

Reintegrating CAAFAG

What works to improve the reintegration of children associated with armed groups and forces (CAAFAG) into community life: An Evidence Review

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1 Overview

This review includes evidence on what works to bring about successful community reintegration of children who have been associated with armed forces or groups and what factors inhibit or prevent reintegration. When reintegration works, a small body of qualitative evidence indicates that these children or youth are less likely to be re-recruited and have better outcomes for mental health, family support, and greater access to education and safe income-earning activities.

The document is organized according to a social ecology lens with each section focusing on interventions that address reintegration within a certain level of society - the individual, the family, the community, and larger systems. Within each level, the evidence is organized around questions of what interventions address the different needs of children associated with armed groups and forces (CAAFAG). There is an overlap between the sections as many interventions target multiple levels of social ecology and address multiple needs of CAAFAG and their communities.

Note on Language: This review utilizes the definition of CAAFAG as outlined by [the Paris Principles on the Involvement of Children in Armed Conflict \(2007\)](#): “A child associated with an armed force or armed group” refers to any person below 18 years of age who is or who has been recruited or used by an armed force or armed group in any capacity, including but not limited to children, boys and girls, used as fighters, cooks, porters, messengers, spies or for sexual purposes. It does not only refer to a child who is taking or has taken a direct part in hostilities.” This review includes evidence on individuals who had been CAAFAG but are now over the age of 18 years old. A number of terms have been used for these children but for this review, CAAFAG is used as an overarching term. Further specification is provided if needed to describe more discrete population groups within the body of the document.

KEY FINDINGS

State of the Evidence

What does the landscape of interventions look like?

What trends were found in the evidence?

What gaps were found in the evidence?

What does the evidence say about the reintegration of girls and women?

- Much of the literature comes from specific countries in Africa (e.g. Uganda, the DRC, Mozambique) and to a much lesser extent Latin America and Southeast Asia or from comparisons across countries or contexts. The frequency with which countries appear in the literature is likely to reflect the history of recent armed conflict (e.g. the DRC). However, some contexts which have a history of violence appear less often in the literature related to CAAFAG (e.g. Latin America), and this might be because the violence falls outside the strict definition of armed conflict. These contexts also may not have drawn the same attention on the subject of recruited children in armed groups.
- There is very limited rigorous research on what works to improve CAAFAG reintegration into community life; much of the evidence comes from qualitative, short-term studies.

- Girls and boys have unique needs, especially as CAAFAG. The literature recommends that a gender lens be integrated into design and implementation. This would not only benefit girls but also allow for better programming for boys who have experienced sexual trauma.
- The literature noted that girls are not always or even predominantly identified and reached by current interventions, and the literature recommends that special attention needs to be paid as to why they are often not reached by formal Disarmament, Demobilization and Reintegration (DDR) programming. Not all DDR processes apply to girls as they are designed only for armed combatants, who are predominantly boys.
- Many programs are multi-component and address multiple levels of the socio-ecological framework. The literature does not always identify which components are more or less effective.

Individual Reintegration

How do interventions address economic and educational needs?

How do interventions address MHPSS needs?

How do interventions address physical health needs?

- The evidence on economic reintegration for individual CAAFAG shows that impacts on individual reintegration ranged from mixed to negative depending on the individual reintegration and context. There are a number of contextual obstacles to economic reintegration including poor or insufficient financial infrastructure, political investment, community perceptions, and limited program reach. In the studies where mixed positive and negative results were reported, when improved economic stability of CAAFAGs was reported, it led to greater community and family acceptance.
- Educational access and attainment - in cases when coupled with safe economic reintegration interventions - is dependent on addressing the potential individual and systematic access barriers including CAAFAG's potentially negative perception of the educational offerings, the overall quality of education services as well as the support provided intervention staff.
- Mental health and psycho-social support (MHPSS) is often emphasized in intervention design. However, some literature posits it is over-emphasized to the detriment of the youth, not recognizing or developing their own resiliency and not addressing the other needs of the youth.
- Reintegration components are often included in formal DDR interventions but the literature recommends that kinship care or foster homes achieve better results than interim care centers, which can alienate children and prolong familial separation.

Family Reintegration

How do interventions address parenting support of CAAFAG?

How do interventions address familial perceptions?

- Evidence shows that children who reintegrate into accepting families have a much greater sense of comfort and reintegration.
- Positive parenting programs have had success and often are coupled with other intervention components. In cultures with large, connected extended families these positive-parenting and

Community Reintegration

How do interventions address stigma and acceptance?

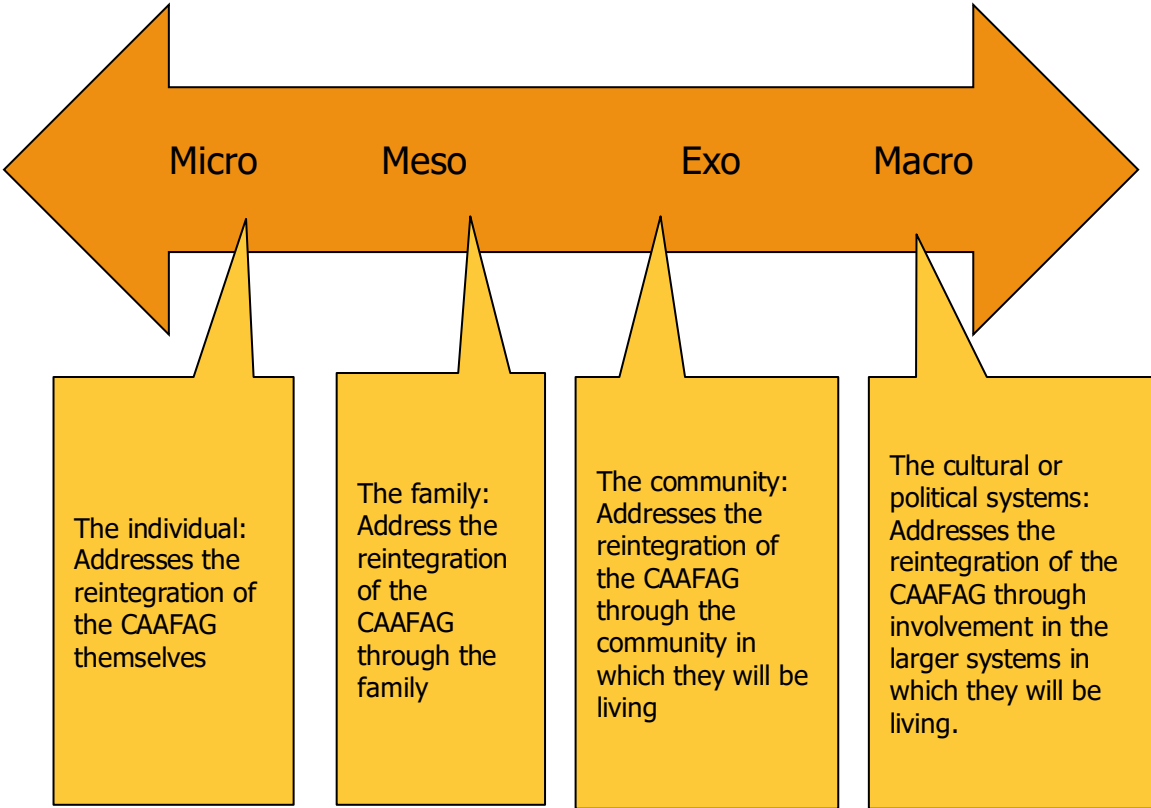
- perception-of-CAAFAG programs should also include family members beyond just caregivers.
- Parents benefit from inclusion in CAFFAG-focused MHPSS programs as well as from their own MHPSS support programs due to the circumstances they face as well as their children's wellbeing.
- Individual contexts influence what psychosocial support needs the parents may have when trying to reintegrate their child into the family and into the community.
- When community members perceive economic strengthening programs to benefit CAAFAG and not other family members "in need", familial distrust and negative perceptions of CAAFAG can increase.
- Where they exist in the local culture, traditional healing and cleansing ceremonies have been shown to be successful in improving CAAFAG reintegration through increased understanding and forgiveness.
- Peer-support and teacher-support have been found to benefit CAAFAG reintegration, with teacher-support potentially leading to reduced community stigma. Peer support can be especially valuable to CAAFAG when family support is lacking.
- The literature argues that long term investment in programs is necessary, especially in light of the finding that women and children face higher initial stigma than men, requiring investment to avoid VAWG however program design should keep in mind that in the same study that finding reverses over time leading to more stigma against men. More research is needed to determine if these findings for stigma duration against men and women are generalizable.
- Economic strengthening programs which benefit CAAFAG and not victims of the conflict may increase community distrust or other negative perceptions against CAAFAG and the intervention programming.
- Different community members may be specifically targeted to improve public perception and acceptance of CAAFAGs. These can include teachers, peers, and religious leaders.
- While there is very limited evidence on how reintegration into larger systems such as participating in local or regional politics may be accomplished, one study found that within CAAFAG populations, non-abducted children - those who chose to be associated with the armed groups - were "more likely to engage in prosocial behaviors", including participation in politics. This is an indication of the difference in how subpopulations may need to be addressed when integrating into larger systems.

