The Importance of Educational and Mental Health Support in Youth DDR Operations

A Monograph

by

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14. ABSTRACT
Warfare takes a toll on everyone who experiences it. This toll is especially heavy for children who live through a conflict. Experiencing traumatic events in war increases the chances of child survivors suffering from a variety of psychological disorders. War also disrupts the social network around children which further slows childhood development. The Islamic State (IS) deliberately recruited, educated, and radicalized thousands of children during their reign of control in portions of Iraq and Syria. Reintegrating the children traumatized and radicalized by IS requires well thought out and resourced youth Disarmament, Demobilization, and Reintegration (DDR) operations. Not properly reintegrating children traumatized by IS or other conflicts prolongs the time necessary for consolidating gains and undermines national and regional stability. Youth DDR operations in Sierra Leone in 2002 and the Niger River Delta in 2004 and 2009 offer good and bad examples for planning and conducting youth DDR operations in post-conflict Iraq and Syria and beyond. Paramount to the success of youth DDR operations in Iraq and Syria, and in the future, is providing mental health support and reestablishing education systems for traumatized or radicalized children. Not taking a comprehensive approach to reintegrating children lowers the likelihood of successful reintegration and does not address lingering drivers of conflict and instability. Releasing traumatized or radicalized children back into society without ways to improve their lives destabilizes regions and prolongs conflict. Traumatized or radicalized children are more likely targets for later radicalization, spurring instability and increasing the chances of repeated US interventions and deployments to unstable regions. Providing post-conflict mental health and educational support to children by the US military reduces drivers of conflict, supports consolidation of gains, and develops a more lasting peace.

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Abstract

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Warfare takes a toll on everyone who experiences it. This toll is especially heavy for children who live through a conflict. Experiencing traumatic events in war increases the chances of child survivors suffering from a variety of psychological disorders. War also disrupts the social network around children which further slows childhood development. The Islamic State (IS) deliberately recruited, educated, and radicalized thousands of children during their reign of control in portions of Iraq and Syria. Reintegrating the children traumatized and radicalized by IS requires well thought out and resourced youth Disarmament, Demobilization, and Reintegration (DDR) operations. Not properly reintegrating children traumatized by IS or other conflicts prolongs the time necessary for consolidating gains and undermines national and regional stability. Youth DDR operations in Sierra Leone in 2002 and the Niger River Delta in 2004 and 2009 offer good and bad examples for planning and conducting youth DDR operations in post-conflict Iraq and Syria and beyond. Paramount to the success of youth DDR operations in Iraq and Syria, and in the future, is providing mental health support and reestablishing education systems for traumatized or radicalized children. Not taking a comprehensive approach to reintegrating children lowers the likelihood of successful reintegration and does not address lingering drivers of conflict and instability. Releasing traumatized or radicalized children back into society without ways to improve their lives destabilizes regions and prolongs conflict. Traumatized or radicalized children are more likely targets for later radicalization, spurring instability and increasing the chances of repeated US interventions and deployments to unstable regions. Providing post-conflict mental health and educational support to children by the US military reduces drivers of conflict, supports consolidation of gains, and develops a more lasting peace.

Contents

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Acronyms

APA	American Psychiatric Association
AQI	Al-Qaeda in Iraq
CA	Civil Affairs
DDR	Disarmament, Demobilization, and Reintegration
GDP	Gross Domestic Product
ICC	Interim Care Center
IED	Improvised Explosive Device
IS	Islamic State
ISI	Islamic State in Iraq
LSCO	Large Scale Combat Operations
MTOE	Modification of Table of Organization and Equipment
NCDDR	National Committee for DDR
NGO	Non-government Organization
PTSD	Post-Traumatic Stress Disorder
RUF	Revolutionary United Front
SLA	Sierra Leonean Army
UN	United Nations
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
WWII	World War Two

Introduction

War affects everyone, including children. Military planners often overlook the effects of war on children. Children, often traumatized after observing war, find reintegrating with society difficult. When planners do not realize the necessity of reintegrating children post-conflict, it extends the time and number of troops necessary for stability operations. In the long-term, the failure can compound, decreasing the stability of entire regions. Children are especially vulnerable to the effects of war, and the treatment of children in post-conflict environments should warrant special consideration by planners. US Army doctrine provides consolidation of gains as the manner through which the Army converts tactical and operational success into a sustainable environment.[1] Paramount to achieving sustainable peace and stability after military operations is mitigating drivers for further instability and violence in an area. Military forces utilize Disarmament, Demobilization, and Reintegration (DDR) operations to return combatants to civilian life while also removing drivers of future conflict.[2]

When combatants utilized child soldiers or large numbers of children suffered through traumatic events, military planners must develop deliberate plans for reintegrating them. Properly reintegrating children into society after conflict reduces the societal drivers of instability which potentially shortens the time necessary for stability operations. Developing DDR and stability plans after Large-Scale Combat Operations (LSCO) concludes does not provide sufficient time for properly addressing the unique challenges of child psychological and educational reintegration. Not addressing the challenges of childhood reintegration, especially in fragile or failing states, prolongs the time US forces conduct stability operations in a region and exposes the United States to further commitments of national blood and treasure.

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[1] US Department of the Army, *Field Manual (FM) 3-0, Operations*, (Washington, DC: Government Print Office, 2018), 1-16.

[2] US Department of the Army, *Army Doctrine Reference Publication 3-07, Stability* (Washington, DC: Government Print Office, 2013), 1-11.

There are culturally and historically relevant case studies which supply examples for reintegrating children traumatized by the Islamic State. Doctrine accurately states that successful DDR operations promote enduring stability while unsuccessful DDR operations likely results in return to violence.[3] Despite this, doctrine fails to address the needs of children, specifically those traumatized by conflict, when outlining DDR operations. Without addressing the needs of traumatized children, DDR operations will not fully remove the drivers of conflict and societal instability.

Literature Review and Methodology

Literature contributing to this project fell into four fields; psychology, historical studies and current news discussing the Islamic State, case studies of DDR operations in Sierra Leone and Nigeria, and finally Army doctrine. The first section of this project focused on psychological trauma and mental health disorders. This section provides a broad understanding of post-traumatic stress disorder and multi-generational trauma before focusing specifically on how these disorders affect children. Next, the section describes and defines the psychological traumas commonly developed when children live in conflict areas. Works examined in this section include Teresa Evans-Campbell's article "Historical Trauma in American Indian/Native Alaska Communities", Dan Bar-On's "Multigenerational Perspectives on Coping with the Holocaust Experience", Joy Osofsky's "Trajectories of Post-Traumatic Stress Disorder Symptoms Among Youth Exposed to Both Natural and Technological Disasters", Sarah Moskovitz's "Longitudinal Follow-Up of Child Survivors of the Holocaust", and Roney and Anan Srour's "Communal and Familial War-Related Stress Factors". These scholarly articles provided insight into psychological disorders associated with conflicts and ways to study the effects of these disorders.

The second section of this project focused on the rise and scope of control of the Islamic State (IS). The section utilizes books, think tank reports, scholarly articles, and government

[3] US Army, *ADRP 3-07, Stability*, 3-14.

reports to provide information on the roots of IS spawning from the Iraqi insurgency in 2003. Then, the section describes how IS became a key actor in the Syrian Civil War before ultimately seizing control in both Iraq and Syria. Next, it discusses the recruitment, education, and treatment of children inside of territory controlled by IS. The section develops the baseline understanding of what issues operational planners likely will address when developing plans for reintegrating children radicalized by IS. Works contributing to this section include Michael Weiss and Hassan Hassan's *ISIS: Inside the Army of Terror* which provided background information on the origins and expansion of the IS. Joana Cook and Gina Vale's *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, Assad Almohammad's *ISIS Child Soldiers in Syria*, and John Horgan's "From Cubs to Lions: A Six Stage Model of Child Socialization into the Islamic State" further illuminates the recruitment, socialization and treatment of children in IS. These documents supplied understanding of many of the issues caused by IS but could not give an accurate estimate of the scope of children living under IS control.

The third section analyzes two case studies of youth DDR operations. The analysis utilized scholarly articles and a USAID report. The section provides examples of successful and unsuccessful practices and examines problems likely seen in future DDR operations. The Sierra Leonean case study supplies an example of a well-integrated, comprehensive approach to youth DDR operations. The Niger Delta case study provides an example of youth DDR operations limited by a lack of community support and partner involvement. The case study provides awareness of planning considerations which increase the likelihood of successful youth reintegration. Works contributing to this section include Susan Shelper's "The Rites of Child: Global Discourse of Youth and Reintegrating Child Soldiers in Sierra Leone", John Williamson's "The disarmament, demobilization and reintegration of child soldiers", "social and psychological transformation in Sierra Leone" and the USAID's *Reintegration of Child Soldiers in Sierra Leone.* These works highlighted the successful DDR activities in Sierra Leone and included valuable lessons learned. Hussain Oyewo's "Nigeria: The challenges of Reintegrating Niger Delta

Militants", Susan Shepler's *Analysis of the Situation of Children Affected by Armed Conflict in the Niger Delta and Northern Region of Nigeria*, and Sharkdam Wapmuk's "The Amnesty Programme and the Challenges of Ending Youth Militancy in Nigeria's Niger Delta" which supplied understanding of DDR operations which achieved limited success.

