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The views, opinions, and analyses expressed in this volume are those of the authors, and do not necessarily reflect the official policy or position of the Dallaire Institute for Children, Peace and Security, Dalhousie University, or the authors' respective employers.

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ABOUT THE COVER ART

"After 32 years in the Canadian Army, and another 5 years working with the Dallaire Institute for Children, Peace and Security, the nature and extent of moral injury became more apparent to me, both in myself and others. Moral injury affects everyone faced with moral dilemmas they are unable to resolve. Children who are recruited and used in armed violence face the same dilemmas and moral injury as the professional soldiers who encounter them. This insidious injury resides within, regardless of the exterior display of stability and can affect them for the rest of their lives."

Bill Watkins is a retired Lieutenant-Colonel who recently served as the Director of Instructional Design and Capacity Building Programmes at the Dallaire Institute. He is currently a PhD student at Leiden University examining the leadership influences in recruitment and radicalization in political violence. He began exploring visual art focusing predominantly on portraiture but has always felt a strong attachment to the underlying message of art and its power to generate critical thinking.

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Photo caption: The launch of the Vancouver Principles at the UN Peacekeeping Defence Ministerial in Vancouver, Canada on 15 November 2017.
Photo: The Dallaire Institute for Children, Peace and Security.

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Participants at the 2019 Vancouver Principles Workshop in Kigali
Photo: The Dallaire Institute

ABOUT THE DALLAIRE INSTITUTE

The Dallaire Institute for Children, Peace, and Security was founded by General Roméo Dallaire in 2007 and Dalhousie University, located in Halifax, Nova Scotia, has provided a home to the Institute since 2010. General Dallaire first experienced the issue of child soldiers as the Force Commander of the United Nations Assistance Mission for Rwanda during the 1994 genocide. During this time, General Dallaire realized that he and his troops were ill-prepared to face them. Drawing on this experience, the Dallaire Institute was created with the unique premise that preventing violence against children requires a dual lens that is focused on prioritizing the protection of children, as well as understanding the significant operational impacts upon security sector actors.

Through interdisciplinary and applied research, global advocacy, academic and practitioner training, and community engagement, the Dallaire Institute advances innovative strategies for preventing the recruitment and use of children in armed conflicts and violence. Uniquely, the Dallaire Institute works directly with the security sector to implement this prevention strategy. The Dallaire Institute has fifteen years of experience working directly with security actors, including the military, police, intelligence, and corrections, to strengthen operational, strategic, and tactical capacities to prevent the recruitment and use of children in armed conflicts and violence.

The Dallaire Institute advances understanding about the fragile contexts that threaten children, increase their vulnerability to extreme violence and insecurity, and diminish their agency to positively impact change. These challenges perpetuate cycles of inequality and violence that continue over generations. Through this work the Dallaire Institute hopes to build a more holistic, prevention-oriented approach to the issue of children recruited and used in armed violence that complements current efforts while providing innovative solutions with the ultimate vision of building a world where children are at the heart of peace and security.

LGen Roméo Dallaire, Rwanda, 1994.
Used under permission from the National Speakers Bureau.

ABOUT ALLONS-Y: JOURNAL OF CHILDREN, PEACE AND SECURITY

In January 1994, General Dallaire, then the Force Commander of the United Nations Assistance Mission for Rwanda (UNAMIR), sent a fax to UN headquarters in New York warning of the impending genocide. He signed the fax with the line "peux ce que veux. Allons-y" – "Where there's a will, there's a way. Let's go." At the time, there was not a will among the international community, with lethal results for nearly a million Rwandans.

Since then, General Dallaire has worked tirelessly to ensure that there is both a will and a way to prevent mass atrocities in the future. However, action must be informed by understanding for it to be effective, and this has led to General Dallaire's focus on preventing the recruitment and use of children. The creation and adoption of the Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers in 2017, is helping to focus and drive action by the international community to prevent the recruitment and use of children through ensuring that security sector actors are trained and prepared to prevent recruitment. Doing so requires learning from experiences and sharing knowledge on all aspects of training, education, research, and prevention in this area.

Published since 2016, the Dallaire Institute journal *Allons-y* now focuses on supporting the implementation of the Vancouver Principles. In this and future issues, commentaries, peer-reviewed research and policy articles will focus on all aspects of the implementation of the Vancouver Principles. The articles provide guidance, policy recommendations, and new knowledge to support the international community's work to end the recruitment and use of children.

LETTER FROM THE EDITORS

By Catherine Baillie Abidi & Dustin Johnson

Allons-y: Journal of Children, Peace and Security focuses on centering children in evolving peace and security practices by exploring children's significance to long term peace and security. A Children, Peace and Security (CPS) framework builds from the perspective that if children are prioritized in the peace and security agenda, global interventions would shift from responding to violations and temporarily disrupting cycles of violence, to instead focus on the prevention of violence. Lt General (ret'd) Roméo Dallaire has conveyed this perspective for many years by sharing the consequences of encountering children recruited and used in violence, and the limitations of intervening after violence. Inspired by General Dallaire's experiences during the genocide in Rwanda, and the many armed forces personnel who have shared their stories of the personal and operational impacts of encountering children during deployments, this seventh volume of *Allons-y* explores the increasing moral complexities of armed conflict, the mental health consequences of encountering children in conflict contexts, and the importance of effectively caring for those who endure moral injuries.

As authors in this volume articulate, the psychological effects of encountering children in armed conflict can be significant and are increasingly understood as distinct from other forms of trauma due to complex social, ethical, and moral elements. The Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers, a leading instrument championing the importance of understanding children within peace operations, commits to ongoing support for research on the impacts of encountering children and to improving pre-deployment preparation as well as post-deployment mental health support. Principle 13 – Mental Health – recognizes that encountering children can involve a "sharp dichotomy between the simultaneous perception of child soldiers as both threats and victims" (Government of Canada, 2019). In this regard, the Dallaire Institute, in partnership with Mount Saint Vincent University, the Centre for Addiction and Mental Health, the Lawson Health Research Institute, the Canadian Institute for Military and Veteran Health Research,

the Atlas Institute for Veterans and Families, and Director General Military Personnel and Research are in the process of conducting a multi-phased research study on the effects of exposure to children during military service. The aim of the research is to inform and enhance training, policy and prevention strategies to better prepare personnel for complex deployments that involve children, and to improve care for those who have experienced mental health difficulties in the aftermath of these experiences. Publication of the research findings are anticipated in the fall of 2023.

We hope the reflections from Veterans who share personal stories of encountering children during deployments, the impacts of these encounters, and their hopes for the future inspire further understanding and dialogue. We hope the insights from practitioners who analyze current practice and policy in relation to care and spiritual support will lead to enhanced prevention and care practices. And we hope that the research articles which challenge the language and social frameworks we use to describe and understand moral injury, and that illustrate the significant impacts that recruiting and using children in violence has on children, communities and armed forces personnel, will create opportunities for continued dialogue, prevention-oriented actions, and new collaborations in support of a world where children are at the heart of peace and security.

FOREWORD

Lieutenant-General (ret'd) The Honourable Roméo Dallaire
Founder of the Dallaire Institute for Children, Peace and Security

The increasing complexities of modern conflicts are creating new moral ambiguities, which are intensified by the increased engagement of children. The recruitment and use of children in armed conflict is unthinkable, and yet, this grave violation continues year after year. With the advancement of technology, children are being forced to perform even more roles, often glorified as service to country. As more children are exposed to the chaos of armed conflict and raised in the context of generational conflicts, violence becomes the norm and opportunities for creating lasting peace diminish. As adults we have a responsibility to prevent children from being used as weapons of war. We have a moral and ethical obligation to challenge the normalization of children engaged in violence, and to protect our future – which means placing children at the centre of conversations about conflict as well as peace.

The Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers is a leading instrument which centres children within peace and security. Among the seventeen principles, Principle 13 – Mental Health – is focused on understanding the unique impacts of moral dilemmas involving children during deployment. Principle 13 argues for support for research, policy development, and training advancement to better prepare peacekeepers and other security actors encountering children on mission, and to improve care for those who suffer subsequent moral injury. This volume of Allons-y responds to the call for research to enhance our understanding of moral dilemmas and moral injuries during increasingly challenging times.

> *Severe mental trauma, much like a deep cut or a malignant tumour, can fester and spread if left to itself, until the entire system is overwhelmed and succumbs. My injury started in Rwanda, but it was exacerbated in Canada.*
> – Waiting for First Light

Being unable to protect children in the midst of battle has a profound impact on we who serve, as well as the children themselves and their families and communities. The ethos of most armed forces is built on a notion of service, honour, and the protection of the most vulnerable. When that ethos is broken, there can be severe, even lethal, consequences. I have shared my own story of encountering children throughout the genocide in Rwanda, and our collective failure to stop the horrors. And in my book Waiting for First Light, I reveal the depth of my decades-long battle with the Operational Stress Injury sustained as a result of that mission. I explain how horrific direct encounters with children can be; but also, how the failure of institutions (civilian and military) to prepare personnel for encounters with children, and to prevent and care for the mental health consequences associated with moral dilemmas during deployments, greatly intensifies moral injury.

> *We use that term 'gut-wrenching' to describe grief or anguish but it's not your stomach that's hurting… It is deeper, in your soul.* – Waiting for First Light

Over the years countless men and women have shared with me their stories of suffering the consequences of encountering children during their service. They have confided feelings of shame, anger and guilt. We describe them as the 'walking wounded' – those with invisible injuries who are often sidelined professionally and left to heal alone. It is daunting to navigate a healing journey alone, especially when your injury has resulted from your service. We owe those who serve and sacrifice, so very much more.

COMMENTARY ARTICLE

REMEMBRANCE DAY 1971

By Colonel Fred “Toot” Moar

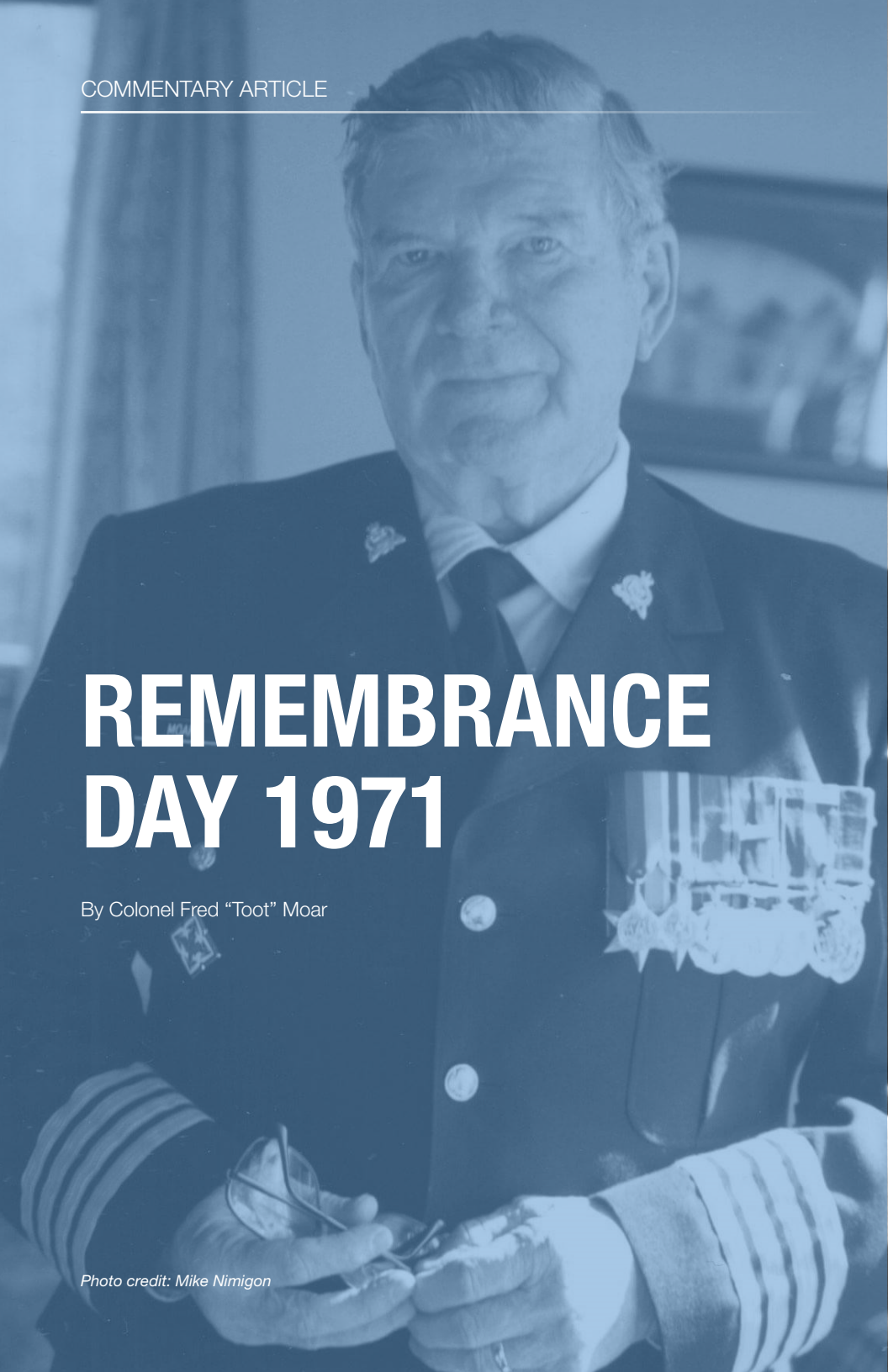

Photo credit: Mike Nimigon

Editors' Note: The following speech, shared by Colonel Moar's grandson, offers reflections from a Canadian WWII Veteran from the North Shore Regiment, who thoughtfully illustrated the complexities of armed conflict, the humanity that exists amid extreme contexts, and the lasting impacts of the moral dilemmas that arise, especially in relation to children. Colonel Moar remained steadfast in his service for a peaceful world and was greatly respected for how he championed care for fellow Veterans.

Thank you for inviting me...

In 1939 life on the Miramichi – drab, colorless. Today – we people cut a rather sorry figure in the eyes of youth. What I'm going to speak about is I'm sure to you a bit of a drag. Today we are not, like, with it. And the action is over our heads and you may be quite right. But many young people lived and died in the days of our youth and time, and it is these people that I would like to recall for you, very briefly, today.

Joining the Army, Navy, Air Force, or Merchant Marine in those days of 1939 was to us glamorous. The thoughts of far away places, excitement, girls, the uniform, and girls, and yes – money, all $39 each month. Life was happy and carefree except for a few officers and sergeants who endeavoured to make life miserable for us at times. But out of all of this came a sense of purpose, a feeling of belonging. Ambition and incentives took their place – you know in the service you could be anything you wished to be, it all depended on you and how hard you wanted to work and study. This is true also of any aspect of life.

I revisited Woodstock sometime ago, not the Woodstock of rock fame, but the town on the banks of the Saint John River in Western New Brunswick. Our Unit was stationed there some 30 years ago and as I retraced those steps that I had taken with so many of my friends, if I learned anything from the visit and from my years in the service it is simply this: "the total and absolute futility of war, the wasted years, the broken families, that shattered dreams, and the twisted and tortured cities and their people". To many of us the greatest problem of all – the search for peace of mind when it was over. Many of us overcame our fears, we persevered and conquered, but others did not. Don't scoff at them, be tolerant. Some men lost their minds and were committed to mental institutions where they will remain for the rest of their natural lives. In each one of this Valiant group who served their country was a spark of greatness, pride in their unit, a love of home and Country.

Let me open a door for you and turn back the pages of time to a hot, dry, stinking afternoon in August 1944 on a Hilltop outside the small village of Sassy in Normandy, France. The Company I commanded was ordered to clear the village of the enemy. This meant it had to be done with the men, tools, and weapons at our disposal. Do you know what this means? It

means death to someone – Friend or Foe. As we advanced across the wheat fields we came under enemy fire, real live honest-to-god bullets and mortar shells. It was quite obvious to me we were in for trouble, the F.O.O. [Forward Observation Officer] who was with me from the artillery was available to call down shells and fire on any predetermined point or otherwise if and when required. The Canadian soldiers began to fall and the cries of the wounded were in my ears when I ordered the officer to fire the battery. They did. All 24 guns.

In the evening of the same day, after the village had been taken and cleared and we regrouped for the night before starting again at daybreak or sooner, the people of the village came out of their cellars and fields and began moving back towards their homes. Since I was the Senior Officer of the occupying forces, I was invited to the home of the mayor to be present when they opened and drank the "liberation wine". It was almost dark before I was able to get away and with another officer I went to the home, shell marked and darkened. With the Enemy only a few kilometres away, it was hardly a haven to consider. On arrival we were asked to partake of their humble meal – a frugal one at Best, only a rabbit stew, but prepared with grateful thanks to the tall Canadians from across the sea who had freed their country and town from the Invaders who had occupied it for many years. The enemy had a habit of sneaking aircraft over newly occupied ground at dusk of the day it was captured. To add to this confusion these aircraft dropped hundreds of small AP [anti-personnel] bombs the size of a can of Pepsi. This type of missile wreaks havoc with troops on the ground. The humble meal had hardly begun when the dull throb of enemy aircraft overhead signalled the beginning of the raid. We quickly blew out the single candle and sat quietly in the semi-darkness. The first stick of bombs landed quite close and the house shook and rocked gently. Suddenly I heard the cries of a child in mortal terror – into the room ran a little girl not more than four or five years old. Since I was closest to her, I held up my arms and she burst into them. I raised my head and looked at the Mayor. He quietly said, "She is the child of a neighbour. Her father is dead and her mother and older sister were killed when the shells fired this afternoon. We're going to bury them together at daybreak. They are in the next house lying on the floor."

The bombing continued, and as I held that trembling little body wracked with great sobs close to my chest, I prayed to God that the child I cradled would never know that the great Canadian from across the sea, whose strong arms held her tenderly as if she were his own child, and the man who had ordered the shelling that killed her mother and sister was the same person.

I have had many waking hours thinking of this situation, but when I think, this event is compounded by others and others until they all run together like a great tapestry.

So there, I have tried to tell you "like it was" to one individual on one day in one year. I am not, nor is any other veteran, looking for your pity. I did what I had to do as others before me

and others after me had to do. We are the past generation in this life. You are the present. If it is within your power to do so, abolish war and strife and all its inherent effects. We of the past have lived through this terrible event and will be affected by it for the rest of our natural lives. Remember those young men and women who never returned to this wonderful country and who sleep, as Sir Rupert Brooke in his memorable poem "The Soldier" said, that "there is some corner of a foreign field that is forever England".

I implore you to take a solemn vow that you will do everything in your power to see that war, Civil or otherwise, never happens again. Thank you.

COMMENTARY ARTICLE

A VETERAN'S JOURNEY -

Reflecting on the Impacts of Complex Peace Operations Involving Children: A Call for Reflection, Reaction and Proactive Responses

By Colonel (ret'd) Roberto Gil
& Dr. Catherine Baillie Abidi

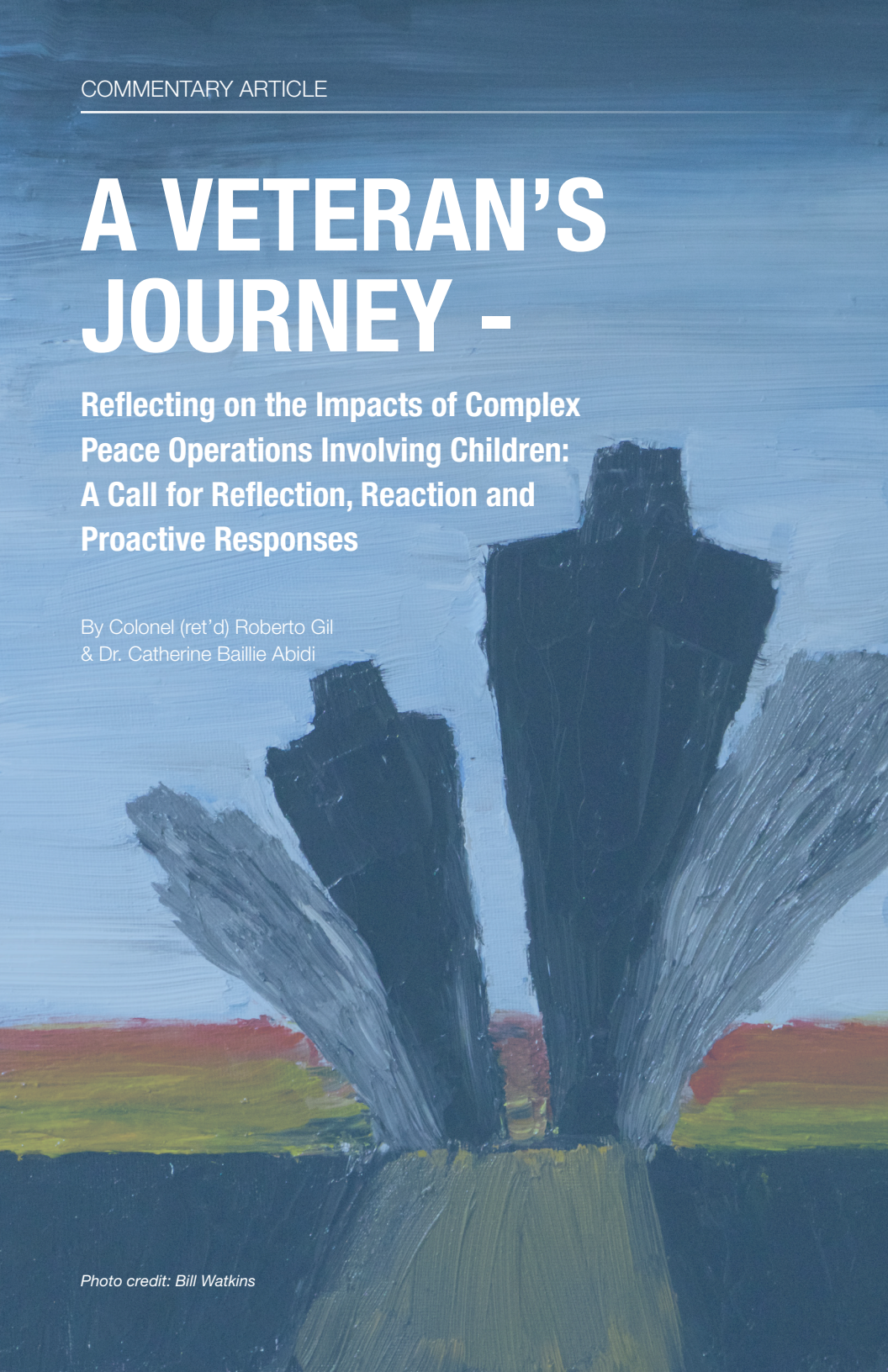

Photo credit: Bill Watkins

Editors' Note: Publishing commentaries reflects our commitment to methodological pluralism and the importance of experiential knowledge. This commentary captures a conversation between Colonel (ret'd) Roberto Gil of the Uruguayan Army and Presidency Advisor to the International Association of Peacekeeping Training Centres (IAPTC), and Dr. Catherine Baillie Abidi, a professor in Child & Youth Study at Mount Saint Vincent University in Halifax, Nova Scotia, Canada. The commentary touches on many complex issues in peace and security and is intended to spark reflection and discussion.

