Workshop Report

Cape Town Plus Ten:
Child Soldiers: What have we learned? What do we still need to know?

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MAILMAN SCHOOL OF PUBLIC HEALTH
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I. Problem Statement

About ten years ago, a number of us met in Cape Town, South Africa to develop international standards, guidelines and good practice on the prevention of recruitment of children into the armed forces and on demobilization and social reintegration of child soldiers in Africa. Many of the group members assembled in Cape Town were pioneers and practitioners who worked day-to-day on child soldier concerns in Liberia, Sierra Leone, Mozambique, Myanmar, Columbia, and elsewhere. There was some skepticism that an interagency symposium on a subject that the world cared little about would result in anything new or important. Time has proven these skeptics wrong, however; there has been meaningful progress over the past nine years. Some of the highlights include:

- The Coalition to Stop Child Soldiers’ emergence as one of the most effective child rights advocacy campaigns ever.
- Recruitment of under-aged soldiers as a war crime.
- Security Council Resolutions that situate child soldiering in the political arena.
- Child protection officers included in DPKO peacekeeping missions.
- UNICEF’s work within the UN system to mainstream child soldiering as a shared protection concern.
- Child Protection Units established in numerous International NGOs.

As part of the follow-up to the Cape Town Principles and Best Practice, UNICEF and NGOs are organizing a series of regional workshops to take stock of achievements and shortcomings since 1997. Our ‘Cape Town Plus Ten’ Workshop, in turn, was designed to examine what we have learned and what we still need to know from a global perspective. Indeed, the workshop participants represented over 200 years of collective experience working on child soldiering issues, covering five different continents.

The results of our deliberations will contribute to global learning in two main ways. First, UNICEF is feeding our findings and recommendations into the global post-Cape Town stocktaking exercise. Second, the Program on Forced Migration and Health is engaged in a broader child care and protection initiative that aims to improve policy and programmatic responses to children affected by crisis. The contributions from the workshop will help to define our work on child soldiers over the next several years.
II. Goals and Objectives

Overall Workshop Goal:

The purpose of the workshop was to engage with senior practitioners and policy makers to examine what we know (and do not know) about child associated with fighting forces. The focus was on the DDR process and workshop outputs are feeding into broader efforts in the international community to revise the Cape Town Principles.

Specific Workshop Objectives:

Orientation

1. To identify consensus on good practice, promising practice, and program learning gaps.

Review

2. To review areas of practitioner consensus in best practices (serving as an element of one round of a wider Delphi study of practitioner consensus).

3. To consider prepared literature reviews documenting the evidence-base supporting good practice.

Focus

4. To propose key issues with respect to which program learning research stands to most inform practice.

5. To identify potential sites and programs for pursuing program learning research.
III. Opening Remarks

_Presenter: Mike Wessells_

In setting the context for the workshop, Wessells raised issues concerning dominant approaches to DDR and the quest for universalized interventions. Dominant approaches have been discriminatory since they privilege boys and ex-combatants. Although girls are known to comprise a significant percentage of children in many armed groups, relatively little is known about how most effectively to support their departure from armed groups and transition into civilian life.

Also, dominant approaches typically have a short-term focus on demobilization and force restructuring efforts aimed at creating a unified national army rather than on reintegration, which is inherently a long-term process that ought to be guiding the entire DDR effort. Most approaches have taken an excessively individualized approach of questionable applicability in collectivist societies in which people understand the wounds of war as communal and define their well-being in terms of social relations.

The quest for universal interventions is highly problematic, owing to the enormous contextual variations in the situation of “child soldiers” and the situation in which they attempt to transition into civilian life. The tasks of reintegration may be fundamentally different for children who were born into the armed group, spent their entire life inside it, and defined themselves in military terms as opposed to children who had been abducted into an armed group for days or several weeks but who never adopted a military identity or military values. In some contexts, the use of interim care centers makes sense, whereas in others it can be harmful. The poverty of universalized approaches is apparent in medicalized views of how former child soldiers have been impacted and in attempts to rehabilitate them through counseling and therapy.

A much sounder approach is to ask how children in local contexts understand their situation and to identify what resources and supports they and their families and communities see as needed. Even a term such as “reintegration” is problematic since it implies that there is something like a functioning community to reintegrate into when often discernibly there is not. Also there is little point trying to return to a situation that had existed earlier since that is not only impossible but also overlooks the fact that particular pre-war conditions may have caused the war. These and many related issues warrant a careful rethinking of the question how to do DDR, which is the purpose of the meeting.
IV. Cape Town Review

Cape Town Principles Review
Presenter: Rebecca Symington

Child Protection agencies and actors involved in DDR have agreed to come together to review the Cape Town Principles of Best Practice for children associated with armed forces (1997). The French Government has agreed to lend its support to the process with a high level symposium at the end of 2006. ECHO is supporting UNICEF to lead the review process through 2006.

The two primary objectives of this process are to identify best practices and lessons learned, and to obtain broader political endorsement from UN member states of basic fundamental principles protecting children from involvement in armed groups and forces.

Seven regional analyses have been drafted by independent consultants, commissioned by UNICEF. Two were informed by regional consultations (East and West Africa). They cover all global regions and include an analysis of the relevance of the Cape Town Principles in each context. They remain in draft form, until further consultation, when they will be compiled into one background document.