The final section provides recommendations for operational planners when developing future youth DDR operations. The section incorporates current US Army doctrine and US Army force management information into a campaign planning framework developed by a School of Advanced Military Studies instructor. Additionally, the section ties in ideas from the previous sections to help stress the importance of youth DDR operations in establishing lasting stability. Works contributing to this section were *Army Doctrine Reference Publication 3-07, Stability* and *Army Doctrine Publication 1-02, Terms and Military Symbols* which gave information on current stability and DDR doctrine. Also included in this section was information derived from US Army Force Management System which supplied information on the current structure of Army Civil Affairs (CA) and psychological forces. These documents provided the basic structure of current units and Army doctrine but did not describe the organizational restrictions or caveats of utilizing these forces.

Definition of Terms

Understanding the most common psychological disorders associated with exposure to childhood trauma provides readers with a better grasp of the importance of this topic. The American Psychiatric Association (APA) characterizes PTSD as a condition which develops after an individual's exposure to a traumatic stressor. Traumatic stressors range from direct experiences of actual or perceived threats of death, serious bodily harm, or one's physical integrity or witnessing another person suffer a traumatic stressor. Also learning about a close friend or loved one's suffering a traumatic stressor can result in the development of PTSD in an

individual. Survivors of rape, sexual assault, military combat veterans, and victims of ethnically or politically motivated genocide are the groups with the highest rates of PTSD.[4]

The APA delineates PTSD into three categories. Acute PTSD is when PTSD symptoms appear in an individual within three months of exposure to a traumatic stressor. Chronic PTSD is when symptoms last for three months or longer. Delayed-onset PTSD is when symptoms fail to appear for at least six months after a traumatic event.[5] Individuals suffering from PTSD display many behaviors, but these behaviors predominantly fall into four categories. The APA identifies the four symptoms of PTSD as intrusion, detachment, avoidance, and hyperarousal. Intrusion consists of dreams or thoughts which trigger memories of an individual's traumatic stressor. Detachment primarily occurs when an individual removes themselves from interactions with other people.[6] Avoidance occurs when an individual changes their behavior or thought process to prevent an emotional reaction to a traumatic stressor. Finally, hyperarousal is when an individual becomes extremely irritable, has constant feelings of being on guard, engages in destructive behaviors, or has difficulty sleeping.[7]

Children and adults react to traumatic events differently. Researchers conducted studies on how children react after living through disasters and armed conflicts. Following the devastation of Hurricane Katrina, psychological researchers developed a model of four trajectories children commonly follow after exposure to a disaster. The four trajectories are; resistance, delayed distress, recovery, and chronicity. Resistance is when children display minor symptoms and limited impairments. When minor symptoms accumulate and worsen over an

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[4] American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed Text Revision. (Washington, DC: American Psychiatric Association, 2000), 463, 466.

[5] Ibid., 465.

[6] Teresa Evans-Campbell, "Historical Trauma in American Indian/Native Alaska Communities: A Multilevel Framework for Exploring Impacts on Individuals, Families, and Communities," *Journal of Interpersonal Violence* 23, no. 3 (March 2008): 318, accessed August 13, 2018, http://journals.sagepub.com/doi/abs/10.1177/0886260507312290.

[7] Ibid., 318.

extended period psychologist classify this as delayed distress. Recovery begins once the child's symptoms increase but then also decrease gradually. The final trajectory is that of chronicity which occurs when the child's increased symptoms and impairments develop into long-lasting dysfunctions.[8]

Many studies use the terms historical trauma and multi-generational trauma interchangeably, moving forward this paper will use the term historical trauma. Historical trauma is a collective trauma inflicted on a group of people who share a specific group identity or affiliation. Historical trauma can manifest in individuals, triggering cascading effects on the stability and strength of affected families and communities. Many psychologists find patterns of historical trauma in Holocaust survivors and their families, Native Americans living on or near reservations, and in communities of Native Alaskans. The collective complex traumas which these groups experienced creates changes in the behaviors and lives of the members of the community. [9]

One critical aspect of historical trauma is that people outside of the group, often with purposeful and destructive intent, inflicted the traumatic events onto the affected group. While the root causes of historical trauma are far removed from the current generation, the passage of time often does not diminish the effects. While many psychologists look at historical trauma only at the individual level, new studies are investigating the effects historical trauma can have on families and larger communities. At the individual level many victims display PTSD or grief like symptoms. At the family and community level, the manifestations are often lower levels of trust and communication, the loss of traditions, and higher rates of substance abuse and medical issues.

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[8] Joy D. Osofsky, et al., "Trajectories of Post-Traumatic Stress Disorder Symptoms Among Youth Exposed to Both Natural and Technological Disasters," *Journal of Child Psychology and Psychiatry* 56, no. 12 (April 2015): 1348, accessed August 13, 2018, https://doi:10.1111/jcpp.12420.

[9] Evans-Campbell, "Historical Trauma in American Indian/Native Alaska Communities: A Multilevel Framework for Exploring Impacts on Individuals, Families, and Communities," 320, 321.

The traumatic events inflicted onto a group generate elevated levels of collective distress and mourning inside of the group's contemporary community. Contemporary Native American and Native Alaskan communities report significantly higher than average rates of child abuse, interpersonal violence, and substance abuse which many researchers attribute to the long-lasting effects of historical trauma.[10]

Where a person lives and how they are raised shapes and influences the occurrences of major events in that person's life. A person burdened by knowing the group they associate with suffered traumatic events in the past suffers from historical loss. This burden can result in an individual being less likely to accomplish life events on the same timeline and trajectory as individuals in unaffected groups.[11] As with historical trauma, historical loss is heavily impacted by the knowledge that an external group of people worked to remove a victim's cultural identity from existence. The displayed symptoms of historical loss are often similar, or identical, to symptoms of depression, but historical loss is a separate construct from depression. Historical loss depression symptoms are directly tied to a group's suffering through ethnic cleansing or genocide.[12]

When one generation falls victim to a large-scale or widespread traumatic event like genocide or ethnic cleansing, the groups' inability to cope with this event becomes the underlying cause of trauma passing to subsequent generations.[13] Traumatic experiences can destroy the social system of care, protection, and meaning which typically surround a person. Damage done

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[10] Evans-Campbell, "Historical Trauma in American Indian/Native Alaska Communities: A Multilevel Framework for Exploring Impacts on Individuals, Families, and Communities," 321, 322.

[11] Les B. Whitbeck, et al., "Depressed Affect and Historical Loss Among North American Indigenous Adolescents," *American Indian and Alaska Native Mental Health Research* 16, no. 3 (December 2009): 18, accessed August 16, 2018, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3235726.

[12] Ibid., 18.

[13] Dan Bar-On, et al., "Multigenerational Perspectives on Coping with the Holocaust Experience: An Attachment Perspective for Understanding the Development Sequelae of Trauma across Generations," *International Journal of Behavioral Development* 22, no. 2 (June 1998): 319, accessed August 25, 2018, https://journals.sagepub.com/doi/10.1080/016502598384397.

to this social system can block or inhibit a person's mourning process. A study of Holocaust survivors and their children found that survivors with unresolved traumatic experiences were more likely to pass their trauma on to their children. Adult survivors who hold onto traumatic experiences from their childhood are more prone to develop weak attachment relationships with their children. Attachment theory is the theory that parents, or other adult caretakers, provide security for their children through the development of attachment relationships. If this attachment relationship is weak or missing, children feel less secure and their development of trust in other people and their community is retarded.[14]

There are two dimensions of trauma which researchers frequently mention in their studies of PTSD and historical trauma. Those two common dimensions are intrusion and avoidance. Intrusion is when distressing thoughts, feelings, or nightmares disrupt the usually mental workings of an individual. Avoidance is when an individual develops mental processes and behaviors to avoid thinking about traumatic experiences. Avoidance can also develop into mental numbing.[15]

Childhood Trauma in a Conflict Zone

Childhood is a time when children develop their psychological and moral framework by interacting with their surroundings. Interactions between children and their family, friends, and community have long-lasting effects on a child's behavior as an adult. Disruption of the psychological and moral framework development process can result in life long effects for an individual.

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[14] Dan Bar-On, et al., "Multigenerational Perspectives on Coping with the Holocaust Experience: An Attachment Perspective for Understanding the Development Sequelae of Trauma across Generations," 319-20.

[15] Atle Dyregrov, Rolf Gjestad, and Magne Raundalen, "Children Exposed to Warfare: A Longitudinal Study," *Journal of Traumatic Stress* 15, no. 1 (February 2002): 60, accessed August 16, 2018, https://pdfs.semanticschol.org/cd9a/2c294a82e96d6f391e014e9c29ba5b9c23ef.pdf.