CATHERINE BAILLIE ABIDI

Roberto, thank you for meeting with me to discuss your experiences encountering children during your deployments. Your perspective from your years of service is so important to guide peace support and stabilization work into the future. You are leading the way. Thanks for spending time with me to share your story.

ROBERTO GIL

I am ready and pleased to convey my experience if I know that it will go to good hands, good eyes, and good ears.

CATHERINE BAILLIE ABIDI

Can you tell me about your peacekeeping experiences. Where were you deployed?

ROBERTO GIL

I have been in peacekeeping operations for many years. The first deployment was with the Multinational Force and Observers (MFO) at the border between Egypt and Israel in the Sinai peninsula. Then at the rank of Captain, at 34 years old, I joined my first peacekeeping mission with the UN in Cambodia. It was my second mission but my first with the UN. After that I deployed on several international peace operations in Africa, Asia, Latin America and the Caribbean.

CATHERINE BAILLIE ABIDI

How prepared were you and your colleagues for these operations?

ROBERTO GIL

My earlier UN peace operations were very challenging although I had received pre-deployment training in the Army of my country, Uruguay. The genocide by the Khmer Rouge, I did not see that with my eyes, I saw the outcome of that. But when I offered myself to go to West Africa, I was challenging myself. I was young, powerful, and eager to learn. I am not sure if I would have gone for that assignment if I was home, but from Cambodia I was eager for a new experience. I did not take the necessary precaution and preparation before going. At that time, in 1993, all the means of communication we

have nowadays were not in existence. We went there almost without information. We got some paper information about the peace process and the regional force, but I was not well prepared to face the new situation. The regional organization was responsible for the response in terms of security, but they were having internal problems. Before the Peace Agreement, the members of the regional force were battling against the rebel forces and supporting the government of the country. These people who became peacekeepers one day, the day before they were fighters, against those with whom they were supposed to work for peace in the morning after. How could we believe in that reconversion of them, and trust that they could protect us?

CATHERINE BAILLIE ABIDI

As you have begun to describe, peace support operations take place in complex contexts and often under significant duress. Were you prepared to encounter children during your missions?

ROBERTO GIL

In West Africa we saw the atrocities. Going on patrol every day, knowing the violence of the people, and meeting very young combatants, was a challenge. It was not easy for mature people like us to treat them [children] as adult people because they are not. But because of the experience they had during a time of crises, they were full of information, important information that we needed. So how do we deal with them? Should we treat them as children or as combatants? We were always in doubt on how to proceed.

When we talk about vulnerable children - yes, they are vulnerable. But at that time, they [children] became, for me, unpredictable and always dangerous. I remember a time when children were playing with a cluster bomb. Can you imagine the mentality of those young people to do this? They were not yet engaged in the rebel groups, but they were likely to be recruited right after they got the force to sustain a rifle. Meanwhile they played with danger. That was an impact in my life. What do we do with these children if we fail the peace process? I was permanently brainstorming and scared about taking a wrong decision. I felt the loss of context in terms of geographic space and time.

CATHERINE BAILLIE ABIDI

These are certainly very challenging contexts to work in. During your deployments did you encounter children who were recruited and used in the violence?

ROBERTO GIL

Yes. One operation that affected me hard was when I was kidnapped by young people in 1993. We arrived in the country four days after a ceasefire agreement. My first impression was seeing the remains of human bodies in the streets, and around them, some predator animals were looking for their opportunity. We were only 10 military observers, and

we were unarmed. This was the first mission in the history of the UN that was agreed to by using Chapter VIII of the Charter. That means the regional organization is the one to provide the reaction and perform the duties on behalf of the UN. Four months after the signature of the peace agreement, the DDR process was about to begin. The commanding officer of the Regional Force decided to inspect the rural area within his sector of responsibility where the delivery of weapons by the rebel forces should soon begin. In a convoy of many armed soldiers and armored personnel carriers, we entered the area dominated by the rebel forces. I was not alone. I was with a human rights officer from the UN mission. At that time, we did not have the colour of the UN on our vehicle; the mission was just renting cars and placing the emblem of the UN on the doors and the hood of the car. The General [Regional Force commanding officer] did not like what he saw on the inspection and decided to stay in the area, but I felt that we could not stay, and the General gave me permission to go back to the capital. When we got to the last checkpoint, going out of the area controlled by the rebels, we were detained and taken by force, beaten, and the car was completely ransacked in a few minutes. I did not realize who they were until we were brought into a tiny house where we spent two and a half days, and the treatment was very hard. My colleague, the UN civilian, became gone [mentally withdrawn]. He became static in the corner of the room, not talking, not eating, not going to the tree for excretion. That was my first problem – what can I do with him? In my mind I had so many options for doing or not doing. But, if I do something, what will happen to him? And if I don't do anything, what will be the situation for him? All of our captors were children – heavily armed – conscious of the power they had. In particular, the guy who was taking care of me [punching] was called Captain 2-1-2. He was 12 years old. Why 2-1-2? He was promoted to the rank of "Captain" after killing 212 people. We stayed in this dreadful situation for two and a half days. Many things happened to me during those endless hours.

I felt fear. Lack of courage. Sometimes the crazy idea of getting a weapon and killing them as much as possible. But I was 33-34 years old, and I said to myself, 'no this is not the best'. So, what to do? The definition of detention is "the temporary state of being kept," but for us, for how long would we be there? We were not in position to predict for how long. I think that mentally, I betrayed myself. I did not consider them children. They were my captors, and I was their hostage. Perhaps in the case that the situation was over, I could go back and consider them children. But I lost consciousness at that time that they were children. They were treating us very badly. We were not aware of their true age. With the time passing we learned a lot. I had many doubts about my behavior and my partner [UN civilian staff]. I was wondering what to do with or without him. I was thinking about my survival, but this could mean the end of his life. That was a real time for reflection for me.

Before facing this situation, I was a witness of this [violence]. But then, in this case, I became an actor of the drama. As a military observer, we are trained without weapons, we are deployed and operate unarmed. We are prepared to perform our duties based on observation and talking, making liaisons, and negotiations, etc., but in this case all my exercise was not for the mission goal, it was for my own survival and that of my colleague. I chose to resist, this was my final decision, for myself and for my colleague who was there and was suffering much more than me because he was not prepared at all for this. I prayed at all times for somebody to come for us. For those with whom we had begun the task of verification, those who had "authorized" us to return alone, without custody; those who perhaps knew we were "lost."

CATHERINE BAILLIE ABIDI

Roberto, thank you for sharing this challenging situation. Reflecting on your experience and recognizing your current leadership role within peace support, how do you think people should prepare to engage with children in conflict contexts?

ROBERTO GIL

In our preparation for operations where we know that there are children forcibly recruited and used as soldiers, we must basically consider two possibilities of meeting these human beings undergoing critical situations. The first and most common is when they appear as fighters and behave like "warriors" in front of us, seeking to give us that impression of being powerful and fearless, this happens at road checkpoints, and in the first positions in rebel camps. Another visibly different situation occurs in the interior areas under rebel domain, when girls and boys appear and behave as victims of their captors. In all cases our first consideration should be that everyone is a child, and everyone is a victim, but every situation is going to be different.

It is important to know real stories and to see images. Like we do in our national training center in Uruguay. We show a video and ask, 'ok, if you are the one there, what do you do?' Of course, the adrenaline we feel in the field cannot be replicated with the same intensity in training. And it is challenging today to simulate training that is real because of media and public pressure. But it is important for people not to be caught by surprise and to be ready for the unexpected - for the unforeseen situations. While training our peacekeepers we get surprised. When I was the director of the national training centre some years ago, we really used force. We kept people hostage. Yeah, sure they knew they were in a training setting, but when they faced the situation of communicating to their families, telling them that they were not sure about the date and time to return home, they felt they were not anymore in control of the situation. This is important. This is useful for the personnel that will deploy in hazardous mission areas. Training and preparation should be common to all peacekeepers being deployed but the process is internal in each

person. I cannot imagine if the hostage situation I experienced would have happened to a woman. I am not saying that women are feeble but that there needs to be consciousness that the situation for them will be different.

It is also important to know what is behind us in our country. At the time of my earlier missions, I was not a father, and I was not having a permanent relationship with any woman. My parents were older. My mind was in my profession and fully in the field. I remember one time when a fellow mission member asked me what my reason was for being there for "a few dollars." He really questioned me, and I was hesitant in my answer. I was a naive young Captain and my colleagues were not so naive and perhaps not so young. There were very clear differences between us. My colleague was counting the 90 days to the end of the contract, but I was eager to stay. I even secured an extension to stay six more months. It is important to recognize that what is behind us and who is behind us influences our responses.

CATHERINE BAILLIE ABIDI

What is needed to ensure that effective training and preparation to encounter children happens? What kind of policy or mandate needs to be around that training and preparation to make sure each person is coming into the situation aware and having the skills to perform?

ROBERTO GIL

You are aware from the United Nations Headquarters, working for the Department of Peace Operations and Department of Operational Support, there is a system that is for training. In that environment there is a lot of experience from all the years and all the missions of the UN. In terms of basic modules for training and specialized training modules – all these issues are considered. However, the consistency of operational procedures in the mission area can be adversely affected when the personnel of the contributing countries, having all the same rules and training materials, exercise skill with different interpretations, modalities, and level of realism. Then it can happen that in the same multinational team or unit, serious differences arise in the application of rules, tactics, and operational techniques. This happens mostly with very sensitive matters such as the treatment to be given to child soldiers. We must be aware about unexpected changes on the ground. We may go to a place like Haiti and assume the peace process is secure, but we need to be ready for the unexpected because one day it may happen. Live training, perhaps using personnel as role players who are not known by the trainees, is a good method. We ask the role players to perform that role including gunfire shots. This is an important practice to be prepared because training needs to be performed like reality. You can read books on this but until you smell what is around in the field, you cannot imagine the reality.

But there is one more thing that is important regarding training. We Uruguayans, in the Uruguayan Armed Forces, we have a lot of experience. All of our officers have 2-3 missions experience, our junior personnel as well. But we are not to believe that we know everything. Let us avoid adopting this concept that will lead us to make wrong decisions that could be bad for everyone and particularly harm our subordinates. Also, we all have our own origins and societies – if we perform our duties with Indians, with Pakistanis, with Senegalis, we are different. If we face this kind of situation [encountering children], it can be difficult because our societies are different. If possible, we have to stick to the manuals – to what we learn and what we practice before going. Even then we will be different, but training can provide a common approach. Training in the field for me is essential and bringing the people to an extreme situation is important.

CATHERINE BAILLIE ABIDI

Roberto, peacekeeping is fraught with potentially morally injurious experiences. Could you walk me through how you define and understand moral injury.

ROBERTO GIL

Good question. Moral injury is principles and behaviors. I am not to take advantage of somebody who is feeble. There are some key lines that I am not to go beyond. For me it is a consequence of what I do or what I do not do, based on the expectations of myself, and based on the expectations of my people, and based on the expectations of the institution I am serving. And this could be seen or processed internally. In my case it was processed internally due to the end state which was five people who compromised ourselves and were not permitted to give information on this [kidnapping] for ten years. That was not a secret, it was a decision taken to avoid wrong consequences affecting the peace process and the lives of some people who were there. After this situation of moral injury, I was given ten days for recovery. When I came back, I met the Sector Commander who took the decision to detain the leader of the rebel group that was keeping us hostage, seeking to get us released. We confessed to each other how wrong we were. Myself, I had not asked for protection to leave the dangerous area, and he was not aware that we were not armed. He shared his decision to apprehend the seventeen-year-old 'commander' of the rebel forces. He said he did it himself and did not task any subordinate for that. He was aware on the entity of the actions taken. He was accepting his improper decision to force a situation involving a young combatant, but feeling better for the minimal damage caused, and the successful release of hostages. I myself felt much better because I did not fail. I survived and my colleague survived. He felt guilty, I did not feel guilty.

CATHERINE BAILLIE ABIDI

There were lots of people affected by this experience. Did you maintain a relationship with this Sector Commander? Did you continue to work together in the mission?

ROBERTO GIL

I will tell you a story that is very, very amazing. After more than a decade from my experience [being kidnapped by children], I received a call from a training centre in a neighbouring country. I was a Colonel in active duty and was requested to speak on negotiations in critical situations in the highest level. And who was among the participants in the classroom? A Major from country X. During my speech I referred to the Sector Commander from country X, very respectfully, but I stated that he committed mistakes. When the lecture finished, the Major asked to speak with me. The Major said, 'Sir, I know your story from the voice of my General, who is retired now. The General was my commanding officer when I was a junior Lieutenant. And in one of our training academies, the General shared lessons learned in his peacekeeping operations, and he mentioned the mistake he committed by leaving a couple of UN personnel unprotected to go through the lines of negative forces. And that they were held for three days then found a solution somehow.' This was an amazing situation.

CATHERINE BAILLIE ABIDI

What a small world. And really fascinating that after all those years he continued to reflect on his learning. This was obviously a very significant experience for the General if he was communicating that to his subordinates.

ROBERTO GIL

Yes. For me, I have never had contact with my UN civilian colleague. Of course, at that time, we were not having cellular phones, only radios and normal telephones. Honestly, if I should ever meet him again, I would ask him to judge my behavior towards him. Because I did not disturb him. Two or three times a day I would explain my interest to him and encourage him to take some rice – it was not tasty, but it was food. He would only say yes or no. If I meet him again, I would say 'please judge me. How did I perform? Because you were always thinking. You were not sleeping - always observing'. But this will not happen.

CATHERINE BAILLIE ABIDI

The readers who will read this journal are mostly in the peace and security world. If there are other officers who are reading your story, who are struggling with moral injury, what would you say to them?

ROBERTO GIL

First of all, I hardly ever share stories of my life. I make sure the person who is asking is really interested. And I ask what is it for? I only share stories if it could be important for people. Honestly, the concept of moral injury I have learned from the Dallaire Institute. Before that the concept was not in my mind, at all. Perhaps the collateral damage we may have that is not visible that is here [in the mind] and here [in the heart] before it was just

an experience that could not be compared with anything else. Since I have had training on children, peace, and security, and I learned from a colleague about what it was like to be a kid during the war in his country, I have a different perspective. That country was a place that I suffered a lot, and he [Dallaire Institute colleague] was a teenager at that time, suffering from the war and being part of it. So that was a time that I got perspective on how important this is in relation to children. Moral injury is not coming normally in our life everyday with children.

CATHERINE BAILLIE ABIDI

Thinking of audiences that have not had operational experience, perhaps they are civilians or just starting their career in peacekeeping, what would you like other community members to be thinking about in terms of preventing moral injury? And are there any nuances when considering encounters with children?

ROBERTO GIL

How to prevent health consequences or moral injury? The easiest way is preventing encountering them [children], sending others for patrol. But at the time you have to take decisions and you are not aware of the reality on the ground. I felt extreme antagonistic situations about life and survival. I had sporadic madness thinking about killing them [children] or being killed. It was possible – the situation of being killed or killing them. Most likely, they would have killed me. Many times, I was preparing for my final countdown. Always wondering how long to resist a situation or to take drastic action. And that is not easy at all. One of my dilemma's was the challenge of displaying professional performance versus being an acceptable human being.

You can choose how to write this - this is not a confession – this is a story of what happened in my own country in the 60s and 70s when we had our "internal war." I was a very young officer facing hard situations, like being devout to the cause of my nation and my armed forces and yet somehow confronting the opposing forces that sometimes were only opposing ideas. I am part of this very recent story of my country with the terrible situation of myself in uniform, while some family members were in prison because of their ideas followed by illegal actions.

When you witness, and you are not taking part – something that is wrong – what do you? If I witness something I will do my best to get the one who is performing wrong to rethink and be aware. They may have a different perception, attitude, and behavior. This is what I can transmit to the people. We know in particular that the use of force is a very sensitive issue. When we exercise command and we order our subordinates to exhaust resources, the concept of moral should be present – must be present. When the officer performs the order, he will have his own judgement but from the side of those commanding, the issue

of morals and ethics should be – must be – included in all aspects of our activities. Even if tomorrow you and me are teaching a course and you want to favor that girl and give her a couple of extra points, I will fight you on this. I don't care about your feelings. I will be satisfied with myself because I shared with you my moral and ethics in this silly issue. Everywhere we have challenges. Everywhere you go you have the possibility of adopting decisions that involve moral and ethics in practice.

CATHERINE BAILLIE ABIDI

Roberto, do you find when you are with other security personnel, and you share experiences that it is healing for you?

ROBERTO GIL

When you ask me these questions, I encounter myself, but it is ok. It depends on the subject. I like to talk about things I have experienced not what I have read. I like to talk about things that I have lived or survived. And I think it is contagious. I see in the eyes of the people how they understand and respond to my stories. I consider myself successful in teaching on these issues. My life is dedicated to teaching, to conveying the experiences I have gathered, this is my way of living .

CATHERINE BAILLIE ABIDI

Thank you very much for taking time to speak with me. I appreciate the sincerity of your intention.

ROBERTO GIL

I conveyed this personal experience and thoughts to a person who can understand this. I am feeling honoured by taking the possibility of converting this experience into something that could be useful for others. If at least one person can read and understand, I am glad. If ten, much better. If one hundred, then I will be very happy. If one thousand, then I will be crazy happy. I am eager to continue work on children, peace, and security because I am a survivor of this. Let's find a way to make this useful for the people.

POLICY ARTICLE

Providing Chaplain Support to Morally Injured Servicewomen

By Dr. Daniel Roberts

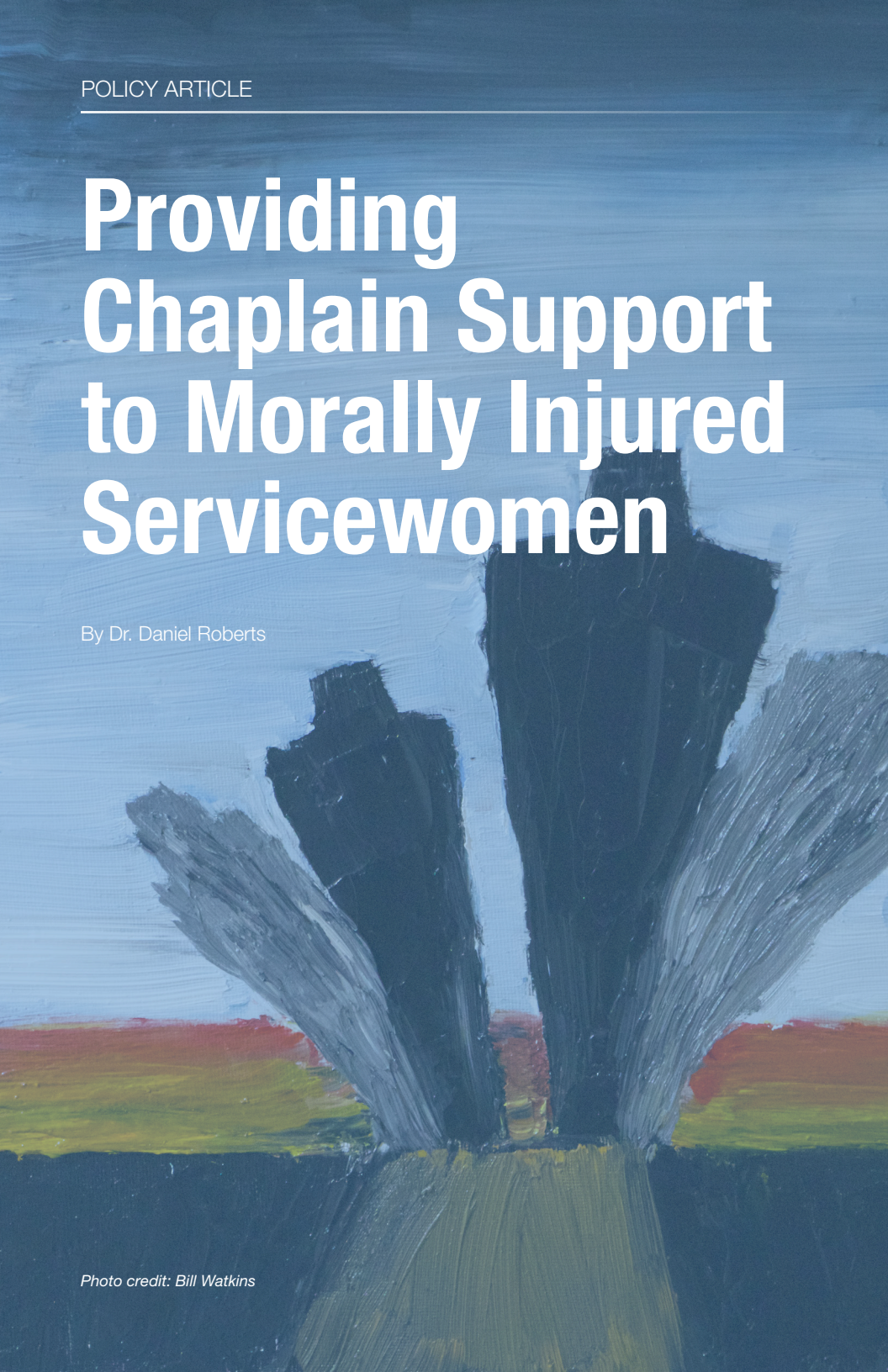

Photo credit: Bill Watkins

ABSTRACT

The following article may serve as a learning tool for chaplains who are available to provide care to servicewomen suffering from moral injury. Moral injury occurs when someone experiences, takes part in, or witnesses a traumatic event that violates their deeply held beliefs about truth, justice, or morality. Using a gendered approach rooted in feminist principles and research, the text provides a list of traits and attitudes that effective chaplains possess, five principles of support, and recommendations for how chaplains can enact those concepts in specific counseling situations. The five principles of support are: *establish trust, enable storytelling, be empathetic and calm, listen for special themes,* and *offer alternative perspectives*. Together, the principles help create an environment in which a military woman can receive vitalizing pastoral care. The article describes in detail the five special themes of *disempowerment, sink holes, guilt and shame, loss of identity,* and *low self-worth* and explains how chaplains can offer alternative perspectives so that a woman client might experience post-traumatic growth and recovery.

