, and dissemination strategies to improve mental health care for children and adolescents: a systemic review," Implementation Science, 12, no. 93 (2017): 1-21.
[175] Patrick M. Tyler, W. Alex Mason, Barb Vollmer, and Alexandra L. Trout, "Practice to research and back in a social service agency: Trying to Do Better," Child & Youth Care Forum (2020), doi: 0.1007/s10566-020-09548-3
[176] Khan, "Contribution to Hedayah's Program."
[177] Afrodita Musliu, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).

GUIDING PRINCIPLE 58

Embed a bottom-up working culture to support the continuous enhancement of the Center's implementation.

A bottom-up working culture can contribute to more effective security and more efficient implementation of rehabilitation and reintegration interventions. In this regard, it is important for the staff to feel able and comfortable to provide feedback information to senior management on the program. This relates also to the suggestion of promoting a culture of dynamic security.

It is likely that effective suggestions for a program's improvement will come from the staff who interact more often with the clients and work with the processes. However, the senior management are often the decision-makers and hold the influence over the Center's approach, but not necessarily the knowledge of possible solutions to challenges or problems. Hence, it is essential that the staff are encouraged to provide regular feedback without reproach, especially for a program which is domestically new and pioneering. This will help innovation, change, adaptability, responsiveness and ultimately will create an improving program over time. This also aids the process of tailoring rehabilitation and reintegration to the specific needs of clients, since the information provided by regularly interacting with clients will be personalized.

The working-level staff need to be informing the management-level of what are the needs and what are the gaps; it is critical that there is a feedback loop between the staff and the management on where there is a need. It is important for the management to recognize that the staff have the best knowledge on the specific environment and situation in which they work. For example, a coach may notice that some of the clients' have a tendency to violent escalation when participating in physical activities, yet the clients have not shown this to other practitioners in the Center. In this example, the coach should feel comfortable providing advice to the management on developing a new anger-management program, and not just to address the issue within their own position.

CONSIDERATION 58.1	CONSIDERATION 58.2
When senior management give the frontline staff an approach to use, they should put in place a feedback requirement. This type of feedback will be important to monitor the effectiveness of the approach and for the improvement of the program.[178]	This type of working culture may be difficult in certain contexts. In many cultures and countries, it is not standard practice to have a bottom-up feedback system where staff can suggest changes, raise issues early, ask for amendments to processes or lobby for more of specific approaches. As a response, it may be suggested to embed this approach from the very beginning within the team and enable the culture to grow. One way to approach this could be to organize regular meetings where feedback is both encouraged and normalized, and there are opportunities for case studies to be discussed.

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[178] Mulbocus, "Contribution to Hedayah's."

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CONSIDERATION 58.3

It may be difficult for staff to be honest about their perceptions and experiences during the implementation of rehabilitation and reintegration. Honest discussions may lead to feelings of vulnerability. To help minimize this, the Center could encourage from the beginning the praising of, and support for, staff members who provide feedback, even if it is challenging feedback. The management will also need to have an open-dialogue with the staff and show their own vulnerability as well. There also needs to be change enacted based on the bottom-up approach, to show that the process is genuine.

CONSIDERATION 58.4

Trust needs to be established and grown within the team, permitting team members to have healthy conflict, commit to decisions, hold one another accountable and then focus on collective results. Management need to create an environment where staff are eager to share and where changes are made based on their inputs. Without proof of change based on feedback, the staff will not be motivated to provide their feedback.[179]

CONSIDERATION 58.5

Regular manager and employee meetings where feedback is normalized in both directions should be practiced. Furthermore, the opportunity for anonymous feedback to senior management in case the staff member does not feel comfortable to raise something in-person, may be useful. Departmental 'case-study innovation' where the teams are able to take a certain situation and think about how to tweak approaches and methodologies may also be useful.

CONSIDERATION 58.6

It is also recommended to utilize the management chain where the practitioner reports to a supervisor, the supervisor reports to a manager, and then on to the senior management. This approach will help to ensure that messages from the field level are able to reach the management level.[180]

GUIDING PRINCIPLE 59

Encourage management to establish values of neutrality as fundamental to the Center's response(s), to include: inclusivity, non-judgement and impartiality.

It will be important for a center to be neutral in its social representations, in order to be able to effectively address any form of RLVE. The neutrality of a Center will help to ensure its independence, so as not to be affected by the political positions of the government and other influential bodies. In this regard, a Center should develop internal policies where the messages of the center and its staff are inclusive and holistic, as much as possible. If the Center and its staff are able to embody such neutrality, this will help enable a safe and non-judgmental environment in support of the clients' reintegration into society.[181]

The "UN Standard Minimum Rules for the Treatment of Prisoners" (the Nelson Mandela Rules) state that the Rules should be applied impartially, and that "there shall be no discrimination on the grounds of race,

179 Bryson, "Contribution to Hedayah's Program."
180 Iruayenama, "Contribution to Hedayah's Program."
181 Bennardi, "Contribution to Hedayah's Program."

color, sex, language, religion, political or other opinion, national or social origin, property, birth or any other status. The religious beliefs and moral precepts of prisoners shall be respected."[182]

GUIDING PRINCIPLE 60

Promote diversity through HR practices, and seek to build a staff team that is able to cater for a range of ideological, cultural, and ethnic backgrounds, as well as gender and age.

In alignment with the principles under the section on "Qualifications, Skills and Profiles" related to staff, the management of HR should be sensitive to the various backgrounds and profiles of the local area, clients and potential visitors, providing experts and facilities to suit the specific needs of each individual. The team should have enough flexibility to address the various individuals they may engage with. A holistic approach that addresses a combination of religious and ideological ideas, political and economic grievances, and potentially traumatic experiences, requires working with a variety of experts and other professionals. These professionals should be encouraged by the management to work closely together to reinforce each of the other aspects, as no element can be adequately addressed in isolation.

GUIDING PRINCIPLE 61

Develop and implement a clear internal communication strategy.

Internal communication is a critical area of management that can have a major impact on the Center's effectiveness. Internal communication can help to ensure that all employees of a center are working towards the same strategic objectives. In this regard, it will be important for all staff members to have a clear understanding of the mission and vision of the center and be able to effectively articulate these principles to external stakeholders. In order to achieve this, the management of the Center will need to ensure a strategic internal communications approach is implemented to enhance the individual and collective awareness for all staff members.[183]

CONSIDERATION 61.1	CONSIDERATION 61.2
It is recommended to incorporate the views of internal stakeholders into the strategy for the center. The perspective of group ownership will help to ensure the effectiveness of the strategy.	Channels for disseminating internal messages and receiving input may include: staff formal and informal meetings, a staff handbook, the Center's intranet, and other internal resources.

182   United Nations, "Standard Minimum Rules for the Treatment of Prisoners."
183   Hedayah, "NIWETU Toolkit, Module 4: Undermining Violent Extremist Narratives," (2020).

CONSIDERATION 61.3

The Center may choose to select a primary spokesperson who is responsible for communicating or approving communication to external audiences, on behalf of the Center. This centralized approach can assist with the uniformity of disseminated messages.

CONSIDERATION 61.4

To build the Center's capacity for internal communication, it will likely be important for the center to: provide timely and effective information to all staff, connect the various departments, promote staff engagement, and establish mechanisms which facilitate dialogue and information exchange between all levels.

CONSIDERATION 61.5

An internal communication strategy can also enable the Center to respond quickly to requests for information when incidents occur within or outside the Center.[184]

CONSIDERATION 61.6

An effective internal communication strategy can also support the processes for sharing sensitive information in an appropriate manner.[185]

CONSIDERATION 61.7

All staff should sign non-disclosure forms designed to mitigate the risk of sensitive information from being leaked out of the facility. They should also receive basic training on offline and online management of sensitive information to mitigate the risks and consequences of intentional and unintentional leaks.[186]

GUIDING PRINCIPLE 62

Establish mechanisms for handling disagreements between staff and stakeholders, especially related to rehabilitation and reintegration approaches or interventions.

As noted above, effective rehabilitation and reintegration programs will involve various categories of staff and practitioners. Therefore, it is likely that there will be circumstances where staff disagree on the appropriate approach for a client. From the beginning, the Center should have a clear approach or mechanism for resolving such issues outlined within the HR framework that all staff are familiar with. However, it should be noted that healthy disagreement should not be avoided, but rather encouraged. Providing space for practitioners to debate on topics may produce innovative responses to challenges or enable an individual to see an issue from a perspective they had not previously considered.

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[184] Anonymous, "Contribution to Hedayah's Program."
[185] Khan, "Contribution to Hedayah's Program."
[186] Iruayenama, "Contribution to Hedayah's Program."

CONSIDERATION 62.1

Procedures should be formalized in a way that protects personal privacy and support where possible and appropriate an informal resolution to the conflict, in a mutually agreeable manner where all parties are involved.[187]

CONSIDERATION 62.2

The Center may consider the establishment of a committee for decision-making, which could include external agencies in the discussions. This may help the process by giving a voice to multiple perspectives before a decision is taken. However, in order to prevent a delay in the decision making process, it may be appropriate to identify a chair for the committee, who has the responsibility to take the decision once all inputs have been provided.

CONSIDERATION 62.3

It may also be suggested to resolve such conflicts within the internal team, through discussion or through a team leader or case manager who is empowered to be the final decision-maker.

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[187] United Nations Office on Drugs and Crime (UNODC), "Handbook for prison leaders: A basic training tool and curriculum for prison managers based on international standards and norms," Criminal Justice Handbook Series (2010): 150.

STAFF WELL-BEING

When working on cases involving RLVE, practitioners may be confronted with increased professional and personal anxiety, experience significant stress, vicarious trauma, secondary trauma stress, burn-out or even become vulnerable to RLVE themselves. In this regard, it will be important for a rehabilitation center to establish mechanisms and approaches to promote the staff's well-being and prevention and handling of potential mental challenges. It is also important to have a system of peer-to-peer checks by staff working within the Center.

> **GUIDING PRINCIPLE 63**
>
> Prioritize management practices that ensure balanced workloads
> and provide ample opportunity for staff to disconnect from their work.

After a prolonged period of time, staff may become vulnerable to a number of potential physical and mental health problems, such as fatigue, increased levels of stress, and secondary trauma caused by being repetitively exposed to the clients' stories. Ensuring the staff are maintaining good health is crucial when working in positions that demand high emotional or physical resilience. In this regard, steps should be taken to ensure a healthy work-life balance.[188] HR should be vigilant to ensure that practitioners and the wider staff are not overworked and that the workload is balanced; it is important that the Center's staff take the time off that they need.[189] Taking annual leave should be actively encouraged to help the staff gain new perspectives, find mental space and clarity, and reenergize themselves. It will prove crucial for the Center's staff to be able to separate physically and emotionally from the demands of work.[190]

CONSIDERATION 63.1	CONSIDERATION 63.2
HR may consider encouraging and ensuring that the center's staff members are staying well hydrated, getting plenty of sleep, engaging in physical activity whenever possible, spending time with their family and friends, and pursuing hobbies.[191]	The center should consider providing onsite recreational activities to help the staff de-stress during breaks or before going home (e.g. books, movie nights, board games, staff sports tournaments, yoga classes). This is particularly important for Centers that may provide staff accommodation or partial accommodation on-site.

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188 Iruayenama, "Contribution to Hedayah's Program."
189 Justin S. Trounson and Jeffrey E. Pfeifer, "Corrections officer wellbeing: Training challenges and opportunities," The New Zealand Corrections Program, 5, no. 1 (2017): 9.
190 Iruayenama, "Contribution to Hedayah's Program."
191 Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum," (2020).

GUIDING PRINCIPLE 64

Ensure staff are receiving adequate and appropriate support from their supervisors.

Social support and relationship quality for staff within the center has an important impact on the overall well-being of the staff and has the potential to minimize the negative impact of these roles. Supervisors have a critical role for supporting their staff members, especially when facing mental challenges.[192]

One of the supervisor's primary responsibilities should be staff care, including addressing any risks or mental health challenges, whilst the staff's primary responsibility should be the care of the clients and themselves. Staff need someone they can go to when they have concerns to receive guidance. The supervisors should seek to build trust, have empathy and be good at active listening. Supervisors and co-workers also should be careful to avoid stigmatizing other staff potentially suffering from vicarious trauma, which can be misunderstood and risks being misconstrued as staff incompetence. This mindset should be avoided at all times, and the management may support this through awareness raising and internal training.[193]

Debriefing sessions between the supervisor and staff members should be conducted routinely, especially when significant incidents occur. The Center should develop strategies for encouraging transparency, vulnerability and openness by all staff, as well as a clear hierarchical structure to raise any issues and challenges.

Having supervision or a support group within the Center can help to ensure that staff do not feel alone and isolated in their work. Moreover, working in complementarity with other professionals is a good mechanism that can help staff to take care of themselves.[194]

GUIDING PRINCIPLE 65

Provide psychological support for all staff members.

The Center should be able to provide support for its staff related to the mental health challenges faced as a result of the job. Counseling services, including talking therapy, should be available for all staff. Psychotherapists would be particularly important to provide adequate support for staff members engaging with clients on a regular basis.[195] If the Center is not able to provide psychological support internally, then staff should be encouraged and supported to gain support externally.[196]

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192 Gail Kinman, Andrew J. Clements and Jacqui Hart, "Work-related wellbeing in UK prison officers: a benchmarking approach," International Journal of Workplace Health Management, 9, no. 3 (2016): 34.
193 Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."
194 Bennardi, "Contribution to Hedayah's Program."
195 Knoope, "Contribution to Hedayah's Program."
196 Iruayenama, "Contribution to Hedayah's Program."

CONSIDERATION 65.1

In certain circumstances, support by mental health experts who are familiar with common conflict-induced mental health challenges may be critical, in order to ensure the primary symptoms (e.g., post-traumatic stress disorder (PTSD)) are identified rather than treatment being provided for the secondary symptoms (e.g., depression as a result of PTSD).

CASE STUDY: ROAD TO MENTAL READINESS, CANADA

Road to Mental Readiness (R2MR) is a training program developed by Canada's Department of National Defence. This program is being implemented by the Correctional Services of Canada to assist corrections officers to better manage their psychological wellbeing within high-risk occupational settings. In practice, the program is provided as a single 160-minute session that aims to: a) teach recruits basic mental health literacy, b) teach stress management skills, and c) change attitudes toward mental health problems and service use. So far, the program has demonstrated some encouraging results in relation to uptake and effectiveness within a selected sample of corrections officers.[197]

CASE STUDY: ADVANCED MENTAL STRENGTH AND CONDITIONING, AUSTRALIA

In Australia, the Advanced Mental Strength and Conditioning (AMStrength) program is a class-based, psycho-educational training program designed specifically for corrections officers to assist them to maintain their psychological wellbeing. The program consists of seven sessions that aim to: a) increase officers' level of wellbeing literacy, b) assist officers to refine their cognitive skills and coping strategies for managing stress, distress and adversity, c) assist officers to more effectively identify wellbeing challenges, d) encourage officers to habitually assess and more effectively manage their personal wellbeing, and e) encourage officers to take a new level of responsibility for the maintenance of their own wellbeing. Initial results have highlighted the program's effectiveness in assisting corrections officers in maintaining their wellbeing.[198]

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[197] Trounson and Pfeifer, "Corrections officer wellbeing," 9.
[198] Trounson and Pfeifer, "Corrections officer wellbeing," 9.

GUIDING PRINCIPLE 66

Provide comprehensive training on self-care principles
and approaches to all staff members.

The rehabilitation center should provide self-care training for staff during the onboarding process. During these early phases, it will be important fully disclose all difficulties and mental strain of the job to the staff. This will be particularly important for those directly engaging with clients who have been through traumatic experiences, and the staff will need to understand how to take care of themselves from the very beginning of engaging with clients.

CONSIDERATION 66.1

Staff should gain a clear understanding on the potential signs of mental health challenges (such as burnout or vicarious trauma) and the basic responses they can take to support themselves, as well as the channels available to seek further support.

CONSIDERATION 66.2

Staff will need to understand that being in position of authority comes with responsibilities. For example, if a practitioner is working in a context with no connection to violent extremism with a youth grieving the loss of a sibling, the practitioner may be concerned about getting it wrong for that individual, and thereby not helping their well-being. Whereas, in the Center, if a client demonstrated signs of vulnerability to RLVE, getting it "wrong" could mean the client continues down the pathway of RLVE and ultimately conducts a violent attack on behalf of a VE group. Therefore, the practitioner may feel more pressure due to the fear of the greater impact of the possible consequences. Furthermore, in such a case, this type of instance could become publicly known and become politicized and the media may seek someone to blame for not preventing the individual earlier on in the process. This possibility may further exacerbate the pressure on practitioners.

CONSIDERATION 66.3

Practitioners should also gain understanding on how ideology affects an individual and the potential impacts of an individual's ideology on the practitioner. For example, if the practitioner cannot relate to or understand the perspective of the client, they may become increasingly frustrated at the lack of progress toward their identified goals for the client.[199]

CONSIDERATION 66.4

Staff should be trained on stress management and time management. Practitioners who are passionate about their work may become overloaded with work or overwhelmed with emotional stress. Practitioners should receive ongoing and regular training that covers the potential triggers, and how to avoid or mitigate those triggers.[200]

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199   Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."
200   Mulbocus, "Contribution to Hedayah's Program."

CONSIDERATION 66.5

Staff should also receive training on critical thinking skills, deconstructing narratives, and other relevant topics which may help to enhance their resilience against RLVE. This will be particularly important for staff who engage in in-depth conversations with clients, such as teachers and counselors.

GUIDING PRINCIPLE 67

Provide staff with opportunities to hold group sessions and discussions related to the challenges they are facing.

It will be important for the center to provide group sessions for the staff, where they can express their concerns, frustrations, trauma, and seek advice from colleagues. Having an internal support group within the center may help the staff to understand that they are not alone in their challenges and provide opportunity to learn from each other related to their coping strategies. It may also enable positive reinforcement among the staff. The center should also consider whether it is appropriate to have a HR representative present during these discussions; such an individual may be able to provide follow-up support, but their presence could also hamper the openness of the discussion.[201]

GUIDING PRINCIPLE 68

Build the staff's own resilience against RLVE through its HR practices and approaches.

It is often referenced that prisoners may be vulnerable to RLVE, however, the Center should also be cognizant that the staff themselves may also be (or become) vulnerable. The Center should ensure that the staff are fully aware of the manipulation and conditioning techniques that may be used by VEOs.

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[201] Peracha, "Contribution to Hedayah's Program."

CONSIDERATION 68.1

While rare, there have been instances of practitioners becoming radicalized to violent extremism due to their professional relationship with violent extremists. The practitioners should be aware of this risk. This is a critically important point; being aware of the potential risk will help to reduce the likelihood of it occurring.

CONSIDERATION 68.2

While it may be relevant for the practitioner to be from a similar background as the client in order to build trust, it may also increase the practitioner's vulnerability. When engaging with a client from a similar community, practitioners may find themselves directly relating to the circumstances and experiences of the client (e.g., living through a violent insurgency) and consequently connecting with the individual's justifications.[202] If the practitioner feels they are getting too close, they should pass on the case to another practitioner without negative consequences on their job performance rating.

CONSIDERATION 68.3

The practitioners should be able to discuss their concerns and thoughts with other practitioners who may be able to provide moderate views and help build resilience. Working in isolation, while being exposed to violent extremist rhetoric consistently can pose a high risk. Practitioners should practice their pro-social skills on each other and provide mutually benefiting support.

CONSIDERATION 68.4

Practitioners should ensure that they remain neutral when an individual or a family is sharing their thoughts, ideas or beliefs. Entering into a debate with a violent extremist without adequate knowledge or preparation may allow the individual to control the outcome.[203]

GUIDING PRINCIPLE 69

Establish a mechanism to enable and encourage staff, especially practitioners, to refer clients to others when the relationship has become too demanding.

It is important that the practitioners working within a center recognize the limits of their own ability to best support the client(s). The center should provide mechanisms for the practitioners to refer clients to another practitioner, not only for instances where the practitioner is unable to provide the care needed, but also for times when the client becomes a potential danger to the practitioner, whether physically or mentally.

Due to the sensitive nature of work involving returning FTFs and VEOs, practitioners must take precautions to protect themselves against their clients, families and outside groups.[204]

202 Peracha, "Contribution to Hedayah's Program."
203 Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."
204 Group Discussion, "Hedayah's Program on Rehabilitation and Reintegration."

5

SAFETY AND SECURITY

> Physical and Procedural Security Measures

> Safety and Security of Staff, Clients and Visitors

> Information and IT Security

> Dynamic Security

This chapter covers the security and safety issues that the Center will need to manage, and suggests how that might be done.

PHYSICAL AND PROCEDURAL SECURITY MEASURES

This section will cover the tangible security elements for the center, and the appropriate processes in support of such measures. For example, any security equipment (CCTV, lighting, access control, etc.) will require a process for staff to use or test such equipment, where relevant. These processes will then, in turn, create a staff training need (see the section "Capacity-Building and Training Needs" under the chapter on "Human Resources").

GUIDING PRINCIPLE 70

Ensure that the physical and procedural security measures utilized by the Center are appropriate to the purpose of the Center and the clients who will receive its services.

If a Center will provide services to convicted violent extremist offenders, then the security regime is likely to differ significantly from a Center whose purpose is to support the rehabilitation of non-criminal family members of violent extremists. More information about this subject can be found in the UN's "Prison Incident Management Handbook."[205]

CONSIDERATION 70.1

Dependent on the level of security decided upon, the center should review and consider existing prison security models to base both the measures and the practices upon and adapt them to the context and needs of the Center. It will be important to decide who provides the security for the center (e.g., military, police or civilian/private security). This shall depend greatly on the precise purpose of the center and the local context, and the perceptions created by the level of security officers in charge of managing the external security of the Center.[206]

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[205] United Nations, "Prison Incident Management Handbook."
[206] Knoope, "Contribution to Hedayah's Program."

CONSIDERATION 70.2

When designing the measures for the center the following points should be covered, amongst others, for planning and budgeting purposes:

- Access Control
- Fences or walls
- Gates & Double Gates/ Doors for 'Airlock' Entry
- CCTV, both external & internal
- External Lighting
- Location & Equipping of a Security Control Room
- Guard Posts/Positions
- Security Staff Communications (*e.g. handheld radios*)
- Vehicle Access & Secure Parking
- Card Scan or Biometric Integral Door Locks
- Lockable Rooms
- Key Controls
- Signage at Access Points
- Person & Bag Search Regime
- Private Search Rooms & Equipment

CONSIDERATION 70.3

In alignment with the categorization and intake procedures, it will be important to decide security protocols related to the categorization or separation of clients. This relates to the services in the common areas, visitor areas and accommodation areas. For more on categorization, see section "Intake Assessments and Procedures."

CONSIDERATION 70.4

The Center shall need both male and female staff to operate the security system effectively, and in sufficient numbers to provide 24/7 cover. Staff should be able to understand and follow all the rules and regulations related to security of the center.

CONSIDERATION 70.5

To ensure perimeter security of the center the following need to be put in place:
a. Fully functional perimeter electronic detection systems;
b. Adequate perimeter lighting connected to a reliable power supply;
c. Clearly defined perimeter sectors and protocols for staff patrol;
d. The design and location of the infrastructure should provide for visibility and observation of clients; and
e. Testing of security systems such as emergency doors, alarms, communications, fire hoses, among others, on a regular basis.

CONSIDERATION 70.6

Secure space and accommodation should be provided for a control center to facilitate the secure management of security systems, including keys, communications, inmate and staff movement, emergency supplies, and other security equipment and control access and egress to the facility or area of responsibility. The control center should be well-equipped and all equipment should be functioning properly, including video monitors, intercoms, fire alarms, electronic locking systems including indicator lights, and perimeter detection system alarm indicators. Staff on duty should be clearly instructed in emergency response measure and should be ready to act in case of emergencies.

CONSIDERATION 70.7

A proper hazardous material management plan should be in place and the center should be in compliance with all national and local regulations governing the handling, management, and disposal of hazardous material. Examples of hazardous materials which may be stored at the Center include: cleaning solvents (such as isopropyl alcohol or acetone), fuel for a generator, heating or boiler system, and fertilizers or oxidizers for lawns and gardens, among others. A proper and thorough inventory of all hazardous material in each department within the center should be maintained.

CONSIDERATION 70.8

It may be the case that staff accommodation is required on-site, as indicated by the level of threat from violent extremist groups and the location of the Center relative to those groups and the community. Appropriate security measures should also be in place surrounding the staff accommodation, but not to the extent that staff feel detained.

CONSIDERATION 70.9

The physical security measures must be supported by and operated in accordance with appropriate processes. E.g. metal detectors at entry points must be tested and operated according to laid down standards and instructions, and where there is a positive response from a detector (i.e. possible indication of a metal object) there must be a process in place to resolve that response – e.g. searching of the person and/or their bag. Procedures are becoming more critical as the use of advanced technology increases, especially when it comes to procedures for monitoring CCTV, perimeter security systems and electronic locking.