Conflict zones present difficult circumstances for their inhabitants. Some of the dangers of living in a conflict area are obvious, but there are other less considered risks. These risks include a lack of basic services, limited access to clean food and water, and a lowered state of public security. The risks often result in negative psychological effects for adults, but they have even more of an effect on children forced to live in a conflict zone. Children are more vulnerable because they are directly affected by the violence around them and also indirectly affected through their community's reactions to the violence.[16]

Reduced security in many conflict zones increase the chances of victimization of citizens by criminal elements or other nefarious actors. Reduced security provides opportunity for children to become victims of physical or sexual abuse. Child victims of physical or sexual abuse are more likely to develop PTSD or other psychological disorders as they mature. Childhood abuse survivors are prone to developing insecure attachments with adults. Insecure attachments prevent the child from developing meaningful and lasting relationships with other people, often continuing into adulthood. In addition to developing weak attachments, child physical or sexual abuse victims are likely to develop dissociation patterns which prevent the survivor from fully processing the traumatic event. Failure to fully process a traumatic event inhibits a person's ability to move beyond the event.[17] Common reactions of children living inside or near a warzone include developing PTSD, anxiety, depression, psychological disturbances, specific fears,

[16] Roney Srour and Anan Srour, "Communal and Familial War-Related Stress Factors: The Case of the Palestinian Child," *Journal of Loss and Trauma* 11, no. 4 (September 2006): 298, accessed September 5, 2018, https://www.tandfonline.com/doi/abs/10.1080/15325020600662757.

[17] James Twaite and Ofelia Rodriguez-Sredniki, "Childhood Sexual and Physical Abuse and Adult Vulnerability to PTSD: The Mediating Effects of Attachment and Dissociation," *Journal of Child Sexual Abuse* 13, no. 1 (January 2004): 18, accessed September 7, 2018, https://www.tandfonline.com/doi/abs/10.1300/J070v13n01_02.

behavioral issues, changes in academic performance, or developing a more pessimistic outlook on the future.[18]

The hazards associated with life inside conflict zones present psychological and physical risks to families and children. Families living inside conflict zones face exposure to multiple stressors like loss of employment, death or injury of family or friends, and disrupted access to education or other public services. These stressors contribute to a general sense of community instability, which hinder families in their development of long-term plans for their future. Uncertainty in the future places family members under additional emotional strain.[19] Increased emotional strain can eventually manifest into family violence or the development of individual psychological disorders. Even after the cessation of hostilities, remaining in an area ravished by conflict can extend the duration of trauma spawned from that conflict. Obvious signs of conflict such as bombed-out buildings, rubble, or craters present painful reminders of traumatic experiences and thus prevent survivors from effectively coping and eventually recovering.[20]

Early in World War Two (WWII) Anna Freud and her partner Dorothy Burlingham conducted psychological observations of children orphaned or forced to relocate by WWII. Freud conducted the observation to develop a better understanding of the psychological effects war had on children.[21] In 1951, Freud and Sophie Dann published a monograph based on these observations titled "*An Experiment in Group Upbringing*". Freud's monograph focused on

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[18] Gordana Kuterovac-Jagodic, "Posttraumatic Stress Symptoms in Croatian Children Exposed to War: A Prospective Study," *Journal of Clinical Psychology* 59, no. 1 (2003): 9-10, accessed August 18, 2018, https://onlinelibrary.wiley.com/doi/abs/10.1002/jclp.10114.

[19] Srour and Srour, "Communal and Familial War-Related Stress Factors: The Case of the Palestinian Child," 294.

[20] Patrick Smith et el., "War Exposure Among Children from Bosnia-Hercegovina: Psychological Adjustment in a Community Sample," *Journal of Traumatic Stress* 15, no. 2 (April 2002): 153, accessed September 2, 2018, https://doi.org/10.1023/A:1014812209051.

[21] Nick Midgley, "Anna Freud: The Hampstead War Nurseries and the role of the direct observation of children for psychoanalysis," *The International Journal of Psychoanalysis* 88, no. 4 (2007): 941-42, accessed December 20, 2018, https://doi.org/10.1516/V28R-J334-6182-524H.

publishing ideas developed through the observations Freud and her coworkers made in their group house during WWII. "*An Experiment in Group Upbringing*" the idea that even infants can suffer long-lasting psychological effects spawned from early childhood traumatic events. Freud and Dann studied orphans who had spent two of their first three years alive inside of the Terezin concentration camp to gain evidence of their hypothesis. Freud observed these children in a group orphanage in England.[22]

Freud found a survivor of Terezin who served as a caretaker for the children to better understand the lifestyle these children experienced inside the concentration camp. Freud discovered that the caretakers inside the concentration camp where randomly selected women with no ties to the children. The women tried to provide as much care for the children as possible, but their primary focus was on keeping the children fed, healthy, and free of vermin. The caretakers focused their efforts on providing a basic level of nutrition and health for the children as opposed to playing with the children. Following their release from Terezin, the children moved among group homes and orphanages in England before placement into adoptive families.[23]

Freud found that all the children in her study group suffered from extensive psychological issues due to their lack of attachment to a consistent adult caretaker. To cope with their lack of adult attachment, the children developed their primary attachment relationship with their peers. When separated from their peer group the children suffered from anxiety, hypersensitivity, aggression issues, and exhibited severe emotional disturbances. After adoption, the children continued displaying attachment issues with their new family. Many of the children also expressed remorse in not knowing about their past or remembering their biological parents. These attachment issues and remorse contributed to the children not establishing secure

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[22] Sarah Moskovitz, "Longitudinal Follow-Up of Child Survivors of the Holocaust," *Journal of the American Academy of Child & Adolescent Psychiatry* 24, no.4 (July 1985): 401-403, accessed December 20, 2018, https://www.jaacap.org/article/S0002-7138(09)60557-4/pdf.

[23] Moskovitz, "Longitudinal Follow-Up of Child Survivors of the Holocaust," 402-03.

connections with their adoptive parents. One of the children, was so emotionally distraught when separated from his child peer group, he failed two adoption placements and eventually spent the remainder of his childhood in a group orphanage.[24]

Nearly three decades after Freud and Dann's study ended, another psychologist, Sarah Moskovitz, conducted follow-up interviews with four of the children from the Freud Study. All the children eventually adapted to life outside of their orphanage, but it did take a couple of the children longer than the others to adapt.[25] The children struggled throughout their lives as they hid their past from their natural and adoptive families. Hiding their past inhibited the survivor's ability to cope with their childhood trauma properly. Three of the children went on to have children of their own. All of them described the difficulties experienced in raising their children because of an inability to be completely truthful about their upbringing.

Another issue the survivors endured was having to present themselves yearly to a German government official to receive their pension. The yearly interaction served as a reminder to the survivors of their time under the control of the German government. For at least one of the survivors the interaction contributed to a psychological breakdown. Relying on the very government the survivors attributed so much of their loss and trauma to was demeaning and likely delayed the recovery of the survivors.[26]

The Rise and Fall of the Islamic State

The rise of the Islamic State (IS) is causing children in large swaths of Iraq and Syria to endure the psychological traumas previously discussed. The IS government emplaced and enforced brutal adherence to their radical brand of Sharia law in the territory they controlled and used their control to target minority groups for systematic enslavement and extermination. IS

[24] Moskovitz, "Longitudinal Follow-Up of Child Survivors of the Holocaust", 403.

[25] Ibid., 406.

[26] Ibid., 405.

began as a small group of insurgents but grew into one of the most feared terrorist organizations in the world.

The Islamic State spawned from the Sunni insurgency created by the United States' 2003 invasion of Iraq. IS originally operated in Iraq under the name of Monotheism and Jihad with Abu Musab al-Zarqawi as the leader. Zarqawi, a Jordanian militant, sought to incite a civil war between Shia and Sunni Muslims in Iraq in a perverse plan to incite Shia attacks on Sunnis. Zarqawi hoped the Sunnis in Iraq, suffering through increased attacks and violence at the hands of Shias, would join his cause for protection or out of spite. Zarqawi targeted one of Iraqi's most prominent Shia clerics with a car bomb attack outside the Imam Ali Mosque in Najaf to motivate Shia attacks.[27]

In October 2004 Zarqawi pledged his allegiance to Osama Bin Laden and the group rebranded as Al-Qaeda in Iraq (AQI). AQI gained support in Iraq and the larger Middle East through publicizing their attacks and violence. US efforts dismantled AQI cells operating across Iraq and many military experts exalting the defeat of AQI in June 2010. During this period, AQI leadership renamed the organization the Islamic State of Iraq (ISI). Following the death of Zarqawi, an Islamic scholar turned jihadist named Ibrahim Awwad al-Badari stepped forward, assumed the name Abu Bakr Al-Baghdadi, and jumped into the top leadership position for ISI.[28]

From the beginning of the US invasion of Iraq in 2003, insurgents and jihadist found shelter and a friendly government in Syria. As ISI faced increasing pressure from US and Iraqi targeting, the organization slowly pulled senior leaders across the Syrian border to seek shelter and rebuild the organization. Because of their presence in Syria ISI developed a foothold in the resistance to the al-Assad regime once the Syrian Civil War started. ISI quickly became one of the most lethal fighting forces in the Syrian Civil War.

