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**CHILD SOLDIERS AND CHILD CONSCRIPTION INTO  
ARMED CONFLICTS IN AFRICA**

A Thesis Submitted to  
The School of Social Work  
Faculty of Graduate Studies and Research

In Partial Fulfillment of the Requirements  
For  
The Master's Degree in Social Work  
By

Christine Grace Atukoit-Malinga  
Montreal, August 16, 1999



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## ABSTRACT

Research studies that have already been conducted on the problem of child soldiers and child conscription have focused mostly on psychological trauma. Less attention has been paid to social, economic, and political processes in Africa. The goal of this thesis is to explore perceptions of professionals from various disciplines working in different organizations and government institutions (N=207) concerning the causes, effects, and solutions to child conscription in Africa.

These professionals perceived that poverty, lack of educational resources, lack of community resources, economic hardships, dictates of international funders, corrupt governments, and unemployment were the major causes of child conscription into armed conflicts. With respect to the effects, the respondents perceived that physical and psychological issues, witnessing atrocities, and exposure to violence were the most important effects of participating in the armed conflicts.

In order to prevent or stop further recruitment of children into armed conflicts, the professionals working in the field thought that more educational programs should be initiated, community resources should be mobilized, prevention programs should be established, employment and training opportunities programs should also be provided, strong international laws drafted, advocacy and empowerment promoted, support for families provided, and awareness campaigns facilitated.

A striking result of this study is that professionals perceived counselling as a relatively unimportant solution to the problem of child conscription. Results are discussed in terms of the contrast between past research in the field, which has focused on individual-level effects and counselling solutions, and the societal-level effects, and solutions that professionals perceive are central to the problem.

Les recherches menées jusqu'ici sur le problème des enfants soldats et de la conscription des enfants ont surtout porté sur les traumatismes d'ordre psychologique. On a prêté moins d'attention aux processus sociaux, économiques et politiques en Afrique. Le but de cette thèse est d'étudier les perceptions des spécialistes de diverses disciplines qui travaillent pour différentes organisations et institutions gouvernementales (N=207) sur les causes, les effets et les solutions à la conscription des enfants en Afrique.

Ces spécialistes estiment que la pauvreté, la pénurie de ressources éducatives et communautaires, les difficultés économiques, les diktats des organismes subventionnaires internationaux, la composition des gouvernements et le chômage sont les principales causes de la conscription des enfants dans les conflits armés. Pour ce qui est des conséquences, les répondants estiment que les problèmes d'ordre physique et psychologique, la vue des atrocités et l'exposition à la violence sont les conséquences les plus importantes de la participation aux conflits armés.

Pour empêcher ou mettre fin au recrutement des enfants pour les conflits armés, les spécialistes qui travaillent dans ce domaine pensent qu'il faut lancer un plus grand nombre de programmes éducatifs, mobiliser des ressources communautaires, créer des programmes de prévention ainsi que des programmes d'emploi et de formation, édicter des lois internationales très strictes, promouvoir la défense des droits et l'habilitation, offrir une aide aux familles et lancer des campagnes de sensibilisation.

L'un des principaux constats de cette étude est que les spécialistes voient dans l'orientation une solution relativement peu importante au problème de la conscription des enfants. Ces constats sont analysés sous l'angle du contraste entre les recherches menées qui se sont concentrées à tort sur les conséquences au niveau individuel et sur les solutions d'orientation et les effets au niveau de la société et les solutions que les spécialistes perçoivent comme étant au coeur du problème.

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## ABBREVIATIONS

AFS	-	American Friends Service Committee
AFRC	-	Armed Forces Revolutionary Council
CDI	-	Center for Defense Information
CRC	-	Convention on the Rights of the Child
HRW	-	Human Rights watch
JRS	-	Jesuits Refugee services
LRA	-	Lord's Resistance Army
ICRC	-	International Committee of the Red Cross
IMF	-	International Monetary Fund
MRGI	-	Minority Rights Group International
NGO	-	Non Governmental Organization
OAU	-	Organization of African Unity
RPN	-	Refugee Participation Network
RUF	-	Revolutionary United Front
UN	-	United Nations
UNCRC	-	United Nations Convention on the Rights of the Child
UNHCR	-	United Nations High Commissioner for Refugees
UNICEF	-	United Nations International Children's Educational Fund
WCC	-	World Council of Churches
YAPI	-	Youth Advocate Program International

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## 1. INTRODUCTION

*Most armed conflicts are taking place in developing countries where children are already the most numerous casualties of multiple breakdowns between people and environmental support systems. There has been no recent period in history when children and families have been spared the effects of war and violence.*

*J. Armstrong, 1990*

Child conscription in Africa is not a recent phenomenon although some of the current literature tries to depict it as such. Throughout history, war has been a constant fact of life. Africa like the rest of the world accepts its seeming inevitability and has struggled imperfectly to manage and limit its scope and effects. Although public awareness of the problem of child conscription is relatively new, the use of child soldiers in some parts of the African continent is a long-standing practice. However, it is in recent years that this problem drew the attention of the international community and therefore became more publicized and recognized as evident. As a result, this problem emerged as a subject of rigorous study.

Drafting children into armed conflicts dates back many years in history. Recruitment of children was, and still is justified for religious, social, political, or economic reasons by the various conflicting groups. Some conflicts are the effects of the colonial rule that have resulted in border disputes, competing claims over the land, limited resources, ethnic or tribal dominance. Neighbouring countries keep provoking one another continually with increasing tensions or sparks of violence. Conflicts resulting from structural differences within social systems have also contributed to child conscription. In some cases, these differences have misled children into perceiving that joining armed groups may be their last hope for survival.

There has been a worldwide outcry against the drafting of children into armed conflicts. In 1989, 191 member States of the United Nations (UN) ratified the Convention on the Rights of the Child that raised the minimum age for the recruitment of children into armed forces to 15 years. Two governments,

namely Somalia and the United States, have not ratified the Convention (HRW 1998), which in the case of Somalia, like some other African countries, is not surprising since children form a significant percentage of the fighting forces of the ethnic civil wars.

In 1994, the UN Commission on Human Rights established a working group composed of diplomats, child advocates, and Non Governmental Organizations (NGOs) around the world. This team was entrusted with the task of drafting an Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflicts. The new protocol is intended to raise the minimum age for participation in the armed combats to 18 years. In July 1998, it was reported by HRW that the working group had concluded an historic treaty by establishing a permanent and International Criminal Court, which will have jurisdiction over the use and conscription of child soldiers.

The HRW also reported that, under the new International Criminal Court Treaty drafted in July in Rome, the conscription and use of children under the age of 18 in hostilities is defined as a war crime to be prosecuted by the Court. At the same time, resolutions were adopted and the member states agreed to an international ban on the military recruitment and participation of children less than 18 years old in armed conflicts. At this time too, amendments to international laws were proposed as one way of addressing the problem. However, according to the International Committee of the Red Cross (ICRC) (1998), the proposals were rejected.

Politicians, both at national and international levels, have debated the issue of child conscription and have ratified policies to address the problem of child soldiers. During an African conference organized by Organization of African Unity (OAU) on the use of children as soldiers (Maputo Declaration 1999), the participants solemnly declared that the use of any child under 18 years of age by any armed force or armed group is wholly unacceptable, even where a child claims, or is claimed to be a volunteer. They called upon all African States to end the recruitment of children under 18 years of age into armed conflicts. They also

appealed to the states to ensure that measures are in place to prevent re-recruitment of children (HRW, 1999).

In 1998, members of the European Parliament, as reported by HRW, passed resolution B4 –1078 rejecting the use of child soldiers in hostilities. They urgently demanded that an additional protocol to the International Convention on the Rights of a Child (CRC) should be adopted, which bans the recruitment of children under 18 and their participation in armed conflicts. The members also supported international initiatives and called on the UN working group to urgently complete its task of drafting an optional protocol to the UN Convention on the Rights of the Child.

In the United States, in 1998, Congress, in the Defense Authorization Act, was reported to have had a congressional recessional resolution whereby Congress condemned the global use of child soldiers, and supported their immediate demobilization. The Congress also condemned the use of child soldiers in general, with a particular focus on the abduction of children in northern Uganda. It was reported at the same time that the Congress urged the President of the United States not to block efforts to establish 18 years as the minimum age for participation in conflicts through an optional protocol to the CRC. The United States' government was also urged to provide greater support to UN agencies and NGO's working to stop abductions and facilitate the rehabilitation and reintegration of former child soldiers into society (HRW, 1998).

The HRW also reported that during a conference in Harare in 1998, the Assembly of the World Council of Churches (WCC) issued a statement condemning any use of children in warfare. It called upon its member churches to call for an immediate halt to the recruitment and participation of children as soldiers and the demobilization of existing child soldiers. The WCC also called upon its member churches to advocate the prompt ratification by their governments of the African Charter on the Rights and Welfare of the Child which prohibits child recruitment into armed forces and the participation in hostilities of children under 18 years. The Assembly was reported to have restated its opposition to any policy or authority that violates the rights of the younger

generations, abuses or exploits them.

In June 1998, some leading international organizations launched a coalition to stop the use of child soldiers. The coalition is said to seek stronger international standards to protect children from military recruitment and their use in armed conflict. The coalition is also noted as campaigning to have the age for recruitment and participation in armed conflicts raised from 15 years, as set by existing international law, to 18 years of age. Some of the organizations in the coalition steering committees include organizations such as HRW, Jesuit Refugee Service (JRS), ICRC, Quaker United Nations Office, Geneva, Radda Barnen, IF Terre des Hommes, Amnesty International, International Save the children Alliance, American Friends service Committee(AFS), Center for Defense Information (CDI), and Youth Advocate Program International (YAPI) (HRW, 1998)

Professionals working in local and international organizations addressing the problem of child soldiers have worked tirelessly to create awareness, educate policy makers, and also the general public on the issues related to the problem. They have done so through written reports and books, seminars, conferences and other means of communication. Researchers have conducted studies and have reported some overwhelming findings and recommendations. However, despite all these discussions, debates, campaigns, research studies, interventions, and advocacy, armed conflicts are continually spreading around the continent. Governments and opposition groups are still recruiting children and child conscription is very much on the increase. These concerns have resulted in many questions being asked about what needs to be addressed or focused on by the different parties.

## **1.1. DESCRIPTION OF THE PROBLEM**

*“Using children as combatants is reprehensible. It's time for all governments, including our own, to take the necessary steps to ensure that the most vulnerable members of society are protected from the horrors of war.”*

*Jimmy Carter, Former President of the United States of America (1998)*

According to Handelman (1999), it is estimated that there are 300,000 child soldiers below the age of 18 participating in armed conflicts around the world. It is assessed that hundreds of thousands more have been recruited into armed forces and could be sent into combat at any time. It is also estimated that approximately 400,000 children die from war and related causes in developing countries alone (Miller and Lewis (1999); Sapienza, (1998); Refugee Participation Network (RPN) (1997). The constant rise in the number of child soldiers is due to an increase in armed conflicts around the world. Governments and rebels alike draft children into wars. According to information compiled by Radda Barnen (Swedish Save the Children, 1996) it is reported that there are 33 current or recent armed conflicts around the world where children under 18 are participating. In some cases, the children involved are as young as five or six years.

A report from MRGI (1997) indicates that 80% of today's armed conflicts are internal ones, usually involving dominant and less dominant ethnic or religious groups. This report reveals that in today's wars, thousands of children are being used as soldiers. According to this study, child soldiers are not generally treated any differently from adult soldiers; they are abused, tortured, and subjected to the same discipline as all other soldiers. Many of them cannot keep up with the hardship of soldiering and get left behind when wounded, or are shot trying to escape.

The United Nations International Children's Fund (UNICEF) (1996; 1998) has reported that around the world, the number of children who survive, yet are adversely affected by the consequences of wars, such as rape, torture, physical

injury, the witnessing of atrocities, psychosocial and emotional trauma, and the dislocation of families, is far greater than those that are affected by the effects of natural disasters.

In Colombia, child soldiers are reported to be used by all the warring sides in armed conflicts. The guerrillas are reported to have nicknamed the child soldiers as “bees” that are able to sting before their targets realize that they are under attack. (Globe and Mail, 1999; Weiss and Cherniavsk, 1999). The Paramilitary are said to refer to child soldiers as “little bells” meaning that child soldiers are like early-alarm systems (HRW, 1999). Another major problem according to (Barnitz (1999); Wessells, (1997); Stohl, (1998), is the discovery of military officers that both boys and girls are useful for probe missions. Their small size and ability to move unnoticed in many social circumstances make them better combatants to send on probe missions.

According to an HRW press release (1999), in Africa alone, more than 120, 000 child soldiers under the age of 18 years are being used as soldiers across the continent. Some of these children are said to be no more than seven years of age. In Uganda, street children were reported to have been forced to join the army in order to be sent to the Democratic Republic of the Congo. The African Rights Monitor, 1998 and The Economist, 1999, reported that the Lord’s Resistance Army (LRA) in Uganda has abducted 10,000 children from their schools, communities, and homes in recent years.

In Burundi, Tutsi armed groups made up of youths aged from 12 up have been formed with the encouragement of government authorities. Government militias in Congo-Brazzaville include many teenage children. It is reported that between February and June 1998, in Sierra Leone, both the governments Civilian Defense and the ousted Armed Forces Revolutionary Councils (AFRC) and the Revolutionary United Front (RUF) continued to recruit children on a very large scale (HRW, 1999).

Since war broke out in August 1998 between the Democratic Republic of Congo and Rwanda, there was widespread recruitment of child soldiers by both the governments and the rebel groups. It is estimated that up to 6,000 child

soldiers are participating in the war. It is an overwhelming situation to see the forced conscription of children into military units as combatants. They are physical and mental tortured, imprisoned, and targeting on the basis of their parents' ethnicity, religion and ideologies as a way of punishing their parents or communities (HRW, 1999).

The United State's Department of Defense conference of 1999 reported its findings on child soldiers. In addition to what has been reported by other organizations, the department reported that contemporary armed conflicts have caused the deaths of 2,000,000 minors in the last decade alone, and has left an estimated 6,000,000 children seriously injured or permanently disabled. The report highlighted the fact that children are most likely to become child soldiers if they come from poor families or are separated from their families, displaced from their homes, living in a combat zone or have limited access to education. It was also stressed in the report that orphans and refugees are particularly most vulnerable to recruitment. The Departments of State's Country Reports on Human Rights Practices for example, in Uganda for 1997, reported that the rebels kill, maim, and rape large numbers of civilians, and force children into virtual slavery as guards, concubines, and soldiers (HRW, 1999).

The World Council of Churches decried the use of hundreds of thousands of children, girls as well as boys, in armed conflicts around the world. The Council expressed the concern that many of these children are kidnapped or coerced. An overwhelming majority of them are reported to come from marginalized and excluded sectors of society. The Council emphasized that the involvement of children in armed conflicts violates fundamental humanitarian principles. As a result, this violation exposes children to the risk of death and injuries and threatens their physical, psychological, and spiritual well being and draws them into violence (HRW, 1996).

In the United States the leaders of some major leading NGOs, in a letter addressed to the president of the United States in December 1998, stated that children were increasingly not only victims, but also participants. They also quoted the latest research estimates that more than 300,000 children under

eighteen years of age are participating in armed conflicts around the world. They expressed the concern that many of these children have been robbed of their childhood, and as a result are subject to a cycle of violence. They appealed to the president to eliminate one of the most alarming and tragic trends in modern warfare.

Since war broke out in the Republic of Congo in 1996, children have been used to support the military. The government is reported to have called for children and youths between 12 and 20 years old to enlist in the armed forces, in response to the insurgency by the rebels. The rebels too have been reported to recruit children in their thousands. It was reported that the rebel army re-enlisted about 600 demobilized child soldiers in 1998 in centers run by UNICEF in cooperation with the government. Both the government and the rebel group are reported to have continued recruiting children as young as seven years old for military service. According to unconfirmed statistics, it is estimated that the total number of child soldiers conscripted so far is at least several thousands.

## **1.2. HISTORICAL PERSPECTIVE**

*Few societies and groups do not believe that war is morally justifiable under certain circumstances. What these circumstances may be, however, differs considerably across cultures and throughout history; war between countries has been justified almost since history began, as has the use of violence by the ruling party to maintain the status quo.*  
(du Toit, 1990)

For a very long time, African countries have fought different kinds of wars ranging from independence, liberation from dictatorship regimes, tribal or ethnic wars, to religious wars. At the beginning of these wars, children generally did not fight in the battles. The main reason was because firearms used to be heavy to such an extent that children could not carry them for long periods of time. However, in the past years, the trend started to change. Children began to be recruited to fight. In today's wars, with an emphasis on ethnic/tribal, religious,

national liberation, counter insurgency, and guerrilla warfare, an increasing number of the recruits are child soldiers.

The changing technology of warfare too, has contributed to this trend by increasing the children's ability to participate in direct armed conflicts. In the early days, the more dangerous weapons were expensive, heavier and more complex for children to operate. Today's technological developments in the production, easy access, easy dismantling and assembling and the use of light assault weapons have made children more vulnerable. Nowadays, children can not only use them, but are also able to strip and reassemble them. (The Defense Monitor, 1997; Machel, 1996; Cohn, 1994; CDI, 1997; Forman, 1999).