The main recommendations from the regional analyses suggest that the revised principles should include the following: The creation of two documents – one focusing on policy geared towards governments and the other based on good practice for practitioners; an explicit mention that the process is not necessarily formal by including a principle on “informal” release; an increase in gender focus, highlighting gender and HIV throughout the text; and the need for a greater emphasis on juvenile justice. In South Asia, it was felt that a separate section on legislation would be needed. This would not only include updates on international legislation especially addressing child recruitment, but would also include overlaps in other legislation such as juvenile and transitional justice.

The regional analyses also identified a need to address some of the problematic terminology. They highlighted the complexities underpinning the concepts of “child” soldiers, “voluntary” recruitment and “re”-integration. They also recognized a need to distinguish the needs of adolescents by treating them as a separate category.

Next Steps:
- A meeting to create a reference group to facilitate inclusive planning for the review.
- An independent consultant will compile the global analyses and produce the revised Cape Town Principles.
- A technical symposium will be held in September 2006 to obtain global consensus on a revised Cape Town Principles between a) national governments b) child protection agencies c) other entities involved in DDR but not focused solely on child protection.
- A high level symposium will be held in December 2006 to obtain political support on the best practices of the prevention of recruitment of all children and inclusive reintegration of children associated with forces.
V. Outcome Measures

Outcomes: Did (Does) your work make a difference?
Presenter: Neil Boothby

This purpose of this presentation was to stimulate discussion to identify desired outcome measures across various cultures and contexts. What do we want to know in the long-term about our programs and their impact? What is the negative impact for children who have had military involvement? How do we build on children’s resiliencies? The presentation cited two recent studies to suggest some directions for promising practice.

The first, a study recently undertaken by the IRC (see appendix 3), found that children who had gone through IRC programs fared better than children who had self-demobilized. The second study, the Mozambican Child Soldier Life Outcome Study, began in 1988 in Maputo Center. Data on 40 boys from the center has been collected periodically for 16 years. In 2004, the study examined how these former child soldiers were faring as adults. Outcome measures included psychosocial well-being, economic status and social functioning and the study drew on both qualitative and quantitative methodologies.

Journalists labeled Mozambique’s Children “The Lost Generation” & “Future Barbarian.” Study findings, however, found this not to be true. The main findings are presented below:

The majority of former child soldiers are:
- Off farming income earners above national norm
- Perceived by their spouses to be “good husbands”
- Taking active steps to ensure their own children’s welfare: health, nutrition and educational status above norms
- Perceived as “good neighbors” by their communities
- Continuing to experience psychological distress linked to child-soldiering experiences. Some manage this distress better than others

The interventions that were identified as being most helpful included:
- Healing through reestablishing relationships with caring adults
- Focus on safe codes of conduct and self-regulation
- Traditional Ceremonies and Cleansing Rituals
- Amnesty Policy and Sensitization Campaigns
- Development projects linked to collective child care and protection
- Apprenticeships and livelihood skills development

All in all, this study identified a great deal of positives that suggest that former child soldiers can become productive and accepted members of their communities. Boothby asked whether the study addressed the desired outcome measures and what is successful integration?
Outcomes Exercise: What do we want to know?

As humanitarian workers, we need to measure whether and how our efforts make a difference. Understanding how child soldiers reintegrate in the long term is critical. For this exercise, participants were asked to list the five things they would most like to know about child soldiers who go home.

Part 1: Individual Reflection
- Each participant was asked to identify the five most important things they want to know about how children associated with armed groups integrate into civilian life.

Part 2: Group Consensus
- Participants then broke into two small groups to discuss their choices with the rest of the group. The goal was to seek consensus where possible. Participants listed those outcome measures that reached high group consensus (70%) on a flip chart.

Part 3: Report Back to Plenary
- Each group then shared their findings. The priorities with high group consensus are reported below:

1. Social Functioning
   - e.g. active engagement and participation in community
   - e.g. valued social roles effectively fulfilled (inc. parenting)
   - e.g. social acceptance reported
   - e.g. community cohesion increased (through religious practice and/or other means)

2. Livelihoods
   - e.g. basic needs met
   - e.g. household income increased
   - e.g. educational attainment and vocational skills increased
   - e.g. dignified, safe and non-exploitative work roles adopted

3. Health
   - e.g. adequate nutritional status
   - e.g. reduced risk for STDs and AIDS
   - e.g. decreased morbidity and mortality

4. Emotional well-being
   - e.g. increased hope (orientation to the future)
   - e.g. improved mental health

5. Enhanced protection within community
   - e.g. Reduced reports of (inter-communal or other) violence
   - e.g. Increased capacity to make choices
   - e.g. Increased capacity for resolution of conflict
VI. The Girl Gap

Reintegration of Girl Soldiers: Why the Girl Gap?
Presenter: Susan McKay

At the 2000 conference in Winnipeg, there was almost no discussion of girls. In the five years since that meeting we have come a long way. At the same time, we still have a long way to go. Girls and girl mothers who return from fighting forces have been “invisible” to those who fund, design, and implement DDR programs. Because of this invisibility we have a limited understanding about the experiences and needs of girl soldiers during DDR. Girls have distinct experiences, which at times are separate from and at times overlap with women soldiers. We need to look at girls’ specific experiences in each situation because there is a huge range of experiences. There is not one monolithic girl soldier experience. Additionally, gender may be constructed differently in different contexts.

