TERRORISM AS A DISEASE:
AN EPIDEMIOLOGICAL MODEL FOR
COUNTERING ISLAMIST EXTREMISM

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Politicians and pundits often erroneously compare the current, but poorly named, “Global War on Terror,” to the ideological struggles against fascism and communism that defined the World War II and Cold War eras. Admittedly, the fight against extremism is likely to be as prolonged as these contests and will require a comparable mobilization of resources if it to be successful, but it is important not to overstate the comparison. Today’s ‘war’ against terror lacks several characteristics that defined the generational struggles of the twentieth century. For example, the “front lines” are no longer well defined. The enemy uses unorthodox weapons and tactics, and does not recognize standard rules of engagement. Nor is the distinction between civilians and enemy combatants as clear as it once was. Indeed, the global Islamist movement lacks a traditional army, and is instead staffed by a highly dynamic and transnational collection of decentralized non-state actors who attempt to blend into society and hide the militant religious ideals that motivate them. In short, the challenge posed by Islamists extremism is fundamentally different from the state-centric threats that defined the security paradigm of the twentieth century.

Therefore, in order to combat this new peril, it is necessary to modify and supplement the traditional toolbox of national security responses, because it was designed to confront the enemies of another era. Counterterrorism efforts need to begin to emphasize techniques and analytic methodologies that acknowledge the unconventional and transnational attributes of Islamist extremism. This chapter argues that viewing religious terrorism through the lens of epidemiology is an alternative that offers such benefits. However, because Islamist extremism remains poorly understood, this chapter
will first lay-out a different way of thinking about the current threat, before fully describing this alternate approach to counterterrorism.

**The New Strategic Challenge**

The complete lack of consensus about how to describe the current strategic threat reveals that we are still struggling to grasp its nature, let alone to determine an effective way to combat it. Is the threat “global terrorism,” “Islamic terrorism,” “al Qaeda and its affiliates,” “Sunni jihadists,” “Islamist radicals,” or “terrorist extremism”? This is more than just a semantics issue, because without clarity on who, precisely, is our adversary, we are unlikely to ever develop a clear and comprehensive understanding of the enemy’s objectives, strategy, and operational character. And, failing to understand these vital characteristics makes it difficult, if not impossible, to conceive of an effective and sustainable response.

Our preference is to classify this broader challenge as “Islamist militancy.” Like the 9/11 Commission, we feel it important to use the modifier “Islamist”—a politico-religious movement within the Muslim world—rather than “Islamic”—the culture and religion of Islam. Unlike the 9/11 Commission, however, we prefer the simpler, less loaded term “militancy” to “terrorism.” Using the term “militants” to refer to those who either employ or espouse violent means in pursuit of political ends not only avoids the notoriously slippery definitional problems associated with terrorism, but also serves to underscore that the challenge is both multidimensional and broad based. The militancy involves more individuals than just those actors who actually carry out terrorist attacks. Indeed, Islamist militancy has three main constituent groups whose memberships are constantly evolving and overlap in significant ways.
There are, first, the transnational jihadist groups that have a global agenda (principally al Qaeda and its affiliates); second, the nationalist insurgent groups that have essentially a local agenda (e.g., Hamas, Hezbollah, and some of the Kashmiri groups); and, third, the miscellaneous organizations and networks that directly and indirectly support these militant groups. Distinctions among these groups are increasingly difficult to discern as a growing plethora or organizations, which share traits common to more than one classification, have begun to emerge. Although Figure 1 is far from an exhaustive illustration of the threat’s components, it provides a general snapshot of the principal actors within Islamist militancy in 2006.

Most observers accept that Islamist militancy does not represent a conventional national security threat, but it is also useful to differentiate this phenomenon from conventional terrorism. Unlike Islamist militancy, traditional terror groups typically have a distinctive, often singular, identity and a well-defined organizational structure. They
normally espouse reasonably clear political objectives, and take actions to attempt to implement these goals within as specified, and relatively narrow, area of operations.