INTRODUCTION

Moral injury (MI) is an ancient problem that has become the subject of work by researchers, chaplains, and mental health practitioners. There is no universally agreed upon definition. Shay stated that moral injury is present when there has been a betrayal of what's right by someone in a position of authority or by one's self in a high stakes situation.[1] Litz et al. defined moral injury as "perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and expectations."[2] What is commonly held among moral injury scholars is that MI is deeply disturbing and can profoundly alter the way one thinks about herself, the world, and her outlook on life. For the purposes of this article, the author's approach conforms to the definition offered by Litz et al.

Potential morally injurious events (PMIEs) are singular incidents or a series of traumas that may lead to distress, guilt, shame, and other emotions associated with moral injury. Shay first conceptualized moral injury based on his work with combat veterans returning from Vietnam.[3] Shay's moral injury construct was based on wartime traumas, and in his 2014 article, he restated the story of a Marine Corps sniper who killed an enemy combatant while the terrorist was holding a child as a shield. Although the Marine followed the rules of engagement and it was his duty to kill the enemy, the American warrior was still deeply affected by the child's death that resulted from his actions.[4]

Later research added to the context of moral injury. In a study that included 47 women veterans, participants identified nearly a dozen themes to the question, "What event led to the moral injury?"[5] The most common moral injurious events were sexual assault, hostile work environment, gender harassment, and retaliation. Some women who had been sexually assaulted were further morally injured by the lack of support and justice they received from their chain of command.

No two people are alike and moral injury may be felt and experienced differently depending on one's gender, familial, cultural, and religious background, as well as a host of other factors. With that in mind, the author's research is rooted in feminist theory as stated by Hesse-Biber and Leavy: "By documenting women's lives, experiences, and concerns, illuminating

1 Jonathon Shay, "Moral Injury," *Psychoanalytical Psychology* 31, no. 2 (2014): 182, doi: 10.1037/a0036090

2 Brett T. Litz et al., "Moral injury and moral repair in war veterans: A preliminary model and intervention strategy," *Clinical Psychology Review* 29 (2009): 697, doi: 10.1016/j.cpr.2009.07.003.

3 Shay, "Moral Injury," 182.

4 Shay, "Moral Injury," 185-186.

5 Daniel L. Roberts and Joann Kovacich, "Women Veterans and the Question of Moral Injury: Initial Results," in *Moral Injury Research, Discussions, and Support Methods: Volume 1* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2022), 7.

gender-based stereotypes and biases, and unearthing women's subjugated knowledge, feminist research challenges the basic structures of and ideologies that oppress women."[6]

The practices illuminated in the next few pages are also based on a gendered approach to moral injury and chaplain support. The author's own positionality is as a cis male member of the U.S. Army chaplain corps who became intensely interested in feminist research and practice while pursuing his doctorate. In the U.S. military chaplain field, which is over 90% male, the author noted that chaplain men often failed to recognize that the male dominated military is not an equal playing field for women. Chaplain men commonly treated all soldiers the same rather than recognizing that gender differences could play a role.[7]

In this article, the author will approach the problem of moral injury from the lens of servicewomen and chaplain support. The goal of the article is to offer ideas and techniques to chaplains who find themselves providing emotional and spiritual support to military women who may be suffering from moral injury. First, the text will describe some traits of effective chaplains. This list of attributes is based on what wounded servicewomen, women chaplains, and chaplain men stated were the qualities of ministers who effectively provide emotional and spiritual support to military women.

Once the chaplain traits have been established, the article will cover the author's principles of support. These guidelines come from over 20 years of experience in the U.S. Army chaplain corps in working with morally injured servicewomen and research by other scholars in the field. As part of this section, the author will identify five themes that commonly appear in women veterans and provide recommendations for how chaplains can assist clients in recovering from their injuries.

SUPPORTING RESEARCH

In the U.S. military, chaplains perform a variety of religious support functions.

> In the pluralistic religious setting of the military, the Chaplain Corps performs or provides religious support for all Soldiers, Family members, and authorized Department of Defense (DOD) Civilians from all religious traditions. Chaplains cooperate with each other, without compromising their religious tradition or ecclesiastical endorsement

6 Abigail Brooks and Sharlene Nagy Hesse-Biber, "An Invitation to Feminist Research," in *Feminist Research Practice*, ed. Sharlene Nagy Hesse-Biber and Patricia Lina Leavy (Thousand Oaks: Sage Publications, 2007), 4.

7 Daniel L. Roberts and Joann Kovacich, "Male Chaplains and Female Soldiers: Are There Gender and Denominational Differences in Military Pastoral Care," *Journal of Pastoral Care & Counseling* 74, no 2 (2020): 133-140.

requirements, to ensure the most comprehensive religious support opportunities possible within the unique military environment.[8]

This religious support comes in a variety of forms, including pastoral counseling, worship services, and religious education programs. Much of the counseling that chaplains perform is not religiously oriented as much as it is helping soldiers think through emotional, relationship, work, or financial problems.[9] Given that moral injury is both a spiritual and a psychological problem,[10] chaplains are well-positioned to help soldiers suffering from MI.

In addition to extant research on moral injury, three projects undertaken by the author and a woman researcher informed the author's practice. The first study included 10 women military chaplains and 11 servicewomen who had been wounded during overseas deployments. Using a qualitative Delphi design, the study created the Comprehensive Female Soldier Support Model for providing emotional and spiritual support to wounded women.[11] The researcher asked the servicewomen to talk about their experiences with military chaplains. Female chaplains provided recommendations for how chaplains can be most effective in providing emotional and spiritual support to injured servicewomen.

In a second study related to chaplain support, the author interviewed 15 military chaplain men and asked questions about how they provided pastoral care to servicewomen.[12] This study was created as a follow-up to the first project to get a chaplain man's perspective on the problem of support to military women and determine if there were denominational differences in how the chaplains enacted religious support. The author used a descriptive case study design. Both studies were based on feminist theory.

8 *Army Chaplain Corps Activities*, Army Regulation 165-1 (Washington, D.C.: Department of the Army, 2015), 1.

9 Daniel L. Roberts and Joann Kovacich, "Male Chaplains and Female Soldiers: Are There Gender and Denominational Differences in Military Pastoral Care," *Journal of Pastoral Care & Counseling* 74, no 2 (2020): 133-140.

10 Harold G. Koenig, "Moral Injury: A Common and Often Neglected Syndrome Among Veterans Experiencing War Trauma," in *Select Proceedings from the 2020 Women Veterans Military Moral Injury Conferences* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2021), 1.

11 Daniel L. Roberts, Joann Kovacich, and Melvin J. Rivers, "The Comprehensive Female Soldier Support Model," *Journal of Health Care Chaplaincy* 24, no. 1 (April 2017): 1-19.

12 Daniel L. Roberts and Joann Kovacich, "Male Chaplains and Female Soldiers: Are There Gender and Denominational Differences in Military Pastoral Care," *Journal of Pastoral Care & Counseling* 74, no 2 (2020): 133-140.

The third project is ongoing, but an article with preliminary data has been published.[13] The research team interviewed and conducted anonymous online surveys with nearly 50 women veterans who stated that they experienced moral injury while serving in the U.S. military. Using a qualitative inquiry design, the team is analyzing the large amount of data to determine the nature of moral injury in women veterans. In addition to the author, the study team includes three women.

IDENTIFYING MORAL INJURY IN CLIENTS

Some moral injury scales are available for identifying whether someone may have experienced a MI. The Brief Moral Injury Screen (BMIS) and the Moral Injury Questionnaire—Military Version can determine if a potentially morally injurious event has occurred. The Moral Injury Symptom Scale—Military Version Short Form (MISS-M-SF) "focuses on betrayal by leaders that were once trusted, feeling guilt, feeling shame, feeling that one has violated one's moral values, struggles with life, the meaning and purpose of life, forgiveness, and feeling like one has been a failure."[14] Other assessment tools are available, and many can be obtained at no cost. Using measures like these are one way that chaplains can identify whether moral injury could be a presenting concern in a client.

Asking questions is another way to identify moral injury in a person seeking support. Most people have not heard the term moral injury but can identify with the idea of moral or inner conflict. These and similar questions can get a moral injury out into the open: "Did this experience violate your deeply held beliefs? How much is this violation affecting your emotional, mental, or spiritual state right now?" Other indicators of the potential presence of MI are the client expressing feelings of guilt, shame, fear of unforgiveness by God and others, or loss of hope.

CHAPLAIN TRAITS

All three populations from the first two studies identified in the Supporting Research section above—military women, women chaplains, and chaplain men—provided data on traits and attitudes that chaplains must possess to be effective in providing pastoral care to servicewomen. Table 1 lists the characteristics catalogued in the two studies and which type(s) of participant (chaplain or wounded soldier) identified the attribute.

13 Daniel L. Roberts and Joann Kovacich, "Women Veterans and the Question of Moral Injury: Initial Results," in *Moral Injury Research, Discussions, and Support Methods: Volume 1* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2022), 7-14.

14 Harold G. Koenig, "Moral Injury: A Common and Often Neglected Syndrome Among Veterans Experiencing War Trauma," in *Select Proceedings from the 2020 Women Veterans Military Moral Injury Conferences* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2021), 2-3.

TABLE 1: SKILLED CHAPLAIN TRAITS AND ATTITUDES

Chaplain Trait	Type of Participant
Warm and caring demeanor	Wounded Servicewoman
Makes client feel comfortable and safe	Wounded Servicewoman, Woman Chaplain, Male Chaplain
Remains calm while hearing client's traumatic experiences	Wounded Servicewoman
Skilled in helping client through trauma	Wounded Servicewoman
Built positive relationships with everyone in the military unit	Wounded Servicewoman, Woman Chaplain
Trained in helping women who have been sexually assaulted	Wounded Servicewoman
Willing to advocate with commanders on behalf of the servicewoman	Wounded Servicewoman, Woman Chaplain
Self-aware of personal strengths, weaknesses, limitations, and triggers	Woman Chaplain
Understands role as spiritual care provider, not mental health professional	Woman Chaplain, Male Chaplain
Non-judgmental, finds common ground with client	Woman Chaplain
Seeks personal spiritual growth	Woman Chaplain
Knows signs and symptoms of PTSD	Woman Chaplain
Skilled in helping client find answers for themselves	Male Chaplain

PRINCIPLES OF SPIRITUAL SUPPORT

The table identifies general traits and attitudes of good chaplaincy but does not describe specific actions chaplains may take in providing support. In the author's practice of providing spiritual aid to women veterans and active duty service members, he uses five principles of support: establish trust, enable storytelling, be empathetic and calm, listen for special themes,

and offer alternative perspectives. Before a chaplain can access the client's problem, he or she must first establish trust with the person. Trust is about finding common ground with another person, establishing a nonjudgmental relationship, and holding sacred their points of view and secrets.

A potential client might approach a chaplain for support and be prepared to immediately explain the problem. In many, if not most cases, the service member will tread lightly and the real problem she faces will need to be gently coaxed from her by the chaplain. This might be because the woman was referred to the chaplain by someone else or the minister and client are unknown to each other. In these cases, the author recommends that the chaplain use easy conversation starters to get the person talking. Asking innocuous questions that someone might ask when first meeting another person, such as where she works, what her job is, where she has been stationed, etc., can begin to build a bridge of trust without going too deeply into sensitive issues until the person is ready. At some point, the chaplain will need to determine if the person is ready to talk about her moral injury. The client might speak about her symptoms, or the chaplain might ask the person what he or she can do for the client.

When the servicewoman is ready to get into the problem, the second principle of enabling storytelling becomes the chaplain's guiding value. Hearing the client's story gives the chaplain clues to the source of the moral injury, the effects that the person is feeling from the injury, and the servicewoman's attitudes and beliefs that might prevent her from experiencing post-traumatic growth. When listening to the person, the chaplain should suspend all judgment of the veteran's actions, beliefs, and experiences. If a servicewoman feels judged in any way she will most likely shut down and the chaplain will lose any opportunity to help her. The goal of this principle is to fully understand the woman – what she has been through, how she thinks, what is truly bothering her. To encourage the veteran to provide important details, the chaplain can ask questions like, "tell me more about that. How did that make you feel? What did you do next? How well were you supported by your leaders or community during that time?"

Morally injured servicewomen often tell tragic, horrifying stories. Rape, sexual harassment, retaliation, betrayal, and humiliation are common morally injurious experiences for military women.[15] For chaplain men who have not yet heard detailed stories from survivors, these accounts might be hard to believe and may lead to anger, sadness, depression, or unexpected exclamations. The first time the author heard a woman veteran talk about her forced abortion, he shouted "Oh my God!" before he could stop himself. The problem with such reactions is that they can make the client feel worse if the person thinks that the chaplain is also traumatized

15 Daniel L. Roberts and Joann Kovacich, "Women Veterans and the Question of Moral Injury: Initial Results," in *Moral Injury Research, Discussions, and Support Methods: Volume 1* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2022), 7-14.

by her story. Chaplains can show empathy by responding appropriately with words, such as, "I can imagine how terrible that must have made you feel; or it is very sad to me how much that person harmed you," while remaining outwardly calm. In the author's study with wounded servicewomen, participants stated that it was important that chaplains remained calm when hearing their experiences.[16]

To be effective, chaplains will need to do more than just hear servicewomen's stories. In the author's approach to ministry, he listens for special themes within the veteran's narrative. In this article, the author will describe five main themes: disempowerment, sink holes, guilt and shame, loss of identity, and low self-worth. For each theme, the author offers an alternative perspective to the client's narrative. Alternative perspectives are suggestions for new ways that the servicewoman can think about the tragedy she experienced. The following paragraphs provide examples of the special themes and some responses chaplains might give. It should be noted that rather than tell the veteran how to think differently, the author most often asks leading questions so that the person feels that they are making the decision for themselves. This leading approach was noted in author's study with male chaplains.[17]

DISEMPOWERMENT

Disempowerment means that the person feels that there is nothing she can do to change her situation. For instance, she did something that she cannot forgive herself for. The action the woman took is in the past, but she continues to punish herself in the present. Since the deed cannot be undone and there may not be a way to make direct amends, she feels powerless to change it. The person may also think that what she did was so bad that she cannot possibly forgive herself. The veteran may feel separated from God and that God has rejected her.

Similar feelings may occur when something tragic happened to the servicewoman, like a sexual assault. The veteran may feel that the system does not or did not care for them, that justice was not done, and that other servicewomen will continue to be harmed. They feel disempowered to change a system that does not serve people as it should.

Three examples of disempowerment themes are separation from God, unforgiveness, and systematic or institutional betrayal. In the first example, the woman may feel that God does not care about what happened to her. She may have lost her faith completely. God is no longer a source of inspiration or strength for her. Unforgiveness means that the veteran is unable to

16 Daniel L. Roberts, Joann Kovacich, and Melvin J. Rivers, "The Comprehensive Female Soldier Support Model," *Journal of Health Care Chaplaincy* 24, no. 1 (April 2017): 1-19.

17 Daniel L. Roberts and Joann Kovacich, "Male Chaplains and Female Soldiers: Are There Gender and Denominational Differences in Military Pastoral Care," *Journal of Pastoral Care & Counseling* 74, no 2 (2020): 133-140.

stop feeling resentment for the person who wronged her or cannot give herself grace for her past actions. In the context of sexual assault, Smith and Freyd defined institutional betrayal as "institutional failure to prevent sexual assault or respond supportively when it occurs."[18] Women veterans identified institutional betrayal as a moral injury category in the study by the author.[19]

It can be difficult to walk someone through a loss of faith or a sense of betrayal by God. Chaplains should not speak for God or deny that a tragic thing happened to the person. Pithy sayings like, "Everything happens for a reason," can seem extremely dismissive of the veteran's experience. Ministers can be honest with the person by saying, "I cannot speak for God or deny that what happened to you was bad. If God is not a source of aid or inspiration for you right now, don't worry about it. Let's find something that can help you." The chaplain can then offer other resources, such as secular books that speak to grief, tragedy, and recovery.

For many ministers, walking a person through forgiveness of self or others is common practice. There are many approaches to this including prayer, referring to stories in the holy scriptures of people who were forgiven after horrific acts, and teaching what forgiveness is from God's perspective. Chaplains will need to tread lightly here when the client was a victim or the target of a morally injurious act. Telling a person to forgive a perpetrator can seem dismissive and insensitive. What ministers can do is talk about how forgiveness can help cleanse a person's soul by releasing resentment, ask the client if she is ready to begin walking through that process, and explain that complete forgiveness is a long course that could take years. If the woman is not ready to think about forgiving her perpetrator, the chaplain should not press her on that issue.

Institutions have ways of making survivors feel small, powerless, and insignificant through inflexible policies and extremely slow processes. One person cannot change an institution or a system, but there are many ways to champion change. Joining advocacy groups, starting one's own non-profit organization, or getting involved in political activism can help veterans feel that they are using their own experiences to make life better for others by changing the system.[20]

SINK HOLES

18 Carly Parnitzke Smith and Jennifer J. Freyd, "Dangerous Safe Havens: Institutional Betrayal Exacerbates Sexual Trauma," *Journal of Traumatic Stress* 26, no 1 (February 2013): pp. 119-124, https://doi.org/10.1002/jts.21778

19 Daniel L. Roberts and Joann Kovacich, "Women Veterans and the Question of Moral Injury: Initial Results," in *Moral Injury Research, Discussions, and Support Methods: Volume 1* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2022), 7-14.

20 A'mie M. Preston et al., "Defeated No More: Meaning-Making After Military Sexual Trauma," *Military Medicine* (2022): 5, https://academic.oup.com/milmed/advance-article/doi/10.1093/milmed/usab528/6511404.

Sink holes trap the veteran and force her to relive tragic moments over and over as if they happened yesterday. Sink holes also refers to feelings that veterans do not want but cannot seem to shake. For instance, a woman might think every day of a rape that happened to her years ago. Shame, guilt, helplessness, and pain accompany the memory. She cannot shake the fear, fitfully sleeps with her lights on at night, and wakes up often to recheck that the doors and windows are locked. In those moments, the person needs to be able to gain a sense of safety and think about something else.

As part of a study that included nearly 50 women veterans, the author interviewed and surveyed participants about their moral injury experiences.[21] One participant, Rene (not her real name), was raped by her military doctor. Even after years of therapy, one triggering moment could send her into a sinkhole.

> I graduated from therapy. I told myself I was going to stay in therapy. "I'm going to fix myself." And in 2012, I got out. February 2013, I was listening to a news piece and I heard about the women coming out of Iraq and some of those that had been sexually assaulted by a military doctor, and it broke me. I cried. I've had ear ringing ever since. I've been traumatized. Anxiety is more manageable now, but I hide a constant state of fear ... I don't even know how to describe to you what my body did.

Depending on the severity of the person's condition, treatment may include psychotherapy and pharmaceutical solutions. Chaplains and mental health practitioners can also offer numerous techniques to help people refocus their minds in frantic moments. These exercises include mindfulness practices,[22] mediation and breathing techniques,[23] reciting mantras or prayers, and yoga.[24]

GUILT AND SHAME

21 This study is still in the analysis phase. Preliminary findings were published by the Author in 2022.

22 Kimberly A. Kick and Myrna McNitt, "Trauma, Spirituality, and Mindfulness: Finding Hope," *Social Work and Christianity* 43, no. 3 (2016): pp. 97-108.

23 Raymond Monsour Scurfield, "Faith-Based and Secular Meditation: Everyday, Betrayal Trauma and Other Posttraumatic Applications for Personal Practice and with Clients," in *Select Proceedings from the 2020 Women Veterans Military Moral Injury Conferences*, ed. Lindsey Moser et al. (Moral Injury Support Network for Servicewomen, Inc., 2021), pp. 57-90.