There are a number of possible explanations for the girl gap. Privileging of men and boys in DDR programs has occurred throughout the years. The acceptance of the dichotomy of boys as combatants and girls as victims of sexual violence or soldiers’ “wives” may be another contributing factor. In addition, girls have often been grouped under the broader rubric of women, especially those girls who return with children. Consequently, little understanding has developed about their distinct experiences. Additional reasons for the girl gap include lack of program and policy guidelines for working with girls, inadequate psychosocial knowledge about girls to inform the development of best practices and the fact that girls may not want to be visible and may hide within their communities.

In attempting to remedy the girl gap, one must ask the challenging question, “How can DDR be inclusive of and appropriate for girls?” For example, should DDR for girls be community based? If so, how can this be accomplished? Another critical question asks how we can better understand what girls face and how they cope when confronted with hostile and unwelcoming communities.

What are the best practices in working with communities that historically and culturally have discriminated against girls? How can we build on existing knowledge of collaborative integrative processes that work? A few initial steps include:

- Decreasing discrimination, work to reduce sexism toward girls and women
- Addressing the unequal power relationship
- Promoting gender justice and girls rights
- Tapping into the cultural and generational knowledge of women peace builders, female healers and the community’s elder women.
VII. Reintegration

Support for the Reintegration of Girls Formerly Abducted in the Angolan Conflict
Presenters: Vivi Stavrou and Carlinda Monteiro

This presentation outlined a program undertaken by Christian Children’s Fund (CCF) in Angola to contribute to the post-conflict reintegration of ex-girl soldiers through local partners who provided literacy and skills training to these young women. The project was built on lessons learned from CCF’s formerly abducted girl soldiers research, and the experience gained from previous in-depth work with war affected children. Two hundred and fifty girls started the course in September 2004. By October 2005, almost three hundred girls were participating in the project activities. 70.8% (211) completed the different training courses.

The content of the skills training courses was based on what the formerly abducted girl soldiers identified they needed, namely income generating skills. Courses included painting, decorating, and agricultural skills. Additional classes were provided in literacy and numeracy, life skills and health education.

The main strengths and weaknesses of the program include the following:

Strengths:
• Strong partnerships established with the community-based organizations, churches, the government and CCF
• Capacity-building with implementing partners during project strengthened organizations within the lifetime of the project.
• Mixed group of young women.
• The integration of a psychosocial approach within a skills training program.

Weaknesses:
• 20% of the girls dropped out because lived with relatives, not immediate family, who did not give them enough time off family chores, and/or did not want to look after their children
• A business-start-up kit should have been provided: e.g. pencils and account books; basic baking/painting, etc material
• Weakness of the partners: few resources and completely dependent on CCF for funds; more time should have been allocated for training with partners prior to courses starting.
• Childcare started too late: initially no space or resources within implementing partners

Christian Children’s Fund in Liberia, 2005
Presenters: Noah Ochola and Wayne Bleier

In 2005, CCF began implementing a community-based reintegration program in Liberia. 11,000 child soldiers were demobilized and 30% of these were girls. All of those who were formally demobilized went to interim care centers.
USAID funded a 3-year initiative targeting child soldiers and war affected children. Program elements included social integration, economic recovery and literacy and numeracy skills. Child protection, community and child cleansing rituals and reproductive health programming (including HIV and GBV) were also essential program elements.

A surprising number of children opted for school instead of skills training. It also became apparent at that time that there was an overwhelming need to incorporate other vulnerable children affected by conflict into the program.

One of the main challenges that the program has faced in working with communities has been the ways in which traditional roles and practices have conflicted with GBV programming. Another challenge has been that the project was funded for 3 years, but the integration process is anticipated to take 5 to 10 years.

The Reintegration of Former Child Soldiers: Summary Analysis
Presenter: Lindsay Stark

Stark presented the main findings from a recently completed draft analysis of the existing literature on the reintegration of former child soldiers. The goal was to identify where evidence exists that supports program practices, where promising practice exists, and what the remaining gaps are. Analysis was based on empirical studies that were done independently and expert consensus drawn from published papers, gray literature and program evaluations. The main findings are as follows:

What we know
- Children associated with armed forces experience psychological and social problems when re-entering communities.
- Family and community acceptance and reconciliation seem to be key aspects of reintegration.
- Education can be a source of protection for a returning child soldier. At the same time, there are times when the school environment may be punitive or even harmful to a child, or when education may be less suitable than livelihood skills and training.
- Monitoring and evaluation are essential tools to assess the effectiveness of short and long-term interventions.

What we think we know
- At this point, many experts think that the trauma model is limiting and that community-based psychosocial programming is more effective in reaching desired outcomes such as social functioning.
- Evidence also seems to be building in support of cleansing ceremonies and family reunification as effective strategies for psychosocial healing and reintegration.
- Community sensitization appears to pave the way for community acceptance of returned soldiers.
- Livelihood programming seems to be a critical reintegration enabler for former child soldiers.
• Inclusive programming appears to be effective in preventing further stigmatization and jealousy, though it is not clear if this type of programming results in better life outcomes for child soldiers.

**Remaining Knowledge Gaps**

• Psychosocial services best provided in rehabilitation centers or directly in the community?
• Broader community reconciliation has largely been overlooked.
• Not enough is known about effective livelihoods programs and how to take them to scale.
• Major gaps still exist in terms of programming for female former child soldiers.
• Another major gap revealed in this review is the absence of long-term studies. Only one study actually followed up with former child soldiers years after programming had come to a close. More such studies are warranted.
• Finally, a policy gap exists in relation to DDR funding structures. Programming needs to be framed and funded from a reintegration perspective.