Therefore, conventional counterterrorist responses, which emphasize apprehending an organization’s leaders and rolling-up networks of supporters through improved intelligence gathering and information sharing, are usually effective against traditional groups. Although such methods remain just as necessary to any campaign against Islamist militancy, it is also becoming clear that they will not be sufficient because Islamist militancy includes a unique component absent from earlier terrorist campaigns: self-organization. Prominent recent attacks, including the bombing of London’s mass-transportation system (July 2005) and the bombing of Madrid’s Atocha railway station (March 2004), were conducted by small local groups, which adhered to the ideology of Islamist militancy, but lacked operational connections to established groups, such as Al Qaeda. Conventional counterterrorism responses cannot address such adversaries because these groups lacked both formal leadership and hierarchy.

Because this type of emergent behavior is becoming increasingly common, a growing number of experts now advocate drawing on the strategies and tactics of unconventional, or “irregular,” warfare to meet the challenge. They portray the threat as a global insurgency that requires a commensurate global counterinsurgency (COIN) campaign. There is some logic to this as elements of the challenge reflect characteristics of a classic insurgency. Certainly, al Qaeda’s stated goal of expelling “Jews and crusaders” from the Muslim world and cleansing it of apostate regimes in order to reestablish a purified caliphate can be viewed as an insurgency of sorts.
However, this paradigm has severe limitations. Describing the threat as a global insurgency dangerously exaggerates the degree of organization and unity among its various actors. To borrow COIN’s own military lexicon, there are no clearly established lines of command and control operating between established extremist groups, much less between these organizations and the sorts of self-organizing adherents described in the previous paragraph. The COIN approach also risks conflating many kinds of Islamist struggles and perversely even serving to legitimize them. Unless suitably adapted, the standard COIN framework, with its simplistic distinctions between “enemies,” “friends,” and “uncommitted,” could make matters worse especially if military or “kinetic” responses come to dominate.

With these concerns in mind, we propose an alternative strategy: counterterrorism efforts should view the challenge of Islamist militancy as one would a global public health threat. The conceptual leap required of this approach is not as far as it first appears. Social scientists increasingly have looked to epidemiology to understand a variety of social contagions, and here Islamist militancy is no different. Specifically, our approach draws on the scientific principles and practices of epidemiology as well as the insights from a growing body of research on “social contagion phenomena” such as fashions, fads, rumors, civil violence, and revolutionary ideas.4

Comments by U.S. officials and other commentators, who frequently make use of disease metaphors to describe Islamist militancy, also support the validity of this approach.5 References to terrorism being a “virus” or to al Qaeda “mutating” or “metastasizing” are common. Similarly, pundits often invoke the image of madrassas and mosques as “incubators” of a “virulent ideology.” Such metaphors have a visceral appeal
in that they help to convey a dangerous and darkly insidious threat.

For some, the disease metaphor also sets—implicitly, at least—a more realistic goal for what counterterrorism efforts can achieve. Just as modern medicine has completely eradicated very few diseases, it remains unlikely that any efforts to combat Islamist militancy will find complete success. The best that can be hoped for is for it to transform the threat into a manageable, low-probability, albeit sometimes deadly, nuisance much like many other social ills.

Beyond its metaphorical appeal there are more practical attractions to an epidemiological/public health approach. Three stand out:

- First, epidemiologists observe rigorous standards of inquiry and analysis to understand the derivation, dynamics, and propagation of a specific disease. In particular, they seek clarity on the origins and geographical and social contours of an outbreak: where the disease is concentrated, how it is transmitted, who is most at risk or “susceptible” to infection, and why some portions of society may be less susceptible, or, for all intents and purposes, immune. Applying the same methodological approach to mapping and understanding Islamist militancy can yield immediately useful guidance on where and how to counter it.