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[27] Michael Weiss and Hassan Hassan, *ISIS: Inside the Army of Terror* (New York: Regan Arts, 2015), 28, 30, 31.

[28] Ibid., 66, 112.

As IS grew in power and prestige in Syria, al-Baghdadi launched his forces into Iraq in an offensive that would make IS internationally known and feared. In June 2014, IS overwhelmed Iraqi security forces and captured Mosul. During the 2014 summer offensive, IS captured huge tracts of territory in northern Iraq and committed numerous atrocities against captured Iraqi security forces personnel and minority groups. In August of 2014, IS forces trapped thousands of Iraqi Yazidi citizens on top of the mountains in the Sinjar region of Iraq. IS killed countless Yazidis people through starvation and bombardment.[29]

After the IS offensive in Iraq, their reputation as the preeminent jihadist organization caused Islamic militants around the world to rally to the organization. At its peak, IS controlled close to 100,000 kilometers of territory stretching from the Syrian-Turkish border in the west to the outskirts of Baghdad in the east. Estimates are that IS controlled over ten million people as well as large oilfields, refineries, and the riches captured from banks across Northern Iraq.[30]

As IS spread across Iraq and Syria, evidence of their atrocities prompted the international community to combat this emerging threat. In August 2014, President Obama announced that US military forces would conduct strikes in Iraq and Syria to support the Iraqi government's fight against IS.[31] The fight to regain territory from IS was long and bloody and often as destructive and dangerous for Iraqi citizens as the initial IS offensive. In 2017 the international coalition and local partners successfully removed IS from their strongpoints in Mosul and the self-proclaimed capital of the Islamic State in Raqqah, Syria.[32] The successful removal of IS by the international

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[29] Weiss and Hassan, *ISIS: Inside the Army of Terror*, 226, 227, 229.

[30] Joana Cook and Gina Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State* (London: International Centre for the Study of Radicalisation, 2018) 7, accessed August 25, 2018, https://icsr.info/wp-content/uploads/2018/07/ICSR-Report-From-Daesh-to-%E2%80%98Diaspora%E2%80%99-Tracing-the-Women-and-Minors-of-Islamic-State.pdf.

[31] Cameron Glenn, "Timeline: US Policy on ISIS," The Wilson Center, April 27, 2016, accessed January 18, 2019, https://www.wilsoncenter.org/article/timeline-us-policy-isis.

[32] Christopher M. Blanchard and Carla E. Humud, *The Islamic State and U.S. Policy*, Congressional Research Service, 4, accessed December 20, 2019, https://fas.org/sgp/crs/mideast/R43612.pdf.

coalition and Iraqi security forces prompted an Iraqi government announcement declaring victory over IS in December 2017.[33] While the removal of IS from Iraqi territory is mostly complete, many issues remain for the fragile Iraqi government to address. The fighting in Northern and Western Iraq displaced over five million people from their homes. By July 2017, over two million of these displaced Iraqis returned to their homes, but more than three million people remain outside their communities.[34]

Children of the Islamic State

One of the most troubling aspects lingering in Iraq and Syria was the Islamic State's treatment of children. The radical views held by many IS members and the strict interpretation of sharia law enforced by the organization created a harsh environment for children. IS, as an organization, spent significant time and effort recruiting and enlisting children into its ranks. Recruitment and enlisting children were cross-governmental tasks with multiple government directorates cooperating in these efforts. Attracting children into IS involved coordinated efforts by the directorates of enlistment, education, security, media, and mosques. By indoctrinating and weaponizing children, IS hoped to develop a multigenerational force which would ensure the survival of the organization.[35]

IS primarily used schools and mosques to recruit and indoctrinate children. IS focused much of their recruitment efforts in mosques because of the central role mosques play in villages in the Middle East.[36] In villages and mosques, IS recruiters organized Quran memorization contests and other public religious celebrations which were used to develop links to children

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[33] Christopher M. Blanchard and Carla E. Humud, *The Islamic State and U.S. Policy*, 7.

[34] Shelly Culbertson and Linda Robinson, *Making Victory Count After Defeating ISIS*: *Stabilization Challenges in Mosul and Beyond* (Santa Monica, CA: RAND Corporation, 2017), 6.

[35] Asaad Almohammad, *ISIS Child Soldiers in Syria: The Structural and Predatory Recruitment, Enlistment, Pre-Training Indoctrination, Training and Deployment* (The Hague: International Centre for Counter-Terrorism, 2018) 2, 16, 17

[36] Ibid., 7.

inside of the community.[37] In addition to mosques, IS focused their recruitment and indoctrination efforts on local schools.

In 2016, IS claimed they had educated over one-hundred thousand children in thirteen hundred schools.[38] Once IS established control over an area's schools, they broke students up into four groups. The four groups were; local children, Middle Eastern and North African children, children of foreign fighters, and orphaned children. Children of foreign fighters received the most intense and best educations, often receiving education on how best to return and blend back into their native home. The education provided to orphaned children often focused on the use of suicide vests and emplacing IEDs. IS taught many of the orphans they would be reunited with their families if they conducted a suicide mission.[39] To incentivize the placement of children into their schools, IS provided financial compensation to parents for each child enrolled. Similar to running of schools, IS gained control of orphanages in Syria and Iraq as another recruiting tactic. Also, because of the loss of jobs and economic uncertainty in large swaths of Iraq and Syria, some children joined out of necessity to help support their families.[40]

Regardless of the reasons why children ended up in IS, once under IS control, the children were subject to intensive and harsh training. IS trainers placed physical and emotional stress on the children throughout their time in schools and camps.[41] Many children received beatings by their instructors or their peers for the slightest offenses and starvation was commonly used to ensure compliance. Children also faced threats of arrest or death of a family member if

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[37] John Horgan et al., "From Cubs to Lions: A Six Stage Model of Child Socialization into the Islamic State," *Studies in Conflict & Terrorism* 40, no.7 (August 2016): 653, accessed August 26, 2018, https://doi.org/10.1080/1057610X.2016.1221252.

[38] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 29.

[39] Asaad Almohammad, *ISIS Child Soldiers in Syria: The Structural and Predatory Recruitment, Enlistment, Pre-Training Indoctrination, Training and Deployment*, 15, 16.

[40] John Horgan et al., "From Cubs to Lions: A Six Stage Model of Child Socialization into the Islamic State," 653.

[41] Ibid., 654.

the child refused to train or misbehaved.[42] Another form of emotional abuse IS inflicted on children was the forced viewing of beheadings, amputations, and stonings. One child described being forced to watch the crucifixion of a classmate.[43]

Training in the camps and schools focused on the use and maintenance of small arms weaponry, construction and emplacement of improvised explosive devices (IEDs), and small-unit tactics. Children who fell behind in their studies or misbehaved during training were off-ramped into training for suicide missions.[44] Following their training, IS routinely used children in weapons manufacturing, intelligence operations, development of propaganda, providing medical care to wounded soldiers, food preparation for fighting units, and as mobile blood banks for wounded soldiers.[45]

It is difficult to determine the exact number of children that lived under the control of IS. In a 2015 address to the United Nations (UN), Mohamed Ali Alhakim, the Permanent Representative of Iraq to the UN, estimated tens of thousands of children lived under the control of IS. Determining the number of children brought into IS territory by foreign fighter parents is slightly easier. Estimates are that just under five thousands children fall into this category. As of 2018, over eleven-hundred children traveled back to their home country after spending time living in Iraq and Syria with their parents.[46] While the number of children forced to live under IS remains unknown, the fact that they lived in an intense, chaotic, and dangerous war zone is

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[42] Asaad Almohammad, *ISIS Child Soldiers in Syria: The Structural and Predatory Recruitment, Enlistment, Pre-Training Indoctrination, Training and Deployment*, 19.

[43] John Horgan et al., "From Cubs to Lions: A Six Stage Model of Child Socialization into the Islamic State," 654.

[44] Asaad Almohammad, *ISIS Child Soldiers in Syria: The Structural and Predatory Recruitment, Enlistment, Pre-Training Indoctrination, Training and Deployment*, 21.

[45] John Horgan et al., "From Cubs to Lions: A Six Stage Model of Child Socialization into the Islamic State,", 655.

