

The Effects of Exposure to Children in Armed Conflict During Military Service

PARTICIPATORY ACTION RESEARCH REPORT

Workshop in Halifax, NS | October 2022



About the Project

The Effects of Exposure to Children in Armed Conflict During Military Service is a multi-phased research project that was inspired by Lt General (ret'd) Roméo Dallaire's experience encountering children engaged in armed violence during the genocide in Rwanda. The purpose of this project is to understand the experiences of Canadian Armed Forces Veterans who have had experiences with children in armed conflict, and particularly with those recruited and used as soldiers. The aim is to better understand the nature of encountering children during military service, the mental health impacts of encountering children, whether these experiences differ for specific groups of people, and what kinds of training and supports are needed for military personnel who may be deployed in regions where children are engaged in armed violence.

This report presents preliminary findings from a literature review, interviews with Canadian Armed Forces Veterans and an introductory workshop with Participatory Action Research Participants.

Project Partners

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MacDonald Franklin OSI Research Centre, Lawson Health Research Institute
Centre for Addiction and Mental Health
Mount Saint Vincent University
Canadian Institute for Military and Veteran Health Research
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The logo for the Government of Canada, featuring the word "Canada" in a large, black, serif font. A small red maple leaf is positioned above the letter "a".

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ENCOUNTERING CHILDREN DURING MILITARY DEPLOYMENTS

Peacekeeping is deeply imprinted in Canadian culture, bound by history, values, and a commitment to global peace and security. During the past seventy years, over 125,000 Canada Armed Forces personnel have deployed internationally to missions ranging from Korea to Afghanistan, including current missions in the Democratic Republic of the Congo and Mali. Throughout this service, Canada has committed to protecting children affected by armed conflict (CAAC), which is demonstrated by Canada's role in introducing the first debate on CAAC in the UN Security Council (1999-2000), Canadian contributions to the creation of the Optional Protocol on the Rights of the Child (adopted in 2000), the introduction of the Vancouver Principles on Peacekeeping and the Prevention of the Recruitment and Use of Child Soldiers (2017), and serving as the Chair of the Group of Friends of Children and Armed Conflict, a network of Member States and observers from the UN and civil society. While the protection of children has continued to be a central feature in Canadian foreign policy, there has been a lack of recognition of the impacts of encountering children during military deployments. How prepared are CAF personnel to encounter children, and particularly children recruited and used in armed violence, during deployments? What are the consequences of these experiences on military personnel?

Global peacefulness has continued to deteriorate over the past decade, due to compounding factors related to the climate crises, economic insecurities, and a rise in violent extremism (OECD 2020; Institute for Economics & Peace 2022). As armed conflict becomes increasingly complex, children disproportionately suffer the consequences (Baillie Abidi 2021; Save The Children, 2021). Alarming, children are becoming increasingly engaged in armed violence and

in evolving roles (Østby, Rustad, Haer, & Arasmith 2022; Tynes 2018; Whitman & Baillie Abidi 2020). Encountering children is an operational reality that requires preventative planning, clear protection mandates, and effective care and support for those affected. Lt General (ret'd) Roméo Dallaire has spoken openly of the effects encountering children has had on his health and describes these effects as a moral injury, stating:

It is a deep and profound assault on what you are as a human being. It's when you encounter situations that go against every element of value, every reference you have in your background, your education, your family, your community, your social values. And it creates an instinctive reaction, a gut feeling ... that comes from the whole body politic of who you are.

As the context and nature of peace support operations evolve, military personnel are increasingly likely to encounter children in conflict contexts. Understanding the effects of these encounters is essential to future operations and the health and wellbeing of military personnel and their families. To establish a baseline on the effects of these encounters, the research partners conducted a systematic review of the literature. While anecdotal evidence exists, research unpacking the contexts, the effects, and strategies for protecting military personnel and the children they encounter is lacking (Ein et al., 2022). We recommended 3 key areas for further consideration (Ein et al., 2022):

1. Research: “Engage relevant agencies in the documentation of encounters with children in armed conflict/deployment settings” and “develop and improve exposure measures used in research to capture encounters with children” (pg. 10).