- Second, epidemiologists recognize that diseases neither arise nor spread in a vacuum. They emerge and evolve as a result of a complex dynamic interactive process between people, pathogens, and the environment in which they live. Indeed, the epidemiologic concept of “cause” is rarely if ever singular or linear but is more akin to a “web” of direct and indirect factors that play a lesser or greater role in differing circumstances. To make sense of this complexity, epidemiologists typically employ a standard analytical device that “deconstructs” the key constituent elements of a disease. This model helps not only to understand the phenomenon in its entirety but also to anticipate how it might evolve in the future. As will be discussed, the same systemic conception of disease can be adapted to understand the constituent elements of Islamist militancy and their evolution.

- Third, just as epidemiologists view disease as a complex, multifaceted phenomenon, so public health officials have come to recognize that success in controlling and rolling back an epidemic typically results from a carefully orchestrated, systematic, prioritized, multipronged effort to address each of its constituent elements. At the same time, however, it is also recognized that significant progress or major advances can sometimes
be precipitated by relatively minor interventions—or “tipping points.” Again, there are lessons and insights to be learned here for orchestrating a global counterterrorism campaign.

Before turning to what such a campaign to defeat Islamist militancy might look like were it to follow a public health or counterepidemic approach, it is necessary to understand how epidemiologists typically try to understand disease and how this can help us understand the challenge we face.

**The Epidemic Model**

As indicated, epidemiologists employ a standard approach, or model, to study epidemics that deconstructs an outbreak into four key components, recognizing that in reality they are all dynamically interconnected, as shown in figure 2.

![The Classic Epidemic Model](image)

In simple terms, the agent refers to the pathogen (e.g., a virus or bacterium) that causes disease. The host is the person infected by the disease—called the “infective” in epidemiological jargon—while the environment refers to a variety of external factors that
affect both agent and host. At the center of the triad are the vectors, which serve as conduits and key pathways that help the disease to propagate.

However, the epidemiological metaphor is imperfect because Islamist militancy lacks the clinical features of a biological disease. Individuals who contract illnesses are typically passive and unwitting receptors of a harmful pathogen, while adherents to extremism make a conscious decision to play an active role in terror. Yet, Islamists’ actions are clearly driven by a core set of ideas and beliefs that has an “infectious” appeal, granting this ideology epidemic-like qualities. It, too, therefore, can be deconstructed using the classic epidemic model, as shown in figure 3.

Thus, according to this framework, militant Islamist ideology plays the role of “agent”. Specifically, two primary “strains” can be identified: (1) a transnational Salafist/jihadist ideology as espoused by al Qaeda and (2) a nationalist/insurgent Islamist militant ideology as espoused by groups such as Hezbollah, Hamas, and some of the

\[\text{Figure III}\]

The Model Applied

\[\text{Diagram of epidemic model applied to Islamist militancy}\]

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militant Kashmiri groups. A specific set of underlying assumptions, motivations, and goals characterizes each of these ideological strains.

The host is the group or person “infected” by the agent—in other words, all those who become adherents of militant Islamist ideology. As defined, Islamist militants are those who employ or espouse the use of violence in pursuit of political goals. Although a subtle distinction, it is worth noting that this definition includes rabble-rousers who disseminate violent Islamist propaganda, as well as individuals who conduct attacks.

The environment refers to key factors specific to the Muslim world that promote exposure to Islamist militancy—conflict, political repression, economic stagnation, and social alienation being the leading influences. In this case, the term “vectors” refers to a variety of known conduits that are used to propagate the ideology and associated action agendas, such as mosques, prisons, madrassas, the Internet, satellite television, and diasporic networks.

However, it is important not to overstate the virulence of Islamist militancy. The vast majority of Muslims find the core elements of the Jihadist ideology both aberrant and abhorrent. To extend the epidemiological metaphor, they are effectively “immunized” to the appeal of extremism. Nevertheless, some unknown, yet critical, proportion of the Muslim population clearly remains “susceptible” to becoming not only an adherent of the ideology but actively motivated by it.