Another obstacle has been the international arms trade that has made assault weapons cheaper and more readily available. Nowadays even the poorest communities have access to deadly weapons capable of transforming a local conflict into a bloody one. Uganda and Kenya are examples of the countries where guns are purchased cheaply. In Uganda it is reported that an AK-47 automatic machine gun can be purchased for the cost of a chicken and in northern Kenya, the same kind of weapon can be purchased for a price of a goat (Machel, 1996, McCallin 1998).

The contradiction is that developed nations readily condemn the use of children as soldiers in armed conflicts but are reluctant to ban the mass sale of assault weapons to warring parties. In addition, the belief that child soldiers are better fighters than adults because of their small size and the fact that they do not disobey or question authority, also makes them more susceptible. There are many factors that have caused child conscription into armed conflicts. They range from economic factors, poverty shortages of manpower in the armed forces or opposition groups and class discrimination in the case of minorities, to many subtly manipulative motivations and pressures that may all the more be difficult to eliminate (Cohn, 1994, Handelman, 1999, MRG, 1997). These factors have caused many African children to become tools of war across the continent despite appeals to governments and opposition groups to stop recruiting children into armed conflicts.

According to the study conducted for UN by the then appointed expert, the majority of child soldiers are boys, but girls are also recruited and are expected to perform the same functions as boys. Additionally, they are also expected to provide sexual services. In Uganda for example, girls who are abducted are “married off” to rebel leaders (Machel, 1996, The Defense Monitor, 1997, Forman, 1999, Diaz, 1997). The patterns and characteristics of armed conflicts have increased the risks to children. Colonialism and persistent economic, social and political crises have greatly contributed to the disintegration of public order in the continent. Shillington (1995) wrote that “undermined by internal dissent, countries caught up in conflicts today also experience severe stress from a global world economy that forces them towards further marginalization”. (pp. 373 - 406)

Rigorous programs of structural adjustment dictated by the western world have weakened already fragile states, leaving them dependent on forces and relations over which they have little or no control of at all. Even in cases where some African governments have made considerable economic progress, benefits have often been spread unevenly (Machel, 1996). Machel further explained that, “corrupt government officials have misappropriated funds leaving millions of ordinary people struggling for survival” (p. 13-14). As a result many children have either voluntarily enlisted themselves into armed forces or have been influenced by their families in order to earn some wages to maintain the family.

The collapse of functional governments in several African countries torn by internal fights has evoked inequalities, grievances and strife. Machel also pointed out that it is evident that the personalization of power and leadership by some African leaders and the manipulation of ethnicity and religion, to serve personal or group interests, is imminent” (p. 13). As a result, this has had debilitating effects on countries in conflicts. All these elements have contributed to conflicts between governments and rebels, between opposition groups vying for supremacy and among populations at large in struggles that take the form of widespread civil unrest. Many of these conflicts drag on for long periods with no

clear beginning or end, and as a result, subject successive generations to endless struggles for survival, including child soldiers.

### **1.3. THE DECISION TO RESEARCH THIS TOPIC**

*It is immoral that adults should want children to fight their wars for them. We must not close our eyes to the fact that child soldiers are both victims and perpetrators. They sometimes carry out the most barbaric acts of violence. But no matter what the child is guilty of, the main responsibility lies with us, the adults. There is simply no excuse, no acceptable argument for arming children.*

*Archbishop Desmond M. Tutu*

While in Africa, I worked for the Catholic Church from 1989 to 1992 and was assigned to work with refugee children and child soldiers that were orphans, many of whom were physically and psychologically abused, and displaced in Kenya, Sudan, Tanzania, and Uganda. I worked directly with these children in refugee camps, orphanage homes, and rehabilitation centres. I was actively involved in their daily lives; coordinating and organizing activities to meet their basic health, educational, and recreational needs. Working directly with this population made me aware of the profound physical and psychological consequences that violence has caused these children. The forced conscription, the physical and psychological torture, the inadequate education, and lack of job opportunities or a better future for these children all had an impact on me.

I became interested in this population because I was seeking to know why society acted indifferently toward these children. I also wanted to understand why some governments underrated the seriousness of the problem and how they perceived the plight of these children. I realized that working with children living in war zones is profoundly political. I discovered that I needed to become politically involved based on these children's narratives. I also quickly learned that a commitment to helping these children inevitably meant a commitment to try to change the conditions that allow the conscription to continue. I realized that it was my social obligation to campaign for justice.

I, therefore, became interested in taking part in the mass education of the population affected -- their families, communities, and society at large -- on the rights of the child, and the effects of conscription on the children, their families, and society at large. I also wanted to take part in seeking other alternatives for children to earn a living where they could avoid the physical or psychological harm caused by their conscription into armed conflicts. Working in collaboration with others who shared the same concerns about child soldiers, many of whom have dedicated years to working with children affected by wars, was a learning process for me. I quickly began not only to find answers to the many questions I had, but rather ways to understand how politics are played out in a political arena.

My observation of these children was that every one of them had had many painful experiences, both boys and girls alike. Each child remembered a particular event -- watching a parent(s) murdered, a sibling(s) screaming for help, a home being burned, or a neighbour's throat cut and blood gushing out. Many children shared the pains of watching their parents and relatives brutally murdered, being raped, tortured, starved, or separated from them.

These experiences were sometimes evident in their behaviours. Some of them were very fearful and shaken, angry, withdrawn, and sometimes preferred solitude. Others were either very emotional or totally detached and some were very overtly aggressive towards their peers and adults alike. Others manifested signs of guilt, sadness, symptoms of phobias and bed-wetting. Some of them lost their family members, others were themselves raped and tortured while in the army before they escaped or were demobilized.

Whenever some of these children gained trust in me, they often shared their painful experiences of the wars and their feelings. Some openly admitted that they no longer trusted adults for what they did to them. Those that had sought refuge in neighbouring countries kept seeking to know whether they would ever return to their home countries again. Some wondered whether they would ever reunite with members of their families.

Many children narrated stories of harsh military treatment. They talked of being beaten up whenever they failed to abide by the rules. Some talked about

their experiences of carrying guns that were sometimes heavier or taller than them. They were made to walk many miles everyday without food or water. Some of them did not make it to their destination, some tried to escape, and others talked of being ordered to kill those who tried to escape. They reported having been indoctrinated to believe that they had to kill or be killed. The experiences of these African children are similar to those of other children around the world. The dangerous circumstances faced by children in war zones point to an urgent need to develop strategies to prevent further conscription. It is my hope that children in Africa and all over the world will some day see their rights recognized and respected; the right to life, education, and freedom.

#### **1.4. OBJECTIVES OF THE STUDY**

The objective of this thesis is to investigate the problem of child soldiers and child conscription in African. This study attempts to explore current and emerging challenges experienced by professionals and or administrators in working with child soldiers directly or indirectly. This is done by (1) investigating what professionals from different professional backgrounds and organizations, or government institutions, perceive as the causes of child conscription in Africa, (2) examining what they perceived to be the effects of participation in armed conflicts on child soldiers, (3) analyzing the current intervention process being used and what professionals perceive as essential alternative intervention methods.

## 2. A REVIEW OF THE LITERATURE

According to the literature discussed earlier in the description of the problem by MRGI (1997); UNICEF, (1998); HRW, (1998), and in other available literature, there is a general consensus with regard to the severity of conscription of children under 18 years of age. Several authors have reported that governments and opposition groups do recruit children under the age of 18 in armed conflicts. (Forman, 1999, The Defense Monitor, 1997, Lewis and Miller, 1999). It is also generally agreed that child soldiers are recruited in different ways.

The report by the Center for Defense Information (CDI) (1999) stated that the emotional and physical immaturity of children makes them easy to manipulate and draw to violence because they are too young to resist or understand. Child soldiers have been used in suicide missions and have been forced to commit atrocities against their families and communities. They have also been sent to minefields ahead of troops (HRW, 1998, 1999, Lewis and Miller, 1999, Handelman, 1999). Due to their inexperience and lack of training, child soldiers are reported to suffer higher casualty rates than adult soldiers. Survivors risk the chance of being permanently disabled and bearing psychological scars from being forced both to commit and witness horrific atrocities (Lewis and Miller, 1999, McCallin, 1998).

It is explained in some of the literature that research aimed at achieving a better understanding of the phenomena surrounding the problem of child conscription in Africa has come up against several obstacles. (Summerfield (1998); Adams (1999); McCallin 1998). First, it has been very hard to get governments and opposition groups to commit themselves to demobilizing the children. Secondly, aid to African nations affected by internal conflicts is shrinking because donors are redirecting their funds to other projects considered to be more crucial.

The literature states explicitly that the most likely method of recruitment for children has been compulsory conscription. This is mainly reported as a government prerogative. McCallin (1998), Machel, (1996), and Cohn, 1994, reported that governments too often take advantage of children who may not have documentation, such as identity or birth records. Machel 1996, McCallin, 1998; and Cohn 1994 explained further that other children have been press-ganged or kidnapped. Yet others have been seized from the streets, schools, market places, orphanages, and rehabilitation centres. Children who live in nations torn by war for many years in Africa feel that their neighbourhoods are dangerous and their world is unsafe.

A summary of the literature illustrates the following: 1) the kinds of vulnerable children, 2) different methods of recruitment, 3) factors influencing conscription, and 4) the consequences of participation, 5) the current intervention model used, 6) the exclusion of local professionals and leaders in the communities, 7) the lack of involvement of child soldiers, and 8) the ambiguity of international laws/policies.

### **2.1. Kinds of Vulnerable Children**

Brett, McCallin and O'Shea (1996) explain that children who generally get involved in armed conflicts are from already impoverished and marginalized backgrounds and are most likely to become soldiers at an early age. This can be directly related to the economic, social, political, and cultural conditions which define the circumstances of their families and communities, and which almost always deteriorate as the conflict continues. This is confirmed in their research report prepared for the UN (1996) and cited by Bracken and Petty (1998), which makes a clear account of who these children are:

... the boys mainly came from poor peasant families in isolated rural areas or from the conflict zones. The poverty of their homes bordered on destitution to judge by the clothing, type of house, environmental conditions and educational level of the families. The child soldiers from urban areas came from homes where the head of the family was a woman, they were the sons of cooks,

fruit sellers, small traders. These families had had numerous children and were obviously poor, to judge by the materials of which the house was made, their clothing and the marginal areas they lived in...(Brett et al. 1996, p. 67)

According to Human Rights Watch (1994) another category of vulnerable children are street kids who have fled from war torn areas and have been separated from their families. Children from rural areas trying to search for employment to support aging members of the extended families in the villages usually become victims. This illustrates that economic, social, political, and cultural circumstances make these children more vulnerable to recruitment.

Children from the poorer sectors of societies are vulnerable to forced recruitment, particularly when this is accomplished through recruiting raids which target gatherings of the poor and the disadvantaged. Cohn, (1994), and McCallin, (1998). They also established that the recruiters target those they see as a threat because they are members of specific tribe or clan or ethnic group. In a majority of cases these children are not recruited primarily for their fighting qualities, but rather because of manpower shortages. This suggests that the longer a conflict continues, the more likely it is that these children will be recruited, and in increasing numbers too.

The role of child soldiers in the military varies but in a majority of cases they are reported to start out as porters carrying very heavy loads, and are also used as spies, messengers, guards, and loot property and other risky duties (Carter, 1998; Weiss, 1999; The Economist, 1998;1999; Wessells, 1997). Girls are reported to start out as caretakers for the injured personnel, cooks, and mistresses. They are obliged to have sexual relations with the military personnel to 'alleviate the sadness of the combatants (Machel, 1996, Forman, 1999, Amnesty International, 1999).

After the child soldiers are oriented to their roles, they are sent to the front lines any time and entrusted with more risky duties such as deploying or deactivating land mines, serving as advance troops in ambush attacks, and patrolling with adult militias. In many reports that have been made, the conditions of child soldiers are said to be deplorable. A Jesuit report (1999) is

quoted as having reported that some of the child soldiers are not much taller than the guns they carry.

## **2.2. Different Methods of Recruitment**

There are said to be various ways that child soldiers become drafted into armed conflicts. Compulsory recruitment by conscription or forced recruitment, and coercive or abusive recruitment are some of the methods of recruitment.

### **2.2.1. Forced and Abusive Recruitment**

Cohn (1994) makes a distinctive definition between forced recruitment and coercive or abusive recruitment.

Forced recruitment entails the threat or actual violation of the physical integrity of the youth or someone close to him or her, and is practiced by both armed opposition groups and national armed forces. Whereas coercive or abusive recruitment covers those situations where there is no proof of direct physical threat or intimidation, but the evidence supports the inference of involuntary enlistment. (p. 53)

States in which conscription is regulated by law sometimes engage in systematic forced recruitment. Recruiting under-age children along with young men has become a norm. The armed forces are reported to be using round-ups to fill the ranks, taking young children out of public or private places, such as market-places or churches, or as they return from school or walk down the road. Children from the poorer sectors of societies are vulnerable to forced recruitment, particularly when this is accomplished through recruiting raids which target gatherings of the poor and the disadvantaged (Cohn, 1994; McCallin, 1998). The recruiters target those they see as a threat either because they are members of a specific tribe or ethnic group, as was the case Rwanda during the ethnic war in the early 1990s.

Cohn and McCallin explained further that, “after the children have been recruited, the new recruits are moved to training centers far from their homes and their families are not usually notified or allowed to visit their children.”

Shortages of manpower as a result of defection by adult soldiers, and heavy

casualties inflicted by opponents, may result in indiscriminate recruitment methods. Class discrimination may become pre-eminent and thus explain much of the forced recruitment in Africa. Cohn and McCallin also stated that forced drafting can also be a result of low levels of response to the compulsory military service campaigns. The authorities, therefore, combine standard recruitment procedures with forcible conscription at gunpoint. Another factor that contributes to forced drafting is mass desertions by those fighting at the front line or about to go to the front line.

Mozambican resistance group (RENAMO) is one such example where children have been conscripted to replace deserters. (Krijn and Richards 1998; UNICEF, 1996; UNICEF, 1989). RENAMO is reported as having consistently and systematically practiced forced recruitment. One deserter, forcibly recruited at the age of ten, reported that RENAMO does not use many adults to fight because they are not good fighters. Instead, much larger numbers of very young soldiers as young as six, seven, and eight years old have been recruited since the late 1980s.

An example of coercive or abusive recruitment took place between the late 1980s and early 1990s, where some 12,500 Sudanese boys were reported to have wandered across two thousand kilometers of desert between Sudan, Ethiopia and Kenya. According to HRW/African (1995) it was speculated that these boys had been removed from their families at a very young age by Sudanese rebel forces, the Sudanese Peoples Liberation Army (SPLA), as a way of trying to ensure a future supply of fighters. When these children arrived in Ethiopia, the United Nations High Commissioner for Refugees (UNHCR), was quoted as having stated that many of them had already received paramilitary training. After the Ethiopian government fell in 1991, they were reported to have travelled back to Southern Sudan where the International Committee of the Red Cross (ICRC) reported no evidence of the boys' military conscription.

In Liberia too, the National Patriotic Front of Liberia (NPFL) led by Charles Taylor was reported by African Rights Monitor (1980) to have carried out recruitment at schools run by the church. The Silesian Brothers who were

working in areas controlled by this armed opposition group reported this, but because the process was unclear it was hard to bring the commanders to justice. Thus, the views that governments and opposition groups adopt regarding the involvement of children in war arise from their general perceptions and especially their attitudes toward the nature of childhood and the morality of war. Another method of recruitment discussed for further understanding of the problem is voluntary recruitment.

### **2.2.2. Voluntary Recruitment**

This is yet another way child soldiers are recruited. Barnitz (1997); Diaz, (1997); Levine, (1997), explained that the vast majority of young soldiers in this category are not forced or coerced into participating in conflicts, but are subject to many subtle manipulative motivations and pressures that are more difficult to eliminate than blatant forced recruitment. The motivating factors do vary. Sometimes voluntary enlistment by children may vary according to the types of armed conflicts and across areas of armed conflicts. At other times it may depend on the nature of their pre-war and war-related experiences.

McCallin (1996) confirms that many young people voluntarily join armed groups or forces because of their personal experiences and circumstances, and in light of their subjective appraisal of the decision to volunteer. She further explained that children's subjective understanding of reality is influenced by their social surroundings, especially by their families, relatives, schools, churches, or communities and by developmental processes (pp. 65-66). Members of communities can influence how children appraise the choice to participate in hostilities or not. Garbarino, Kostelny, Dathleen and Dubrow (1991: 42) explain that, "developmental processes or stages children pass through at different ages influence children's understanding of objective experiences that can induce them to voluntarily join an armed group."

Wessells (1997) explained that, "the developmental stages will also affect children's perception of the decision to join, and expectations and feelings of empowerment and competence, both before and during war, have an impact." He explained further that recruiting agents often take advantage of the developmental

process, being aware that children do not understand the consequences of the decisions they make. They, therefore, manipulate children to take up arms ‘voluntarily.’ However, Lee, (1997) and Adams, (1998) challenge the definition of the term “voluntary enlistment.” They argue that if the only option a child from a poverty stricken village has is the military as the only way to feed, clothe, and take care of health problems, how can such an option be considered “voluntary?”

