

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN CHILDREN ASSOCIATED WITH ARMED FORCES AND ARMED GROUPS PROGRAMMES

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 **THE MHPSS COLLABORATIVE**
FOR CHILDREN & FAMILIES IN ADVERSITY

ADVOCACY BRIEF

Since 2005, the United Nations has verified more than 266,000 grave violations against children by parties to conflict – with over 20,000 verified cases every year since 2014. In 2020, there were a total of 26,425 violations, including 8,500 children recruited and used by armed forces and armed groups.¹

Each one of these violations represents an individual child who has had to bear more fear, pain, distress and loss than anyone should confront in a lifetime. And they are happening in direct contravention of the international laws and norms that exist to protect civilians, including children, in war.

These figures are also just the tip of the iceberg, since access and security constraints, and the shame and pain that child and family survivors suffer, often hamper the documentation and verification of grave violations.

Armed conflict has a devastating impact on children, subjecting them to violence, forced displacement, separation from family, extreme disruptions in basic services, and a loss of learning and employment opportunities. It also imposes suffering through serious violations of children's rights, such as sexual exploitation, rape and other grave sexual violence, killing and maiming, and recruitment into armed forces and groups.

Recruitment or use of children in armed forces and armed groups refers to compulsory, forced or voluntary conscription or enlistment of children into any kind of

armed force or armed group. It is one of the six grave violations against children in times of war,² yet the number of recruited children continues to rise. Between 2016 and 2018, children were used in conflict in at least 18 countries, and at least 46 UN Member States still recruited children into their armed forces.³ In 2020, the UN verified at least 8,500 children recruited and used by parties to conflict. The real number is likely to be much higher.

Who are the children associated with armed forces and armed groups and how do they end up in this situation?

Children associated with armed forces and armed groups (CAAFAG) are of different ages, genders and ethnicities. Boys and girls are used by armed forces and armed groups in a number of different ways, including as fighters, cooks, porters, messengers and spies. They are often also subjected to sexual exploitation. Some become involved through intimidation, abduction or forced marriage. Others might see enlistment as a survival strategy when faced with poverty, lack of access to education and employment, domestic violence or oppressive gender norms. While the experience of girls associated with armed forces and armed groups is largely overlooked, they are no less affected than boys when it comes to directly participating in or witnessing armed conflict.⁴

1 United Nations (2021). Pioneering report continues to help children survive conflict. Retrieved 14 December 2021.

2 UNICEF (2021). Six grave violations against children in times of war. Retrieved 14 December 2021.

3 Child Soldiers International (2018). Child Soldiers World Index reveals shocking scale of child recruitment around the world.

4 Fore, Henrietta (2021) OPINION: Female child soldiers often go unseen but must not be forgotten. Retrieved 14 December 2021.

What is the impact of association with armed forces and armed groups on children?

Association with armed forces and armed groups exposes children to physical, psychological and sexual violence and profoundly disrupts their development and later lives. On leaving armed forces and armed groups, children and their families often experience high levels of stress, including socioeconomic adversity, stigma and discrimination. Lost educational opportunities and difficulties in achieving key life milestones make many children feel ill-equipped to contribute to their family and local economy when they return to civilian life. Some formerly recruited and used children are detained for extended periods, tried as participating in hostilities considered illegal, and exposed to torture and uncertainty. Being separated from their families and losing loved ones also threatens their wellbeing and healthy development.

MHPSS interventions are essential to all CAAFAG programmes.