CONSIDERATION 70.10

It is possible that certain security measures may conflict with local cultural norms. For example, body searching may be sensitive, particularly with respect to gender. Great care will be needed when designing and implementing the processes and training for these procedures to respect human rights, gender and cultural sensitivity, and to preserve the dignity of clients, as provided for in Rule 1 of the "UN Standard Minimum Rules for the Treatment of Prisoners" (the Nelson Mandela Rules).[207] It will be wise to align such processes with those already in place for the public, such as at airports, or on entry to protected public buildings or at major public events.

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[207] United Nations, "Standard Minimum Rules for the Treatment of Prisoners."

CONSIDERATION 70.11

All security staff should be very well aware of the standards and procedures for conducting area searches, and cell and body searches and these standards should be clearly written and accessible to all staff.

CONSIDERATION 70.12

Safety and security measures should comply with international human rights standards and avoid punishments such as torture. These types of abuses do not only violate the rights of the individual, they also destroy what should be the protective role of the Center, and enrages communities, feeding into the narrative of the violent extremists.[208] While physical security is a core element of ensuring safety, there is a tendency to over-rely on the physical elements of security, which can have a negative impact on the humaneness of an institution. Prison architecture continues to evolve based on each society's social climate and sociological demands. Prison designs that meet minimum standards for the health and well-being of inmates are also more likely to facilitate the rehabilitation of prisoners.

CONSIDERATION 70.13

To ensure that the physical and procedural security measures employed by the Center are appropriate, periodic security audits or inspections need to be carried out. A security audit/inspection can include other aspects of the center's operations in addition to security measures. This security audit checklist will aim at determining the extent to which policy, procedure, standards and practices combine in the center to provide a safe and secure institutional environment.

GUIDING PRINCIPLE 71

Create and implement a plan for both contingency and incident management.

The Center will need to have an effective contingency and incident management plan to deal with any sort of emergencies and incidents. Contingency planning involves anticipating a variety of serious incidents that could occur and determining how each may be resolved with the resources available. This emergency response / contingency plan should establish a clear control and command structure. Security and other staff at the center should be well versed on the contingency plan and trained to accurately assess the nature and scope of the incident and the risks involved. This plan should enable the management to determine the appropriate intervention strategy to resolve the incident.

Those detained in prisons or clients at a Center are highly vulnerable to natural and other hazards due to the particular and secluded circumstances.[209] The main focus during all phases of incident management

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[208] Zeid Ra'ad Al Hussein, "Torture during Interrogations – Illegal, Immoral, and Ineffective: Statement by UN High Commissioner for Human Rights Zeid Ra'ad Al Hussein," United Nations Human Rights Office of the High Commissioner (2017), https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=22134&LangID=E.

[209] J. C. Gaillard and F. Navizet, "Prisons, prisoners and disaster," International Journal of Disaster Risk Reduction, 1 (2012): 33–43.

should be on preservation of life, and the safety of staff, clients, and any other people in and around the center. Protecting vulnerable inmates such as women, children, mentally ill or physically disabled inmates should be given the highest priority while developing the contingency plan. And if need be, moving them to an alternative location depending on the seriousness of the incident would also be a part of the plan.[210]

CONSIDERATION 71.1	CONSIDERATION 71.2
The management of HR should ensure that all staff are adequately trained to assess an incident and the risks involved, approaches for containing and controlling an incident, as well as how to return to normal operations as soon as possible. However, different categories of staff will likely receive altered guidance on how to respond.	To develop an effective contingency plan, there will need to be: clarity among the staff on their roles and responsibilities, exercises and training, established communication channels to the external support services (e.g. police, fire and medical services), as well as a detailed process plan.

CONSIDERATION 71.3

As diseases and viruses such as COVID-19 become greater global challenges, it is imperative that the management of the Center periodically assesses the facility's readiness to curtail the spread of dangerous diseases and viruses. The management should consider setting up lockdown protocols and contact tracing mechanisms. For example, the management can create a roster identifying specific names of staff members and client's engagement in both one-on-one sessions and clustered activities.[211]

GUIDING PRINCIPLE 72

Develop policies, SOPs and regulations governing disciplinary procedures.

The clients at the Center will be expected to cooperate with the authorities and follow the rules and regulations that govern the functioning of the center and will be subject to certain restrictions. These rules and regulations would generally include list of prohibited articles, actions that will amount to be breach of discipline, and the corresponding sanctions.

Whenever possible, the Center's authorities should use mechanisms of restoration and mediation to resolve disputes with and among offenders/clients. However, where a client conducts a "disciplinary offence,"[212] the mandated person of the center may order disciplinary action be taken against him or her. Disciplinary action should be dispensed if it is sufficient to give the client a caution. Disciplinary action should also be permissible where criminal proceedings or proceedings concerning an administrative fine are instituted on account of the same misconduct.

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[210]   United Nations, "Prison Incident Management Handbook."

[211]   Iruayenama, "Contribution to Hedayah's Program."

[212]   Only conduct which is likely to constitute a threat to good order, safety or security should be defined as a disciplinary offence. See: Council of Europe, "Recommendation Rec (2006)2 of the Committee of Ministers to member states on the European Prison Rules," Council of Europe (2006), https://search.coe.int/cm/Pages/result_details.aspx?ObjectID=09000016805d8d25.

CONSIDERATION 72.1

The Center should apply a transparent and appropriate set of sanctions and safety-precautions. The national law and related rules must determine the acts or omissions by clients that constitute disciplinary offences, the procedures to be followed at disciplinary hearings, and the types and duration of punishment that may be imposed.

CONSIDERATION 72.2

Disciplinary sanctions against clients should only be imposed by the competent authority strictly in accordance with the regulations after thorough investigation of the disciplinary offence. The facts and circumstances of the misconduct should be clearly recorded and the client heard. The findings should be recorded in writing and the client's defense noted down. The offender/client should be given an opportunity to raise requests, suggestions and complaints on matters concerning himself to the Head of the Center.

CONSIDERATION 72.3

Disciplinary action should, as a rule, be undertaken immediately.

CONSIDERATION 72.4

Discipline and order must be maintained with no more restriction than is necessary to ensure safety of all and secure operation of the center.[213]

CONSIDERATION 72.5

In the event of the disciplinary offence amounting to be prosecutable as a crime, the client should be entitled to all guarantees applicable to criminal proceedings including access to legal counsel.[214]

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[213]   United Nations, "Standard Minimum Rules for the Treatment of Prisoners," Rule 36.
[214]   United Nations, "Standard Minimum Rules for the Treatment of Prisoners," Rule 41-45.

SAFETY AND SECURITY OF STAFF, CLIENTS AND VISITORS

The safety and security of the staff, clients and visitors is a prerequisite for the success of the Center. Staff are likely to be at physical and psychological risk from their involvement with, and proximity to, the clients. Staff may also be at risk from violent extremist groups that the clients are linked to, therefore appropriate measures should be put in place based on a credible threat and risk assessment. Whilst clients may be at risk from other clients, including from different groups of clients or from clients in the same category/group as themselves. They may also be at risk of self-harm. Given the sensitivities and strong emotions around acts of terrorism, it is possible that in certain circumstances some clients could also be at risk from some staff members. Further, when leaving the center for reintegration into a community, there may be additional risk to the clients. Finally, it is also important to ensure the safety and security of any individual who may visit the center. When considering security, it should be noted that human rights and security are compatible, and care should be taken when designing security processes in order to maintain this.

GUIDING PRINCIPLE 73

Prioritize staff safety and security, in order to ensure the
effective running of the Center.

In order to effectively operationalize a Center, all staff involved must be confident that their safety and security is regarded as a priority.

CONSIDERATION 73.1	CONSIDERATION 73.2
The safety and security of staff should be an aspect of every decision taken in the running of the Center.	The staff should be consulted on any changes within the center that could be perceived as increasing risks to them. For example, if a process formerly requiring the presence of two staff to one client is now proposed to be one staff to one client, the staff should be able to provide feedback on how that might impact their safety.

The staff should be briefed regularly (this could be weekly or daily if necessary) on security and safety issues. This can include changes to threats or risks of individuals, changes to threats or risks of the surrounding environment, events within the Center (including security incidents) that may have an impact on client attitudes and behavior, or upcoming events that may be relevant.

The safety and security of the staff should be considered both inside and outside the Center.[215] In particular, when staff work outside the Center, specifically when engaging with the communities, there may be additional risks arising from their actions.[216] Community apprehensions, envy or anger at perceptions of 'privileged treatment' of the clients could put staff at risk. In addition, if the staff live outside the Center, their presence in the community, knowing their occupation, could put staff and their families at significant personal risk. These concerns should be covered in the Center's security threat and risk assessment and, if there is a risk, then it may be useful for staff to mitigate the risk by, for example, operating in pairs rather than alone or being accompanied by a security officer from the Center.[217] It also may be the case that accommodation is provided for staff at the Center, or that staff are advised to live in different areas that are less risky and provided transportation from their homes that is safe and secure.

GUIDING PRINCIPLE 74

Create and Implement security-related SOPs for staff, covering both their safety and that of the clients they support.

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The SOP should cover all that staff need to be aware of and should guide them on the processes to follow, where to find additional information, and who within the center they should contact if they have any questions or concerns. In order to ensure familiarity with the SOP and for management information purposes, a record should be kept of staff awareness and updates – i.e. staff signing a declaration that they have read and understood the SOP. See section "Development of Standard Operating Procedures" for more information.

The absence of security-related SOPs related to clients may also reinforce the violent extremists' mindset and create distrust towards the authorities, creating a tension between clients and staff that may jeopardize the rehabilitation process.[218]

215 UNODC, "Handbook on the Management of Violent Extremist Prisoners."
216 Abiye M. Iruayenama and Shah Salman Khan, "Contributions to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
217 Musliu, "Contribution to Hedayah's Program."
218 Radicalisation Awareness Network, "RAN P&P Practitioners' working paper: Approaches to violent extremist offenders and countering radicalisation in prisons and probation," RAN Working Paper (2016): 27, https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/networks/radicalisation_awareness_network/about-ran/ran-p-and-p/docs/ran_pp_approaches_to_violent_extremist_en.pdf.

CONSIDERATION 74.1

The SOPs should be read (and signed for) by all staff on commencement of their employment, and at regular intervals thereafter (e.g. annually).

CONSIDERATION 74.2

The SOPs will need to be created, and should take account of available good practice on security, including from the national prison authorities, where relevant. The SOPs should be regularly reviewed and may be adapted as the Center experiences new situations and challenges that were unexpected during the development.

CONSIDERATION 74.3

The security measures set out within the SOPs should be consistent with relevant human rights legislation. The Human Rights and Prisons: Manual on Human Rights Training for Prison Officials provides important information on developing prison security policies and procedures, particularly Section V "Making Prisons Safe Places."[219]

CONSIDERATION 74.4

The security measures set out within the SOPs should be consistent with both the physical security measures at the center and the security training provided to the staff.

CONSIDERATION 74.5

There may be a need for staff to receive and be trained on the use of personal security equipment and these and similar points should be covered in the SOPs.

CONSIDERATION 74.6

The security SOPs may also contain guidance on responding to critical incidents (e.g. fire, earthquake, external attack, epidemic, etc.) and on responding to injuries, and other health and safety matters.

CONSIDERATION 74.7

The SOP should contain guidance on responding to emergencies as well as other contingencies. See sections "Management of Human Resources" and "Physical and Procedural Security Measures" for information on responses to emergencies and contingency plans.

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[219] Office of the United Nations High Commissioner for Human Rights, "Human Rights and Prisons: Manual on Human Rights Training for Prison Officials," United Nations, Professional Training Series no. 11 (2005). https://cdn.penalreform.org/wp-content/uploads/2013/06/man-2005-humanrightsandprisons-en.pdf.

GUIDING PRINCIPLE 75

Provide security training to all staff on initial employment, as well as refresher and update training on an ongoing basis.

Staff security training should be comprehensive and progressive. See section "Capacity-Building and Training Needs" for more information.

CONSIDERATION 75.1

The security training should be designed and created well in advance of the opening of the Center, and should take account of available good practice.

CONSIDERATION 75.2

The training should be tailored for different categories and security clearances of staff. Appropriate security briefings should be prepared and made available for all external specialists and visitors.

CONSIDERATION 75.3

The security training should cover operating with the applied physical security measures. For example, where doors are controlled by an electronic card or by biometrics such as fingerprint, the training should cover its use, what to do if the door does not operate, where to return a faulty card, and who to contact for more information.

CONSIDERATION 75.4

All staff should have supervision that can effectively monitor their compliance with security processes, and provide and receive feedback.

CONSIDERATION 75.5

Security training should be considered in the widest sense and include, e.g., elements on dealing with fire and accidents/first-aid.

CONSIDERATION 75.6

Security training should be reviewed and updated at regular intervals and take account of new experiences, threat or risk information, or good practices developed in the Center or elsewhere.

CONSIDERATION 75.7

Training may include contingency planning and simulation exercises to give staff the necessary practice in predicting and responding to incidents.[220]

CONSIDERATION 75.8

During the initial establishment of Center, it may be worth seeking the short-term secondment of relevant staff from appropriate institutions, for example a group of experienced, qualified and trained prison staff, for six months, in order to allow newly recruited staff to complete their training and gain experience.

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220   United Nations, "Prison Incident Management Handbook."

GUIDING PRINCIPLE 76

Develop and implement a process for security threat and risk assessment, ideally taking account of information from government entities.

In order to have effective security at the Center there must be an understanding of the potential threats faced by the center and the risks to those within it. Typically, governments have effective threat assessment processes and the Center management should seek to be informed by that. Such an assessment will inform not only the physical security of the center, but also staff and client security. See sections "Roles and Responsibilities of Government Entities" and "Coordination and Information-Sharing" for more on multi-agency coordination and information-sharing.

CONSIDERATION 76.1

The threat assessment process should take account of the potential impact of external events on the clients within the Center, their families and other visitors to the center, and on the communities relevant to the Center (e.g. the clients' origin communities, the communities clients may be reintegrated into, and the community in which the center is located). The effects of external events could impact heavily upon client/staff relationships and on the center's relationship with its local community. Potential relevant events include: terrorist attacks elsewhere, inter-communal violence, and security force actions including reprisals in communities relevant to the clients.

CONSIDERATION 76.2

A threat assessment is not static and it should be updated regularly and on an 'as needed' basis. Once updated, the Center's security measures should then be reviewed to ensure that as far as is practicable measures are in place, or can be put in place, to mitigate the assessed threats.

GUIDING PRINCIPLE 77

Ensure the safety and security of the clients as a prerequisite for the success of the center.

For the clients to succeed in following their client plans and in being prepared for successful reintegration it is vital that their safety and security be assured and that they are confident about this. More information can be found in Council of Europe Handbook for Prison and Probation Services Regarding Radicalization and Violent Extremism,[221] and in the "UN Standard Minimum Rules for the Treatment of Prisoners" (the Nelson Mandela Rules).[222]

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[221] Council of Europe, "Council of Europe Handbook for Prison and Probation Services."
[222] United Nations, "Standard Minimum Rules for the Treatment of Prisoners."

CONSIDERATION 77.1

If a client does not feel confident that their safety and security is provided for by the Center, there is a risk that they may seek out other means of security, including groups and gangs which offer protection. This can significantly increase the risks within the Center and negatively impact the rehabilitation and reintegration processes.[223]

CONSIDERATION 77.2

The accommodation and movement of clients within the Center must take into account the categorization of the clients. For example, clients affiliated to one violent extremist group may be at risk of violence or intimidation from clients associated with other groups, or from the wider community. Clients may also be at similar risk from other clients affiliated with their own category/group. For example, senior or more ideologically committed clients may seek to influence, intimidate or harm those members of their own group that they perceive as junior or less ideologically committed, as they progress through their rehabilitation.

CONSIDERATION 77.3

As there may be risks to clients from others, or of self-harm, there should be regular visual checks by staff on clients both during the day in the center and in their sleeping accommodation. This could include patrolling by security staff as well as CCTV monitoring.

CONSIDERATION 77.4

There could be risks to the families of clients during or after the clients' stay in the Center. Whilst their security may not be a direct responsibility of the Center, the center's management and security staff may become involved in such issues and coordinate with relevant government authorities as appropriate. The inter-agency model can be leveraged for this sort of engagement.

CONSIDERATION 77.5

Before clients leave the Center for reintegration into a community, the Center staff should provide them with a security briefing covering likely scenarios and how they can minimize risk (e.g. areas to keep away from, activities that may carry more risk, who to contact if they feel they are at risk). It may also be useful to have community leaders/members give clients an orientation briefing that also includes matters that could affect their safety and security.

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[223] RAN, "RAN P&P Practitioners' Working Paper," 27.

GUIDING PRINCIPLE 78

Put in place appropriate measures to manage visitors to the Center,
including the families and friends of clients.

There will be security measures that will need to be applied to all visitors, however there may be different measures for the various categories of visitor. For example, there may be different measures for expert practitioners visiting on an occasional basis, compared to the relatives of clients. Such measures should also include appropriate processes for managing child visitors, if relevant.

The Center should establish a process and rules for admitting visitors to the Center. Some guiding questions to establish these rules include:

- Who is eligible to visit the Center?
- How long are visitors allowed, and during which times of the day?
- How often are visitors allowed?
- What notification is required and how far in advance?[224]
- What is the expected conduct of visitors in interacting with clients?
- Will the visitations occur within the same room or in separate cubicles? How will the Center ensure that a client is not able to share information with another client's visitor(s)?[225]

CONSIDERATION 78.1

There will need to be 'security vetting' of visitors in advance – i.e. visitors cannot simply turn up and be given entry, especially if they are unknown to the Center. A process will be required and the requirements will need to be communicated to potential visitors.

CONSIDERATION 78.2

There will need to be guidance in place for visitors, including visitor parking, a sign-in and out process, contraband list, person and bag searching, etc.

CONSIDERATION 78.3

Security processes should cover the monitoring of visitors inside Center, including: escorting to and possibly within meeting rooms, designating which rooms are suitable for such meetings, and timings for meetings.

CONSIDERATION 78.4

Center management should decide whether clients have to meet certain conditions before visitors are received. This should be included in the rules for clients and disciplinary procedures.

[224] Peter Knoope and Robert Örell, "Contribution to Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches," Hedayah (July 2020).
[225] Yuliani, "Contribution to Hedayah's Program."

The meeting areas within the Center that are selected for family visits should be child-friendly (if children are to be allowed into the Center).[226]

When appropriate the Center staff may also need to monitor and control the clients' communications with people outside of the Center, to include: telephone calls, mail and email.[227]

GUIDING PRINCIPLE 79

Establish a proper access control mechanism for the Center.

To ensure that the Center has a functioning access control mechanism, the Center should implement and develop regulations which address the following procedures:

a) The Center should have a Pass and Registration Office to issue permanent, temporary, and single-use passes.
b) The identification of all persons entering and exiting the Center will need to be determined and verified by staff assigned and trained to control access.
c) All persons including staff, clients or visitors should be searched upon entry.
d) All purses, packages, toolboxes, etc. should inspected before being allowed in the Center.
e) The Center should have a room to store prohibited items of individuals entering the Center as per the regulations.
f) All vehicles entering and exiting the Center should be subject to mandatory inspection.

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[226] Adams, "Contribution to Hedayah's Program."
[227] UNODC, "Handbook on the Management of Violent Extremist Prisoners."

INFORMATION AND IT SECURITY

Due to the sensitivity around violent extremism, information relating to clients, staff and the center itself will necessarily also be sensitive. Processes should be put in place to protect such information from those not authorized to receive it.

GUIDING PRINCIPLE 80

Create and implemented a SOP for the secure storage and sharing of information, within the center and to/from external partners.

Information, whether in written (hard-copy) or electronic form (e.g. on a computer, laptop, phone or USB stick) should be securely stored. Information should be shared only with those authorized to see it.[228] In addition, the storage and sharing should be subject to auditable processes to ensure these requirements are adhered to. More information on this subject can be found in Non-Custodial Rehabilitation and Reintegration in PCVE and RLVE: A guidebook for policymakers and practitioners in South-Eastern Europe.[229]

CONSIDERATION 80.1	CONSIDERATION 80.2
SOPs on information security will need to be created and should take account of regulations from national security authorities, as well as available good practice, including, for example, from the national prison authorities, where relevant. The SOPs should guarantee confidentiality of the client's personal information and clearly spell out the kind of protection and safeguards around access to information, sharing of information and the authorized agencies and personnel. The Center's SOPs should establish technical and organizational measures which ensure personal data is processed by default with the highest privacy protection. This will affect the amount of data collected, the extent of its processing, its storage period and accessibility. The measures must particularly ensure that the data cannot be made accessible automatically to an indefinite number of persons by default.	The SOPs should be read (and signed for) by all relevant staff on commencement of their employment, and at regular intervals thereafter (e.g. annually).

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[228] Adams, "Contribution to Hedayah's Program."
[229] OSCE, "Non-Custodial Rehabilitation and Reintegration."

CONSIDERATION 80.3

The SOPs should cover IT functions such as back-ups and secure storage for backups, as well as the filing and secure storage of hard-copy information.

CONSIDERATION 80.4

The SOPs should cover the information transfer process internally within the center, and the transfer process externally. This may include a list of authorizing staff for the external transfer of sensitive information.

DYNAMIC SECURITY

Creating a safe and secure environment in the Center would not be possible solely by having physical and procedural security arrangements, rather it will also depend on having dynamic security arrangements in the Center. Dynamic security depends on an alert group of staff who continuously interact with the clients, know their needs and develop positive relationships with them. By practicing dynamic security, staff will be able to gather useful information about the clients and can ensure that the clients continue to take part in constructive and purposeful activities, thereby facilitating their future reintegration into society. Dynamic security is based on the idea that positive relationships between staff and clients help security and maintaining control by improving the flow of information from clients to staff.[230]

Staff at the Center should prioritize the creation and maintenance of everyday communication and interaction with clients, based on professional ethics, which helps them to engage with clients in meaningful ways, and to reduce destructive behaviors/attitudes, whilst reinforcing constructive ones. Through effective engagement the staff can have greater interaction with clients leading to an improved understanding of their needs, giving insights into behavior. This also helps support fair treatment and trust-building, thereby contributing to maintaining order. The stronger relationships and better information gained can lead to enhanced decision-making by the Center's staff.[231]

GUIDING PRINCIPLE 81

Prioritize the creation and maintenance of everyday communication
and interaction with clients, based on professional ethics,
in order to collect useful information.

It is helpful to engage with clients in meaningful ways, and can reduce destructive behaviors or attitudes whilst reinforcing constructive efforts. Actively engaging and maintaining good relationships with clients in order to collect information is a key aspect of dynamic security. This information helps to identify dangerous or even criminal activity; its purpose is to detect threats within the Center in order to protect against them. Timely detection and prevention of potential incidents serves all concerned much better than responding to these situations when they have escalated to dangerous levels. In addition to help strengthen security, this information also assists in intake, assessment and classification, and inform interventions and rehabilitative measures. More information can be found in the "Prison Incident Management Handbook"[232] and "Handbook on the Management of Violent Extremist Prisoners and the Prevention of Radicalization to Violence in Prisons."[233]

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[230] United Nations Office on Drugs and Crime (UNODC), "Handbook on Dynamic Security and Prison Intelligence," Criminal Justice Handbook Series (2015), https://www.unodc.org/documents/justice-and-prison-reform/UNODC_Handbook_on_Dynamic_Security_and_Prison_Intelligence.pdf.
[231] Khan, "Contribution to Hedayah's Program."
[232] United Nations, "Prison Incident Management Handbook."
[233] UNODC, "Handbook on the Management of Violent Extremist Prisoners."

CONSIDERATION 81.1

The approach to meaningful engagement should be systematic, with processes for structured information-gathering. All staff should be familiar with and have the responsibility to gather information and pass this information to the relevant department.

CONSIDERATION 81.2

Where the information leads to a better understanding of clients and risks, this can support better decision making by Center staff. This could mean reducing Center restrictions on clients when there is evidence that they are improving behaviors.

CONSIDERATION 81.3

Information gathered by staff in the center should be part of a broader law enforcement intelligence system especially if it includes information on any potential criminal or terrorist activity. Timely and actionable intelligence can make a significant impact on the prevention, reduction and investigation of serious crime including terrorist activities.

GUIDING PRINCIPLE 82

Provide training to staff on dynamic security, to include ethical standards, inter-personal skills, religious and cultural diversity.

Staff working with RFTF clients need to have high level of interpersonal skills and a good understanding of the different religious, ethnic and cultural groups that the clients may belong to. In order to be effective in dynamic security and to avoid behaviors that could be counterproductive, staff require appropriate skills and knowledge. See section "Capacity-Building and Training Needs" for more information on enhancing the skills and knowledge of the Center's staff.

CONSIDERATION 82.1

Staff should be trained and briefed on ethical conduct, inter-personal skills, religious and cultural diversity, professionalism in information collection (timely, relevant, accurate) and recording (use of IT), and on maintaining the confidentiality of sensitive data.

CONSIDERATION 82.2

Staff should also be trained on pathways leading to RLVE, and on potential signs of radicalization in order to improve their understanding of the clients' contexts.

CONSIDERATION 82.3	CONSIDERATION 82.4
Staff working in this Centers should believe in the mission of the institution. A thorough selection and recruitment process will be required, in order to operate with staff which are qualified and motivated to work with the target group of clients.	It is possible to teach staff the techniques on how to how to approach clients, however, it is not always possible to teach ´the mindset´ which is required to work with this particular group of clients.