## **2.2. Factors Influencing Conscription**

Poverty and being disadvantaged as discussed earlier, influence conscription for many children. Social, cultural, economic, political, and environmental factors play a great role. Cohn (1994) and McCallin (1998) emphasized that children from already impoverished and marginalized backgrounds are most likely to become soldiers at an early stage. As presented in the literature, social and economic injustice motivates children to take up arms, sometimes with a long-term vision of effecting change such as finding a means of survival or support for the family in terms of subsistence wages, particularly where the alternative to enlistment is unemployment. At other times, the motivation may be just to get medical care when sick or food for the day.

Settlements such as camps for refugees and other displaced persons in Africa have provided a fruitful source of child soldiers. These settlements are often exposed to attack where refugee children are vulnerable to political exploitation. HRW/African (1995) reported that as recently as 1992 some two thousand unaccompanied Sudanese refugee children went missing from a transit camp in Kenya and are presumed to have joined, or been recruited by, the SPLA in Southern Sudan.

Displaced people often regroup themselves according to tribal lines, thus providing a ready recruiting ground for any armed opposition groups who are similarly based. The war in Rwanda in the early 1990s is an example. When the Hutus fled to the former Zaire while being pursued by the Tutsis, the rebels raided refugee camps and drafted adults as well as children to fight back. The

desire for revenge often originates in personal experiences of physical abuse, torture, killing, deprivation and humiliation. An example cited took place in Uganda in 1985. The African Rights Monitor (1998) reported that the National Resistance Army (NRA) child soldiers were highly motivated and often instilled with a strong sense of revenge triggered by the Uganda National Liberation Army's (UNLA) atrocities against their families, friends or villages.

In Liberia during Doe's brutal counter-insurgency campaign, many very young orphaned Liberian boys joined voluntarily out of a desire for vengeance. African Rights Watch (1994) confirms that a Liberian human rights worker claimed that some parents volunteered their children to the INPFL (a splinter group of the NPFL) out of a desire to revenge their tribal disputes. For refugees, the internally displaced, the homeless, the orphaned, and fearful children, joining an armed group sometimes constitutes "the best choice among bad alternatives" (Cohn, 1994; McCallin, 1998).

The uncertainty in refugee camps can also make an armed group appear very attractive to restless children. In rural areas, such as in Uganda in the early 1980s, the government and armed groups used compulsory recruitment under the rationale that many youths lacked documentation such as birth or identity records to prove they were under the ages of conscription. They use methods like looting, killing and abducting such as has recently been happening in Uganda. Armed opposition groups have abducted an estimated 10,000 children from schools and homes with threats and intimidation. Both the government and the armed opposition groups as reported in the African Monitor (1998) have used such a method as a convenient loophole to mask the conscription of children. The researchers and the practitioners according to the literature, also agree that the consequences of impoverishment and educational deprivation constitutes a strong push for children from poor and disadvantaged groups to volunteer for military service. This is viewed as a way out of destitution.

Two major factors for children "volunteering" to join armed opposition groups are; protection/security and poverty, their own personal experiences of harassment by government troops, including torture, loss of home or family

members, or forced displacement or exile. McCallin (1998) asserted that protection is one of the primary motivations for children enlisting themselves since they are aware of their vulnerability (p. 63). Enrollment in either government or armed opposition groups is a means of protecting themselves and their families from harassment. Poverty and being disadvantaged influence conscription for many children.

Social, cultural, economic, political, and environmental factors, as stated earlier, play a great role. Children from already impoverished and marginalized backgrounds are most likely to become soldiers at an early stage. Social and economic injustices therefore, motivate children to take up arms. Sometimes motivation is said to be the long-term vision of effecting change such as finding a means of survival or support for the family in terms of a subsistence wage. This particularly is said to be a factor where the alternative to enlistment is unemployment. At other times the motivation may be just to feed themselves.

### **2.3. Consequences of Participation**

*“Only cowards would hide behind children in battle... War forces vulnerable children as young as eight to become soldiers. It deforms their sense of right and wrong, turning 12-year olds into cold-blooded killers. It ends hope... Children should never be used as weapons of War”*  
*First Lady Hillary Clinton (1998)*

The consequences of child soldiers' participation in conflicts are said to be many. Child soldiers have reported that they received the same training, treatment, and indoctrination as adults. As this is frequently characterized by brutal and inhumane routines, it naturally falls hardest on the children.

Garbarino et. Al. (1991) explain that

When children witness or directly experience real violence, the line between fantasy and reality is blurred: their most powerful and potentially frightening fantasies about bodily injury, loss of relationships, and loss of impulse control are enacted before their eyes. (p.35)

Children are also reported to die from injuries as a result of punishment or to break the spirit of new recruits. They are also forced to carry very heavy supplies

of food or ammunition, and may be beaten or killed if they become too weak to bear the load.

After children have been conscripted by either governments or armed opposition groups, their inexperience and frequent lack of training results in high casualties and death rates in active combat. As reported from earlier narratives, many children who are injured in combat are left to die from their wounds, or are shot. Those who are too weak to keep up with the group, or who attempt to escape, either to avoid recruitment or desert the group, may also be executed. If they are fighting for the opposition group and the group is defeated, they risk being thrown in jails where they will languish for years without trial.

Rape is perpetrated against teenage girls in war zones. Rape can be a significant factor in suicide among teenage girls. Machel, (1996); Forman, (1999); and Diaz, (1997). These authors also reported that child soldiers are prone to die from starvation and preventable diseases they contract in the unhygienic conditions in which they live. The treatment and training of child soldiers involves a high degree of risk for their physical and mental well being, especially for the youngest amongst them. The most frequent injuries suffered by child soldiers are reported to be loss of limbs, loss of hearing, and blindness and may in time result in permanent disabilities.

These disabilities are reported to impose additional hardships in their future, compromising their chances of taking advantage of educational and vocational training and impeding their social reintegration. As a result, they become an additional burden for an already impoverished family or society. Apfel and Simon (1996) and Apfel (1990) have demonstrated that wars make children vulnerable to social and emotional traumas. They cited recent research studies conducted in Sweden and Mozambique indicating that 60 to 77 percent of children in war affected nations had been exposed to violence, torture, hunger, loss of family, displacement from communities, and conscripted into military and paramilitary groups.

The consequences for child soldiers participating in armed conflicts are considered to be overwhelmingly negative. These consequences cannot be

explained in simple or straightforward terms. The world they face, is one where the social and cultural environment of family and community is said to have been destroyed or severely disrupted. Their physical and emotional well being has been affected; where their opportunities for education and vocational or skills training, and ultimately their chances for employment, are reported to be limited because they are poverty-stricken and marginalized.

It is this multiplicity of developmental insults that compromises child soldiers' capacity to have a healthy developmental cycle. Children who live in war zones often feel that their neighbourhoods are dangerous and that their world is unsafe. All they see and hear are dead or wounded children and adults and gunfire. These experiences according to Garbirino et al. (1991) and Wessells, (1997) cause disruption in sleep, increased separation anxiety, and hypervigilance among some children. Wars are reported to undermine and disrupt culturally normal relationships by overturning or disarming social structures, thus placing children in jeopardy. Wars are also said to disrupt children's education and vocational or skill development.

#### **2.4. The Medical Model**

Concerns are continually being raised about the medical model which is currently the primary intervention method being used to address the problem of child conscription into armed conflicts in Africa. It is being debated that the issues that lead to child conscription are multifaceted. As a result, the use of only one model in addressing the problem is seen as having led to its prevalence.

However, those who contend that the medical model is an essential preference provide the following argument beginning with a definition: The medical model as defined by Cockerham (1992) "views a mental disorder as a disease or diseaselike entity that can be treated through medical means" (p. 59). Cockerham continued to explain that "a mental disorder is thought to occur as a result of social stress individuals may experience in a situation for which their usual modes of behaviour are inadequate and the consequences of not adapting to the situation are perceived as serious" (p. 78). The solution to treating such a

mental disorder is through counselling. Parsons and Wicks (1994) defined counselling as “a means of enabling a person to utilize the resources he or she now has for coping with life” (p. 87).

### **2.5.1. The Psychosocial Consequences of War or Conflicts**

Boothby 1990; Cockerham 1992; and Parsons & Wicks 1994 maintained that in majority of cases the children affected by wars tend to be from the poorest social classes. Often they are from rural communities or small towns. These children are reported to be especially vulnerable to exposure to violence. This is linked to the observation of war combatants during the First and Second World Wars. During this time, there was recognition of stress disorder as a predictable or “normal” reaction to the witnessing of or involvement in violent activities. This recognition of a stress disorder as a normal or predictable response to violence and severe stress was eventually expanded to include children.

### **2.5.3. Children as Victims and as Participants in Armed Conflicts**

Some researchers have suggested that there is a marked increase in psychological disturbances in children who are subject to sporadic violence (Boothby, 1990; Apfel and Simon, 1996; Garbarino et al., 1991). However, the authors agree that little is yet known about children who have actively participated in political violence. As a result, their experiences are analyzed together with the experiences of children who have witnessed violence. More recent research studies into the effects of war on children have indicated that war related traumas are often diverse and multiple in nature and may occur repeatedly over a long period of time (Macksoud, 1988, and Boothby, 1990).

Types of traumas are said to vary according to war-related experiences such as: witnessing or participating in violent acts, and bereavement. Psychologists are also said to have found that the chronicity of hostilities have a direct impact on psychological distress among children of political conflicts. Psychological and developmental risks experienced by children during war conflicts are reported to be related either to direct threats, that is, exposure to violence as well as to environmental deprivation, that is, the absence of

opportunities for physical, cognitive, and emotional development (Chikane, 1986; Gibson, 1989; Straker, 1987).

According to Boothby, 1992; Garmez, 1982 and Garbarino et. al., 1992, the clinical observations that have been done, have provided insights into the impact of war conditions and traumas on children's psychological and developmental well being. Children exposed to the stress of extreme violence are said to reveal mental health disturbances after the war is over. Findings are also reported to support the fact that those children who lost their family members or witnessed or committed atrocities were more likely to show severe anxiety, fear, Post Traumatic Stress Disorder (PTSD) and other psychiatric disorders. These observations are said to show that there are serious effects of exposure to acute and to chronic trauma.

Garbarino (1990) stated that children exposed to political conflicts characterized by chronic strife, high personal involvement, and political, social, and economic oppression are bound to experience chronic danger that could produce far reaching effects upon the child. He further explained that:

...These include persistent Post Traumatic Distress Syndrome, alterations of personality, and major changes in patterns of behaviors and beliefs to make some sense of ongoing danger. This process is most likely to take place when danger comes from social factors that overthrow day-to-day social reality, as happens during war or when a child's neighbourhood is taken over by chronic violence, most notably civil war or insurrection (p. 9).

#### **2.5.4. Preference of the medical model**

There are said to be various benefits for using the medical model as an intervention method. A few are summarized here for the purpose of understanding the model:

- The one-to-one interview format offers immediate relief for the child who has witnessed the death of a family member or relatives.
- Projective drawing or storytelling helps the child relive the traumatic experience, describe its worst moment and gain a measure of control over the troubling event.

- The group sessions' format involves drawing, storytelling, role-playing and other activities that encourage the free expression of fears and facilitates trauma resolution.

The goal of any of the chosen format is to restore the affected children to a pre-trauma level of functioning through structured opportunities to discuss and better understand their fears and experiences (Galante and Foa, 1986). Or as Garbarino (1990) put it, "the therapy of choice is reassurance to the child that you are safe again, things are back to normal" (p. 8). In summary, the authors that support the medical model highlight that children affected by armed conflicts often develop symptoms of PTSD as well as cognitive impairment, and social deficits following exposure to traumatic events. These symptoms they argue, necessitate the use of counselling or therapy to decrease or ease them.

Other authors have refuted the use of the medical model as the primary means of intervention (Bracken 1998; Giller, 1998; McCallin, 1998; Summerfield, 1998; Cohn, 1994). They argue that the major focus of the medical model is on the psychological aspects of endurance and recovery. The programs provided are directed towards the psychological wounds of war. In the literature, these authors have expressed fears that addressing poverty problems by solely using a medical model may be short lived and problematic.

Machel, 1996; Summerfield, 1998; and McCallin 1998 have argued that environmental factors such as unemployment, education, and skills also need to be analyzed. They also stress that the longer child conscription becomes medicalized, the more likely that children will be recruited into armed conflicts in larger numbers. Besides, the medical model is said to define the child soldiers' problems in terms of trauma which is familiar to western culture. Yet the problems experienced by the child soldiers in African are multifaceted.

Some of the problems are socially, politically, and economically constructed and cannot all be addressed using a medical model alone. They explained that the way individuals and communities experience and cope with suffering of war depends on social, cultural and political aspects of their situation which usually encourages collectiveness. The introduction of the current

discourse on trauma, they continued to explain, has systematically sidelined this social dimension of suffering; instead, it has promoted a strongly individualistic focus, presenting trauma as something that happens inside individual minds.

They argued that as a result of the introduction of this new discourse to countries in conflicts in Africa, there has been a noticeable decline in aid. Some of the basic needs such as food and clothing, are not in great supply in the affected areas. One explanation given for the decline in the aid budget is that a high proportion of funding is spent on expatriate consultancy fees and the projects end with only counselling. Many of these agencies working with child soldiers focus on the psychological aspects of endurance and recovery. The projects they run are directed towards psychological wounds of war thus, they highlight trauma counselling only. The export of this discourse unfortunately is said to have tended to deflect attention from the broader social, political, and economic development of these children who have experienced extreme suffering and witnessed the destruction of families and communities.

Programs of psychological recovery are said to be at best a part of the solution and that the real priorities for child combatants are; education, employment opportunity, and economic security for their families. Emphasis on trauma is also said to have resulted in the social emotional needs of these children, as well as the needs of their families and communities, being neglected. As a result of this universalized western notion, African children, are reported to be pathologized and viewed as passive victims rather than active survivors (Reichenberg and Friedman, 1996; McCallin, 1998).

The highlighting of trauma is also said to have contributed to the crushing of the social and cultural institutions which connect child soldiers with their families, tribes or ethnic groups, and to their history. This is due to the belief that therapy can correct all the ills these children have experienced. The medical model is also reported to have overshadowed local practices of dealing with disasters of all kinds. For a long time Africans have taught their children the impact of traditional sources of ritual power (ancestor's spirits and myths).

The fundamental idea is to allow the voices of the affected to be heard so that their knowledge can be used as a basic frame of reference within which offers of assistance are shaped. Berkerman, Cohen, & Marans, (1996) state that the “trauma model detaches the affected victims from sufferings or torture experienced as soldiers.” They further report that there has been little or no independent evaluation of the benefits of trauma programs in war zones. Peters and Richards (1998) asserted that this leads to a need for a better understanding of the interplay of political, socio-economic and cultural forces operating in a particular war zone and in the locality where intervention is carried out (p. 80). Machel, (1996); Summerfield, (1998); and McCallin (1998) have argued that environmental factors such as unemployment, education, and skills also need to be analyzed. They stress that the longer child conscription becomes medicalized, the more likely that children will be recruited into armed conflicts in larger numbers.

### **2.5. Local Professionals and Community Leaders**

When expatriates from western countries go to Africa to work in war zones, they are not sensitive to the existence of local experts. On arrival they quickly and hurriedly set up their projects without any consultations with the local people. Sometimes they recruit people who do not have enough knowledge and skills to work with them. Local professionals and leaders are not very involved. This has led to the questioning of the validity of the roles of the western experts by local people. Some of the experts have been reported as having little or no experience working in conditions with fewer resources.

Giller (1998) based on her experience working in a developing countries explained that:

I was totally inexperienced in tropical medicine or indeed in working in a situation with so few resources...I felt that I should be ‘sitting at the feet’ of local knowledge, but my very presence silenced that knowledge and privileged my inexperience. (p.75)

There are well-qualified Africans, who may be employed or unemployed, who could make a tremendous contribution to the projects. They are familiar with the environment and the people. However, they are not usually invited by western experts to work as part of the team.

Concerns have also been raised about some of the western experts. Apfel and Simon (1996) explained that:

Some of the professionals from the west have not been trained to work directly with child soldiers and may not be professionals themselves and may themselves be unpredictably and chronically in danger and traumatized. They may not be trained to help traumatized children. This is evident in war zones in developing countries. (p. 195)

The lack of involvement of locally trained professionals creates barriers and limitations for the experts and the child soldiers as well as the communities. It means the experts can not get as much accurate data as they would have had they recruited local professionals to be part of the team. The involvement of local experts and leaders ensures sensitivity to the needs of child soldiers and the communities at large.

Apfel and Simon (1991) remarked that no single group of professionals can address the multiple needs of the children and families subjected to environmental stress (p. 55). Utilizing personnel (local experts) familiar to the child soldiers and their families, can provide accurate information and afford more opportunities for child soldiers to discuss their experiences and reactions and to receive emotional support from peers. Participation of the local leaders and experts often reaps greater rewards in terms of community cooperation. When projects are developed with community support and involvement, it will frequently receive community support in the form of personnel, research space, and access to critical information or sites in which to conduct research.