2. Knowledge Transfer: “Integrate knowledge translation to increase awareness associated with these encounters” and “guide media narratives regarding encounters with children” (pg. 10).
3. Policy & Training: “Provide explicit training on rules of engagement when encountering children in the deployment context” (pg. 10).

The findings of the systematic literature review are published in the Journal of Psychotraumatology, and have been presented at multiple events, including at the CIMVHR Forum (2022) and a poster presentation at the Annual Meeting of the International Society for Traumatic Stress Studies (2022) to raise awareness of this gap in research.



The Effects of Encountering Children Recruited and Used as Soldiers on the Well-being of Military Personnel: A Systematic Review was Presented at the CIMVHR Forum 2022 by Jenny Liu, PhD.



Screenshot of European Journal of Psychotraumatology

PROJECT OVERVIEW

Introduction

Rationale

The aim of this research program is to inform and enhance training, policy and prevention strategies to better prepare personnel for complex deployments that involve children, and to improve care for those who have experienced mental health difficulties in the aftermath of such experiences. The research aims to improve our collective understanding of the mental health effects of encounters with children on military personnel, and particularly when witnessing children who are recruited and used as soldiers. The project also aims to identify opportunities to enhance training, planning, and treatment to improve operational effectiveness and enhance protection for military personnel, Veterans, and their families.

Phase I

Phase I of the project involves in-depth interviews with Canadian Armed Forces Veterans who encountered children during military deployments. The research objectives focus on improving our understanding of the nature of encounters with children and the mental health impacts of these encounters. To date, 9 interviews have occurred, and the goal is to interview 20-30 Veterans and active personnel to continue to inform Phase II. The preliminary findings from Phase I are detailed on page 6.

Phase II

Phase II shifts to a participatory action research (PAR) approach to build on the foundations of the knowledge generated from Phase I. PAR centres the perspectives and lived experiences of participants who have encountered children during deployments, enabling participants to guide the development of prevention or intervention programs and to lead social change. The PAR research team includes Veterans, academics, health professionals and students, including:

Catherine Baillie Abidi¹, Stephanie Belanger², Jake Bell³, Sharon Bernards⁴, George Boyuk³, Carl Conradi⁴, Marianela Fuertes⁵, Ken Hoffer⁵, Fardous Hosseiny⁶, Stephanie Houle⁷, Ian MacVicar³, Veronique Morin³, Anthony Nazarov⁷, San Patten⁵, Paul Pelchat³, Kathryn Reeves¹, Samantha Wells⁴, and Stefan Wolejszo⁸.

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PHASE I: INDEPTH INTERVIEWS WITH VETERANS

Key Findings

Overview

Research focused on injuries that result from acting, observing, or failing to prevent events that compromise one's moral compass, often referred to as moral injuries, are beginning to garner attention in military mental health (Denov, 2022; Ein et al., 2022). Moral injury is an evolving concept and is purported to be characterized by intense moral emotions, difficulties with trust, loss of faith in oneself and in humanity, and disruptions in identity and interpersonal connectedness (Houle et al., 2021; Griffin et al., 2019; Litz et al., 2009). Importantly, it has been distinguished from PTSD due to its emphasis on shame and guilt rather than fear and anxiety as core reactions to highly stressful events (Litz et al., 2009; Nash & Litz, 2013; Nazarov et al., 2015; Shay, 2014). Research by Nazarov et al. (2018) demonstrated that 57% of Canadian military personnel deployed to Afghanistan reported experiencing potentially morally injurious events, and of those reported, 43% of the events involved women and children. Despite the magnitude of these experiences, research and clinical communities' understanding of moral injuries is underdeveloped, and thus, efforts aimed at preventing and treating moral injury are still in their infancy.

In his acclaimed book "Waiting for First Light: My Ongoing Battle with PTSD", Lt General (ret'd) Roméo Dallaire highlights the failures of military leadership to acknowledge, address, and care for moral injuries. In this text, Dallaire (2019) shares the story of a colleague, his former driver, who was deployed to Sarajevo, and who witnessed extreme atrocities perpetrated against children, and states:

He came back a mess, but his commander rejected the reality of this kind of injury, claiming that under good leadership it just doesn't happen. The impact of that attitude exacerbated the wound. My driver was one of the invisible, the walking wounded, whose injuries it suited the military leadership to deny. (pg 51)

Inspired by Lt General (ret'd) Dallaire's lived experience, Phase I endeavored to increase understanding of the nature of encounters with children during military deployments; to improve understanding of the ways in which these experiences impact military personnel; and to identify supports to mitigate the consequences of deployment encounters involving children. The research questions included:

1. What is the nature of experiences that military personnel have faced that relate to observing/engaging with children/child soldiers during military service?
2. For those who have encountered children/child soldiers during military service, how have these experiences affected them?
3. Are these experiences and the effects of these experiences different across gender?
4. What kinds of training and supports are needed for military personnel who may be deployed to regions where children/child soldiers operate?