Political/System-level Reintegration

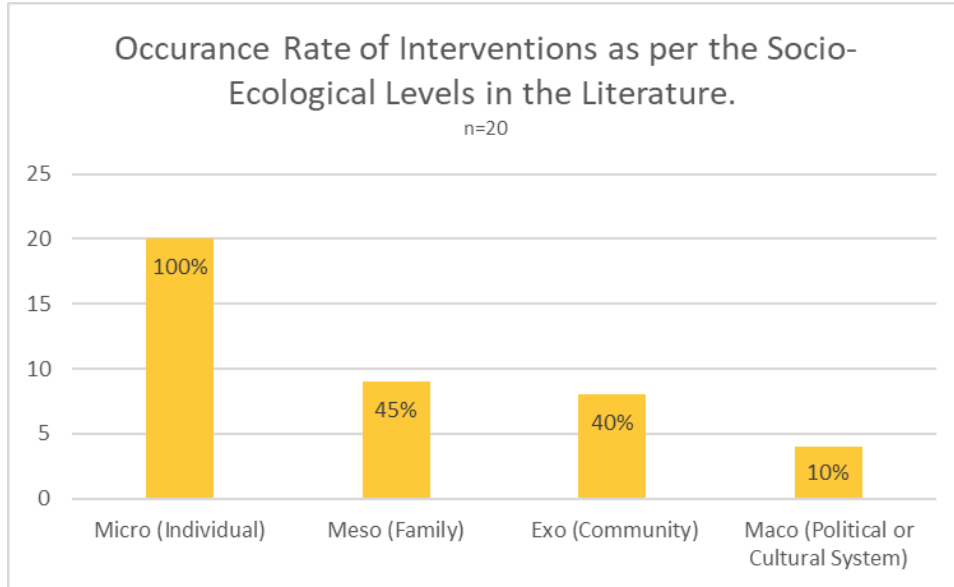
2 State of the Evidence

What does the landscape of literature look like?

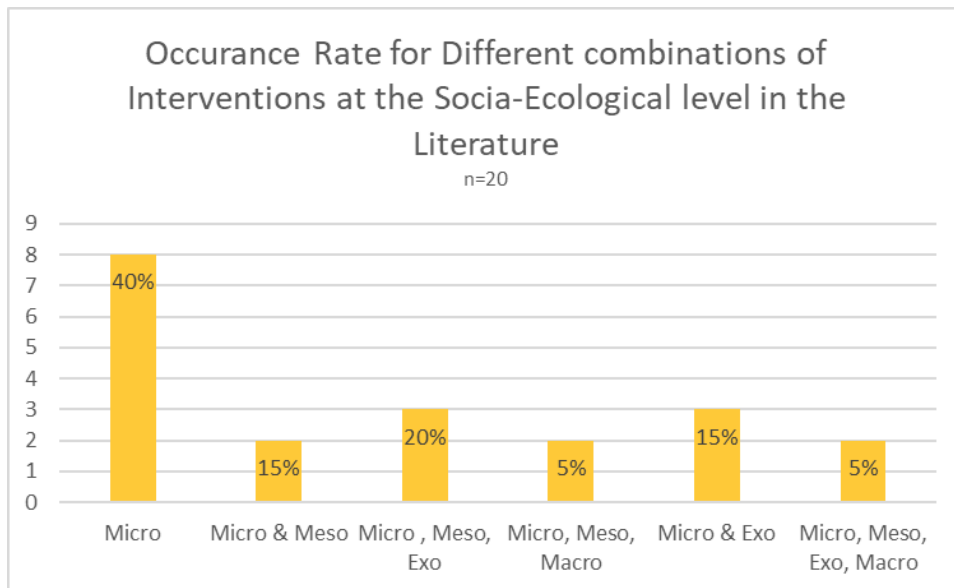
All evidence in this review is organized along Bronfenbrenner’s social ecological systems theory¹ utilizing micro, meso, exo, and macro to represent the four levels of society which the interventions or literature may impact, for this review’s purpose these are to represent the individual (micro), the family (meso), the community (exo), and the cultural or political system (macro).



¹ Bronfenbrenner, U., & Morris, P. A. (2006). The bioecological model of human development. In W. Damon & R. M. Lerner (Eds.), Handbook of child psychology, Vol. 1: Theoretical models of human development (6th ed., pp. 793–828). New York: John Wiley



When considered by intervention types or foci, 7 thematic areas appear in the literature. Literature that addresses gender dimensions is discussed in this section. Economic & educational interventions, MHPSS interventions, and physical health interventions are addressed at the micro level, with the individual. Parenting and family perception interventions are discussed at the meso level, with the family. Interventions to address community & stigma and acceptance are at the exo level. No thematic categories appeared at the macro level with the political or with larger cultural systems, expressions of the cultural system could be found in the community level through the community’s utilization of the healing ceremonies but these impacts are limited to the community and shifts to the larger cultural system.