**Matrix Exercise:**

**Part 1: Individual Reflection**

• Each participant was given a copy of a matrix with the categories “What we know,” “What we think we know,” and “Remaining knowledge gaps” and asked to fill it out based on the findings above and the participants’ own knowledge and experience.

**Part 2: Group Consensus**

• Participants then broke into three small groups to discuss their choices with the rest of the group. The goal was to seek consensus where possible. Participants listed those outcome measures that reached high group consensus (70%) on a flip chart.

**Part 3: Report Back to Plenary**

• Each group then shared their findings. The main findings are reported below:

**What we know**

• Key to reintegration are:
  - health
  - psychosocial well-being
  - education or livelihoods/skills training
  - family reintegration
• Prevailing poverty can be an obstacle
• Follow-up is crucial
• It is essential to reach out to children and not wait for them to come to us
• Understanding the local socio-cultural, gender, and economic context is critical
• Separate DDR support for children is needed
• Girls and young women fall through DDR gaps
• Youth are underserved – have distinctive needs
• Social, cultural and religious practices may be to successful reintegration
• Community involvement is key to long-term sustainability

**What we think we know**
• Community based psychosocial approaches are more effective/sustainable than clinically based approaches
• Livelihoods must consider local economies and markets. Providing child care with livelihoods programs is beneficial
• Inclusive programming appears to be effective in facilitating social reintegration
• Sensitization should be done by a mix of actors and should try to support systems within the community
• Family reunification is not always the best strategy and is not always the best environment to return children to
• Traditional practices can be potentially harmful
• Cash assistance programs are not a good thing
• A holistic approach reaching across all sectors is beneficial

**Remaining Knowledge Gaps**
• How can we take livelihoods programs to scale?
• There is a need for norms on prevention including re-exploitation of children when they (re)integrate and preventing GBV and FGMC working with and through local people
• There is a need for good practice around girls - exemplars addressing their reintegration from the beginning, how to support girls when they choose not to self-identify, etc.
• There is a need for assessment methodologies around protection concerns / epidemiology of protection including more accurate counts of separated children early
• How can we build on the skills and strengths that children acquire in armed groups?
• How can we identify and support spontaneous returns and how to reach out to children still in bush with armed groups?
• There is a need to develop good policy and advocacy around (re)integration outcomes and go backwards – how to shift the ‘upsidedownness’ of how these programs are funded?
• How can we communicate effectively with non-state actors/armed groups?
• Duration of programming – how long is enough?
• There is a lack of understanding around identity –how do children perceive themselves in terms of their roles in the armed forces? In the DDR process? For example, children may think their involvement in an armed force is a good thing and by telling them that this is wrong we deny their political commitment and engagement.
• How should we deal with the conflict between a rights-based framework and local understandings?
VIII. Disarmament and Demobilization

Children and Disarmament
Presenter: Malia Robinson

Disarmament is generally understood to be a military process. It involves the removal, or laying down of arms as part of a military reduction/reorganization, or resolution process in armed conflict.

The definition of a child soldier according to the Cape Town Principles does not only refer to a child who has carried arms. At the same time, this has not been the perception. In past disarmaments, children have been required to present arms or demonstrate knowledge and skills to use arms. Quoting Jean-Claude Legrand, Robinson noted that “experience has clearly demonstrated that this procedure has worked against the best interest of the child. Most military factions tend to retain a stock of weapons and thus often deprive children of the possibility to get access to the demobilization process. Girls are systematically excluded.”

A few of the key challenges that Robinson highlighted include:

- Civilian vs. military expertise and priorities
- Parallel processes for children and adults are different, creating a sense of inequity
- Children not being disarmed (Kinshasa 2001)

Robinson concluded that there is a need to create a safe environment for children, without contingency that demobilization is based on disarmament.

Separation – Release – Exit of Children Associated with Armed Forces
Presenter: Stephane Pichette

After a discussion of the limitations of the terminology “disarmament,” “demobilization,” and “reintegration,” Pichette examined some of the main issues of separation. He first posed the question, “When does separation end, and (re) integration begin?” and suggested that integration commences as soon as the child is identified as a child associated with armed forces or groups. Pichette then highlighted a number of ways that children enter the DDR process. These included children presenting themselves, identifying and verifying children in military camps or regroupement sites as well as through the formal process.

Next, Pichette addressed what policies we should use to determine the eligibility of children for DDR and how we should verify their ages? In the DRC, for example, the issue of age has proven to be troubling as many adults have tried to go through the process as children to receive benefits like education.

In regards to whether or not to use interim or transit care, Pichette concluded that transit care is not mandatory. In the case of the Mai Mai in the DRC, for example, most of the children went home directly and such centers were pointless. When transit centers are used, Pichette
stressed the need the right people and the right environment. Incidents of children rebelling against NGOs are not uncommon when children remain too long in interim care.

**Matrix Exercise:**

Part 1: Individual Reflection

- Each participant was given a copy of a matrix with the categories “What we know,” “What we think we know,” and “Remaining knowledge gaps” and asked to fill it out based on the discussions above and the participants’ own knowledge and experience.

Part 2: Group Consensus

- Participants then broke into three small groups to discuss their choices with the rest of the group. Again, the goal was to seek consensus where possible. Participants listed those outcome measures that reached high group consensus (70%) on a flip chart.