Conceptualizing Islamist militancy according to the terms of an epidemiological model provides several policy-relevant benefits. First, this notion captures the key elements of the challenge in a systemic manner, rather than in the disaggregated, unconnected way that so often bedevils analysis and understanding, but is, nonetheless,
commonly found in both the intelligence community and academia. Second, the epidemiological model is *dynamic*; it acknowledges that extremism is not a static phenomenon, but, instead, a constantly evolving threat. New strains, new hosts, new vectors, and changing environmental conditions continually emerge. Third, this model presages the potential future evolution of Islamist militancy.

However, the specific repercussions of this coming evolution remain difficult to ascertain, because unlike with an outbreak of disease, in which those infected typically (though not always) have substantial motivations to report their condition and to seek treatment, new adherents to Islamist militancy have every incentive to keep their ideological affiliation clandestine, making it incredibly challenging to assess both the size and spread of the extremist phenomenon. A combination of indicators (e.g., the number of attacks conducted or thwarted and militants killed or incarcerated, the influence of Jihadist Web sites, the dissemination of training materials, etc.) suggests that Islamist militancy is expanding and mutating in the ways indicated earlier. Surveys taken within the Muslim world of people’s attitudes toward the United States and the West also suggest that the pool of “susceptibles,” those at risk for becoming Islamist militants, is large and expanding in certain countries. Figure 4 depicts the overall growth of Islamist militancy.
The Counterepidemic Approach

Faced with the outbreak of an infectious disease, public health officials typically employ a three-pronged strategy to counter the threat.

The first step is to contain the most threatening outbreaks to prevent them from gaining enough mass and momentum to overwhelm public health responders and threaten public order. Standard measures include quarantining specific areas to contain the movement of infectious individuals, eliminating or decontaminating identifiable vectors of transmission, and, if an antidote exists, treating and rehabilitating individuals who have succumbed to the disease. Although such successes are rare, efforts to containing and contract the number of infectives can sometimes effectively eradicate the pathogen.

Public health officials’ second measure is to protect the high-risk groups, who are most vulnerable to the disease, as well as high-value groups, who are most critical to a functioning society. Targeted immunization programs are typically the most effective
countermeasure. Interestingly, not everyone needs to be inoculated to achieve what is known as “herd immunity”—essentially, the level at which the probability of an infected person being in contact with a nonimmunized person is very low, if not zero. If an effective vaccine is not available, public health officials employ other protective strategies, including encouraging “safe practices” through public education to reduce the probability of exposure and the rate of new infection.

The third and final step in public health campaigns against epidemics is to remedy the environmental conditions that fostered the emergence of the disease in specific areas and its subsequent spread. Many types of interventions are conceivable, from the local to the global, depending on the nature of the threat.

Adapting the same basic strategic imperatives of a counterepidemic campaign to the threat posed by Islamist militancy would immediately translate into the following operational priorities:

- Containing and contracting the activities of the most “virulent” Islamist militant organizations, namely the transnational Jihadist groups with global reach and apocalyptic agendas, as well as those who could gain a meaningful operational presence in areas of significant strategic interest. These areas would include most notably Iraq, Pakistan, Afghanistan, Saudi Arabia, Egypt, Palestine, the Caucasus, and the Muslim diaspora communities of Western Europe, as well as areas in the vicinity of key global financial/economic infrastructure assets.
- Protecting the high-risk/high-value communities of the Muslim world. According to unclassified open-source accounts, a disproportionate number of the officers and foot soldiers in the transnational Jihadist cause come from a few countries—Saudi Arabia, Egypt, Morocco, Algeria, Yemen, Pakistan—and from the European diaspora communities. The high-value communities consist of the educational, religious, political, and security sectors of countries where Islamist militant organizations could make the greatest inroads and the growing number of transnational cultural, business, and media networks that affect the lives of many millions of Muslims throughout the larger *Ummah* (Islamic community).
- Remedying the key environmental factors that foster Islamist militancy. The most important would appear to be the ongoing conflicts or
insurgencies involving Muslims and non-Muslims that help validate the central Jihadist argument that Islam is under attack and that also serve as recruiting magnets and training grounds—notably, Iraq, Palestine, Kashmir, Afghanistan, Chechnya, and several smaller conflicts in Central and Southeast Asia. Social alienation within the European diaspora communities and public corruption, political repression, and economic stagnation in key areas of the Muslim world are widely viewed as additional factors.