Study #	Addresses Gender Dimensions	Economic & Education Intervention	MHPSS Intervention	Physical Health Intervention	Parenting Intervention	Family Perception Intervention	Community Stigma & Acceptance
Socio-Eco Level	Micro, Meso, Exo	Micro, Meso, Exo	Micro, Meso	Micro	Mico, Meso	Micro, Meso, Exo	Micro, Meso, Exo
1	●	●	○	○	●	●	○
2	○	●	●	●	●	●	○
3	●	●	●	●	○	○	○
4	●	●	●	●	○	●	●
5	○	○	●	○	○	○	○
6	○	●	●	○	○	○	○
7	○	●	○	○	○	○	○
8	○	●	○	○	○	○	○
9	○	●	○	○	○	○	○
10	○	○	○	○	○	○	●
11	●	○	●	●	○	●	○
12	○	○	●	○	○	○	○
13	○	○	●	○	○	○	●
14	○	●	○	○	○	○	●
15	●	●	○	○	○	○	○
16	●	●	○	○	○	○	○
17	●	●	●	●	○	●	○
18	○	●	●	○	●	●	●
19	○	○	●	○	○	●	●
20	○	○	●	○	○	○	○

What trends were found in the evidence?

The evidence in this review is predominately from African countries with minimal evidence from other regions. This regional emphasis and these gaps may be due to the categorization of different armed conflicts and the utilization of overt child labor in the conflicts. In regions like Latin and South America there may be armed conflicts internally between groups that utilize children but due to their classifications as intragroup “gang” or “drug wars”,

literature focused on CAAFAG may not examine these conflicts with the same framing as they might the group-state conflicts in African contexts. This is in line with a desk review of the evidence on both prevention and reintegration that found of the 119 pieces of literature studied, the geographical evidence is varied but the majority is African countries, secondarily South East Asia and Latin America (1). Much of the literature is based on qualitative research. For more information on the trends in research type, see gaps in the evidence below.

Many interventions for CAAFAG are multi-component, touching multiple levels of society and multiple sectors to improve the reintegration and well-being of the children. There is a strong emphasis in the literature on mental health and psychosocial support programming for CAAFAG, although some literature posits that there is an overemphasis which “[neglects] the youth’s resilience and coping abilities” and this emphasis on trauma treatment stigmatizes and isolates the youth as dysfunctional” (6, 11). To a lesser extent are programs for livelihood and educational support and even less so for the physical well-being of the client. More information on these programs can be found throughout the rest of the review.

What gaps were found in the evidence?

Because much of the literature focuses on discrete contexts or individual countries, it is difficult to identify trends or generalizable findings (1). The evidence is largely done by global north-based NGOs - not from local, community-based initiatives - and take place in the Global south, with most of the study locations being a small sub-set of countries (2). The unequal distribution of the evidence base requires additional work to localize or contextualize individual interventions. Further, much of the literature is not from studies utilizing rigorous methods but instead case studies and other qualitative means. This lack of contextual consistency and lack of rigorous evaluations mean that there is a limited evidence base to support a clear set of best practices or recommendation interventions (4).

While family tracing is considered a core part of DDR and CAAFAG reintegration, the literature largely ignored this component of the process (2). This may be because family tracing is an initial step and not a protracted process like the other necessary components of CAAFAG reintegration.

Because of the lack of robust evaluation studies, there is limited information on the effectiveness of most reintegration intervention components, as well as limited evidence on cost-effectiveness. What evidence does exist points to the multi-component interventions being expensive on a per-client basis, with a successful residential program in Liberia costing ~1,250 USD per youth per 3-4 month intervention period after which the participants “spent fewer hours engaged in illicit activities; a sizeable increase in average wealth; and small but positive improvements across most measures of social engagement, citizenship, and stability”(5).

What does the evidence say about the reintegration of girls and women?

It is estimated that girls make up around 40% of the CAAFAG population worldwide (3). Despite this, the default for interventions is often to conceptualize CAAFAGs as being predominantly, or even only male. Facilitators should have an understanding of gender discrimination and dynamics as part of the programming and should not depict CAAFAG only as boys or men (1, 11).

Women and girls are noted as sometimes being conceptualized in both the communities and the evidence as “passive” and being abductees, instead of allowing for women and girls to have agency and sometimes choosing to be associated with the groups (1). This nuanced view of the “pull” of the armed groups means that the programming itself must also be nuanced to match the different perceptions of their time with the groups. However, while recommendations exist, there is a lack of extensive research on implementations for CAAFAG through a gender lens. Despite the assumptions about passivity, women and girls are still seen as having transgressed their gender roles, especially if they were combatants or experienced sexual trauma, because of this, women and girls are more at risk of rejection and stigmatization by their communities (6). Women and girls can share their experiences and in part, this allows peer-to-peer programs to potentially have a greater impact on the well-being and reintegration of female CAAFAGs (10, 11).

More evidence is needed on the experiences of women and girls who were associated with armed forces and groups, especially the circumstances surrounding the association. (3, 11) Further, the gender-sensitive lens gap also includes the experiences of boys and men who experienced sexual violence as a result of their CAAFAG status. An intervention in Iraq working with Yazidi women who had been associated with the groups through abduction used peer support groups and CAAFAG-organized gender-equality events to improve community acceptance and CAAFAG wellbeing (11).

There is a need to find new, creative ways to identify and track female CAAFAGs as they are less likely to self-identify or be identified through the same channels as male CAAFAGs (6). Some studies indicate that girls are more often reintegrating outside of formal DDR programs. Identifying and tracking any CAAFAG can be difficult and adding in a gender component can make it even more so, regardless accurate identification and tracking is crucial for overall success.

Programs that reported positive reintegration results on girls - not necessarily CAAFAG - through a gender lens include: Girl Shine (IRC), and Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) (IRC). (1) In the cost-efficacy evaluation, Girl Shine was found to be more expensive despite similar curricula, as compared to COMPASS.

For more information on Girl Shine and COMPASS see the [2017 COMPASS review](#), the [COMPASS cost analysis](#), and the [2020 EBDM evidence review](#) of Girl Shine.

3 Individual Reintegration

Individual reintegration needs response can be varied depending on the resources available and the needs of the CAAFAG. Mental health and psychosocial support (MHPSS) interventions often appear in the literature due to the deep trauma that CAAFAG experienced. Other interventions include interim care centers which can include MHPSS as well as other care like physical health care. Economic and educational interventions may also fill the needs of the CAAFAG as they likely missed schooling and need economic support and/or training. Case management may offer a way to balance the multiple needs of CAAFAG (11).