Part 3: Report Back to Plenary

- Each group then shared their findings. The main findings are reported below:

  **What we know**
  - Disarmament is a military process. Formal disarmament can lead to the exclusion of children, especially girls.
  - Not all children go through the formal disarmament and demobilization process. Not all children may need to go through the formal process.
  - There can be a manipulation of the disarmament and demobilization process by commanders, community members, children, national governments and/or donor agencies.
  - Interim care centers are not always necessary and can cause problems of protection, security, separation and dependency.
  - Through normal activities (returning to the routine of daily life), the vast majority of kids will regain normal psychosocial functioning.
  - It is essential for children to receive formal document of release indicating separation from military as part of formal demobilization
    - Prevents recruitment
    - Aids in accessing services
    - Identity transformation

  **What we think we know**
  - Identity/demobilization papers matter, but what should they be like?
  - Material assistance or kits are needed – but we don’t know exactly when this comes into the process.
  - Individual psychotherapy is not useful in demobilization and interim care.
  - Psychosocial programming relies too much on western models and there is a lack of emphasize on indigenous methods.
• Interim care centers, where they are appropriate, should be of short duration.
• More vigorous advocacy with the government may help get children out of conflict earlier.
• We do not know how to use transition time well – who determines when each phase stops and starts?

Remaining Knowledge Gaps
• When is the end of disarmament and the beginning of demobilization?
• How can we better integrate children’s disarmament and demobilization into part of larger peace and security process?
• What do children need (public ceremony, etc) as a mark of demobilization?
• Need for more information on how/why boys and girls spontaneously demobilize and integrate.
• Age verification - What is the advocacy line versus the legal environment with regard to age verification? What do we do with those that are 19 or 20 who were recruited as 15 year olds? What do we do with 23-25 year old girls who have a very compromised future and also need organized interventions?
• How can we influence military and peace-keeping forces? How can we be better advocates with people who might have a different world view?
• How do we handle the military presence at transit centers?
• How do we address the family-like relationships and bonds that may have formed between commanders and fighters?
• Girls with babies: Who is the child? What do we do with the children of children? Need for a broader range of options to address this population.
• What good community-based alternatives exist to transit centers? How do we maintain quality and practicability within existing alternatives?
IX. Prevention

Presenter: Mike Wessells

While prevention was not part of the original agenda, the workshop organizers restructured the third day to make room for a topic that the group felt was an essential missing link. Mike Wessells presented a brief overview of prevention.

The first key point Wessells emphasized was that since much DDR work is done in a context of ongoing fighting in situations in which the risks of re-recruitment are very high, it is vital to embed DDR programs in a wider effort to promote child protection. He also highlighted that it makes no sense to wait for the recruitment and the damage to children to occur and then try to pick up the pieces afterwards--prevention has to be a high priority.

Wessells went on to say that effective protection should be holistic, systemic, and community-based. Often protection is equated with legal or physical protection, but some of the greatest risks that propel children into armed groups and emotional and social (e.g., family abuse and violence, discrimination and marginalization). Also, abuse and exploitation occur at multiple levels--family, community, societal--which challenges us to create multi-layered programs that interconnect micro- and macro-level supports. Much of the best work on prevention can be done by communities because they have preexisting protection mechanisms that can be built upon and they understand well the situation that enables recruitment.

Prevention Exercise:

Part 1: Individual Reflection

• Again each participant was given a copy of a matrix with the categories “What we know,” “What we think we know,” and “Remaining knowledge gaps” and asked to fill it out based on the discussions above and the participants’ own knowledge and experience.

Part 2: Group Consensus

• Participants broke into three small groups to discuss their choices with the rest of the group.

Part 3: Report Back to Plenary

• Each group then shared their findings. The main findings are reported below:

What we know

• Separated children are more at risk for recruitment and re-recruitment
• Social political cultural and economic can be push and pull factors that determine recruitment. Children join for a variety of reasons and there is a need to understand the root causes.
• Prevention requires political as well as humanitarian action
• Both military and opposition/rebel groups recruit children
• Border areas and refugee camps are major recruitment zones
• There are child protection norms that exist in every community that can be used to try and prevent recruitment of children. Prevention strategies need to be context specific.
• Legal and political frameworks around prevention are not strong enough
• Prevention is ongoing within the DDR timeline (the issue of re-recruitment)
• Prevention should be addressed within all programming activity and not isolated

What we think we know
• Education has a potential to protect children from recruitment, although schools can also be a place for recruitment
• There needs to be a constant dialogue with leaders of armed groups and forces as a means of limiting recruitment
• Community based activities help prevention
• There is a strong link between prevention and reintegration

• International codes and security council involvement will lead to better preventive and early release actions
• At a national level the lack of consensus on age weakens advocacy and prevention
• Prevention is more cost effective

Remaining Knowledge Gaps
• We don’t know how to prevent recruitment
• There is not enough documentation regarding lessons learned
• There are not clear tools/models/guidelines to assist humanitarian workers to address prevention
• We do not know much about how peer dialogue may contribution to prevention
• How do some family, communities and situations prevent their children from being recruited compared to others in similar situations?
• What are the factors that contribute to resilience among children
• How do role models/concepts of gender contribute to recruitment?
• Would control of arms/ammunition lead to prevention strategies?
• How can we effectively strengthen and sustain community based child protection mechanisms?
• How can we providing alternative participatory mechanisms for children?
• How do we effectually develop a collaborative multi party approach to prevention at the country level?
X. Prioritizing Next Steps

The Use of Consensus Methodology in Determining Key Research and Practice Development Questions in the Field of Intervention with Children Associated with Fighting Forces

Prepared by: Alastair Ager

Introduction

Recent years have seen rapid development in the professionalization of humanitarian assistance, with increased emphasis of developing conceptualizations of ‘best practice’. Two major forces shaping understandings of ‘best practice’ are professional reflection (Kolb, 1999) and the development of an empirical evidence-base on program effectiveness (ALNAP, 2005). This report details a study exercise relevant to both of these forces, as it incorporated analysis of professional consensus on key areas where a stronger empirical evidence-base was required for program development. The specific focus was work in the field of support to children (formerly) associated with fighting forces. This is an area of programming that has seen significant development in the last decade, though empirical support for particular programming responses remains limited (Wessells, 2006).

