



Center for
Prevention Programs
and Partnerships



Prevention Resource:

Enhancing Behavioral Threat Assessment and Case Management Capabilities Through a Public Health-Informed Approach



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The Department of Homeland Security established the **Center for Prevention Programs and Partnerships** (CP3) to lead targeted violence and terrorism prevention efforts across the Department. CP3 works to create a culture of prevention for targeted violence and terrorism in the United States by drawing on evidence-based violence prevention research. Acts of targeted violence and terrorism are often preventable, and CP3 supports efforts to stop violence before it occurs.

Behavioral threat assessment and management models are increasingly used by schools, workplaces, and communities to offer early intervention services to individuals who display concerning behaviors¹. Through federal grant funding and technical assistance, CP3 has supported the development of dozens of behavioral threat assessment and management teams in communities across the United States.

Based on this work and engagement with experts, researchers, and practitioners, this Prevention Resource outlines how behavioral threat assessment and case management models may benefit by adopting a public health-informed approach to targeted violence and terrorism prevention. It also summarizes emerging practices in case management techniques to build practitioner capacity at all levels of violence prevention. A case study describes how these recommendations can be put into practice.

Note: This Prevention Resource does not provide specific information on how to conduct behavioral threat assessment. Additional federal resources are included in the concluding sections to support collaboration between public health, behavioral threat assessment and case management practice.

Disclaimer: *This Prevention Resource on Enhancing Behavioral Threat Assessment and Case Management Capabilities through a Public Health-Informed Approach provides a summary of research, written by the Center for Prevention Programs and Partnerships. Inclusion of articles, research, and references does not constitute endorsement of any non-federal entities or their content by the U.S. Department of Homeland Security or the Federal Government.*

Targeted Violence and Terrorism Impact All Communities

The United States has witnessed the tragic outcomes of grievance-based violence. In 2023, the U.S. Secret Service's National Threat Assessment Center (USSS-NTAC), published *Mass Attacks in Public Spaces: 2016 – 2020*, the Department's most comprehensive analysis of targeted violence to date. The study examined 173 mass attacks impacting public or semi-public locations over a five-year period, including acts of premeditated school and workplace violence, hate crimes, and terrorism.² Because of this research, we know that acts of targeted violence and terrorism can be prevented. Behavioral threat assessment and management (BTAM) is a systematic, evidence-based process that can help communities identify and manage potential threats of violence, as well as help connect at-risk individuals to the services they need.

Violence can be categorized as impulsive (reactive) or predatory (planned).³ Impulsive violence is emotional and spontaneous, often in response to a perceived immediate threat, while predatory violence is premeditated and serves a specific purpose.⁴ Research has demonstrated that the process of targeted violence begins long before an attack, with the latter stages of planning and preparation spanning days, weeks, months, or even years.⁵ While the components of this process are not predictive of targeted violence, individuals contemplating violence may frequently exhibit concerning behaviors or engage in detectable pre-attack preparatory actions, both of which provide an opportunity for behavioral threat assessment and management practices to prevent an attack. Further, individuals exhibiting concerning behaviors can benefit from early interventions that address underlying challenges in their lives.



A Public Health-Informed Approach to Targeted Violence and Terrorism Prevention

A public health-informed approach to violence prevention focuses on the “health, safety, and well-being of entire populations.”⁶ This work focuses on enhancing protective factors that empower individuals, peers, families, and communities, while decreasing the likelihood that an individual will resort to violence.⁷ CP3 draws on this body of research to address the risk and protective factors associated with targeted violence and terrorism.⁸ While the risk and protective factors for each individual and community are unique, data suggests that different forms of violence may be interconnected and share both risk and protective factors.⁹

Risk factors for engaging in targeted violence or terrorism can range from attitudinal factors, like anger, political grievance, and in-group superiority, to criminogenic factors, like thrill-seeking and low self-control.^{10 11} Risk factors are not predictive; rather, a risk factor is “a characteristic that may increase an individual’s susceptibility to [conduct] violence.”¹² Additionally, research suggests that risk and protective factors can vary depending on local context, highlighting the importance of community-driven approaches to prevention.¹³

Strengthening protective factors can help mitigate the occurrence of risk factors. For violence prevention broadly, this includes supporting communities to ensure coordination of resources and services across community agencies, as well as ensuring that communities have access to mental health and substance use treatment services.¹⁴ In the targeted violence and terrorism space, protective factors can include institutional trust, social support, parental involvement, and life satisfaction.¹⁵

Levels of Targeted Violence and Terrorism Prevention Programs

To address these factors, CP3 organizes activities into four levels of targeted violence and terrorism prevention programming: primordial, primary, secondary, and tertiary.¹⁶ Each prevention level offers opportunities to reduce the risk of targeted violence and terrorism and create a wider array of partners to participate in prevention efforts. These prevention levels range from addressing larger societal factors that negatively impact people to building healthier communities at the local level, creating safety-net programs and rehabilitating individuals previously engaged in activities associated with targeted violence and terrorism.