RULE 76:
"Training shall include, at a minimum, training on: [...]

(c) Security and safety, including the concept of dynamic dynamic security, the use of force and instruments of restraint, and the management of violent offenders, with due consideration of preventive and defusing techniques, such as negotiation and mediation"[234]

– THE NELSON MANDELA RULES –

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[234] United Nations, "Standard Minimum Rules for the Treatment of Prisoners."

6

ASSESSING THE CLIENT

> Information gathering and sources

> Trust building

> Intake procedures and client classification

> Assessments

> Client plan

This chapter reviews the different ways in which the client can be assessed, upon intake and through-out the process of rehabilitation and reintegration. It gives some examples of how to gather information about the client and build trust with them. It also reviews procedures for intake assessments, needs and strengths assessments and risk assessments. Finally, it outlines the requirements of a client plan.

INFORMATION GATHERING AND SOURCES

This section covers information on clients gained before their arrival in the Center or during their stay there. There are many potential sources for information that may be useful to the Center and assist with the development of an appropriate client plan.

GUIDING PRINCIPLE 83

Before clients arrive at the Center, collect the appropriate information about them for a client file.

Whilst practitioners may disagree on the information required to conduct entry interviews or assessments, it is evident that more information can provide a more useful picture of a client. This can help the Center to manage risks to staff and help inform the design of a tailored client plan, by spotting vulnerabilities and recidivism red flags, thereby contributing towards the likelihood of successful rehabilitation and reintegration of the client. See section "Safety and Security of Staff, Clients and Visitors" for more information on the security of staff and section "Client Plan" for more information on the specifics of a Client Plan.

"Collect information as much as possible, and ask contacts for all they know about the client – every case is individual"[235]

CONSIDERATION 83.1

The Center should seek to obtain sufficient background information on the circumstances in which the client has lived and the potential safety and security risks this may pose for the clients and staff in the center.[236] This information can be historical, legal, related to family or child welfare, juvenile justice or criminal history, educational background, and many other types of information.[237]

CONSIDERATION 83.2

State authorities, such as police and prisons (if the client is coming from there) are likely to have much valuable information, including risk assessments. Processes must be in place in the Center to allow such authorities to share potentially sensitive information and for the storage and sharing of it within the Center. See section on "Coordination and InformationSharing" for more information on the approaches to sharing information between government entities.

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235 Walkenhorst, "Contribution to Hedayah's Program."
236 Adams, "Contribution to Hedayah's Program."
237 Tyler, "Contribution to Hedayah's Program."

The client's family and friends are likely to be good sources of relevant information. However, the Center should be aware that the family members or friends may be part of the problem (e.g. sympathetic to the violent extremist ideology or hold negative feelings towards the client), and this should be assessed when analyzing the information gathered. The Center should develop a protocol for reaching out to families and friends, as getting them involved from the beginning of the client's rehabilitation may have significant therapeutic benefits for the client.

Ideally, a background check of the client's criminal record (if relevant) and backstory is a necessary procedure before practitioners are allowed to engage with the client, due to potential risks.[238]

When collecting self-report data, practitioners should be aware of social-desirability bias. Clients might tend to under-report information deemed negative, particularly when client-practitioner rapport and trust has not been established.[239]

GUIDING PRINCIPLE 84

Promote a culture where practitioners maintain a genuine interest to gather more information directly from the client.

Clients themselves are the most important source of information. It will be critical for the practitioner engaging with the client to remain open and curious to receive more information. If a practitioner has read or received significant information on the client prior to their first meeting, there is a risk that the practitioner could develop their own assumptions and biases. Additionally, if the practitioner appears to know a lot about the client before meeting, this will likely hamper the trust-building process. The client may feel that they are already stigmatized or being pre-judged, and may not be as willing to share their own views and perspectives. Therefore, it is important that even if the practitioner has already gathered information about the client before the first meeting, practitioners should be careful to retain their curiosity about the client.[240] The initial interviews with the client should still be conducted in a conversational manner rather than interrogative, and practitioners should seek information in a neutral and non-judgmental way. See the next section on "Trust building" for more information on how to develop trust and a working relationship with the client.

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[238] Anonymous, "Contribution to Hedayah's Program."
[239] Iruayenama, "Contribution to Hedayah's Program."
[240] Järvå, "Contribution to Hedayah's Program."

CASE STUDY: REHABILITATION PROJECT FOR HIGH RISK PRISONERS IN THE BAIDOA PRISON, SOMALIA

The Rehabilitation Project for High Risk Prisoners in the Baidoa Prison, implemented between March and December 2016, was a pilot project aimed to establish modalities for rehabilitating high-risk prisoners in Baidoa, Somalia. The project was implemented by Finn Church Aid (FCA) and the Centre for Research and Dialogue (CRD), with UN Assistance Mission in Somalia providing monitoring and implementation support.

The project aimed to develop individualized approaches for rehabilitation activities and release plans that considered all relevant personal and contextual information to include demographic details, family information, educational attainment, reasons for joining al-Shabaab and vocational skills. In order to tailor the interventions, the case files included information gathered through various sources, such as:

- Quantitative Questionnaires: The data collected through this method included: background information, demographic details, family information, educational attainment, reasons for joining al-Shabaab, etc.
- Risk Assessment Tools: the Risk, Needs and Receptivity tool, and the Observation and Assessment During Detention forms.
- Family Program Information: which included information about the client's relationship with their family members.
- Education and Vocational Training Information: to include data on attendance and results.
- Psychosocial/Mental Health Information: initial mental health data would be collected which may be expanded later by a qualified professional.
- Release Plan / Reintegration Information: to include information which is periodically updated on where the client would be reintegrated and their employment/education preferences for release.

The evaluation of this pilot project highlighted that it has the potential to substantially improve the lives of the beneficiaries. It also noted that significant information was being collected. However, an important recommendation included the hiring of a Data Manager and the adoption of specific software for the management of data (rather than the use of Microsoft Word or Excel), to avoid potential errors in data collection.[241]

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[241] James Khalil, "Pilot Rehabilitation Project for High Risk Prisoners in the Baidoa Prison – Final Evaluation," United Nations (2017): 15, https://www.un.org/peacebuilding/sites/www.un.org.peacebuilding/files/documents/somalia_january_2017_-_evaluation_of_rehabilitation_project_in_baidoa_prison.pdf.

TRUST BUILDING

Building trust with the client, particularly by the practitioners (psychologists, counselors and social workers) within the Center, is the essential underpinning to the rehabilitation process and therefore vital for the ultimate goal of successful reintegration. This section provides guidance on how trust with the client can be built for these purposes.

GUIDING PRINCIPLE 85

Allow sufficient time and effort in the rehabilitation process for practitioners to build trust and a relationship with clients.

Trust is fundamental when it comes to sensitive information. Without a certain level of trust, clients might never share any relevant information with the Center's staff. Trust is not something that can be automatically established, in most cases it has to be earned. In order to best support the client in achieving successful rehabilitation and reintegration, the practitioners must work diligently to build a trusting relationship. Importantly, the client needs to see that the staff care about their progress and eventual reintegration to society.[242]

Building trust takes time. It is important to understand that trust is not always easy to establish and that the overall process may require significant time and multiple engagements. It is advisable for the practitioner to be patient, as the client may not immediately respond positively to the practitioners or listen to what they say. In fact, if the client is still radicalized during the early engagements, it is possible that they may perceive the practitioners as enemies or a tool for security agencies to extract information.

CONSIDERATION 85.1

Building trust with the client is essential for successful interventions. All interventions will benefit from a trusting relationship between practitioners and the client, and building trust with the client is fundamental for motivation and common understanding.[243] Trust building can create an environment in which people feel safe, physically and psychologically, and having built trust, the relationship can then be a foundation for interventions.

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[242] Iruayenama, "Contribution to Hedayah's Program."
[243] Bennardi, "Contribution to Hedayah's Program."

It may help if practitioners introduce themselves as "helpers" during the first set of meetings to reduce the perception of a meeting being too formal or clinical. It also can help if practitioners can show their own vulnerabilities (without sharing confidential information), call the clients by their first names, do not take too many notes, encourage the client to talk freely, and create a discussion about many topics.[245] However, in doing so, the practitioner should avoid making promises and unrealistic commitments to the client. Broken promises can have a direct negative impact on the relations between the practitioner and the client, particularly on the willingness of the client to trust and confide in the practitioner.

Staff should speak with the clients with respect, both physically and developmentally, and approach them as equals.

GUIDING PRINCIPLE 86

Ensure that the Center's staff and practitioners are transparent, honest and open with clients.

The practitioner engaging with the client should be transparent, honest and open as much as possible.[246] Being open, particularly about the purpose of the practitioner's work, can help to build trust and make the client feel more comfortable. When a practitioner is open about their methods of work, beliefs and values, and personal experiences that may inform their response, they can help make the origins of their ideas clear to the client, and in response the client may also be willing to be more transparent about their own experiences. Honesty and transparency can also help minimize concerns about confidentiality of the information they share and who may see it.

Practitioners may consider sharing appropriate personal experiences, which can emphasize common humanity and interests, and may support the relationship-building. At the same time, the practitioner should be careful not to reveal too much personal information that could put their safety or the safety of their family at risk, or reveal secure information that is considered confidential about another client or security situation. Before being transparent, a practitioner must consider whether all information will be beneficial to the relationship, specifically, how the practitioner's point of view or social identity may be perceived by the client.

245 Bennardi. "Contribution to Hedayah's Program."
246 Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."

GUIDING PRINCIPLE 87

Emphasize to staff the need to develop empathy and understanding towards the client's circumstances.

The practitioner needs to be able to show empathy to the client in order to build a trusting relationship. The specific profile of the practitioner may assist with their ability to empathize and establish trust with clients. For example, if the practitioner is of the same gender, background, ethnicity and religion, or of similar age group and speaks the same languages as the client, this can facilitate a better relationship. However, it should be noted that in some cases it can help if the practitioner is from a different background compared to the client, as it may expose the client to diversity and create a bond with a new type of individual. For more on this subject, see the sections on "Qualifications, skills and profiles" and "Management of Human Resources" under the "Human Resources" chapter.

CONSIDERATION 87.1

Particular care should be taken when working with clients who come from religious and/or cultural backgrounds that prohibits or frowns upon mixed-gender gatherings, particularly between a male practitioner and a female client (or vice versa) in a closed space.

GUIDING PRINCIPLE 88

Prioritize open-ended questions and active listening when engaging with clients.

Practitioners should focus on asking open-ended questions and avoid closed questions or questions that require only a single word response. Open questions will help the practitioner to learn more about where the client is coming from, and their backgrounds, interests, and feelings.

Practitioners may utilize approaches such as Motivational Interviewing in order to gather information. Such approaches often emphasize the importance of having an open, client-focused discussion that is only guided by the practitioner, rather than a series of many questions.[247] These approaches will also require strong active listening skills, which is a critical element for trust building. Practitioners should indicate to the client their interest in what the client is saying and that they understand. Active listening will also enable the practitioner to recognize and provide affirmations to positive or pro-social information shared by the client, as well as summarize and reflect back select comments and ideas raised by the client during the discussion as a method for reinforcing those thoughts.[248]

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[247] Walkenhorst, "Contribution to Hedayah's Program."
[248] Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."

> ## GUIDING PRINCIPLE 89
>
> Raise awareness of the impacts that the environment and
> body language can have on building trust.

It can be helpful to minimize the formality of the setting when trying to build trust with a client. For example, it may be helpful to remove physical barriers as much as possible between the practitioner and the client (e.g. a desk), it is important to sit at the same level as the client, or sit not directly facing the client (which can be perceived as adversarial or dominating).

Body language is an important element for building trustful relationships, it will be critical that the practitioners are aware of what their body language is subconsciously telling the client. One example of body language is the natural phenomenon of "mirroring", which individuals do automatically. Mirroring is the mimicking of another person's body posture, position or gestures, which enables trust be built easier due to the perception of similarity. Importantly, practitioners will also need to be able to control other automatic responses related to body language, for example, if the client says something that is shocking, the practitioner must be able to prevent their shock from being shown to the client, as such a display may prevent the client from sharing other information that they think may cause a similar reaction.[249]

> ## GUIDING PRINCIPLE 90
>
> Ensure that staff refrain from negative confrontation with the client,
> especially during the early phases of engagement.

The practitioner should avoid negatively confronting the client on their beliefs or views, especially during the early phases of engagement. If a client expresses views which the practitioner does not agree with, the practitioner should remain neutral, in order to collect further information before engaging with interventions. If a practitioner responds instantly to counter the view of a client, it is likely that the client will refuse to share their similar views again or will adjust the information they share. It will be more important to gain the trust and gather all relevant information before countering the client's views and ideology in a prepared manner.

> ### CONSIDERATION 90.1

Practitioners should avoid raising topics that are likely to provoke a negative response. In this regard, the use of accusatory or judgmental language should not be used, for example, questions that begin with "why?" that require justification of the client's behavior.

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249 Hedayah, "Supporting Families in Countering Violent Extremism: Training Curriculum."

Sometimes, a third party can help to build trust, especially for first engagements and for practitioners working in local communities. This person could be someone from the community related to the client – friend, family, local community or religious leader – or it could be another practitioner.[250] Having the third party in the room while introductions are taking place may help smoothen the transition and build trust by association with that credible third party.

Another method for gaining and enhancing vicarious trust is through a systems approach to trust-building, whereby practitioners engage with the family of the client to get their trust also, and the social network around the client.[251] If the family and friends of the client trust the practitioner, the client is also more likely to do so.

Clients may not trust or be willing to engage with external experts who are providing specific support in the center, such as vocational training. In this regard, clients may build trust more easily with such experts when offered to take part in activities voluntarily rather than having to join compulsorily. For example, one rehabilitation and reintegration center in Pakistan arranged for an art therapist to come draw in the common areas of the center. The clients were not asked to take part, but they naturally became curious and began to ask questions about how to draw. This led to an organically-instigated art class and art therapy session in the common area that was part of the rehabilitation process. The clients volunteered to take part and did not feel compelled to participate in a structured art therapy class.[252]

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[250] Bennardi, "Contribution to Hedayah's Program."
[251] Walkenhorst, "Contribution to Hedayah's Program."
[252] Peracha, "Contribution to Hedayah's Program."

INTAKE PROCEDURES AND CLIENT CLASSIFICATION

This section reviews the necessary steps and guiding principles for intake when a client first arrives at the Center.

GUIDING PRINCIPLE 93

Demonstrate and establish the values and goals of the Center during the client intake procedure.

The intake procedure is the first impression that a client will have of the Center, and therefore it is important to set the tone of the process of rehabilitation and reintegration through the intake procedure. Of course, the intake procedure should also comply with international human rights standards and the basic custodial requirements such as the Nelson Mandela Rules and the Bangkok Rules.

CONSIDERATION 93.1

Ensure clear communication between the client and Center staff. Be transparent about what each step is for in the intake procedure and what they will be required to do.

CONSIDERATION 93.2

Begin trust-building as part of the intake processes.

CONSIDERATION 93.3

Set clear expectations for the client from the beginning. This is especially critical with respect to establishing authority.

CONSIDERATION 93.4

Establish rules and regulations with the client from the outset. The client should know their limitations as to their behavior in the center: what can and cannot happen.

CONSIDERATION 93.5

Ensure the client has access to resources and accommodations that meet their basic needs.

CONSIDERATION 93.6

Classify, categorize and separate clients according to the Center's specifications. However, take care to accommodate for requests that may aid in the rehabilitation or reintegration process, such as ensuring parents have regular contact with children.

GUIDING PRINCIPLE 94

Ensure a holistic information-gathering process to account for various physical, social, cultural and religious aspects of the client's life.

The intake procedure and process should collect sufficient information on the client for staff to make decisions about their well-being and safety during their time at the Center. In alignment with UN Security Council Madrid Guiding Principles,[253] intake assessments (or any assessments) should not lead to profiling that leads to discrimination as defined by international law. See section "Information Gathering and Sources" for more information.

CONSIDERATION 94.1

Basic data such as gender, age, sexual orientation, weight and height should be collected from the client.

CONSIDERATION 94.2

Physical health conditions should be documented upon intake to make sure the Center staff can make quick decisions if a client's health is threatened.

CONSIDERATION 94.3

The Center should check for mental health issues like schizophrenia, psychopathy or other severe mental illnesses and challenges, to ensure treatment for those mental health issues is appropriately provided.[254]

CONSIDERATION 94.4

It will also be important to gain insights into the client's family background and social network, including: who they are, where they are located, their last contact with the client, the potential impact of the client's detention or attendance at the Center for their family, and whether the family are willing to -or should- visit the Center. Spouses, partners and children are of particular importance, as well as close friends and those the client may view as mentors.

CONSIDERATION 94.5

The Center should understand the religious background of clients, including for how this might relate to dietary requirements or accommodations for space/resources (e.g. a prayer room/space, access to a religious leader, or access to objects such as prayer mat or rosary).

CONSIDERATION 94.6

The Center should accommodate for dietary requirements, whether for religious reasons, due to allergies or health reasons, or due to personal choice.

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253 United Nations Security Council, Counter-terrorism Committee, "Madrid Guiding Principles."
254 Järvå, "Contribution to Hedayah's Program.

CASE STUDY: FAMILY SUPPORT, SAUDI ARABIA[255]

Central to Saudi Arabia's counterterrorism strategy is the soft approaches, which aim to counter the intellectual and ideological justifications for violent extremism. The strategy, especially the rehabilitation programs, have found very positive results with very low recidivism and re-arrest rates at 1-2%, according to the authorities.

A multi-stakeholder approach is taken to support a number of rehabilitation and reintegration programs for prisoners. This approach includes several specialized organizations, such as the Committee for Supporting Prisoners and their Families, the National Committee for the Protection of Prisoners, the National Committee for the Care of Prisoners, Released Prisoners, and their Families, and the Family Reconciliation Committee. These organizations work with prisoners, former-prisoners, and their families, in order to identify the social conditions and needs of the prisoners and their family members. For example, social services and support are provided to families whose incarcerated member was the main source of income. Saudi Arabia considers that this type of assistance is also important to help prevent family members also becoming radicalized by the hardship faced as a result of a prisoner's detention.

GUIDING PRINCIPLE 95

Classify clients according to a variety of factors from information collected in the intake assessment.

The clients should be classified, and potentially segregated, based on a number of different factors. Depending on how the Center is set up (e.g. residential versus non-residential setting, or with facilities to house families and children), the classification system can help to facilitate a better rehabilitation and reintegration process for each client and protect the system as a whole. Staff knowledge of these classifications is also important, because it can help them to make decisions about, for example, where to house clients, how to interact with clients, which relationships between clients might be meaningful, and which relationships between clients might be a threat to a client's progress.

A non-exhaustive list of potential classifications is described in the following table:

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[255] Christopher Boucek, "Saudi Arabia's "Soft" Counterterrorism Strategy: Prevention, Rehabilitation, and Aftercare," Carnegie Papers, Carnegie Endowment for International Peace, Middle East Program 97 (2008), https://carnegieendowment.org/files/cp97_boucek_saudi_final.pdf.

TABLE 5: **CONSIDERATIONS FOR CLASSIFYING CLIENTS**	
CLASSIFICATION	**CONSIDERATIONS**
AGE	Special considerations need to be made for children and juveniles. Segregation and separation must comply with international standards for law and human rights. Special protections are usually required for individuals under the age of 18. It may also be the case that elderly clients have special requirements and considerations for health or other reasons, and could be housed separately.
GENDER	Unless there is an opportunity for families to live together in a family unit, it is good practice to separate clients by gender. This prevents unwanted or unnecessary interactions between genders, which may be inappropriate for social or cultural reasons. Opportunities for interacting with the opposite gender may be provided for spouses or significant others, especially if it would be advantageous for the rehabilitation and reintegration processes.
HEALTH	Identifying the health requirements (including physical and mental health) of clients may also lead to classification. Health classifications can help to prevent the spread of infectious disease, as well as ease the access to clients that need more intensive attention due to possible health issues, including physical and mental health issues that might require more intense attention.
STATUS OR CAPACITY WITHIN VE GROUP	In some cases, it is useful to classify clients based on their social status or capacity within a violent extremist organization. For example, leadership roles may present specific threats to other clients, as they may be more capable of recruiting new individuals or reinforcing messages of the VEO. On the other hand, so-called "foot soldiers" that carried out orders may be separated from the leaders, as they may be more easily rehabilitated from their group affiliation if alternatives to their membership are provided. It may be useful to classify clients based on their role or skill in the VEO. For example, an individual that worked as a cook or a cleaner may require a different approach than an individual who was actively trained in combat or bomb-making. Considerations may also be made for the level of dedication that an individual has to a group. It may be advisable to separate the strong "ideologues" from those that are less dedicated to the ideology, because different approaches to rehabilitation and reintegration may be needed.
RISK LEVEL	Classifying clients by risk level helps Center staff to know which clients are more likely to become violent, or threaten the safety of other clients, staff or visitors. In the case of extremely high-risk clients, it may be advisable to house those clients separately from other clients, to protect the well-being of all involved, including to prevent self-harm of that individual.
SENTENCE PERIOD	The length of the sentence period or custodial arrangement may be a factor of classification because it influences the necessary time frame for rehabilitation and reintegration to take place. While all interventions should begin with the reintegration goal in mind, the time period for social reintegration for clients with shorter sentences is faster than those with longer sentences. For example, this may influence decision-making when it comes to providing that client with relevant social experiences for reintegration sooner.

CASE STUDY: CATEGORIZATION OF VE OFFENDERS IN BELGIUM[256]

Within Belgium's *Extremism Cell* (Cellule Extrémisme, CelEx) of the prison system, violent extremist offenders are classified into the following five categories:

Category A: Terrorist convicts (individuals convicted based on a terrorist offence, according to the penal code)
Category B: Terrorist assimilated (individuals who were either convicted in a case linked to terrorism or whose behavior is clearly linked to violent extremism)
Category C: Terrorist fighters (this includes foreign terrorist fighters and homegrown fighters)
Category D: Radicalized (individuals convicted for non-terrorism related crimes, but who show signs of radicalization)
Category E: Hate preachers

GUIDING PRINCIPLE 96

After the initial intake assessment, leverage subsequent assessments for the classification system, and revise classifications if necessary.

A client should have the opportunity to shift between different classifications where relevant, which can mostly be given through regular assessments. For example, a client with a "high risk" classification should be given ample opportunities to change their cognitive processes and behaviors so that they are no longer considered "high risk." This is especially the case because this label can be accompanied by stigma or more secluded conditions that are ultimately not productive toward successful rehabilitation or reintegration. As another example, a juvenile client, if housed for an extended period at the Center, may "graduate" into the adult category upon turning 18.

Importantly, the implications of the classification and categorization of the client should also be considered. For example, if putting a client in a higher risk category exposes them to unnecessary security threats, the categorization should be reconsidered. At the same time, the classification and categorization may remain confidential, and unknown to the clients themselves. When using any assessment tool, always remember they are tools to support professional decisions and not a decision-making tool. All tools have limitations, and this should be kept in mind when selecting tools and being trained upon them.

If resources allow, it may be the case that after the initial intake assessment, clients with unclear classifications may be housed separately for a temporary period to monitor before making a final decision as to their classification. For example, if a client is not clearly a "leader" or a "foot soldier," and displays qualities of both, it might be that they are temporarily separated until it can be determined that they can safely be integrated with the general pool of clients at the Center.

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[256] The International Centre for the Study of Radicalisation and Political Violence (ICSR), "Extremist Offender Management in Europe: Country Reports," ICSR, (2020), https://icsr.info/wp-content/uploads/2020/07/ICSR-Report-Extremist-Offender-Management-in-Europe-Country-Reports.pdf.

ASSESSMENTS

GUIDING PRINCIPLE 97

Select for the Center a set of assessment tools to provide a multi-dimensional view of each client.

Intake assessments, needs assessments and strengths assessments are all critical to the process of rehabilitation and reintegration. Approaches to rehabilitation and reintegration are largely successful when they address a variety of factors, address the risks and needs of the client, and account for the client's personal history, mental health, cognitive skills, and relationships (among other aspects).[257] The Center should evaluate different approaches available, and tailor their own approach to best fit the local context.

CONSIDERATION 97.1

Multiple tools should be used to give a multi-dimensional perspective of the client. If possible, these tools should be administered in phases to avoid saturating the client with questions.

CONSIDERATION 97.2

A multi-dimensional model may also include both individual and collective approaches to rehabilitation and reintegration. It is important to monitor and assess the progress of an individual, but also the progress of the group and group dynamics. This is particularly important when evaluating family members as a family unit.

CONSIDERATION 97.3

A multi-dimensional model should consider the variety of factors that could lead a person to be vulnerable to radicalization and recruitment in the first place. In particular, risk assessments should be combined with psychosocial needs and strengths assessments and social diagnostics conducted by psychologists and social workers. A holistic perspective on a case will likely be one of the most important elements for any assessment, particularly one that combines an assessment of needs and risks with available resources and protective factors of the client.[258]

CONSIDERATION 97.4

The model should focus on identifying vulnerabilities (i.e. risks and needs) and potential protective factors (i.e. community resilience mechanisms, individual strengths, coping strategies and social connectedness, such as with family and friends). In simple terms, interventions will later be designed to mitigate the vulnerabilities and enhance the protective factors.