Encountering children and child soldiers in the context of military deployments: A systematic review of effects on well-being



LAWSON HEALTH RESEARCH INSTITUTE

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INTRODUCTION

Encountering children during military deployment can present important moral, ethical and strategic challenges to military personnel that may place them at risk of traumatic stress and other consequences.

Still, the nature and impact of child encounters during military deployments has yet to be systematically studied, leaving open the question of how best to prepare military personnel for these encounters, and support those experiencing difficulties in their aftermath.

Objective

To summarize available evidence on:

1. the nature of deployment-related encounters with children and child soldiers
2. impacts of encounters with children and child soldiers on the well-being of military personnel and Veterans
3. training programs, policies, and supports available to military personnel in preparation or response to encounters with children and child soldiers

METHODS

The literature search was conducted 14 February 2022, using:

- PsycINFO (OVID), U.S. Department of Defense Technical Reports Citations, National Defense Industrial Association Conference Proceedings, and ProQuest Dissertation & Theses.

The study followed the Cochrane's review guidelines.

A total of 2712 were screened, with **17 studies included**, comprising 86 independent child encounters.

Inclusion Criteria

Studies that reported:

- Military personnel encountering children during deployment
- Policies, training or programs for deployed military personnel about encountering children

Exclusion Criteria

- Non-human studies
- Studies of non-military personnel
- Studies or reports of former child soldiers
- Studies or reports about children of military parents

RESULTS

Nearly all studies identified were qualitative in nature, representing data obtained from clinical and anecdotal accounts.

Table 1. Characteristics of military personnel

War/Deployment	n	%
Afghanistan	21	24.42
Iraq	17	19.77
Iraq and/or Afghanistan	7	8.14
Sierra Leone	6	6.98
Palestinian War	5	5.81
World War II	5	5.81
Bosnia	4	4.65
Vietnam	4	4.65
Unknown/Unsure	4	4.65
West Africa	1	1.16
Kosovo	1	1.16
Persian Gulf	1	1.16
Sri Lankan Civil War	1	1.16
Second Gulf War	1	1.16
Citizenship of Soldier(s)		
United Kingdom	34	39.53
American	32	37.21
Israeli	5	5.81
Dutch	3	3.49
Unknown/Unsure	2	2.33
Canadian	1	1.16
Indian	1	1.16
Gender of Soldier(s)		
Male	61	70.93
Unknown/Unsure	15	17.44
Female	1	1.16
Mixed	1	1.16
Other	0	0.0
Age		
< 30	4	4.65
30-39	11	12.79
40-50	6	6.98
70+	1	1.16
Unknown	56	65.12
Ethnicity		
Unknown/Unsure	55	63.95
White	14	16.28
Latin American/Hispanic	7	8.14
South Asian	1	1.16
Black/African/Caribbean	1	1.16
West Asian	0	0.0
East and Southeast Asian	0	0.0
Indigenous Peoples	0	0.0
Military Status when Reporting the Incident		
Unknown/Unsure	47	54.65
Veteran	21	24.42
Active Duty	10	11.63

The most common types of encounters documented were (n, %):

- Armed children (37, 43.02)
- Ambiguous encounters (23, 26.74)
- Children used as porters/human shields (8, 9.30)
- Children as suicide bombers (6, 6.98)
- Sex related (4, 4.65)

Table 2. Consequences of encounters

Type of Outcomes	n	%
<i>During the Encounter</i>	20	23.26
Failure to Engage	8	--
Physical Injury(ies) to Soldier(s)	5	--
Casualties of Soldier(s)	4	--
Taken Hostage	3	--
<i>Well-being</i>	25	29.07
<i>Psychological Consequences</i>	35	40.70
Mental Health	20	--
Substance Use	7	--
Hostility/Aggression	4	--
Suicidal Ideation(s)	3	--
Suicide Attempt	1	--
<i>Social Consequences</i>	16	18.60
Relationship Related	15	--
Professional Related	1	--
<i>Moral/Religious Consequences</i>	25	29.07

Training & policy findings:

- Only 2 accounts described reception of pre-deployment training relevant to child encounters.
- 4/5 accounts that commented on policy underscored the lack of available policies governing rules of engagement for child encounters.