Primordial Prevention: Programs and projects that work at the societal level to positively impact the health and wellbeing of individuals and communities, including by minimizing the enabling conditions that are detrimental to well-being. Examples relevant to this Prevention Resource include:

- **Policy Development:** Implementing comprehensive violence prevention strategies to support wellness and public safety at the local, state, and federal levels.
- **Civic Engagement:** Fostering norms that encourage community engagement and shared achievements, education, and resilience, which can lead to improved social cohesion, reduced inter-group tensions, and reduced youth vulnerability.



Primary Prevention: Projects that decrease the likelihood of targeted violence and terrorism by enhancing protective factors from the individual to societal levels. Examples relevant to this Prevention Resource include:

- **Awareness Raising:** Providing education across all of society — community leaders, educators, tech companies, medical professionals, law enforcement, service providers, and others — about the risk and protective factors for targeted violence and terrorism.¹⁷
- **Bystander Training:** Enhancing the abilities of community members to recognize warning signs of violence, take steps to engage with individuals, and provide them with assistance and/or refer them to other resources, including secondary prevention capabilities.¹⁸

Secondary Prevention: Projects that decrease the likelihood of targeted violence and terrorism among individuals exhibiting behaviors associated with previous acts of targeted violence and terrorism. This level of intervention begins before harm occurs, utilizing referrals to public health prevention providers or behavioral threat assessment and management teams, or by implementing bystander intervention training. Examples relevant to this Prevention Resource include:

- **Referral Services:** Establishing a phone-, text-, app-, or web-based hotline to enable concerned individuals to refer their concerns to public health prevention providers or receive guidance on the next steps.¹⁹
- **Behavioral Threat Assessment and Management (BTAM) Teams:** Developing multidisciplinary teams that can assess a threat and devise interventions for each individual's unique situation. These teams involve law enforcement, mental health professionals, educators, and community leaders to assess and intervene with individuals exhibiting concerning behaviors.²⁰ Examples include workplace-, community-, and school-based threat assessment and management teams.

Tertiary Prevention: Projects that decrease the likelihood of targeted violence and terrorism among individuals previously engaged in those forms of violence. Examples relevant to this Prevention Resource include:

- **Rehabilitation and Reintegration Programs:** Programs that rehabilitate individuals with a history of threats or violence, which may include conflict mediation, cognitive-behavioral therapy, and vocational training to facilitate reintegration into society.²¹
- **Supervised Release and Monitoring:** Monitoring and support services that can manage and help reduce the risk of reoffending for individuals involved in the criminal justice system due to threats or violence.

Promising Prevention Practice: Behavioral Threat Assessment and Management

Primordial and primary prevention initiatives are designed to decrease the volume of the problem, but some individuals may still gravitate toward violence. Behavioral threat assessment and management (BTAM) teams act as a safety net for those individuals and their communities. This interdisciplinary approach is used to evaluate, intervene, and minimize the risks associated with individuals who view violence as a conduit for addressing grievances or seeking retribution for real or perceived injustices.^{22, 23}

Violent ideation and other concerning behaviors associated with previous acts of targeted violence provide a window of opportunity for organizations and communities to conduct non-punitive interventions. Numerous studies demonstrate that perpetrators of different forms of targeted violence often communicate their intent before an attack, often as a cry for help, including 81% of school shooters and 47% of mass casualty gun violence perpetrators.²⁴



BTAM teams create an opportunity for public health-informed theory, practice, and resources to support case management for individuals needing care. Using the evidence base from the public health-informed violence prevention community, BTAM recognizes the importance of enhancing protective factors and minimizing risk factors associated with violence. Given the variety of potentially relevant factors, BTAM employs a multidisciplinary approach, bringing together mental and behavioral health professionals, social workers, law enforcement professionals, educators, and community members.²⁵ Through their use of risk and protective factors, as well as other public health principles, BTAM teams can also align their work with primordial, primary, secondary, and tertiary prevention efforts.