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[257] OSCE, "Non-custodial Rehabilitation and Reintegration," 142.
[258] Walkenhorst, "Contribution to Hedayah's Program."

CONSIDERATION 97.5

Assessments should also be tailored to the clients served. For example, family assessments should assess environment, parenting capabilities, family interactions, family safety, child wellbeing, and available supports. Further toolkits may be used to assess psychosocial needs for individuals and families who have experienced humanitarian crises when applicable.[259]

CASE STUDY: HEXAGON TOOL[260]

The Centre for the Prevention of Radicalization Leading to Violence (CPRLV) in Canada uses the Hexagon Tool that was developed in conjunction with the Roméo Dallaire Child Soldiers Initiative as a way to analyze case studies of radicalization leading to violent extremism. This tool, which is built upon scientific literature and situations handled by CPRLV, seeks to help the user to improve and build upon certain factors which have contributed towards an individual's radicalization, as well as to guide the exploration of various aspects of the issue within a multidisciplinary approach. In turn, CPRLV and the client determine the goals and objectives for improvement. For each type of factor, CPRLV and their clients identify SMART objectives, and then potential actions to take based on each hexagonal area. Hexagon is designed to help social workers, community workers, health care professionals, police officers, teachers, and researchers to reflect upon complex situations more simply.

This Tool consists of six primary categories to be considered, namely:

SPHERES OF LIFE

The different life environments of a person, to include: social, professional, personal, and the places they visit.

PROTECTIVE FACTORS

Positive influences that enhance a person's resilience to radicalization leading to violent extremism. These factors or influences can reduce the risk of a person becoming engaged in violent extremism.

VULNERABILITY FACTORS

Negative influences that make an individual more vulnerable to radicalization leading to violent extremism. These factors increase the risk that a person will engage in a process of radicalization.

BEHAVIOR

Behaviors, that to varying degrees (non-significant, troubling, worrisome, or alarming), can be associated with situations of radicalization leading to violent extremism.

PREVENTION ACTORS

People who can help prevent situations of radicalization from emerging, or who can help reduce the risk of somebody becoming radicalized to violent extremism.

CONTEXT

Circumstances outside of a person's control related to their local or national sociopolitical context, or to international events.

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259 Tyler, "Contribution to Hedayah's Program."
260 Centre for the Prevention of Radicalization Leading to Violence (CPRLV) and Roméo Dallaire Child Soldiers Initiative, "Hexagon: Pedagogical Tool," CPRLV (2018), https://info-radical.org/wp-content/uploads/2018/04/FICHE_TECH_ALVEOLE_ANG.pdf.

A non-exhaustive list of potential assessment tools that can be adapted by the Center is provided below. It is recommended that the Center use multiple tools, or combine tools to best fit the local context, seeking advice from relevant experienced practitioners, locally and internationally.

CLASSIFICATION	NAME OF TOOL	DESCRIPTION
NEEDS (FAMILY**)**	Strengths and Stressors Tracking Device (SSTD)[261]	This tool is a rapid measure of family well-being that looks at strengths and needs of families. The SSTD is helpful to assess how the family unit adapts to change, and is sensitive to abuse (physical, verbal) and neglect.
NEEDS (FAMILY**)**	North Carolina Family Assessment Scales (NCFAS)[262]	This tool measures the family function from the perspective of the practitioner. This tool was expanded to include domains related to trauma, reunification and social interactions. Domains of the suite of tools include subjects such as environment, parental capability, interactions, social and community life, trauma, and self-sufficiency (among others). Each domain is ranked on a 6-point scale.
NEEDS (MENTAL HEALTH**)**	Assessing mental health and psychosocial needs and resources[263]	This toolkit was designed to help the development community assess mental health and psychosocial needs of beneficiaries. It collates good practice on existing tools to assess these needs, and provides guidance on the process of assessing needs.
NEEDS (PERSONAL, SOCIAL**)**	Strength and Difficulties Questionnaire (SDQ)[264]	This is an open-source questionnaire that screens behavior for youth ages 3-16. It covers 25 psychological attributes, and can be used to screen behaviors in young people such as emotional distress, behavioral conduct, hyperactivity, relationships, and prosocial behaviors.

[261] Marianne Berry, Scottye J. Cash, and Sally G. Mathiesen, "Validation of the Strengths and Stressors Tracking Device with a child welfare population," Child Welfare 82, no. 3 (2003): 293-318.

[262] Kellie Reed-Ashcraft, Raymond S. Kirk and Mark W. Fraser, "The reliability and validity of the North Carolina Family Assessment Scale," Research on Social Work, 11, no. 4 (2001): 503-520; National Family Preservation Network, "Overview of Assessment Tools," National Family Preservation Network (2015), https://www.nfpn.org/Portals/0/Documents/assessment_tools_overview.pdf.

[263] World Health Organization (WHO), "Assessing mental health and psychosocial needs and resources: Toolkit for humanitarian settings," WHO (2001), https://www.who.int/mental_health/resources/toolkit_mh_emergencies/en/.

[264] Robert Goodman, "Psychometric properties of the strengths and difficulties questionnaire," Journal of the American Academy of Child & Adolescent Psychiatry, 40, no. 11 (2001): 1337-1345.

NEEDS (PERSONAL, SOCIAL)	Ecological Needs Analysis[265]	This manual was designed for non-clinical practitioners that are involved in a preliminary assessment or evaluation of clients. The manual identifies needs, skills and resources across domains such as personal values and beliefs, biographical history, individual skills and competencies, social interactions and social groups. This manual was designed under the umbrella of a program to support psychologists and social workers handling radicalization leading to violent extremism, including those returning from abroad.
RISK (RECIDIVISM, GENERAL)	Level of Service Inventory Revised (LSI-R)[266]	This tool uses psychosocial status to predict the likelihood of general recidivism in adult offenders, not necessarily violent. The tool collects information on a number of domains, including history, recreation, education, employment, social connections, financial stability, marital status etc.
RISK (VIOLENCE)	Sexual Violence Risk (SVR-20)[267]	This is a checklist of 20 items that assesses the risk of sexual violence, particularly for those convicted of sexual offenses.
RISK (VIOLENCE)	Psychopathy Checklist-Revised (PCL-R)[268]	This checklist helps to diagnose levels of psychopathy in prison settings, which can also indicate propensity towards violence.
RISK (VIOLENCE)	Historical, Clinical, Risk Management-20 (HCR-20)[269]	This risk assessment tool is used by the EU, and was designed for violent offenders. However, it is also used for violent extremist offenders in several contexts. The model uses a SPJ approach, and assesses the risk for a violent offender to repeat their violent behaviors.
RISK (VIOLENCE)	Brøset Violence Checklist (BVC) [270]	This actuarial tool assesses confusion, irritability, verbal threats, boisterousness, physical threats and attacks on objects as being either present or absent for that individual. It is intended to predict violence in a short time (24 hours).

[265] Hedayah, "Ecological Needs Analysis," Hedayah (unpublished document).

[266] Donald A. Andrews and James Bonta, "The level of service inventory-revised (LSI-R): User's Manual," Toronto, Canada: Multi-Health Systems (2001).

[267] Douglas R. Boer, Stephen D. Hart, P. Randall Kropp, and Christopher D. Webster, "Sexual Violence Risk -20," Version 2, PAR, https://www.parinc.com/Products/Pkey/4534.

[268] RD Hare, "The Hare Psychopathy Checklist-Revised (Manual)," New York: Multi-Health Systems (1991).

[269] K.S. Douglas, S.D. Hart, C. D. Webster, and H. Belfrage, "HCR-20V3: Assessing risk of violence – User guide," Burnaby, Canada: Mental Health, Law, and Policy Institute, Simon Fraser University (2013).

[270] Roger Almvik, Phil Woods, and Kirsten Rasmussen, "The Brøset Violence Checklist: sensitivity, specificity, and interrater reliability," Journal of interpersonal violence, 15, no. 12 (2000): 1284-1296.

RISK (VIOLENCE)	Violence Risk Appraisal Guide (VRAG)[271]	This actuarial tool assesses the risk of future violence (recidivism) of individuals who have already committed criminal violence.
RISK (VIOLENT EXTREMISM)	Extremism Risk Guidelines 22 (ERG22+)[272]	Used by the UK government, this actuarial tool is based on 22 factors of radicalization. It is used by the Channel program that advises on prevention efforts in the UK. Each indicator is given an equal weighting. The 22 factor domains look at engagement, intent and capability related to violent extremism.
RISK (VIOLENT EXTREMISM)	Islamic Radicalization, 46 Indicators (IR46)[273]	This tool is a risk assessment used by Dutch police and drawing on the Haaglanden Regional Safety House (Veiligheidshuis) Model. Its factors are based on four phases of radicalization. It is divided into two columns: ideologies (intentions) and social context (capabilities). The tool comprises of 46 indicators and uses a SPJ approach.
RISK (VIOLENT EXTREMISM)	Terrorist Radicalization Assessment Protocol (TRAP) 18[274]	This tool was designed by the Global Institute of Forensic Research to code for 8 warning behaviors and 10 long-term characteristics that measure in particular lone wolf terrorism.
RISK (VIOLENT EXTREMISM)	Violent Extremism Risk Assessment 2 (VERA-2)[275]	This tool was specifically designed to assess violent extremism, and uses both risk factors and protective factors to evaluate potential risk. The tool uses a SPJ approach. The checklist comprises of 28 items, and includes historical, contextual and individual factors.
RISK (VIOLENT EXTREMISM)	Radicalisation Awareness Network Center of Excellence Returnee 45 (RAN CoE Returnee 45)[276]	This is a tool for investigating the motivation, commitment and risks posed by returning foreign terrorist fighters in the European context. The tool includes 45 indicators.

[271] Vernon L. Quinsey, Grant T. Harris, Marnie E. Rice, and Catherine A. Cormier, "Violent offenders: Appraising and managing risk," American Psychological Association (2006).

[272] Beverly Powis, Kiran Randhawa-Horne, and Darren Bishopp, "The Structural Properties of the Extremism Risk Guidelines (ERG22+): A structured formulation tool for extremist offenders," Ministry of Justice, UK (2019). https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/816507/the-structural-properties-of-the-extremism-risk-guidelines-ERG22.pdf.

[273] Liesbeth Van Der Heide, Marieke Van Der Zwan and Maarten Van Leyenhorst, "The Practitioner's Guide to the Galaxy – A Comparison of Risk Assessment Tools for Violent Extremism," International Center for Counter-Terrorism – The Hague (2019), https://icct.nl/wp-content/uploads/2019/09/ThePractitioners-GuidetotheGalaxy-1.pdf; Centre for Research and Evidence on Security Threats (CREST), "Extremism Risk Assessment: A Directory," CREST (2019), https://crestresearch.ac.uk/resources/extremism-risk-assessment-directory/.

[274] J. Reid Meloy, and Paul Gill, "The lone-actor terrorist and the TRAP-18," Journal of Threat Assessment and Management, 3, no. 1 (2016): 37.

[275] Elaine Pressman, "Risk Assessment Decisions for Violent Political Extremism," Public Safety Canada (2009), https://www.publicsafety.gc.ca/cnt/rsrcs/pblctns/2009-02-rdv/index-en.aspx.

[276] Adams, "Approaches to Countering Radicalisation," 30.

GUIDING PRINCIPLE 98

Ensure that selected assessments meet international and academic standards, and are tailored to fit the local culture and context.

Assessments must be socially and culturally applicable. Any adaptations based on the local context must be tested and verified.[277] However, verification locally may be difficult to ascertain immediately, and therefore the Center should adopt a flexible approach that ensures feedback from the use of the tool is taken into consideration as it is used.

CONSIDERATION 98.1

Improperly designed and implemented tools can wrongfully single out individuals, stigmatize and alienate clients and communities or groups.[278]

CONSIDERATION 98.2

It is important to ensure that the practitioners using the tool also have the appropriate knowledge and training to validate psychometric and other instruments being used in the assessment procedure.[279]

CONSIDERATION 98.3

Building partnerships with research teams, research centers and universities may be one way to effectively support the tailoring and validation of assessment tools for the Center.

CASE STUDY: STEPS TO CONSIDER WHEN ELABORATING AND APPLYING ANY ASSESSMENT TOOL, OSCE[280]

The Organization for Security and Co-operation provide the following steps as guidance for the development and implementation of any assessment tool:

1   Tailor the assessment tool to the different categories of potential beneficiaries, with distinct frameworks used, where necessary, for women and children;

2   Ensure a balanced focus on the risks to be mitigated, the resilience factors to be strengthened, and the needs to be met;

3   Emphasize factors that are linked to the targeted population, such as the complexity and size of the population and the resource level and capacities of the particular country, municipality, or community;

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277   Anonymous, "Contribution to Hedayah's Program."
278   OSCE, "Non-custodial Rehabilitation and Reintegration."
279   Horgan, "Contribution to Hedayah's Program."
280   OSCE, "Non-custodial Rehabilitation and Reintegration": 46.

4	Reflect the wider political, cultural, and social contexts;
5	Consult with local practitioners both on the development of any tool and on the application of it in individual cases to ensure multiple sources of information underpin any assessment;
6	Avoid using labels such as "violent extremist," "terrorist," or "returning foreign fighter" and ensure that those making any assessment are trained to be nuanced and avoid overgeneralizations;
7	Ensure the assessment tool or framework is broadly applicable and not specific to a single ideology or religion;
8	Avoid gender and other biases, generalizations, and stereotypes;
9	Involve properly trained psychosocial care providers and/or other appropriate professionals, including the police or security services, where necessary; and
10	Ensure that that the assessment is informed by and linked to available interventions and support services to ensure that the necessary counseling, practical help, and other resources are available to address the identified risks, vulnerabilities, or needs.

GUIDING PRINCIPLE 99

Conduct regular and holistic assessments of clients, and ensure they are conducted by trained professionals, and include the input from multiple sources.

Professionals that use assessment tools should be properly trained on how to use them. There should be appropriate guidelines and instructions developed for these tools, and procedures to institutionalize how these tools relate to other aspects of the Center's functions (see Sections "Standard Operating Procedures" under the chapter on "Governance and Oversight" and "Capacity-Building and Training Needs" under the chapter on "Human Resources"). In addition, appropriate oversight mechanisms should be put into place to safeguard against the misuse of assessments by Center staff. This oversight should include a check and balance on any potential bias by the assessor, and feedback on how to improve.

In addition, assessments should draw on multiple sources of information (see the section on "Information Gathering and Sources").

CONSIDERATION 99.1	CONSIDERATION 99.2
Biographical data and narrative-style interviews from the client can aid in the process.	The client's perspective on their risks, needs, goals and progress should be considered in the assessment.

CONSIDERATION 99.3	CONSIDERATION 99.4
Input from family members and friends may be relevant to the process.	Additional professional opinions from Center staff and external specialists should be considered for the assessment.

Most importantly, assessments should include instruments to allow the client to participate. If they are participating, they will also feel ownership and be more motivated to take place in rehabilitation and reintegration processes.[281]

NEEDS AND STRENGTHS ASSESSMENTS

This section covers some guiding principles specifically for needs and strengths assessments. Needs and strengths assessments focus on the individual's needs, strengths and resiliency related to radicalization leading to violent extremism.

GUIDING PRINCIPLE 100

Develop needs and strengths assessments to help guide the goals and objectives of an intervention program.

While risk assessments are utilized to help predict and describe an individual's likelihood of causing harm (discussed in next section), needs and strengths assessments can help to identify the factors and characteristics influencing the client's vulnerability or radicalization process. The identified needs can be addressed and the strengths built upon through interventions and restorative approaches as a means to prevent recidivism or change the trajectory of the client's radicalization process.[282] The reintegration of the client is the primary objective of rehabilitation and must be planned for from the beginning of the rehabilitation process.

The purpose of a needs and strengths assessment (or a series of needs and strengths assessments) should be to identify the critical needs for the client to be addressed, as well as the possible protective factors for the client that can be strengthened. This information should feed directly into the client plan (see the later section in this chapter for developing a "Client Plan"), and be focused on the best way forward for the client (as opposed to focused on only the challenges, negatives or risks).

When approaching an intervention for a client, it is important that the case manager focuses on the needs, protective factors, possible responses and actions relevant to ensuring the client's success. This should be done in a way that does not presuppose conditions or factors related to radicalization or risk. In other words, the case manager or assessor should try to avoid bias in their assessment of the client's needs and strengths, and instead approach the case with an objective and open mind. At the same time, the assessor can use their professional knowledge of the situation to analyze the information received about a particular client. Whereas, actuarial needs and strength assessments are based on empirical information from the study of many similar cases and decisions, thereby allowing for statistical validation. These types of assessments support objectivity, while professional judgment consists more of subjectivity.[283]

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[281] Walkenhorst, "Contribution to Hedayah's Program."
[282] Kelly Berkella, "Risk Reduction in Terrorism Cases: Sentencing and the Post-Conviction Environment," Journal for Deradicalization, 13 (2017): 267-291.
[283] Peracha, "Contribution to Hedayah's Program."

When working with clients, there are many factors to take into consideration. The environment the client is coming from, the experiences that shaped him/her, the learned behaviors, and the psychology or mindset developed in the violent extremist group are all relevant factors.[284] The situation may be made even more complex if the client (e.g., returning foreign terrorist fighter) is suffering from post-traumatic stress disorder, behavioral unpredictability, emotional instability or other mental health issues brought on as a result of participating in violent extremist activity, and thus may require an extensive psychological treatment before their social reintegration. Therefore, a combination of the above methods will be most effective in determining the interventions required for an individual to assess their needs, in addition to the risk they pose to themselves and to society.[285]

RISK ASSESSMENTS

> ### GUIDING PRINCIPLE 101
>
> Identify which forms of risk are a priority for the
> Center's policies and procedures.

Risk should be conceptualized both in terms of risk of harm to self and others, as well as risk related to violent extremism. Traditionally, risk to violence is approached through three types of assessments:[286]

1. Unstructured professional judgement, usually administered by a psychologist or case officer
2. Actuarial assessments composed of structured assessment with a statistical scoring methodology
3. Structured clinical/professional judgement that combines actuarial assessments with unstructured professional judgements

When it comes to risk assessment tools related to violence, there have been several validated tools commonly used in custodial settings that are relevant, including the VRAG, LSI-R and HCR-20. There have been very few validated tools for assessing risk related to violent extremism in particular. However, several such tools have been developed and are in use, for example the ERG22+, TRAP-18, IR46, VERA-2 and others as listed previously.[287] More specialized tools are also being developed internationally, but not all of the tools are shared publicly. It will be important to seek advice from experienced practitioners, locally and internationally, when selecting tools for use in the Center.

Risk assessment tools that may have been used with clients by other agencies prior to their arrival in the Center should also be accounted for in the decision-making process for which tools will be used by the Center. For example, if clients come to the Center upon release from prison, there may be value in using the same tool as other organizations linked to the Center. Conversely, there may be better value in using different risk assessment tools that are more applicable to violent extremism or more applicable to the local context. Nonetheless, it is important to keep in mind that the more information obtained on a client the more tailored the service provision will be for that particular client.

Risk assessments regarding terrorism and violent extremism can have far-reaching consequences. Therefore, validity tests are important because they are designed to see how well the risk factors actually predict recidivism. This test is done by drawing a sample of others who were sentenced to probation or released from prison and tracking them for a period of 2 to 3 years. Since most jurisdictions are anxious to have the

284 Örell, "Contribution to Hedayah's."
285 Anonymous, "Contribution to Hedayah's Program."
286 Forensic Psychology Edu, "Forensic Psychologists in Violence Risk Assessments," Forensic Psychology Edu, Last modified September 8, 2020, https://www.forensicpsychologyedu.org/violence-risk-assessment/.
287 Adams, "Contribution to Hedayah's Program."

risk assessment instrument implemented as quickly as possible, the validation sample often consists of persons sentenced or released 2 to 3 years prior to the study being conducted. The research must then be able to perform a variety of bi-variate and multi-variate statistical tests to determine which items should be used, the weights assigned to each item and the proper risk level scale.[288] Again, if pursuing this kind of testing, advice should be sought from those with experience, locally and internationally.

GUIDING PRINCIPLE 102

Consider the potential impacts on the health and safety of Center staff, visitors and other clients through risk assessment tools and approaches.

When developing, tailoring and utilizing risk assessment approaches and tools, it is critical to consider what can affect the health and safety of employees within their given context(s). In broad terms, a risk assessment looks at what could go wrong and what is needed to stop it from going wrong and assesses the effectiveness of any control measures in place. Recommendations for extra control measures can then be made on the basis that they are feasible and appropriate.[289]

GUIDING PRINCIPLE 103

Assess risk holistically and in conjunction with identified needs and protective factors of clients and manage the identified risks throughout the rehabilitation and reintegration process.

Continual monitoring is one of the most important elements of a rehabilitation process. It is also the basis of any meaningful evaluation or measurement of success. When it comes to risk assessment, Center management should be aware that different professions have different perspectives on what should be considered a risk. While security-focused personnel (e.g. law enforcement or prison management) usually assess the risks a client poses to the prison/Center population or society in general, professionals working on rehabilitation and reintegration should also assess the risks that a client faces in his/her rehabilitation process.

It is important to ensure that different forms of risk assessments are conducted in a coordinated and collaborative approach by different professionals. Sustained multi-stakeholder collaboration on risk assessments will provide a more comprehensive and clear understanding of the client's circumstances and risks, therefore, supporting the safety and security of staff, clients, and others, as well as enabling the provision of more effective rehabilitation and reintegration interventions and support.

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[288] Adams, "Contribution to Hedayah's Program."
[289] Mulbocus, "Contribution to Hedayah's Program."

Management of risks identified through the risk assessment process should be incorporated into the client plan as the responsibility of the case manager. The risks should be monitored and evaluated regularly as the client progresses through the rehabilitation and reintegration process and they should be taken into account when preparing for the client's release.

Risk management should be in alignment with existing risk management measures already conducted in prison settings in the national and local contexts, and in alignment with international laws on prison management and human rights.

CLIENT PLAN

This section will cover the requirements for developing a client plan. For more specifics on the interventions that may be used in the client plan, see the chapters on "Center-Based Interventions: Rehabilitation" and "External Interventions: Reintegration".

GUIDING PRINCIPLE 104

Develop a comprehensive client plan that addresses needs,
risks and protective factors.

Assessment information should be integrated into the service client plans (and plans for families) by associating needs with goals, objectives, and strategies which are aligned with expected program outcomes.

The main components and process of a client plan can roughly be categorized as follows:

1 Assess which individual needs and risks can be reasonably addressed in the client plan.

2 Assess which protective factors can be strengthened in the client plan.

3 Identify SMART objectives for the client, based on those needs and protective factors.

4 Identify potential actions, at both the individual and collective levels.

5 Include and align, as far as practicable, the client's own objectives for their future, in order to gain their buy-in and to encourage their progress.

Note that client's objectives can sometimes be unrealistic given their background and personal context (e.g., "I want to join the army", "I want to be a doctor") and the practitioner should seek to manage the client's expectations and guide realistic goal-setting, in order to reach agreement on a workable and achievable plan. The Center must take care when managing the expectations of a client, as this could be perceived as disempowering by the client and negatively impact the rehabilitation and reintegration processes.

6 Write down a theory of change to explain how the potential actions may meet the objectives.

| 7 | Identify and develop indicators of progress that can be regularly monitored. |

| 8 | Include the handling of stigma within the tailoring of plan. |

| 9 | Mobilize necessary key actors or external parties that would be involved in the intervention. |

| 10 | Implement the plan based on specific timelines set with the client and the case manager. |

| 11 | Evaluate and re-evaluate/modify the plan when new challenges or successes emerge. |

GUIDING PRINCIPLE 105

Use a client-centered approach to develop a client plan for rehabilitation and reintegration.

The client plan should be created in conjunction with the client. If the client is not in agreement with the plan, the case manager should continue to work with the client in order to develop a client plan which all parties agree to. This will help to ensure the effective implementation of a plan. Practitioners, nonetheless, should be confident in their recommendations while being open to amending the plan based the client's input. It is important to not create an environment where the client second-guesses the competence of the practitioner as this might have a direct negative impact on the trust the client has for the practitioner.

CONSIDERATION 105.1

Practitioners should consider how best to present the proposed client plan to the client. There is a risk that potentially important activities could be dismissed by the client if presented negatively or incorrectly. For example, a client may respond unfavorably to the proposal of counseling sessions with a religious scholar if presented as an approach to correct the client's misunderstanding of religion. Whereas presenting the same sessions as an approach because of the importance of religion to the client may be received more positively. At the same time, practitioners should not mislead the client regarding the contents of the plan, as this will likely be unethical and potentially detrimental for the rehabilitation process.

> **GUIDING PRINCIPLE 106**
>
> Include activities on community engagement management
> within the client plan.