24 Sy Atezaz Saeed, Karlene Cunningham, and Richard Bloch, "Depression and Anxiety Disorders: Benefits of Exercise, Yoga, and Meditation," *American Family Physician* 99, no. 10 (May 15, 2019): pp. 621-622.

The morally injured often experience guilt and shame.[25] Although the two emotions often appear together and are related, it is important to differentiate between guilt and shame. Guilt is the feeling associated with having done something wrong or having failed to do something one knew one should have done. Shame, on the other hand, is humiliation as a result of a painful experience or for committing a heinous act. Veterans who killed in combat, committed war crimes, or failed to act when crimes were being perpetrated have felt guilt.[26] Along with this guilt comes the shame of not living up to one's own standard of moral conduct or for not obeying the rules of engagement. In the author's own work and in documented research, sexual assault survivors often feel overwhelming shame for being treated as just a sexual object, but many experience guilt because they think that they should have tried to stop what was happening to them.

The ideas about forgiveness described in the disempowerment section are applicable here as well. In addition, it could be useful to take a client back in memory to the time when the incident occurred. The purpose of this recall is for the person to take another look at the event from a different set of eyes. If the veteran is racked with guilt and shame because she believes that she should have stopped the assault, helping her see that she was disempowered at the time could alleviate some of that guilt. The shock of rape can immobilize victims. Seeing a person commit an atrocity can have the same effect. Peer pressure can be extremely powerful. In the military, rank imposes its own dominance. Although service members are supposed to be protected from obeying an unlawful order, it can be very hard to keep to the moral high ground in situations where there is no one to defend or protect the victim from the undue influence of command. All of these factors can make it nearly impossible to avoid or stop a morally injurious experience.

A chaplain can suggest to the person that she give herself some grace and understanding. Sometimes it can be useful to say, "If our roles were reversed and your story was mine, what would you say to me?" People often find it easier to give others the goodwill that they would not give themselves. Reversing roles for a moment can help the client offer that forgiveness to themself as if they were giving it to another person. Even if a morally injured person is the perpetrator, that one immoral act does not erase all the good things a person has done in her life. A chaplain can counter guilt and shame by helping a client identify the many positive qualities about herself rather than letting the one tragedy envelope her whole mind.

25 Sheila B. Frankfurt et al., "Mechanisms of Moral Injury Following Military Sexual Trauma and Combat in Post-9/11 U.S. War Veterans," *Frontiers in Psychiatry* 9, no. 520 (November 2018): pp. 2 & 3.

26 Ibid.

LOSS OF IDENTITY

In the study by the author, moral injury experiences often altered a person's sense of self.[27] Smallfield and Kluemper found that workplace stress can lead to personality change in employees.[28] Women who were once outgoing and energetic, became totally different after a sexual assault. Feeling that their body was seen as a billboard for sex-starved men, these women hid their feminine features by changing the way they dressed. Others isolated themselves from contact with other people when possible. At work, they remained quiet, no longer voicing their opinions for fear of garnering unwanted attention. Many stopped having intimate relationships with anyone.

This loss of identity puts the perpetrator or the moral injurious experience (MIE) in the driver's seat of the person's life. Chaplains can help the person gain some control over who she wants to be and how she approaches life. First, the minister can remind her that the MIE is part of her story, but it does not have to define her for the rest of her life. People can reinterpret the events in their lives and choose to respond to those experiences in different ways than they have in the past. Clients can use daily goal setting, meditation, positive affirmations, and reading of self-improvement books to adjust their attitudes, beliefs, and outlooks. Chaplains can assist a client by asking questions that help the person reinterpret, set goals, and make plans for growth.

LOW SELF-WORTH

Whether a military service member is the perpetrator or the victim of a morally injurious situation, it is often the case that she loses a great deal of self-worth. Survivors often feel that they have been reduced to something less than human—a body, a target, trash, etc. Perpetrators might feel that they have done something so terrible that they must be inhuman or that they are now unsalvageable. Perpetrators might mourn the loss of their career, family, etc. A low self-esteem is hard to combat because one cannot give another person value; they must see it for themselves. For instance, John can tell Jill that he loves her and that she is valuable, but if Jill thinks that she is unlovable and ugly, then John's words of affirmation might be rejected by Jill as untrue or mere flattery.

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27 Daniel L. Roberts and Joann Kovacich, "Women Veterans and the Question of Moral Injury: Initial Results," in *Moral Injury Research, Discussions, and Support Methods: Volume 1* (Robbins: Moral Injury Support Network for Servicewomen, Inc., 2022), 9.

28 Jarvis Smallfield and Donald H. Kluemper, "An Explanation of Personality Change in Organizational Science: Personality as an Outcome of Workplace Stress," *Journal of Management* 48, no. 4 (April 2022): p. 853. DOI: 10.1177/0149206321998429

The good news is that self-esteem, like confidence, is based on a pattern of thinking, not objective data.[29] The negative feelings that accompany low self-worth are real, but the thoughts that created them can be changed. Chaplains can do several things to help servicewomen raise their self-value, including talking to clients about God's grace and mercy, offering to lead the veterans through sacraments of confession and penance if they are feeling guilty for crimes committed, offering reading resources, and helping clients create daily plans for establishing new habits of thinking about themselves.

For all of the principles of support described in this section, a great deal of patience and perseverance for both the client and the chaplain are required. These problems will not be resolved quickly or easily since moral injury occurs at a deep, inner soul level. Chaplains who are not willing to conduct many counseling sessions might best serve the client by referring her to a chaplain who can. An interdisciplinary approach that includes psychologists, social workers, and other professionals is also necessary to help most clients.

CONCLUSION

In the short space allotted in this article, the author provided some background information and research on moral injury and offered practical suggestions on how chaplains can provide pastoral care to military women suffering from MI. Chaplains can take this commentary as a starting point for more study on the subject themselves. In seeking moral injury education, chaplains should understand that while the current catalog of MI research is growing, much more is needed, particularly in terms of chaplain support. Not only is there a lack of chaplain-related research in moral injury, gendered MI studies are even scarcer. Through community-based practice research approaches, scholars, chaplains, and women veterans could collaborate on studies that increase the understanding of how moral injury can affect servicewomen. Such projects might also result in identifying gaps in support and creating new recovery models.

29 Rabbi Zelig Pliskin, *Self-Confidence: Formulas, Stories, and Insights* (Shaar Press, 2012), p 16.

RESEARCH ARTICLE

The Vancouver Principles - A Moral Grammar for Empowered Witness

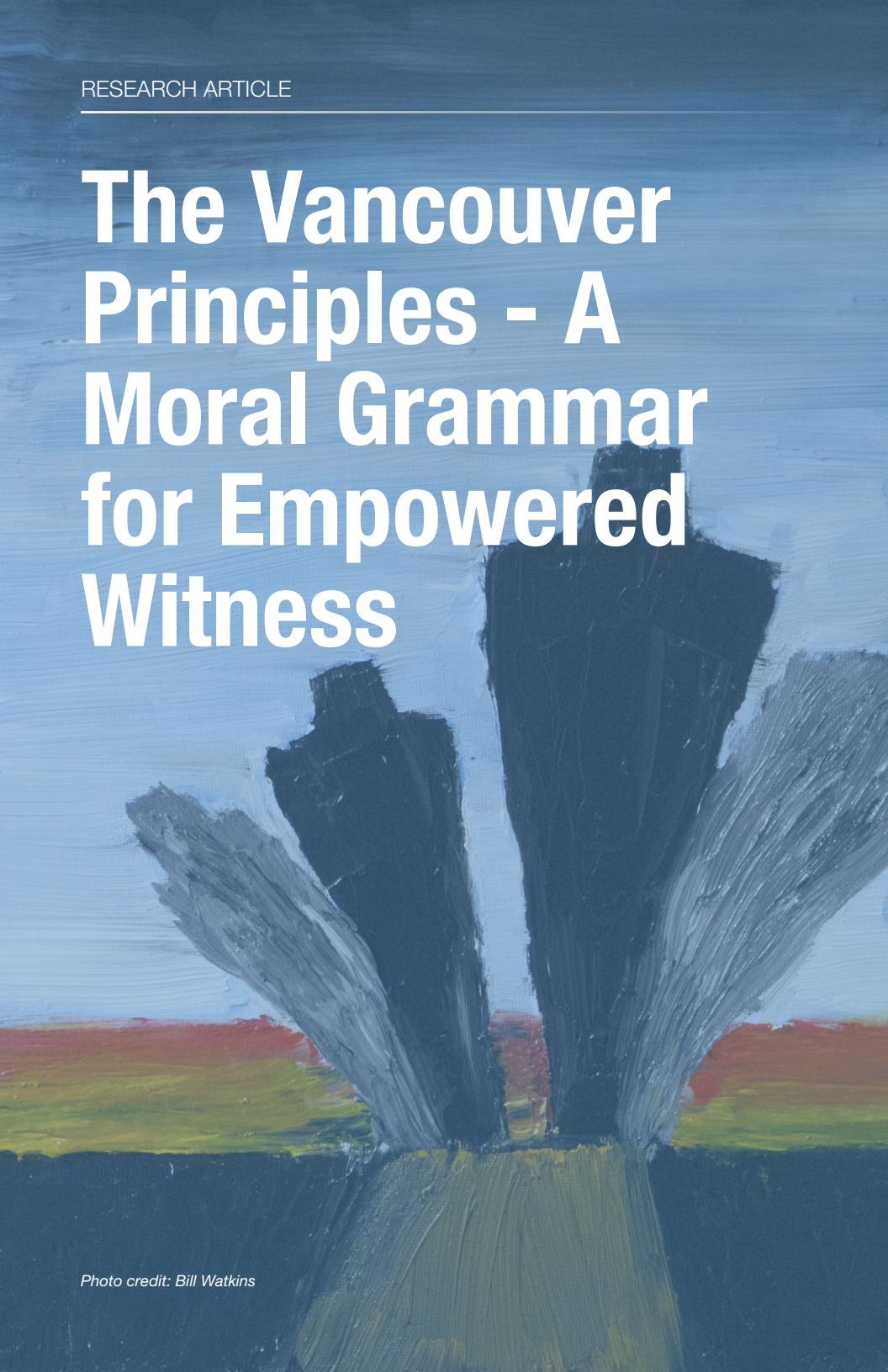

Photo credit: Bill Watkins

In June 2014, General (retired) Romeo Dallaire opened a speech on the subject of child solders to the Royal Canadian Chaplain Service with these words: "Religion is insufficient to attenuate the evil.[1] This paper responds to General Dallaire's statement by examining how *The Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers* (hereafter *The Vancouver Principles*) meet the need for new language to address the encounter with children on operations. It argues that a particular set of agreed upon terms to support soldiers throughout the deployment cycle is needed, not only for ending the recruitment and use of children and youth as participants in war, but also to provide the basis for a moral grammar to help peacekeepers and other actors in theatres of operations remain empowered and healthy on mission and afterwards.

As a military chaplain, I listened to the stories of serving members and veterans including accounts of their experiences in conflicts and operations around the world. General Dallaire's statement indicated to me the inadequacy of the language of religion and ethics for addressing the evil he and so many others experienced on peacekeeping missions in the 1990s, and Rwanda in particular. His reference to religion highlights the ways in which language, including religious, moral and legal terminology for evil and suffering, failed veterans of operations over the last century. This was especially the case for operations conducted under the auspices of United Nations Peacekeeping where child soldiers were active.

The phrase "child soldier" is a challenging one because it joins two words that do not belong together, yet it is a necessary one for speaking about the phenomenon of children and youth who occupy one of the most morally fraught roles in conflict and for developing remedies to it. It is a fact that children participate in armed conflict as combatants as well as in support roles, and that professional armed forces have to deal with them. A grammar for the encounter with all minors on operations is necessary because moral standards for soldiers and other security sector actors are the same as for the rest of us, even when the context is physically, psychologically and morally perilous. As Shannon French observes, "There is only one moral sphere, and [our] actions in war and peace are judged against the same set of values and principles."[2] Soldiers and other legal security sector actors know that many of the things they are tasked to do or witness are incompatible with civilian standards.[3] The "one moral sphere" referred to by French affirms that there is no alteration of normative moral standards for armed forces.

1 Romeo Dallaire, Presentation to the Royal Canadian Chaplain Service, Exercise CALLED TO SERVE (Cornwall, ON: June 3, 2014).

2 Shannon E. French. "Warrior Transitions: From Combat to Social Contract." Joint Services Conference on The Professional Ethics (JSCOPE), 2005. http://isme.tamu.edu/JSCOPE05/French05.html.

3 French. 2005.

Peacekeeping operations take place in a context that is both linguistic (orders and agreements promulgated to establish, guide, and sustain the peacekeeping mission) and kinetic (the potential for violence). Standards for behaviour in professional armed forces are shaped within the operational framework of unlimited liability, that is, the accepted risk to life and limb while following lawful orders[4]. Unlimited liability in turn is linked to a reciprocal obligation on institutional leadership known as the fiduciary responsibility, which is defined as the avoidance of unnecessary harm to subordinates by ensuring they are trained and equipped to do their duty. This responsibility includes the right supports and services to serve them when they are injured in the course of that duty.[5] This includes those operations where children are present and may be integrated into the forces of parties to the conflict.

Jonathan Shay sums up the rationale for a moral grammar by describing armed forces as "a social construction defined by shared expectations and values," embodied in such things as regulations, orders, structure, discipline, and traditions.[6] A moral grammar emerging from the dynamic of unlimited liability and fiduciary responsibility needs to be capable of two things: acknowledging the intersection of moral and military values and regulations, and empowering the witness - the story telling - of those who are injured on operations while following orders. Stories arising from trauma not only help shape an understanding of what happened to cause the injury, they aid in mourning loss by naming transgression and critiquing those actions by which troops were physically, psychologically or morally injured. They can also direct attention to those situations where standard operating procedures (SOPs) need to change, including the encounter with children.

Joseph Wiinikka-Lydon argues that moral injuries arising from military service are not only personal, they are also political, due to the inherently political context of their causes and to the institutional power of armed forces to compel particular behaviour and actions.[7] The problem with psychological and moral injuries is that they are not often immediately apparent and when they are recognized or when symptoms appear, it may be difficult initially to attribute to any single event or power dynamic, especially if the veteran is unable to talk about what happened. The challenge for wounded military members is that they often must tell their story several times in order to access appropriate healthcare or support services. Because moral injury contains an inherent critique of what "failed," including institutional systems and structures, telling that story can become an experience of not being believed, an ordeal

4 *The Canadian Armed Forces Ethos - Trusted to Serve*. www.canada.ca/en/department-national-defence/corporate/reports-publications/canadian-armed-forces-ethos-trusted-to-serve.html. 34.

5 *Ethos - Trusted to Serve*, 34.

6 Jonathan Shay. *Achilles in Vietnam: Combat Trauma and the Undoing of Character* (New York: Scribner, 1994), 5, 6.

7 Joseph Wiinikka-Lydon. "Moral Injury as Inherent Political Critique: The Prophetic Possibilities of a New Term," *Political Theology* 18:3 (2017). https://doi.org/10.1080/1462317X.2015.1104205 .

made more onerous when trauma disrupts language and the sequencing of events. Naming personal or institutional failures on mission or the weakness of organisational structures can deepen the risk for those who speak up by bringing the individual close to the perceived line of insubordination, with little to offset their exercise in courage for reporting betrayal and failure.

The fact is soldiers and peacekeepers are mortally dependent on their chains of command.[8] This dependence includes the need for the right tools for the mission: contextually relevant Rules of Engagement (ROE), realistic threat assessments, and mission-specific training. Each of these resources plays a critical role in keeping troops informed, aware, and empowered on missions where the primary focus is not the use of force but non-lethal intervention, reporting, and witness. Kaethe Weingarten illustrates the importance of a moral grammar in her description of the four possible positions for witnessing violence by means of the dynamics of awareness and empowerment: Position 1, aware and empowered; Position 2, unaware but empowered; Position 3, unaware and unempowered, and Position 4, aware but unempowered.[9]

A peacekeeper deployed on a United Nations peacekeeping mission expects to be effective and competent: empowered by training, experience, rank or position, and equipped with formal Rules of Engagement, they reasonably anticipate occupying position 1, *aware and empowered* to perform their tasks as an effective and competent agent. Good leadership and appropriate support before, during and after each action are vital if they are to avoid Position 2, *empowered but unaware*, which can lead to malpractice; Position 3, *unaware and unempowered*, which may lead to abandoning one's tasks; and Position 4, *aware and unempowered*, the position most likely to result in post-traumatic stress.[10] Any child in an area of operations, however, can impact the ability of the peacekeeper to maintain position 1, even if they are not associated with any of the parties to the conflict.

In Rwanda, the use of child soldiers was even more injurious for UN troops, placing them in what could be called Position 5: *aware and disempowered*. Child soldiers do not exist in a vacuum. They are enmeshed in a context intended to disempower security actors and to amplify the self-doubt and shame that result from believing there is no other recourse than to back down in the face of an armed child or youth. It is this dynamic that *The Vancouver Principles* seeks to disrupt and to remedy, by ensuring peacekeepers are able to remain aware and empowered while on mission and afterwards and that youth are indiscriminantly subject to harm.

8 Shay, *op.cit.*, 11f.

9 Kaethe Weingarten, *Common Shock: Witnessing Violence Every Day* (New York: New American Library, 2003), 95.

10 Weingarten, op.cit.; and Deborah van DeusenHunsinger, *Bearing the Unbearable: Trauma, Gospel, and Pastoral Care* (Grand Rapids, Michigan: William B. Eerdmans Publishing company, 2015), 26-29.

Wiinikka-Lydon's proposal for a definition of moral injury includes recognizing that its causes extending beyond the rules of engagement to the institutional uses of power.[11] When moral behaviour is understood primarily as obedience to a scaffold of rules or to a higher authority, it not only loses its relationship to character and consequences,[12] it creates an organizational culture unable to recognize a soldier's need to forgive themselves and others for having followed legal orders. Susan Brison makes a supporting observation that this is because the starting point for military ethics tends to be external questions of strategy and justice without reference to the experience of soldiers.[13]

Wiinikka-Lydon and Brison's arguments in support of soldiers' experience as an additional starting point for military ethics highlights the core tenet of *The Vancouver Principles*: the moral and political necessity of protecting children in theatres of conflict by empowering the peacekeepers. By presuming the vulnerability of youth as well as the common legal and moral responsibility of state security actors towards them, *The Vancouver Principles* resist projections of either innocence or the demonic onto war affected children. Instead, they make room for the complexities and dilemmas that arise from their active presence. By doing so, they also provide the basis for a lexicon and a grammar capable of creating a shared understanding of the risks to children in theatre as well as the risks those children pose to others including peacekeepers.

Language to support and describe these encounters needs to include the knowledge, experience and expectations[14] of peacekeepers. The language of *The Vancouver Principles* is important because the words we choose and the way we use them shapes what we see and how we interpret it.[15] Language as a signalling system influences how we see and understand the world. Grammar simply formalizes the "rules" or the way language combines words into sentences and ideas into principles and guidelines.[16] A grammar itself is not a set of rules but an agreed upon way of speaking about things that help shape one's perceptions of the world.[17] *The Vancouver Principles* provide peacekeepers with a set of statements to guide their encounters with all children, and to help them adapt their skills for conflict into an ethical response to the presence of child soldiers. In this way, they function like a grammar,

11 Wiinikka-Lydon, 221

12 Wiinikka-Lydon, 221.

13 Susan J. Brison, *Aftermath: Violence and the Remaking of a Self*, Princeton, NJ: Princeton University Press, 2002, 26.

14 Trask, 63.

15 R.L. Trask, *Language: The Basics*, 2nd ed (London and New York: Routledge) 2004. 63.

16 Trask, 63, 27.

17 Trask, 63.

by providing clear language to support peacekeepers' experience, even though it may include suffering and painful knowledge.

The Vancouver Principles may be adapted based on new experiences and understandings gleaned from insights that emerge during peacekeeping operations. It also enables them to address the wider cultural context in which they may be applied, especially among peacekeepers from Western societies where individual experience competes with the use of moral principles to guide decision making.[18] Moral principles emphasise restraint, by taking into consideration the human dignity of all persons in need.[19] As such, they are necessary for supplementing political principles, including Rules of Engagement. The Vancouver Principles provide a range of responses to encounters with youth during operations with the intention to reduce harm to both peacekeepers and those youth. A moral component thus hand in hand with the political and operational elements of the document." For example, Principle 1 (Mandate) encourages the inclusion of appropriate child protection provisions, including the prevention of recruitment and use of child soldiers, in all United Nations peacekeeping mandates, including for regional peacekeeping operations.[20] This statement includes a political and a moral objective, both of which are strengthened by Principle 3 (Early Warning). When the Rules of Engagement include child protection as well as expectations of reporting and addressing the use of child soldiers, the silencing effect of witnessing the abuse of children on operations, including the abuse by other peacekeepers, is neutralized.

Peacekeeping operations place strangers together in an intentional way for clearly defined political purposes with implicit and explicit moral elements embedded in the operations order related to reducing or ending conflict. This same dynamic also puts peacekeepers in situations of considerable ambiguity, where war fighting may have recently stopped or been averted but where tensions have not been eased. As persons tasked to make or enact decisions for the well-being of others, including those most vulnerable to exploitation, peacekeepers are moral actors who are expected to turn their considerable skills for war-fighting to help peace take root in a highly politicized and operationally sensitive context.