BTAM programs have been implemented in many settings, including schools, workplaces, and communities.²⁶ These programs utilize a structured process to identify, investigate, assess, and manage individuals at risk of committing violence against others so that individualized management strategies can be implemented to reduce risks. Because BTAM teams utilize structured processes for making assessments and case management plans, they increase access to needed services and decrease the likelihood of violent outcomes.²⁷

To establish the most current baseline capabilities for these programs, the USSS-NTAC published, *Behavioral Threat Assessment Units: A Guide for State and Local Law Enforcement to Prevent Targeted Violence (2024)*.²⁸ This operational guidance presents a scalable, six-step framework for state and local law enforcement agencies to develop behavioral threat assessment units based on the Secret Service's pioneering violence prevention principles and expertise. These units will help law enforcement agencies use a community-centric approach to proactively identify and intervene with those who pose a risk of perpetrating mass attacks or other acts of targeted violence.

The BTAM approach described in this guidance **is not**:

- Predictive;
- A means to label an individual as a terrorist or mass attacker;
- Intended to be punitive; or
- A clinical violence risk assessment.

A Community-Centric Approach

A community-centric approach is a key principle of BTAM. Multidisciplinary teams embody this approach and exemplify the collective responsibility of the community to address the complex issue of targeted violence and terrorism. No single entity or discipline can tackle the multifaceted nature of the problem alone or provide a comprehensive solution, which is why a community and team approach is imperative.

These multidisciplinary teams recognize that violence prevention requires a collaborative effort, transcending individual expertise. To carry out their work, BTAM teams may undertake risk or vulnerability assessments, threat assessments, or needs assessments. These may be supported by analytical methods administered by professionals, such as clinical assessments, actuarial risk assessments, or structured professional judgment. Engaging trained practitioners from multiple fields — including law enforcement, government, mental health, substance use treatment, education, the private sector, faith leaders, and community organizations — ensures that case assessment and management are grounded in evidence-based processes and standardized approaches. Diverse prevention providers support BTAM efforts at all levels of prevention.



Identify, Investigate, Assess, Manage

BTAM's proactive and non-punitive approach promotes a structured process to identify, investigate, assess, and manage individuals at risk of committing violence against others so that management strategies can be implemented to reduce risks. This approach to targeted violence prevention includes the following steps:



Adapted from DHS Intelligence and Analysis, National Threat Evaluation and Reporting Program²⁹

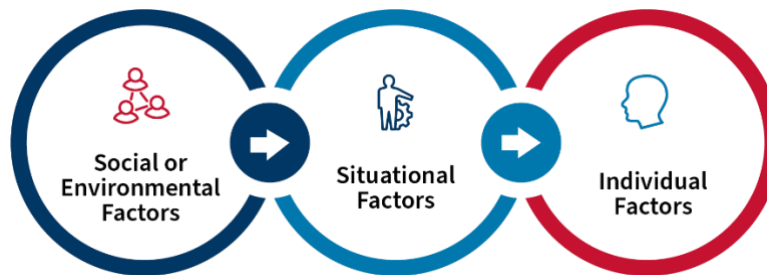
1. **Identify:** Create opportunities to identify individuals displaying concerning behaviors and establish reporting mechanisms for stakeholders and bystanders.
2. **Investigate:** Thoroughly gather information to inform the assessment. (Note: this term is not used to denote a criminal justice investigation in this context.)
3. **Assess:** Utilize a structured process to determine whether an individual might be on a path toward targeted violence by analyzing their behavioral patterns and circumstances.
4. **Manage:** Develop and implement individualized case management plans to support the individual based on relevant risk and protective factors, reducing the likelihood of violent outcomes.

Multidisciplinary teams are key to well-informed, effectively coordinated and implemented behavioral threat assessment and management. Cross-discipline collaboration and partnerships are cornerstones of comprehensive strategy — a strategy aimed at mitigating risks posed by individuals on a path to violence.

Social or Environmental, Situational, and Individual Factors

Behavioral threat assessment and management studies acknowledge that violent outcomes do not stem from a singular situation or risk factor.³⁰³¹ Instead, many stressors and triggering situations influence individuals who resort to violence. Consistent with the social-ecological model used by public health-informed violence prevention providers, these stressors span societal, environmental, situational, and individual factors.³²³³

A threat assessment is not an endpoint, but rather the beginning of a case management process. Simply assessing an individual's behavior as a concern without developing a management strategy does not reduce the likelihood of violence. The threat assessment should guide actions to mitigate the potential for violence.