It will be important to also include a community engagement plan in connection to the client plan. Successful reintegration will require the involvement of the community and for the community to also have their concerns and needs addressed. Case management and community engagement should have five sequential activities: 1) initial assessments, assessments of the client's and community's needs and strengths; 2) goal setting and developing a client and community plan; 3) conducting rehabilitation and reintegration interventions and linking the client to appropriate services; 4) periodic monitoring and evaluation of the client's progress; and 5) advocating for the client as needed.[290] See the section on "Community Engagement" under the Chapter "External Interventions: Reintegration" for more information.

CONSIDERATION 106.1	CONSIDERATION 106.2
The client plan should include external engagement with individuals that the client trusts. For example, close friends and family members should be part of the client plan, and be aware of how they can support the client in the rehabilitation and reintegration processes.	The client and the practitioner should agree on which details of the client plan, and their rehabilitation and reintegration process, can be discussed with external parties.

CONSIDERATION 106.3	CONSIDERATION 106.4
Identify possible services or activities within the community that could be beneficial for the client during the reintegration phase. For example, there may be a local sports team, hobbyist group, or support group that the client would like to join and could support their rehabilitation and reintegration process.	Activities related to community engagement should be practical and feasible. For example, if a client wishes to meet regularly with their family, but their family is physically located several hours from the Center, there should be a reassessment of how often this is physically possible. Alternatives such as video chat or phone calls could be suggested to maintain those relationships.

[290] UNODC, "Handbook on the management of violent extremist prisoners."; Steven Martin and James A. Inciardi, "Case Management Approaches for the Criminal Justice Client," The Prison Journal 77, no. 2 (1997); Richard Falck, Harvey A. Siegal and Robert G. Carlson, "Case Management to Enhance AIDS Risk Reduction for Injection Drug Users and Crack Cocaine Users: Practical and Philosophical Considerations," Progress and Issues in Case Management (1992): 167-180; Maria Roberts-DeGennaro, "Developing Case Management as a Practice Model," Social Casework, Journal of Contemporary Social Work (1987): 466–470.

GUIDING PRINCIPLE 107

Approach the development of client plans with gender sensitivity.

UN Security Council Resolution 2396 mandated a gender sensitive approach to rehabilitation and reintegration, stating "women and children associated with foreign terrorist fighters returning or relocating to and from conflict may have served in many different roles, including as supporters, facilitators, or perpetrators of terrorist acts, and require special focus when developing tailored prosecution, rehabilitation and reintegration strategies."[291]

When working with female clients on their client plans there will be some key aspects that need to be taken into consideration. For example, the potential gender specific stigmatization in the local community, the role of women in the relevant violent extremist group(s), and the client's potential preference for engaging with only female practitioners. Just as an individual approach, a gender-sensitive approach is essential to develop, heal, and support a specific person to grow, take responsibility and leave their previous behaviors behind.

CONSIDERATION 107.1	CONSIDERATION 107.2
Some women are exposed to mental, verbal, physical, and/or sexual violence during their involvement in violent extremists groups, which will likely have consequences for their resocialization, and this should be addressed throughout the rehabilitation and reintegration processes.[292] Trauma-sensitive approaches to gender-based violence should be considered as part of the rehabilitation and social reintegration of those individuals.	Women previously involved with violent extremism, or affiliated with it, are often stigmatized by the receiving community, and this stigmatization can be similar or very different to that faced by returning men. For example, women may be treated by the recipient community as if they did not understand what they had gotten themselves involved in: a response which can be far from the truth.[293] Women also may be ostracized by the community and their families for being previous married to a violent extremist, even if the marriage was forced. This latter example, has been the case for many women and girls who were kidnapped by Boko Haram in Northeast Nigeria. The client plan must take into consideration the possible stigmatization that a female client may face.

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291   United Nations Security Council, "Resolution 2396."
292   Örell, "Contribution to Hedayah's Program."
293   Örell, "Contribution to Hedayah's Program."

CONSIDERATION 107.3

When developing a client plan for females, pay particular attention to the patriarchal realities of the local communities and if marginalization or other gender-based grievances were among the original drivers of the client's RLVE.[294] If that is the case, it may be useful to consider whether the plan should include the client's reintegration into a different community.

CONSIDERATION 107.4

In some contexts, women who joined violent extremist groups become estranged from their family members and the family might not be willing to welcome their return to the community.[295] This should be investigated at an early phase of the Center's engagement and addressed through the client plan and rehabilitation, prior to the release of the client from the Center.

GUIDING PRINCIPLE 108

Consider the impacts of rehabilitation and reintegration processes on child development when developing the client plan.

Children who have been recruited, exploited or affected by violent extremism are victims at multiple levels, and their treatment should reflect this.[296] Children will likely need further support to develop positive and constructive ways of dealing with emotions, relations, conflicts, and mental health issues after their involvement in violent extremist groups. Children need to be inserted in a normal environment as soon as possible and learn social interactions, new ways of making their own, independent decisions, as well as managing negative experiences and conflicts.[297]

Children need a life as normal and ordinary as possible when it comes to rehabilitation and reintegration after involvement or exposure to violent extremism. This means going to school, building social skills, connecting with friends, finding passionate interests and hobbies, and receiving psychological support that addresses all the ranges of areas where psychological harm has been done.[298] A client plan for a child or a client plan for a parent should reflect these critical elements.

CONSIDERATION 108.1

Children should not be separated from the parents, where possible. If separation is required, they should be placed with trusted family members (e.g. grandparents, older siblings, uncle or aunt), relocated and/or placed into foster families.[299]

CONSIDERATION 108.2

The client plan should incorporate services that are trauma-informed and developmentally appropriate for children.[300] This may require having a dedicated staff member that handles cases related to families and children.

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[294] Iruayenama, "Contribution to Hedayah's Program."
[295] Anonymous, "Contribution to Hedayah's Program."
[297] Örell, "Contribution to Hedayah's Program."
[298] Örell, "Contribution to Hedayah's Program."
[299] Walkenhorst, "Contribution to Hedayah's Program."
[300] Iruayenama, "Contribution to Hedayah's Program."

CONSIDERATION 108.3

Client plans for children should include consistent access to education, play, and extracurricular activities. The Center may wish to partner with the Ministry of Education and/or a local school to ensure that the child has access to educational facilities and opportunities that are consistent with their age and grade level. While the child's (re)integration into to education should occur as soon as possible, it may be appropriate to take a phased approach. At the very beginning the education may be provided at home, then after the psychosocial assessment and support, the child could start visiting the local school.[301] Reintegration programs should coordinate with the Ministry of Education and local schools to create education plans that avoid disrupting the child's educational progress as much as possible.

CONSIDERATION 108.4

Client plans may include teaching parenting and life skills to families and parents. The relationship between the child and the family is critical to developmental growth, and can contribute to enhanced rehabilitation and reintegration.

CONSIDERATION 108.5

Teach children social skills and life skills, and create as much of a child friendly environment as possible.[302] Interventions should be adapted to fit the age and interests of the child, and focus on building resilience and protective factors in the child.

CONSIDERATION 108.6

Organizations with expertise on supporting vulnerable children could be included in the client plan to provide in-depth guidance and help normalize the day-to-day lives of the children.[303]

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[301] Anonymous, "Contribution to Hedayah's Program."
[302] Anonymous, "Contribution to Hedayah's Program."
[303] Anonymous, "Contribution to Hedayah's Program."

7 CENTER-BASED INTERVENTIONS: REHABILITATION

> Responsibilities
> Goals and Evaluation
> Interventions and Restorative Approaches
> Preparation for Release

This chapter provides insight into the responsibilities of the staff working within the center, with a particular focus on the role of the case manager. It also elaborates on the goals, monitoring and evaluation of center-based interventions for the purpose of rehabilitation. This is followed by guidance on the possible interventions and restorative approaches which could be implemented, including a list of potential types of interventions, as well as each type's advantages and disadvantages. Finally the chapter outlines the key elements to be considered for a client's preparation prior to release.

This chapter should not be considered independent of the following chapter on "External Interventions: Reintegration," however they are separated for ease of reference.

RESPONSIBILITIES

> ## GUIDING PRINCIPLE 109
>
> Assign one individual that is the coordinator or case manager
> for each particular client.

The coordinator or case manager should be aware of all the components of the client's file and plan, including background, objectives, behaviors, interactions and incidents.

CONSIDERATION 109.1

The Center should formalize the process for appointing a case manager. While in many circumstances the case manager is appointed informally (i.e. verbally by a supervisor), it will be important for records and ensuring responsibility if the case manager is appointed formally (e.g. through a written letter).

CONSIDERATION 109.2

The case manager should be assigned to the client as early as possible, including during the initial assessments.[304]

CONSIDERATION 109.3

It is important that, as much as possible, case managers are not changed during the period of rehabilitation. However, in the case of a conflict between the client and the case manager, it may be necessary to change the case manager. In such a circumstance, the case manager and client should first try to get to resolve the issue/disagreement before changing case managers. It is recommended for all case managers to have potential replacements on standby for ease of transitioning.

CONSIDERATION 109.4

When matching a client to a case manager, the language, gender, ethnicity and religious background may need to be taken into account. It may be that clients are more likely to trust and be open with someone familiar with their own language, ethnicity gender and religion.[305]

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[304] Rohan Gunaratna, "Countering Violent Extremism: Revisiting Rehabilitation and Community Engagement," Counter Terrorist Trends and Analyses, 7, no. 3 (2015): 5-13.

[305] Musliu, "Contribution to Hedayah's Program."

CONSIDERATION 109.5

Match the case manager with the needs and expectations of the client. Respect the client's wishes, within reason, for the profiles of a case manager. For instance, if a female client desires to only speak with a female case manager, then an effort should be made to match these clients and case managers together. This is important because the case manager must not come across as incompetent or severely lacking in background or historical knowledge that the client considers basic.[306]

CONSIDERATION 109.6

The case manager should also be involved in any decision-making process for the client. As much as possible, the case manager should have significant responsibility in final decision-making, since they know the client the best, unless in the case of a specific or unique security or legal issue. Case managers that do not have the respect of the authorities in charge of the Center are not as effective.[307]

CONSIDERATION 109.7

Case managers should take care not to give false confidence and or betray the confidence of their clients. Ideally, a contract of confidentiality would be helpful. However, this is not always possible to accommodate, as conditions would apply depending upon the judicial nature of the Center and/or the case under consideration. For high risk individuals who have judicial hearings, the information they share may have to be reported. This must be made explicit to the individual under consideration, ideally before the interview sessions begin.[308]

CONSIDERATION 109.8

When assigning a case manager, make sure there is a check on any potential bias or conflict of interest from the perspective of the case manager.

CONSIDERATION 109.9

Ensure the case manager is presented to the client in a professional and appropriate way. This may also avoid bias from the client's perspective with respect to qualifications, age, gender or other physical markers.

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[306] Iruayenama, "Contribution to Hedayah's Program."
[307] Peracha, "Contribution to Hedayah's Program."
[308] Peracha, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 110

Manage expectations as to what each team member can and
cannot do to help a client.

The case manager should be able to differentiate between needs of the clients and the professions available. The case manager should avoid bias towards one type of intervention (e.g. psychologists thinking only psychology is an appropriate intervention), and take into consideration all the talent and skills of the Center's staff and the external specialists. The case manager should also avoid over-promising specific types of interventions that are not feasible. For example, if a client wants to study astrophysics, but there is not a university professor that is willing to mentor the client, then this vocational/educational option should not be made available to the client.

GUIDING PRINCIPLE 111

Adequately train those responsible for rehabilitation on
reintegration processes as well.

Both the rehabilitation and reintegration staff should have adequate knowledge on the work of each other's field. There needs to be a continuation of the rehabilitation into and throughout the reintegration, as well as cooperation between the different professionals during each different phase of the process.[309] Furthermore, the fact that one of the main aims of the rehabilitation process is to successfully reintegrate the individual, clearly highlights the importance of ensuring that both categories of practitioners are well informed and knowledgeable of the full processes.[310]

CONSIDERATION 111.1	CONSIDERATION 111.2
The Center should engage the reintegration team during the rehabilitation phase, in order to ensure the rehabilitation staff are familiarized with the potential interventions available during reintegration, thereby enabling more effective tailoring of the rehabilitation interventions with a forward-looking approach.	Getting information from those working on reintegration could also help staff in the center to understand what rehabilitation practices are effective and what they are doing well or what could be improved.

309   Örell, "Contribution to Hedayah's Program."
310   Musliu, "Contribution to Hedayah's Program."

GOALS AND EVALUATION

GUIDING PRINCIPLE 112

Relate the specific objectives as agreed in the client plan and intervention with the overarching objectives of the Center.

As partially covered in the section on "Leadership, Management and Structure of the Center," there is not a consensus on what comprises the overarching objectives of effective interventions. In particular, most scholars and practitioners debate if deradicalization (i.e. changing a person's ideology or beliefs) or disengagement (i.e. changing a person's attitudes and behavior towards violence) techniques are more effective. In practice, most practitioners indicate that it is usually some combination of both approaches that are effective. Depending on the context in which the Center is hosted and the needs and strengths assessments of the Center's clients, the Center should determine what mix of deradicalization and disengagement approaches are suitable. Moreover, the approach to the intervention from a case management perspective should take into consideration in what ways deradicalization and disengagement should each be considered for that individual. It should be noted that most experts that participated in Hedayah's surveys, interviews and workshops indicated that a Center should focus on both deradicalization and disengagement, and when recommending an intervention, they often did not distinguish whether the effect was disengagement or deradicalization. Assessments carried out with clients can also inform if disengagement should be prioritized for the client (for instance, where there is no ideological motivation) or if deradicalization should be prioritized. Further, in instances where disengagement is prioritized, it is worth noting that individuals can buy-in to extremist ideologies after prolonged periods of engagement, even if they did not share these ideologies when they first joined the violent extremist group.[311]

Maladaptive and harmful thoughts and behaviors should be identified, and replaced with prosocial alternative thoughts, skills, and behaviors that help clients meet their needs in healthy ways that also promote wellbeing for their children and families.[312]

All in all, a decision on the specific goal of an individual's intervention should be determined through a proper assessment of needs, risks and protective factors, and contextualized to a culturally and legally relevant intervention. For example, a goal might be to learn to live a life without solving conflicts/stressors through violence. For others, it could be a more proactive level of reintegration and participation in society.[313] For rehabilitation, a goal might be the ability to accept past involvement and show remorse. For reintegration, a goal might be to be able to readjust to mainstream society, with better coping strategies in place to counter the violent extremist influences in their lives.[314]

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[311] Iruayenama, "Contribution to Hedayah's Program."
[312] Anonymous, "Contribution to Hedayah's Program."
[313] Iruayenama, "Contribution to Hedayah's Program."
[314] Peracha, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 113

Develop a theoretical model of how the client is expected to change.

As mentioned in the section "Client Plan," it is important that in the intervention, it is clear what steps and processes the client is expected to take to show change. A number of different models are used to show change. For example, in CVE and development fields,[315] a Theory of Change (ToC) statement and chart are often used to show intended outputs, outcomes and potential impact of a certain intervention. In the sector of drug and tobacco rehabilitation, other models such as the Transtheoretical Model Stages of Change have been used.[316] However, it will be critical that the theoretical model on how a client is expected to change includes at its core the vulnerability factors, needs and protective factors which have been identified through assessments.[317] The practitioners should seek to solidify the client's disengagement and support their deradicalization.

GUIDING PRINCIPLE 114

Embed monitoring and evaluation from the beginning of a client plan, matched with the Center's definition of success.

Monitoring and evaluation of rehabilitation and reintegration programs should be up to standard with other related fields. For example, Hedayah's framework for monitoring, measurement and evaluation is outlined in the publication, "Evaluate Your CVE Results: Projecting Your Impact,"[318] and encapsulated in the tool for practitioners, the smart phone and tablet app MASAR.[319] The monitoring and evaluation ultimately depends on what goals were set for the individual clients.

Continuous risk and needs and strengths assessments at different intervals by different actors are important tools for effective monitoring of a client's progress. In addition, it is important that the work with the client is well-documented and that comprehensive and accurate records are maintained. Proper documentation forms the core material for recording progress of interventions with individuals for monitoring a client's progress.[320]

It should be noted that small changes can still track progress and growth. For example, in Nigeria, clients despised the military and police upon intake. However, throughout the program, they started to eat with them from the same pot (which is a cultural sign of respect and mutuality). In addition, learning English and math were forbidden for Boko Haram members, but in the rehabilitation camp, they started studying and appreciating learning these subjects. These small changes can be markers and indicators of change in a client as an individual or as a group.[321]

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[315] Cristina Mattei and Sara Zeiger, "Evaluate your CVE Results: Projecting Your Impact," Hedayah (2018), https://www.hedayahcenter.org/resources/reports_and_publications/evaluate-your-cve-results-projecting-your-impact/

[316] James O. Prochaska and Carlo C. DiClemente, "Stages and processes of self-change of smoking: toward an integrative model of change," Journal of consulting and clinical psychology, 51, no. 3 (1983): 390.

[317] Tinka Veldhuis, "Designing Rehabilitation and Reintegration Programmes for Violent Extremist Offenders: A Realist Approach," The International Centre for Counter-Terrorism (ICCT) – The Hague Research Paper (2012): 23.

[318] Mattei and Zeiger, "Evaluate your CVE Results."

[319] Hedayah, "MASAR," Hedayah, https://www.hedayahcenter.org/resources/interactive_cve_apps/masar/.

[320] Anonymous, "Contribution to Hedayah's Program."

[321] Bryson, "Contribution to Hedayah's Program."

CONSIDERATION 114.1

Monitoring and evaluation starts at the beginning of the program, using the intake assessment to collect a baseline assessment.

CONSIDERATION 114.2

Ensure regular assessments so that clients have the opportunity to advance through the stages of the program. This is especially important for high-risk clients that may be subjected to harsher situations such as social isolation as a result of their risk category. More opportunities for assessment will allow them to progress out of those situations at a quicker pace.

CONSIDERATION 114.3

Ensure case managers take into consideration the monitoring of a client's progress to re-design client plans, if needed.

CONSIDERATION 114.4

Having the same case manager present during all phases, from the first assessments to the post-release phase, may enable for closer monitoring and evaluation of a client's progress towards objectives.[322]

CONSIDERATION 114.5

Ideally, an external evaluator should also be part of the process of monitoring and evaluation to avoid bias. However, monitoring and evaluation should also be conducted by the practitioners and specialists that regularly work with—and know—the client.

CONSIDERATION 114.6

Self-evaluation (from the client) can be one effective way to monitor the cognitive changes within a client, and to allow the individual to notice their own progress.[323]

CONSIDERATION 114.7

While the client should be consulted on the objectives established for them in the Client Plan, it may also be important to measure and evaluate the progress made towards the client's own objectives not accounted for within the Client Plan.

CONSIDERATION 114.8

Ensure staff are appropriately trained on how to properly monitor and evaluate, including correctional officers that may interact with clients more frequently than counselors or case managers.

[322] Gunaratna, "Countering Violent Extremism."
[323] Bennardi, "Contribution to Hedayah's Program."

CONSIDERATION 114.9

CONSIDERATION 114.10

Recognize that a client may regress before they progress forward. Focus monitoring and evaluation on changes perceived and how they fit in a larger picture of goals and progress. Use the client's regression to re-evaluate what is working and what can be modified in the intervention.

Consider specific measures of success based on individual objectives, specifically with respect to an assessment related to a client's readiness for release. Unrealistic expectations should not be put on the client at the last minute, immediately before release.

CONSIDERATION 114.11

Recognize that recidivism is not the only measure of success or failure of a Center. Consider various aspects related to rehabilitation progress as well as social reintegration as key indicators of a Center's outcomes and impact.

TABLE 7: SAMPLE GOALS AND INDICATORS FOR REHABILITATION AND REINTEGRATION

The below chart provides several examples of indicators that could be used in a rehabilitation or reintegration program, both at the individual and institutional levels. Notably, the individual-level goals should also have some level of connection with the institutional goals.

GOAL OF INTERVENTION	OUTPUT INDICATORS	OUTCOME INDICATORS	IMPACT INDICATORS
Strengthen a client's social relationship with their family (Individual Goal)**.**	Number of meaningful interactions per week with family members.	Improvements in positive social interactions with family members (as observed by case manager).	Strong social bond with family members (self-reported and observed).
Improve client's skills in managing anger and frustration (Individual Goal)**.**	Number (reduced) of aggressive or violent behaviors per week.	Improvements in communicating about negative emotions with case manager and with other clients (as observed by case manager, Staff).	Strong confidence and skills in managing conflict and helping others overcome conflict (self-reported and observed).
Improve a client's ability to sustain themselves financially post-release (Individual Goal)**.**	Number of job training options offered and taken by client.	Improved ability to market themselves in job field of choice (as observed through training programs).	Sustained employment post-release for at least 1 year.

Prepare the community for returning clients (Institutional Goal)**.**	Number of community sensitization programs developed; Number of community outreach events held; Number of community mentors trained; Percentage of community reached by outreach programs.	Cognitive change in community members being open to involving clients post-release in their activities (e.g. for employment, social interaction).	Evidence of community members actively reaching out to clients post-release (e.g. for employment, social interaction); Number of legal mechanisms developed for clients post-release; Number of programs for clients' support developed by community.
Reintegrate Center clients into communities (Institutional Goal)**.**	Percentage of clients that graduate from a Center rehabilitation program.	Percentage of clients that feel welcome by the community within 6 months of the graduation; Percentage of clients still living in the same community after 6 months; Percentage of clients with employment within 6 months of graduation.	Percentage of clients that do not commit terrorist offenses within one year/5 years of release.

INTERVENTIONS AND RESTORATIVE APPROACHES

> **GUIDING PRINCIPLE 115**
>
> Evaluate which intervention designs are most appropriate for their context, and emphasize an experiential approach that undermines violent extremist narratives and counters the damaging psychological effects of being involved in a violent extremist movement.

Different types of interventions have advantages and disadvantages, and the Center should review the possibilities, including contextualizing those interventions locally. As part of the process, the Center management should consider a critical assessment of rehabilitation and reintegration approaches used in other countries.[324] It is recommended that clients and case managers have a menu of options for case management, and as much as possible, the individual plan is tailored to the clients' needs, risks and protective factors.

After disengagement or deradicalization, the client will often still embrace many of the extremist ideological ideas (e.g. rules and taboos) that are counter-productive for the rehabilitation process. These ideas may take the form of self-imposed rules, such as: 1) the refusal to show weakness or vulnerability; 2) defectors are as bad as or worse than the 'enemy'; 3) a black and white worldview; 4) anybody who criticizes the ideology is an enemy; 5) fulfilling the needs of the self are wrong and the focus should be on the group; and 6) an assortment of rules which dictate their behavior (e.g. often related to cleanliness, food and sexuality). These ideas may take the form of phobias, fears and/or obsessiveness and can be addressed through a number of different interventions (see the below table for examples). One example response is the experiential approach, whereby the client is provided experiences in a strategic way that can effectively undermine the ideology, for example, meeting a representative from the identified 'enemy' group who shows kindness and compassion to the client. This approach has been found to be effective for the deradicalization process in a number of cases.[325]

A non-exhaustive list of types of interventions and different iterations are listed in the following table.

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[324] Some examples of case studies of existing prison programs can be found in the following documents: Rajan Basra and Peter R. Neumann, "Prisons and Terrorism: Extremist Offender Management in 10 European Countries," ICSR (2020), https://icsr.info/wp-content/uploads/2020/07/ICSR-Report-Prisons-and-Terrorism-Extremist-Offender-Management-in-10-European-Countries_V2.pdf; The International Centre for the Study of Radicalisation and Political Violence (ICSR), "Extremist Offender Management in Europe: Country Reports," ICSR (2020), https://icsr.info/wp-content/uploads/2020/07/ICSR-Report-Extremist-Offender-Management-in-Europe-Country-Reports.pdf; Peter R. Neumann, "Prisons and Terrorism: Radicalisation and De-Radicalisation in 15 Countries," ICSR (2010), https://www.clingendael.org/sites/default/files/pdfs/Prisons-and-terrorism-15-countries.pdf.

[325] Håkan Järvå, "A Radical Reality," (forthcoming publication, 2021).

PSYCHOLOGICAL AND SOCIAL

DESCRIPTION

These interventions focus on building soft skills of individuals through a variety of methods. Soft skills that help with rehabilitation and reintegration include: empathy, open-mindedness, respect, self-worth, sense of belonging, social intelligence, communication skills, anger management, conflict management and many others. They also serve to address mental health challenges that pose a risk to the rehabilitation and reintegration process.

ADVANTAGES	DISADVANTAGES
▪ Individualized approach helps the client work through specific cognitive and behavior challenges, as well as how they relate to others.	▪ May be difficult to have such a tailored approach in settings where there are large numbers of clients. ▪ Not all clients will respond well to psychological or social counseling.

TYPE: ONE-ON-ONE COUNSELING

DESCRIPTION

This type of intervention focuses on building cognitive skills and behaviors through traditional psychological techniques. For example, a psychologist might use cognitive behavioral therapy (CBT) to help the individual build cognitive processes for enhancing self-understanding, identity, or relationships to others. It also helps the client in building resilience against cognitive, emotional and behavioral patterns that might make the client vulnerable to violent extremism.