These strategic imperatives can be further translated into specific containment, protective, and remedial programs or initiatives that, again, draw on the principles and practices of a counterepidemic campaign.

*Containment Measures*

In addition to limiting the operational reach and capabilities of the most threatening Islamist militant organizations by using standard counterterrorism measures and discrete special intelligence/military operations, containment initiatives would extend to placing greater emphasis on disrupting and restricting the untrammeled use of key vectors—the Internet, satellite TV, prisons, schools, mosques, and so on—by Islamist militant organizations. Some vectors can be physically shut down, others “decontaminated” of unwanted infectious agents. Containment measures appear to be a largely haphazard, after-the-fact effort at the present, rather than a systematically planned, internationally executed campaign.

As the importance of civil liberties trumps counterterrorism in an open society, there are obvious limitations to vector containment initiatives. Therefore, greater attention should be given to nurturing and propagating “ideological antidotes” to the key tenets of Islamist militant ideology. A key component of any such measure involves the
mobilization of moderate religious figures, who are inclined to issue fatwas that condemn
the extremist ideology, denounce Jihadist propaganda, and disallow specific practices,
such as beheading innocent civilians. In addition to these broad-based initiatives, efforts
should include more discrete efforts aimed toward a specific group or community. The
former includes encouraging key opinion makers, cultural leaders, and mass media
figures to second the edicts of moderate religious leaders.10 Such efforts have been made,
but apparently not in an extensive or concerted way.11 More targeted activities include
exploiting the ideological contradictions or schisms within the transnational jihadist
movement to foment internal dissension and possible defection. There are reports, for
example, of successful counterideological efforts in Yemen that in turn yielded
operational success in rolling-up a local al Qaeda network.12

Although many Islamist militants are beyond such intellectual suasion, this may
not be the case with some groups and organizations. Local national-insurgent
movements, in particular, may be susceptible to an approach that approximates health
care’s attempts at treatment and rehabilitation of the infirmed. The evolving role of
groups such as Hamas and Hezbollah, for example, suggests the possibility of their
integration into their respective political systems, encouraging them to abandon armed
struggle in much the same way as other former terrorist organizations. The provision of
amnesties to insurgents willing to lay down arms, as in Afghanistan, constitutes another
element of rehabilitation. And in Iraq, reports suggest a growing rift between the
nationalist Iraqi elements of the insurgency and foreign Jihadists, in part as a result of the
latter’s indiscriminate targeting of civilians.13
Protective Measures

Whereas the containment measures are directed primarily at those already infected, protective measures are aimed at those who are most at risk and those who play important societal functions. It is conceivable that with better understanding of why certain groups and individuals progress along a continuum that begins with a sympathetic conception of Islamist militancy, then evolves into tangential support of the cause, and culminates in active participation in terror, counterterrorism efforts could design targeted programs to effectively immunize at-risk groups. There are many cases where key populations have been targeted in ways designed to turn off their receptiveness to specific ideas, messages, and unhealthy or antisocial practices, including by appealing to people’s common sense, their personal safety, their peer group standing, religious edicts, and societal norms, among other approaches. In some cases the tactics used are not unlike real vaccination programs that work on the principle of exposing uninfected populations to a weakened or attenuated version of the virus so that the body learns to identify and reject the real thing. Political campaigns, for example, often expose key undecided voters to the arguments of opposing candidates, in some cases to ridicule the candidates, but more often to “arm” the voters with convincing reasons to be skeptical when they hear the same arguments from those candidates.14

Similar public programs aimed at undermining the appeal of militant Islamist ideology could be designed and implemented in many different arenas, from schools to mosques to mass media outlets. Unless they are undertaken in the Muslim communities of Western Europe, however, these are clearly not initiatives that the United States (and
the West more generally) should lead or be openly associated with. Western states can, however, prod allies and partners in the Muslim world and provide discreet assistance.