Methodology

Workshop participants were individually presented with a list of 21 issues that had arisen in discussion earlier in the meeting (as distilled from comprehensive notes taken in each session). Participants were provided with eleven ‘stickers’ and asked to place these against the issue that they considered represented the most important questions for research and practice development. ‘Stickers’ could be distributed across eleven issues or, through multiple ‘posting’, used to prioritize particular issues. Participants were also invited to add additional items to the list, if important questions were considered to have been omitted. Participants were given 10 minutes to complete this Phase 1 of the prioritization exercise.

Phase 2 of the exercise involved participants discussing in pairs (in one case, a three) their selections in Phase 1. Pairs were instructed to negotiate the placement of a further eleven ‘stickers’ on a fresh listing of the issues ensuring, as far as possible, that their selections represented consensual judgments after a further 10 minutes of discussion. Participants were again free to add new issues to the list, including items that they had added to the list in Phase 1.

Phase 3 involved pairs coming together to make groups of four, who were instructed – after a further 10 minutes of discussion – to allocate a final five ‘votes’ across listed items (including items contributed by group members).

At the conclusion of the study exercise, all papers were collected, and responses tabulated as in Figure 1, 2, and 3.
Results

The results of each phase of prioritization are listed in Figures 1, 2, and 3 respectively. Frequencies represent the total number of ‘votes’ received for each issue during that phase of the exercise. Votes for issues added by participants are consolidated into a single item if content was judged to be substantially similar (e.g. ‘how to encourage release/exit during conflict’ and ‘what is good practice in dialogue and mediation with armed groups to return children?’).

The three figures suggest a broadly consistent pattern of prioritization across each phase of the study exercise. Although some items advanced in priority across the three phases (e.g. ‘documenting effectiveness of inclusive programming on social integration’ from rank 10= in Phase 1 to rank 3= in Phase 3) and other fell (e.g. ‘identifying the effective elements of community sensitization’ from rank 4= in Phase 1 to rank 7= in Phase 3), overall rankings were remarkably stable.

Although the exercise serves to outline a broad agenda for research and practice development in the field, selecting items that were ranked in the top five issues in each of the three phases of rating gives the following as the four top priority issues by consensus:

- What are effective approaches for supporting the integration of girls formerly associated with fighting forces?
- How can livelihoods support be taken to scale?
- What are effective monitoring & evaluation strategies for identifying protection risks and evaluating interventions?
- What is the comparative effectiveness & sustainability of community-based psychosocial vs. clinically focused approaches?

Although the majority of issues are focused on the evidence-base for programming, the wider policy context was referenced in a number of issues, most saliently with the item:

- What policy developments can increase the effectiveness, visibility, and long-term funding of children’s reintegration?

Conclusion

The study exercise suggests that consensus methodology can be an efficient and effective means for identifying shared views on priorities in research and program development in the humanitarian field. The specific priorities identified here, alongside other consultation processes, will assist in the planning of work within the Care and Protection of Children in Crisis Affected Countries initiative currently being developed by the research team.
## Figure 1: Phase 1 Prioritizations