[46] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 3, 29.

undeniable. During his speech to the UN, Representative Alhakim reported that high numbers of children living under IS control were victims of physical violence, sexual assault, and often witnessed scenes of violence.[47] Almost all of the children watched fighting going on around them and witnessed the effects of airstrikes, artillery bombardment, and IEDs. A report published in December 2017 by the Violation Documentation Center reported seventeen thousand children killed over five years in Syria.[48]

While living under the control of IS was physically and emotionally difficult, new obstacles remain after the defeat of IS. As the Iraqi government reclaimed territory from IS, they captured and assumed responsibility for children left behind in the wake of the IS withdrawal. Many children born in IS-controlled territory do not have official documents proving their birth or identity. Without an official birth certificate, the Iraqi government does not view these children as legitimate citizens. The question of citizenship denies children access to medical care, education benefits, and social services which other Iraqi children receive.[49] As of July 2018, the Iraqi government held over 800 children whose parents were IS foreign fighters. Many of them were brought to Iraq by their parents and are now orphaned or have lost at least one parent. The majority of the children are with their mothers awaiting the Iraqi government's decisions on their fates. The Iraqi government would like to repatriate the women and children back to their home nations. Many of the women's native countries are hesitant to allow the women and children back as they could pose a security risk.[50]

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[47] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 3, 29.

[48] Debarati Guha-Sapir et al., "Patterns of civilian deaths due to war-related violence in Syria: a comparative analysis from the Violation Documentation Center dataset, 2011-16," *The Lancet Global Health* 6 no.1 (January 2018): e105, accessed January 8, 2019, https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(17)30469-2/fulltext.

[49] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 52.

[50] Iraq Urges Reparation of Children of ISIS Fighters," *The Defense Spot*, July 4, 2018, accessed August 26, 2018, https://thedefensepost.com/2018/07/04/iraq-urges-repatriation-foreign-isis-children/.

Another obstacle facing children in post-IS Iraq and Syria is the stigma associated with IS families and displaced families. Many children of former IS members and other displaced families end up living in segregated refugee camps.[51] Forcing the children and families into segregated refugee camps stigmatizes them and makes acceptance into the communities less likely. Forced isolation and stigmatization makes the reconciliation process more difficult and drives a wedge between the community and the refugees.

Unreliable information on the number of children affected by the war inhibits the development of a realistic estimate of how many likely suffered psychological trauma. In the United States, the rate of exposure to a traumatic event for children is between thirteen and forty-three percent. Out of this group of children, an even smaller percentage develop PTSD because of their exposure. Current national trends for PTSD in adolescent females is between three and five percent. Adolescent males have between a one and six percent chance of developing PTSD.[52] Conservative estimates of children living under IS control during their apex is between 10,000 and 100,000.[53] Rates of PTSD in child survivors of conflict and natural disasters are three to five times higher than control groups.[54] Using the conservative estimates of children living in IS territory and conservative estimates of PTSD rates in US children exposed to traumatic experiences it is possible to estimate that thousands of children in post-conflict Iraq and Syria now experience PTSD or other psychological disorders.

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[51] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 53.

[52] "How Common is PTDS in Children and Teens," US Department of Veterans Affairs, last modified September 24, 2018, accessed November 13, 2018, https://www.ptsd.va.gov/understand/common/common_children_teens.asp.

[53] Cook and Vale, *From Daesh to 'Diaspora' Tracing the Women and Minors of Islamic State*, 28, 29.

[54] William Yule et al., "The Long-term Psychological Effects of a Disaster Experienced in Adolescence: I: The Incidence and Course of PTSD," *Journal of Child Psychology and Psychiatry and Allied Disciplines* 41, no. 4 (May 2000): 507, accessed August 25, 2018, https://www.cambridge.org/core/journals/journal-of-child-psychology-and-psychiatry-and-allied-disciplines/article/longterm-psychological-effects-of-a-disaster-experienced-in-adolescence-i-the-incidence-and-course-of-ptsd/8B2387D766539C78C1F7C06D86C4D3A8.

Sierra Leone Case Study

Sierra Leone is a West African country located on the Atlantic coast and neighbored by Guinea and Liberia. The population of Sierra Leone is approximately six and a half million with multiple religions and tribal affiliations. The country is rich in natural resources, with an abundance of iron ore and diamonds. Despite being minerally rich, Sierra Leone remains an extremely impoverished nation with a per capita gross domestic product of roughly $1,600.[55]

Sierra Leone transitioned from a British colony to an independent country in 1961. Sierra Leone's transition to independence suffered from political unrest, economic uncertainty, military coups, and corruption.[56] In 1991, violence in Libera spilled across the border into Sierra Leone when a rebel group calling themselves the Revolutionary United Front (RUF), attacked villages in eastern Sierra Leone and forced children to join the group. In response to the RUF attacks, the Sierra Leonean Army (SLA) deployed to Eastern Sierra Leone. The SLA quickly resorted to terrorizing Sierra Leonean civilians and recruiting children into the army's ranks.[57] Civil war raged across the country for eleven years. UN peacekeepers deployed to Sierra Leone in November 1999 and began work to enforce peace compromise initiatives. UN enforcement and disarmament actions proved to be successful, and in January 2002 the civil war officially ended

[55] "Sierra Leone," *The World Factbook 2016-17*, Central Intelligence Agency, Last Modified February 11, 2019, accessed January 8, 2019, https://www.cia.gov/library/publications/the-world-factbook/geos/sl.html.

[56] Susan Shepler, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," *Journal of Human Rights* 4, no. 2 (2005): 197, accessed August 12, 2018, https://doi.org/10.1080/14754830590952143.

[57] Allison Bennett, "The reintegration of child ex-combatants in Sierra Leone with particular focus on the needs of females" (master's thesis, University of East London, 2002), 9, accessed January 8, 2019, https://studylib.net/doc/17964982/the-reintegration-of-child-ex-combatants-in-sierra-leone-....

with the signing of the Lome Peace Agreement.[58] During the fighting, an estimated seventy-five percent of the Sierra Leonean population became displaced at least once.[59]

Scope of Child Soldier Use in Sierra Leone

Using child soldiers was integral to the strategies of many of the fighting groups in the civil war.[60] A majority of fighting groups involved in the civil war utilized child soldiers at some point during the fighting. Estimates are that 5,000 children served in the ranks of militant groups during the civil war.[61]

The RUF utilized children extensively throughout their campaigns in Sierra Leone. Most child soldiers served in the RUF during the civil war. A common tactic for the RUF was to raid a village, collect all the children inside the village, and then force them to commit atrocities against their own families and village neighbors. This tactic was intended to stigmatize the children, both internally and externally, so that the children would be less likely to attempt escape and return to their village. The RUF also commonly supplied drugs to abducted children to lower their inhibitions about fighting or committing atrocities. In addition to forcing children to conduct atrocities against their own villages and families, the RUF also physically marked many abducted children by carving the group's initials into the children's skin. Mutilation served the purpose of terrorizing children in the group and deterring desertion by children.[62] From 1999 to 2004,

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[58] "Sierra Leone Profile-Timeline", BBC, Last Modified April 5, 2018, accessed January 8, 2019, https://www.bbc.com/news/world-africa-14094419.

[59] Shepler, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," 197.

[60] John Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," *Intervention* 4 no. 3 (November 2006): 186, accessed August 13, 2018, http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.600.1127&rep=rep1&type=pdf.

[61] Bennett, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," 10.

[62] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 186, 190.

USAID and UNICEF demobilized more than forty-eight thousand children in Sierra Leone.[63] While large numbers of children affected by the war went through demobilization, not all participated in the disarmament and reintegration phases of DDR.

DDR of Sierra Leonean Children

During the DDR process, the UN provided peacekeeping support, refugee mitigation, and food assistance while NGOs developed projects to improve the health, agriculture, education, and justice systems in Sierra Leone.[64] As part of the Lome Peace Agreement, the Sierra Leonean government established the National Committee for Disarmament, Demobilization, and Reintegration (NCDDR). The NCDDR established guidelines for the DDR process for children in Sierra Leone. While the NCDDR established clear intent for the DDR process, numerous agencies, across multiple provinces and levels of government conducted the actual execution of the process. Lack of consistency in execution led to mixed results of the DDR.[65]

As people came forward during the DDR process, one obstacle for the execution was determining who had been an actual combatant and who had not. The determination of combatant status was conducted differently by the varied organization conducting the DDR process.[66] Some demobilization sites implemented weapons turn-in or weapons skills testing as part of the determination process. Inclusion of weapons turn-in or skills testing removed many girls from the DDR process. Most girls abducted by both the RUF and SLA did not carry weapons and generally served in non-combatants roles or as bush wives for male fighters.[67]

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[63] John Williamson, *Reintegration of Child Soldiers in Sierra Leone*, US Agency for International Development, vii, accessed December 20, 2018, https://pdf.usaid.gov/pdf_docs/PDACH599.pdf.

[64] Shepler, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," 200.

[65] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 187.

[66] Ibid., 188.

[67] Williamson, *Reintegration of Child Soldiers in Sierra Leone,* 11,12.

