

The opportunity

Violence prevention requires a community approach. Mental health providers play a key role in violence prevention through identification and reporting of concerning behaviors, as well as through addressing thoughts of violence in therapeutic settings.

Recognizing and reporting concerning behaviors has been identified as being key to the prevention of targeted violence.

The earlier potential violence can be recognized the more options are available to avoid future violence, especially when a crime has not yet been committed. Community-based resources are often available to address concerns or to help people and their loved ones.

There may be a team in your area dedicated to preventing targeted violence. These multidisciplinary teams are collaborations between social services, mental health providers and public safety professionals. Because they have the benefit of multiple perspectives, these teams often have access to additional resources to steer a troubled person away from a violent path.

Reporting concerning behaviors can be the gateway to getting the person the help they need.

The FBI BAU's Behavioral Threat Assessment Center (BTAC) is the U.S. Government's multi-agency, multidisciplinary task force focused on the prevention of terrorism and targeted violence. Studies cited in this guide are available free online at www.fbi.gov



Lessons learned

Studies conducted by the FBI Behavioral Analysis Unit have identified key lessons from prior active shooter incidents:

MASS SHOOTERS DON'T SNAP. They spend time planning and preparing for their attacks, which offers opportunities for prevention.

THE "ANGRY LONER" IS A MYTH. Mass shooters have significant in person and online social interactions.

COMMON MOTIVES for attack include revenge, a desire for control, a attempt to right a wrong, and/or a hope for being seen as important or famous. Often, these individuals want to be a somebody instead of a nobody.

People are much more likely to become mass shooters if a bystander does nothing after observing worrisome behavior, suggesting that individuals may see bystander inaction as permission to act violently.

In order to carry out an attack, an individual must hide their intentions from others.



For more information, visit our website
www.fbi.gov/prevent



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Prevent Mass Violence

How to spot behaviors related to **targeted violence** in your patients - and keep them safe.



Digging deep

Mass shooters think of **suicide** more than the average population does— almost half of studied mass shooters considered suicide or participated in suicidal behaviors before their attacks.

There is a **thin line between suicide and homicide**.

Some people will answer "no" to questions about suicide or homicide despite their true intentions. You can **ask additional probing questions** to obtain information about potential risk of suicide or homicide. Recommended themes include:

- Hopelessness or helplessness
- Darkest times in their life
- Thoughts of wanting the pain to end
- Feeling isolated and alone
- Capability for violence
- Access to weapons

Build a bridge from suicidal thoughts to homicidal thoughts.

- When you have thoughts of wanting the pain to end...
 - ☐ Do you ever think about people who put you there?
 - ☐ Do you want them to pay? Want them to suffer?
 - ☐ Do thoughts of their suffering make you feel better? How?
- Do you fantasize about what you would do to others?
- Do you think about how people would respond if you hurt yourself or others?
- Do you feel people have failed you? Who?

What to See

No single behavior means a person is on a path to committing targeted violence, but multiple concerning behaviors may indicate a need for intervention. Common concerning behaviors are:

Poor "psychological armor" - significantly reduced ability to cope with stress or setbacks.

Lack of non-violent options for solving their problems.

Disclosure of violent plans (verbal, written, or online).

Persistent fantasies about or preoccupation with violence.

Increasingly troublesome or concerning interactions with others.

Angry outbursts or physical aggression.

Reduced interest in hobbies and other activities; worsening performance at school or work.

Preoccupation or troubling interest in prior attackers or attacks.

Obsessive or troubling interest in obtaining firearms, other weapons, tactical gear, clothing, and/or military paraphernalia.

Creation of a manifesto, video, suicide note or other efforts designed to claim credit for an impending act of violence.

What to Do

Therapists, counselors and other professionals often observe concerning behaviors that may indicate someone is planning for violence. If you are concerned, **talk to someone you respect** and consider whether to contact your:

LOCAL POLICE OFFICE Call your local police department on the phone or walk in to report your concerns in person.

LOCAL FBI OFFICE Report your concerns to the FBI by visiting tips.fbi.gov, calling 1-800-CALL-FBI, or visiting your local FBI office.

CHECK LOCAL RESOURCES for a school or community threat assessment team or other threat assessment resources.

Information sharing

Law enforcement may be able to share important information with you regarding their concerns about an individual, particularly in cases involving threats of targeted violence.

One of the best practices in violence prevention is **eliminating information silos**. Where possible, share your knowledge and observations regarding the person of concern with the team in place around them. This team could be made up of law enforcement, mental health professionals, school officials, parents, relatives, parole or probation officers - and more. You may consider adding language allowing you to express concerns to a threat assessment team to your informed consent paperwork.