<table>
<thead>
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<th>Rank</th>
<th>Question</th>
<th>Freq</th>
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<tbody>
<tr>
<td>1</td>
<td>12. How can livelihoods support be taken to scale?</td>
<td>17</td>
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<tr>
<td>2=</td>
<td>14. What are effective approaches for supporting the integration of girls formerly associated with fighting forces?</td>
<td>15</td>
</tr>
<tr>
<td>2=</td>
<td>17. What are effective M &amp; E strategies for identifying protection risks and evaluating interventions?</td>
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<tr>
<td>4=</td>
<td>1. What is the comparative effectiveness &amp; sustainability of community-based psychosocial vs. clinically focused approaches?</td>
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<td>4=</td>
<td>9. What are the effective elements of community sensitization?</td>
<td>14</td>
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<tr>
<td>7</td>
<td>13. What policy developments can increase the effectiveness, visibility and long-term funding of children's reintegration?</td>
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<tr>
<td>7</td>
<td>19. How do we build on the skills of children formerly associated with fighting forces in the reintegration process?</td>
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<tr>
<td>8=</td>
<td>20. How do we channel funding to assist all war-affected and vulnerable children in the context of DDR processes?</td>
<td>9</td>
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<tr>
<td>8=</td>
<td>15. Can we document the benefits of prevention and integration planning early on in the DDR process?</td>
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<tr>
<td>10=</td>
<td>6. How can we best capitalize on appropriate traditional practices (and minimize the impact of those that do harm)?</td>
<td>7</td>
</tr>
<tr>
<td>10=</td>
<td>11. Can we document how inclusive programming is effective in aiding social reintegration?</td>
<td>7</td>
</tr>
<tr>
<td>10=</td>
<td>18. How do we work effectively through elders and other community groups in supporting the integration of girls?</td>
<td>7</td>
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<tr>
<td>13</td>
<td>4. How to outreach to children still in armed groups to support demobilization?</td>
<td>6</td>
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<tr>
<td>14</td>
<td>26. (How) does formal/informal education provide protective mechanisms in the prevention of child recruitment?</td>
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<tr>
<td>15=</td>
<td>5. What role, if any, is there for the provision of cash assistance to minors at the time of mobilization?</td>
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<tr>
<td>17=</td>
<td>24. What factors predict whether families and communities are able to prevent child recruitment?</td>
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<tr>
<td></td>
<td>3. What kinds of provision (e.g. kits) are useful in supporting the reintegration of demobilized children?</td>
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<tr>
<td></td>
<td>16. In what ways can psychosocial support for child soldiers cause harm?</td>
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<td>32. How can we better understand the influence of cultural identity in the context of ‘demobilization’?</td>
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<td></td>
<td>34.7. What is the best use of ‘transitional time’ between mobilization and reintegration?</td>
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<td>22=</td>
<td>30. How to successfully bring state and non-state actors to account for increasing protection activity?</td>
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<tr>
<td>31</td>
<td>31. What are effective cross-sectoral ways of working?</td>
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<tr>
<td>22</td>
<td>22. How to provide alternatives to recruitment which provide social status and participation for young people?</td>
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<tr>
<td>23</td>
<td>23. What link needs to be established between justice/accountability mechanisms and child integration?</td>
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<td>25</td>
<td>25. What strategies and tools exist to support integrated, multi-sectoral prevention and integration?</td>
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<tr>
<td>8</td>
<td>8. What are effective demobilization papers and when should they be used?</td>
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<tr>
<td>27</td>
<td>27. What types of educational activity are most effective in the (re)integration process?</td>
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<td>33. How do we guide workers on verifying age?</td>
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<td>25</td>
<td>25. What is good practice in dialogue and mediation with armed groups regarding child recruitment?</td>
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<td>35. What are best practices in social integration?</td>
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<tr>
<td>36</td>
<td>36. With constrained resources, how are programs targeted without creating stigma?</td>
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**Figure 2: Phase 2 Prioritizations**

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<td>12. How can livelihoods support be taken to scale?</td>
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<td>2=</td>
<td>14. What are effective approaches for supporting the integration of girls formerly associated with fighting forces?</td>
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<td>1. What is the comparative effectiveness &amp; sustainability of community-based psychosocial vs. clinically focused approaches?</td>
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<tr>
<td>4</td>
<td>17. What are effective M &amp; E strategies for identifying protection risks and evaluating interventions?</td>
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<td>5=</td>
<td>20. How do we channel funding to assist all war-affected and vulnerable children in the context of DDR processes?</td>
<td>6</td>
</tr>
<tr>
<td>5=</td>
<td>13. What policy developments can increase the effectiveness, visibility, and long-term funding of children’s reintegration?</td>
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<tr>
<td>7=</td>
<td>11. Can we document how inclusive programming is effective in aiding social reintegration?</td>
<td>5</td>
</tr>
<tr>
<td>7=</td>
<td>19. How do we build on the skills of children formerly associated with fighting forces in the reintegration process?</td>
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<tr>
<td>7=</td>
<td>10. How and why do girls and boys spontaneously demobilize and reintegrate?</td>
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<td>10</td>
<td>9. What are the effective elements of community sensitization?</td>
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<tr>
<td>11</td>
<td>15. Can we document the benefits of prevention and integration planning early on in the DDR process?</td>
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<td>12=</td>
<td>6. How can we best capitalize on appropriate traditional practices (and minimize the impact of those that do harm)?</td>
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<tr>
<td>12=</td>
<td>18. How do we work effectively through elders and other community groups in supporting the integration of girls?</td>
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<tr>
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<td>5. What role, if any, is there for the provision of cash assistance to minors at the time of mobilization?</td>
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<tr>
<td>12=</td>
<td>35. What are best practices in social integration?</td>
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<tr>
<td>16=</td>
<td>25. What strategies and tools exist to support integrated, multi-sectoral prevention and integration?</td>
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<td>23</td>
<td>21. How to strengthen policy and practice regarding DDR (including community-based activities)?</td>
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<td>4. How to outreach to children still in armed groups to support demobilization</td>
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<td>26. How does education support prevention (of child recruitment), protection and (re)integration?</td>
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<td>22</td>
<td>22. How to provide alternatives to recruitment which provide social status and participation for young people?</td>
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<td>3</td>
<td>3. What kinds of provision (e.g. kits) are useful in supporting the reintegration of demobilized children?</td>
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<td>32. How can we better understand the influence of cultural identity in the context of ’demobilization’?</td>
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<td>34.7</td>
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<td>14. What are effective approaches for supporting the integration of girls formerly associated with fighting forces?</td>
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<td>1. What is the comparative effectiveness &amp; sustainability of community-based psychosocial vs. clinically focused approaches?</td>
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<td>17. What are effective M &amp; E strategies for identifying protection risks and evaluating interventions?</td>
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<td>11. Can we document how inclusive programming is effective in aiding social reintegration?</td>
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<td>12. How can livelihoods support be taken to scale?</td>
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<td>5=</td>
<td>13. What policy developments can increase the effectiveness, visibility, and long-term funding of children’s reintegration?</td>
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<td>20. How do we channel funding to assist all war-affected and vulnerable children in the context of DDR processes?</td>
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<td>9.</td>
<td>19. How do we build on the skills of children formerly associated with fighting forces in the reintegration process?</td>
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<td>9.</td>
<td>9. What are the effective elements of community sensitization?</td>
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<tr>
<td>26.</td>
<td>26. How does education support prevention (of child recruitment), protection and (re)integration?</td>
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XI. Appendix 1: Agenda