Study #	Addresses Gender Dimensions	Economic & Education Intervention	MHPSS Intervention	Physical Health Intervention	Parenting Intervention	Family Perception Intervention	Community Stigma & Acceptance
1	●	●	○	○	●	●	○
2	○	●	●	●	●	●	○
3	●	●	●	●	○	○	○
4	●	●	●	●	○	●	●
5	○	○	●	○	○	○	○
6	○	●	●	○	○	○	○
7	○	●	○	○	○	○	○
8	○	●	○	○	○	○	○
9	○	●	○	○	○	○	○

10	○	○	○	○	○	○	●
11	●	○	●	●	○	●	○
12	○	○	●	○	○	○	○
13	○	○	●	○	○	○	●
14	○	●	○	○	○	○	●
15	●	●	○	○	○	○	○
16	●	●	○	○	○	○	○
17	●	●	●	●	○	●	○
18	○	●	●	○	●	●	●
19	○	○	●	○	○	●	●
20	○	○	●	○	○	○	○

How do interventions address economic and educational needs?

An evidence review was conducted by Evidence to Action in 2019 on the educational reintegration of CAAFAG which may be found [here](#). Individual findings have been included in this review as well.

CAAFAG often exist in the nebulous state between being quantifiable children and having the lived experience of an independent “adult” with responsibilities. CAAFAG feedback evidence showed that they preferred interventions designed for “adults” who need to support families and have components like cash programming rather than child-targeted programming that excludes such financial support (1). There is a risk of a CAAFAG returning to the armed group due to the loss of power, autonomy, and financial security he or she experiences outside the armed group. When key informant interviews were conducted with sector professionals, a number were reported to have felt that economic strengthening activities were an “add-on” and not as well thought out as compared to other components of a reintegration intervention (5).

The economic development of CAAFAGs through group actions coupled with community sensitization, leading to economic stability, has been reported, in a qualitative participatory action research study of young predominantly CAAFAG mothers, to have a positive impact on family love and acceptance (14). To develop economic opportunities, trades and other livelihood training may be provided to youth. However, in some cases, the offered “menu” of livelihood options to the youth are gendered, limiting the potential of the youth and risking alienation as they may have had more options of roles as part of the groups in their past. Modifying the “menu” of opportunities must be balanced with the community acceptance of a person of a particular gender working in that area (2, 11). The landscape of vocational training for CAAFAG is weak, and practically non-existent for CAAFAG with disabilities (9). The options for livelihood training should provide market-relevant skills for the youth’s particular context (2). Listening to the youth and utilizing their existing skills can not only accelerate the youth’s trajectory towards earning an income, but also support the youth’s sense of autonomy and self-determination as they are able to contribute to their own experiences instead of being told what to do. Interest and ownership in the activities by the youth can improve participation, and if the participants do not experience interest and a sense of ownership in the activities it can contribute to the dis-investment and potential re-recruitment (5). Qualitative interviews with CAAFAG indicate that they want programming that teaches them new skills while also drawing on

the abilities developed during their association with the armed groups (15). However, other interviews indicate that at least some CAAFAG view vocational school as “inferior” to regular schooling and may then choose to avoid vocational programs (16).

Education programs seeking to reintegrate CAAFAG usually operate in conflict-affected and low resources contexts, where education services, including government systems, are often underfunded. CAAFAG will therefore encounter barriers to access and experience low-quality services if programs are not adequately funded. (2). It is recommended that implementations secure multi-year funding sources to negate immediate funding concerns faced by educational programs, especially when integrated with the formal education system. Funding to supplement educational fees is a consideration, as school fees were noted as being a major deterrent to educational reintegration for CAAFAG. These are especially a concern for girls who may have come back with children of their own and therefore need to financially support their own family units while also being children themselves (17). It should be noted that for the study in question, a solution to affording education for children of CAAFAG was not addressed. A review of educational and vocational programs found that while they can be effective in improving educational and economic outcomes, time remains a major barrier (4). Many programs are short-term, ICC programs in particular, often lasting 6 months or fewer, which were insufficient to create significant, lasting improvements for the youth. Additionally, follow-up is not always accounted for or there might be insufficient programmatic capacity, especially in “difficult” economic climates. For a sustainable impact on CAAFAG’s long-term economic stability, the time consideration must be accounted for in the development of the programs. If there are gaps in the educational programming, the evidence found that this can lead to limits on the earning potential of the clients through reduced livelihood opportunities or options. Another barrier to economic stability for CAAFAG is that children and youth in camp settings will have limited economic opportunities and unique restrictions on economic opportunities due to the inherent legal nature of the camps as well as the limited kinds of jobs present in the camps (7). Interventions must adapt their programming for those contexts, finding ways to bolster the youth for their current contexts and for the future. Formal schools may also be a cause of anxiety for CAAFAGs as schools are a common site for abductions, and this anxiety may affect school attendance (18). One qualitative study had CAAFAG reporting that teachers may have a significant role in addressing community stigma due to the respected status teachers have in the community as well as their everyday interaction with other youth and their parents (16). Peers may also be an avenue to decrease community stigma and improve acceptance as peer support appears to have a strong association with daily functioning, level of PTSD, and hope for formerly recruited children in Nepal (19). Quantitative data revealed a relationship between stronger peer-support networks and increased levels of hope, and between weaker peer-support and increased functional impairment and higher levels of PTSD during reintegration. Peer support might be particularly valuable in contexts where family-support is low. The researchers suggest that interventions targeting formerly recruited youth might approach them as though they were “children” and might not therefore meet the needs of adolescents who make up the majority of this population.

See Community Reintegration below in this review for more information on school-based interventions, especially for educators.

Economic strengthening for women and girls must be done with an eye towards personal safety as well - while older children becoming financially independent may lead to intra-familial tension, the literature cautioned that adding a gender component may increase incidences of domestic abuse protection mechanisms for the women and girls are not taken into account e (5). Other concerns include not accidentally incentivizing families to falsely report recruited children.

Concerns around Economic Strengthening Components:

A recent meta-analysis of the Survey for War-Affected Youth (SWAY) which included the various reintegration programs of Lord's Resistance Army CAAFAG found a concerning result that there was no significant relationship between "assistance and earnings or social capital, and [the study concludes] that assistance services do not improve reintegration outcomes" (7) In fact, the included LRA CAAFAG who did not receive services significantly out-earned those who did receive assistance over the same period. However, this context-specific and several positive outcomes were found that could direct programs to alternative programming or other changes: the mother's education had a significant effect on the future earnings of children, and a positive relationship between traditional cleansing ceremonies and social relationships of CAAFAG was established. The literature on labor economics indicates that the following are good indicators of potential increased earnings: age and education as they are associated with increased human capital; the mother's education due to its implications on prenatal maternal behavior and financial security during the child's early years; and the marital status of the individual as a predictor of "the decision to work" Within the meta-analysis, the observed degree of self-selection in the CAAFAG who utilized the services may have influenced the earning potential; those that accepted assistance were, "more likely to be displaced, take part in traditional cleansing ceremonies, have both parents alive, have more violence inflicted upon themselves and their families, have inflicted more violence upon others, have escaped the LRA or been rescued, and are more likely to have been indoctrinated. They are also more likely to have felt loyal to the LRA during their abduction, and have longer abductions, on average. Conversely, those who have not received assistance are more likely to be older, married, more educated, have returned from the bush for longer, have been abducted at an older age, and are more likely to have been released by their LRA captors." Each of these characteristics could influence earning potential.