Social or Environmental Factors

- **Cultural Norms and Values:** Social values and cultural norms can influence behavior. What is considered acceptable or unacceptable behavior varies across cultures and societies, and threat assessment must be sensitive to these cultural nuances.
- **Social Integration and Cohesion:** The level of social integration and cohesion within a social group (e.g., school, workplace, community-based organization) can enhance feelings of belonging, safety, and empowerment, or reduce feelings of isolation and uncertainty in which violence may become more attractive.
- **Media and Information Influence:** Media portrayal of events and individuals can affect how people perceive and respond to situations, potentially influencing their behavior.

Situational Factors

- **Environmental Influences:** An individual's immediate surroundings and environmental conditions can significantly affect their behavior. Factors such as location, access to resources, and the presence of support networks can all influence an individual's actions.
- **Life Events and Stressors:** Recent life events, particularly stressful ones like the loss of a job, a death in the family, or financial troubles, can trigger behavioral changes and may increase the likelihood of violence in the absence of coping mechanisms and support.
- **Access to Resources:** The availability of resources, including mental health services, counseling, and support systems, can impact an individual's ability to cope with stressors and seek help when needed.

Individual Factors

- **Mental Wellness and Psychological State:** Understanding an individual's mental wellness status, psychological state, and history of mental health issues is paramount. Some mental health conditions may increase the risk of threatening behavior if not properly managed.
- **Personality Traits and Behaviors:** An individual's personality, behavioral patterns, and traits can provide valuable insights into their propensity for violence or to harm others.
- **History of Violence or Aggression:** Past incidents of violence or aggressive behavior should be carefully considered when assessing the potential threat an individual may pose.
- **Social Relationships:** Evaluating an individual's relationships, social interactions, and support networks can shed light on their potential to cause harm.



Enhancing Case Management Practices

Structured case management approaches are emerging in secondary and tertiary BTAM interventions.³⁴ This work draws on multidisciplinary case management resources and expertise. Case management may include offering an individual short-term connection to support services or longer-term, intensive, and engaging approaches.

Case management interventions utilize different tools tailored to each stage of the management process, often coordinated through BTAM team members. Overall, case management aims to aid individuals, reducing the risk of engaging in violent behavior. Case management delivery methods and contexts vary based on the intervention required but may include the following:

Case planning: Case management interventions begin with developing a tailored case plan informed by an assessment process. This process may include risk and needs assessments to guide intervention planning. Typically, multidisciplinary partners collaborate to identify each individual's support needs and design a personalized intervention plan.

Delivery and implementation: Case management interventions involve delivering tailored plans that deploy services to meet individual needs and manage risks.³⁵ For example, an individualized plan may include support such as education, employment, psychological assistance, family support, or more specialized forms of aid, like prosocial activities.

Monitoring and Evaluation: Various methods are used to monitor and evaluate individual progress throughout the case management process. This may involve multi-agency case conferences to review case status, assessments against the original intervention plan, and qualitative data collection through case files and notes. This qualitative data encompasses client feedback, observations, interactions with service providers, and/or other relevant case factors, like legal proceedings or police involvement.

Transition and Exit: The decision to exit a case management intervention is based on individual circumstances and behavior, as documented during monitoring. When the intervention is completed, or additional services are engaged, the individual is assessed to determine if their risk has decreased, and if their needs have been met in line with their previous intervention goals.

Expanding Behavioral Threat Management and Public Health Partnerships

To achieve successful outcomes, robust threat assessment and case management services are delivered through strategic partnerships. Building cross-disciplinary partnerships is essential well before the threat of violence emerges. This includes establishing linkages between upstream violence prevention efforts, such as awareness campaigns to promote mental well-being, conflict resolution skills, and healthy interpersonal relationships, as well as evidence-based policy and strategy development.

With decades of experience managing shared risk and protective factors associated with violence, the public health community can also support BTAM processes by recommending specialized targeted violence interventions. These efforts often encompass recognizing mental wellness challenges, as well as difficulties coping with stressors, substance use, or social isolation.