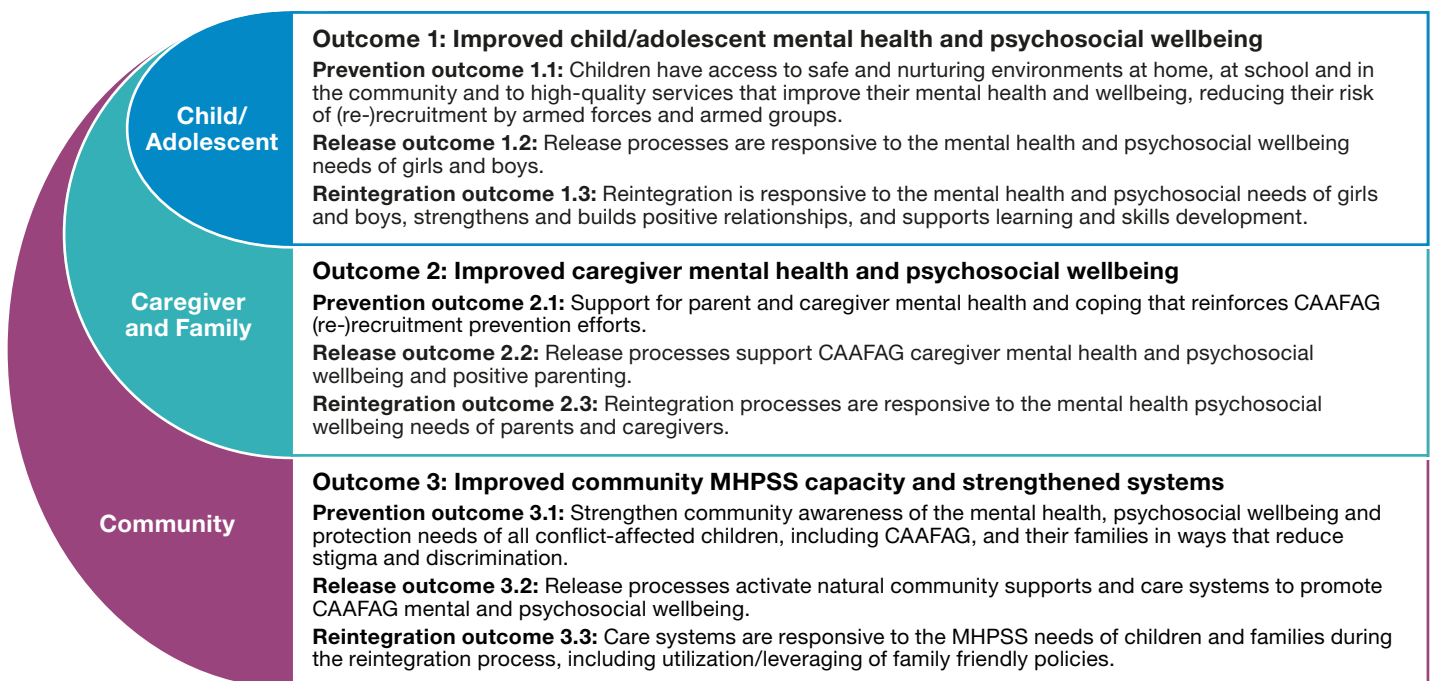
Why is Mental Health and Psychological Support (MHPSS) vital for children associated with armed forces and armed groups?

War takes a devastating psychological toll on children, which is why MHPSS is a vital component of all systems that respond to the needs of conflict-affected children and their communities.

It is imperative that the specific needs of children associated with armed forces and armed groups are considered within these systems. This can prevent new recruitment and re-recruitment of children, support their recovery and reintegration, and provide the resources needed to promote and sustain their wellbeing. MHPSS supports the reintegration of children by promoting family and community acceptance, reducing stigma and discrimination, and ameliorating feelings of shame and guilt.

Multi-sectoral, multi-layer MHPSS should cut across all CAAFAG programming domains to improve the mental health and psychosocial wellbeing of CAAFAG, their parents/caregivers and community members, as well as to prevent the recruitment of children and support their release and reintegration (see Figure 1 for programming outcomes).

Figure 1 MHPSS outcomes for prevention of recruitment, release and reintegration programming



Pressing concerns

1. Conflict-affected children, including CAAFAG, have a higher risk of mental health and psychosocial problems, including depression, anxiety and post-traumatic stress disorder (PTSD), as well as difficulties with stigma and social exclusion.
2. In the absence of comprehensive and long-term mental health and psychosocial support, these difficulties can be long lasting and intergenerational.
3. Time lost to association with armed forces and armed groups is time spent away from school, resulting in lost opportunities for optimal mental, social and emotional development.
4. CAAFAG may return to environments and communities that can be stigmatizing, severely deprived of resources and opportunities, and culturally unfamiliar.

Adverse experiences in childhood can affect children's development and contribute to poor mental health and acute psychosocial needs for the rest of their lives. However, with the right support, children recruited and used by parties to conflict can experience a boost in resilience, achieve positive outcomes, and successfully reintegrate into their communities.

Many children, such as CAAFAG, who have been exposed to violence and adversity have experienced trauma. However, it is inappropriate and potentially harmful to assume that all children will be traumatized by their experience.

interventions should be multi-layered, accessible and inclusive of all affected groups, acknowledging the widespread effects of conflict on communities. If tailored interventions are considered necessary for some groups, such as girls or boys, they must account for cultural- and context-specific intergroup dynamics and be designed and implemented sensitively in ways that do not make other members of the community feel left out or resentful.