See Community Reintegration below in this review for more information on cleansing ceremonies.

Other interventions focused on economic strengthening components for DDR efforts also found mixed to negative impacts on the CAAFAG, some may be found in the exemplar section below (4). Insufficient connections between the services and the target CAAFAG limited the interventions' impact on the youth. Poor planning, low political buy-in or follow-through, insufficient infrastructure to support the financial components, and negative community perceptions all led to decreased benefits to the children.

Exemplar Interventions			
Intervention	Context & Location	Description & Impact	Environment I Cross-Cutting
Educational & Economic Programming (4)	DRC	This information was presented as part of a systematic review, but limited detailed information was presented within the review. An educational intervention the DRC for CAAFAG girls aged 12-16 found positive, effective impacts in improved educational attainment, reduced or prevented re-recruitment, provision of economic opportunities, and promotion of social acceptance. Insufficient access to the services for the CAAFAG provided significant obstacles to the girls indicating that for more pronounced positive impacts, the access barriers should be addressed	Individual
DDR economic	Mozambique	This information was presented as part of a systematic review, but limited detailed information was presented	Individual

strengthening & support component (4)		within the review. A long-term follow-up study of boys who went through DRR in Mozambique found that there was mixed efficacy with effective economic programming but the stipend had a negative impact on education. The economic activities included stipends for the boys and livelihood or apprenticeship training. Further, the stipends increased familial tension by identifying former soldiers who benefited while the families saw other members who were "in need" who did not have the same benefits. The apprenticeships improved earnings, as well as eased reintegration and self-sufficiency. There were also problems with program accessibility.	
Multi-component reintegration program: economic and education components (4)	Uganda	This information was presented as part of a systematic review, but limited detailed information was presented within the review. As part of an intervention with multiple components, CAAFAG and other conflict-affected youth were given cash and a household item package to help them economically and to try to allow them to do catch-up schooling. However, the finding was that the lack of educational programming led to gaps in the educational levels and in earning potential. The household packages were ineffective in improving the economic status of the children and led to community resentment as it was seen as disproportionate support to perpetrators of crimes over victims. There was insufficient coverage of the support packages with some boys receiving the household goods packages sometimes years after they returned to the community.	Individual
Conditional Cash Transfers (8)	Colombia	As part of a qualitative natural experiment study on the program Familias en Accion/Plan Colombia, households were identified who had similar characteristics to families targeted by armed groups for recruitment; these families also had children between 0-17 years old. The households with children under 6 years old received 50 USD and those with children between 7 and 17 received 14 USD per child and 28 for primary and secondary education. More than one million children benefited from the program over four years. The goal was primary prevention of recruitment but if applicable, also demobilization and reintegration. Conditional cash transfers for the target families increased school registration and decreased time spent in the labor market for children, and the overall results indicate that there were positive, significant impacts on demobilization initially, however, the results did not maintain over time. A higher presence of the program led to a higher effect on demobilization.	Individual
Vocational & educational training for	Rwanda	This case study came from an impact evaluation of a quasi-experimental pipeline study on "Skills Training for the Reintegration of Demobilized Soldiers with Disabilities" was	Individual

disabled CAAFAG (9)		<p>part of the Rwanda Demobilization and Reintegration Programme and targeted disabled CAAFAG at 10 training centers offering 27 types of training courses. Over 6 months to one year, participants could develop skills in welding, agriculture, plumbing, carpentry, tailoring, and cooking among other skills. Basic literacy and numeracy training was also included in the programming.</p> <p>The program resulted in increased employment by .6 in probability, preferable treatment by family and community by over .3, and income by 90% for CAAFAGs in the program. However, the probability of having a good relationship with neighbors did not significantly improve, but this may have been due to the strong pre-existing relationships. While the findings were largely significant, the low employment and income of the participants at the start may have allowed for larger returns on the training.</p>	
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How do interventions address MHPSS needs?

The needs of a child can vary within mental health and psychosocial support depending on the means and motivation behind the association with the armed group as well as the activities the child was engaged in (1, 12). "Those who have been active on the front line (and their parents) might need a different kind of assistance for rehabilitation and reintegration than those who are survivors of sexual violence or those who were marginally involved in fighting" (1). Group cohesion within the community, especially between CAAFAGs from the same group can be beneficial for reintegration and former CAAFAG may be brought in to help with program implementation (1, 12). The evidence shows that the psychological well-being of CAAFAG compared to other children in the same contexts was similar, although the CAAFAG were exposed to the "most extreme forms of trauma" and because of this finding, there is a need for overall systems strengthening to support all affected children (3). A barrier in evidence-based implementation is that there is limited rigorous published work on the effectiveness of these MHPSS interventions for CAAFAG (3). Another is that some intervention evaluations found that clients do not heal from just one psychosocial intervention and that accessibility should be considered for both girls and clients with disabilities (4). However, one review argues that there is an overemphasis on the trauma treatment, "neglecting the youth's resilience and coping abilities" and this emphasis on trauma treatment stigmatizes and isolates the youth as dysfunctional", this has been echoed in other studies (6, 11).

Interim Care Centers (ICC) have been used in multiple contexts including Mozambique, the DRC, and Uganda, with overall mixed-efficacy. In some cases, they have been shown to improve reintegration and provide necessary MHPSS to CAAFAG and in other cases, the ICC residency prevents reintegration into family units which is where key social learning takes place (4). An alternative to ICC residency could be foster families or kinship care, which allows individual care to the children and youth as anecdotal evidence indicated girls who went through foster programs instead of ICC had better family reintegration outcomes in the DRC (11). Independent living may also be an option but only in contexts where it is culturally acceptable for adolescent girls to be living by themselves. Other recommendations include placing at least two girls together in families or utilizing groups of friends to establish strong peer support systems.

An interesting observation by a 2009 evidence review was that MHPSS interventions are largely designed with a western paradigm in mind, transplanted into a global south context (6). It recommends instead, contextualizing the interventions to be more appropriate to the individual contexts in which they are being implemented, as a more localized understanding of trauma and recovery may increase the effectiveness of the interventions - this may explain the success of traditional cleansing and healing ceremonies for community reintegration.

For more information on traditional healing and cleansing ceremonies, see [Community](#)

Reintegration

Exemplar Interventions			
Intervention	Context & Location	Description & Impact	Environmental Cross-Cutting
Pilot study of community-based MHPSS (3)	DRC	This information came from an evidence review which provided limited details. The program was family-focused, integrating life skills leadership, relaxation training, and mobile cinema. The goal was to address stigma through modeling community acceptance. Community advisory boards of community leaders and youth addressed implementation challenges. The project was assessed weekly by adults and youth for improvements. One caregiver was brought by each participant to sessions working to develop better relationships, reduce conflict, and improve conduct. The pilot reported a significant reduction in traumatic stress systems among participant youth, a reduction in caregiver-reported conduct problems, reductions in internalizing symptoms, and an increase in prosocial behaviors.	Individual, Family, Community
DDR MHPSS provision component (4)	DRC	A review of 4 DDR programs found that while MHPSS programming achieved while spread demobilization, there were mixed results for the CAAFAG clients, there were also long delays in family reunification and limited planning for follow up, in line with the overall assessment of the review that follow up is rarely considered or followed through on in the programming. The MHPSS support included skills training, sports and religious programming, temporary interim care centers and counseling;	individual

How do interventions address physical health needs?