Ideally, such “ideological immunization” efforts aimed at high-risk communities should offer a positive and compelling alternative vision for the future, instead of simply providing a negative image of militant Islamism. Indeed, efforts to undermine militant Islamism and provide a positive counterideology can be mutually reinforcing. Because schools, mosques, mass media outlets, and other conduits have a critical role to play in both efforts, attempts to strengthen moderate voices are an indispensable component of the overall campaign.15

**Remedial Measures**

If parallel efforts are not also taken to remedy some of the key environmental conditions that promote Islamist militancy in the Muslim world, many of the previous initiatives will be harder to accomplish or will likely fail. For reasons discussed earlier, an intensified effort should be made to resolve or at least tamp down the violent conflicts that have a particularly strong resonance within the Muslim world. Indeed, successful conflict management and prevention strategies will play a key role in impeding the spread of Islamist militancy. Conflict resolution efforts will not only mitigate the direct role that violent conflict plays in Jihadi recruitment and training, but will also invalidate extremist propaganda, thereby buttressing moderate support.

The implementation of political reforms focused on good governance, particularly greater transparency, accountability, and the rule of law, will also play a key role in neutralizing Islamist militant ideology that calls for the overthrow of corrupt regimes. Likewise, greater civil liberties, including broader freedoms of assembly and expression
as well as the freedom to form political parties and other associations, will help to level
the political playing field and allow “healthy” outlets for dissent. Particular emphasis
should be placed on institution building, in order to prevent autocratic regimes from
undermining democratic gains or exploiting non-democratic opposition forces.
Facilitating the political participation of peaceful, moderate Islamists can also help to
develop an effective counterweight to Islamist militants and their violent tactics.

The implementation of economic reforms designed to spur growth and bolster job
creation will likewise help to ease popular disaffection, particularly among the Middle
East’s disproportionately young population. In addition, economic reforms that create an
environment that is more appealing to foreign investors will help the Muslim world to
integrate more effectively into the broader global economic system and help bridge the
gap in relative performance between the Muslim world, particularly the Arab world, and
the global economy.

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Over time, the combined effect of these containment, protective, and remedial
measures will be to reverse young Muslims’ growing disenfranchisement and the
increasing appeal of extremism. As figure 5 depicts, the effect will be to divide, isolate,
and weaken the Islamist militant organizations and marginalize their operational impact.
The pool of susceptibles will also shrink in relation to the rest of the Muslim world,
which through the various remedial efforts, will become a more “healthy” and integrated
part of the larger, globalizing world.
As with a global health campaign, success in countering the challenge of Islamist militancy will depend on a sustained commitment over many years, if not decades, by a broad coalition of like-minded states acting in partnership with a multitude of nongovernmental actors. Simply stated, there is no single or easy cure.

**Concluding Observations**

In fundamental respects, the counterepidemic approach to Islamist militancy follows the basic tenets of effective conflict prevention and management. Using common admonitions from the world of public health care, these tenets can be summarized as follows:

- **Prevention is better than cure.** Reducing the momentum of a conflict, is clearly more difficult than taking early preventive measures to forestall violence, positions harden, options narrow, and the costs rise after passions have become inflamed and blood has been spilt. Early warning and early response can, therefore, make all the difference.