DISCUSSION & RECOMMENDATIONS

- The review highlights the lack of documentation on encounters with children in armed conflict settings. The true incidence and impact as recorded in published literature remains elusive.
- Additional efforts are needed to better document encounters with children and their impacts, and develop training and policies which support those encountering children during military deployments.

This work is conducted by the **MacDonald Franklin OSI Research Centre**, with funding from the **Veterans Affairs Canada Veteran and Family Well-Being Fund**. We would like thank our research centre staff and volunteers for their contributions to this project. Email: OSResearch@sjhc.london.on.ca @OSIResearch

LAWSON IS THE RESEARCH INSTITUTE OF LONDON HEALTH SCIENCES CENTRE AND ST. JOSEPH'S HEALTH CARE LONDON.

This poster was presented at the 38th Annual Meeting of the International Society for Traumatic Stress Studies, Atlanta, USA November 12, 2022 by Dr. Stephanie a. Houle

The following four themes represent preliminary findings from the initial six in-depth interviews with Canadian Veterans. All participants experienced multiple deployments, including missions in Eastern Europe, Central Asia, and Africa.

ENCOUNTERS

The participants experienced several types of encounters with children during their deployments. They encountered children among the civilian population, as actors in armed violence (e.g. children at checkpoints, armed patrols, spies/observers, etc.), engaged in child labour (e.g. protecting livestock), and those involved in piracy. The participants identified several troubling aspects of their encounters with children, including witnessing children mutilated, injured, or dead; children living in poverty; knowledge of children being coerced with drugs, or being under the influence of drugs during encounters; threat of harm which was often perceived to be greater with children recruited and used as soldiers; and children being violent towards one another. Improving our understanding of the types and contexts of encounters that military personnel have with children during deployments, will inform our efforts to enhance prevention and care.

OCCUPATIONAL CONTEXT

Several participants stated that they were unprepared to encounter children during deployments and that a stronger orientation prior to deployment, in addition to clearer goals articulated from the leadership in relation to operations involving children, are essential. At the same time, the participants described the complexities of distinguishing encounters with children from the broader, complex environment in which they were deployed and the extreme stressors of operating in a conflict context. Understanding the operational context is important to inform potential training, policy and mandates.

PERSONAL CONTEXT

The participants also indicated that their personal context, for example their own adverse childhood experiences or one's role as a parent, can influence the impact of encountering children during deployments. Unpacking encounters with children may highlight how different people, based on their different lived experiences, navigate encounters with children during deployment.

HEALTH CONSEQUENCES

Finally, some participants alluded to the challenges they experienced post deployment related to encounters with children. Clearly identifying the health consequences may enhance our understanding of prevention and intervention. Additional insights stemming from future interviews are likely to reveal patterns relevant to understanding and mitigating any specific health consequences associated with child encounters on deployment.



"What kinds of training and supports are needed for military personnel who may be deployed to regions where children/child soldiers operate?" was presented at the CIMVHR Forum 2022 by Stephanie Houle.

Graphic recording by Rach Derrah.

PHASE II: PARTICIPATORY ACTION RESEARCH

Introduction

Phase II of the research project was designed to build on the key findings from the in-depth interviews with military personnel, by engaging collaboratively with Canadian Veterans to ensure the project is guided by those with lived experience.

PAR METHODOLOGY

Participatory action research (PAR) is an approach that actively and meaningfully includes the perspectives and lived experiences of participants in asking questions, collecting data, and analyzing information. The ultimate purpose of PAR is to inform what actions should be taken on identified issues in order to create social change. For this project, people with lived experience of encountering children during deployments are working alongside researchers and other stakeholders to steer the development of the prevention and intervention programs. The PAR approach endorsed in this project was presented at the CIMVHR 2022 Forum in Halifax in October by San Patten.