Children who have families who have ties to the armed groups or the stigma of being CAAFAG follows the child, which may interfere with the ability to access basic needs like medical care (3). In this case, community sensitization and reduction of stigma are needed.

For more information on stigma reduction, see [Community Reintegration](#)

4 Family Reintegration

Study #	Addresses Gender Dimensions	Economic & Education Intervention	MHPSS Intervention	Physical Health Intervention	Parenting Intervention	Family Perception Intervention	Community Stigma & Acceptance
1	●	●	○	○	●	●	○
2	○	●	●	●	●	●	○
3	●	●	●	●	○	○	○
4	●	●	●	●	○	●	●
5	○	○	●	○	○	○	○
11	●	○	●	●	○	●	○
17	●	●	●	●	○	●	○
18	○	●	●	○	●	●	●
19	○	○	●	○	○	●	●

How do interventions address parenting support of CAAFAG?

Research on CAAFAG and Family reintegration is often focused on positive parenting improvements with roughly equal programs focusing on the caregiver only or on both the caregiver and the child (1). Community stakeholders like teachers are not involved in these programs - however, associated family members like aunts, uncles, cousins, and grandparents may benefit from positive parent programs depending on the nature of families in the individual implementation contexts.

The content of parent interventions is recommended to be multi-component with elements of stress management and financial management being learning objectives (1). Combining parenting interventions with social support or MHPSS may also be beneficial (1, 11). Addressing MHPSS as a family unit can address the needs of children and families and improve parenting. MHPSS interventions for parents and caregivers can include: home visiting/visitations, Sugira Muryango ('Strong Families, Thriving Children', FamilyTalk), teaching recovery techniques, and "Problem Management Plus" (3). It is recommended that parenting programs include topics like: "communication skills, empathy, psycho-education on adolescent brain development and psychosocial needs of girls, how to positively support adolescent girls' decision-making and an understanding of their experience of association with AFAG" (11).

Parenting interventions must be devised with a gender lens and not assume a universal approach (1). Without this, the effectiveness and relevance decrease. The evidence recommends "circular learning" where caregivers and children mutually learn from each other and develop respect for each other, communication skill development is important for this to happen. With this, the children's views and experiences should be incorporated. Putting the experiences as well as drivers in conversation with the potential of caregivers to be mentors and meet the needs of the child is recommended.

The IRC's "Parents Make the Difference" shows that short-term interventions can be successful in improving discipline practices, but they must be technique-based, not just sensitization (1).

More information on Parents Make the Difference can be found in the [2014 Impact Evaluation](#),

The IRC’s “Strengthening Protection and Reintegration for Children” (SPARC) found through qualitative research in the DRC and CAR that caregivers worried that they would be unable to meet the needs of their returned children, potentially driving them back to the armed groups (21). Parents did not seem to have the skills for how to speak to their children about their experiences or to help them with the mental health needs of the child and the parent. “When asked about what type of support they needed, male and female caregivers mentioned wanting to build their knowledge and skills around child development, child wellbeing, and how to practice different approaches to discipline. A few also mentioned specifically wanting support with how to talk to their children about the ongoing conflict and their affiliation with the armed group.”

More information on SPARC in CAR can be found in the [2021 Research Brief in English](#) and in [French](#).

Exemplar Interventions			
Intervention Type	Context & Location	Description & Impact	Environmental Cross-Cutting
A Pilot study of community-based MHPSS (3)	DRC	The program was family-focused, integrating life skills leadership, relaxation training, and mobile cinema. The goal was to address stigma through modeling community acceptance. Community advisory boards of community leaders and youth addressed implementation challenges. The project was assessed weekly by adults and youth for improvements. One caregiver was brought by each participant to sessions working to develop better relationships, reduce conflict, and improve conduct. The pilot reported a significant reduction in traumatic stress systems among participant youth, a reduction in caregiver-reported conduct problems, reductions in internalizing symptoms, and an increase in prosocial behaviors.	Individual, Family, Community

How do interventions address familial perceptions?

Family reintegration is crucial for all genders of CAAFAG and evidence from multiple countries in Africa shows that children who reintegrate into accepting families have a much greater sense of comfort and reintegration (6, 11). However, parents and caregivers of CAAFAG may experience a range of emotions and perceptions of the child’s return depending on the context. The evidence seems to be biased towards addressing negative feelings around the child’s initial recruitment or abduction so that they experience shame, anger, or resentment that the child was associated with the group. However, the opposite may be true, that the caregiver may be “ideologically inclined” towards the armed group and has negative feelings about the child leaving the group (1). Families may need additional support as they may too face stigma from the community for having a CAAFAG in the family.

Exemplar Interventions

Intervention	Context & Location	Description & Impact	Environmental Cross-Cutting
Community & Family Acceptance campaign (4)	Sierra Leone	Youth CAAFAG were included in a family and community sensitization campaign meant to improve community and family acceptance of CAAFAG upon return to the community. While there were reported positive impacts on family sensitization, there was still an insufficient prevalence of family sensitization in the communities and the impact on community sensitization was not reported.	Family, Community
DDR community sensitization component (4)	DRC	A review of 4 DDR programs that included community acceptance programming through family and community sensitization found that there were inconclusive effectiveness with unclear short-term acceptance by community members or family members. A barrier to success was lack of clear tasks, definitions, and work plans for the sensitization activities.	Family, Community

5 Community Reintegration

While it is important to involve the community, especially community leaders, in designing the implementation, as well as the CAAFAG, evidence cautions that the environment and the actual histories should be included (1). Some evidence indicated that community leaders may bias the programming to benefit their relatives.

Study #	Addresses Gender Dimensions	Economic & Education Intervention	MHPSS Intervention	Physical Health Intervention	Parenting Intervention	Family Perception Intervention	Community Stigma & Acceptance
3	●	●	●	●	○	○	○
4	●	●	●	●	○	●	●
10	○	○	○	○	○	○	●
11	●	○	●	●	○	●	○
13	○	○	●	○	○	○	●
14	○	●	○	○	○	○	●
17	●	●	●	●	○	●	○
18	○	●	●	○	●	●	●
19	○	○	●	○	○	●	●

How do interventions address stigma and acceptance?

Social cohesion can be a strong support structure for CAAFAG and can help support children who are experiencing stigma in the community, especially if the cohesion is between children who have similar experiences (1). A recent study cited in an evidence review found that while women and girls experienced initially higher rates of stigma and lower rates of acceptance, 15 years after the conflict ended the male CAAFAG reported higher levels, indicating that the relative levels of stigma and acceptance shift over time (3). In light of this, long-term programs should be dynamic and respond accordingly to community perceptions.