MHPSS in CAAFAG programming should cultivate supportive social environments, address children's basic needs, preserve their dignity and agency, and uphold their rights. Responses to support the mental health and psychosocial well-being of children associated with armed forces and armed groups should be designed with the understanding that each child's needs and experiences will be unique. Active engagement with affected children, caregivers and communities is called for to identify and strengthen culturally – and contextually – relevant coping mechanisms that are safe, acceptable and equitable.

MHPSS must form part of all levels of response for CAAFAG, from prevention of recruitment to release and reintegration. MHPSS programming should aim to lessen context-specific risk factors and strengthen context-specific protective factors associated with the recruitment and re-recruitment of children. Mental health and psychosocial services, programmes and

Health, social and education systems should be equipped to provide support to all affected groups and be sensitive to the specific needs of CAAFAG and other conflict-affected children. Strong, resilient, and sustainable systems require political commitment, effective leadership, policies that hold key actors accountable, and advocacy that can secure financing and technical assistance. As key actors within these systems, staff (e.g. case workers and managers) should have access to systematic and rigorous MHPSS training and supervision, clear pathways for professional development, and access to support to protect their mental health, psychosocial wellbeing, and safety and to prevent burnout.

Mental health and psychosocial support efforts that exclusively target CAAFAG can intensify stigma, foment resentment, and undermine system strengthening.

Key actions

- ✓ **Integrate MHPSS in all programmes for CAAFAG and other conflict-affected children:** Donors and implementing agencies should recognize MHPSS as a cross-cutting issue and include actors responsible for coordinating the MHPSS response with other services. MHPSS should be integrated into health and social services as well as programmes aimed at restoring schooling and livelihoods to enable successful long-term reintegration and prevent (re-)recruitment of children. MHPSS services should be offered to CAAFAG, their parents/ caregivers, and community members.
- ✓ **Cultivate safe, supportive, nurturing, non-discriminatory environments:** Programme developers and implementers should work with existing leadership structures within the community and engage key influencers in ways that cultivate community and family acceptance of former CAAFAG. Efforts to address stigma should begin by assessing the barriers to community acceptance and engaging with safe, ethical and equitable local reintegration practices. Policy makers, donors and implementing agencies must endorse policies that discourage the separation of children from their caregivers and siblings.
- ✓ **Strengthen health, education and child protection systems to enable improved access to mental health and psychosocial support services for all affected groups:** National governments should increase investment in building strong and sustainable health, education and child protection systems to ensure that MHPSS initiatives do not end before they have become fully effective. Schools and other learning spaces should be safe environments where CAAFAG and other conflict-affected children can express themselves, process their experiences and develop without being stigmatized or inappropriately pathologized.
- ✓ **Actively engage CAAFAG, other conflict-affected children, families and communities:** Programme developers and implementers should facilitate the safe, ethical and meaningful participation of CAAFAG and other conflict-affected children, their families and communities to better understand their experiences and identify and address their immediate and long-term MHPSS needs.
- ✓ **Work towards evidence-based and evidence-informed approaches to support the mental health and psychosocial wellbeing of CAAFAG and other conflict-affected children of different genders and ages:** Donors and implementing agencies should base MHPSS programming for CAAFAG and other conflict-affected children on the latest evidence to ensure that it is effective, relevant and acceptable.

A UNICEF-funded initiative, endorsed by the Inter-Agency Standing Committee (IASC) Children and Family Workgroup and the Child Protection Alliance CAAFAG Taskforce, provides a package of evidence-based MHPSS approaches and tools for CAAFAG.

- **MHPSS in CAAFAG Programmes Evidence Review** includes a synthesis of CAAFAG-related evidence-based MHPSS programming across all layers of the IASC MHPSS pyramid of intervention.
- **MHPSS in CAAFAG Programmes Operational Guidance** includes guidance on evidence-based MHPSS. As a complement to the CAAFAG programme development toolkit, the operational guidance highlights specific MHPSS issues in CAAFAG programming including, approaches, interventions, tools and key competencies.
- **MHPSS in CAAFAG Programmes Contextualization Guidance** includes key considerations for the contextualization of MHPSS programme responses and tools for adapting to context.
- **MHPSS in CAAFAG Programmes Advocacy and Dissemination Package** includes tools that can be used for dissemination and advocacy for further development and research.

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