Following demobilization and disarmament, the Sierra Leonian government physically separated children and adult combatants.[68] Children within close proximity of their families, returned to their families. Those not in contact with their families remained in UN interim care centers (ICC).[69] The ICCs served as the primary facilitator for child reintegration and family relocation services in Sierra Leone. Children could spend up to six weeks in an ICC before returning to their family or placement into foster care. Daily activities inside the ICCs focused on returning children to normal life, with an emphasis on chores, classes, artwork, and signing. Throughout the DDR process, UNICEF processed over 5,000 child soldiers through their ICCs. UNICEF tracked that almost ninety-eight percent of child soldiers placed into UN reintegration programs reunited with a primary relative. Unlike adult combatants, children in reintegration programs did not receive money as part of the DDR process. Instead, children in the DDR process received family location services and either job skill training or educational benefits.[70]

One of the most important aspects of the reintegration process was the family mediation and community sensitization conducted in communities before the reintroduction of former child soldiers. Returning children to their families is probably the most important part of the healing process, but many families were originally hesitant to welcome former child soldiers back after the conflict. Because of the RUF's use of child soldiers against their own families and villages, family mediation and community sensitization were essential before reintegrating former RUF members into a community.[71] Community sensitization focused on educating communities on

[68] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 188.

[69] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 188.

[70] Ibid., 185, 188, 189.

[71] Ibid., 194, 195.

how militant groups forced children into service, drugged them, and regularly abused them.[72] These efforts also helped communities see the link between the future of Sierra Leone and the acceptance and forgiveness of the former child soldiers.[73] Many communities also conducted traditional cleansing and healing ceremonies as part of their community sensitization programs.[74]

Reestablishing educational systems for former child soldiers was another integral part of the DDR plan in Sierra Leone. In collaboration with UNICEF, Sierra Leonean officials developed three educational incentive programs to help reestablish the educational system for war-affected children. The Rapid Response Education Project consisted of six months of educational support to prepare children for reintroduction to school. UNICEF and multiple NGOs created the Community Educational Investment Programs to provide incentives for community schools to welcome war-affected children back into school. The program allowed local school officials to select from three educational support kits for every demobilized child they brought into their school. The options for support kits were either learning materials (exercise books, pens, and pencils for students), teaching materials (chalk, blackboard markers, pens for teachers), or sports and recreational equipment. The final educational incentive was the Complementary Rapid Response for Primary Schools Program. The rapid response program provided catch-up classes for children with limited educational backgrounds to help level them with their age group peers. Children older than fifteen could opt-out of educational training and instead receive job skill training. The job skill training placed the children into apprenticeship programs with local

[72] Shepler, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," 203.

[73] Shepler, "The Rites of the Child: Global Discourses of Youth and Reintegrating Child Soldiers in Sierra Leone," 203.

[74] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 196.

tradesmen.[75] This apprenticeship system provided older children with a path towards an economically stable future.

Assessment of DDR in Sierra Leone

Sierra Leone remains a financially weak nation which struggles with human rights issues, but no large-scale violence has occurred since the end of the civil war. Post-civil war recovery in Sierra Leone progressed slowly for almost a decade before a large-scale breakout of Ebola in 2014.[76] Since their civil war, Sierra Leone has held presidential and parliamentary elections, and in 2007 the country started war crime trials to hold accountable those accused of crimes against humanity committed during the civil war.[77]

Three major problems from the demobilization and disarmament phases of DDR are apparent. A lack of national infrastructure and the continuous rotation of UN peacekeepers limited the demobilization process in Sierra Leone. The limited number of paved roads and supporting infrastructure inhibited the movement to and creation of demobilization sites. Another problem identified was that despite clear guidance to the contrary, some peacekeepers turned away children who lacked weapons or weapons skills.[78] Exclusion of children without weapons from the DDR process led to one of the biggest problems for the DDR process. Many girls and young women affected by the war were not included in the DDR process because they did not possess weapons or weapon skills. Failure to include large numbers of girls in the DDR process denied needed assistance to a large population of children.[79]

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[75] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 196, 197.

[76] Herbert M-cLeod and Brian Ganson, *The Underlying Causes of Fragility and Instability in Sierra Leone* (Oxford: International Growth Centre, 2018) 25, accessed January 6, 2019, https://www.theigc.org/wp-content/uploads/2018/04/Sierra-Leone-Report-v2.pdf.

[77] "Sierra Leone Profile-Timeline," BBC, Last Modified April 5, 2018, accessed January 8, 2019, https://www.bbc.com/news/world-africa-14094419.

[78] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 188.

[79] Ibid., 200.

Three additional problems stand out from the reintegration phase of the DDR process. The first problem found during reintegration was that the ICC only held children for six weeks while locating their family. The ICC attributed fears of institutionalizing the children to the care and amenities of the ICC as the reason for the short time allotted for ICC residency. This short ICC residency period likely shuffled many children out before being fully prepared for reintegration. Another problem found was the limited integration of western therapy practices into the DDR process. The belief behind limiting western therapy practices was that some aid workers thought it was unnecessary and inappropriate to include western therapies into the DDR process. The decision to exclude western therapy likely prevented many children from fully addressing the traumatic experiences from serving in the civil war. The final problem identified in the reintegration process was the failure to conduct market research on job availability and a lack of job finding support for older children enrolled in the job skills training program. Failure to understand job availability limited the success of the job skills training program as some children finished their apprenticeship and had no way to find employment.[80]

Nigeria Case Study

Nigeria is a West African country located north of the Gulf of Guinea, sharing borders with Benin to the west, and Cameroon and Chad to the east. Nigeria is the most populous country in Africa with a population of over two-hundred million people with multiple religions and tribal affiliations. The country is rich in oil and coal but lacks modern national infrastructure. While Nigeria maintains the largest economy in Sub-Saharan Africa, the wealth inside the country is not

[80] Williamson, "The disarmament, demobilization and reintegration of child soldiers: social and psychological transformation in Sierra Leone," 188, 189, 198.

equally distributed. In 2017, Nigeria ranked twenty-fourth globally in national GDP, but the per capita GDP ranked only one hundred and sixty-sixth.[81]

In 1966, Isaac Adaka Boro, a former police officer, recruited and armed disenfranchised locals to attack foreign oil companies developing oil fields in the region triggering unrest in the Niger Delta.[82] The disturbance lasted less than two weeks before the military quelled the violence. In the 1990s, locals peacefully protested against foreign oil companies in the region. The local's complaints centered on foreign oil companies' exploiting native lands and waterways without sharing revenue generated by the oil fields. Even though the protests remained peaceful, the government found, arrested, and executed the elders leading the movement. In 2004, militant groups launched new attacks against foreign oil infrastructure, thereby triggering a resurgence in violence in the region. The main driver of conflict in 2004 was the youth's anger over high levels of unemployment, environmental damage, and lack of development in the region. In an attempt to curtail militant attacks in the Niger River Delta, Nigeria's president, Umar Masa Yar' Adua, offered amnesty to anyone who directly, or indirectly, took part in the insurgency. President Yar' Adua offered amnesty periods in 2004 and 2009. In 2009 the amnesty period lasted six months. In addition to the amnesty period offered, the Nigerian government also developed a limited reintegration program for the militants.[83]

Child Soldiers in the Niger River Delta

Determining an accurate estimate of children involved in the fighting in the Niger River Delta proved extremely difficult. The Nigerian government did not track children according to

[81] "Nigeria," *The World Factbook 2016-17*, Central Intelligence Agency, Last Modified February 11, 2019, accessed January 8, 2019, https://www.cia.gov/library/publications/the-world-factbook/geos/ni.html.

[82] Hussain T. Oyewo, "Nigeria: The Challenges of Reintegrating Niger Delta Militants," *Conflict Studies Quarterly* 17 (October 2016): 63, accessed January 6, 2019, http://www.csq.ro/wp-content/uploads/Hussain-Taofik-OYEWO.pdf.

[83] Ibid., 64.

their age. Instead, Nigerian culture associates the advancement from childhood to adult based on the achievement of economic independence for boys and childbirth for girls.[84] As such, the Nigerian government methods for tracking children hinders an accurate estimation of children involved in the conflict. Despite this, based on the Nigerian government's reintegration in 2004, and again in 2009, the current estimate of children involved in the violence is between two and ten thousand.

DDR in Nigeria

Unlike many of the DDR programs in Africa, the Nigerian government fully funded its reintegration programs.[85] The exclusion of foreign organizations hindered the accurate collection of data on the scope and scale of the reintegration process. To facilitate the DDR process and amnesty program, the Nigerian government established multiple sites inside the Niger River Delta where militants could surrender weapons and take a pledge of amnesty. During the 2009 amnesty period, the Nigerian government reported over 20,000 militants accepted amnesty and surrendered thousands of weapons.[86] Adding to the difficulty of counting children involved in the fighting, the Nigerian government only recorded participants in the amnesty program by sex and not by age.

As with the reintegration program in Sierra Leone, the Nigerian government offered job training and education to former militants. The Nigerian government established four camps in the Niger River Delta to execute the rehabilitation program. Each camp's capacity was 3,000 people which limited the number of militants undergoing rehabilitation at any time to 12,000.