Breakdown of the research team composition.

RESEARCH WORKSHOP

The purpose of this workshop was to engage the Participatory Action Research (PAR) Team in an interpretive analysis discussion of the key findings from preliminary analysis of Phase I interviews with Canadian Veterans who encountered children during deployments. The workshop included 15 participants, including 6 people with lived experience and 9 research partners. Documentation methods included taking notes by flipcharts, sticky notes, graphic recording capture, and digital note taking. Given the group dynamic of PAR research, the team continues to prioritize research ethics (see Appendix A) and will continue to build measures of commitment within the team such as the development of community norms – or rules to guide the way the team conducts research together.

WORKSHOP PROCEEDINGS

The workshop began with a welcome by the Principal Investigator (PI), a land acknowledgement by the PAR Coordinator, and a round of introductions for all participants (see full agenda - Appendix B). The introduction was followed by a statement of respect by the PAR Coordinator and a reminder of confidentiality. The PI then gave a basic overview of the project rationale, a brief description of the research team and collaborators, and an overview of findings from Phase I (interviews). The key inquiries for the workshop included: what is missing from findings, whose voices are missing, how to engage relevant people, what are the implications for preparatory training and support for individuals, in terms of the physical impacts, acute and chronic impacts of encountering children while deployed, and what are the next steps?

Activity 1: World Cafe

Using a World Café exercise, four stations were set up with each station representing one of the thematic areas that emerged from the interview data. One station facilitator/notetaker was assigned to each theme. Participants spent 15-20 minutes at each station to hear a summary of each key theme and delve deeper by responding to the following questions:

- How does this finding (key theme) resonate with your own perspective, expertise or experience?

- What more would you add to clarify or elaborate upon the key theme?

Below is a summary of the discussions within each of the thematic areas. Direct quotes made by participants during the discussion that exemplify the key themes are included.



Graphic recording by Rach Derrah.



Graphic recording by Rach Derrah.

Theme: Encounters

While there are internationally agreed upon definitions of a child soldier, identifying a child recruited and engaged in armed violence during deployments was described as ambiguous depending on operations, the cultural context, and individual expectations. Participants noted the need to catalogue types of encounters with children as there are a spectrum of encounters ranging from observing children in the local area to direct kinetic interactions. The moral and psychological impacts of encounters vary greatly depending on personal and operational contexts, personnel roles (hierarchy level in the armed forces), relationships, culture, awareness, number and types of encounters, and proximity of encounters with children. Other complexities include working with children who are engaged by allied or cooperative forces, and encountering children who are engaged in non-combatative labour roles, such as in child labour within mining operations.

“When you go into some of these environments you assume you can help and make presumptions about what would be better, but these actions don’t help in the long run.”

“Some people are going into these engagements with no concept of what the experience will look like. Some people are completely naïve when they go in, shocked.”

Regarding consequences of encounters, one participant stated “you have to live with yourself afterwards” referring to contradictions between the formal rules and how one is compelled to behave in a given situation.

The consensus among Veterans was that there is lack of training, policy, or discussion about encountering children prior to or during deployment. Information and learning needs to be shared pre-deployment, and reinforced from one deployment to the next, including building skills and providing social, political and economic contextual information, such as what the local culture deems ‘normal’ or acceptable for the role of children. Armed forces personnel need to be proactively equipped with a variety of strategies so they are not trying to problem solve in the middle of encounters.

Theme: Occupational Context

Negative impacts on individuals are influenced by frequency of encounters, proximity to children, how disturbing the encounter was (e.g., injury, death, poverty of children, knowledge of children being coerced to be involved with drugs or under influence, threat of harm greater from children (e.g., they are more impulsive, lack training)). Those given clear roles and direction, clear definitions, and cultural context, were better able to cope with such encounters. Some participants described encountering children as “just part of deployment”.

During pre-deployment preparation there is ambiguity about the suspected presence of children and the ways they are engaged in armed violence. Participants would like core pre-deployment preparation to include building awareness of the possibility of encountering children in different proximities and the potential impact on personnel. The necessary pre-deployment preparation “cannot be achieved in one hour” and needs to be integrated into the operational systems that gather information and into logistical and operational aspects of a deployment. Interpreters, and those in other support roles, should also be prepared for potential encounters with children.