Secondary prevention empowers BTAM teams to allocate resources to support individuals who have demonstrated concerning behaviors. Timely intervention can address underlying problems and curb the escalation of threats, protecting individuals and society. Public health practitioners can help BTAM teams establish meaningful threat management capabilities. This includes implementing tailored interventions designed to allocate appropriate protective factors to support individuals and protect communities from acts of violence. Such interventions may include long-term counseling, mentoring, prosocial activities, effective coping strategies, and violence-inhibiting strategies, as discussed further in the case study on the following page.



Tertiary prevention empowers BTAM teams to effectively handle cases involving individuals with a history of targeted violence through reintegrative threat management. Public health resources can extend the window of opportunity for rehabilitation and reintegration beyond the period of probation/parole, or the parameters of an individual's terms of release, and support multi-level interventions.

Addressing Risk and Protective Factors through Multidisciplinary Case Management: Case Study

To put the ideas outlined in this Prevention Resource into practice, this section sketches a case study example, uniting public health and behavioral threat assessment work.

An individual posted concerning messages online, indicating significant distress and resentment toward a specific company within the city — including a nonspecific reference to a violent outcome. While the messages caused concern to their family, and the company reported their concern to law enforcement, the messages shared online did not meet criminal thresholds for law enforcement action. The city's reporting tool alerted the BTAM team. The team's subsequent fact-finding identified the following factors:

Stressors and Potential Accelerants to Violence

- **Employment Loss:** The individual sent the threats after a recent job loss due to a company decision.
- **Mental Health Concerns:** Police reports indicate multiple visits to the individual's home for welfare checks and mental health-related concerns. The subject cannot afford medication due to the loss of insurance benefits.
- **Belief System:** During conversations, the individual expressed no hope for an amicable resolution and refused to discuss their online posts any further.
- **Financial Strain:** Losing employment led to financial problems, including affording essential medications.
- **Violent Ideation:** The individual's online presence referenced other mass shooters, possibly indicating a fixation on violence.

Potential Case Management Strategies

- **Job Assistance:** Provide the individual with support for applying for jobs and connecting with employers.
- **Financial Assistance:** Collaborate with agencies offering short-term financial aid to alleviate immediate financial stressors.
- **Medication and Treatment Access:** Facilitate access to affordable medications and treatment, or explore alternative options for managing health conditions.
- **Prosocial Support:** Identify local organizations where the individual may find solace, hope, and social engagement, as well as plan for the future and possibly help others.



Monitoring and Evaluation

- BTAM teams work with the individual and family, community stakeholders, and service providers to evaluate if the provided services are helping the individual, and if additional resources are needed.
- By addressing these risk factors and implementing appropriate management strategies, the BTAM team aims to provide support, alleviate stressors, and prevent potential acts of violence while fostering the individual's overall well-being.
- Continuous monitoring, evaluation, and collaboration with relevant community resources are essential for a successful intervention.

Conclusion

Targeted violence and terrorism are serious security challenges facing our nation, but they are often preventable. The practices outlined here are intended to support multidisciplinary BTAM programs in schools, workplaces, and community settings. By adopting a public health-informed approach, prevention providers can integrate with broader community violence prevention initiatives to support individuals before violence occurs. The hope is that diverse professionals from multiple sectors will use this Prevention Resource as a guide to enhance their work and join CP3 in efforts to prevent targeted violence and terrorism in the United States.

CP3 Resources

The Department of Homeland Security Center for Prevention Program and Partnerships (CP3) provides resources to prevent and mitigate acts of targeted violence and terrorism. Resources include nationwide staff support, grant funding, training, and educational materials to help keep your state safe.

Regional Prevention Coordinators support targeted violence and terrorism prevention efforts at the state and local levels. They share information, provide training, and help build networks for community partners who engage in prevention. To learn more, visit www.dhs.gov/cp3 or connect with a CP3 Regional Prevention Coordinator by emailing cp3field@hq.dhs.gov.

The **Targeted Violence and Terrorism Prevention Grant Program** provides funding for state, local, tribal, and territorial governments, nonprofits, and institutions of higher education to establish or enhance capabilities to prevent targeted violence and terrorism. Learn more and apply at <http://www.dhs.gov/tvtpgrants> or contact the grants team at terrorismprevention@hq.dhs.gov.

The **Prevention Resource Finder** provides public information on the resources needed to help prepare for, and prevent, targeted violence and terrorism across our country. Resources on the website include community support resources, grant funding opportunities, information-sharing platforms, evidence-based research, and training opportunities to reduce the risk of targeted violence, including hate-based targeted violence. Find out more at <https://www.dhs.gov/prevention>



Notes

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