Western professionals are urged to utilize paraprofessionals, clerics, or local experts who provide services through community agencies and religious groups. These local experts can assist in reestablishing social support networks and mobilizing public awareness. Consulting with chiefs and traditional healers

is vital because they incorporate traditional practices in their services and are usually the first to be consulted when families or individuals have problems.

### **2.7. Lack of Involvement of Child Soldiers**

Another major mistake often made by western professionals is not to involve the child soldiers, their families or the communities in the planning and implementation of objectives and goals. The great danger with such a decision is that it leaves the local people in a more vulnerable state than they were before. Western experts are also urged to involve the child soldiers in planning the intervention programs. The ex-child soldiers are the main actors in the recovery effort, so excluding them from planning process creates many problems. Encouraging these children to participate in identifying shared goals and assisting them to work together would help them develop their capacities.

Giller, (1998) points out that “such an act also sends a wrong message to the local people that may imply that their input or ways of coping are inferior to the western approach. Local people may also be misled into believing that western knowledge supersedes their own knowledge of the ways healing is brought about” (p. 132-134).

It is also reported in the literature that at times, the problems being addressed seem not be investigated thoroughly enough. Most times programs and services are set up without the involvement of the child soldiers or the local communities meant to benefit from those programs. Such a decision implies a lack of respect for child soldiers, local people and their priorities, which should also extend to respect the local forms of healing. (Giller, 1998; McCallin, 1998; Summerfield, 1998)

Consultation is essential for the foreign experts who know little or nothing about the environment they are working in. This may also mean that local knowledge and local ways of doing things are undermined in favor of interventions that may often be of dubious efficacy. Giller (1998) remarks that, “it seems as if experts overlook the experiences and confidence of the local

people in their own ways of dealing with disasters by proposing a “better way of doing it”. (p. 132)

## **2.8. International Laws Governing the Rights of a Child**

The UN resolutions on the Convention of the Rights of the Child are reported by ICRC not to be clearly defined. According to ICRC, the definitions leave room for armed groups to take advantage of the situations because the rules operate primarily between states and only have an indirect effect on non-state actors. The ICRC (1997) stated that a distinction must be drawn between international and non-international armed conflicts. The ICRC suggested that the word “direct” should be removed from the Protocol as it weakens the protection conferred on children because it is not participation in hostilities in general which is covered but just a certain type of participation.

The ICRC explained that direct participation does not include acts such as gathering and transmission of military information, transport of arms and munitions, provision of supplies. The ICRC pointed out that “it is these very tasks which are often entrusted to the children, who are less conspicuous because of their size and so more effective than adults” (p. 6)

The ICRC has also further explained that a child who is a member of the armed forces or of an armed group and who takes an indirect part in hostilities is very difficult to distinguish from the other members of the forces or group. It therefore pointed out that such a child is not protected from an enemy attack and runs the same risk as any adult participating directly in the hostilities. Also, children who have been assigned only subordinate tasks find themselves fully involved in the hostilities. The ICRC put forward a proposal for an amendment to be made; however, the proposal was not accepted.

Governments should be pressured to work for the finalization and rapid adoption of the draft on the Convention on the Rights of the Child. As a result, this would force governments to pay much closer attention to their methods of recruitment. It would also commit them to establish effective monitoring systems and back them up with legal remedies and institutions that are sufficiently

strong to tackle abuses (Kuper 1997; Cohn 1994; The Defense Monitor 1997; MRG, 1997; RPN, 1997).

They also argued that peace agreements sometimes do not include specific measures to demobilize and reintegrate child soldiers into society. The existing advocacy and social service programs for the demobilization and re-integration of child soldiers into the communities are neither strong nor very effective. They urged the UN bodies, specialized agencies and international civil society, to pursue governments and non-state forces and their international supporters to encourage the immediate demobilization of child soldiers and adherence to the Convention on the Rights of the Child. Brett, (1996) and ICRC, (1997) pointed out that international laws governing the age of recruitment are not clearly specified. This is said to have created problems for international organizations attempting to exert pressure on governments. If all governments ratified the international humanitarian conventions that apply to internal conflicts, then international laws would hold all armed groups within the continent accountable.

Global campaigns have just been launched by these organizations aimed at preventing the use of children under the age of 18 years in armed conflicts. The media is reported not to have done much to expose the use of child soldiers early enough to draw international attention. There is not enough support given to local organization or groups in their struggle for the release of children from armed conflicts and in the drive to stop child conscription altogether. However, very little attention has been paid to the circumstances that cause children to be drafted into armed conflicts.

## **2.9. Summary of the Articles**

The United Nations Convention on the Rights of the Child (UNCRC) articles and the African Charter of Rights and Welfare of Children articles will be summarized in order to provide an understanding of the rights of a child.

### **2.9.2. The UNCRC Articles 38- 39, 77**

The UN Convention on the Rights of the Child explains that, "States' parties shall take all feasible measures to ensure that no child

under 18 years shall take part in hostilities; that states' parties shall refrain from recruiting any person who has not attained the age of 18 years into the armed forces; that States' parties undertake to respect and to ensure respect for rules of international humanitarian law applicable to them in armed conflicts which are relevant to the child."

It is further stated that children should not be separated from their parents except for their own well being. That states should protect children from harm and neglect; and that children of minority and indigenous populations should freely enjoy their own culture, religion, and language, as well as all other rights enshrined in the convention, without discrimination. It also urges the States to respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind irrespective of the child's or his or her parent's or guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.

### **2.9.3. African Charter for the Rights and Welfare of the Child**

The African Charter on the Rights and Welfare of the Child, one of the bodies governed by the Organization of African Unity (OAU), was adopted in 1991. This charter states that States' Parties to the Charter shall undertake to respect and ensure respect for the rules of international humanitarian law applicable in armed conflicts which affect the child. That States' Parties shall take all necessary measures to ensure that no child shall take a direct part in hostilities and refrain in particular, from recruiting any child. Lastly, this Charter urges its members to ensure the protection and care of children who are affected by armed conflicts including children in situations of internal armed conflicts, tension and strife. (Human Rights Watch, 1991)

### **2.9.4. Definition of Terms**

According to UN Convention on Rights of a Child, the following are the definitions of who is a child and who is a child soldier.

### **2.9.5. Who is a Child?**

According to the UN CRC (1989) adopted by the General Assembly, a child is defined as; “every human being below the age of 18 years with an inherent right to life.” The states parties are urged to ensure to the maximum extent possible the survival and development of the child. The African Charter on the Rights and Welfare of the Child defines a child as; “every human being below the age of 18 years.” The two definitions emphasize 18 years as the minimum age for recruitment into armed forces.

### **2.9.6. Who is a Child Soldier?**

Understanding which children in any society become involved in armed conflicts is essential in recognizing that children’s rights are continuously violated. Based on the UN Human Rights Fact Sheet No. 10 (1989) on the CRC, a child soldier is defined as; “any person below the age of 18 years who has been conscripted to fight in an armed conflict by either the national armed forces or an armed opposition group and is participating as a soldier in a respective state.” At what age does a child stop being a child and become something else in time of war? The definition of childhood seems to be problematic for some states or societies around the world. For example, the UN Fact Sheet No.10 on the CRC in 1989, adopted 15 year of age as the lower limit for military service. However, considerable political and legal controversies followed this choice, with the Organization of African Unity (OAU) and Scandinavian countries pushing for age 18, against other countries pushing for the age of 12. One has to understand the historical, social, and political contexts in which a definition of childhood is developed. Differing conceptions of what role children play in the family also shape ideas on when childhood ceases and adulthood begins.

### 3. METHODOLOGY

The methodology used for this study is a survey design. Three categories of organizations, namely UN, NGOs, and Church/Community, participated in the survey. Some government institutions in African countries affected by internal conflicts also participated in the study. These organizations and government institutions were identified through browsing on the website. Out of 30 that were chosen, twenty-four took part in the study. Ten organizations and fourteen government institutions participated. Workers and administrators in these organizations and government institutions were recognized as intended respondents for the study, since they work with issues related to child soldiers directly or indirectly.

In advance of the survey distribution, the respondents were contacted to determine the potential of participating. It was clearly explained to them that the purpose of this study is to conduct a survey to investigate current and emerging challenges in working with child soldiers and in dealing with the problem of child conscription. Ten participants from each organization and government institutions were selected by their supervisors based on their availability to complete the questionnaires. These became the designated respondents for the survey study. The participants each received a six-page questionnaire to complete. A cover letter was attached explaining the purpose of the study. Altogether 300 questionnaires were sent to 30 different organizations and government institutions as requested by the contact persons. According to the original arrangement, the technique that had been agreed upon was “drop-and collect”.

The supervisors were to assign designated people to drop the questionnaires off to the participants. These questionnaires would later be collected and then mailed back. However, this proved difficult in some cases due to time conflict with field workers. Five percent of questionnaires were e-mailed, 12% were faxed, 51% were sent by mail, and 32% were responded to by

phone because the participants experienced problems with the other means of communication.

The study concentrated on workers and administrators in these organizations and institutions. The objective was to analyze their perceptions of what they consider to be the (1) underlying causes of child conscription or “voluntary” recruitment, (2) effects of child conscription on child soldiers, and (3) solutions in terms of intervention programs to prevent or stop child conscription in Africa. Comparisons were made among the responses of the different professions, and between the government institutions and non-government organizations. The purpose of the comparison was to analyze the perceptions of professionals to assess whether the profession, or the nature of the organization or institution, for which they worked influenced the way the participants responded to the questionnaires. A quantitative research method was used because it enabled a large number of professionals to participate in the study. It was possible to contact professionals from different countries and different professional backgrounds.

### **3.1. Research Design.**

Since there have not been many previous studies conducted on the problem of child conscription in Africa, and the studies that had been done have focused mainly on trauma or psychological problems, a decision was made to carry out an exploratory study. This was to highlight themes that kept re-occurring so that they could be topics for future studies. An exploratory study was also preferred because there is little known and not enough empirical study done in this area. An exploratory study therefore, served as a groundbreaking endeavor in order to gather as many themes as possible to help assess the problem from different perspectives.

### **3.2. Sample.**

The organizations and government institutions that participated in this study were selected from websites. There were 14 government institutions from the African countries that participated. They were: Algeria, Angola, Burundi, Congo Brazzaville, Ethiopia, Eritrea, Liberia, Mozambique, Rwanda, Sierra Leone, Somalia, Sudan, The Democratic Republic of Congo, and Uganda. These are countries currently affected by internal armed conflicts. The organizations that participated in the study were: the UN, NGOs, and the Church/Community organizations. The task of ensuring that all practitioners were represented was left to the supervisors who assured the researcher that they would do everything to ensure that the selection of subjects would be representative of all professionals on their staff, whether in the field or doing administrative work. However, all the geographical locations in the continent were represented.

### **3.3. Demographics.**

Part I asked for socio-demographic information about the respondents, such as gender, age, level of education, profession, and number of years in their profession. Altogether there were eight items. For the child soldiers the information requested was the percentage of boys and girls recruited, their age, education, social class, geographical location, and the availability of programs for reintegration and their duration. There were also eight items.

### **3.4. Data Collection.**

The instrument used to collect the data was an unstandardized survey type questionnaire designed for this study, divided into five sections. Since all the respondents were in various countries, it was difficult for the researcher to ensure the validity and reliability of these data. The researcher, therefore, relied on the supervisors to ensure the validity and reliability of the data. The questionnaire asked the respondents to identify factors that cause child conscription, the effects

of participating in armed conflicts for child soldiers, and solutions to prevent or stop recruitment. The questionnaire was divided into five parts.

### **3.5. Underlying Causes.**

Part II investigated respondents' opinions about the problems experienced by child soldiers. Participants rated the importance of problems such as poverty, unemployment, loss of family, political instability, and peer pressure in contributing to child drafting. They used a Likert type scale ranging from 1 (not a factor at all) to 5 (a definite factor). The participants evaluated seventeen causes.

### **3.6. The Effects of Conscription on Child Soldiers.**

Part III explored the respondent's perception of the effects of participation in armed conflicts to the child soldiers. Effects such as physical/psychological, delinquency, HIV/AIDS, malnutrition and mental health issues were also rated on a Likert scale from 1 (not factor at all) to 5 (definite factor). The respondents ranked fourteen effects altogether.

### **3.7. Solutions (Intervention methods).**

Part IV examined participants' perceptions on what services they perceived the least or most important in preventing or stopping child recruitment into armed conflicts. Again participants were asked to rate their responses on a Likert scale from 1 (not important) to 5 (very important). Fourteen solutions were appraised by the respondents.

### **3.8. Professional views.**

Part V of the questionnaire asked participants to provide in their own words, their professional/personal views on the space provided about what they perceived, as the causes of child conscription, the effects on the child soldiers, their families, and communities. They were also asked to indicate what they considered to be the solutions (intervention methods) to the problem of child

recruitment into armed conflicts. The last question asked them to suggest what they personally see as important research study to be done.

### **3.9. Data analysis.**

The following analyses were then conducted on the data:

- (1) Descriptive statistics were produced to describe demographic characteristics of the sample: gender, age, level of education, profession, category of the organization or institution.
- (2) Analysis of participants' overall perceptions of important causes, effects, and solutions. Ranked ratings of the mean importance for each variable are presented (see fig. 1-3).
- (3) Comparison by profession – does a consensus emerge across professions on what is important? Ranked mean ratings of the importance of variables are presented for each profession. One-way ANOVA tests for differential perceptions by profession are performed for each variable. A comparison of percentage in each profession of those who consider causes, effects and solutions as very important, was done.
- (4) Comparisons were made of government and non-government organizations. Respondents' ranked mean ratings of each variable are presented. Independent samples t-tests comparing government and non-government respondents are performed. The percentages were also compared.
- (5) A concluding analysis of the consensus: comparison of unweighted sample mean, weighted sample mean by profession, and weighted sample mean by government and non-government.
- (6) Analysis of two classes of potential solutions: counselling versus other solutions. Paired-sample t-tests are performed to compare the rated mean importance of individual, family, and peer counselling to other solutions including advocacy, empowerment, mobilizing resources for communities, strong international laws/policies, employment opportunities, educational programs, support for families, awareness campaigns, prevention programs, effective reintegration programs, and a steady economy.

## 4. FINDINGS

### **4.1. A Descriptive Analysis of the Sample.**

Out of 30 organizations and government institutions contacted, 24 (80%) responded to the survey study. Ten NGOs and fourteen government institutions participated. The survey was restricted to professionals working either directly or indirectly with child soldiers and to government institutions in Africa that are currently affected by armed conflicts. Appendix (iv) contains detailed demographic information for the sample.

An even breakdown by gender was observed, with 50% of the sample being women (N=104), and 50% men (N=103). A wide range of age categories were sampled (see appendix ii) with the median age category being 31-40. From the sample, 83% were drawn from one of four professions: Medical Doctors (N=37), Social Workers (N=58), Psychologists (N=44), and Sociologists (N=32). Other professions represented (17%) included Nurses, Teachers, Physiotherapists, and the Religious (N=36). Sixty-eight percent of respondents worked for government institutions (N=140), while the remaining 32% worked for the UN (N=21), an NGO (N=34), or a Church/Community Organization (N=12). Please see appendix (iv) for additional details.

### **4.2. Analysis of Overall Sample Views.**

For overall sample views, participants' views were rated on a five point scale of the importance of causes, effects, and solutions as illustrated in Figures 1-3 below.

**4.2.1. Causes.** Figure 1 shows how participants rated the importance of each cause. As may be seen in that figure, poverty, lack of educational resources, lack of community resources, economic hardships, dictates of international funders, corrupt governments, and unemployment were rated most important.

**4.2.2. Effects.** Figure 2 shows participants' ratings for effects. The figure indicates that physical/psychological issues, witnessing atrocities, exposure to violence, malnutrition and health issues were rated as very important consequences after participating in armed conflicts.

**4.2.3. Solutions.** Participants' ratings for solutions are presented in Figure 3. As it is clearly illustrated, educational programs, mobilizing resources for communities, prevention programs, employment and training opportunities, strong international laws/policies, advocacy, empowerment, and support for families are rated as very important solutions to prevent or stop child conscription in Africa.

**4.2.4. Conclusion.** The overall sample views indicates a more collective approach to addressing the problem, instead of focusing only on an individual approach promoted by counselling. See figures 1-3 below for more details.

Figure 1.