Participants noted ambiguity within the entire operational context, for example in establishing reporting protocols. Systems should have specific guidelines for debriefing in contexts that involve children (e.g., more than a single debriefing and as

quickly as possible after an encounter), record keeping, transmission and reception of/access to information.

Pre- and post-deployment systems need to go beyond information gathering to building knowledge about the interaction between the mission and the population. It is very difficult to identify children, track children, or understand the role that children may play in the context of the mission setting. There needs to be input into the intelligence collection system (e.g., number and location of children) so operations can be conducted based on intelligence information.

“Having an experience of combat with children is a cultural shock and is not something that can be put aside.”

The pre-deployment training must also acknowledge that personnel must exercise discretion within the context of ambiguity. Deployments across diverse contexts means encounters with different cultural norms. Military personnel need to have good information about the operational context, situational awareness on how to address encounters with children, and a level of discretion to react or respond to the local context.



Graphic recording by Rach Derrah.

Participants discussed using discretion beyond the United Nations ‘no contact’ policies with regards to children. For example, participants recounted that they have engaged children in activities in compounds (small menial jobs/tasks such as car washing or errands to the market) to “keep an eye on them”. In some contexts, armed personnel observed that if children didn’t have something to do or had a purpose, they are “snatched up and put into combat”. Most decisions in the field come down to a choice of two undesirable options. Decision makers need to choose an option that has the lowest level of negative impacts on personnel and children in the long term. They need flexibility in implementing rules while in operation so that the best interests of children can be considered.

Theme: Personal context

An individual’s cultural origins and personal background in early life influences what they consider to be ‘normal’. Family experiences are important, for example being a part of the military culture from a young age, impacts how you interpret experiences later on. Seeing children doing adult jobs (e.g., providing support or care giving at a young age) or dangerous jobs (e.g., children on fishing boats in Atlantic Canada) may normalize seeing young people in dangerous situations in other contexts. Children who are in cadets can be socialised to be tough and can receive little support when they experience pain. Additionally, adverse child experiences can exacerbate later life traumas.

Participants identified that one of the key reasons that participants join the military is a desire to help others and to protect the innocent and vulnerable. However, when a person enters conflict, they may be compelled to go against these core values, and are therefore, not able to make the positive changes they were hoping to see. Personal beliefs that children are innocent and should be protected, influence how an individual is impacted when they see children used in war. Spiritual beliefs are another background factor that impact these experiences.

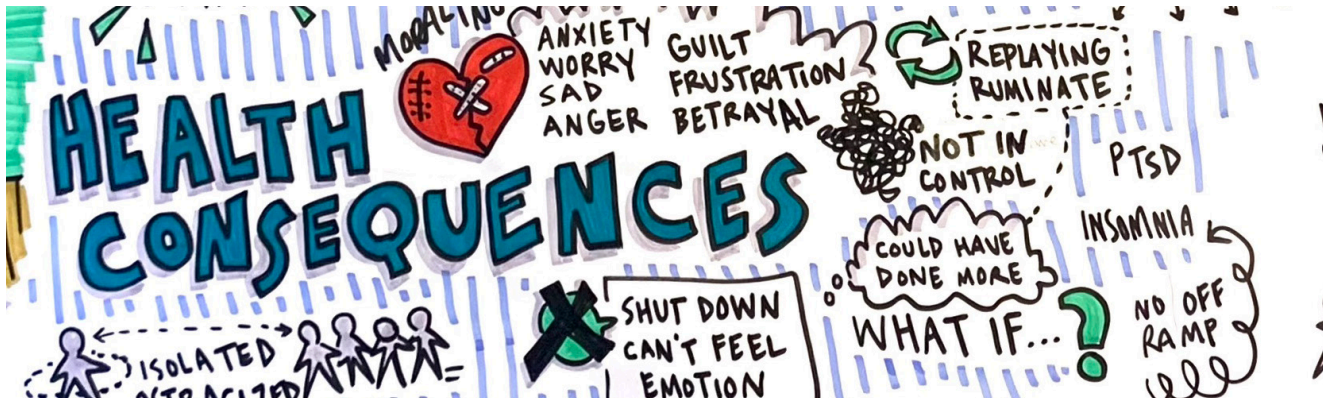
Social roles can also impact adjustment post-deployment. For example, some parents come away from encounter experiences being hypervigilant or hyper protective of their own children. Participants also noted that there may be generational differences within armed personnel, with a younger “woke” generation coming into the military, perhaps with different awareness of cultural contexts.