A moral approach to peacekeeping is not an idealistic one but a reasonable way of moving beyond an order to considering its impact on those who carry it out and those subject to its effects. As part of the fiduciary responsibility, civilian political leadership and military commanders are required to ensure troops are prepared as fully as possible to meet the contingencies inherent to peacekeeping operations, especially those with serious moral implications. As an expression of that fiduciary responsibility, *The Vancouver Principles* are

18 Philip S. Keane, *Christian Ethics and Imagination*, (New York: Paulist Press), 1984. 9.

19 Keane, 13.

20 *The Vancouver Principles*. https://www.vancouverprinciples.com/wp-content/uploads/2017/11/17-204-Vancouver-Principles-Doc-EN-v3.pdf

designed to build upon and complement the existing framework on peacekeeping and child protection, including *The Paris Principles* and relevant Security Council resolutions.

The Vancouver Principles highlight the explicit moral context of operations, and peacekeepers need to be prepared to activate their moral imaginations. The moral imagination works by restraining reflexive responses to allow consideration of less harmful courses of action. Strengthening peacekeepers' moral imaginations begins before deployment through scenario based training, giving them opportunity to work through their own biases and critical issues concerning war affected children before encountering them. By defining child soldiers to include a range of ancillary roles, the Grave Violations against children provide all parties to the peacekeeping mission with a common language and a shared framework for communicating what peacekeepers may be experiencing or witnessing.

By explicitly stating the differential impact of conflict on girls,[21] the language of *The Vancouver Principles* also prepares peacekeepers and other organizations in theatre to recognize that what may be perceived as a cultural practice or an environmental inevitability could be a grave violation. This in turn strengthens the ability of peacekeepers to consider a wider range of responses in addition to legal ones. They do so by specifying how Member States may train, plan, and describe the conduct of their national forces in peacekeeping by "strongly encouraging" familiarity with measures for child protection and to prevent the recruitment and use of child soldiers. In this way, *The Vancouver Principles* cover potential gaps in national policies and military and police doctrine regarding the presence and the activities of children.

Given the extraordinary risk of moral injury in peacekeeping operations, where non-combatants, including children, are also under threat, *The Vancouver Principles* provide helpful language and images to prepare peacekeepers for what they will experience. By clearly stating what constitutes crimes against children, the Grave Violations enable peacekeepers to name what they are seeing or learning about by using a shared set of terms:

1. killing and maiming of children;
2. recruitment or use of children as soldiers;
3. sexual violence against children;
4. abduction of children;
5. attacks against schools or hospitals;
6. denial of humanitarian access for children.[22]

21 *The Vancouver Principles*, preamble paragraph 8. www.vancouverprinciples.com/wp-content/uploads/2017/11/17-204-Vancouver-Principles-Doc-EN-v3.pdf

22 "About the Vancouver Principles On Preventing the Use and Recruitment of Child Soldiers," FN. www.vancouverprinciples.com/about/

The Grave Violations acknowledge the unique challenges presented by all children in conflict zones and demonstrate that member states are committed to holding perpetrators to account for the mistreatment of all children. In turn, this helps ensure peacekeepers acknowledge and are able act on the moral obligations of the strong towards the weak, and that their witness will be acted upon, helping to reduce both crimes against children and injuries to their own personnel.

The Vancouver Principles are intended to ensure that peacekeepers' witness will be taken seriously. They also acknowledge the potential of war affected children to become responsible citizens in the future. This acceptance of responsibility for future hope identifies the foundation of peacekeeping as moral action. Peacekeepers fill an important role as guardians of future citizens and leaders; they need to be empowered to fulfill their duty to prevent children's potential from being squandered.

The moral response enabled by *The Vancouver Principles* plays a significant role in naming and supporting, even enforcing, communal response and accountability when it comes to protecting children and youth before, during and after conflict. Child protection focal points (Principle 4) aid and strengthen interoperability on peacekeeping missions by enhancing cooperation between various state actors and nongovernmental organisations in the area. Their existence is not only a potential source of hope and relief for children, but supports the mental and moral well-being of peacekeepers who know there are safe places dedicated to children's well-being. The inclusion of mental health (Principle 13) strengthens all the Principles as moral and communal components of the fiduciary obligation of command leadership. Prioritizing the mental health of peacekeepers in theatre and afterwards, and supporting research on trauma related to the experience of war affected children, acknowledges that their operational experience is important to their chains of command, their governments, and society. This recognition is a significant achievement considering the shame and opprobrium experienced by veterans suffering psychological injuries in the past.

The Vancouver Principles also offer encouragement to those on peacekeeping missions who have responsibility for the well-being of others, including commanders, chaplains and mental health specialists. By providing a common language and a defined set of terms, *The Vancouver Principles* help shape political and moral desires and ideas into concrete terms, giving linguistic form to observed reality and providing common ground for identifying the presence and activities of child soldiers and other war affected children. The vulnerability of children and youth encountered on operations imposes responsibilities, not only towards minors, but also towards their families and communities. By focussing on the vulnerability of children rather than debating their innocence, *The Vancouver Principles* provide a useful framework for the encounter with minors on operations by highlighting the role and responsibility of peacekeepers and other security sector actors as professionals trained and equipped for these encounters.

Challenges remain for some security sector actors and veterans. Many of those who needed their parents' permission to join the Canadian Armed Forces because of their age argue that a child soldier is a just another soldier. Others struggle with tremendous guilt for having prioritized self-protection when encountering an armed child. *The Vancouver Principles* do not attempt to weigh the moral innocence of any particular group of children, nor do they waive the right of self-defence for peacekeepers. Instead, their focus on the vulnerability of all minors in regions of conflict is consistent with Just War Theory, which recognizes that child soldiers act under great, even "irresistible" duress.[23] Contemporary Just War Theory also recognizes that the older the child soldier, the greater their presumed capacity for discerning right and wrong, even when it is not an adult capacity.[24]

As principles for peacekeeping operations, and as source of guidance for other operations, *The Vancouver Principles* cover "a critical gap in policies and military and police doctrine."[25] By including ancillary and exploitative roles filled by children, including those for sexual purposes, the Grave Violations recognize that peacekeeping plays an essential role in preventing such abuses. Empowering peacekeepers to intervene effectively where children are being exploited helps reduce the burden of witnessing harm to children and youth is reduced. It is hard enough for soldiers to describe many of the things they witness or participate in; to have structures in place to address the events they report enables peacekeepers to maintain the witness position of Empowered and Aware, the position most conducive to effective performance and to limiting moral injury.

Moral emotions lie at the heart of moral injury. Therapy is necessary to treat the injury, but it alone is not enough. The morally injured also need a community capable of helping them integrate a new understanding of their experience and of the context in which that experience injured them.[26] These are interpersonal, communal, even political tasks that depend on language to be effective. Language is useful for passing on information, for establishing and maintaining relationships with others, and for sharing experiences and emotions.[27] *The Vancouver Principles* not only help peacekeepers prepare for encountering children and youth while on mission, it gives them an internationally recognized language to give them voice for their experience, both good and bad.

23 Jeff McMahan. *Killing in War*. Oxford; Clarendon Press, 2009. 201.

24 McMahan, 201.

25 https://www.vancouverprinciples.com/about/

26 Serene Jones, *Trauma and Grace: Theology in a Ruptured World*, Louisville, KY: Westminster John Knox Press, 2009. 54.

27 Trask, 138

Dorothee Soelle writes about the importance of language for re-establishing communication after difficult or traumatic experience.[28] Bernard Verkamp argues that wounded soldiers need community, not autonomy or privacy.[29] Serene Jones describes the role of such a community is not to explain the suffering of the other but to witness the possibility of reconfiguring it to a better purpose.[30] Each of these perspectives recognizes that it is not enough simply to tell of one's experience; there also needs to be an intentional, committed response to it. For UN peacekeepers in the 1990s, many found they could not prevent atrocity no matter how hard they tried, either to intervene or to argue for more robust Rules of Engagement. Those in Rwanda experienced "failure" because the connection between their intentions and their actions was severed by being forbidden to act by higher political authorities.[31]

Efforts to address the potential psychological and moral effects of operations on peacekeepers recognize that they suffer guilt and shame about many of the things they may have to do while on operations, especially anything they do or fail to do that results in the deaths of children and non-combatants.[32] Guilt and shame are important moral emotions.[33] Verkamp describes the necessity for analysis of one's conduct "with reference to some moral standard beyond one's own subjective feelings," and the importance of giving peacekeepers access to a community of shared experience, where they may learn that the guilt they are being asked to carry is not theirs alone.[34] It is for this reason that *The Vancouver Principles* are a necessary component of peacekeeping operations: they help structure a moral framework for dealing with child soldiers, for the sake of the children, for the peacekeepers, and for the social environment in which they are deployed.

Ultimately, this is a political task. *The Vancouver Principles*, like other important communications, have two sources of meaning, their content and their context.[35] The context for peacekeeping operations is always political. Wiinikka-Lydon's argument for recognizing the potential political critique inherent to moral injury opens up possibilities for ethics and for peacekeeping policy.[36] I would add it also encourages military helping professionals and leaders to be proactive when new operations or deployments are being planned. Moral injury

28 Dorothee Soelle, *Suffering*, translated by Everett R. Kalin, (Philadelphia: Fortress Press), 1975, 70.

29 Bernard Verkamp, *The Moral Treatment of Returning Warriors in Early Medieval and Modern Times* (Scranton: University of Scranton Press, 2006). 97.

30 Jones, 52, 53.

31 Jones, 111.

32 Mark Baker, *NAM: The Vietnam War in the Words of the Men and Women Who Fought There* (1981), cited in Verkamp 61.

33 Verkamp, 62.

34 Verkamp, 97.

35 Trask, 124.

36 Wiinikka-Lydon, 3.

is not simply a consequence of following or breaking rules, it is an injury to one's world view, to deeply held beliefs about right and wrong, and to one's sense of self as an effective moral agent.

Because peacekeepers serve on operations that have multiple operational and political objectives, their moral injuries have both an institutional component and an individual one. *The Vancouver Principles* can help peacekeepers mitigate some of their moral injury by enabling active witness to wrongdoing and supporting expectations of accountability. By providing a new understanding and new processes for addressing encounters with children on operations, especially child soldiers, *The Vancouver Principles* have the potential to mitigate transgressions of international law and violations to the peacekeeper's moral integrity.

As Wiinikka-Lydon has argued, to recognize the morally damaging conditions of political violence and atrocity is to recognize the limits of the peacekeepers' agency.[37] Nevertheless, there is a powerful agency in fulfilling one's duty to stand fast and witness as part of peacekeeping operations. Such witness does not accept atrocity or the use of child soldiers, nor is it a passive limitation imposed by ROEs, but is instead an acknowledgement that empowered critical witness, arising from the consequences of imperfect social and foreign policy, can still play a central role in shaping future change. *The Vancouver Principles* serve to aid and strengthen the bonds between peacekeepers and the chain of command, the fiduciary responsibility, and cooperation with other actors in the area of operation. These Principles can also strengthen the covenant between peacekeepers and the civilian community in whose name they serve, and the reciprocal commitment of that same community to help them restore childhood to war affected children.

37 Wiinikka-Lydon, 13

RESEARCH ARTICLE

Moral Injury - A Window into Damaging and Injurious Contexts

By Marianela Fuertes

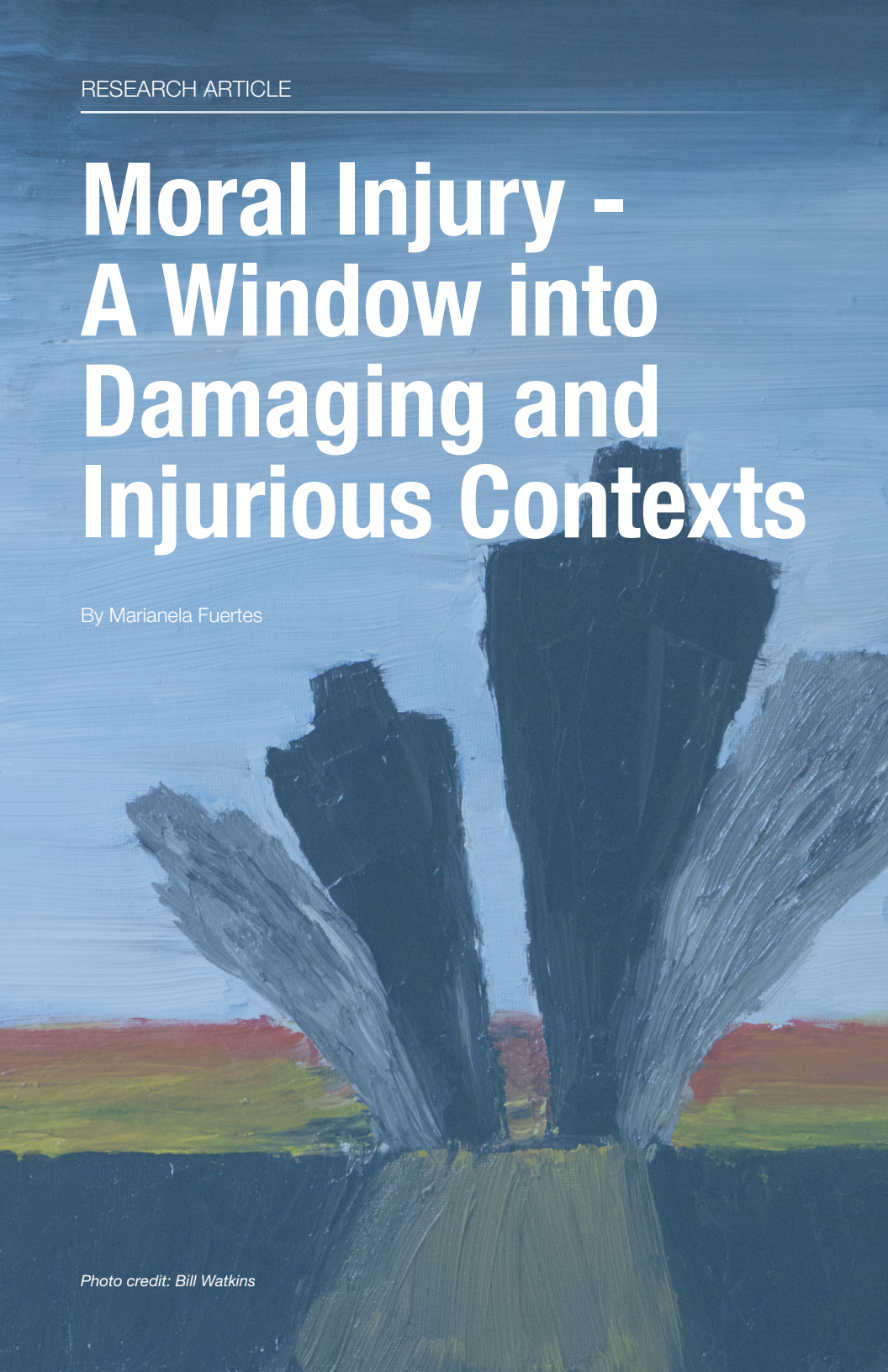

Photo credit: Bill Watkins

ABSTRACT

Moral Injury is a concept developing in psychology literature to review the impact of war on veterans and has especially focused on individual symptoms and finding clear diagnosis tools. This paper explores the connection between moral injury and the context in which they occur, a relationship that provides valuable understanding about the experience, but also the systemic factors that increase the vulnerability. The article begins by setting the groundwork for the discussion and introducing moral injury and its associate concepts. Part two explores the institutional dimension of moral injury and how an individual's professions can contribute to the injury. Part three proposes how moral injury insights can be implemented as guiding principles within peace and security, and particularly in peacekeeping missions. The final conclusion points to the context and the institutional system as the frame where personal reaction, values and systemic influences combine to produce moral injury. Therefore, looking for solutions to prevent and treat moral injury must acknowledge the true roots causes of distress that is not part of individualistic pathologizing mental health diagnosis.

INTRODUCTION

The purpose of this paper is to highlight the importance of the connection between the context where moral injuries occur—the circumstances before and after the injurious events—and the institutional responses as described through the feelings of betrayal and the deep harm to core values experienced by affected individuals. Moral injuries often happen in a context where individuals are fulfilling a role and serving as part of an institution to carry out its values and beliefs. Exploring the essential connection between the moral injury and the context in which they occur, provides valuable understanding about the experiences of injured individuals, but also the systemic factors that increase the vulnerability.

Unfortunately, the systemic dimension of moral injury has been under-studied. Research has taken a clinician-focused approach, which is seen as more rigorous research. The connection between moral injury and experiencing violence, motivates the various streams of psychological research focused on symptoms, treatments, and prevention. This approach is overly individualistic and ignores the insights that moral injury's systemic and ethical dimensions can provide. It also ignores the deep connection that people have with the institutional aspects that contribute to their injury. Examining the ethical domain of moral injuries, in connection with the context and the conditions of betrayal, would allow for a critical examination of the underlying institutional factors and the root causes of moral injury.

The article begins by setting the groundwork for the discussion and introducing moral injury and its associated concepts. Section II explores the institutional dimensions of moral injury and how an individual's profession can contribute to the injury. Section III proposes how moral injury insights can be implemented as guiding principles within peace and security, and particularly in peacekeeping missions. Section IV concludes the article.

MORAL INJURY AS A CONCEPT

Moral injury is an emerging concept developed in the psychological literature to describe the impact of war on veterans. Clinicians in the field found that PTSD was limited in explaining the trauma suffered by war veterans. As concern rose, moral injury was presented to emphasize the trauma resulting from an experience that shook a person's core values.[1] Moral injury has also been described as a bruised soul resulting from a betrayal of "what is right".[2] Individuals with moral injuries have often faced ethical dilemmas that fundamentally destabilize their

1 Litz, Brett T., Nathan Stein, Eileen Delaney, Leslie Lebowitz, William Arthur Nash, Caroline Santos Silva, and Shira Maguen. "Moral Injury and Moral Repair in War Veterans: A Preliminary Model and Intervention Strategy." *Clinical Psychology Review* 29, no. 8 (December 1, 2009): 695–706. https://doi.org/10.1016/j.cpr.2009.07.003.

2 Shay, J. Moral injury. *Psychoanalytic Psychology*, 31, no. 2 (2014), 182–191. https://doi.org/10.1037/a0036090.

world views. This ethical dimension of moral injury is a central distinguishing feature from other psychological injuries like PTSD and was the animating reason for developing the new term.

Moral injury affects the core values of a person, their sense of connection to good and their central aspect of identity and belonging. An ethical grounding is the distinction between right and wrong that provides meaning, sense, and purpose of life. Disturbing circumstances can challenge a person's ethical grounding, transforming identity, purpose, and spirit. The person who is affected by moral injuries can lose their sense of value and refer to themselves as a monster,[3] no longer a human being.

Even though the term moral injury has become extensively used in contemporary trauma literature and studies, it is not a concept with a precise definition. However, there is consensus that the injury is a result of being exposed to a traumatic experience that compels the individual to do or witness things deeply opposed to the person's core values and beliefs.[4] The current understanding of moral injury also accepts certain constructs: feelings of betrayal, moral ambivalence, soul wounds, and an inability to reconcile with the atrocities endured during service.[5] The majority of these aspects are extracted from interviews primarily conducted with veterans seeking relief for the mental health challenges they face after coming back from combat. Current research also highlights that moral injuries commonly occur in people who are carrying out responsibilities connected with essential public services.[6]

Moral injury emerges when a person experiences or witnesses an event as morally wrong or as a violation of deeply held core values resulting from some personal agency or strong feeling that the wrong committed should be punished or rectified.[7] However, there are no established

3 Rozek, D. C., & Bryan. A cognitive behavioral model of moral injury. In J. M. Currier, K. D. Drescher, & J. Nieuwsma (Eds.), *Addressing moral injury in clinical practice* (pp. 19–33). American Psychological Association (2021). https://doi.org/10.1037/0000204-002

4 Litz, et al, 2009.

5 Hodgson, Timothy L., and Lindsay B. Carey, "Moral Injury and Definitional Clarity: Betrayal, Spirituality and the Role of Chaplains," *Journal of Religion & Health* 56, no. 4 (May 19, 2017): 1212–28, https://doi.org/10.1007/s10943-017-0407-z

6 Keefe-Perry, L. Callid. "Called into Crucible: Vocation and Moral Injury in U.S. Public School Teachers." *Religious Education* 113, no. 5 (2018): 489-500. https://doi.org/10.1080/00344087.2017.1403789; Haight, Wendy, Erin P. Sugrue, and Molly Calhoun. "Moral Injury Among Child Protection Professionals: Implications for the Ethical Treatment and Retention of Workers." *Children and Youth Services Review* 82 (2017): 27-41. https://doi.org/10.1016/j.childyouth.2017.08.030; Levinson, Meira. "Moral Injury and the Ethics of Educational Injustice." *Harvard Educational Review* 85, no. 2 (June 10, 2015): 203–28. https://doi.org/10.17763/0017-8055.85.2.203

7 Farnsworth, Jacob K. "Case Conceptualization for Moral Injury." In Addressing Moral Injury in Clinical Practice, edited by Joseph M. Currier, Kent D. Drescher, and Jason Nieuwsma, 87-103. *American Psychological Association*, 2021. https://doi.org/10.1037/0000204-006.

criteria for the essential features of a Potential Moral Injurious Event (PMIE). The external circumstances or events had to exist to create the conditions to produce the PMIEs.[8] The moral injury is inseparably linked to the chaos that exists before and after the wrongdoings. This is an aspect that distinguishes moral injury from other mental health conditions that operate in the subconscious level removed from a sense of agency or a set of ethical values.[9]

Most moral injury research in the psychologic field is focused on its psychological symptoms and finding clear diagnosis tools.[10] This approach often overlooks the context where moral injuries happen and the features of PMIEs deeply engrained in institutional systems. Context, PMIEs, and ethical dilemmas are three fundamental aspects of moral injuries. Highlighting these relationships can contribute to enhancing understanding of how external conditions, features of the events, institutional structures, and the ethics of an organization create the conditions to be morally injured. These are all relevant aspects to create integral solutions and suitable support for the individuals interacting with PMIEs.