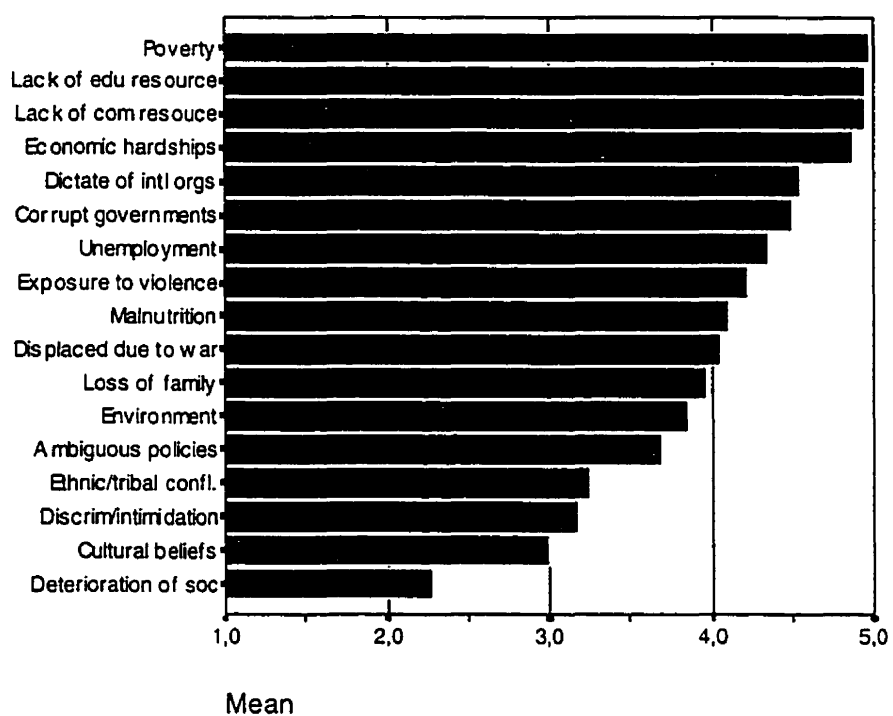
**Overall Rated Importance of Each Cause**

Figure 2.

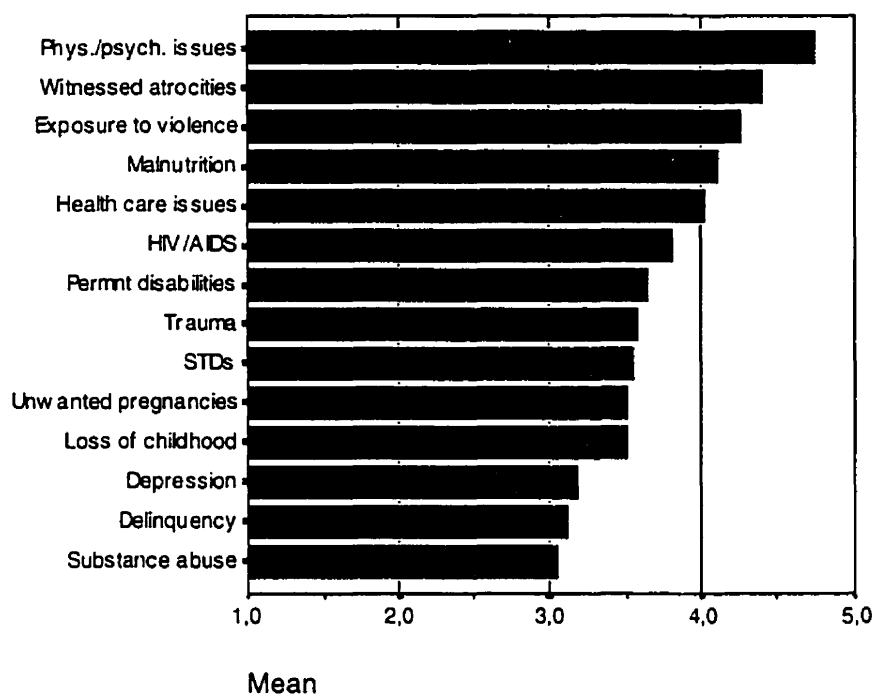
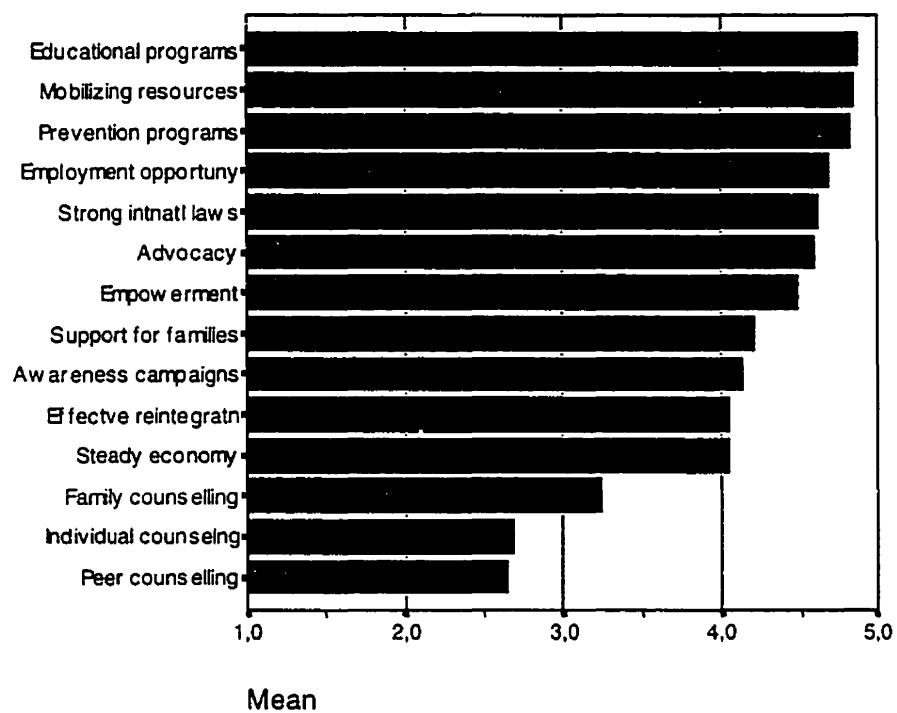
**Overall Rated Importance of Each Effect**

Figure 3.

**Overall Rated Importance of Each Solution**

### **4.3. Analysis of Consensus by Profession.**

Tables 1 and 2 present an analysis of how members of different professions rated each potential cause, effect, and solution. The research question was: "Do members of different professions see similar patterns of causes, effects, and solutions, or do differences emerge?"

**4.3.1. Causes.** As may be seen in Tables 1 and 2, a high percentage of the different professionals rated causes such as poverty, economic hardships, lack of educational resources, and lack of community resources as very important. Disagreements emerged in the case of ambiguous policies or laws, deterioration of societal morals, and discrimination. The conclusion was that a consensus was observed for almost all variables.

**4.3.2. Effects.** The effects rated very important by professionals were; physical/psychological issues, witnessing atrocities, exposure to violence, malnutrition, and health issues. Disagreements emerged for unwanted pregnancies, trauma, depression, delinquency, and substance abuse.

**4.3.3. Solutions.** The following solutions were rated very important: educational programs, mobilizing resources for communities, prevention programs, employment opportunities, strong international laws, support for families, awareness campaigns, and prevention programs. However, counselling whether for individual, family, or peers was not rated as very important.

**4.3.4. Conclusion.** Although differences see similar patterns of causes, effects, and solutions. emerged for some causes, effects, and solutions, overall, members of different professions

**Table 1. Mean Rating of Causes, Effects, and Solutions by Professions  
(Ordered by Mean Rating, Total Sample)**

	Med.	Soc.	Psych	Socio	Other	T'll.Sample
<u>Causes</u>						
Poverty	4.94	5.00	4.97	5.00	4.97	4.98
Lack of educ. resources	4.91	5.00	4.93	4.87	4.94	4.94
Lack of com. resources	4.91	4.98	4.93	4.90	4.94	4.94
Economic hardships	4.86	4.91	4.81	4.93	4.82	4.87
Dictates of int'l funders	4.62*	4.67*	4.31*	4.77*	4.28*	4.53
Corrupt gov'ts	4.54	4.51	4.47	4.56	4.25	4.47
Unemployment	4.32	4.39	4.31	4.34	4.37	4.35
Exposure to violence	4.16	4.24	4.22	4.28	4.14	4.21
Malnutrition	4.27	3.96	4.06	4.06	4.11	4.08
Displacement	4.02	4.05	4.06	3.96	4.08	4.04
Separation/loss	3.91	3.98	3.93	3.87	4.02	3.95
Environ. not conducive	3.78	3.86	3.84	3.78	3.85	3.83
Ambiguous policies/laws	3.64	3.67	3.68	3.78	3.65	3.68
Ethnic/tribal conffs	3.29	3.25	3.27	3.18	3.20	3.24
Discrimination	3.18	3.20	3.29	3.09	3.05	3.17
Cultural beliefs	3.02	3.01	3.00	2.87	3.00	2.99
Deterioration of soc. morals	2.24	2.24	2.27	2.28	2.37	2.27
<u>Effects</u>						
Physical/psych. issues	4.72	4.70	4.75	4.87	4.72	4.74
Witnessed atrocities/death	4.35	4.53	4.40	4.56	4.19	4.42
Exposure to violence	4.29	4.27	4.22	4.50	4.13	4.28
Malnutrition	4.29	4.05	4.11	4.22	3.94	4.11
Health care issues	4.18*	3.93*	3.88*	4.00*	4.22*	4.02.
HIV/AIDS	3.78	3.74	3.72	3.80	4.08	3.81
Permanent disabilities	3.64	3.48	3.54	3.75	4.22	3.64

Trauma	3.62	3.51	3.70	3.43	3.61	3.57
Sexually transmitted diseases	3.48	3.46	3.43	3.74	3.77	3.55
Loss of childhood	4.43	3.45	3.43	3.54	3.77	3.51
Unwanted pregnancies	3.45	3.43	3.45	3.70	3.62	3.51
Depression	3.13*	3.08*	3.15*	3.21*	3.48*	3.19
Delinquency	3.13	2.98	3.15	3.18	3.31	3.13
Substance abuse/addiction	2.91	3.01	3.15	3.06	3.20	3.06
<u>Solutions</u>						
Educational programs	4.89	4.93	4.81	4.93	4.86	4.88
Mobilizing resources for comm.	4.78	4.94	4.81	4.90	4.77	4.85
Prevention programs	4.83	4.86	4.84	4.90	4.77	4.84
Employment opportunities	4.64	4.72	4.63	4.75	4.80	4.70
Strong int'l laws/policies	4.59	4.74	4.65	4.62	4.47	4.63
Advocacy	4.48	4.63	4.63	4.65	4.62	4.61
Empowerment	4.40	4.46	4.54	4.50	4.55	4.49
Support for families	4.10	4.22	4.15	4.34	4.27	4.21
Awareness campaigns	4.16	4.17	4.15	4.18	4.02	4.14
Steady economy	4.05	4.10	4.00	4.09	4.08	4.06
Effective reintegration programs	3.97	4.13	3.97	4.06	4.11	4.05
Family counselling	3.21	3.10	3.29	3.15	3.60	3.25
Individual counselling	2.81	2.48	2.77	2.65	2.80	2.68
Peer counselling	2.75*	2.44*	2.79*	2.53*	2.85*	2.66

Note: Mean ratings of importance for each profession were compared using one-way analyses of variance (ANOVAS). Significant effects are marked with asterisks. No star indicates that the test of differences by profession is not significant, i.e. all professions rated variables identically.

\* p < .05

**Table 2. Comparison of % Rated Very Important by Professionals**

	Med.	Soc.	Psych	Socio	Other	T'tl.Sample
<u>Causes</u>						
Poverty	95	100	98	100	97	98
Lack of com. resources	92	98	93	91	97	95
Lack of educ. resources	92	100	93	88	94	94
Economic hardships	87	91	82	94	85	88
Dictates of int'l funders	76	76	64	84	68	73
Corrupt gov'ts	54	53	50	63	31	51
Unemployment	43	50	43	50	51	48
Exposure to violence	19	30	32	31	22	27
Malnutrition	41	10	16	22	17	20
Displacement	5	9	11	7	8	8
Environ. not conducive	5	12	7	6	8	8
Separation/loss	0	3	7	3	5	4
Ethnic/tribal confls	3	2	2	0	2	2
Ambiguous policies/laws	0	0	0	0	5	2
Deterioration of soc. morals	3	0	0	0	0	1
Discrimination	0	2	0	0	0	1
Cultural beliefs	0	0	0	0	0	0
<u>Effects</u>						
Physical/psych. issues	73	76	75	86	75	77
Witnessed atrocities/death	49	66	55	66	36	55
Exposure to violence	38	36	41	50	25	38
Malnutrition	43	19	34	54	19	29
Health care issues	27	10	7	22	28	19
Permanent disabilities	22	10	7	22	28	17
HIV/AIDS	16	9	11	19	32	16
Sexually transmitted diseases	16	7	7	23	26	14

Unwanted pregnancies	16	5	7	16	14	11
Loss of childhood	5	9	9	7	19	10
Trauma	8	2	16	0	11	7
Depression	3	2	5	3	7	4
Delinquency	0	0	0	5	3	2
Substance abuse/addiction	0	3	2	6	0	2
<u>Solutions</u>						
Educational programs	89	93	82	94	36	89
Mobilizing resources for comm.	78	95	86	91	81	87
Prevention programs	87	86	84	91	78	85
Employment opportunities	65	72	64	75	80	71
Strong int'l laws/policies	62	72	64	75	80	64
Advocacy	48	64	64	66	63	61
Empowerment	41	50	55	59	61	51
Support for families	16	17	18	18	17	25
Awareness campaigns	14	22	21	34	36	17
Steady economy	14	12	9	9	19	13
Effective reintegration programs	0	16	11	6	19	11
Family counselling	8	3	11	3	20	9
Peer counselling	8	0	7	0	6	4
Individual counselling	3	0	11	0	0	3

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#### **4.4. Analysis of Consensus Comparing Government and Non-government Respondents.**

Tables 3 and 4 present a comparison of mean ratings of the importance of each variable and of the percentages of participants who rated each variable as very important. The research question was: “Do participants working in government institutions view the causes, effects, and solutions of child soldiering similarly or differently from participants working in non-government organizations?”

**4.4.1. Causes.** Poverty, lack of educational resources, lack of community resources, economic hardships, dictates of international funders, and corrupt governments were rated very important causes. However, differences were observed on many variables. Government respondents rated poverty, lack of educational resources, lack of community resources, economic hardships, and dictates of international funders higher than the non-government respondents did. Sometimes differences were very drastic, for example, 99% of government respondents rated economic hardships very important whereas only 64% of non-governmental respondents did. For dictates of international funders, 92% of governments considered this cause very important, and only 32 % of the non-government respondents did. However, both government and non-government respondents agreed on the top three causes, i.e. poverty, lack of educational resources, and lack of community resources, as very important causes.

**4.4.2. Effects.** Physical and psychological issues, witnessing atrocities/death, exposure to violence, and malnutrition were perceived as very important effects of participating in child soldiering. Significant differences emerged for physical/psychological issues and witnessing atrocities. 64% of respondents from government institutions perceived witnessing atrocities as very important whereas only 39% of respondents from non-government organizations did.

**4.4.3. Solutions.** There was a very observable contrast on how government and non-government respondents perceived solutions to the problem. Governments perceived educational programs, mobilizing resources for communities, prevention programs, and employment opportunities as very important potential solutions while non-government respondents did not. Here are some examples to demonstrate the contrast: 97% of government respondents perceived mobilizing resources for communities as very important and only 64% of non-government respondents did. Another 81% of government respondents perceived strong international policies/laws as very important, whereas only 30% non-government respondents did.

**4.4.4. Conclusion.** There were differences between government and non-government respondents for many variables. In the case of causes, some variables were rated more important by government respondents than by non-government respondents. For effects, non-governmental respondents rated higher than the government respondents did. For solutions, drastic differences emerged. Government respondents rated some solutions very important compared to the ratings of non-government respondents. In some cases, solutions that were perceived important by the non-government respondents were rated as less important by the government respondents.

**Table 3. Mean Rating of Causes, Effects, and Solutions by Government and NGO**

	NGOs	Gov't.	T'tl.Sample
<u>Causes</u>			
Poverty	4.93*	5.00*	4.98
Lack of educ. resources	4.87*	4.97*	4.94
Lack of com. resources	4.86*	4.97*	4.94
Economic hardships	4.62***	4.99***	4.87
Dictates of int'l funders	3.73***	4.90***	4.53
Corrupt gov'ts	4.10***	4.65***	4.47
Unemployment	4.33	4.36	4.35
Exposure to violence	4.10***	4.26***	4.21
Malnutrition	3.96*	4.13*	4.08
Displacement	4.06	4.03	4.04
Separation/loss	4.04*	3.90*	3.95
Environ. not conducive	3.69*	3.89*	3.83
Ambiguous policies/laws	3.53**	3.75**	3.68
Ethnic/tribal confls	3.16	3.28	3.24
Discrimination	3.00***	3.26***	3.17
Cultural beliefs	2.95	3.00	2.99
Deterioration of soc. morals	2.53***	2.15***	2.27
<u>Effects</u>			
Physical/psych. issues	4.82	4.71	4.74
Witnessed atrocities/death	4.32	4.46	4.42
Exposure to violence	4.26	4.28	4.28
Malnutrition	4.13	4.10	4.11
Health care issues	4.30***	3.90***	4.02
HIV/AIDS	4.13***	3.66***	3.81
Permanent disabilities	4.04***	3.45***	3.64
Trauma	3.85***	3.45***	3.57

Sexually transmitted diseases	3.98***	3.36***	3.55
Loss of childhood	3.95***	3.30***	3.51
Unwanted pregnancies	3.87***	3.35***	3.51
Depression	3.59	3.01	3.19
Delinquency	3.39***	3.01***	3.13
Substance abuse/addiction	3.20*	3.00*	3.06
<u>Solutions</u>			
Educational programs	4.77**	4.94**	4.88
Mobilizing resources for comm.	4.59***	4.97***	4.85
Prevention programs	4.68**	4.92**	4.84
Employment opportunities	4.59*	4.76*	4.70
Strong int'l laws/policies	4.25***	4.81***	4.63
Advocacy	4.51	4.65	4.61
Empowerment	4.41	4.52	4.49
Support for families	4.17	4.23	4.21
Awareness campaigns	4.19	4.12	4.14
Steady economy	3.97*	4.11*	4.06
Effective reintegration programs	4.00	4.08	4.05
Family counselling	3.96***	2.92***	3.25
Individual counselling	3.20***	2.43***	2.68
Peer counselling	3.21***	2.40***	2.66

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Note: Means for government and non-government participants were compared using independent samples t-tests, adjusting the degree of freedom where necessary to account for unequal variance. Significant effects were marked with asterisks.