Emerging Questions

- How do we best train and prepare people with different personal contexts?
- How do we build resilience without putting people through challenging experiences and tough contexts?



Graphic recording by Rach Derrah.



Graphic recording by Rach Derrah.

Theme: Health Consequences

Each experience of an encounter with children is unique, as are the impacts on the individual. In the moment of encountering children, there may be a feeling of surprise and a heightened sense of risk, with children either being at risk or creating risky situations. Coping mechanisms can include emotionally “shutting down” because the experience was overwhelming, and not engaging with reactions due to having to survive in the moment. Emotional reactions included worry, anxiety, anger, guilt, betrayal, sadness, moral frustration, being bothered, and the inability to feel positive emotions as a chronic impact. Participants discussed ruminating on these experiences with thoughts of how the experiences ‘should’ and ‘would’ and ‘could’ have been different. Other health consequences included insomnia and PTSD. Participants characterized encounters with children as part of a larger systematic betrayal. Individuals feel they are not getting their needs met from the system, are not taken care of, and feel “left behind.”

Emerging Question

- What can we do in daily life (e.g., providing care to one's own children) after encounters to help offset the emotional harms of encountering children in deployment?

Plenary Discussion

Each station facilitator reviewed the responses compiled from all rounds of the World Café. An open discussion was held about the responses that addressed the following questions:

- What is missing?
- What do we want to do to fill this understanding?
- How do we generate imagination on these other topics?

“Children will be used as a tool to make you second guess your training. Your responsibility is to protect yourself and your team. When it’s time, when bullets are flying, the rules of engagement are clear. You cannot second guess yourself. It’s not just about you. It’s about the people you are there to protect. Your entire deployment is essentially a series of engagements, and with each engagement you are debriefing (if there is a process in place).”

Activity 2 - Paper Route Exercise

For the second activity, participants were divided into groups of four and each person was assigned a number 1, 2, 3, or 4. Participants were responsible for interviewing every other group member about their designated question. The four questions were:

1. What are the implications of these findings in terms of providing preparatory training for military personnel before they enter the field?
2. What are the implications of these findings in terms of providing support services for military personnel who have encountered children in combat situations?
3. How have these findings informed our understanding of the consequences of encountering children in deployment?
4. Who should we engage in addressing this kind of moral injury, and how do we engage them in ways that feel safe and productive?

After everyone had interviewed every member of their group, all of the people assigned question 1 gathered to compile their response. The same occurred for those assigned questions 2, 3, and 4. The new groups compared notes from their interviews and developed summary statements on flipcharts. All participants then circulated to each flipchart and used sticky notes to make notes/edits as they reviewed each flipchart.

Summary Notes

What are the implications of these findings for preparatory training for military personnel before they enter the field?

Mission specific training must be contextually realistic to meet high stress challenges that can be expected in a theatre of operations. Pre-deployment training must include general resiliency and peer support education, as well as scenario-based stress training. Processes within a unit must be tested with particular emphasis on post-action debriefs and review processes. Personal development and a review of leadership principles is

needed for all superiors who are responsible for the care and well-being of their subordinates.

"Ambiguity is a killer."

What are the implications of these findings for providing support services for military personnel who have encountered children in combat situations?

This is complicated and a lot may depend on preparations and expectations. Response needs are different for different groups (e.g., soldiers, families, independent missions, battalion missions, deployment vs combat). Clear policies, procedures and planning are required to adequately prepare military personnel (and their families) to address the psycho-social consequences of these encounters, including potential moral injuries. This involves a continuous program of training and education and monitoring during pre-deployment preparations, deployed operations, and post-deployment phases.

"I'm not broken, I'm part of a system that has issues."

Peer support and sharing experiences within a safe and respectful space could destigmatize the impact of encountering children while deployed. Resources, tools and training are needed to support personnel and leadership that cover what people need to know, including how a person may be impacted. Additionally, tools and resources should be provided for people to be able to identify their own need for support.