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[84] Susan Shepler, *Analysis of the Situation of Children Affected by Armed Conflict in the Niger Delta and Northern Region of Nigeria* (Washington, DC: Search for Common Ground, 2012) 10, 12, accessed January 7, 2019, https://www.sfcg.org/wp-content/uploads/2014/07/NGR_EV_Jul12_AnalysisOfTheSituation.pdf.

[85] Oyewo, "Nigeria: The challenges of Reintegrating Niger Delta Militants," 63

[86] Sharkdam Wapmuk, "The Amnesty Programme and the Challenges of Ending Youth Militancy in Nigeria's Niger Delta" *Insight on Africa* 4, no.2 (July 2012): 161, accessed January 9, 2019, https://doi.org/10.1177/0975087814411154.

Limited space resulted in execution of training in waves. The skills training offered at the camps focused both on job skills in the oil industry and advanced technical training abroad. During the 2004 amnesty period, the Nigerian government claims to have placed over 3,000 former militant youths into technical education programs. Another aspect of the amnesty program designed to allure militants was cash payments offered by the government. Upon enrolling in the rehabilitation program, former militants received a monthly stipend and feeding allowance from the government.[87] The Nigerian government levied fees against foreign oil companies operating in the Niger River Delta to offset costs of the rehabilitation programs. The Nigerian government earmarked the money raised from these fees to fund economic initiatives in the Niger River Delta region.[88]

Unlike in Sierra Leone, the DDR process did not include any traditional educational programs to help children return to school. The educational programs focused on developing job skills rather than general education. Another difference in the DDR process in Nigeria was a lack of traditional healing ceremonies or community sensitization. While most militant groups in the Niger River Delta focused their attacks on oil infrastructure and foreign oil workers, instead of their communities, there was still likely a need to welcome militants home again. The reintegration efforts slowed due to returning former militant youths back to their communities without family or community sensitization and reintegration efforts.

Assessment of the DDR Process in Nigeria

Nigeria remains one of the most financially stable countries in Africa while also suffering from political instability. The wealth from the oil industry in Nigeria flows into the country but does not flow down to the population. This disparity in wealth increases tensions not just in the Niger River Delta but across the country. Conflict in Nigeria is not limited to just the Niger River

[87] Wapmuk, "The Amnesty Programme and the Challenges of Ending Youth Militancy in Nigeria's Niger Delta," 154. 161, 162, 164.

[88] Oyewo, "Nigeria: The challenges of Reintegrating Niger Delta Militants," 65.

Delta; the Nigerian government also fights Boko Haram, an Islamist insurgency, in northern Nigeria. Many of the same issues in the Niger River Delta act as drivers of instability and conflict in northern Nigeria. While the 2009 amnesty program reduced violence in the Niger River Delta and removed weapons from militant hands, the successes appear short-lived as new weapons flow into the region and new militant groups form.[89]

Another worrying trend for Nigeria and the Niger River Delta is the increase in pirates operating from the region. Piracy operations around the Niger River Delta focus on the capture of oil tankers operating near the oil production plants in western Africa before illegally selling the oil. The Gulf of Guinea, to the south of the Niger River Delta, is now the second most pirated body of water in the world. After accepting the government amnesty or refusing to participate in it, many Niger River Delta militants just moved their actions from onshore to offshore.[90] The increase in piracy in the region deprives the government of needed oil resources and extends the span of unrest and conflict in southern Nigeria.

The biggest question concerning success of the amnesty program is how long the Niger River Delta benefits from the program? During the amnesty program, the Nigerian government committed large sums of money towards ending the conflict, but little of that money went to developing infrastructure in the region.[91] In addition to not funding infrastructure, the amnesty programs never addressed the root causes of the conflict. The job skills programs helped some former militants, but many militants remain unemployed or underemployed, and the amnesty did

[89] Abdulrahman Dambazau, "Nigeria and Her Security Challenges," *Harvard International Review*, June 13, 2014, accessed January 21, 2019, http://hir.harvard.edu/article/?a=5711.

[90] Benjamin Okonofua, "The Niger Delta Amnesty Program: The Challenges of Transitioning From Peace Settlements to Long-Term Peace," *Sage Open* (April 2016): 13, accessed January 10, 2019, https://journals.sagepub.com/doi/abs/10.1177/2158244016654522.

[91] Dambazau, "Nigeria and Her Security Challenges."

nothing to address the environmental degradation of the region.[92] The lack of long-term stability for the region could lead to short-term gains at the cost of long-term stability.

While the Nigerian government completely funded the amnesty and reintegration program, the exclusion of external parties led to poor planning and execution. The amnesty program primarily communicated with the leaders of militant groups directly and did not incorporate individual foot soldiers in the planning process. Failure to include multiple levels of input during the planning process prevented the inclusion of multiple perspectives in the programs and allowed militant leaders to inflate the number of their groups to increase the amount of money received from the government.[93]

The inclusion of only former militants in the reintegration program is another problem identified. The exclusion of other people in the Niger River Delta affected by violence, like displaced people or families of people killed, does not account for all the parties involved in the conflict. Exclusion allows the conflict to continue as members of the region feel marginalized or distrustful of their government. The focus on militants only also encouraged non-combatants to find weapons or take part in the conflict to gain access to the amnesty and rehabilitation program benefits.[94] DDR benefits should not drive instability or prolong the conflict. In this case, the focus on combatants did exactly that.

Finally, the amnesty and rehabilitation programs did little to address the root causes of conflict in the Niger River Delta. While job training increased the chances of employment for militants, it did not address the wealth disparity or destruction of natural resources. Much of the conflict stemmed from locals' anger at, and mistrust of, the Nigerian government and foreign oil

[92] Oyewo, "Nigeria: The Challenges of Reintegrating Niger Delta Militants," 61.

[93] Ibid., 65, 68.

[94] Wapmuk, "The Amnesty Programme and the Challenges of Ending Youth Militancy in Nigeria's Niger Delta," 165.

companies.[95] The federal government's piecemealing of incentives does not provide locals with a sustainable future or continued access to their traditional lands. Until the government or foreign oil companies address these issues, it is likely that conflict will continue in one form or another in the Niger River Delta.

Summary of Findings

Through studying youth DDR actions in Nigeria and Sierra Leone, the findings indicate that holistic and inclusive DDR programs are superior to those with limited partners and scale. The purpose of childhood DDR in Iraq and Syria is preventing the region's further destabilization. Not providing educational and psychological health for children affected by IS could have long-lasting implication for the region. If the children in Iraq and Syria remain undereducated or develop serious psychological disorders, their countries will continue functioning as fragile states and could become failed states. Addressing some of the drivers of future instability in Iraq and Syria could break the instability cycle and save the United States from repeated deployments to these countries. The lack of educational or economic prospects and limited access to health benefits will fuel diaspora and overburden neighboring countries with refugees. The influx of refugees in Europe from countries affected by IS undermines European stability and strains national ties to regional alliances. If the US government seeks to no longer spend blood and treasure securing Iraq and Syria, a well-developed and resourced youth DDR operation is essential.

Creating lasting peace in fragile states requires significant time and effort. Operational planners should recognize the provision of educational and mental health support to children affected by conflict is essential to a lasting peace. The inclusion of education and mental health support for children in the stability plans increases the odds of lasting peace in an area. Without

[95] Wapmuk, "The Amnesty Programme and the Challenges of Ending Youth Militancy in Nigeria's Niger Delta," 156.

regionally appropriate education or job skill training, the risk of radicalization or just general disenfranchisement increases. Not including mental health solutions increases the possibility of children never emotionally or mentally recovering from the conflict. If left untreated, mental disorders often manifest into more serious mental disorders or physical health conditions. These mental and physical health conditions further stress health services in an area and increases the likelihood of a fragile or failed state. If the United States continues using military force in fragile states, then it is essential operational planners develop post-conflict stability plans which support the operation.

Army planners should expect an extended timeline for Civil Affairs and behavioral health support to DDR activities. If military involvement in Iraq and Syria occurs on a limited scale, military officials should stress the importance of DDR efforts to regional leaders. Advising local leaders on domestic stability efforts will help children left in the wake of the IS. The Iraqi government will likely control terrain allocation for youth DDR operations. However, planners should seek areas close to urban centers, but away from adult DDR sites. The proximity to an urban center provides the opportunity to slowly reintroduce the children to society without inundating the children or community. Distance from adult DDR sites severs links to former units and former comrades or abusers and the children.

Considerations for Operational Planners

Planners have five major considerations when developing an operational approach. These five considerations are time, forces, space, purpose, and constraints.[96] By integrating these five considerations, planners ensure the operational approach encapsulates a holistic approach.