INSTITUTIONAL DIMENSION

An organization created to provide services or produce things, has a structure, a mission, and procedures. The people who are part of the organization, in carrying out their roles and responsibilities, continually interact with the systems within their institutions to reach the organization goals. An institutional ethical environment is the result of the organizational culture and the behavior of the individuals. The environment is created in two directions: top-down as established by creators and directors, and bottom-up by the hierarchy of individuals in the organization working to reach the institutional goals. Key aspects of this ethical environment not only are the values and beliefs prescribed in the mission statement or public policies but the institutional structure—how it is governed and what values are promoted and sustained.[11] The stories told by people who have been affected by a traumatic experience or a PMIE where they were compelled to do or witness situations that affect deeply

8 Papadopoulos, Renos K. "The Traumatizing Discourse of Trauma and Moral Injury." In *Moral Injury and Beyond: Understanding Human Anguish and Healing Traumatic Wounds*, 1-21. Routledge, 2020.

9 Richardson, N. M., Lamson, A. L., & Hutto, O. "My whole moral base and moral understanding was shattered": A phenomenological understanding of key definitional constructs of moral injury. *Traumatology* 28, no. 4 (2022), 458–470. https://doi.org/10.1037/trm0000364

10 Litz, Brett T., and Patricia K. Kerig. "Introduction to the Special Issue on Moral Injury: Conceptual Challenges, Methodological Issues, and Clinical Applications." *Journal of Traumatic Stress* 32, no. 3 (June 1, 2019): 341–49. https://doi.org/10.1002/jts.22405; Nash, William P. "Commentary on the Special Issue on Moral Injury: Unpacking Two Models for Understanding Moral Injury." *Journal of Traumatic Stress* 32, no. 3 (June 1, 2019): 465–70. https://doi.org/10.1002/jts.22409.

11 Meyers, Christopher. "Institutional Culture and Individual Behavior: Creating an Ethical Environment." *Science and Engineering Ethics* 10, no. 2 (April 1, 2004): 269–76. https://doi.org/10.1007/s11948-004-0022-8.

their core values, are often connected to the role and the institutions they represent. How often the organization provides a healthy review of the environment and has the flexibility to respond to the challenges that individuals are facing using their policies and procedures greatly depends on the organization. And whether organizations have the tools to identify key factors (e.g., quality of leadership, accountability) that influence the relationships that create a culture and define the environment in an institution is another variable relevant to understanding moral injury.

The study of moral injury in veterans is highly illustrative of the concepts discussed above. Following WWI and WWII, psychologists noted that veterans were reporting feeling guilty for striking or killing defenceless soldiers.[12] In the context of war, engagements would be governed by the military code and the instinct of "kill or be killed". However, in the context of a defenceless enemy, the soldier's civilian morals and conscience came into conflict with the institutional ethic of their profession.[13] In these circumstances, where soldiers experienced situations where their personal and professional values conflict deeply, they suffer injuries distinct from other psychological injuries; these are injuries to their souls. As such, these injuries cannot be treated as strictly mental health concerns. Rather, a fulsome treatment of the moral injuries that considers the context in which they occur can help highlight the institutional deficiencies that help create them.

MORAL INJURY AND PUBLIC SERVICES

Studies of moral injury that appreciate the context of PMIEs could enhance awareness of the dimensions and root causes of the mental health challenges of key groups that provide public services and work to protect vulnerable populations. Key professions like police, child protection professionals,[14] public school teachers,[15] journalists,[16] human rights workers,[17]

12 Currier, Joseph M., Kent D. Drescher, and Jason Nieuwsma. "Future Directions for Addressing Moral Injury in Clinical Practice: Concluding Comments." *American Psychological Association*, 2021. https://doi.org/10.1037/0000204-015

13 Ibid

14 Haight, et al, 2017.

15 Sugrue, Erin P. Moral Injury Among Professionals in K–12 Education. *American Educational Research Journal*, 57, no. 1 (2020), 43–68. https://doi.org/10.3102/0002831219848690

16 Feinstein, A., Pavisian, B., & Storm, H. Journalists covering the refugee and migration crisis are affected by moral injury not PTSD. *JRSM Open*, 9, no. 3 (2018), 205427041875901. https://doi.org/10.1177/2054270418759010

17 Joscelyne A, Knuckey S, Satterthwaite ML, Bryant RA, Li M, Qian M, Brown AD. Mental Health Functioning in the Human Rights Field: Findings from an International Internet-Based Survey. *PLoS One*. 10, no. 12 (2015): e0145188. doi: 10.1371/journal.pone.0145188.

nurses,[18] and doctors[19] are showing that something systematic and structural is not working. These various broken systems have been affecting increasing numbers of professionals, their families, the populations that they serve, and their societies. The complexity faced by professionals that work to help people can be examined through the lens of it being a job with high moral expectations and as the source of moral injuries.[20] This perspective illustrates the potential solutions, namely creating better training and tools for resilience on managing expectations. Further, testimonies from these professionals show the institutional deficiencies that should be addressed.

The increasing interest in studying moral injury in professions outside of the military always encounters the ethical aspects of the concept because the injured person references the ethical dilemmas they face, not only their psychological symptoms. For instance, police officers are exposed to multiple and frequently distressing incidents, potentiality aggravated by the increasing complexity of factors that affect society (e.g. poverty, substance use disorders, domestic violence, gangs). They are one of the primary sources of authority in society. Policing is the institution that oversees the rules; this is the ethos of the organization when police interact with communities. Yet, officers face significant inner conflict with their duties. Officers reference feeling alone in responding to increasingly complex circumstances or being under constant pressure to respond correctly and efficiently.[21] They describe following labyrinths of inflexible administrative rules, far from the reality they see on the streets, which create an environment that drains their energy and steals their spirit.[22]

The description of police officers' personal situations, seen in the context of increasing intervention of policing to handle all sort of conflicts, and always with the potential to use force, creates the conditions where they question the proportionality of their interventions. How police use and apply force in a particular circumstance is deeply engrained with the legitimacy of their intervention. In turn, police interventions are the result of political,

18 Čartolovni, Anto, Minna Stolt, P. Anne Scott, and Riitta Suhonen. "Moral Injury in Healthcare Professionals: A Scoping Review and Discussion." *Nursing Ethics* 28, no. 5 (2021): 590-602. https://doi.org/10.1177/0969733020966776.

19 Dean, Wendy, Simon Talbot, and Austin Dean. "Reframing Clinician Distress: Moral Injury Not Burnout." *Federal Practitioner: For the Health Care Professionals of the VA, DoD, and PHS* 36, no. 9 (2019): 400-402.

20 Lentz, Liana, Lorraine Smith-MacDonald, David Cruise Malloy, R. Nicholas Carleton, and Suzette Brémault-Phillips. "Compromised Conscience: A Scoping Review of Moral Injury Among Firefighters, Paramedics, and Police Officers." *Frontiers in Psychology* 12 (March 31, 2021). https://doi.org/10.3389/fpsyg.2021.639781.

21 Strydom, Herman, Botha, Karel, & Boshoff, Pieter. An assessment of the need of police officials for trauma intervention programmes – A qualitative approach. *Social Work/Maatskaplike Werk*, 51, no. 2 (2015). https://doi.org/10.15270/51-2-447

22 Ibid

economic, and social conditions that influence the culture of the police and define the ethos of the organization. A binary vision about right or wrong uses of force does not capture the impact of the daily, consecutive, and systematic practices guided by the organizational culture and the multidimensional use of police intervention.

Moral injury studies with police officers enhance understanding and provide language to express the complexity of police interventions that face PMIEs almost all the time when they are on duty (e.g., facing increasing mental heath interventions, housing depravation, mass shouting). Moral injury concepts help show that behind those potential injurious systems are not only events where officers feel constantly under threat and lacking support, but also that officers are coping in an environment that does not recognize their stressors and their needs.[23] Policing is more than a job description and skilful training on use of force. Police officers represent, on a daily basis, the legitimacy of the social contract, interacting with individuals and communities looking to guarantee public peace and safety. In other words, the police are responsible for upholding and representing some of society's most important values. Police officers do not only carry out a job to fulfill some requirements. Through their interventions they represent the delicate role of authority before society. They are the primary face of authority which must uphold trust and credibility.

Similar to police officers, social workers and child protection workers find deep contradictions between their ethics and the policies, procedures, and execution of the system. Haight, et. al (2017), who interviewed 37 Child Protection Service (CPS) professionals from two adjacent metropolitan counties in the US Midwest, argue that the social conditions surrounding this work enhance the propensity for moral injuries. The interviewees worked in different roles providing services to parents accused of child maltreatment in a context where thirteen percent of the population was living in poverty.[24] CPS professionals described how working in an under-resourced system harms them. These individuals perform duties with conflicting laws and values like prevention, protection, and prosecution. Their focus is to serve an adversarial system that does not touch any of the root causes of the events that require their intervention. Further, the CPS system operates with deep underlining biases and discrimination against the population that it purports to serve.[25] Also, CPS professionals described working in conditions with overwhelming caseloads, very little training on complex administrative rules, micromanagement, and a lack of support.[26] These challenges are likely reflected in the high turnover rates in CPS professionals in the region of study, ranging from 23 to 60 percent

23 Ibid

24 Haight, et al, 2017.

25 Ibid

26 Ibid

annually with some agencies experiencing turnover of over 90 percent.[27] In the words of a CPS professional:

> I just feel really strongly about our child protection system and the way in which it is really broken. So, that's where I'm troubled. I'm troubled, as a social worker, by what feels like my own complicity with it. I'm troubled by the ways in which we're failing families and society as a whole.[28]

The moral dilemmas described by child protection workers reflects not only multiple moral injurious events, but a systematic dysfunction that produces great sorrow over the population they protect.

The moral suffering in public professionals shows that the activity of helping others is not only a job with some requirements and expectations, but it is a critical function in society. These roles have duties and interpersonal effects as well.[29] In that sense, facing moral dilemmas is not a situation where highly skilled individuals with agency will make decisions and then rationally live with the consequences. Rather, the institutional context is an essential part of the PMIE or circumstances. Therefore, the underlying institutional factors and its ethic are part of the process to build understanding and meaning about what happened or what are the challenges that affect mental health. PMIEs do not occur in a vacuum, and this highlights that the institution's ethical status and how it is manifested in its principles, processes, and culture, must be considered to enhance understanding of the root cause of MI. It also helps to illustrate the things that need to change to address the contextual and systemic aspect, not the treatment of the mental distress experienced by individuals, but also to transform the organization and public policies that are contributing factors for the injury.

There is already some guidance in the literature as to how the institutional ethical dimension of moral injury can inform the support received by professionals. Findings from research into moral injury shows that betrayal, both in terms of self-betrayal and feeling betrayed by others, is an aspect proven and validated as a fundamental source of moral injury in veterans and other professions.[30] In addition, these studies disclosed multilevel systemic betrayal as

27 Ibid

28 Ibid, p. 36

29 Pliner, Eric. *Difficult Decisions: How Leaders Make the Right Call with Insight, Integrity, and Empathy*. John Wiley & Sons (2022).

30 Blinka, Dee and Helen Wilson Harris. "Moral Injury in Warriors and Veterans: The Challenge to Social Work." *Social Work and Christianity* 43, no. 3 (2016): 7-27. https://www.researchgate.net/profile/Helen-Harris-7/publication/306356203_Blinka_and_Harris_Moral_Injury_NACSpdf/links/589be559a6fdcc754174353f/Blinka-and-Harris-Moral-Injury-NACSpdf.pdf#page=10; Farnsworth, Jacob K., Kent D. Drescher, Jason A. Nieuwsma, Robyn B. Walser, and Joseph M. Currier. "The role of moral emotions in military trauma: Implications for the study and treatment of

a common source of moral injury. In this sense, it is important to underline the systemic implications of moral injury. Even though the definition of moral injury is still emerging, the consensus is that PMIEs include betrayal, disproportionate violence, incidents involving civilians, and within-rank violence.[31] Also, studies recognize that the moral dimension of MI should not be pathologized, first because moral reactions are the result of a social process to promote community living, and second because scientific bases to categorize moral reaction as "appropriate" or "inappropriate" do not exist. Those labels come from moral judgments which are the product of cultural, historical, social, and professional conventions that define responsibilities and punishment.[32] This latter point suggests that addressing MI must consider the ethical context, rather than treating it solely as a psychological injury.

MENTAL HEALTH & THE VANCOUVER PRINCIPLES

Although peacekeepers have been trained to go to armed conflict zones and those operations draw increasing political assessments, the stressors of highly difficult contexts, such as the complexity of humanitarian missions, are not frequently considered in the methodology for clinical assessment. For instance, Sareen, et al. (2008) argue "soldiers returning from deployment are increasingly likely to have emotional problems and use mental health services associated with combat or peacekeeping".[33] However, the study examines individual attributes "e.g., genetical, childhood adversity, stressful life events, social support and personality".[34] This individual focus underestimates the contextual aspect and the potential institutional responsibility to train individuals to face extraordinary stressors, certainly linked to armed combat but also, closely tied with complex ethical dilemmas such as encounters with child soldiers in those complex environments. Individualistic approaches bring individualistic solutions. The Road for Mental Readiness (R2MR) endeavour for example, emphasizes strengthening resilience by focusing on individual responsibility to get diagnosed and find

moral injury." *Review of General Psychology* 18, no. 4 (2014): 249-262. https://journals.sagepub.com/doi/pdf/10.1037/; Nash, William P., Teresa Marino Carper, Mary Alice Mills, Teresa Au, Abigail Goldsmith, and Brett T. Litz. "Psychometric Evaluation of the Moral Injury Events Scale." *Military Medicine* 178, no. 6 (November 14, 2013): 646–52. https://doi.org/10.7205/milmed-d-13-00017.

31 Drescher, Kent D., David W. Foy, Caroline Kelly, Alan Leshner, Kerrie Schutz, and Brett Litz. "An Exploration of the Viability and Usefulness of the Construct of Moral Injury in War Veterans." *Traumatology* 17, no. 1 (2011): 8-13. https://doi.org/10.1177/1534765610395615.

32 Farnsworth, Jacob K. "Case Conceptualization for Moral Injury." In Addressing Moral Injury in Clinical Practice, edited by Joseph M. Currier, Kent D. Drescher, and Jason Nieuwsma, 87-103. *American Psychological Association*, 2021. https://doi.org/10.1037/0000204-006.

33 Sareen J., Shay-Lee Belik, Tracie O. Afifi, Gordon J. G. Asmundson, Brian J. Cox, and Murray B. Stein. Canadian Military Personnel's Population Attributable Fractions of Mental Disorders and Mental Health Service Use Associated With Combat and Peacekeeping Operations. *American Journal of Public Health* 98 (2008), 2191-2198. https://doi.org/10.2105/AJPH.2008.134205, p. 2193

34 Ibid

personal solutions.[35] The rising awareness about MI in veterans highlights a need to further investigate the institutional aspects linked with the experience lived by military personal that contribute to increased risk for MI.

The Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers[36] is an international instrument that recognizes the necessity to train peacekeepers according with the increasing complexity of armed conflicts as an important aspect to increase mission efficiency. The Vancouver Principles are a series of political commitments, endorsed by over 100 nations, which focuses on the protection of children in peacekeeping missions and is particularly committed to preventing the recruitment of children in armed conflicts. The 13th Principle has a particular focus on mental health and the impact of moral injury. The principle pledges to:

> [A]ctively promote and support research on the trauma experienced by personnel confronting child soldiers and interacting with children affected by armed conflict, and to provide appropriate pre-deployment preparation, as well as mental health support during and post-deployment.[37]

Preparing for the ethical dimensions and the impacts that violence causes are essential parts of preparation for peacekeeping missions.

MI as a lens provides avenues and language to articulate and understand the impact of violence and how trauma affects interpersonal relationships, perceptions of the world, and the meaning of life. This lens highlights the deep influence of the interactions between the members of peacekeeping missions and the communities where they will be deployed. Awareness and knowledge about the trauma suffered by populations under extreme violence is mentioned in endnote 140 of the Implementation Guide for the Vancouver Principles:

> It is important to note that child soldiers and children affected by armed conflict are also exposed to severe psychological trauma.[38]

35 Government of Canada. "Road to Mental Readiness." R2MR. 2018. https://strongproudready.ca/missionready/en/road-to-mental-readiness/.

36 Government of Canada. "The Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers." 2017. https://www.international.gc.ca/world-monde/issues_development-enjeux_developpement/human_rights-droits_homme/principles-vancouver-principes-pledge-engageons.aspx?lang=eng.

37 Ibid

38 Government of Canada. "Chapter 13 – Mental Health." In Implementation Guide for the Vancouver Principles, Government of Canada Publications, 2019. https://www.canada.ca/en/department-national-defence/corporate/reports-publications/vancouver-principles/introduction/mental-health.html p. 63

Better understanding the communities and their context prepares the members of the mission to face the complexity with better information, reduces biases, and allows them to respond to the challenges instead of just reacting.[39]

Contextual awareness and better cultural understanding can increase the effectiveness of the mission and provide fundamental preparation for military personnel who are going to navigate PMIEs. Military personnel are part of an institution, and they act under the institutions culture, organization, instruction, mission, and operation. Continuous education is essential to assess difficult decisions and to illustrate potential moral reasoning behind choices. Transparency and accountability are also fundamental aspects for prevention and for improved mental health wellness.

Identifying institutional factors that increase vulnerability to moral injury is essential to the future of peace support operations. Studies that aim to assess if there are links between deployment experiences and adverse health outcomes have pointed to extreme helplessness or powerlessness as a special factor for stress in peacekeeping operations and with potential long-term damage.[40] A study conducted with members of the Australia Defense Force, following a deployment to the Middle East, illustrates the importance of institutional aspects, such as poor leadership and inadequate administration, as recurrent risk factors of distress in deployment missions.[41] The study also reported corruption and criminality by local government and coalition forces and witnessing poor treatment of civilians by the local forces and coalition forces as contributing to moral injury.[42] In another study exploring the link between leadership and moral injury, from the perspectives of veterans from Norwegian contingents of the UN Interim Force in Lebanon (UNIFIL), the authors argue the "quality of leadership has a separate and significant predictive power on the long-term outcome after peacekeeping missions under stressful conditions".[43]

39 Whitman, Shelly & Baillie Abidi, Catherine. Preventing recruitment to improve protection of children. *Allons-Y Journal of Children, Peace and Security*, 4 (2020), 27-39. https://doi.org/10.15273/allons-y.v4i0.10081

40 Weisaeth, L., & Sund, A. Psychiatric problems in UNIFIL and the UN-soldier's stress syndrome. *International Review of Army, Air Force and Navy Medical Service*, 55 (1982), 109-116; Litz, B. T. "The Psychological Demands of Peacekeeping for Military Personnel." *Clinical Quarterly* 6, no. 1 (1996): 1-15.

41 Runge, Catherine E., Moss, Katrina M., Dean, Judith A., & Waller, Michael. What Did We Miss? Analysis of Military Personnel Responses to an Open-Ended Question in a Post-Deployment Health Survey. *Military Medicine*, usab565 (2022), https://doi.org/10.1093/milmed/usab565

42 Ibid

43 Mehlum, Lars, and Lars Weisæth. "Predictors of Posttraumatic Stress Reactions in Norwegian U.N. Peacekeepers 7 Years after Service." *Journal of Traumatic Stress* 15, no. 1 (February 1, 2002): 17–26. https://doi.org/10.1023/a:1014375026332, p. 24

Research exploring the experiences of Canadian Armed Forces personnel deployed to Afghanistan, highlight similar tensions between institutional and personal ethics. English (2016) highlighted that many reports of sexual abuse of children, perpetrated by Afghan National Army and Police personnel, were made to Canadian military police, chaplains and leadership.[44] However, military personnel faced the reality of "how entrenched this practice was in Afghan society, and any unilateral action might result in Canadian casualties at the hands of our Afghan coalition partners. Consequently, senior decision-makers opted for an avoidance approach by ordering subordinates to ignore these incidents in theater".[45] But ignoring those things can bring serious consequences.[46]

The uncertainty and ambiguity of the peacekeeping mission has a dimension linked with the complexity of being part of a multinational organization. Answers of *who* contribute with troops, *when* and *why* give a glimpse into the complexity of the decisions taken around peacekeepers mandate.[47] In that sense, all the risk factors able to impact the mental health of the military personnel has an open file of uncertainty and ambiguity from the institutional dimension that has to be recognized and translated into internal and external adaptation processes. Peacekeepers' effectiveness requires the ability to build capacity to adapt and integrate with the international security agenda that has shifted from the sovereign states to the protection of civilians. The mission in many contexts illustrates the responsibility to protect norms in a specific social construct, meaning real empirical consequences. Contexts and situations that represent multiple possibilities of ethical dilemmas and one of those PMIEs that carries great stressor effects and long-term sequelae, is violence against children. This affirmation is founded especially in the ethical premise about what is permitted in war coming from the belief that people have natural cognitive and emotional predispositions to protect non-combatants and the most vulnerable.[48]

The suffering resulting from MI is deeply linked to the core ethical damage that compromises broader social interaction. Again, this is the betrayal element of MI whereby the individual's worldview is shaken. Considering this dimension will help highlight the systemic flaws in social institutions that cause moral injuries. Thus, the Vancouver Principles is a guide that recognizes the need to build peacekeepers capacity to better protect children during

44 English, Allan. "Cultural Dissonance: Ethical Considerations from Afghanistan." *Canadian Foreign Policy Journal* 22, no. 2 (2016): 163-172.