\* p<.05, \*\* p<.01, \*\*\* p<.001

**Table 4. Comparison of % Rated Very Important by Governments and NGOs**

	NGOs	Gov't.	T'tl. Sample
<u>Causes</u>			
Poverty	94	100	98
Lack of com. resources	88	98	95
Lack of edu. resources	87	97	94
Economic hardships	64	99	88
Dictates of int'l funders	32	92	73
Corrupt gov'ts	17	66	51
Unemployment	42	50	48
Exposure to violence	21	30	27
Malnutrition	12	23	20
Environ. not conducive	5	10	11
Displacement	11	7	8
Separation/loss of family	9	1	4
Ambiguous policies/laws	2	2	2
Ethnic/tribal confls	2	2	2
Discrimination	0	1	1
Deterioration of soc. morals	0	1	1
Cultural beliefs	0	0	0
<u>Effects</u>			
Physical/psych. issues	85	73	76
Witnessed atrocities/death	36	64	55
Exposure to violence	31	41	38
Malnutrition	29	29	29
Health care issues	36	11	19
HIV/AIDS	30	9	16

Permanent disabilities	27	11	16
Sexually transmitted diseases	28	8	14
Unwanted pregnancies	20	6	11
Loss of childhood	18	6	10
Trauma	21	1	7
Depression	9	1	2
Delinquency	3	1	2
Substance abuse/addiction	2	3	2
<u>Solutions</u>			
Educational programs	79	94	89
Mobilizing resources for comm.	64	97	87
Prevention programs	70	92	85
Employment opportunities	59	76	71
Strong int'l laws/policies	30	81	65
Advocacy	52	66	61
Empowerment	46	54	51
Support for families	27	24	25
Awareness campaigns	28	12	17
Steady economy	10	14	13
Effective reintegration programs	13	10	11
Family counselling	27	0	9
Peer counselling	12	0	4
Individual counselling	9	0	3

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#### **4.5. Final Analysis of Consensus.**

Table 5, arranged in a descending order, demonstrates the fact that the results show that almost exactly the same ranking of causes, effects, and solutions is obtained with unweighted sample mean and each weighted mean. This means that the consensus on which causes, effects, and solutions are caused, seems to hold across groups.

**Table 5. Comparison of Unweighted Sample Mean, Weighted Sample by Professions, and Sample Mean Weighted by Governments and NGOs.**

	Unweighted Sample Mean	Weighted Sample Mean by Professions	Weighted Sample Mean by Gov't & NGOs
<u>Causes</u>			
Poverty	4.98	4.97	4.97
Lack of com. resources	4.94	4.94	4.92
Lack of edu. resources	4.94	4.93	4.93
Economic hardships	4.87	4.87	4.81
Dictates of int'l funders	4.53	4.53	4.38
Corrupt gov'ts	4.47	4.47	4.34
Unemployment	4.35	4.35	4.34
Exposure to violence	4.21	4.21	4.18
Malnutrition	4.08	4.09	4.05
Displacement	4.04	4.04	4.04
Separation/loss of family	3.95	3.94	3.97
Environ. not conducive	3.83	3.82	3.79
Ambiguous policies/laws	3.68	3.68	3.64
Ethnic/tribal confls	3.24	3.24	3.22
Discrimination	3.17	3.16	3.13
Cultural beliefs	2.99	2.98	2.98
Deterioration of soc. morals	2.27	2.28	2.33
<u>Effects</u>			
Physical/psych. issues	4.74	4.75	4.76
Witnessed atrocities/death	4.42	4.41	4.39
Exposure to violence	4.28	4.28	4.27
Malnutrition	4.11	4.12	4.12
Health care issues	4.02	4.04	4.09

HIV/AIDS	3.81	3.82	3.89
Permanent disabilities	3.64	3.66	3.74
Trauma	3.57	3.57	3.64
Sexually transmitted diseases	3.55	3.57	3.65
Unwanted pregnancies	3.51	3.53	3.62
Loss of childhood	3.51	3.52	3.60
Depression	3.19	3.21	3.29
Delinquency	3.13	3.15	3.19
Substance abuse/addiction	3.06	3.07	3.10
<b><u>Solutions</u></b>			
Educational programs	4.88	4.88	4.86
Mobilizing resources for comm.	4.85	4.84	4.80
Prevention programs	4.84	4.84	4.79
Employment opportunities	4.70	4.71	4.68
Strong int'l laws/policies	4.63	4.61	4.58
Advocacy	4.61	4.60	4.54
Empowerment	4.49	4.49	4.47
Support for families	4.21	4.22	4.20
Awareness campaigns	4.14	4.14	4.15
Steady economy	4.06	4.06	4.04
Effective reintegration programs	4.05	4.05	4.04
Family counselling	3.25	3.27	3.43
Peer counselling	2.66	2.70	2.81
Individual counselling	2.68	2.67	2.79

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**Note:** The sample mean weighted by professions has been adjusted to equate for unequal *N* in each profession. The sample mean weighted by government vs non-government has been adjusted to equate for unequal *N* from government and non-government sources.

#### **4.6. Comparison of the Average Ratings for Individual, Family, and Peer Counselling to the Average Ratings for Other Solutions**

**4.6.1. Average Rating by Professions.** Figure 4 illustrates a comparison of average ratings by professions for individual, family, and peer counselling to other solutions such as advocacy, empowerment, mobilizing resources for communities, educational programs, employment, strong international laws/policies, support for families, awareness campaigns, prevention programs, reintegration programs, and a steady economy.

##### **4.6.2. Average Rating by Government and Non-Government.**

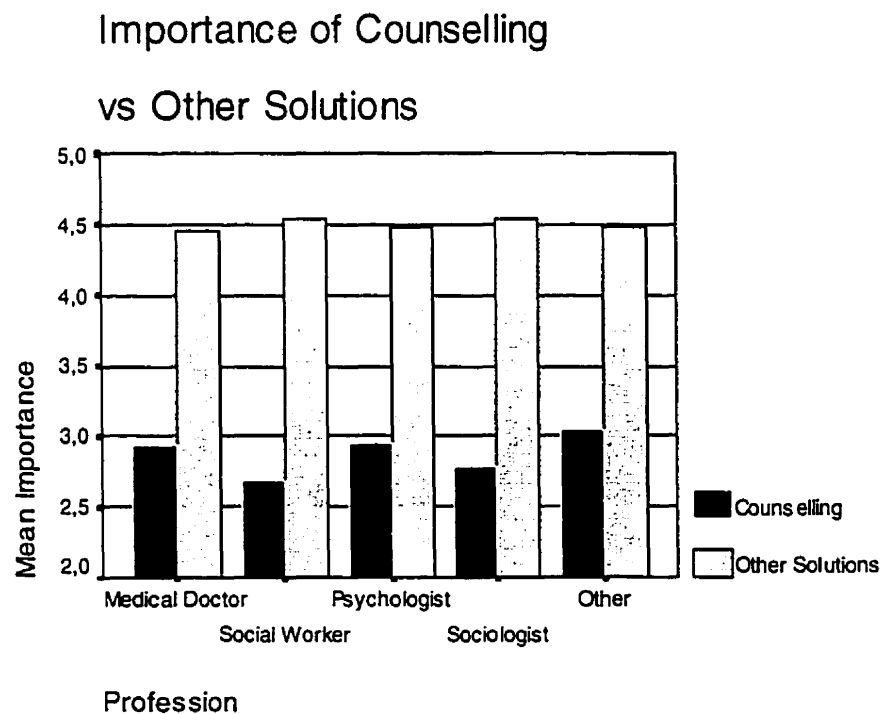
Figure 5 demonstrates a comparison of average ratings by government and non-government respondents again for individual, family, and peer counselling to the average ratings for other solutions as listed in figure 4. In both Figures 4 and 5, the tests indicate that counselling programs are considered significantly less important than other solutions. For details, see Figures 4 and 5 below.

#### 4.6.3. Average Rating by Professions.

Across subjects, counselling programs are perceived as significantly less important than other solutions,  $t_{(206)}=129.21$ ,  $p<.001$ . Counselling programs are considered significantly less important than the other solutions by subjects in each profession.

Figure 4. Shows importance of counselling versus other solutions as rated by professionals. The graph compares the average ratings for individual, family, and peer counselling to average ratings for the other solutions (advocacy, empowerment, mobilizing resources for communities, education, employment, strong international laws/policies, support for families, awareness campaigns, prevention programs effective reintegration programs, and a steady economy). In each profession, the difference is significant: Doctors,  $t(36)=11.01$ ,  $p<.00$ , Social Workers,  $t(57)=-23.36$ ,  $p<.001$ , Psychology,  $t(43)=10.29$ ,  $p<.001$ . Sociologists,  $t(30)=-113.59$ , and other professionals,  $t(35)=-10.13$ ,  $p<.001$ .

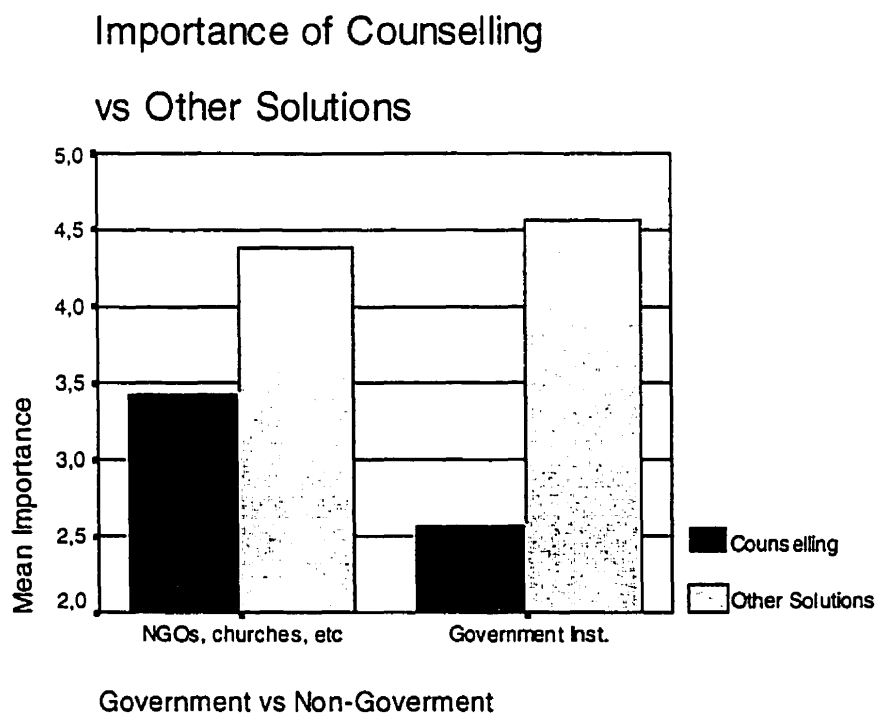
Figure 4.



#### 4.6.4. Average Rating by Government and Non-government Respondents.

In addition, counselling versus other solutions was analyzed for government and non-governments. The comparison is illustrated in figure 5. Again, the graph compares average ratings for individual, family, and peer counselling to the average ratings for other solutions as listed in figure 4. For both government and non-government,  $t(139)=-44.75$ ,  $p<.001$ , and non-government organizations,  $t(66)=09.02$ ,  $p<.001$ , paired t-tests revealed that counselling programs are considered significantly less important than other solutions.

Figure 5.



#### **4.7. Themes from the Data Analysis**

Throughout the discussion in this study, the main themes that have recurred are: poverty, economic hardship, lack of educational resources, lack of community resources, and the need to strengthen international laws. The implications are that these factors are major contributors to the problem of child conscription. There is a general consensus observed among professions and government and non-government organizations for causes, effects, and solutions. Most variables were rated identically by professionals such as; doctors, social workers, psychologists, sociologists, and others.

However, some differences were also observed in the ratings of government respondents and non-government respondents.

1. Some causes were perceived as more important by government respondents than by non-government respondents.
2. For effects, both professions and government and non-government respondents rated equally, or where differences emerged in each case, non-government respondents rated effects more important than the government respondents did.
3. In the case of solutions, there were consensus and differences among the way professions and government and non-government respondents rated the solutions. Sometimes the differences were drastic. For example, non-governments participants rated counselling as much more important than the government participants did.

However, it is important not to overstate the differences. Although some significant differences were observed, the order of the most important to least important causes, effects, and solutions, is very similar for government and non-governments. Thus, some consensus does exist. Professionals from different disciplines surveyed in the study as well as some of the researchers cited in the literature, have implied that there are serious consequences that may be experienced later on, if this problem is not assessed thoroughly. These professionals have voiced a concern that there is an urgent need to start re-assessing the problem of child conscription in Africa from both macro and micro

perspectives.

Practitioners have also argued that there is ample information to indicate that the problem has not been assessed from the macro perspective. Information from this study also reveals that using the medical model alone to address the problem will not prevent or stop children from being drafted into armed conflicts. Issues such as poverty, economic hardships, lack of resources in communities, lack of educational resources, unemployment, and weak international laws, they reiterate, cannot be addressed using mainly a medical model. More practical solutions need to be initiated. If not the problem will continue to manifest itself.

## **5. DISCUSSION**

### **5.1. Summary of Key Findings**

Three main findings emerged from the study. They are arranged according to three themes namely: 1) the need for intervention at the macro level (causes), 2) the need to continue intervention at the micro level (effects), and 3) the need to initiate more appropriate and effective intervention models (solutions).

### **5.2. Macro Level**

In the literature review, the authors cited clearly explained that armed conflicts occur in already impoverished and marginalized areas. This was directly related to the economic, political, and social conditions, which defined circumstances in these rural areas. It was also highlighted that a lack of adequate resources in these communities contributed to the vulnerability of the children in these areas. Results from this study suggest that the prevalence and the degree of poverty indicate that it is one of the main causes of child conscription in Africa.

This has also been highlighted in the study in figure 1 providing an overall mean summary of causes, and by other figures and tables. This implies that there is an urgent need to confront the problem from a macro perspective. Again as indicated in figure 1, most of the causes implied are better addressed from the macro perspective. Causes such as poverty, economic hardships, lack of resources and unemployment can best be addressed at the macro level.

### **5.3. Micro Level**

In the literature review it was stressed that child soldiers experience physical and psychological abuse from their recruiters. As shown in figure 2 effects such as physical/psychological issues, witnessing atrocities, health care issues, malnutrition, and exposure to violence were rated very high. This implies that some issues need to be addressed at the micro level involving the child soldiers, their families, and communities. This may require putting resources

into families and communities to address effects such as malnutrition, healthcare, and counselling.

#### **5.4. Initiation of more Intervention Models**

Again in the literature, it was emphasized that the medical model alone cannot be used as the model to address the problem. Figure 3, which indicates the overall summary of the rated importance of each solution, reveals that to prevent or stop the problem of child conscription, adequate programs and services need to be initiated and constantly evaluated.

In figure 3, solutions such as advocacy, empowerment, mobilizing resources, strong international laws, employment, educational programs support for families, awareness programs, prevention programs, effective reintegration programs, and a steady economy, were all rated as very important. These results confirmed what was stressed in the literature review, that the problems experienced by child soldiers are multifaceted and thus, require diverse programs and services to meet their needs.

When the importance of counselling versus other solutions, was rated by professionals and by government and non-government institutions, as shown in figures 4 and 5, in both cases the t-tests revealed that counselling was considered significantly less important than other solutions by professionals and both non-government and government institutions. This result again reinforced what was reported in the literature that counselling alone cannot address the problem of poverty and other causes.

Although this general analysis may not be valid when the data is examined at a more precise level, there are, however, certain issues that do warrant attention. The most notable ones are: lack of better education programs, lack of community resources, economic hardships, dictates from international funders such as International Monetary Fund (IMF) or World Bank, and unemployment. All of these issues need to be addressed from the macro perspective and not primarily through counselling or therapy.