The planning timeline for stability operations is longer than timelines associated with large scale combat operations. The endstate for stability operations is a more stable country with

[96] G. Stephen Lauer, "Design and Operational Art Class 11" (Lecture, School of Advanced Military Studies, Fort Leavenworth, February 12, 2019).

lasting peace. The endstate forces planners to account for longer timelines because of the requisite time it takes to develop the systems necessary to maintain a stable country.[97] The Army should not plan on maintaining permanent control of childhood DDR operations. However, planners should understand the extended time necessary for establishing and maintaining DDR operations until transitioning control to civilian or another government organization. Forcing children through DDR too quickly will push unprepared children back into society. If not fully prepared for reintegration, children will find fitting back into school, finding a job, or reestablishing connections with family and friends difficult. Children and young adults not properly reintegrated are more likely to turn to crime or radicalization which furthers societal instability and increases the likelihood of conflict in a region.

Civil Affairs and mental health specialists are the most important force multiple necessary during DDR operations. The Army maintains thirty-eight CA Battalions with five active duty battalions and thirty-three battalions in the Army Reserves.[98] These battalions provide the Army with professionals trained to support civil-military operations and mitigate drivers of conflict.[99] When planning operations in an environment where child soldiers are likely present, planners must request CA support. Additionally, if utilizing reserve CA units, it is essential that the operational timeline accounts for extended training and mobilization time.

Additionally, Army behavioral health allotment and availability is also a planning consideration and limitation when developing DDR of children operations. Without specific augmentation, each Army brigade has one officer and one enlisted behavioral health specialist. In the 2020 fiscal year modification of table of organization and equipment (MTOE) each medical

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[97] US Department of the Army, *Army Doctrine Reference Publication 3-07, Stability* (Washington, DC: 2013), 1-11.

[98] "Civil Affairs," Force Management System, accessed February 17, 2019, https://fmsweb.fms.army.mil/protected/webtaads/Listing_QSearch.asp.

[99] US Department of the Army, *Army Doctrine Publication 1-02, Terms and Military Symbols* (Washington, DC: 2018), 1-16.

area support company and combat support hospital have one officer and one enlisted behavioral health specialist assigned.[100] Behavioral health specialists provide valuable support which planners must account for in DDR planning.

After witnessing conflict and soldiers operating around them, the appearance of uniformed soldiers may be traumatizing to children or locals. To avoid further traumatizing children during the DDR process, CA personnel and behavioral health specialists should operate in civilian clothing instead of uniforms. This small action will not completely bridge the gap between soldiers and children but could help alleviate some of the stress between the two groups as they interact.

Not including sufficient CA and psychological support elements in childhood DDR operations sets the operations up for failure. A capabilities gap will arise if operational planners exclude or minimize the units specifically trained and educated on conducting DDR operations and psychological health during their planning. If CA units are not present during DDR operations, other units will struggle in accomplishing a task which they are not prepared or trained to accomplish. Ultimately, the US mission and the reintegrating children will suffer the most. Children will not receive the appropriate level of care necessary to succeed in life and the drivers of future conflict will remain in the region. A lack of psychological health support elements in DDR operations also undermines the longer-term success of reintegration and societal stability.

Terrain management is always a concern for planners when developing an operational approach. Planning for DDR operations requires allotting secured sites for demobilization. Additional sites are required when demobilizing children and adults. Not allocating enough space for separate sites for adult and child reintegration will hinder the DDR process and deny

[100] "Area Support Medical Company," Force Management System, accessed February 17, 2019, https://fmsweb.fms.army.mil/protected/WebTAADS/UIC_Frame.asp?Update=GETSQL&DOC_TYPE=MTOE&MACOM=FC&DOCNO=08457KFC01&CCNUM=0220&DOCST=A&UIC=WBNPAA&EDATE=10/17/2019.

protection to children. Not severing the linkage between child soldiers or other children victimized by adults, prevents children from fully recovering from their trauma. Not distancing children from former adult fighters also increases the likelihood of children remaining loyal to their previous fighting organizations out of fear of punishment by their former leaders or comrades. Unresolved psychological trauma and questionable loyalty of children will inhibit reintegration and lengthen the stabilization process which will likely result in a longer commitment of US military forces.

Some may question the necessity of military forces developing plans for educational and behavioral health of foreign children, but these actions will have long-lasting effects. Societies that lack basic education and mental health support for their population are fragile states. Fragile states are countries in which the weakness of internal institutions threatens the stability of the central government.[101] Developing and maintaining lasting peace is unlikely in fragile states, and many fragile states descend into failed states. A lack of post-conflict stability plans increases the likelihood of instability during consolidation of gains. Post-conflict instability lengthens the time military forces will spend in an area and can hinder conflict termination. Developing plans for establishing youth DDR programs with regionally appropriate education and mental health incorporated lessens the chance of an area continuing as a fragile or failed state. The inability of a state government to provide basic services supplies extremists groups an opportunity to radicalize disenfranchised citizens and establish bases without fear of government involvement.

Operational planners must ensure all subordinate units involved in the operation understand the necessity of identifying and assisting children affected by the conflict. Battlefield intelligence debriefing should incorporate questions for finding possible child soldiers. In addition to the identification of children soldiers, debriefings should include questions or identifiers which assist planners in locating children affected by the conflict. These actions help

[101] US Army, *Army Doctrine Reference Publication 3-07, Stability* (Washington, DC: 2013), 1-11.

guarantee that the greatest number of children affected by the conflict receive assistance. The greater the number of children included in the DDR process, the higher the chances are that the military actions will result in long-term stability. Not planning for child DDR operations increases the likelihood of stability operations lasting for extended periods. Planning for the transition from military to civilian or other governmental agency's control will expedite the transition.

Many actors, both internal and external to the US military, will question the necessity of military involvement in the DDR process of children affected by the conflict. The involvement of military forces in the educational and psychological support of foreign children will always be a sensitive subject. Establishing and publishing clear guidelines and restrictions for military involvement in the DDR process should alleviate many concerns. Agencies such as USAID and the UN can assist in creating appropriate guidelines and provide access to regional or subject matter expertise. Establishing working relationships with these organizations before a conflict shortens the time in theater spent making these relationships and expedites coordinated efforts.

Time will also be a constraint for youth DDR programs. As stated earlier, the US military does not intend to permanently run the education and mental health programs offered to children in a post-conflict environment. Transitioning US military control of youth DDR programs to an appropriate external agency requires detailed coordination and planning. If operating in the area, USAID or UN personnel would be the ideal organizations to coordinate with for transitioning control. If USAID or UN control is not likely, transitioning control to local officials will be necessary.

Conclusion

The reintegration of children traumatized by conflict is too important to conflict termination and regional stability to ignore as operational planners. As highlighted in the case studies from Sierra Leone and Nigeria, holistic and inclusive youth DDR operations increase the chances of lasting stability in regions after a conflict. Full reintegration of children into society

after conflict requires the inclusion of educational and psychological support in youth DDR operations. Locally-focused and sustainable education or job training provides children with a path to a normalized life and removes a driver of instability. Psychological support for traumatized children during DDR operations facilitates the reintegration of children who otherwise could fail to fully reintegrate. Addressing psychological conditions early after a conflict helps prevent the development of multigenerational trauma which undermines the social stability of future generations.

When the military develops plans in areas where high numbers of traumatized children are likely, not planning youth DDR operations is a serious flaw. The presence of large numbers of traumatized children undermines societal stability and stretches the resources of governments. Societies facing instability and marginalized groups of citizens are prone to internal violence and can quickly descend into a failed state. National or regional instability increases the chances of conflict, increasing the odds of US military intervention. If instability becomes unbearable for citizens, it can lead to regional diaspora. Diaspora then spreads instability to other regions of the globe. The interconnective nature of the modern world means that regional instability can quickly spread into global instability as seen in mass migration currently affecting the European continent.

This project explored case studies of youth DDR operations in Africa and applied the lessons learned towards the current problem caused by IS. The analysis provides considerations for military planners faced with planning youth DDR operations. The importance of including civil affairs and psychological support teams in youth DDR operations is paramount. CA soldiers and mental health specialists have the necessary training and education to properly identify traumatized children and develop recovery and reintegration plans. The number of psychological support teams and active duty CA soldiers is limited which requires planners to request these assets early when developing force requirements. Planners should understand the extended

timeline necessary for accomplishing youth DDR operations. Rushing reintegration of traumatized children will result in societal instability and likely extend a conflict.

When planning a campaign in an area where large numbers of children soldiers or traumatized children is likely, developing youth DDR operations must begin as soon as possible. Waiting until LSCO are ending before developing DDR plans could result in an underdeveloped plan to disarm, demobilize, and reintegrate children traumatized during the conflict. Ignoring or not fully addressing the issue of traumatized children left after a conflict will have long lasting consequences. A properly developed and resourced youth DDR operation with emphasis on educational and psychological support after a conflict reduces many drivers of societal instability, provides the best path to stability in an area after a conflict, and reduces the time and frequency of US military intervention before creating a lasting peace. Not properly planning youth DDR operations removes maneuver units from missions they are trained for and puts more American servicemembers lives at risk by extending the time and amount of troops necessary before stabilizing a nation.

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