45 Ibid, p. 171.

46 English, 2016.

47 Uzonyi, Gary. *Finding Soldiers of Peace: Three Dilemmas for UN Peacekeeping Missions*. Georgetown University Press (2020).

48 Traven. David. Moral Cognition and the Law and Ethics of Armed Conflict, *International Studies Review* 17, no. 4 (2015), 556–587, https://doi.org/10.1111/misr.12230

armed conflict, as this capacity is not incorporated into the traditional military training.[49] Vancouver Principle 13 recognizes that the mental heath of soldiers is an essential part of the effectiveness, and that encounters with children can result in a high mental impact. The role that the institutions play to acknowledge its responsibility and improve conditions to prevent MI, transforming culture, practices and providing support for the mental well being of the personnel, is a fundamental lesson that MI provides, and veterans are living testimony of its relevance.

CONCLUSION

In conclusion, moral injury cannot be understood by leaving out the context of a series of threads of multilevel systems. The context is the frame where personal reactions, values, and systemic influences combine to produce moral injuries. Therefore, looking for solutions to prevent and treat MI must acknowledge the true root cause of distress that is not part of the individualistic pathologizing mental health diagnosis.[50]

Focusing on PMIE from a psychological perspective can increase understanding about the triggers that affect the neurological system and learn about body and mind reaction. Yet, if the studies only focus on individual psychology domains, essential information to understand and treat MI will be overlooked. PMIEs do not happen in isolation; these are not random occurrences. People who suffered moral injuries describe having deep connections with a context that compromises their values and forces them to make decisions against their core beliefs. Studying moral injury without the context where the PMIEs happens is an approach that takes out the essential environment that creates the conditions where things are not going right.

PMIEs are the result of systemic conditions that produce the event (e.g. war, mass shooting, mental health crisis, addiction crisis, increasing poverty rates) in conjunction with an institutional (army, international coalitions, increasing police responses, judicial systems, child welfare) systemic response created to solve complex social problems. This is the complexity of the circumstances in which the moral injuries occur where persons who serve to protect or care for others, serve not only in highly stressful situations, but they are also part of institutions that seem to fall short of the task or ignore the red flags. The institutions may even work in opposition to the core of values that they aim to serve or are designed under doctrines and practices without procedures and tools to see what is wrong. That is what the betrayal aspect of moral injury shows. There is no doubt that the stressful conditions in which soldiers, police officers, doctors, nurses, and social workers serve in affects them and causes

49 Bryce, Victoria. & Dustin Johnson. "Security Sector Training on Prevention of Recruitment." *Allons-y: Journal of Children, Peace and Security* vol. 4 (2020): 41-54.

50 Richardson, et al, 2022.

damage to their mental health. The impact produced by the dissonant values between what the person must do and what their institution is supposed to do as part of an institutional response needs to be assessed to enhance understanding, treatment, and prevention of moral injury. Otherwise, the information provided by the person who is seeking relief will focus on individual reactions disconnected to the main source of frustration, increasing the idea that something is wrong with the person. Ignoring the external factors will contribute to increased symptoms of isolation and anger reinforcing the environmental wrongness.

RESEARCH ARTICLE

The Psychological Menace of Children Formerly Associated with Non-state Armed Groups (CFANSAG) in Northeast Nigeria

By Powei Happiness Kerry

Photo credit: Bill Watkins

The agonising experiences of children in northeastern Nigeria, who were once associated with non-state armed groups, may affect their developmental growth. This paper highlights the consequences of children formerly associated with non-state armed groups (CFANSAG), the mechanisms of oppression suffered by children who voluntarily or were coerced to join the group, and how the children find it difficult to associate with the community. The study, using qualitative research methods including key informant interviews and focus group discussions, focuses on children's different psychological reactions while using the Social Learning Theory to explain how children model aggressive acts. The study concluded that states in the Northeast should implement the Child Rights Act, renamed Child Protection Law in the core northern states, to minimise the violence against children in Nigeria.

INTRODUCTION

Children and adolescents in northern Nigeria who witnessed the menace of the Boko Haram insurgency that became pronounced in 2009 have grown up without knowing peace. Children have become victims and perpetrators of the life-long impact of the Boko Haram insurgency, which has exposed most of them to a horrendous amount of violence from as young as eight years old. The psychological and emotional damage has impacted their health and well-being in northern Nigeria. In 2022, the United Nations Security Council reported 1.72 million internally displaced persons in northeast Nigeria due to insecurity ravaging northern states. Sadly, UNICEF's earlier 2014 report stated that six out of ten children in the north had experienced violence that psychologically damaged their healthy development.[1] Thus, children's long-term mental health may elevate the risk of behavioural and emotional trauma affecting functional development. As Abodunrin (2022) noted, today's healthy and well-educated children are tomorrow's healthy and well-educated adults.[2]

Unfortunately, this is not the case with children in northeastern Nigeria as Boko Haram and its factions have used children in harsher environments for combatant and non-combatant purposes, namely as child soldiers, cooks, spies, messengers, and sex slaves. The example of how Boko Haram abducted over two hundred Chibok girls[3] and 344 students at Government Secondary School, in Kankara, Katsina state, 2014 and 2020 respectively, are cases in point. Alas, children not meant to be in conflict situations are now involved in a war that is between the Government of Nigeria and Boko Haram and its splinter groups: the Islamic states of West Africa Province (ISWAP) Jama'atu Ahlis Sunna Lidda'awati Wal-Jihad (JAS) and Ansaru.[4]

Regrettably, non-state armed groups have continued using children in the northeast despite concerted efforts by inter-governmental and non-governmental organisations and the state government. For example, the annual 2020-2021 report from the Office of the Special Representative of the Secretary-General for Children and Armed Conflicts reported the verified recruitment and use of 70 children (13 boys, 57 girls) aged between 6 and 17 years. The main perpetrators were JAS (49) and ISWAP (19), followed by CJTF; although 34 children

1 UNICEF. Ending violence against children in Nigeria. A multi-sectoral response to the 2014 Nigeria Violence Against Children Survey. https://www.unicef.org/nigeria/reports/ending-violence-against-children-nigeria. (accessed November 28, 2022).

2 Abodunrin Hammed. Safety and Security: A study of the United Nation's child Protection Network Strategies. Ibadan: Golden-Gem Press, 2022, 22

3 Akali, Omni "The Chibok Kidnappings in North-East Nigeria: A Military Analysis of Before and After.", *Small Wars Journal*, 2017, 46, https://smallwarsjournal.com/jrnl/art/the-chibok-kidnappings-in-north-east-nigeria-a-military-analysis-of-before-and-after

4 Centre for Preventive Action. "Conflict with Boko Haram in Nigeria." Accessed 23/9/2022. https://www.cfr.org/global-conflict-tracker/conflict/boko-haram-nigeria; Kolawole, Simon. "From Chibok Girls to Kankara Boys." The Cable News. 19 December. 2020. https://www.thecable.ng/from-chibok-girls-to-kankara-boys

were released or escaped during the reporting period, 36 remained associated with JAS or ISWAP. Recruiting children has become a deplorable practice that violates moral, ethical, and international legal standards. It is a crime under domestic and international law.[5]

It only points to the fact that when a child engages in destructive acts of killing, destruction, and sabotage, that child is already morally bankrupt. Thus, the child cannot engage in everyday social experiences because of the physical (injuries) and psychological and emotional scars.[6] In addition, non-state armed groups have used children as Human Borne Improvised Explosive Devices (HBIEDs). Specifically, Boko Haram in the northeast tells these children before they go on a suicide mission that they are martyrs fighting for a good cause. Not only are the children killed most often, but these non-state armed groups also push children to the frontline of conflicts or war; often, in the heat of the battle, children suffer injuries more than adults. Those fortunate to stay alive often suffer mental health issues.[7]

More important is the issue of the psychological implication of CFANSAG. These children experience social isolation/stigma because of the negative attitude of their host communities toward accepting them wholeheartedly,[8] invariably the reintegration of CFANSAG into their communities to live their lives as before is impossible. Consequently, the chances that CFANSAG may be re-recruited becomes high when they fail to reintegrate economically and socially into their civil host communities, which may cause substantial economic development issues, and a new turn in the cycle of violence becomes inevitable.

The reintegration process for CFANSAG requires a reasonable period, at least three to five years, of committed resources.[9] Family reunification or alternative family-based living arrangements, rather than centres, are the most effective strategy to reintegrate CFANSAG into the community.[10] However, in Northeast Nigeria, reintegration was first done when the military introduced the Deradicalization, Rehabilitation, and Reintegration programme

5 International Humanitarian Law, n.d. Rule 149. "Responsibility for violations of International Humanitarian Law." https://ihl-databases.icrc.org/customary-ihl/eng/docs/v1_rul_rule149. Accessed 28 August 2022

6 Gabarino J., Guttman E., and Seeley, J.W. The Psychologically Battered Child. San Francisco: Jossey-Bass, 1988, 131

7 Petersen, A.C. Consequences of Child Abuse and Neglect. In *New Directions in Child Abuse and Neglect Research*, National Academic Press, 2014, 18.

8 Betancourt, et, at. "Stigma and Acceptance of Sierra Leone's Child Soldiers: A Prospective Longitudinal Study of Adult Mental Health and Social Functioning." *Journal of the American Academy of Child & Adolescent Psychiatry* 59, no.6, (2019) 715–726

9 Office of the Special Representative of the Secretary-General for Children and Armed Conflicts. https://childrenandarmedconflict.un.org/global-coalition-for-reintegration-of-child-soldiers/ Accessed 15 March 2023.

10 Social Development Department, n.d. Child Soldiers: Prevention, Demobilization and Reintegration. https://web.worldbank.org/archive/website00522/WEB/PDF/CPRNOTES.PDF

(DRR) for repented insurgents in 2015 through its Operation Safe Corridor programme into society in 2015.[11]

Currently, Nigeria has three deradicalisation programs that support Boko Haram defectors. The Prison Program is for militants convicted of violent extremist offences or those on or awaiting trials. Second, the Yellow Ribbon Initiative supports women and children associated with Boko Haram by providing psychosocial therapy and reintegration programs. Third, Operation Safe Corridor, launched by the Nigerian military in 2015, works with Boko Haram defectors by addressing extremist ideology and providing them with trauma counselling.[12] The proposed legislation for the National Agency for Deradicalisation, Rehabilitation, and Reintegration of Repentant Insurgents is still a bill that the National Assembly has not passed into law.

The sad development about the CFANSAG in the northeast is that abducted people react differently from those who voluntarily join armed groups. The psychological trauma of a child Boko Haram abducted and forcefully recruited is quite traumatising compared to those who entered independently. The study showed that three out of the 15 male participants, who voluntarily joined the sect, reacted mildly, while the remaining twelve had a severe reaction. In other words, the three male participants who volunteered could regulate their emotions so that it did not affect their psychological balance. The findings from this study are discussed below in the Discussion and Findings section.

It is essential to state that children react differently to adverse environmental events that affect them. Thus, the issue of Posttraumatic Stress Disorder (PTSD) differs among children. Children whom armed groups forcefully recruit tend to have a severe mental disorder when diagnosed, which may require community-implemented trauma therapy. For the females that participated in the FGD, two out of the ten had medical conditions because of childbirth at an early age.

As D'Alessandra suggested,[13] CFANSAG who have experienced armed conflicts suffer deep psychological and emotional trauma. For example, children that experience PTSD,

11 Ugwueze, M.I., Ngwu, E.C. and Onuoha, F.C.. Operation Safe Corridor Programme and Reintegration of Ex-Boko Haram Fighters in Nigeria. *Journal of Asian and African Studies*, Volume 57, Issue 6, (2021) 14.

12 Campbell, J. Nigeria Considers National DRR Agency Amid Boko Haram Setbacks. https://www.cfr.org/blog/nigeria-considers-national-drr-agency-amid-boko-haram-setbacks. Accessed January 23, 2023.

13 Federica D'Alessandra. "The Psychological Consequences of Becoming a Child Soldier: Post Traumatic Stress Disorder, Major Depression, and Other Impairment. n.d https://carrcenter.hks.harvard.edu/files/cchr/files/dalessandra_pshychol_cons_of_childsoldiers.pdf. Accessed January 24, 2023.

re-occurrent experiences of traumatic events through nightmares, major depression, hostility, pathological anxiety disorder, sadness, problems with self-confidence and violent traumatisation cannot cope with their daily lives. A case in point is the 41,000 CFANSAG the Nigerian military rescued from non-state armed groups in the northeast.[14] Though the military successfully saved CFANSAG, most children that the army rescued or escapees from Boko Haram suffer dangerous consequences. CFANSAG, in terms of development, possess significant moral problems considering that many CFANSAG have a challenging time coping with repeated and cumulative effects of traumatic stress.[15] A respondent (name withheld) interviewed had this to say:

> *"Since the military rescued many of us from Boko Haram captivity, many have nightmares. Whenever children sleep, we dream and see ourselves among children killed, crying for help. However, a few of us in the camp interact and share our ordeals. One or two persons have said they voluntarily joined the sect; the stress we are undergoing right now is unbearable."*

Betancourt and Kashif[16] opined that children exposed to challenging living conditions have hardened hearts; for example, children whose teachers have indoctrinated them, children who have witnessed family members being tortured or injured, premature sexual intercourse, violent torture, direct perpetration of violent rape, and intense physical training. Sadly, most CFANSAG have significant moral and developmental problems, contributing to children's loss of innocence.[17] Even though Nigeria domesticated the Child Rights Act in 2003, Nigeria has not applied the Act to non-state armed groups who mostly violate the rights of the Nigerian child. The Federal Government has not held the non-state armed groups accountable for forcefully conscripting children into armed conflicts.

The Child Rights Act only gives directives to the Nigerian armed forces and government agencies against using children in hostilities. However, when Nigeria enacted the Child Rights Act, the issue of CFANSAG was not in the picture; hence, there was no mention of a non-state armed group in the Child Rights Act. However, since 2009 when the insurgency began in the northeast, the Federal Government of Nigeria have not mentioned any punishment for

14 Musa, C. The Military and Child Soldiers in Borno State, Operation Hadin Kai Headquarters, Maiduguri, Borno State. (P. H. Kerry, Interviewer). June 3, 2022.

15 Bikila, Gerida. "A harrowing escape from Boko Haram in Nigeria" UNICEF. 11 April 2016. https://www.unicef.org/stories/harrowing-escape-boko-haram-nigeria.

16 Betancourt, Theresa. Schick. and Kashif, Tanveer. Khan. "The mental health of children affected by armed conflict: Protective processes and pathways to resilience." PMCID: PMC2613765. NIHMSID: NIHMS81745. PMID: 18569183. 2008 Jun;20(3):317–28, Int Rev Psychiatry. DOI: 10.1080/09540260802090363.

17 Briggs, J. Innocents lost: When Child Soldiers go to War. New York: Basic Books, 2005, 43–46

non-state armed groups who engage these children in armed conflicts.[18] Instead of punishing former Boko Haram members and those who voluntarily surrendered, the Government gave them amnesty.[19] The Nigerian Government has not held the non-state armed groups accountable for the psychological abuses these children face in society, considering that children below eighteen are still developing as human beings.

In 2021, the Borno state government actively engaged with commanders of JAS. One of its press statements also indicated that the Government would not prosecute or proceed with any judicial procedures against the defector of JAS when its leader Abubakar Shakau died in 2021.[20] The implication of the above statement from the Borno state government is that the Government is carefree concerning the well-being and welfare of children. If Boko Haram and its splinter groups surrender, the Government will give them amnesty.

The author believes that the state government's step is a dangerous precedent as it encourages non-state armed groups to keep recruiting children. CFANSAG faces severe psychological consequences whether the non-state armed groups forcefully conscripted, or these children voluntarily joined the armed groups. Unfortunately, the Government has not considered prioritising the psychological effect of armed conflicts among children, especially those in the north who experience violence as a norm.

On the part of the United Nations Children's Emergency Fund (UNICEF), the organisation made various child interventions through its Child Protection Network (CPN). The CPN aims to rescue and rehabilitate children after falling victim, providing them with medical care, counselling, education, vocational training, and a safe place to live. At the same time, the CPN ensure the CFANSAG recover from the trauma they have experienced. However, UNICEF's position has always been that "the best way to protect children is to empower them to protect themselves".[21] The only way to protect themselves is when Government give children the needed and recognised rights to protection, provision, and participation. Government must consider children's best interests above all other considerations.

Despite Nigeria's government efforts to acquire the attention of state and non-state armed groups through collaborations with intergovernmental organisations, there are still a few challenges as Boko Haram continue to recruit children, and the Government urgently need

18 Ogunniran, Iyabode. "Protection of the Rights of Children Victims of Armed Conflicts in North-Eastern Nigeria Under International Humanitarian Law." [NAUJILJ 12 (1) 2021], 1-15.

19 NexTier. "Accepting Ex-Boko Haram Fighters." 1 July 2020. https://nextierspd.com/accepting-ex-boko-haram-fighters/. Accessed August 22, 2022.

20 United Nations Security Council Report, 2022. : S/2022/596, S/AC.51/2020/8 and A/76/871-S/2022/493. https://5dok.org/document/y961no5d-security-council-s.html. Accessed January 24 2023.

21 Abodunrin, 2022.

to address the psychological menace. The study, therefore, aims to discuss the agonising experiences of CFANSAG and the psychological danger of recruiting children into non-state armed groups. The paper is structured into seven parts: the conceptualisation of child soldiers, the theoretical framework, the history of child soldiers and the recruitment process in Nigeria, discussions of findings, the psychological dangers of child soldiers in the northeast, conclusions, and recommendations.

METHOD

The study adopted a qualitative method to explore the detailed description of the phenomena using the purposive sampling technique for data collection.[22] The study collected data from the Nigerian Military, Borno State Ministry of Women Affairs and Social Development (WASD), Grow Strong Foundation (GSF), and a UNICEF focal person in Maiduguri. The study added the semi-structured interview method to conduct direct physical person-to-person and telephone interviews with key respondents, in-depth interviews, and focus group discussion (FGD) with CFANSAG. Moreover, using the key informant interview (KII) will enable the study to get first-hand information from experts knowledgeable about the conflicts in Borno state.[23] Furthermore, the study deemed it necessary to use the FGD in line with Article 12 of the UNCRC, which gives rights to children to participate. Moreso, CFANSAG have experienced the psychological menace and have rich information about their feelings, opinions, ideas, interpretations, range of views, inconsistencies, variations in beliefs, and their experiences and practices, especially as CFANSAG. The study had ten KII and twenty-five children participating in the FGD in Borno state. The study collected secondary data from relevant published and unpublished materials, such as peer-reviewed articles.

The study conducted the FGD in Pulka town with participants selected from Camps A, B, Bulumkutu Interim Care Centre (BICC), Hajj camp, Shukori Camp, and other transit camps. The twenty-five children (comprising fifteen boys and ten girls) came from the crisis affected local communities of Pulka, Gwoza, and Bama Local Government Area of Borno states based on the research priorities to discuss the psychological menace of CFANSAG. The data for the analysis was collected during the researcher's PhD field report conducted in 2022 in Borno state. The study used the appropriate channels to get approval for the study. Moreso, the study ensured that it protected the children's privacy and confidentiality while it obtained consent from the participants through officials in various camps.

22 Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. Administration and policy in mental health, 42(5), 533. https://doi.org/10.1007/s10488-013-0528-y

23 UCLA. Section 4: Key Informant Interviews. UCLA Center For Health Policy Research. Health DATA Program – Data, Advocacy and Technical Assistance.

The study conducted the FGD in the form of a participatory workshop that adopted qualitative methods of FGDs that explored information on child soldiers and the dynamics of how the communities treated the children after their return. Six participants came from Pulka and Gwoza local Governments and the camps have continued to experience a high influx of internally displaced persons because of heightened insecurity. The children selected from the identified cases of CFANSAG from those communities have been living with the non-state armed groups for years.

The study conducted the FGD in person and grouped the children and their age range as the unit of analysis. For example, age 8-10 years in one group, 11-15 years in another group, and 16-17 years. CFANSAG agreed to participate because of their pre-existing relationship with camp officials they know and trust. Coincidently, the officials who assisted in conducting the FGD have also worked with various non-governmental organisations in northeast Nigeria. The study collected data via recording in Kanuri and Hausa dialects which the researcher later transcribed into English.

The study used a note-taker, a facilitator, and a technician; the note-taker observed and wrote and did not interact with the group. He identified how the children made comments, and the facilitator managed the pace and encouraged the participants to speak up. The technician was in charge of recording and transcribing it into English. The study conducted the FGD for three days, and each day lasted for 60 minutes to enable the children to relax and not overbore them with questions.

The study asked the CFANSAG questions that assessed their experiences during captivity, the psychological danger of forceful recruitment and voluntary recruitment of former child soldiers, and their expertise on how community members accept them. In addition, how NGOs and other parties are helping them or responding to their needs if the government passage of the Child Protection Law has resulted in any changes to their situation. The study conducted participatory FGD based on the developed questions. The study used pseudo-names for the FGD in place of their real names and some other relevant key informants to protect their identities, respect their privacy, and for the respondents to express themselves on the subject matter without restriction. The respondents in the FGD wanted anonymity for security reasons. At the same time, some key informants preferred not to mention their names. As such, the study did not mention the names of the CFANSAG respondents.

THE CONCEPTUALISATION OF CHILD SOLDIERS

Haer and Böhmelt[24] defined child soldiers as "persons below the age of 18 associated with armed groups, whether state or non-state actors, actively performing combatant and non-combatant roles, which include laying mines and explosives; scouting, spying, acting as decoys, couriers or guards; training, drilling or other preparations; logistics and support functions, pottering, cooking and domestic labour; and sexual slavery or other recruitment for sexual purposes."