Individual community roles may be targeted to address the stigma against and acceptance of CAAFAG. Religious leaders may have a lot of prestige in a community. The evidence is mixed in how they improve the acceptance of CAAFAG but does point to largely positive impacts on protecting the dignity of girls (11). The potential is there for the religious leaders to improve acceptance through public or noticeable relief of the ethical burdens placed on the CAAFAGs. One pastor in South Sudan justified this through a Christian lens, "I explain that we are all sinners and that God is ready to forgive us all, then I give absolution. Some want to confess publicly but it can also be done individually and quietly, for yourself." One qualitative study had CAAFAG reporting that teachers may have a significant role in addressing community stigma due to the respected status teachers have in the community as well as their everyday interaction with other youth and their parents (16). Peers may also be an avenue to decrease community stigma and improve acceptance as peer support appears to have a strong association with daily functioning, level of PTSD, and hope for formerly recruited children in Nepal (19). Quantitative data revealed a relationship between stronger peer-support networks and increased levels of hope, and between weaker peer-support and increased functional impairment and higher levels of PTSD during reintegration. Peer support might be particularly valuable in contexts where family-support is low. The researchers suggest that interventions targeting formerly recruited youth might approach them as though they were "children" and might not therefore meet the needs of adolescents who make up the majority of this population.

Sensitization campaigns and cleansing ceremonies or celebrations - both being common forms of stigma reduction and acceptance-increasing activities (3, 4, 10). They have been found to be successful in Uganda, Sierra Leone, and Mozambique when part of a multi-component program with components targeting other areas of need (e.g. economic and educational needs, MHPSS). When used, the ceremonies improved family acceptance and community reception. In some cases, the cleansing ceremonies have been used specifically for the reintegration of young women and can be used in conjunction with individual healing through activities specifically for the young women in addition to the larger community activities (10). However, a review of 4 DDR programs that included community acceptance programming through family and community sensitization found that there was inconclusive effectiveness with unclear short-term acceptance by community members or family members (4). A barrier to success was a lack of clear tasks, definitions, and work plans for the sensitization activities.

Exemplar Interventions			
Intervention	Context & Location	Description & Impact	Environmental Cross-Cutting
Community & Family Acceptance campaign (4)	Sierra Leone	This case study was identified in a review that provided limited programmatic details. Youth CAAFAG were included in a family and community sensitization campaign meant to improve community and family acceptance of CAAFAG upon return to the community. While there were reported positive impacts on family sensitization, there was still an insufficient prevalence of family sensitization in the communities and the impact on community sensitization was not reported.	Family, Community
Radio	Nigeria	An "edutainment" approach was used to increase CAAFAG	community

Program campaign (11)		<p>women and children’s community acceptance. Qualitative findings in a desk review indicated a positive response from community members and leadership as well as caregivers as well as increased acceptance of the idea of the girls going back to school</p> <p>The program included a weekly 15-minute radio drama series of CAAFAG trying to reintegrate into their communities and challenges they faced covering issues like the socioeconomic environment, COVID-19, social cohesion, and CAAFAG dignity. Each episode was followed by a round-table of guest speakers to address the topics raised by the program, allowing community members to call in and participate.</p>	
Participatory Action Research for Reintegration (13, 14)	Sierra Leon, Uganda, Liberia	<p>Because public activities were organized by the women and were viewed by the community as being activities of the women and not the NGOs, the events were seen to improve the social standing of the participants. Group cohesion also improved. Overall, 89% of young mothers reported they felt more supported and respected by the community but the findings greatly varied by context. Jealousy of the access and aid the women received was cited as a barrier to acceptance. There’s been a big change in the young mothers’ acceptance. Initially, the community saw them as fighters’ wives, and even their families rejected them. Now they earn money and support their families, and communities respect them. A good example of this is that the chief gave them land to do their collective work.” Community member, Liberia (14)</p> <p>Young mother CAAFAGs were gathered together into groups in multiple sites, participating in focus groups and learning to gather data to determine the best activities to support reintegration. The effects were monitored and supported by a community advisory group. The topics selected by the young mothers addressed livelihoods, health, and education. Activities were wide ranging and included activities like livelihood training and community sensitization. The funding per participant varied spending on the implementing agency.</p>	Individual, community
Teacher sensitization (20)	Nepal	<p>A program in Nepal for teachers addressed CAAFAG psychosocial needs, the emotional well-being of teachers, and the teachers’ teaching skills. This was meant to have a snowball effect where the behavior change of the teachers would lead to attitudinal shifts in other students and the wider community. The effects were analyzed through a qualitative case study.</p> <p>After 12 months of intervention activities, community support was reported by the CAAFAGs to have significantly increased compared to that reported by</p>	Community

		civilian children, and the support of teachers was also reported by CAAFAG to have increased as well. There were significant reported improvements in the youth feeling that teachers were interested in their experiences, of wanting to spend time with their teachers, wanting to share their feelings with their teachers, and feeling that teachers were proud of them.	
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6 Political/System Reintegration

While there is very limited evidence on how reintegration into larger systems such as politics may be accomplished, one study found that within CAAFAG populations, non-abducted children - those who chose to be associated with the groups, were "more likely to engage in prosocial behaviors" which can include participation in politics. (3). This is an indication of the difference in how subpopulations may need to be addressed when integrating into larger systems.

Study #	Addresses Gender Dimensions	Economic & Education Intervention	MHPSS Intervention	Physical Health Intervention	Parenting Intervention	Family Perception Intervention	Community Stigma & Acceptance
3	●	●	●	●	○	○	○
4	●	●	●	●	○	●	●
5	○	○	●	○	○	○	○

7 Bibliography


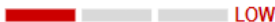







EVIDENCE BASE

The literature search was conducted between November 8 and November 14, 2022. Google Scholar and humanitarian databases were utilized for the search. The search was limited to literature published between 2002 and 2022 and published in English - however, if literature in French or Spanish was captured, they were identified too. Keywords were identified by the scoping document, organized by intervention design, outcome(s), targeted populations, alternative(s), and context. 125 pieces of literature were originally identified via title and abstract review out of the total 2662, after filtering the literature the remaining 20 pieces of literature were analyzed for this review. Using the [E2A critical appraisal tool](#)² All of the relevant included literature was evaluated for its confidence measure, with the average impact score being medium. The measures and types of literature may be found in the bibliography.

² The confidence measurements are derived from the 2021 version of the Evidence to Action Confidence Appraisal tool. The tool is in development as of writing but the scores are accurate to the tool as of December 1, 2021. The tool is meant to help assess the evidence according to field-standard measures of regions and quality of humanitarian and development studies including costing information, applicability to a specific context, the inclusion of vulnerable peoples in design and impact, etc. Operational and impact evidence is assessed separately but may come from the same pieces of literature if that study and published piece include the evidence. The key to understanding the confidence scores reflected in the bibliography, is included at the end of this document.



Note that some literature was discarded at the title-abstract review stage due to paywall barriers. Additionally, as much of the literature included are comprehensive documents like systematic reviews, desk reviews, and evidence synthesis reports individual studies discussed in the aforementioned documents are not separately included here unless further information was needed.