- **Diagnose before treating.** Knowing thy ailment is just as important as knowing thy enemy. While it doesn’t guarantee success, understanding clearly the source(s) and dynamics of a conflict before taking action obviously improves the chances of a positive outcome because it allows counterterrorism officials to apply the right tools in the right place at the right time.
• *Do no harm.* The Hippocratic Oath is as relevant to conflict management as it is to medicine. As countless examples attest, poorly timed or calibrated interventions can make a problem worse, not better. Knowing what to do and when to do it in conflict management is as much an art as a science, but again, experience provides a rich set of guidelines, particularly when it comes to balancing incentives with disincentives, and force with diplomacy.

• *Address the source, not the symptoms.* Resolving the root cause of a conflict typically raises the bar in terms of what is required to secure peace, but as many long-festering disputes attest, the “Band-Aid” approach to conflict management at best delays and in many instances complicates the task of finding a sustainable solution.

• *Palliate what you cannot cure.* Unfortunately, effective solutions sometimes remain beyond practical reach. Just as some diseases are—at least for the time being—incurable, so some conflicts become, for all intents and purposes, intractable. Under such circumstances the best that can be achieved is to limit the consequences and not make a bad situation worse.

As indicated at the outset, however, the task of conflict prevention and management must adapt to the emerging realities of the twenty-first century. As a consequence of globalization, the world has become a smaller, more interconnected place. Threats to international peace and stability that were once considered distant and inconsequential now resonate more widely, more quickly, and with greater impact. Nonstate actors have been able to capitalize on the opportunities presented by this new interconnected world; they can now wield unprecedented power for good and bad because they have much greater latitude to operate across borders, as al Qaeda and numerous warlords around the world have demonstrated.

At the same time, states seeking to prevent and manage conflict, whether it be within their borders or in areas both adjacent and distant, find themselves in a changed operating environment. Besides the interdependencies of a globalized world, emerging legal rules and norms affect their freedom much more than was ever previously the case.
Their actions, furthermore, are subject to greater scrutiny and accountability by virtue of not only the constant 24/7 gaze of the global media, but also an expanding network of intergovernmental and nongovernmental organizations.

As a consequence of these new realities, states can rarely, if ever, address threats to peace and stability as singular actors. The task is likely to be too big to solve alone. Important advantages—not least in terms of generating international legitimacy—can be derived from acting collectively. This imperative to cooperate may seem too high a price to pay to those concerned about national sovereignty, but such concerns are arguably becoming redundant in an increasingly interdependent world, if they haven’t already become so. Indeed, giving up some de jure sovereignty may be the only way for states to regain some de facto sovereignty, especially when it comes to non-state threats such as transnational terrorism.

The growing imperative to cooperate internationally is matched by the comparable need for states to partner with nongovernmental actors and civil society in general. The benefits are mutual. States need the cooperation of NGOs to manage those who would exploit the business and commerce sectors, among others, for nefarious ends. NGOs likewise need the support of governments to operate effectively and relatively freely. Again, such partnerships can confer legitimacy on both sides.

Finally, states must adapt their internal political and bureaucratic structures and processes to these new imperatives. What were largely vestiges of the Cold War and earlier eras have to be reformed or replaced with new mechanisms for governmental decision making, coordination, and implementation. Without such changes, effective conflict prevention and management will only become more difficult to achieve.
Notes

An earlier version of this chapter was presented to the Aspen Strategy Group Workshop “Mapping the Jihadist Threat: The War on Terror since 9/11,” Aspen, Colorado, August 5–10, 2005. It also draws on a larger body of USIP-sponsored research on “Rethinking the War on Terror: A C


2 We recognize, therefore, that there are also peaceful Islamist organizations, including legal Islamist political parties such as the Party for Justice and Development in Morocco and charitable organizations such as the Red Crescent.


