

A Public Health Perspective on Deradicalisation: Re-Conceptualising Deradicalisation Approaches

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Abstract : In 2008 Time magazine named terrorist rehabilitation as one of the best ideas of the year. The term deradicalisation has become synonymous with rehabilitation within security discourse. The allure for a “quick fix” when managing terrorist populations (particularly within prisons) has led to a focus on prescriptive programmes where there is a distinct lack of exploration into the drivers for a person to disengage or deradicalise from violence. It has been argued that to tackle a snowballing issue that interventions have moved too quickly for both theory development and methodological structure. This overly quick acceptance of a term that lacks rigorous testing, measuring, and monitoring means that there is distinct lack of evidence base for deradicalisation being a genuine process/phenomenon, leading to academics retrospectively attempting to design frameworks and interventions around a concept that is not truly understood. The UK Home Office has openly acknowledged the lack of empirical data on this subject. This lack of evidence has a direct impact on policy and intervention development. Extremism and deradicalisation are issues that affect public health outcomes on a global scale, to the point that terrorism has now been added to the list of causes of trauma, both in the direct form of being victim of an attack but also the indirect context of witnesses, children and ordinary citizens who live in daily fear. This study critiques current deradicalisation discourses to establish whether public health approaches offer opportunities for development. The research begins by exploring the theoretical constructs of both what deradicalisation, and public health issues are. Questioning: What does deradicalisation involve? Is there an evidential base on which deradicalisation theory has established itself? What theory are public health interventions devised from? What does success look like in both fields? From establishing this base, current deradicalisation practices will then be explored through examples of work already being carried out. Critiques can be broken into discussion points of: Language, the difficulties with conducting empirical studies and the issues around outcome measurements that deradicalisation interventions face. This study argues that a public health approach towards deradicalisation offers the opportunity to attempt to bring clarity to the definitions of radicalisation, identify what could be modified through intervention and offer insights into the evaluation of interventions. As opposed to simply focusing on an element of deradicalisation and analysing that in isolation, a public health approach allows for what the literature has pointed out is missing, a comprehensive analysis of current interventions and information on creating efficacy monitoring systems. Interventions, policies, guidance, and practices in both the UK and Australia will be compared and contrasted, due to the joint nature of this research between Sheffield Hallam University and La Trobe, Melbourne.

Keywords : radicalisation, deradicalisation, violent extremism, public health

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