Additionally, the Paris Principles[25] declaration in 2007 defined a child soldier as "any person below eighteen years of age who is or has been associated with an armed force or armed group through combat and non-combatant roles, for example, cooks, porters, sex slaves, and others." The definition of a child adopted for this study is the Child Rights Act enacted in 2003, which defines a child as any person below the age of 18 years.

THEORETICAL FRAMEWORK

Albert Bandura proposed the social learning theory in 1977, based on behavioural thought that looks at internal and external thought processes.[26] Bandura suggested studying the human character in a social context rather than a laboratory. The theory sees the importance of modelling and communication (verbal and non-verbal) for children and their developmental growth through social learning. The approach determined that children would model those around them through observation, attention, retention, reproduction, and motivation.

The theory further explains that an individual generates ideas about probable rewards and punishments before engaging in observed behaviour. The study used reactions from others to develop implicit rules applied in a comparable situation in the future. As a result, learning often occurs through direct experience, with individuals learning guidelines for behaviours more complex than the specific action observed. So, children adopt violent behaviour as a response because direct and indirect experiences suggest that the desired rewards, not negative sanctions, will be the anticipated outcome or reaction.[27]

24 Haer, Roos and Böhmelt, Tobias. 2016. "The impact of child soldiers on rebel groups' fighting capacities." *Conflict Management and Peace Science* Vol. 33, No. 2 (April 2016), pp. 153-173.

25 Office of the Special Representative of the Secretary-General for Child and armed conflicts. Child Recruitment and Use. https://childrenandarmedconflict.un.org/six-grave-violations/child-soldiers/. Accessed February 2023.

26 Smith, Mark. A. 2020. "Social Learning and Addiction." *Behavioural Brain Research* Volume 398, 1 February 2021, 112954. Department of Psychology, Davidson College, Davidson, NC, 28035, United States. https://doi.org/10.1016/j.bbr.2020.112954.

27 Zlatka Rakovec-Felse. Domestic Violence and Abuse in Intimate Relationships from Public Health Perspective. Health Psychol Res. Nov 6; 2(3): 2014 1821. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4768593/. Accessed January,24, 2023.

Accordingly, modelling and reinforcement are two of the most critical processes in learning aggressive behaviour. Individuals with intimate and frequent contact, and those with higher social power, are the ones children are most likely to observe and imitate such behavioural traits from. Hence, learning often occurs through interactions with significant others. Children are more likely to replicate what they see in an individual or persons they strongly identify with or are familiar with that demonstrate approval for their actions. The theory found that children can model adult males performing violent acts, and familiarity influences boys more than girls.[28]

The CFANSAG is a case in point; the non-state armed groups have tortured and forced these children to kill, rape, and a few have lost empathy for human lives because of the violent environment they have experienced. The males are more likely to model this behaviour with those around them. A respondent from the Department of Child Development gave a story of a CFANSAG. The respondent told the story of a boy who had reintegrated with his family in Maiduguri town after completing the deradicalisation programme in Bulumkutu Camp, relapsed and killed his mother and sister. It goes to show the psychological danger that CFANSAG faces.

In a famous study by Albert Bandura in 1961, the author studied children at the Stanford University Nursery School using a doll named "Bobo". During this study, children watched researchers act aggressively toward the doll. Subsequently, when the children were alone with the doll, they saw such violent behavioural traits that they modelled that behaviour and extended that aggression toward other toys.[29] Thus, the study by Albert Bandura shows the extent to which children can model what they see, hear, or witness.

Although the theory focuses on children, it does not ignore the roles of teachers, parents, and the elderly in children's lives. Instead, the theory encourages them to be models to children and engage in children's behaviour learning process. Thus, the theory explains interaction patterns that foster violence; when Boko Haram exposes children to violence from adolescence, they may see violence as a usual way of life. Again, Boko Haram trains children to model violent acts for the children to see themselves as future Jihadists.

28 Cumming, A.J. 2014. The Influence of Person Familiarity on Children's Social s Social Information Processing. UNLV Theses, Dissertations, Professional Papers, and Capstones 8-1-2013. Retrieved from: https://digitalscholarship.unlv.edu/cgi/viewcontent.cgi?article=2926&context=thesesdissertations.

29 Kendra Cherry. "What the Bobo Doll Experiment Reveals About Kids and Aggression." 16 March. 2020 https://www.verywellmind.com/bobo-doll-experiment-2794993. Accessed January 23, 2023.

Despite Skinner's (1980) and Berk's (2014)[30] criticism that the theory underestimates the child's contribution to their development and fails to explain why it rewards or punishes certain behaviours; Bandura's view remains valid because children's personalities can develop through learning. However, Bandura disagrees with Skinner's strict behaviourist approach to personality development because he feels that thinking and reasoning are essential learning components. In contrast, Skinner believes the environment alone determines behaviour. Other Biological theorists criticised Bandura's theory based on the idea that the theory ignores biological states and autonomic nervous system responses. It is a fact that some behaviours and responses are not only learned but partly inherited. Durkin (1995) also criticised the Bobo doll experiment for being too artificial.[31] We can however still say that children's response to environmental events depends on their ability to understand different emotions and the different self-regulation methods that can help them deal with difficult situations.

In addition, the developmental growth of children differs as a child who grows up in violent environments have their behaviours psychologically affected in their approach to life circumstances; even if these children do not watch violent movies, they may still act violently compared to those who grow up in an atmosphere of peace and tranquillity. The experiences and body language of the CFANSAG interviewed revealed the danger of growing up in a violence-prone environment. For instance, the findings show that 23 of the 25 participants in the FGD have had severe or mild PTSD.[32]

THE HISTORY OF CHILD SOLDIERS AND THE RECRUITMENT PROCESS IN NIGERIA

Child soldiers began with Ustaz Mohammed Yusuf, a former Boko Haram leader who started attacking the state government and violently carried out a political upheaval in 2009. The media alleged that he recruited madrassa beggars, also known as Almajiris, in Maiduguri to join the group to fight the Nigerian state. Unfortunately, after the death of Yusuf, Abu Bakr Shekau took over the leadership and used children as Human Borne Improvised Explosive Devices (HBIEDs) before his death. In recent times, the Boko Haram faction Jama'tu Ahlis Sunna Lidda'awati wal-Jihad (JAS) and the Islamic State West Africa (ISWAP) are not just recruiting children as fighters but also training these children to take over from them as future Jihadists.[33]

30 Skinner, B.F. 'Selections from Science and Human Behaviour'.Cambridge, Massachusetts: Harvard University Press, 1980; Berk L. E. 'Development through the lifespan'. 6th ed. Boston: Pearson. 2014.

31 Durkin K. 'Developmental Social Psychology: From Infancy to Old Age'. Wiley Blackwell. 1995.

32 Focus group discussion with CFANSAG, Grow Strong Foundation office, Maiduguri, Borno State, June 23-26, 2022.

33 Malik Samuel and Oluwole Ojewale. "Children on the battlefield: ISWAP's latest recruits." 10

In recent times, the modus operandi of the JAS and ISWAP is through the abduction of school children, some of the girls kidnapped are married forcefully, and these children give birth as young as 12 years to Boko Haram members, who, after six months impregnate the mothers again for more babies.[34] Boko Haram trains these babies for future-generation insurgents while Boko Haram lures the Almajiris through welfare packages, like foodstuff, motorcycles, and tricycles, and promises the children guaranteed security for their family, amongst others. For those who refused to join the armed group, Boko Haram killed their parents right before their eyes, causing fear and panic among the rest of the children. Jamil (Pseudo name), a former child soldier, had this to say:

> *"The Boko haram informant knows everybody that lives in each community. Boko Haram forced me to choose; either I join them, or they kill my parents."*

DISCUSSIONS OF FINDINGS

The area of concern for this study is former child soldiers who have endured harsher psychological consequences. Unfortunately, some female children as young as 12 years rescued by the Nigerian military forces reported that they have given birth having preterm deliveries, severe neonatal conditions, Preeclampsia, anaemia, contracting STDs (sexually transmitted diseases), and delivering at low birth weight. Young female CFANSAG gave birth in Boko Haram camps and developed Vesicovaginal Fistula (VVF). Luckily, the military rescued some of these children and eventually treated the VVF's medical conditions.[35]

> *"When we rescued some of the children, we noticed that four girls as low as 12 years old had children and required medical attention because of the state we found them. We had to rush them to the military hospital quickly."*[36]

The statement above from the representative of the Joint Investigation Centre in Operation Hadin Kai, Maiduguri, showed that the doctor treated four female children for VVF and other diseases.

It is worrisome that government officials spread mentally unstable CFANSAG across Bulumkutu Interim Care Centre (BICC), Hajj camp, and Shukori Camp without any designated base with the required psychological and psychospiritual counselling and care for

March.2022 https://issafrica.org/iss-today/children-on-the-battlefield-iswaps-latest-recruits.

34 Musa, C. The Military and Child Soldiers in Borno State, Operation Hadin Kai Headquarters, Maiduguri, Borno State. (P. H. Kerry, Interviewer). June 3, 2022.

35 Musa, C. The Military and Child Soldiers in Borno State, Operation Hadin Kai Headquarters, Maiduguri, Borno State. (P. H. Kerry, Interviewer). June 3, 2022.

36 Azuikpe, O. Child soldiers and the Military. Joint Intelligence Centre, Operation Hadin Kai Maiduguri Borno state. (P. H. Kerry, Interviewer). June 3, 2022.

these children. The statement buttresses the participants' point of negligence on the part of officials at the various camps during the FGD. Male children between the ages of 11-17 during the FGD recorded cases of mentally unstable children in the camps.

Above all, the neuropsychiatric professionals who visit the centres may not have the time to study CFANSAG as they are not living in these camps. The neuropsychiatric cannot measure symptoms of depression, anxiety, PTSD, general psychological difficulties, and daily functioning of former child soldiers in these camps without adequate time. The reason is that children who have experienced alteration in their mood and cognition may not have professional doctors available when hyperarousal symptoms occur in the child. Moreover, in the state government, these children are left in the camp without proper medical attention to help them with these symptoms. Instead, the doctor may give children general diagnoses because of the lack of time. Here is what Aliyu (Pseudo name), a camp official had to say:

> *"The government can only afford to bring doctors to the camp once in a while because the state must pay these specialists handsomely, and the state government officials are not ready to spend that kind of money."*

Additionally, CFANSAG have had cases of relapse already living in the communities despite the Government's post-return psychological assistance. An anonymous respondent from the Ministry of Women Affairs, Abuja, Nigeria, claimed that some state officials reintegrate children into the community without a proper medical check. He told how a young man aged 14-17 killed his mother and sister, and the military took him captive. The story may not be far from the truth, as in 2021, the Borno state government closed five internally displaced person camps within Maiduguri and relocated the IDPs. Perhaps the Government cannot sustain the disarmament, demobilisation, and reintegration process for IDPs, including children. The deradicalisation, rehabilitation, and reintegration (DRR) programme initially started with the Nigerian Military Operation Safe Corridor programme, established in September 2015 and aimed at de-radicalising, rehabilitating, and reintegrating repentant Boko Haram members.[37]

The relocation of IDP camps is risky as it creates room for negligence, especially for children. When CFANSAGs are re-recruited due to negligence on the part of the state, the impact of re-conscription doubles regardless of the disarmament, reintegration, or rehabilitation programme CFANSAG underwent in camps. The emotional consequences of CFANSAG include mood swings, preoccupations, suicidal thoughts, and fear. However, the child's experiences and environment play a crucial role in children's developmental traits.[38]

37 Ugwueze, M.I., Ngwu, E.C. and Onuoha, F.C. Operation Safe Corridor Programme and Reintegration of Ex-Boko Haram Fighters in Nigeria. *Journal of Asian and African Studies*, Volume 57, Issue 6, 2021.

38 Healthy Children. n.d. Inheriting Mental Disorders. https://www.healthychildren.org/English/health-issues/conditions/emotional-problems/Pages/Inheriting-Mental-Disorders.aspx.

Unfortunately, children born in Boko Haram camps tend to become violent, including those abducted and those who voluntarily joined the group after undergoing rigorous training.[39] In an interview with one of the Directors of Peace and Conflicts Institutions, Ochugu had this to say:

> *"There are generations of children who were born in combat, and these children are associated with the extremist groups, trained to become fighters; all they have known is the culture of violence."*

THE PSYCHOLOGICAL DANGERS FOR CHILD SOLDIERS IN THE NORTHEAST, NIGERIA

The CFANSAG face consequences of psychological disorders. During the FGD, former child soldiers revealed that doctors occasionally visit children to evaluate their mental state. However, the neuropsychiatric professionals refer children discovered to have critical mental health to the neuropsychiatric hospital Maiduguri for admission. This claim was collaborated by one of the state officials interviewed; here is what he had to say:

> *"It is not true that children with mental disorders are not cared for here in the camp. The state government had taken the children whose cases are severe from the camp to a neuropsychiatric hospital here in Maiduguri for effective treatment administration."*

CFANSAG in the various camps not only suffer maltreatment in terms of survivors living from hand to mouth but also these children have to cope with rape from violent abusers who live with them in the same camp. During the FGD, two female respondents collaborated on this claim.

> *"One man in the camp raped me, and when I went to report him to the camp officials, the official told me to keep quiet. Nothing is new. After all, I came from a Boko Haram camp; my life is useless".*

The second respondent could not hold back her tears because she said she was also a victim of molestation by men in the camp, and nobody was doing anything about it, as it is the norm.

Considering the plight of former child soldiers, it is essential to state that education plays a pivotal role not just for those in the camps but for children generally. A child who knows they can report any abnormal behaviour targeted at them will raise the alarm even if nobody wants to listen. The culture of silence has kept many children psychologically naive and intimidated.

39 Ochugu, M. Director, , Institute for Peace and Conflicts Resolution, Abuja. (P. H. Kerry, Interviewer). July 5, 2022.

Northern religious belief is that children have no rights even if they disagree with an adult; the parents can punish the child if they offend the parents. So, anything the adults instruct the child to do is what they must do without question.

The findings from the FGD reviewed that the non-state armed groups forcefully recruit most females between the ages of 11-15 years into the armed groups with threats of killing their parents. Some participants stated that the Boko Haram leaders later returned to pay their bride price. It is essential to state that five out of the ten girls confirmed that they were forcefully taken at a tender age during attacks in their villages and married off to the armed group members; three girls reported to have joined as a result of intimidation, threats to living and excessive fears, and the non-state armed group abducted the remaining two. The females mostly had negative experiences of forced marriage from the age of 12 years, depending on the section of the armed groups that abducted them. At the same time, some female children who gave birth in Boko Haram camps had complications while giving birth without access to healthcare infrastructure. In addition, the findings show no special camps for children in Borno State as government officials spread child soldiers with mental disorders across the three centres: Bulumkutu Interim Care Centre (BICC), Hajj camp and Shukori Camp. At the same time, neuropsychiatric professionals visit the centres from time to time.

In contrast, the male children between the ages of 11-17 stated that the major causes of children's recruitment into the armed group were forceful recruitment, illiteracy, deception, and lack of awareness. Notably, Boko Haram's recruitment method for boys is through deception. Boko Haram deceived the boys that they would have many wives in paradise if they died during the battle against infidels, and the girls also had the guarantee of places in heaven. Some children get involved in many ways, including serving as informants, as children will be seen as less suspicious when people pay attention to them. Boko Haram used the female children as HBIEDs to carry out suicide attacks detonating improvised devices; in the process, they killed themselves and others, believing they were doing it for greater purposes. Some children that participated in the FGD described their experiences while in the forest with Boko Haram:

> *"Boko Haram sent out some girls from age 9-13 years, strapped them with bombs and told them they are Martyrs and that when they sacrifice themselves, Allah will welcome them in paradise with joy. We saw or heard nothing about some of these girls again."*

The FGD reviewed that some of the children joined the armed groups and did their bidding out of pressure to ensure Boko Haram did not harm their parents kept in captivity. In addition, Boko Haram trained boys as young as 9 to 15 years as combatants in their camps. Some children joined the non-state armed groups believing that the Government was responsible

for the death of their parents and thus used that medium as an avenue to take revenge. One of the respondents affirms this claim.

> *"Initially, I was angry with the Government for allowing Boko Haram to kill my parents without protecting my village. So, when I saw the opportunity to join Boko Haram, I took advantage. Although I regret my actions today, I now face the consequences because those people I killed hurt me. When I close my eyes, I see them. I am afraid to stay alone."*

Another respondent whom Boko Haram forcefully recruited had this to say:

> *"I feel pain due to the injuries inflicted on me; Boko Haram forced me to take up arms, I had to do it, or else Boko Haram would kill me. Right now, my past is hurting me, and for me to sleep, the doctor gave me [pills] because I cannot sleep naturally. Now and then, I suffer depression when I remember the horrific events I went through."*

It is important to note that the psychological dimensions of trauma that CFANSAG face is appalling. Twenty-three out of the twenty-five children who participated in the FGD confirmed that children between the age of 11-17 who are forcibly recruited by non-state armed groups, had one psychological issue or another. Twelve participants live on medication to sleep at night because of horrible nightmares. Three children who voluntarily joined claim they do not have any symptoms. Despite the menace involved, Boko Haram and its factions still recruit children, especially in areas like Abadam, Marte, Askira/Uba, Guzamal, Goza, Bama, Konduga, Damboa, and Kukawa Local Government Areas and some locations around the Sambisa forest area, in Borno state where Boko Haram strongholds are situated. The armed group uses financial means to enable them to manage their day-to-day activities, which ordinarily would have been impossible.[40] The Civilian Joint Task Force sector commander in Maiduguri, corroborated the above claim. In his words:

> *"Boko Haram gives the parents of the children they recruit welfare packages like 5000 naira and Bicycles to trade. In turn, the parents allow Boko Haram to recruit their children for information."*

Although some children joined the sect to gain the manners and sense of respect the armed groups enjoyed in places under their control, they also joined for conformity and peer pressure. Some children believed what the armed groups told them about injustices meted out

40 Abdulgani: B. (2022). The Tactics Boko Haram Used to Loin children. (P. H. Kerry, Interviewer). June 2.

by the Government; hence they stood more to gain by fighting the Government.

The non-state armed group recruited boys who brutally killed their friends who opposed them from joining the group, making an example out of them publicly and instilling fear. The remaining boys who fail to join suffer the same fate. So far, from the focus group discussion, Boko Haram did not release any of the children; they were either rescued by the military during raids or ran away during attacks to save themselves. NGOs like UNICEF and others have contributed to helping rescue children. From the discussion, there is still a concern regarding the stigmatisation of CFANSAG, which has contributed to psychologically damaging children's mental health.

Although some community leaders and camp elders have been incredibly supportive and even prioritise them in some cases for support, some families and local communities reject them when returning to find another place. As for the girls, the members of the communities tagged them as Boko Haram wives. Consequently, this resulted in some returning to Boko Haram, and some boys relapsed and killed relatives. Psychiatrists are treating some former child soldiers for psychological illness as they still have nightmares. The whole idea that Government have not established any law against the non-state armed groups for offences committed against Nigerian child is a reason why the non-state armed group continues to recruit and use child soldiers at every opportunity, believing that the Government cannot punish them.

Although the BAY states (Borno, Adamawa, and Yobe) have signed the Child Rights Act into law, the difference is that those core northern governors disagreed with the principles of the Child Rights Act. As such, the Government modified some of the Child Rights Act guidelines and changed the name to the Child Protection Law. However, the various state governments must adhere strictly to the Child Protection Law signed by the various states, especially in the BAY states. The Child Protection law will protect children from being victims of state and non-state armed groups. The various Governments must, as a necessity, meet out punishment to violators of the Child Rights Act and give special medical attention to children who have been victims of the non-state armed groups.

CONCLUSIONS

The study introduced its audience to the emotional and psychological damages that non-state armed groups have inflicted on children in the north since it became pronounced in 2009. The study further acknowledges that the forceful conscription of children into armed groups internationally violates moral, ethical, and international legal standards and is a war crime. However, it observed that there are no laws in Nigeria with established punishment for non-state armed groups. Even when the military capture some members of the non-state armed groups, the Government gives them amnesty through its deradicalisation, rehabilitation, and

reintegration (DRR) programme. The state government has not given former child soldiers who have witnessed or undergone torture or lost family members adequate medical attention.

The research revealed strategies used by Boko Haram, JAS, ISWAP, and Ansaru, to recruit children and various reasons why children join the deadly groups, the psychological menace it has caused the state and Nigeria, which have affected the children's development and well-being. The study concluded that the state in the northeast should implement the Child Rights Act, renamed the Child Protection Law by the core northern states, to prevent Boko Haram and other violators of children's rights from recruiting children as child soldiers. Accordingly, the findings from the fieldwork conducted suggest four responses that are likely to reduce recruitment:

RECOMMENDATIONS

1. The Borno state government should conduct a psychiatric evaluation of CFANSAG from time to time by creating centres with psychological and psychospiritual counselling units.
2. The Borno state government should hold Reconciliation programmes for community leaders, Islamic teachers, and village heads with CFANSAG, who are now adults. The process will bring physical and spiritual healing to children. The government should tag it "the Societal Acceptance of CFANSAG." Communities, villages, towns, and families need to accept CFANSAG and shun resentment and rejections in the reintegration process.
3. The state government should create continuous awareness of the risks of joining armed groups through radio programmes in Hausa and Kanuri, as many of the CFANSAG are from the Hausa and Kanuri ethnic groups.
4. The State government should establish camps strictly for CFANSAG, mentally unstable children, with Neuropsychiatric professionals monitoring the children's health, academics, and psychological wellness.

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