Systematic and Literature Reviews

Study #	Citation	Confidence Score
1	Articolo12 and International Rescue Committee (2020). Children associated with armed forces and armed groups – prevention and reintegration: Desk review to inform the “Growing Stronger Together!” parenting program. Washington DC: IRC and USAID.	Impact:  MEDIUM
2	Literature Review to Inform the Development of a Joint Global Programme on CAAFAG Reintegration. Child Frontiers Ltd. (2022).	Impact:  LOW
3	United Nations Children’s Fund, Mental Health and Psychosocial Support in Children Associated with Armed Groups and Armed Forces Programmes: Evidence Review, UNICEF, New York, 2022.	Impact:  MEDIUM
4	Campbell, K. (2017). Interventions to Assist the Disarmament, Demobilization, & Reintegration of Former Child Soldiers in Sub-Saharan Africa: A Systematic Review [University of Ottawa]. https://ruor.uottawa.ca/handle/10393/35997	Impact:  LOW
5	Caffin, J., & Kalyanpur, A. (2014). What do we know about economic strengthening for family reintegration of separated children? (p. 36). The Child Protection in Crisis (CPC) Network. http://www.cpcnetwork.org/wp-content/uploads/2014/11/What-do-we-know-about-economic-strengthening-for-family-reintegration-of-separated-children.pdf	Impact:  MEDIUM
6	Tonheim, M. (2009). Reintegration of Child Soldiers: A Literature Review with Particular Focus on Girl Soldiers’ Reintegration in the DRC (p. 84). Center for Intercultural Communication (SIK). https://vid.brage.unit.no/vid-xmlui/bitstream/handle/11250/162260/2009-1.pdf?sequence=1&isAllowed=y	Impact:  LOW
7	Kaufmann, J. (2016). The Economic Efficacy of Reintegration Assistance for Former Child Soldiers. Undergraduate Economic Review, 13(1). https://digitalcommons.iwu.edu/uer/vol13/iss1/8	Impact:  MEDIUM
11	Girls Associated with Armed Forces and Armed Groups: Lessons learnt and good practices on prevention of recruitment and use, release and reintegration. (2020). USAID, ACPHA, UNICEF, Sida, PLAN.	Impact:  MEDIUM Operational:  MEDIUM







	https://alliancecpa.org/sites/default/files/technical/attachments/tn_gaa_fag_eng.pdf	
12	Littman, R. (2017). Children and Extreme Violence: Insights from Social Science on Child Trajectories Into and Out Of Non-State Armed Groups. United Nations University. https://www.alnap.org/help-library/children-and-extreme-violence-insights-from-social-science-on-child-trajectories-into	Impact:  LOW







Mixed-Method Studies

Study #	Citation	Confidence Score
10	Ager, A., Stark, L., Olsen, J., Wessells, M., & Boothby, N. (2010). Sealing the Past, Facing the Future: An evaluation of a program to support the reintegration of girls and young women formerly associated with armed groups and forces in Sierra Leone. <i>Girlhood Studies</i> , 3(1), 70–93. https://doi.org/10.3167/ghs.2010.030106	Impact:  MEDIUM
19	Morley, C. A., & Kohrt, B. A. (2013). Impact of Peer Support on PTSD, Hope, and Functional Impairment: A Mixed-Methods Study of Child Soldiers in Nepal. <i>Journal of Aggression, Maltreatment & Trauma</i> , 22(7), 714–734. https://doi.org/10.1080/10926771.2013.813882	Impact:  MEDIUM

Qualitative Studies

Study #	Citation	Confidence Score
8	Pena, P., Urrego, J., & Villa, J. M. (2017). Civil Conflict and Conditional Cash Transfers: Effects on Demobilization (Author Accepted Manuscript). <i>World Development</i> , 99, 431–440. https://doi.org/10.1016/j.worlddev.2017.05.031	 MEDIUM
9	Igei, K., Takio, K., Aoyagi, K., & Takasaki, Y. (2020). Vocational training for demobilized ex-combatants with disabilities in Rwanda (MWC Research Paper No. 2001). https://www.tandfonline.com/doi/full/10.1080/19439342.2021.1964575	 MEDIUM
13	Veale, A., Worthen, M., & McKay, S. (2017). Transformative spaces in the social reintegration of former child soldier young mothers in Sierra Leone, Liberia, and Northern Uganda. <i>Peace and Conflict: Journal of Peace Psychology</i> , 23(1), 58–66. https://doi.org/10.1037/pac0000212	 LOW

14	McKay, S., Veale, A., Worthen, M., & Wessells, M. (2010). Community-Based Reintegration of War-Affected Young Mothers: Participatory Action Research (PAR) in Liberia, Sierra Leone & Northern Uganda. University of Wyoming. https://resourcecentre.savethechildren.net/pdf/3004.pdf/	Impact:  LOW
15	Aravani, E. (2016). CAAFAGs & Post-conflict education in the Republic of South Sudan: Back to “normalcy” or full speed ahead to radical changes? [University College London]. http://rgdoi.net/10.13140/RG.2.2.31043.20003	Impact:  LOW
16	Betancourt, T. S., Simmons, S., Borisova, I., Brewer, S. E., Iweala, U., & de la Soudière, M. (2008). High Hopes, Grim Reality: Reintegration and the Education of Former Child Soldiers in Sierra Leone. <i>Comparative Education Review</i> , 52(4), 565–587. https://doi.org/10.1086/591298	Impact:  LOW
17	We Came Back with Empty Hands: Understanding the Disarmament, Demobilization and Reintegration of Children Formerly Associated with Armed Groups in the Democratic Republic of the Congo. (2013). Eastern Congo Initiative and Harvard Humanitarian Initiative.	Impact:  LOW
18	Mallik Egonsson, H., & Lagerholm, K. (2013). In search for the road to resilience-A qualitative minor field study on risks, protective processes and efforts to create resilience among former child soldiers in Northern Uganda. Lund University.	Impact:  LOW
20	Kohrt, B. A., Jordans, M. J. D., Koirala, S., & Worthman, C. M. (2015). Designing mental health interventions informed by child development and human biology theory: A social ecology intervention for child soldiers in Nepal: Designing Mental Health Interventions. <i>American Journal of Human Biology</i> , 27(1), 27–40. https://doi.org/10.1002/ajhb.22651	Impact:  MEDIUM
21	Perspectives of families on adolescents involvement in armed groups. (2021). [Research Brief]. International Rescue Committee.	n/a

KEY FOR UNDERSTANDING EVIDENCE CATEGORIZATION: Confidence Measures	
<p><i>Impact:</i></p> <p> HIGH High level of confidence in impact data</p> <p> MEDIUM Medium level of confidence in impact data</p> <p> LOW Low level of confidence in impact data</p>	<p><i>Operational:</i></p> <p> HIGH High level of confidence in operational data</p> <p> MEDIUM Medium level of confidence in operational data</p> <p> LOW Low level of confidence in operational data</p>

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