Nearly all the professionals in the study, no matter what professional background they belong to, generally agree that poverty is the main cause of child conscription or of children “voluntarily” enlisting themselves into armed conflicts in Africa. Even professionals such as psychologists or medical doctors who would usually recommend counselling as one of the effective methods of intervention, do agree that the problem of drafting children into conflicts can not be addressed principally through the medical model. This was clearly illustrated in figures 3 and 4 where average ratings for individual, family, and peer counselling were compared to other solutions. Both figures revealed that counselling is considered significantly less important than the other solutions.

The data also suggests that international laws should be stiffened so that governments and especially opposition groups that are not affected by the current laws, may not take advantage of children or marginalized or displaced people in rural communities. Currently the international laws do not affect opposing warring groups or make them accountable in any way. As a result, they are getting away with very serious crimes and taking advantage of the fact that no embargoes can be imposed on them. This study’s findings show that international laws should be hardened in order to make all warring parties accountable for all the destruction and atrocities they commit.

The data also shows that physical and psychological abuse of children is a very important issue that should be looked into. Other issues of concern are: exposure to violence, malnutrition, witnessing atrocities, and health problems. This is as a result of abuses child soldiers experience after recruitment. The data has confirmed what is in the existing literature that children conscripted into armed conflicts experience physical and psychological disabilities. This fact is demonstrated in figure 3 where respondents rated physical/psychological abuse, witnessing atrocities, exposure to violence, and malnutrition as very important effects on child soldiers.

Results from the present study also suggest that in order to prevent or stop conscription of children into armed conflicts, a lot needs to be done in terms of providing better educational programs, mobilizing more resources for

communities especially rural communities where there may be little or none at all. The study also discloses the fact that better preventative programs ought to be planned and employment or training programs should also be focused on.

This study, however, found that although counselling or therapy is the primary intervention method in use, professionals from all disciplines rated it as being significantly less important as a means of preventing or stopping child conscription into armed conflicts. The observed low rating ( $p < .001$ ) could be attributed to the fact that the problem has continued to prevail despite a lot of funding and attention allotted to the medical model. The extent to which the medical model has successfully achieved some of its goals remains debatable. There has been no documented literature providing information on any evaluation of the counselling or therapy programs being provided.

### **5.5. Limitations of the Study**

Although this study attempted to determine the causes, effects, and solutions to child conscription in Africa, its methodological limitations preclude reaching conclusive results. First, there have not been adequate empirical research studies done on this problem. Most of the literature obtained contains generalized views either written by individuals or collectively as organizations or institutions.

Secondly, the research design did not include data gathered from the child soldiers themselves, as no interviews were conducted due to time constraint. There were also no other options available for the researcher in terms of comparing data collected on this topic and other previous studies since it is a new area of study. The only option that was available for the researcher was to compare the findings of the present study with what is available from the current data in the literature. Most of this data was pulled out from websites and from a few books that have been published that are directly, or indirectly, related to the problem of child soldiers.

Since the only data available as a basis of comparison was from the literature review, this limited further analysis that probably would have counteracted the revelation that poverty, lack of educational programs, lack of resources for communities, economic hardships, unemployment, and dictates from international funding organizations were very important factors that caused child conscription in Africa, as perceived by professionals from various disciplines, and from various organizations and government institutions. Due to time constraints, the researcher was unable to translate the questionnaire into languages other than English. The only professionals who participated were those who were able read and write in English. The fact that it was only those who read and write in English who participated, tended to limit the diversity of responses.

Many supervisors did not respond on time to indicate whether their organizations would be able to participate in the survey. It was therefore difficult for the researcher to anticipate which organizations, or countries, would take part in the study. Lastly, the only African governments chosen for study were those affected by armed conflict. There were no responses from other countries that are not affected by conflicts at present. This in itself made it difficult to generalize the findings to include even those other countries that currently are not experiencing internal conflicts. Communication also proved difficult with some African countries. It was very difficult to establish contact with some African governments and institutions.

#### **5.6. Implications for Future Research**

Without systematic developed research knowledge especially related to cultural issues, efforts to protect child soldiers from conscription may have effects that perhaps will have great impact on society later on. Research knowledge is necessary to guide public policy concerning strategies to decrease the effects of war on child soldiers. External researchers should work closely with local professionals because they are responsible for distributing resources, and

determining access to those resources. Their involvement is critical because their exclusion may make it impossible to conduct research.

When research is developed with community support and involvement, it will receive community support in the form of research space and access to critical information or sites in which to conduct research. Such assistance will often make the difference between a highly successful research study and a research idea that never got off the ground. Also necessary is the training of local professionals in collecting data. Utilizing local power can result in gathering substantial data that will assist in the shaping of intervention processes.

Future research studies should be conducted in consultation and active collaboration with local professionals, communities, and the child soldiers so as to plan strategies that meet the needs of the child soldiers and their communities. The child soldiers, their families, and communities should also be involved right from the beginning in assessing, prioritizing and implementing programs and services based on their beliefs and values to alleviate or stop their problems and enhance their living conditions.

Service providers, communities and society at large need to be sensitized to the problems and underlying causes that affect child soldiers. The external experts should work together with families, communities, and the society at large in addressing the causes of child conscription and voluntary recruitment. Researchers should consult local professionals, leaders, healers and the local people to gather data about their views regarding the problem and coping methods. Such data will provide vital information, which can be used to develop appropriate policies, and programs that meet the needs of the people.

Another factor this study has revealed is the need for the social researchers to be culturally sensitive. There are differences in the interpretation of what is considered to be trauma-related problems and the type of programs and services for support. This illustrates that different cultures or societies interpret problems differently. Lack of cultural sensitivity can result in research studies that either misinform or pathologize the victims.

Although current policies promote counselling as a priority, results from this study revealed that professionals from various organizations and institutions working with child soldiers consider counselling less significant. The researchers, therefore, need to involve all the key players in their studies. It is clear that policy recommendations based on sound research methodology that is sensitive to local cultures is more responsive to, and cost effective, than those which are rapidly constructed in response to a particular emergency. However such action usually requires a collaborative research study with local professionals in order to adapt studies to meet the needs of child soldiers. Researchers also need to be aware that research studies in war zones are highly politicized.

### **5.7. Implications for Social Policy Practice**

Progress toward social justice requires direct involvement in the formation and modification of social policies. This study has revealed that current social policies do not directly address the problem of child conscription in Africa. Professionals (participants) in the field have expressed their frustrations with the current policies. In the last part of the questionnaire (section five), professionals were asked to provide their views based on their experiences working with child soldiers. Many of the respondents expressed their frustration with the current policies. The following are some of the quotes cited from their feedback:

“The current policies are reinforcing recruitment of more children into armed conflicts than preventing or stopping it. More children are being drafted each day because of these kind of policies.”

“These policies are to the advantage of experts who are paid big money while child soldiers continue to suffer”

“More ineffective social policies like the ones today, means more child soldiers drafted each moment, each hour, and each day.”

These excerpts imply that the policies do not address the issues of child soldiers directly. This also implies that if the current policies are not revised, there are going to be many children recruited into armed conflicts now and in the future.

For a long time, decision-makers that have been defining the contexts within which social workers practice their profession, have tended to have backgrounds in other professional fields. Social workers that participated in this study have also expressed their frustration at the fact that current policies reduce them to aid workers whose responsibility is only to distribute relief aid to affected areas. "We do not get the opportunity to assess the problem from the client point of view. Instead, we find ourselves coercing our clients." This in itself has raised numerous problems for social workers as in the end they are required to exercise social work within purposes and regulations that are not informed by and often not consistent with the goals and values of social work practice (Figueira-McDonough, 1993).

Participants also disclosed the fact that policy decisions are predominantly made from the top down without input from the ground up. The absence of feedback from field workers on social policy practice is damaging to the clients whose needs they are addressing. Lack of input from the professionals in the field contributes to the development of social policies that do not meet the needs of the targeted population. An example to demonstrate this frustration is the use of the medical model as the main intervention method which both professionals and governments and non-government respondents rated as less significant in addressing the problem of child conscription.

Social workers who participated in the study also pointed out that lack of information and training in policy practice leaves them uncertain about their expertise. As a result, they easily get paralyzed by the common misconception that social policies are dictated by international economic imperatives that cannot be altered. Some social workers expressed that, "most of the time they feel their hands are tied because they are unable to interpret the kind of policies developed to address the issues of child soldiers.

This therefore implies that the social work profession needs to put an emphasis on policy practice training in schools of social work to respond to the long exclusion from policy making and management. This will enable social work professionals to deal with social problems such as child conscription.

Otherwise social workers will not be able to respond to a process by which attention is deflected from structural developments and so create greater inequality in the distribution of resources (Jansson 1990). The commitment of workers should be to act as advocates for the interests of deprived people such as child soldiers as indicated in the study. Their concern should be to support policies that promote the social rights of poor people and oppose any policies that further restrict those rights.

In order to prevent or stop child conscription, policy making should be a bottom to top approach whereby the child soldiers, communities, professionals working in the field and other parties involved participate actively. The information they provide is crucial to the development of policies that will reflect needs of child soldiers and their communities. This kind of approach also promotes cooperation among different parties. Social policies and legal factors have worked against child soldiers, as discussed earlier. The lack of strong and precise international laws as indicated in this study points up to a serious deficit. The dangerous circumstances faced by child soldiers in war zones point to an urgent need to develop social policies to prevent or stop conscription. Involvement of social work practice in social policy is important for ensuring accountability in the area of social policy implementation and in guiding program reform.

### **5.8. Implications for Social Work Practice**

The different sub-topics discussed above leave social work agencies and organizations, local or international, with many roles to undertake. Social workers will need to work in collaboration with policy makers, local and national governments, local and international organizations, communities, families, and with child soldiers themselves. Prevention strategies should basically be the principal objectives. However, being quick to realize that we do not live in an ideal world is helpful for practitioners and advocates in developing sufficient flexibility as they embark on the mission of the protection of the child soldiers' rights. Western experts have also been reported to have categorized ex-child

soldiers as patients . This at times, has caused resentment as ex-combatants do not view themselves that way.

Practitioners need to be aware that Africans do not ask for psychological help because mental and emotional issues are typically low priorities after any violent encounter. Mental health intervention may be regarded as stigmatization and superficial. Experts also need to recognize the complexity of the children's experiences. They should be willing to try non-traditional approaches derived from a particular culture. Practitioners utilize community collective healing processes which often take the form of rituals, prayer, meditation, and cultural activities. A focus on traditional spiritual healing sometimes is more relevant to many communities than western psychotherapy interventions.

They should also be ready to try other intervention methods based on the children's input and resources. If parents are not included as part of the solution, they will in turn become part of the problem. Experts ought to recognize that they need to collaborate with the parents of the ex-combatants if they are still alive. Family structure in a particular culture must be understood in order to develop a rapport with the family and avoid cultural resistance. Above all, prevention strategies will need to reflect the many and complex ways in which child soldiers come to participate in hostilities. The macro issues of the conflict have to be addressed, as well as the more subjective factors personal to the children and their families and communities.

These are long-term multifaceted undertakings, with implications far broader in scope than that of merely inhibiting recruitment. Reducing the participation of children in armed conflicts will require working with various bodies, and this may be a short or long-term process. Social work practice is required to address issues related to forced recruitment and volunteerism. To plan strategies that attempt to break the pattern of forced recruitment by government forces and other parties will require working with legal systems in order to take action on behalf of the children who have been illegally or arbitrarily conscripted. Social workers will have to be aware that no single profession alone

can address the multiple needs of child soldiers and their families. Collaboration is required in order to fulfill more goals (Apfel and Simon 1996).

While intervention is intended to minimize voluntary participation, it will require targeting structural problems and should involve those who directly attempt to change perceptions of the value of participation held by the children and members of their families and communities. This would require working with both local and international communities. International strategies will require the use of international donor pressure, informing the international community about the relationship between the participation of children and the root causes of conflict.

There is a need for material and emotional support for the extended family and community, which serve as a support system for the children. The extended family and community can either lessen or aggravate a child's ability to cope with stressful events. How adults respond to children's questions about macro social, economic or justice issues, often determines how the child will cope or respond to pressure to enlist. It would also require identifying alternative outlets for the emotions that drive children to volunteer.

An example would be the strengthening of children's feelings of empowerment and security by instilling feelings of competence, security, and strength so they can effect change without a gun. Social work's two priorities involve: (1) primary involvement in facilitating access by deprived populations to basic social goods such as health care, food, shelter, income, education, and work, and (2) a commitment to clients' self-determination based on the shared belief of human dignity. These two goals are what define the uniqueness of the social work profession (Wakefield 1998).

Again, based on this study, social workers that participated were among those that rated poverty, economic hardships, lack of resources, dictates from international funders and unemployment as the major causes of child conscription. Social action is therefore crucial in helping deprived groups or communities set part of a social policy agenda. As indicated in the literature review, child soldiers come from most marginalized segments of society.

Because of the changing conditions affecting child soldiers, practice must also change. Social workers need to identify and keep abreast with issues affecting child soldiers if they are going to assume innovative and influential roles in the promotion of social justice.

Again, from the community perspective, social work practice will need to realize the importance of community collective grassroots' organizations around issues of immediate concern. This would involve petitions, organizing mass protests, legal routes, community-based education to promote awareness and providing legal assistance to families or individuals to obtain release from military service. These, and other pressure tactics applied, may impede the recruitment of children and then serve as a springboard for addressing larger macro issues such as militarism in society, discrimination, impoverishment and marginalization.

Negative media publicity can also be used to pressure armed groups to conform to international norms. In Africa, a strong spiritual continent, the use of religious groups, local community leaders, and opposition leaders can formulate an appeal based on a moral agenda that reflects local values, customs and practice that will be used to pressure armed groups who rely on local civilian populations for support.

Foreign aid donors including those who provide support to armed groups, financial lending institutions, and international donor aid agencies have the highest likelihood of pressuring their clients not to recruit children. They are better placed to promote structural reform by making aid conditional on government respect for fundamental human rights. These bodies can also pressure governments to stop their total war approach and finally to address the roots of the insurgency problem, and consequently that of child combatants. Social work practice will also be required to work toward encouraging the demobilization and reintegration of child soldiers.

Again, structural or macro issues are of central importance at the demobilization and reintegration stages. Improving socio-economic conditions will often be a factor in persuading child soldiers to demobilize. As stated

earlier, a majority of child soldiers are from rural areas where there are no jobs, no infrastructure, and no food.

Demobilizing these children without improved conditions and services will leave them stranded in the capital cities without families or community for support. Family tracing programs, provision of care for the homeless and orphaned, and physical and psychological rehabilitation might facilitate demobilization. Practitioners and advocates are expected to wear different hats such as: activists, advocates, educators, mediators, negotiators, brokers and many others as circumstances dictate.

Social workers with other professionals should, from time to time, re-evaluate their intervention methods and be able to assess the effectiveness of their interventions. They should also be able to clarify their understanding of the population for which interventions are provided. This kind of information can be used to inform the policy makers on how to develop policies that are tailored towards meeting the needs of child soldiers.

### **5.9. Conclusion**

As revealed from this study and the existing literature, factors or causes such as poverty, economic hardships, lack of good educational resources, lack of adequate resources for communities, unemployment, and dictates from international organizations such as the International Monetary Fund (IMF) and the World Bank, all continue to cripple Africa as a continent. My contention is that little effort has been made to improve socio-economic conditions of families, communities and child soldiers in order to prevent or stop conscription. I have argued that very often these children join armed conflicts to reverse an impoverished lifestyle, educational disadvantages, to defend their families and communities, to seek revenge, and to make a living from the worst options.

More resources should be invested in the educational system and the communities themselves. Employment and training opportunities should also be provided to child soldiers and their families and especially those in rural areas. The problem of child conscription should be addressed more from the macro level

and better plans be made for more efficient preventative programs. Policy makers and practitioners alike, need to be aware that the problem of child soldiers is another kind of a time bomb that will eventually explode one day and affect the whole world in different ways. Professionals also need to recognize the weaknesses of some of the intervention methods by ensuring that programs and services are evaluated constantly.

International laws should be stiffened in order to make all the warring parties accountable for the destruction and atrocities which they commit. Appropriate sanctions should be imposed on governments that promote the recruitment of children to fight in armed conflicts, and especially the sale of weapons. Laws should also be drafted to make the opposition armed groups accountable for their atrocious deeds. Current international laws, as pointed out in the literature cited in this study, are not clearly defined. This makes it possible for armed opposition groups to get away with the crimes they commit. Commitment to helping child soldiers inevitably means a commitment to change the conditions that permit child conscription to continue.

It is also important to stop viewing African child soldiers simply as victims, because this may result in the concealing of underlying political, economic, and social causes that contribute to the violation of their rights. Viewing child soldiers as passive victims will result in significant numbers of African children ending up trapped in armed conflicts.

## APPENDICES

**Appendix i**

June 13, 1999

Dear Participants

I am a graduate student at McGill University conducting a preliminary study on the topic "Child soldiers." My interest is to explore current and emerging challenges experienced by professionals/workers, researchers and administrators on the problem of child conscription in armed conflicts. The study is in preparation for further research on the same topic in the near future. I would be very grateful if you could complete the attached questionnaire and return it by September 15, 1999 to enable me complete this exploratory study by the end of September 1999.