ADVANTAGES	DISADVANTAGES
▪ Reduces feelings of marginalization or shame because sessions are private. ▪ Enables tailored responses to the client's mental health challenges.	▪ Heavy resources required for one-on-one counselors. ▪ Time consuming, particularly in Centers where there is a huge disparity between clients and available psychologists/ counselors/ social workers.

TYPE: MENTORSHIP

DESCRIPTION

This type of intervention may leverage external mentors to support the process of rehabilitation and reintegration. Mentors may be staff, members of the community, former violent extremists, or other individuals that the client respects or connects to.

ADVANTAGES	DISADVANTAGES
▪ Mentors can help to build trust with a client because their affiliation is perceived as more neutral. ▪ Mentors can help the client be prepared for what to face in the community.	▪ Mentors may need more training to work with this particular cohort of clients.

TYPE: INTEGRATIVE COMPLEXITY (IC) THINKING

DESCRIPTION

Integrative Complexity (IC) Thinking is a specific methodology developed by the University of Cambridge to overcome differences.[326] It focuses on reducing black and white thinking, reducing narrow-mindedness, avoiding categorizing and shifting blame to others, avoiding valuing one's worldview as supreme, avoiding oversimplifying issues, and otherwise reducing binary viewpoints.

ADVANTAGES	DISADVANTAGES
▪ Significant body of evidence of the effectiveness of methods (including in Pakistan, Kenya, and Europe). ▪ Relatively easy to teach/train. ▪ Can be implemented in individual or group setting.	▪ Specific training in methods are needed.

TYPE: MOTIVATIONAL INTERVIEWS

DESCRIPTION

This type of interviewing is a collaborative, person-centered process to obtain information and elicit/strengthen motivations for that individual to change. In a similar way to IC Thinking, this approach strengthens positive intrinsic motivations and helps the client to be less dependent on black-and-white or binary thinking.

ADVANTAGES	DISADVANTAGES
▪ Modifies intrinsic processes for thinking in a non-binary way. ▪ Collaborative and client-owned process (the interviewer is a facilitator). ▪ Significant body of evidence to support effectiveness. ▪ Easily taught to staff that do not necessarily hold degrees in psychology.	▪ Specific training in methods are needed.

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[326] For more on IC Thinking, see https://icthinking.org/about.

TYPE: MINDFULNESS

DESCRIPTION

These techniques and approaches build the skills of an individual to recognize their own emotions and regulate them. This can be helpful towards reducing conflict and violence.

It also helps in grounding, a technique that encourages the client to 'stay-in-the-moment' during times of mild psychological distress.

ADVANTAGES

- A form of self-evaluation that builds skills of client to be less reactive and more intentional towards actions.

DISADVANTAGES

- It may not be advised in the case of clients with special needs or certain mental health conditions (e.g. Asperger's and autism). However, this is disputed in some cases.

TYPE: GROUP SESSIONS AND EXERCISES

DESCRIPTION

Psychological and social interventions can take place through group sessions.

ADVANTAGES

- Group sessions require less human resources for clients, and are cost-effective.
- Opportunities for practicing social and communication skills are provided.
- Clients get to share similar experiences and build off each other's strengths.

DISADVANTAGES

- Interventions are less individualized, and psychologist or social worker has to balance time between clients.
- Some clients might not be open to sharing their experiences and thoughts openly.

RELIGIOUS COUNSELING

DESCRIPTION

These interventions challenge religious justifications for violence that are based on interpretations of religious texts or documents. Religious counseling may also complement psychological or social counseling, as the client is guided on a new direction in their spiritual journey.

ADVANTAGES

- A knowledgeable scholar can de-construct religious ideology supporting violence
- Religion gives value and meaning to a client's life
- For non-religiously motivated clients, religion may serve as a positive replacement for the previous ideology.

DISADVANTAGES

- Not all motivations behind violent extremism are religious or ideological
- If pressed too hard with counter-arguments, cognitive openness to different views may close, and the client may become more entrenched in their way of thinking. Consider alternative- narratives in place of counter-narratives for instance.

EDUCATIONAL

DESCRIPTION

These interventions focus on improving the technical knowledge and skills of clients so that they can establish a certain level of a "normal" life after release, and not be disadvantaged by time spent at the Center.

Depending on the capacity of the Center and context, they may also provide numeracy and literacy skills to clients, particularly those who have missed out on basic education.

Additionally, they may also include life-skills education, which could include: financial literacy, résumé writing, anger management, and family responsibilities, among others.

ADVANTAGES

- Educational initiatives can be delivered to whole groups and can be cost-effective
- Education helps to build qualifications and skills for clients upon release

DISADVANTAGES

- Individual time is lessened in a group setting

TYPE: CLASSROOM LEARNING

DESCRIPTION

This type of intervention may be useful for clients with lower levels of education that may wish to obtain a high school or University-level degree, or for children whom have not yet completed the education. Notably, appropriate educational opportunities can provide content-knowledge intermixed with facilitated exercise that can enhance soft skills, in coordination with psychological and social interventions.

ADVANTAGES

- Educational approaches may be less intimidating than traditional psychological approaches, especially for children. Although it should be noted that this is not always the case, especially related to education-based exams.
- Higher education can instill a sense of purpose related to a quest for higher knowledge

DISADVANTAGES

- Classroom learning is not always suitable for all clients.
- May require a significant number of clients for this type of intervention to be cost-effective.

TYPE: VOCATIONAL TRAINING AND APPRENTICESHIPS

DESCRIPTION

Vocational training can provide opportunities for clients to learn a skill or trade that is marketable during rehabilitation in the Center, or during reintegration upon release. Skills should be matched with the needs of the local market, including relevant private sector companies.

ADVANTAGES

- Vocational programs help the clients meet their financial needs after release.
- Vocational skills can instill a sense of self-worth and pride in a tradecraft in clients.

DISADVANTAGES

- Could create unrealistic expectations for employment after release.
- If needs and risks related to radicalization are not financial, may not have a long-term impact at reducing recidivism.

RECREATIONAL

DESCRIPTION

This type of intervention leverages recreational activities to deliberately create opportunities to practice certain soft skills or to provide an outlet for emotions.

ADVANTAGES

- Can provide outlets for negative energy or grievances
- Can provide opportunities for monitoring in a non-clinical setting

DISADVANTAGES

- Lack of talent or skill can increase frustration

TYPE: SPORTS AND MOVEMENT

DESCRIPTION

Sports and other physical activity (such as yoga or martial arts) can provide outlets for aggression, tools to channel negative energy, opportunities to practice social and communication skills on a team, and a sense of self-worth or identity.

ADVANTAGES	DISADVANTAGES
- Physical activity can provide outlets to negative energy - Physical activity can increase neuro-chemical responses that increase happiness and positive feelings - Can provide opportunities to improve social and communication skills and enhance sense of self-worth or identity.	- Sports can elicit feelings of competitiveness or aggression - Not everyone is good at sports

TYPE: EXPRESSIVE THERAPY (*e.g. art, music, dance and theater*)

DESCRIPTION

Expressive therapy can provide an outlet for expression of emotion, grievances or frustrations, and a sense of self-worth or identity. If conducted with others, expressive therapy activities can also provide opportunities to practice communication skills.

ADVANTAGES	DISADVANTAGES
Expressing emotion through art, music, dance and theater can be therapeutic	- Although expressive therapy is more about the process than the product, it cannot be discounted that in the presence of talent, a lack of artistic or creative talent could be frustrating. - Lack of artistic talent could draw criticism from peers and create more conflict/isolation

TYPE: PLAY

DESCRIPTION

Especially for children, experiential learning can also come through play. Games and activities, especially where children interact with objects and each other, can be both fun and build resilience skills.

ADVANTAGES	DISADVANTAGES
- Play helps children learn and understand new concepts and skills - Games, songs and activities can help children internalize new concepts and practice their skills with peers	Play could result in conflict between clients that, if not managed properly, could do further harm

CASE STUDY: SABAOON CENTER, PAKISTAN

In Pakistan, the Sabaoon center established for the deradicalization and rehabilitation of adolescent and pre-adolescent males has successfully reintegrated 175 individuals back to their communities between March 2010 and December 2015. The "Sabaoon model" has been internationally acclaimed for its experiential approach aimed at undermining violent extremist narratives.

The program adapted the model of rehabilitation including mainstream education (i.e. remedial and accelerated learning modules to facilitate slow learners and high achievers respectively), vocational training, psychosocial intervention and support in terms of individual, group and family counseling sessions and extra-curricular activities such as sport. However, the addition of Corrective Religious Instruction was deemed to be particularly important due to the indigenous factors that had led to the militant insurgency, such as lack of verification of religious texts, misuse of verses out of context and lack of religious understanding.[327]

Furthermore, the center's success has also been partially attributed to the impartation of other soft skills. Sabaoon uses the Integrative Complexity (IC) Thinking model as an approach to help support clients to perceive multiple perspectives and avoid black and white categorization of information. Using various themes from everyday life to connect with clients' experiences, facilitators (External Experts) teach a methodology for inculcating 'meta-cognition' (the ability to 'see' and reflect on one's thinking) using Integrative Complexity-structured materials that integrate logical, linear propositional thinking with emotion, sense and embodied implicational thinking,[328] to resource thinking at a higher level of complexity beyond the violent extremist groups' imposed traps of binary thinking. The effectiveness of the four-week long training is measured by comparing the difference between pre- and post-scores using Paragraph Completion Tests, along with other measures, to evidence transition to the ability to perceive and integrate multiple perspectives. The center also notes the vital importance for staff to have this ability themselves in order to inculcate the same in their clients.[329]

GUIDING PRINCIPLE 116

Involve third parties, including family, friends, religious leaders and other community members, during each stage of rehabilitation, where relevant and possible.

Especially in circumstances where family members are positive influences on an individual's life, it is important to the rehabilitation and reintegration process for clients to be able to interact with their families. This includes spouses, significant others, close friends, children, siblings, parents or other individuals that the client is close to.

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[327] Feriha Peracha, Rafia Raees Khan and Sara Savage, "Sabaoon: Educational Methods Successfully Countering and Preventing Violent Extremism," in "Expanding Research on Countering Violent Extremism," ed. Sara Zeiger, Hedayah and Edith Cowan University, (2016): 85.

[328] Philip Barnard and John D. Teasdale, "Interacting Cognitive Subsystems: A Systemic Approach to Cognitive-Affective Interaction and Change," Taylor & Francis (1991).

[329] Peracha, "Contribution to Hedayah's Program."

Providing opportunities for clients to maintain close ties with networks of family and friends is crucial in bridging the transition from the Center to release. Research on desistance among criminals in general, and among violent extremists, specifically in relation to disengagement, supports the importance of social ties in these processes. It is important to assess whether the family and social circle will act as partners in a disengagement process or as a stimulus for extremism. If the latter is true, social support should be provided additionally through other channels (in line with legal and human rights regulations).[330] In that negative case, the Center should look for pro-social members of the client's wider family group, including friends and other potential positive figures or role models in the client's life, who can fulfil this role.

In addition, interventions may be supported by expertise from individuals with unique, similar or relevant backgrounds. This could include former violent extremists, victims of terrorism, religious leaders or other community celebrities.

CONSIDERATION 116.1

In the case where family members may have been involved in violent extremism, consider how the rehabilitation and reintegration processes work both as individuals and as a family unit. Case managers may want to look after all cases within a family, or alternatively have regular meetings with other case managers for family members so that the plans are coordinated.

CONSIDERATION 116.2

In the case where family members have not been involved in violent extremism, involve family members in the plan for rehabilitation and reintegration, including providing skills and tools for handling challenging situations with the client.

CONSIDERATION 116.3

In communication with the client, it should always be transparent what information can/will be shared with a client's family, and it is important to respect privacy and confidentiality of the client in the case that the client is not comfortable with certain information being shared.

CONSIDERATION 116.4

When it comes to working with former violent extremists, facilitating a connection can be beneficial because the former knows what the client is going through and can assist on the process. However, being a former alone is not a sufficient qualification to work with clients, the former should be trained as a mentor or a counselor to ensure they understand how to guide the client.

CONSIDERATION 116.5

Religious and community leaders can provide unique knowledge, skills and connections to clients. For example, if a client is particularly religious, they may take advice more willingly from a spiritual leader, rather than a psychologist.

CONSIDERATION 116.6

Provide skills training for third parties to help them to interact with the client in a positive way that aids in the rehabilitation and reintegration processes.

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330   Adams, "Contribution to Hedayah's Program."

During the rehabilitation process within Sri Lanka's Protective Accommodation and Rehabilitation Centers, clients were supported to engage in a range of activities to reconnect with all aspects of individual and communal life, including: family, social, cultural, and religious.

Throughout the six modes of rehabilitation (educational, vocational, spiritual, recreational, psychosocial, and familiar, social, and cultural), each mode involved relevant third parties, such as teachers, members of private businesses (agriculture, carpentry, masonry, motor mechanics, beauty-culture, and garment industry), religious and spiritual leaders, sport and physical activity practitioners, psychologists, and art therapy instructors.

At a later stage of the rehabilitation process, family or next of kin also had an important role to play in the redevelopment of family bonds and preparation for the reintegration into society.

GUIDING PRINCIPLE 117

Draw on experiences from other sectors to create
an effective intervention process.

There are many experiences from other fields that may provide inspiration for successful interventions with challenging circumstances. For example, programs working on drug rehabilitation, anti-gang violence, rehabilitating (in general) violent offenders, rehabilitating sexual predators and offenders, organizations working with cults, organizations working with children and juvenile offenders, and post-conflict reconciliation programs may all provide insights to some of the particular challenges faced by practitioners when rehabilitating their clients at the Center.

In order to develop a framework to guide policies and practices on the rehabilitation and reintegration of children who previously lived within ISIS-controlled territory and are currently being held in the Al-Hol refugee camp in Syria; Weine, Brahmbatt, Cardeli and Ellis conducted a review of 31 studies in the fields of refugee children, war-impacted children, child criminal gang members, child victims of maltreatment, and child victims of sex trafficking.

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[331] Hettiarachchi, "Sri Lanka's Rehabilitation Program."
[332] Stevan Weine, Zachary Brahmbatt, Emma Cardeli, and Heidi Ellis, "Rapid Review to Inform the Rehabilitation and Reintegration of Child Returnees from the Islamic State," Global Health, 86, no. 1 (2020): 64.

Based on this review, the authors developed the Rehabilitation and Reintegration Intervention Framework, which incorporates five levels (individual, family, educational, community, and societal) and identifies five primary goals:

1. Promoting individual mental health and well-being;
2. Promoting family support;
3. Promoting educational success;
4. Promoting community support; and
5. Improving structural conditions and protecting public safety.

The authors also noted that the implementation of this framework would require extensive civil society involvement, partnerships with the private sector, and should be based on the evidence of prior work conducted within relevant fields.

GUIDING PRINCIPLE 118

When implementing interventions, follow good practice for psychological and social support, good communication skills, non-judgement and respect.[333]

CONSIDERATION 118.1	CONSIDERATION 118.2
Maintain an attitude that puts the client's needs first, but is realistic about what is possible and relevant.	Practice judgement-free listening and show respect for the client's beliefs and values.

CONSIDERATION 118.3	CONSIDERATION 118.4
Be transparent in your communication and action. Avoid criticizing opinions, but at the same time do not lie to the client about your stance on your own beliefs.	Be clear about intentions and limitations. Do not promise anything to the client that cannot be delivered, and be transparent about what information will be told to whom and when.

CONSIDERATION 118.5	CONSIDERATION 118.6
Involve third-parties where necessary and relevant to help build trust or sense of self-worth.	Be aware to not trigger trauma, paranoia or other negative behaviors due to lack of trust, lack of transparency, or increased surveillance.

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333 Bennardi, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 119

Facilitate a positive peer culture within the Center to ensure clients are interacting with each other in a way that reinforces rehabilitation and reintegration.

At the very least, the culture of the Center should promote an atmosphere that does not detract from the rehabilitation and reintegration process, and at best, facilitates a positive rehabilitation and reintegration experience.

CONSIDERATION 119.1

A positive peer culture in the Center starts with ensuring clients feel safe and secure. If clients are afraid for their safety, they will form groups within the Center for protection.

CONSIDERATION 119.2

Emphasize individual relationships between clients and the Center staff. The clients should know that the staff are there to support their process.

CONSIDERATION 119.3

Standardize clear rules for accountability if clients attempt to coerce or manipulate the staff. This protects the processes and authority in place needed for rehabilitation and reintegration.

CONSIDERATION 119.4

Create buy-in through involving clients in the day-to-day running of the Center, including setting rules and punishments, as well as basic processes such as preparing a schedule or identifying meals. This helps to create ownership and investment in the Center in addition to their own individual goals.

CONSIDERATION 119.5

Encourage cooperative working and reward clients that help other clients in their processes.

CONSIDERATION 119.6

Expect conflicts, and ensure staff are prepared to use conflicts as an opportunity to grow and practice soft stills.

CONSIDERATION 119.7

Facilitate opportunities for clients to express grievances regularly so that the issues can be caught and addressed when they are small, rather than large.

PREPARATION FOR RELEASE

GUIDING PRINCIPLE 120

Manage the client's expectations for returning to society or integrating for the first time.

It is important that the client is prepared for what to expect and what actions they need to take upon release before they leave the Center. Since reintegration is a two-way process, it is important that the client is aware of the conditions that need to be met before the community is able to accept their presence in the community.

Importantly, some of the clients may not have been fully integrated into society in the first place, which may have contributed to their radicalization and recruitment. The Center should therefore in some ways prepare for *integration* rather than reintegration. Before release, the Center should be confident that the client has developed some level of resilience against the stigmatization they may face upon release.

CONSIDERATION 120.1	CONSIDERATION 120.2
The client should be aware of the dysfunctional behaviors and thinking processes that led them to radicalization in the first place, and be equipped with appropriate tools to avoid or manage those behaviors upon release.	The client should be aware of the vulnerabilities they have outside the Center, including potential negative influences or triggers that might mean they turn back to previous behavior or affiliations. The client should be briefed to be prepared for the temptations of old habits and old friends, and how they might feel as time passes. Being forewarned about a likely 'slump' in their first few months may make them more resilient to it. Similarly, giving the client trusted contacts they can reach out to when they feel they are becoming more vulnerable can help mitigate the risk of recidivism.[334]

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[334] Tyler, "Contribution to Hedayah's Program."

The client should be prepared for the potential stigmatization they may face from the community, and appropriate skills to manage situations where they are feeling stigmatized or socially isolated.

The client should understand their employment and financial prospects once leaving the Center, and develop a plan for how to achieve financial stability. The Center should facilitate, support and guide the client to overcome potential obstacles they may face when socially and economically reintegrating.[335] For example, the client may be blocked from access to financial services such as bank accounts due to their previous participation in terrorism.

GUIDING PRINCIPLE 121

Involve reintegration staff in the later stages of rehabilitation to ensure effective transition of the client.

Integrating the staff, agencies or organizations responsible for reintegration during the later stages of rehabilitation will help to prevent an interruption in support and interventions provided to the client. Starting the relationship after release can be challenging, the client may not trust the new staff or may question why they are no longer able to engage with the rehabilitation staff. Providing opportunity for the new staff to be introduced to the client prior to their release will help to build trust vicariously, through the trusted rehabilitation staff who have worked with the client for a prolonged period, and will support the positive engagement of the reintegration staff with the client. Furthermore, this will enable a seamless transition from rehabilitation to reintegration, whereby the reintegration staff are better familiarized with the circumstances and rehabilitation processes of the client, enabling the continuation of the interventions conducted within the Center.

GUIDING PRINCIPLE 122

Provide opportunities for social interaction and social inclusion outside the Center as part of a successful transition.

Considering the time available in centers to implement rehabilitation and disengagement programs, it is impossible to guarantee that recidivism is not a possibility. However, clients must succeed in society ultimately, not only in artificial environments like a Center or a prison. Therefore, the Center should be responsible for preparing and supporting clients with a view to eventual release.

At the same time, social inclusion can only occur outside the institution, so opportunities must be given to the clients to interact with the community outside the Center.[336] The individual has to be ready for the potentially hostile welcome back to society. There has to be sessions in the facility where they freely speak through what the society might think and how they may react.[337] See the section on "Community Engagement" under this chapter on "External Interventions: Reintegration" for more information.

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335   Gunaratna, "Countering Violent Extremism."
336   Adams, "Contribution to Hedayah's Program."
337   Bryson, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 123

Prepare both practitioners and clients for the possible "honeymoon period" during reintegration.

There is often a "honeymoon period" for clients after release; in other words, they may be on track and showing positive signs of successful rehabilitation and reintegration at first, but then return to their former negative behaviors after 2-3 months. The rehabilitation and reintegration teams should develop plans to address this risk, through prevention and recovery. Prior to release, it will also be important to guide the client on how this might happen and what practical steps they can take to reduce their risk of recidivism. Family members and prosocial individuals with a strong relationship with the client should also be adequately briefed on the risk as well as methods to help motivate the client to regain traction with the program.

GUIDING PRINCIPLE 124

Plan for when an individual is released prior to the outcomes of the assessments determining their readiness.

Particularly in voluntary rehabilitation centers or at the end of a VEO's prison sentence, there is a risk that a client could be released from the center before they are determined to be ready to reintegrate back into society. In such circumstances, the Center should develop approaches which will help to motivate the individual to remain within or return to the program, and this may require close work and coordination with the client's family members. It will be important to have a prosocial network established outside of the center to engage with the client and positively influence them.[338]

CONSIDERATION 124.1	CONSIDERATION 124.2
The Community Reinforcement and Family Training (CRAFT) approach is a good example of how to help the family and friends to develop strategies to motivate change within the client. The CRAFT approach focuses on providing families with skills on self-care, problem-solving, and goal setting, as well as supporting the family to address the affected individual's resistance to change through behavioral and motivational strategies which can guide their interactions and enhance the positive reinforcement of behaviors and improve communication.[339]	If the client is released and is seen as a security risk, then the security and law enforcement agencies should know of the case, inform the Center, and may ask for assistance from the Center. A trustful relationship with the security agencies and good communications will be especially important for such cases.

338 Järvå, "Contribution to Hedayah's Program."
339 Center for Motivation and Change, "What is CRAFT", Center for motivation and Change, https://motivationandchange.com/outpatient-treatment/for-families/craft-overview/

8

EXTERNAL INTERVENTIONS: REINTEGRATION

> Responsibilities
> Goals and Evaluation
> Interventions and Approaches
> Community Engagement

Following on from the previous chapter, this chapter addresses the responsibilities of the various actors engaged in the work of rehabilitation and reintegration outside of the center. It also provides guidance on the goals, monitoring and evaluation of external interventions for the purpose of reintegration. This is followed by recommendations for possible interventions and approaches which could be implemented after a client's release, including a list of potential types of interventions, as well as each type's advantages and disadvantages. Importantly, this chapter also addresses community engagement as a critical element for the effective reintegration of the client.

This chapter should not be considered independent of the previous chapter on "Center-based Interventions: Rehabilitation," however they are separated for ease of reference.

RESPONSIBILITIES

GUIDING PRINCIPLE 125

Identify the most appropriate stakeholder to be responsible for the reintegration process.

There are many potential stakeholders who could be responsible for the reintegration process of clients, however, it will be important to consider whether the selected representative is able to establish a good relationship with all others involved, including the communities, private sector and law enforcement agencies. They must be able to effectively coordinate the efforts of all parties as well as support the information sharing process.

CONSIDERATION 125.1	CONSIDERATION 125.2
On an individual level, it may be appropriate for the case manager who was responsible during the rehabilitation phase to continue this role into reintegration, or work closely with the reintegration practitioner. This approach would ensure the maintenance of trust and the continuity of the rehabilitation efforts.[340] However, it is possible that a center with many clients would not have the available resources to support this approach. Additionally, there is the potential risk of blurring the division between rehabilitation and reintegration efforts. Nonetheless, this can be effectively addressed by emphasizing the differences to practitioners.[341]	Agencies, such as social welfare departments, parole or probation officers and local CSOs who engage with and coordinate local government efforts to provide support to the community could be considered as suitable stakeholders to be responsible for the reintegration process. If a social worker is identified to be the case manager, their role should not be interpreted exclusively as a broker of services, rather the case manager should also be involved with the client as a counselor or treatment provider as well.

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[340] Walkenhorst, "Contribution to Hedayah's Program."
[341] Iruayenama, "Contribution to Hedayah's Program."

The responsible stakeholder should have a clear understanding of the many diverse aspects involved in reintegration, such as employment opportunities, community perceptions, and psychosocial responses. If they are not aware of the options available and appropriate responses, there is a risk that their decisions might contrast with, and undo, the rehabilitation process. Therefore, it will be critically important that they communicate with the other stakeholders to gain insights and share information on the client's progress.

A few months prior to the reintegration, others may start taking greater control. The probation, municipality or the NGO, whichever is responsible for reintegration, should take over the chairing for case management. Getting information from those working on reintegration could also help staff in the Center to understand what rehabilitation practices are effective, as well as what they are doing right or wrong.