**MONDAY**

<table>
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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>8:00-9:00AM</td>
<td>Breakfast</td>
</tr>
<tr>
<td>9:15-9:30</td>
<td>Welcome (Neil Boothby)</td>
</tr>
<tr>
<td>9:30-10:15</td>
<td>Workshop Overview and Introductions (Mike Wessells)</td>
</tr>
<tr>
<td>10:15-10:45</td>
<td>Delphi Study (Alastair Ager)</td>
</tr>
<tr>
<td>10:45-11:15</td>
<td>Coffee Break</td>
</tr>
<tr>
<td>11:15-12:30</td>
<td>“Cape Town Update” (Rebecca Symington)</td>
</tr>
<tr>
<td>12:30-2:00</td>
<td>Lunch</td>
</tr>
<tr>
<td>2:00-3:00</td>
<td>What Do We Need to Know about Outcomes? (Neil Boothby)</td>
</tr>
<tr>
<td>3:15-3:30</td>
<td>Coffee Break</td>
</tr>
<tr>
<td>3:30-4:30</td>
<td>Working Groups: Common Outcome Measures</td>
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<tr>
<td>4:30-5:00</td>
<td>Working Group Reports</td>
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**TUESDAY**

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<tr>
<td>8:00-9:00AM</td>
<td>Breakfast</td>
</tr>
<tr>
<td>9:00-9:30</td>
<td>The Girl Gap (Susan McKay)</td>
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<tr>
<td>9.30-10:30</td>
<td>Reintegration Response: (Lindsay Stark, Carlinda Monteiro, Vivi Stavrou, Wayne Bleier, and Noah Ochola)</td>
</tr>
<tr>
<td>10:30-11:00</td>
<td>Coffee Break</td>
</tr>
<tr>
<td>11:00-12:30pm</td>
<td>Working Groups</td>
</tr>
<tr>
<td>12:30-2:00pm</td>
<td>Lunch</td>
</tr>
<tr>
<td>2:00-2:30pm</td>
<td>Feedback to Plenary</td>
</tr>
<tr>
<td>2.30-3.00</td>
<td>Overview of Disarmament and Demobilization (Malia Robinson and Stephane Pichette)</td>
</tr>
<tr>
<td>3:15-3:30</td>
<td>Coffee Break</td>
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<tr>
<td>3.30-4.30</td>
<td>Working Group</td>
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<td>4:30-5.00</td>
<td>Feedback to Plenary</td>
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**WEDNESDAY**

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<tr>
<td>8:00-9:00AM</td>
<td>Breakfast</td>
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<tr>
<td>9:00-9:30</td>
<td>Overview of Prevention (Mike Wessells)</td>
</tr>
<tr>
<td>9:30-10:30</td>
<td>Working Groups</td>
</tr>
<tr>
<td>10:30-10:45</td>
<td>Coffee Break</td>
</tr>
<tr>
<td>10:45-11.30</td>
<td>Feedback to plenary</td>
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<tr>
<td>11:30-1:00</td>
<td>Final recommendations, prioritization and next steps (Mike Wessells and Alastair Ager)</td>
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## XII. Appendix 2: List of Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Mamade, Agostinho</td>
<td>Aga Khan Foundation</td>
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<tr>
<td>Bleier, Wayne</td>
<td>Christian Children's Fund</td>
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<td>Monteiro, Carlinda</td>
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<td>Ochola, Noah</td>
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<td>Wessells, Mike</td>
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<tr>
<td>Humphreys, Macartan</td>
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<tr>
<td>Schaberg, Lynne</td>
<td>Displaced Children and Orphans Fund, USAID</td>
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<td>Williamson, John</td>
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<td>Kostelny, Kathleen</td>
<td>Erikson Institute</td>
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<tr>
<td>Alexander, Jessica</td>
<td>Independent Consultant</td>
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<td>Robinson, Malia</td>
<td>Independent Consultant</td>
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<td>Stavrou, Vivi</td>
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<tr>
<td>Mendenhall, Mary</td>
<td>INEE</td>
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<tr>
<td>de la Soudiere, Marie</td>
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<td>Warburton, Jane</td>
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<td>Ager, Alastair</td>
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<td>McKay, Susan</td>
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<td>Cohn, Ilene</td>
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XIII. Appendix 3: List of Distributed Resources

Guidelines

1. *Cape Town Principles and Best Practices*, UNICEF

2. *Children and DDR*, Inter-Agency Disarmament, Demobilization, and Reintegration Working Group (IDDRWG)

3. *UN Security Council Resolutions*

Applied Research

Columbia University

4. *Reintegration of Former Child Soldiers: Literature Review and Summary Analysis*, Lindsay Stark

5. *A Living Wage: The Importance of Livelihoods in Reintegrating Former Child Soldiers*, Michael Wessells


7. *Hidden Among the Shadows: A Literature Review of Girl Mothers Associated with Armed Forces*, Deborah Tsuchida

8. *The Use of Transit Centers in the DDR Conflict Process*, Daniel Stellar


External

10. *Psychosocial Adjustment and Social Reintegration of Child Ex-Soldiers in Sierra Leone*, Theresa Betancourt, Shawna Pochan, and Marie de la Soudiere

*Children Born of Wartime Rape and Human Rights Culture*, Siobhan McEvoy-Levy