The information that you provide will be kept confidential. No individuals or agencies, or organizations will be named in the study. Where necessary, fictitious names will be used instead.

I would appreciate your comments or any further information you can provide that will make a contribution to this study. If you should have any questions or comments or need further clarification, please contact me at:

E-mail: [catuko@po-box.mcgill.ca](mailto:catuko@po-box.mcgill.ca)

Phone: (514) 845 – 3607

Mailing address

Christine Atukoit-Malinga  
3620 Lorne Crescent, Apt. 611  
Montreal, PQ  
H2X 2B1  
Canada

OR

Fax: c/o Prof. Eric Shragge (514) 398 – 4760

I look forward to your support on this matter and I hope to hear from you soon.

Yours truly,

Christine G. Atukoit-Malinga

## **Appendix ii**

### **Research Questions**

Since this study was an exploratory in nature, three general questions were asked. The purpose was to examine the professionals' perceptions of what they considered to be the causes, effects, and solutions to stopping or preventing child conscription. The following questions were asked:

1. What are the causes of child conscription in Africa?
2. What are the effects of recruitment on the child soldiers, their families, and communities?
3. What are the proposed solutions to prevent or stop child conscription?

### Appendix iii

## QUESTIONNAIRE FOR PROFESSIONALS IN ORGANIZATIONS AND INSTITUTIONS ADDRESSING ISSUES RELATED CHILD SOLDIERS

### Part I: Socio-demographic

(Please circle your appropriate response to the following questions):

1. What is your gender? (a) Female  
(b) Male
2. What is your age? (a) 18 – 30 (d) 51 – 60  
(b) 31 – 40 (e) 60+  
(c) 41 – 50
3. What is your level of education (a) high school (d) post-graduate studies  
(b) college diploma (e) Other (please specify) \_\_\_\_\_  
(c) university degree
4. What is your profession? (a) medical doctor (d) sociologist  
(b) social worker (e) other (please specify) \_\_\_\_\_  
(c) psychologist
5. Which category does your agency fall into? (a) Non Governmental Organization (NGO)  
(b) Church  
(c) Community Organization  
(d) Government Agency/Institution  
(e) Other (please specify) \_\_\_\_\_
6. Does your organization or agency currently deal in any way with issues related to child soldier?  
Please check. Yes \_\_\_\_ No \_\_\_\_ If yes please select the types of roles that apply.  
(a) advocacy/lobbying  
(b) counselling/therapy  
(c) community organizing/education  
(d) financial/donations  
(e) other (please specify) \_\_\_\_\_
7. How many years has your organization or agency been working on child soldiers' issues?  
(a) 1 – 5  
(b) 6 – 10  
(c) 11 – 15  
(d) 16 – 20  
(e) 21+

## Part II: Underlying causes

Using the scale provided below, please rank your estimate by circling, what in your opinion are the underlying causes of child recruitment.

**1(not a factor) to 5 (a definite factor)**

<b>Underlying Causes</b>	<b>Not a Factor</b>	<b>Weak factor</b>	<b>Possible factor</b>	<b>Contributing factor</b>	<b>Definite factor</b>
• Poverty	1	2	3	4	5
• Economic hardships	1	2	3	4	5
• Corrupt governments	1	2	3	4	5
• Lack of educational resources	1	2	3	4	5
• Lack of community resources	1	2	3	4	5
• Ethnic/tribal conflicts	1	2	3	4	5
• Separation/loss of family	1	2	3	4	5
• Displacement as a result of war	1	2	3	4	5
• Cultural beliefs	1	2	3	4	5
• Deterioration of societal morals	1	2	3	4	5
• Unemployment	1	2	3	4	5
• Ambiguous policies/laws	1	2	3	4	5
• Discrimination/intimidation	1	2	3	4	5
• Malnutrition	1	2	3	4	5
• Environment not conducive to special needs of children	1	2	3	4	5
• Dictates of international funders	1	2	3	4	5
• Exposure to violence	1	2	3	4	5

### Part III: Effects of conscription on child soldiers

Please indicate by circling what you think are the effects of recruitment on child soldiers.

1(not a factor) to 5 (a definite factor)

		Not a	Weak	Possible	Contributing	Definite
	Effects	Factor	factor	factor	factor	factor
•	Physical/psychological issues	1	2	3	4	5
•	Substance abuse/addiction	1	2	3	4	5
•	Delinquency	1	2	3	4	5
•	Depression	1	2	3	4	5
•	Permanent disabilities	1	2	3	4	5
•	Health care issues	1	2	3	4	5
•	Loss of childhood	1	2	3	4	5
•	Trauma	1	2	3	4	5
•	HIV/AIDS	1	2	3	4	5
•	Sexual transmitted diseases	1	2	3	4	5
•	Unwanted pregnancies	1	2	3	4	5
•	Witness atrocities/death	1	2	3	4	5
•	Malnutrition	1	2	3	4	5
•	Exposure to violence	1	2	3	4	5

## Part IV: Solutions

Using the scale provided below, please indicate how important you feel the following services are in preventing or stopping child recruitment.

**0=Not important and 5=very important**

	<b>Not important</b>	<b>Least important</b>	<b>Reasonably important</b>	<b>Important</b>	<b>Very important</b>
• Advocacy	1	2	3	4	5
• Empowerment	1	2	3	4	5
• Individual counselling	1	2	3	4	5
• Family counselling	1	2	3	4	5
• Peer counselling	1	2	3	4	5
• Mobilizing resources for communities	1	2	3	4	5
• Strong international laws and policies	1	2	3	4	5
• Employment opportunities/training	1	2	3	4	5
• Educational programs	1	2	3	4	5
• Support for families	1	2	3	4	5
• Awareness campaigns	1	2	3	4	5
• Prevention programs	1	2	3	4	5
• Effective reintegration programs	1	2	3	4	5
• Steady economy	1	2	3	4	5



1. What do you think are the major causes of child recruitment to armed conflicts?
2. What do you think are the effects of recruitment on child soldiers, families, and communities?
3. What would you say are the solutions to child recruitment to armed conflicts?
4. What research study do you personally see as important?

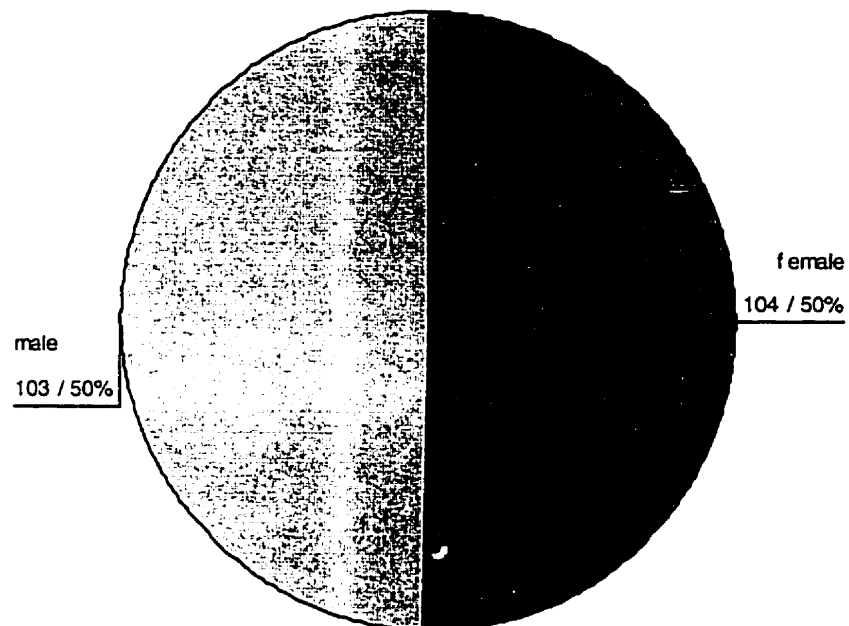
## Appendix iv

## Demographics of Sample

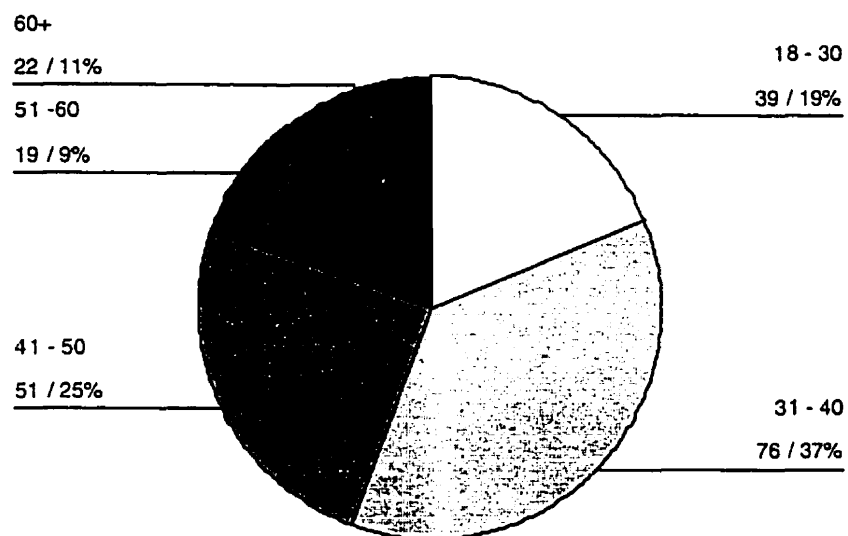
**Description of sample**

	N	%
	207	
Gender		
Female	104	50
Male	103	50
Age		
18-30	39	19
31-40	76	37
41-50	51	25
51-60	19	9
60+	22	11
Profession		
Medical Doctor	37	18
Social Worker	58	28
Psychologist	44	21
Sociologist	32	15
Other	36	17
Organization/Institution		
Ngo	34	16
UN	21	10
Church/Community	12	6
Government	140	68

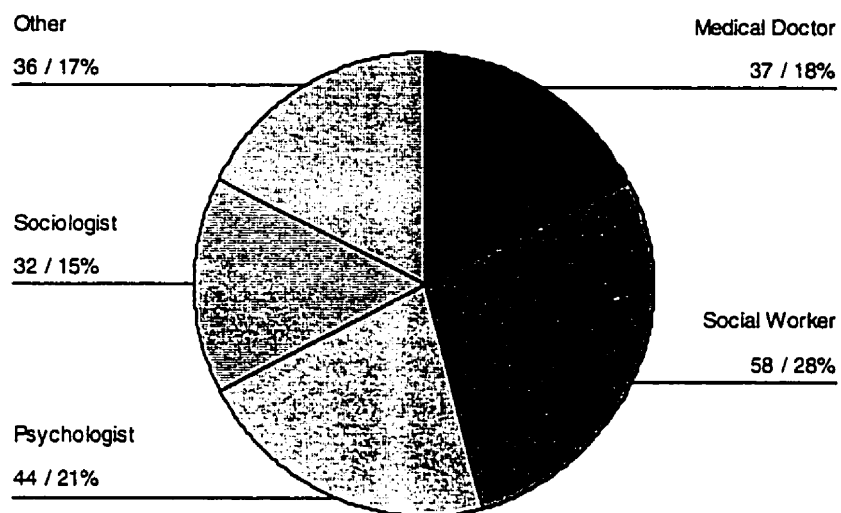
## Gender Breakdown of Subjects



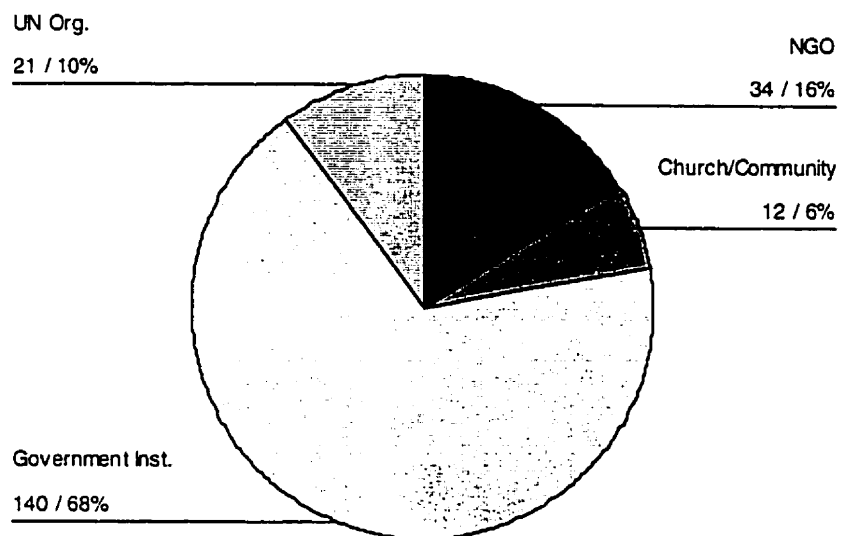
## Age of Subjects



## Profession of Subjects



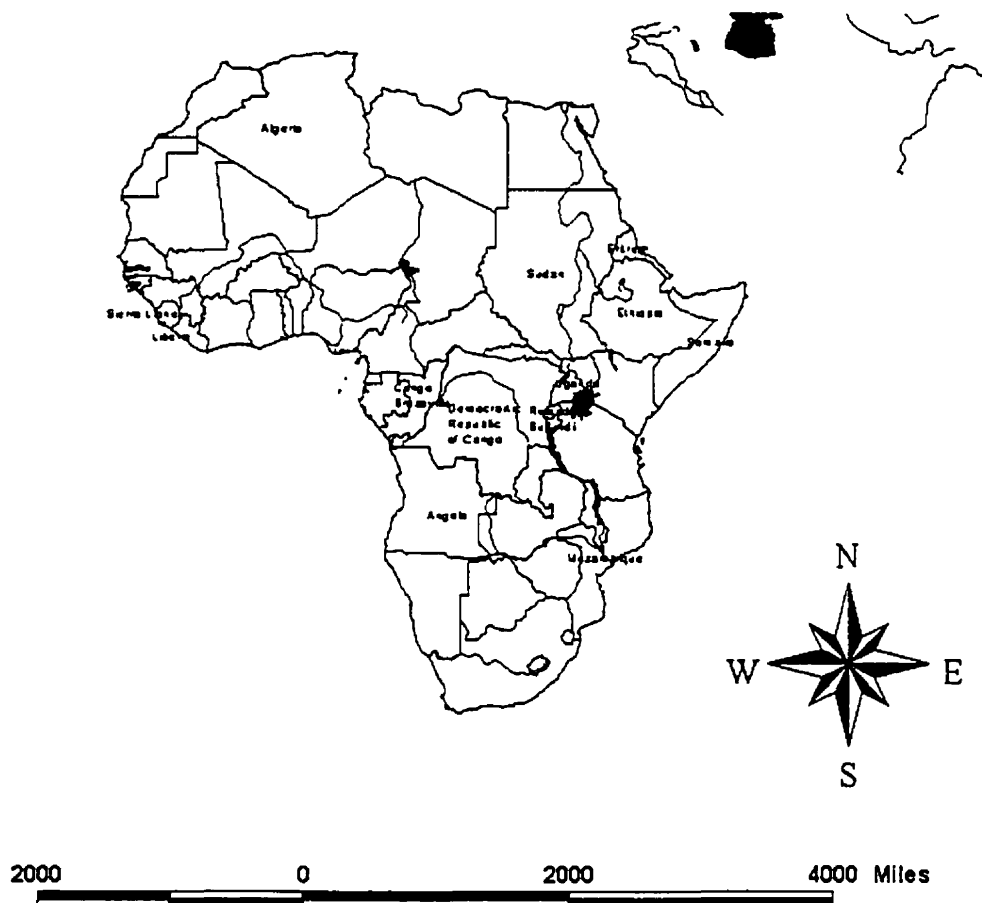
## Origin of Subjects



**Appendix v****COUNTRIES IN THE AFRICAN CONTINENT  
AFFECTED BY CONFLICTS**

1. Algeria
2. Angola
3. Burundi
4. Congo Brazzaville
5. Eritrea
6. Ethiopia
7. Liberia
8. Mozambique
9. Republic of Congo
10. Rwanda
11. Sierra Leone
12. Somalia
13. Sudan
14. Uganda

## Map of Africa Showing Countries in Internal Armed Conflicts



## **Appendix vii**

### **THE SOURCES WHERE PICTURES OF CHILD SOLDIERS WERE TAKEN FROM**

1. A child soldier from Sierra Leone taken from "Seventeen" Magazine of March 1999 by Gayle Forman.
2. A child soldier from Somalia taken from "The Role of Children in Armed Conflicts" book, 1994 by Ilene Cohn & Goodwin-Gill. S. Guy
3. A child soldier from Uganda taken from "The Role of Children in Armed Conflicts" book, 1994 by Ilene Cohn & Goodwin-Gill. S. Guy
4. A child soldier from The Republic of Congo (former Zaire) taken from the Gazette of May 25, 1999 by Daniel Weiss & Emma Cherniavsk.

# “If you cry, we will



by Gayle Forman



Teit Hombak - IMPACT VISUALS  
Somalia, September 1992. Young clan fighter.



Yann Gamblin - UNICEF  
Uganda, 1986. NRA soldier - 9 years old.



RICARDO MAZALAN, AP

**This child soldier served with a Zairean rebel militia in 1996.**

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