CONSIDERATION 125.5

The following considerations also apply to the reintegration phase in the same manner as they apply to the rehabilitation phase (see the section on "Responsibilities" under the chapter on "Center-based Interventions: Rehabilitation"):

- As much as possible, case managers should not be changed during the reintegration phase. However, it is recommended for all case managers to have potential replacements on standby for ease of transition in case a handover is required (e.g. conflict between case manager and client).
- Consider the language, gender, ethnicity and religious background when matching a client to a case manager.
- Match the case manager with the needs and expectations of the client.
- The case manager should also be involved in any decision-making process for the client.
- Case managers should take care not to give false confidence and or betray the confidence of their clients.
- When assigning a case manager, make sure there is a check on any potential bias or conflict of interest from the perspective of the case manager.
- Ensure the case manager is presented to the client in a professional and appropriate way.

GUIDING PRINCIPLE 126

Ensure effective coordination and collaboration between those involved in the reintegration process.

There is a need to have strong cooperation between different partners, as the process will involve and impact many different stakeholders. The coordination efforts should involve: the staff of the rehabilitation center, national government agencies, local government bodies, community leaders/representatives, local CSOs, international organizations, private businesses, family members, relatives, and friends.[342]

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[342] Survey Responses, "Hedayah's Program on Rehabilitation and Reintegration."

Throughout the reintegration process, the information needs to be shared with all relevant institutions. All stakeholders need to have clarity on their roles, impacts and activities, including the local community. The roles should be identified, discussed and agreed on by every agency involved before engagement with the clients begin.

CONSIDERATION 126.1	CONSIDERATION 126.2
Instead of having a singular stakeholder responsible for the decision making process during reintegration, the government should consider whether it would be more appropriate to have a multi-agency panel which decides on the responses and measures to be adopted during the reintegration phase. However, it is important to note that multi-agency feedback might lead to a feedback delay due to bureaucracies and potential disagreement between agency representatives.	If a multi-agency panel is selected as the appropriate approach for decision making, it will be important to match the participating agencies with the needs of the client. This may require different agencies for each case, so that the needs are met by the most appropriate agency or organization. Furthermore, a multi-agency panel should take into consideration all the talent and skills of available stakeholders, including in the community, to avoid bias towards one type of intervention.

CONSIDERATION 126.3	CONSIDERATION 126.4
The stakeholder(s) responsible for the reintegration phase should keep a close liaison with the local security and law enforcement officers. This will be important to ensure a two-way communication channel in case of any concerns regarding the former client. The stakeholder(s) will also have an important role of filtering and translating the information to the local community and family members.[343]	It will be important to coordinate, collaborate and share pertinent information with local governments and municipalities, in order to refine local policies and approaches that are locally-owned and tailored.[344]

GUIDING PRINCIPLE 127

Adequately train those responsible for reintegration on rehabilitation processes as well.

As previously discussed, it will be important for both the rehabilitation and reintegration staff to have adequate knowledge on the work of each other's field, in order to ensure a continuation of rehabilitation into and throughout reintegration[345] (see the section on "Responsibilities" under the chapter on "Center-based Interventions: Rehabilitation" for more information). It can be extremely helpful for the client's confidence if progress made in rehabilitation is able to be carried forward into their reintegration. For

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[343] Peracha, "Contribution to Hedayah's Program."
[344] Nancy G. La Vigne, Jake Cowan and D. Brazzell, "Mapping Prisoner Reentry: An Action Research Guidebook," Urban Institute, Justice Policy Center (2006).
[345] Örell, "Contribution to Hedayah's Program."

example, if a client is progressing well on certain activities in the Center the reintegration team should seek to help the client continue the same activities in the community. The reintegration team should also engage with the Center to ensure familiarity with the individual's particular rehabilitation program.

GUIDING PRINCIPLE 128

Involve, where appropriate, mentors and life coaches who are able to provide personal support for the client upon release.

Being released from prison or a rehabilitation center is often a daunting prospect and individuals require support to adapt to their new reality. Mentors, who are assigned to the individual can provide a more personal level support for the clients during this period. The mentor should start their engagement with the client during the rehabilitation phase in order to build the relationship and then be available to meet them at the gate upon release and help them re-socialize back into their community.

The role of a mentor is to provide a softer approach, helping with daily tasks, education and employment. However, they should also be prepared and able to address other potential issues, such as theological questions. They should also be well-informed of the possible stigmatization they might face as a result of their association with the client.

A mentor should also help the client to remain focused on the important aspects of reintegration, as many will get distracted by their new environment and circumstances.

CONSIDERATION 128.1

A mentor should develop a reintegration plan with the client prior to release, consistent with the client plan developed at the Center.

CONSIDERATION 128.2

It is the mentor's role to open up more and have a personal relationship. In this regard, the mentor should be considered an important voice during any panel discussions.

CONSIDERATION 128.3

The role of a mentor should be gender and age sensitive, including the identification of the most appropriate mentor for each client.

CONSIDERATION 128.4

A mentor should have experience working with similar people, or have experience that allows them to relate to the individual. Former VEOs can make suitable mentors, as they are able to relate to the experience. However, not all former VEOs would make appropriate mentors. They should have outstanding interpersonal skills, professional knowledge on aspects related to rehabilitation and reintegration (e.g. psychosocial support and counseling), and should be cleared by the security authorities.

CONSIDERATION 128.5	CONSIDERATION 128.6

A mentor will be particularly important to help the client avoid relapse that may lead to recidivism. The mentor is well placed to give the client a realistic view of the difficulties they will face in adjusting back into society and to reassure the client when setbacks inevitably occur, to help keep them away from old habits and networks.

The mentor should be well-informed and be prepared to deal with the associated risks brought on by his association with the client, such as stigmatization and in worse case scenarios the threat to his life if the client goes through recidivism and gives out his personal information to active VEs.

CASE STUDY: ADVOCACY FOR WOMEN IN PEACE AND SECURITY AFRICA, KENYA[346]

In Kenya, Advocacy for Women in Peace and Security Africa (AWAPSA) has assisted more than 100 women and girls who have returned to their communities after leaving Al-Shabaab. AWAPSA provide mentorship and personal support to these women and girls, including help with relocation, returning to education, and gaining employment.

AWAPSA receive referrals from partners and use word of mouth in order to identify the individuals and families in need of support. Once the individuals are engaged and assessments have been conducted, AWAPSA provides community-based mentorship support and arranges informal peer support counseling groups for the returnees. They also collaborate with the private sector to arrange for financial assistance and provide vocational training. The mentorship program is used also to bridge the religious differences between Christians and Muslims within the local communities.

Through dialogues and the "Walking with the Police Forums", AWAPSA have been able to assist the trust building between these individuals and the security agencies, which has supported the reintegration processes and encouraged many of the women and girls to share their stories and experiences in order to inspire others facing similar challenges.

346 United Nations Development Programme (UNDP) and International Civil Society Action Network (ICAN), "Invisible Women: Gendered Dimensions of Return, Rehabilitation and Reintegration from Violent Extremism," UNDP (2019): 124.

GOALS AND EVALUATION

GUIDING PRINCIPLE 129

Establish an overarching goal and individualized objectives
for the reintegration of all clients.

While there is not a consensus on what constitutes the overarching goal of reintegration, there are some potential factors to be considered, namely: 1) the safety of the client, community and stakeholders, 2) the client's positive re-socialization and engagement in community and other prosocial activities, and 3) the sustainability and permanence of the these two points. One example of a client goal may include enhancing their individual ability to effectively mitigate the impact of the prevalent push and pull factors. Another goal may be their enhanced involvement in prosocial activities.[347] To achieve these potential goals, practitioners may need to consider the client's relationship with family and friends, their living circumstances (e.g. housing), as well as social and health welfare.[348]

It is important to highlight here that reintegration is not one-sided; reintegration involves a relationship between the client and the community. The aim should not be to have an individual coming back to live in solitude, and therefore, practitioners will need to involve and work with the local community to enhance the effectiveness of the reintegration process. This is because communities can be very reluctant to accept clients back.

CONSIDERATION 129.1

The individual objectives for reintegration should be set based on the needs and risk assessments conducted periodically, as well as inputs by the client. Building on the client's strengths will likely be beneficial to increase the client's engagement and enhance relationships.[349] Assessment information should be integrated into the client plan by associating individual needs and strengths with the goals, objectives, and strategies that are aligned with the expected program outcomes.[350]

CONSIDERATION 129.2

Building upon the protective factors and addressing the needs of the client will continue to be critical throughout reintegration, as it is in rehabilitation.[351] Having the client contribute towards their own goals which align with their needs will help to ensure their motivation for change and support the overall process.[352]

[347] Peracha, "Contribution to Hedayah's Program."
[348] Musliu, "Contribution to Hedayah's Program."
[349] Beth L. Green, Carol L. McAllister and Jerod M. Tarte, "The Strengths-Based Practices Inventory: A Tool for Measuring Strengths-Based Service Delivery in Early Childhood and Family Support Programs," Families in Society: The Journal of Contemporary Human Services, 85, no. 3 (2004): 326-334.
[350] J. D. Hamilton, Philip C. Kendall, Elizabeth Gosch, Jami M. Furr, and Erica Sood, "Flexibility within fidelity," Journal of the American Academy of Child & Adolescent Psychiatry 47 (2008): 987–993.
[351] Örell, "Contribution to Hedayah's Program."
[352] Järvå, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 130

Continue to use integrated assessments, monitoring and evaluation
throughout rehabilitation and into reintegration.

As noted in the previous guiding principle, it will be important for the monitoring of the client's progress during reintegration to be closely linked with their monitoring throughout the rehabilitation process. In this regard, the same tools that were used to measure progress during rehabilitation (e.g. needs and risk assessments) should be continued to be used periodically during reintegration, where appropriate. Moreover, similar indicators that were used for rehabilitation can also be continued into the reintegration period. See the section on "Goals and Evaluation" under the chapter on "Center-Based Interventions: Rehabilitation" for more information and sample indicators.

The client's reintegration needs should be assessed using standardized assessments, client input, and collateral information (e.g., relatives, neighbors, community leaders) and integrated with the client's plan (see section the section on "Client Plans", under the chapter on "Assessing the Client")[353] to include the continuity of achievement and targeted outcomes from the rehabilitation phase.[354]

Client engagement in services and motivation to change may be monitored through use of the Transtheoretical Model Stages of Change, which has been adapted for several psychological and behavioral conditions and includes the stages of pre-contemplation, contemplation, preparation, action, and maintenance.[355] Progress can be also monitored by changes on measurable clinical and self-report assessments as well as measurable and quantifiable goals and objectives.

CONSIDERATION 130.1	CONSIDERATION 130.2
The responsibility for monitoring should be with the agency/practitioner with the responsibility for the individual's case management. However, the monitoring will also require all relevant stakeholders to feed in information collected from their separate interactions. This may include information from the security and law enforcement agencies, social workers, local CSOs, the client's family and social network, among others.	It will also be important to measure the interaction of the client with the community, and this type of information could be collected via the community leaders/representatives, as well as through discussions with the individual and their family members.

353 UNODC, "Handbook on the management of violent extremist prisoners."
354 Tyler, "Contribution to Hedayah's Program."
355 Prochaska and DiClemente, "Stages and processes of self-change of smoking."

CONSIDERATION 130.3

In addition to the evaluation of the client's progress, it will also be important to evaluate the impact of the implemented interventions, in order to adapt and enhance the applied approaches for future engagement.[356]

CONSIDERATION 130.4

Centralizing the monitoring and evaluation to a mandated monitoring unit may relieve the burden on other involved actors, however, there is a risk that if the center ceases to operate due to external factors, such as budget cuts, this could mean a significant number of clients are no longer monitored.

CONSIDERATION 130.5

The monitoring and evaluation process should continue as long as necessary until it is determined that the goals for reintegration are met satisfactorily. However, the potential resource burden should be considered. It may be appropriate for the case manager to monitor the progress for six months or the prescribed period (e.g. during parole), however, after this initial phase, the monitoring responsibility may be given to a stakeholder with more permanency in the community, i.e. a local CSO or community leader. The monitoring of clients through and beyond the reintegration process can help reduce recidivism. It is important to be aware that the Center and/or government will not be able to continue the monitoring process indefinitely, and therefore, procedures should be developed for the eventual handover to the relevant stakeholder with the capacity for continuation.

[356] Musliu, "Contribution to Hedayah's Program."

INTERVENTIONS AND APPROACHES

GUIDING PRINCIPLE 131

Develop a menu of interventions and approaches for reintegration, enabling the appropriate interventions to be selected, adapted and tailored based on the context, needs and strengths of the client.

There is a not a one-size-fits-all approach for reintegration and the responses will need to be tailored to the individual based on the client plan (see the section on "Client Plans"). Depending upon the approach adopted by the national authorities, either the case manager or inter-agency panel responsible for the client's reintegration would decide which approaches are more suitable for the client. While the tailoring process is critical, there should also be a developed menu of options, as much as possible, to enable the approaches to be implemented efficiently and effectively.

CONSIDERATION 131.1

During reintegration, it will be important to continue to implement some of the interventions from the rehabilitation phase, depending upon assessments, the client plan and the client's vulnerabilities.

CONSIDERATION 131.2

Plan for reintegration from the beginning. As much as rehabilitation should be part of reintegration, reintegration should also be a primary focus throughout rehabilitation. The plan for a client's release and reintegration should start at their arrival to the Center (or even before). Conversations on reintegration should start with the client early in their rehabilitation, as well as the preparation of the community. Both the client and community should be well-prepared for the individual's re-socialization.

A non-exhaustive list of potential interventions for reintegration are listed in the following table.[357]

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[357] This table is based on Survey Responses and Group Discussions during Hedayah's Program on Rehabilitation and Reintegration of Returning Foreign Terrorist Fighters (RFTFs) and their Family Members: Restorative Approaches, Hedayah (July 2020).

TABLE 9: **TYPES OF REHABILITATION INTERVENTIONS**

PSYCHOLOGICAL AND SOCIAL

TYPE: PSYCHOSOCIAL SUPPORT AND COUNSELING

DESCRIPTION

Psychosocial support and counseling can be implemented by social workers or trained practitioners from local CSOs. The aim of such support may be to help the client adapt to their new reality, enhance their social skills, and build upon the support provided during rehabilitation.

ADVANTAGES	DISADVANTAGES
▪ Individualized approach helps the client work through specific cognitive and behavior challenges, as well as how they relate to others. ▪ Can be used to reduce self-stigmatization and build the resilience of the client against stigmatization (e.g., through positive coping skills).	▪ May be difficult and resource heavy to conduct on a regular basis, especially in rural areas. ▪ Not all clients will respond positively. Children in particular may not respond well to talk therapy

TYPE: SOCIAL AND EMOTIONAL SUPPORT FROM FAMILY, FRIENDS AND POTENTIAL ROLE MODELS IN THE LOCAL COMMUNITY

DESCRIPTION

Individuals with a strong relationship to the client may be able to positively influence the client's behavior.

ADVANTAGES	DISADVANTAGES
▪ Requires little resources on behalf of the government for implementation. ▪ These actors would likely have pre-existing trust with the client.	▪ Families and related individuals would likely require training in order to provide effective support. ▪ Some families may be negative influencers or even the source of the RLVE.

DIALOGUE AND RECONCILIATION

TYPE: SAFE SPACES FOR DIALOGUE

DESCRIPTION

This approach involves establishing an environment whereby the participants of a discussion can speak freely without fear of reprisal. There are ground rules for the discussion which all must abide by and each participant should speak about how the feel regarding a particular topic.

ADVANTAGES

- Allows for an open-discussion between the clients and other target audiences, such as family members or community representatives.
- Helps the participants to understand each other's perspective.
- Requires few resources.

DISADVANTAGES

- The coordinator of the discussion should be adequately trained on the principles of Safe Spaces for Dialogue in order to ensure the aims are fulfilled.

TYPE: RECONCILIATION MECHANISMS

DESCRIPTION

This approach involves the establishment of a platform for the members of the community to discuss potential concerns or issues.

ADVANTAGES

- Reconciliation actions by the client may help their rehabilitation and build confidence and relationships in the community.
- Provide a platform for the clients to apologize for past actions.
- Provide the client and community members the opportunity to share their own stories.
- May support the community to find their own solutions to challenges faced.
- Very few resources required.

DISADVANTAGES

- If the client is present during the process, they will be exposed and risk being retaliated against.

EMPLOYMENT AND FINANCIAL SUPPORT

TYPE: JOB OPPORTUNITIES / APPROPRIATE WORK

DESCRIPTION

The national authorities may help the client to set up their own business or find employment. The government may utilize a public-private partnership to help clients find jobs, or the national Small and Medium-sized Enterprises Units to support individuals to establish their own business.

This may involve the relevant ministries for labor, social policy, education and employment.

ADVANTAGES

- Enables the client to be self-sufficient and provide for them self.

DISADVANTAGES

- The failure of vocational training in many countries is related to the client's inability to utilize the newly gained skills upon

- Provides opportunity for the client to engage with the community in a positive way.
- Clients can fulfill a gap in the job market within the community. This requires market analysis prior to the provision of vocational training. Matching the vocational training to the job market will be important. This was successful in Kosovo, where the woodworking industry lacked potential recruits.
- Clients who completed vocational training in a rehabilitation center could be awarded certificates which give them credibility when finding a job. This was found to be beneficial in Malaysia.
- Potentially a long-term, sustainable response.

release. A client may be provided with certain skills, but upon release they are not able to run their own business. Rehabilitation centers may consider providing entrepreneurial skills training to ensure the vocational skills are beneficial. Although even with such training, not everyone is able to be an entrepreneur.
- Without digital skills, clients may not be able to fulfill certain jobs. The vocational training should also include relevant digital skills, where appropriate.
- In contexts where there is mass unemployment and/or lack of economic opportunities, individuals seeking employment or economic opportunities might become aggrieved and perceive economic or financial support for the former violent extremists as reward for their violent past.

TYPE: **SUBSIDIES**

DESCRIPTION

Governments may also consider providing financial support for clients, especially to support them during the initial period after release.

To support this process, the Center may need to provide financial literacy skills training to clients prior to release. This may be particularly important for those who sold all of their property before travelling or attempting to travel as FTFs. Clients who are trained on financial literacy will likely be able to make better use of the support funds provided by the government upon release.

ADVANTAGES

- Enables the client to support themselves during the difficult transitional period.
- Helps to build and maintain trust between the client and government.
- The provision of subsidies can also be tailored to align with any religious belief held by the client(s).

DISADVANTAGES

- There is a risk that the funds could be misused by the client. The Governments should conduct proper risk assessments and consider the necessary threshold the clients need to meet in order to receive subsidies. To mitigate this, subsidies may not need to be provided directly to the client, for example, rent or related costs could be paid directly by the government instead.
- In contexts where there is mass unemployment and/or lack of economic opportunities, individuals seeking employment or economic opportunities might become aggrieved and perceive economic or financial support for the former violent extremists as reward for their violent past.

IDEOLOGICAL AND RELIGIOUS SUPPORT

TYPE: DIALOGUE WITH IDEOLOGICAL OR RELIGIOUS LEADER(S)

DESCRIPTION

This approach may help to challenge the justifications for violence that are based on interpretations of religious texts or documents.

ADVANTAGES

- Engagement with a local religious leader may be seen positively by other community members.
- A knowledgeable scholar can de-construct religious ideology supporting violence

DISADVANTAGES

- Not all motivations behind violent extremism are religious or ideological
- Requires the religious leader to have considerable understanding of the narratives and messages espoused by the violent extremist group.

GUIDING PRINCIPLE 132

Provide aftercare to clients to ensure the continuation of rehabilitation into and throughout reintegration.

Continuity is a vital principle, from the Center into reintegration. Staff working on aftercare should be trained on and know the content of the rehabilitation program, so that similar approaches can be used in the home environment. The staff should be taking what the client learned during rehabilitation and find ways to reinforce those learning points in the natural home environment. Developing aftercare support such as this has been shown to improve the generalization of skills learned and improved likelihood of sustaining the gains made in residential programs.[358]

358   Alexander L. Trout, Mathew C. Lambert, Ronald Thompson, Kristin Duppong Hurley and Patrick Tyler, "On the Way Home: Promoting caregiver empowerment, self-efficacy, and adolescent stability during family reunification following placements in residential care," Residential Treatment for Children and Youth (2019), doi: 10.1080/0886571X.2019.1681047; Alexander L. Trout, Mathew C. Lambert, Michael Epstein, Patrick Tyler, Stewart McLain, Ronald Thompson, and Daniel Daly, "Comparison of On the Way Home Aftercare supports to usual care following discharge from a residential setting: An exploratory pilot randomized controlled trial," Child Welfare 92, no. 3 (2013): 27-45.

CONSIDERATION 132.1

Follow-up support would be ideally provided by the practitioner(s) the client engaged with in the Center, as they have built a trusting relationship over time in the center. However, the number of clients affects the sustainability of that support. If the rehabilitation practitioner(s) are not able to continue to provide this type of support, it may be recommended to provide alternative opportunities for the client to link to the practitioner(s), especially during the initial period after leaving the Center.

CONSIDERATION 132.2

In the case where practitioners are not able to provide support, the Center should attempt to identify positive role models from the client's family or community who could be trained on important elements to support the continuation of the rehabilitation (e.g. Motivational Interviewing).

CONSIDERATION 132.3

For children, their teachers, parents and coaches can reinforce parts of the rehabilitation, through praising and supporting the child's skills and prosocial behaviors.

CONSIDERATION 132.4

Aftercare of clients, beyond the formal reintegration processes, that links back to rehabilitation practices and practitioners may be more likely to succeed.

GUIDING PRINCIPLE 133

Ensure that all the interventions outside the Center include an "experiential approach," whereby clients are able to be exposed to experiences that both undermine the violent extremist ideology and counters the damaging psychological effects of having been involved in a violent extremist movement.

As mentioned within the previous section on "Interventions and Restorative Approaches" under the chapter on "Center-based Interventions: Rehabilitation", an important approach for both rehabilitation and reintegration is the positioning of a client within an environment which encourages them to question and challenge their ideology and behaviors, without direct confrontation, known as the experiential approach.

This should be understood to be a universal approach which can be applied in any cultural context and is relevant to any gender. It is grounded in the theory of Contextual Behavior Science and Relational Frame Theory.[359] Continuing the experiential approach from rehabilitation into reintegration will be important for the client's progression. There are three approaches that practitioners can take in providing these kind of experiences: 1) any positive experience from the world outside the influence of the violent extremist group; 2) experiences that directly undermine the ideology (e.g. meeting in a positive environment with those framed by the ideology as evil, so that the client can see the reality for themselves); and 3) reframing activities forbidden by the violent extremists into acceptable activities.[360]

[359] Robert Zettle, Jeanetta C. Rains and Steven C. Hayes, "Processes of Change in Acceptance and Commitment Therapy and Cognitive Therapy for Depression: A Mediation Reanalysis of Zettle and Rains," Behavior modification 35, no. 3 (2011): 265-83, doi:10.1177/0145445511398344.

[360] Håkan Järvå, "A Radical Reality," (forthcoming publication, 2021).

GUIDING PRINCIPLE 134

Establish, where appropriate and possible, a physical location that aids in the transition between the Center and the community.

If resources allow, the national authorities should consider establishing a 'halfway house' that can serve as a pre-release service would support the reintegration process for the clients. A client could move to the 'halfway house' a short time prior to their release (e.g. 6 months). The physical separation from the prison or Center they were previously housed in will help the individual to feel one step closer to release. The 'halfway house' would provide access to care and supervision, but also allows for freedom of movement and interface with the community. The staff at this type of facility also can still provide certain rehabilitation and reintegration programs and activities.

CONSIDERATION 134.1	CONSIDERATION 134.2
Consider the use of publically accessible spaces for clients to interact with the community. Having a space within the 'halfway house' where clients could interact with or serve the society outside may support their adaptation, whilst simultaneously helping to demystify the RLVE process within the community. For example, this could take the form of a coffee shop or book shop.[361]	If it is not possible to establish a separate 'halfway house', consider the use of a separate wing/unit of the Center that could function in the same manner.

CASE STUDY: HALFWAY HOUSE, MALAYSIA

Since the program's inception in 2010, Malaysia has founded 14 halfway houses across the country, which provide support for those finishing their sentences in prison. The purpose of these facilities is to mentally and physically prepare the prisoners before their reintegration into society.

The center provides the inmates with basic necessities, such as accommodation, food, and supportive staff. The correctional staff help the inmates through psychosocial and employment support. The psychosocial support includes assessments to ensure that the clients have not become dependent upon the services of the halfway house.

This approach provides opportunity for the former-prisoners to re-adjust to independent living. After six months, the clients are reintegrated into the local community with the support of the Ministry of Social Welfare.[362]

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361 Järvå, "Contribution to Hedayah's Program."
362 Subramaniam, "Contribution to Hedayah's Program"; Stephanie Lee, "Prisoners Help to Raise RM17mil through Rehab Programmes," The Star, February 8, 2013, https://www.thestar.com.my/news/community/2013/02/08/prisoners-help-to-raise-rm17mil-through-rehab-programmes.

The use of Halfway Houses in Malaysia has been found to significantly reduce the rates of recidivism.

GUIDING PRINCIPLE 135

Establish, where appropriate and possible, a physical location that aids in the transition between the Center and the community.