5 For example, Richard N. Haass, former director of policy planning, U.S. State Department, went further in drawing the analogy in a major speech: “The challenge of terrorism is . . . akin to fighting a virus in that we can accomplish a great deal but not eradicate the problem. We can take steps to prevent it, protect ourselves from it, and when an attack occurs, quarantine it, minimize the damage it inflicts, and attack it with all our power.” Richard N. Haass, speech to the Council on Foreign Relations, [location?] October 15, 2001. Likewise, France’s top counterterrorism official, Judge Jean-Louis Bruguière, has often compared the terrorist threat posed by groups such as al Qaeda to a mutating virus. See, for example, “Frontline: Al Qaeda’s New Front,” October 12, 2004, http://www.pbs.org/wgbh/pages/frontline/shows/front/map/bruguiere.html.

6 Numerous examples of “tipping points” exist in nearly every realm of life, from fashion to politics. The reversal of New York City’s burgeoning crime wave in the 1980s stands as a classic example of identifying and successfully exploiting a tipping point. In that case, the New York police embarked on a strategy of cracking down on relatively minor “quality-of-life” crimes. They went after panhandlers on the street and subway fare-beaters, as well as employing a concerted effort to clean the graffiti from subway cars and ensure that they stay clean. These relatively minor measures constituted a key tipping point that apparently contributed to a significant downturn in serious crime.

7 Two key references were consulted for this section: B. Burt Gerstman, Epidemiology Kept Simple: An Introduction to Traditional and Modern Epidemiology (Hoboken, N.J.: Wiley Liss, 2003); and Leon Gordis, Epidemiology, 3rd ed. (Philadelphia: Elsevier Saunders, 2004).

8 The modern Salafi movement traces its roots to the nineteenth-century Egyptian religious figure Muhammad Abduh and his disciple Rashid Rida, who denounced the innovations and schisms (notably the Sunni-Shiite divide) within the Muslim community as perversions of Islam. Salafists demand a return to the pure form of Islam as practiced by the prophet Muhammad and his immediate successors. Over the past two centuries, the Salafi movement has evolved, split, and adapted to differing circumstances throughout the Muslim world. Salafists do not necessarily call for the use of violence; some focus almost exclusively on social behavior, calling for an ultraconservative moral code to direct dress and other social practices. However, a violent/extremist branch of the movement combines the missionary zeal associated with the call to purify Islam of its impure elements with the violent anti-Western extremism incubated among jihadists in Afghanistan in the 1980s and 1990s. Sources on the Salafist/jihadist ideology include Quintan Wiktorowicz, “The New Global Threat: Transnational Salafis and Jihad,” Middle East Policy 8, no. 4 (December 2001): 18–38; Christopher M. Blanchard, Al Qaeda: Statements and Evolving Ideology, CRS Report for Congress (Washington, D.C.: U.S. Department of State, February 4, 2005); Anonymous, Through Our Enemies’ Eyes: Osama Bin Laden, Radical Islam, and the Future of America (Washington,

9 For example, in February 2005, London’s Finsbury Park mosque, once a bastion of radicalism, was reclaimed. A new board of directors ousted the mosque’s radical cleric, Abu Abdullah, and literally changed the locks. See Lizette Alvarez, “Britain’s Mainstream Muslims Find Voice,” *New York Times*, March 6, 2005. Similarly, measures must be taken within prison systems to curtail and ultimately cease recruitment. See Cuthbertson, 20, for specific recommendations. [AU: Please insert complete Cuthbertson citation per our style. Do you mean Cuthbertson?]

10 Alvarez, “Britain’s Mainstream Muslims Find Voice.” Mainstream Muslims in Britain have also taken steps to isolate Islamist militants and strengthen ties between moderates and the British establishment.


15 In Jordan, for example, a broad curriculum review is taking place that emphasizes more moderate and progressive interpretations of Islam. See Hassan M. Fattah, “Jordan Is Preparing to Tone Down the Islamic Bombast in Textbooks,” *New York Times*, June 12, 2005. A number of European governments are also exploring options for having greater influence over the training of imams who preach in European mosques. See Elaine Sciolino, “Europe Struggling to Train New Breed of Muslim Clerics,” *New York Times*, October 18, 2004.