It is common that reintegration efforts will focus on utilizing the expertize of social workers, parole/probation officers and local CSOs, however, there are likely to be other experts working within the communities on related topics which could contribute towards the enhancement of the reintegration process. In areas where conflict has occurred, there may be experts from the field of Demobilization, Disarmament and Reintegration (DDR), who have expertise and lessons learned on conflict resolution, mediation and reconciliation within communities. Additionally, there may be organizations providing other forms psychological support within the community and have existing bonds with the community members. This type of organization may be of great benefit to involve in the reintegration process, as they will likely have existing trust. It is highly recommended to do a full analysis of available expertise and resources beyond the traditional staff categories who could support the reintegration work, and may contribute towards a more holistic response.[363]

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[363] Knoope, "Contribution to Hedayah's Program."

COMMUNITY ENGAGEMENT

It is critical to involve the concerned and receiving communities throughout the rehabilitation and reintegration process. To support the client and community during reintegration, there needs to be preparation, engagement, dialogue, and readiness to receive and reintegrate the individual.

GUIDING PRINCIPLE 136

Emphasize building and maintaining community trust, and start relationship-building as early as possible.

It will be critical to build and maintain trust between the client, their family members and the community, and this trust must be reciprocal. It will be equally important to build the trust between the local community and those responsible for the rehabilitation and reintegration program.[364] The local perspective is also important for ensuring access to labor opportunities, local community centers that might be available for support, as well as community organizations that can contribute to building social cohesion and mediation.[365] If the community does not trust the client, program or practitioners, they will likely reject the reintegration of the individual.

Practitioners should build resilience and trust with community members even before the beginning of the rehabilitation and reintegration process. Engagement with relevant actors outside the center should begin as early as possible. This includes communities and families, as well as (local) governmental institutions or possible future employers. Many of the following guiding principles within this sub-section will also be important for building and maintaining trustful relationships with the community and creating platforms to express their concerns.

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[364] Anonymous, "Contribution to Hedayah's Program."
[365] Örell, "Contribution to Hedayah's Program."

CONSIDERATION 136.1

The goal of engaging the community should be to establish a supportive environment and network around the client within the community and wider society.[366]

CONSIDERATION 136.2

Engaging with and involving locally respected community leaders can also help to build trust within the community. They may also be able to help reach out to those who are reluctant to hear directly from a government official.[367] Similarly, respected religious leaders may also be able to reach local communities through a softer approach.[368] Charismatic members of the community may be able to inspire change within the community and relevant individuals.[369]

CONSIDERATION 136.3

Engaging friends and family members of the client will be very helpful in building trust as well through the sharing of more personal perspectives.[370] Families may be able to express the changes they have witnessed during the rehabilitation process.[371]

CONSIDERATION 136.4

Local security and law enforcement officers can also help to build trust by addressing the safety concerns of the community.[372]

CONSIDERATION 136.5

Intensive networking is usually highly resource-intensive; especially regarding the time investment needed to get actors on board and aligned with the objectives of a rehabilitation and reintegration process. Nonetheless, without the cooperation, including the ability and willingness to welcome former VEOs, reintegration is almost impossible.[373]

CONSIDERATION 136.6

Without engaging and building trust with the community early on, there is a significant risk of the client being stigmatized by the local community, and reintegration failing. This has been found to the case in many countries across the world, including Europe, Sub-Saharan Africa, and Southeast Asia.[374] By providing de-stigmatization, reconciliation and community healing support for the host community, the center will improve the sense of ownership by community members on the success of the rehabilitation and reintegration of the returning clients and their families.[375]

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[366] GCTF, "Malta Principles."
[367] Anonymous, "Contribution to Hedayah's Program."
[368] Bryson, "Contribution to Hedayah's Program."
[369] GCTF, "Rome Memorandum."
[370] Anonymous, "Contribution to Hedayah's Program."
[371] Bryson, "Contribution to Hedayah's Program."
[372] Anonymous, "Contribution to Hedayah's Program."
[373] Anonymous, "Contribution to Hedayah's Program."
[374] Knoope, "Contribution to Hedayah's Program."
[375] Yuliani, "Contribution to Hedayah's Program on Rehabilitation."

CONSIDERATION 136.7

Engaging with CSOs who have an existing relationship with the local community can help to build and maintain trust between all parties involved. It is recommended to be as open as possible with these CSOs. The government will likely need them to be fully aware of all circumstances, so that they can communicate effectively with the local community.[376] This type of involvement by local CSOs can support and assist with accessing and creating interactions and understanding to new social, professional, and supporting functions in the local society.[377]

GUIDING PRINCIPLE 137

Combine both individual case management and community engagement management for a comprehensive reintegration program.

Individual case management is a central framework throughout rehabilitation and reintegration. At the reintegration phase, it requires the case manager to develop new ways to connect clients to social services and the community.[378] Individual case management reduces recidivism, encourages social reintegration, and enhances public safety.[379]

In support of individual case management, it is essential to also manage community engagement as part of the reintegration process. Unless community expectations and needs are met, there is a potential risk that the community could become part of the problems in the reintegration process. To avoid potential backlash from the community or negative effects of the community rejecting the client, it is therefore essential to place community needs as equally important as the clients.

Furthermore, focusing the intervention exclusively on the clients could potentially create social jealousy from the community members. For example, if a client is provided a stipend to assist them financially until they are able to find employment, community members may view this as incentivizing participation in violent extremism. In this example, providing sufficient explanations to the community as to why and for how long that stipend is provided would be critical to creating community buy-in to the process.

See the section on "Client Plan" under the chapter on "Assessing the Client" for more information on the activities to be included in the case management and community engagement.

376 Walkenhorst, "Contribution to Hedayah's Program."
377 Örell, "Contribution to Hedayah's Program."
378 Penelope Caragana and David M. Austin, "Final Report: A Comparative Study of the Functions of the Case Manager in Multi- Purpose, Comprehensive and in Categorical Programs," Austin, Texas: University of Texas, School of Social Work (1983).
379 Richard Enos and Steven Southern, "Correctional Case Management," Cincinnati, Ohio: Anderson Publishing Co (1996): 2.

GUIDING PRINCIPLE 138

Make, at an early stage of the development of a rehabilitation and reintegration program, an inventory of the conditions under which communities are prepared to welcome the returning FTFs or related clients back into the community.

As discussed previously earlier in this section, one of the major challenges for reintegration can be the lack of public support for the final stages of the process. This lack of public support translates in some environments into active resistance and stigmatization. The potential harm, damage, pain and suffering inflicted upon communities are factors that need to be addressed when considering reintegration. Therefore, community engagement management as well as case management will be critical.[380]

A discussion with and within communities needs to take place about the conditions under which the formers or returnees will be accepted by the community. The Center will need to have a clear understanding of the communities perspective on what needs to happen, what steps must be taken, and what the authorities and clients will need to do, say or not do.[381] Answering these questions will help the Center to understand the needs of the community, and therefore determine how to increase awareness of reintegration processes and how to work with the community effectively.[382] This engagement is a negotiation and should be approached as such; the communities in reality can reject the entry of clients into their midst and therefore need to have confidence that they and their families will not be placed at undue risk.

Having an open dialogue with the community will be an important first step to gain these insights, however, social transformation will not occur through dialogue alone, the government will have a duty to help citizens mobilize towards a positive co-existence through education, awareness and support, and this requires regular and consistent engagement.[383]

CONSIDERATION 138.1	CONSIDERATION 138.2

Concerns of the community are often not only related to security but also to the perception of justice. Community engagement by the Center must lead to a view that justice is done and that the communities are compensated for the harm and damage caused by the violent extremist group(s), and by extension the client(s). Communities often want more than only a guarantee that chances for recidivism are limited; they want to see that justice is done and the damages are compensated.[384]

As well as the potential harm caused by violent extremist groups, some local communities may express a form of jealousy based on the perceived benefits and preferential treatment the clients have gained throughout the rehabilitation process. For example, vocational training, assistance finding employment and financial subsidies, that community members would like for themselves. It will be critical to gain the communities perspectives on the rehabilitation and reintegration process, and address any concerns they may have in this regard.[385] One way to potentially address this is to ensure the most vulnerable and/or community members in need are also given the same kind of livelihood support given to the former violent extremists being reintegrated back into the community.[386]

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[380] GCTF, "Malta Principles."
[381] Knoope, "Contribution to Hedayah's Program."
[382] Mulbocus, "Contribution to Hedayah's Program."
[383] Bennardi, "Contribution to Hedayah's Program."
[384] Knoope, "Contribution to Hedayah's Program."
[385] Bryson, "Contribution to Hedayah's Program."
[386] Iruayenama, "Contribution to Hedayah's Program."

CONSIDERATION 138.3

In the majority of cases, the media coverage of individuals and the subject of radicalization will influence a community's willingness to accept an individual being reintegrated. It is necessary to be aware of the sources of information the community listens to and how the narrative is being controlled.[387]

CASE STUDY: FAMBUL TOK, SIERRA LEONE

After the civil war in Sierra Leone, national and international efforts were put into the Special Court and the Truth and Reconciliation Committee. This committee was an important approach for cataloguing the broader story of the war, however, the outcomes and benefits were not extensively witnessed at the level of most local villages. In response, the "Fambul Tok" project, meaning "family talk" in Krio, conducted a series of consultations with local community leaders from all districts, in order to identify the local communities' needs and hopes for reconciliation.

Building upon the results of the consultations and based on Sierra Leone's tradition of discussing and resolving issues within the security of a family circle, the Fambul Tok project supports local communities to organize social events such as "truth-telling bonfires and traditional cleansing ceremonies," in order to support dialogue with former fighters, as well as enhance reconciliation and foster apologies and forgiveness within the community.[388]

GUIDING PRINCIPLE 139

Develop a communications strategy for engagement with communities.

Handling communications concerning the challenges posed by returnees requires careful preparation. The perception held by the general public, as well as their concerns on rehabilitating a person who has returned from 'fighting' alongside terrorists, means returnees are expected to generate significant media attention. They may also become a cause célèbre for destabilizing actors such as violent extremist organizations. Local authorities and their civil society and community partners need to prepare for increased or renewed media and political attention and pressure. It is therefore vital that a communications strategy is prepared for the entire approach for responding to returnees, ideally ahead of the arrival of the returnee(s) in the local community.

The strategy should include awareness raising through multiple channels. The community will play a central role in spreading the narrative and support should be provided to ensure there is a positive narrative being spread in regards to rehabilitation and reintegration.

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387 Bennardi, "Contribution to Hedayah's Program."
388 Augustine Park, "Community-based restorative transitional justice in Sierra Leone," Contemporary Justice Review: Issues in Criminal, Social, and Restorative Justice 13, no. 1 (2010): 95-119.

CONSIDERATION 139.1

Gain regular and constructive feedback on the communications from community representatives. Research should be conducted to establish the most appropriate dissemination methods and mediums for messages to reach and resonate with the community.

CONSIDERATION 139.2

The strategy may consider non-traditional forms of communicating with the local community, such as: poetry, folk songs that convey positive messages, theatre, storytelling, and cultural festivals.[389]

CONSIDERATION 139.3

Utilize social media as an opportunity to directly inform, engage and influence various audiences. Social media is relatively cost effective, it enables reach to a large or targeted audience and allows for two-way communication. However, it can take time to respond to all feedback, there is a potential vulnerability for messages or discussions to be hijacked or countered, and there may be potential poor connectivity amongst the target audience.[390]

CONSIDERATION 139.4

The personal data of children, including photos, must be protected from publicity and in alignment with international and local laws for the protection of children.[391]

CONSIDERATION 139.5

Ensure the communications strategy is aligned with other national communication strategies related to CVE and counter terrorism.

CONSIDERATION 139.6

Develop national and sub-national communication strategies in order to ensure they are tailored to the intended audience.

CONSIDERATION 139.7

Train the media outlets on how to report and avoid further stigmatization.[392] Building a trustful relationship with the media will be key. Working with trusted outlets will help to ensure a productive narrative.[393]

CONSIDERATION 139.8

The rehabilitation center should be visible and transparent to society, in order to demystify the process.[394] Allowing some well–planned community access to the center can help with this, and, exposing clients to community members can be another significant benefit of these visits. Highlight the effectiveness and comprehensive nature of the disengagement, deradicalization and rehabilitation process.[395]

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[389] Turkana County Government, "Communication and Media Strategy 2018–2022: Catalytic Approach to Development," Turkan County government, Kenya (2018): 29, https://turkana.go.ke/wp-content/uploads/2019/07/Communication-Strategy.pdf.

[390] Hedayah, "NIWETU Toolkit, Module 4: Undermining Violent Extremist Narratives," (2020).

[391] Örell, "Contribution to Hedayah's Program."

[392] Anonymous, "Contribution to Hedayah's Program."

[393] Walkenhorst, "Contribution to Hedayah's Program."

[394] Järvå, "Contribution to Hedayah's Program."

[395] Iruayenama, "Contribution to Hedayah's Program."

CONSIDERATION 139.9

Support the community in dealing with excessive possible media coverage and public attention.

CONSIDERATION 139.10

Use communications to dispel the notion that women lack agency and provide positive examples of female peacebuilders, ideally from similar national, cultural or religious backgrounds.[396]

GUIDING PRINCIPLE 140

Consider establishing a department, team or focal point within the Center for community relations, with a specific focus on restorative actions and community reconciliation.

As discussed above, the restorative and reconciliation aspects of reintegration are fundamental in succeeding in connecting and building trust with the recipient communities. Therefore, having staff within the Center that focus on developing and implementing a process built on restorative justice principles and practices aiming at reconciliation, will likely contribute towards the successful reintegration back into society.

This department or team would focus on listening to the affected and concerned communities, building trust and developing responses to address their concerns and fears, as well as providing strategies and examples of how to achieve reintegration.[397] The activities of such a department may include: hosting community dialogues, liaising with the local media/press, distributing information to concerned parties and community leaders, providing guidance to the Center and/or rehabilitation and reintegration decision makers, as well as arranging other relevant activities in pursuit of community reconciliation.

CONSIDERATION 140.1

This department or team may also be the appropriate focal points for the reintegration process, by not only coordinating with the local communities, but also helping the clients to find a job, organize the follow-up psychosocial support if needed, and coordinate between the central and local governments.[398]

CONSIDERATION 140.2

The staff of such a specialized department or team should have good relationships with the community. If the focal point is also from the community, it would enable them to better understand the community circumstance, which could be powerful for building trust. However, it needs to be the right person, and they also need to be good at listening to the community and have strong communication skills.[399]

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[396] Iruayenama, "Contribution to Hedayah's Program."
[397] Örell, "Contribution to Hedayah's Program."
[398] Musliu, "Contribution to Hedayah's Program."
[399] Bryson, "Contribution to Hedayah's Program."

CONSIDERATION 140.3

It may also be useful to work with liaison officers who are not from the community, as they can provide an objective perspective. There have been cases in Northeast Nigeria where liaison officers from the community have responded emotionally due to their attachment to the local issues and possibly, unaddressed trauma.[400] However, it would be crucial for the individual to be aware of the historical and contemporary grievances in the community, as well as the cultural contexts. If the community becomes aware that the practitioner does not understand the circumstances of the community, it will erode trust.

CONSIDERATION 140.4

It will be important for the liaison officer to be able to translate messages from the community and needs of the community into reports that are actionable and can contribute towards the rehabilitation and reintegration of the Center's client(s).[401]

CONSIDERATION 140.5

The specialized unit or department can organize activities that support the process of reintegration of the clients to the community. An example of an intervention could be a dialogue about justice practices where different actors are able to express their views to bring the restorative and healing practices together. Here the affected and concerned communities need to be listened to, and their concerns and fears addressed.

CONSIDERATION 140.6

The specialized unit or department may be organized or run in partnership with a local CSO that is well-networked in the community, and can facilitate good communication and messaging.

CONSIDERATION 140.7

The Center may want to leverage the multi-agency body, and set up a specialized department or outreach center under the oversight or leadership of that body. See the section on "Leadership, Management and Structure of the Center" under the Chapter "Governance and Oversight" for more information.

CONSIDERATION 140.8

If resources are too limited to establish a department or team within the Center, a liaison officer could fulfill the role, with the aim of the role to build relations, trust, and facilitate dialogue between the different parts of the process.[402]

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[400] Bryson, "Contribution to Hedayah's Program."
[401] Iruayenama, "Contribution to Hedayah's Program."
[402] Örell, "Contribution to Hedayah's Program."

GUIDING PRINCIPLE 141

Engage with and identify the most appropriate CSOs to support the rehabilitation and reintegration process.

As emphasized previously, the involvement of local CSOs will be critical for the effective implementation of a rehabilitation and reintegration program. The Center should proactively engage with CSOs, as they will likely have relevant knowledge of, access to, and engagement with local communities.[403] CSOs may be also able to support across a number of fields, including: health, social welfare, education, among others, as well as be able to directly and indirectly confront the challenges of recruitment and radicalization.[404] However, it will be important to ensure that the most relevant, appropriate and skilled CSOs are identified for each role. In this regard, research has found that the "mere existence of and support for civil society does not automatically lead to peacebuilding," rather there is a need for a clear understanding on the role of CSOs and recognition that the roles will vary depending on the phase and type of activity.[405]

CONSIDERATION 141.1

The CSOs should be open-minded in handling the cases and understand the rehabilitation and reintegration process.

CONSIDERATION 141.2

The CSOs should be willing and able to work with the government, including security and law enforcement agencies where relevant and needed. While having experience on humanitarian support will be important, they should also be aware and able to engage with the security aspects.

CONSIDERATION 141.3

The CSOs need to be willing to work and collaborate with other CSOs, especially on the reintegration process of clients.

CONSIDERATION 141.4

There is a need to identify and address the potential obstacles CSOs may face, in order to support their constructive contributions to rehabilitation and reintegration.

CONSIDERATION 141.5

CSOs that do not work on CVE directly should not be dismissed. Claims of expertise on CVE do not necessarily mean they would be the most relevant for the specific circumstances. Organizations that work in conflict resolution, peacebuilding and other related fields may have a track record for similar work that can be relevant to rehabilitation and reintegration. Trust within communities is a critical factor for choosing the

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403 United Nations Security Council, Counter-terrorism Committee, "Madrid Guiding Principles."
404 United Nations Security Council, "Resolution 2396."
405 Thania Paffenholz and Christoph Spurk, "Civil Society, Civic Engagement, and Peacebuilding," Social Development Papers, Conflict Prevention and Reconstruction 36 (2006): 54.

right CSO. They should represent a piece of the community and be able to interact with that community. CSOs working specifically on CVE may not necessarily have contact with the community or be the best service provider for certain services.

> ## GUIDING PRINCIPLE 142
>
> Engage organizations of women and youth within the community.

It will be important for the national authorities to be inclusive during their engagement with local communities. Working directly with women's organizations and youth organizations will likely provide perspectives and understanding that may otherwise not be heard. These groups also may be able to support with the reintegration of women, children and youth, especially as entry points for relationship building. It would also be recommended to provide training to youth and women representatives from the community, in order to enhance the level of support they are able to provide.

> ### CASE STUDY: YOUNG PREVENT ADVISORY GROUP (Y-PAGE)[406]
>
> In the UK, The London Borough of Ealing's Prevent Advisory Group (PAGE) was set up in 2016, which created a network with local CSOs, the community, and faith groups. The aim of PAGE is to provide a safe space for members to understand the impacts of violent extremism within local communities and encouraged community groups to contribute towards CVE efforts. Through this approach, PAGE has successfully encouraged local, grass-roots CSOs to make referrals to other organizations.
>
> In 2019, Ealing recognized the importance of engaging further with youth groups and established Y-PAGE, which works with youth and young adults between the ages 14 – 25 to contribute their voices and become involved in programs which aims to tackle RLVE. Y-PAGE run regular sessions that give young people the chance to express their ideas, opinions and views. They have the opportunity to meet and discuss their needs with decision makers such as youth workers, our governance board and staff of other organizations. This included members who had personal experience dealing with RLVE or lived in communities affected by it.

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[406] Mulbocus, "Contribution to Hedayah's Program,"; Paul Murphy, "2019 Annual Report on the Work of the Safer Ealing Partnership," Safer Ealing Partnership (2019).

> ## GUIDING PRINCIPLE 143
>
> Incorporate victim voices in the process of rehabilitation or reintegration.

While it has become more accepted to hear victims during court cases and to organize confrontations between criminals and their direct victims during incarceration, the framework for the role of victims in the rehabilitation and reintegration of returning of FTFs is often lacking.

Confrontations between criminals and their (in-)direct victims are done to promote healing and to create awareness of the impact of criminal acts. In post-conflict situations these confrontations are organized on a community level for similar reasons. Healing, justice and forgiveness are primary objectives. It is a method used to prevent the cycle of anger and revenge that is part of conflict dynamics.

Exploiting and adapting the experiences with confrontations between violent actors and victims from these fields will help to advance programs for rehabilitation and reintegration, also in terrorism cases. It may, at the same time, reduce the chances for continuation of violent extremism by organizing the uncomfortable conversation about the local drivers of RLVE and the impact of this violence.[407]

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[407] Knoope, "Contribution to Hedayah's Program."

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- Basic Principles and Guidelines on the Right to a Remedy and Reparation for Victims of Gross Violations of International Human Rights Law and Serious Violations of International Humanitarian Law. Uni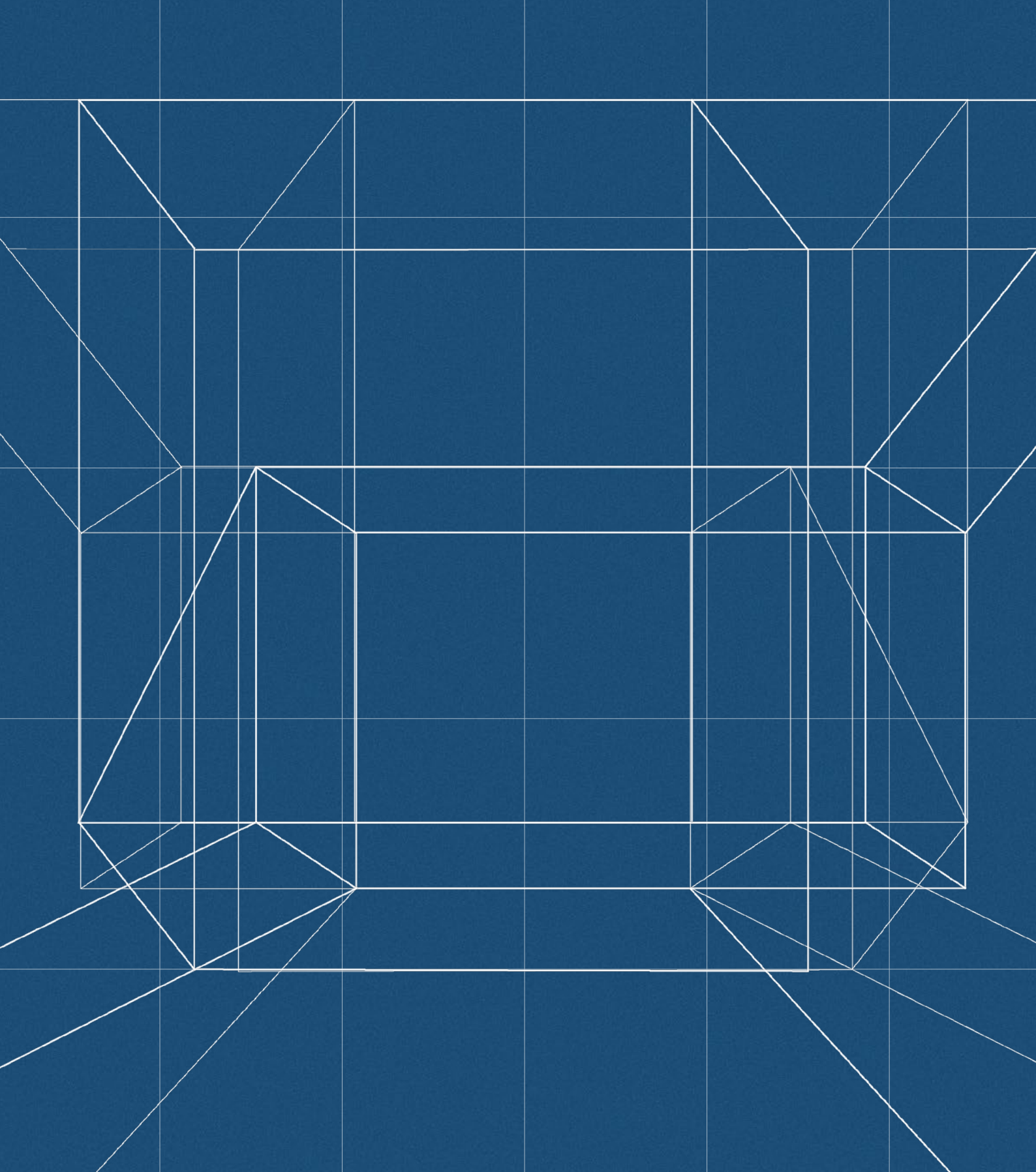ted Nations General Assembly Resolution 60/147, Annex. 2005. https://www.ohchr.org/EN/ProfessionalInterest/Pages/RemedyAndReparation.aspx

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