Post-deployment, members need to understand the ways in which psychological consequences of child encounters may present. In a situation where someone is struggling with complex PTSD, there are numerous incidents or encounters layered on top of one another.

In terms of addressing effects (e.g., lack of ability to sleep or concentrate), is there anything specific to moral injury that can be addressed?

Treatment needs to encompass spiritual and relational aspects that honour the ways in which people want to address these injuries. These include creating connection, acceptance, and meaning for the person, and forgiveness for oneself and others. These are essential for helping personnel move forward in a way that is aligned with the particular value that was distressed by an event that was morally injurious. One intervention that may be helpful is letter writing (from emotion focused therapy) to provide a cathartic release of emotions, reflect on impacts, and provide directionality/improving quality of life.

Personnel need acknowledgment that something was wrong in the system, the context, and in the pre-deployment preparation. Betrayal is not just a feeling, it is something that is coming from the systemic context.

“It [the impacts] diminishes over time, but it is always there.”

Emerging Questions

- How do we educate about the psycho-social and spiritual consequences of deployment encounters with children, including the differences between moral injury and PTSD?
- Would it be useful for moral injury to be an official diagnosis?
- Where is the institutional accountability for putting people in the position without preparation and institutional commitment to change?

What are protective factors for those who encounter children during deployments, including those who do not experience moral injury and other problems?

A key protective factor is support from family and from the military community in a cohesive unit environment where personnel feel safe to talk to peers and have ease of access to support services (medical and mental health).

It is also important for personnel to have opportunities to debrief after encountering situations and be aware that the reaction to the experience can be delayed. Personnel should be trained on the possible manifestations of trauma and potential delays in the experience of trauma. This training should be provided during pre-deployment and reaffirmed post deployment (e.g., after a year). Personnel should be taught about mental health processes for coping with trauma/potentially morally injurious events using tools such as the ‘road to mental readiness chart’. Personnel should also be provided with tools and techniques for building resilience such as knowing yourself, mindfulness and grounding skills. Finally, personnel should be given scenario-based training to give anticipatory preparedness of what can happen in the field.

Emerging Question

- How do we build resilience towards these kinds of events?

“The people that were supposed to be helping me, supposed to be doing something... walked away and left me holding the bad. Those things are the things that stick with you.”

Who needs to be engaged in addressing this kind of moral injury?

The following key stakeholders were discussed (in no particular order of priority) as being important to include in addressing moral injury stemming from encounters with children:

- Family and Community Engagement: Spouses, partners, family, Military Family Resource Centres, Chaplains.
- Populations that need to be engaged and feedback sought include: Veterans, leadership personnel, Veterans Affairs Canada, Canadian Defence Academy, active regular and reserve members of the CAF, and Department of National Defence.
- Medical authorities and social workers, both civilian and military, need to understand that moral injury could be present. Long-term follow up is currently not included in the system so there is a need for a program or policy that captures delayed presentation. There is policy and program progress on addressing moral injury, but it needs to be expanded to community (i.e., not just military providers).
- Trained peer supporters / enforced buddy systems to promote the ability to communicate with others in the field because “this is where you start to notice when someone is struggling”.
- The perspectives of children formerly recruited and used need to be included, to understand how they see CAF members and how encounters can be safer for both personnel and children.

Stakeholders should be engaged by first making sure policies are clear from the military side, and then potentially expanding to more general political spheres. There needs to be a human rights/legal/judicial understanding that some individuals are particularly impacted by deployment experiences. One helpful conceptual framework would be a restorative and compassion-based justice process for Veterans.

The findings from this research project should be shared within education systems, academic institutions, and think tank organisations. There needs to be greater advocacy regarding the impacts of encounters with children in armed conflict contexts through media/press/communications to increase attention and create an understanding that this is a problem which is getting worse.

“What could I have done to make them understand what their responsibility was?”

NEXT STEPS & RECOMMENDATIONS

EXPANDING PARTICIPATION

As the PAR project proceeds, we will endeavour to include a more diverse group of people with lived/living experience, to understand the perspectives of people who have had encounters with children, including those who have had large-scale suffering from these encounters as well as those who do not identify health consequences as a result. We also endeavour to engage younger Veterans and actively serving personnel.

REVIEW CURRENT PRE-DEPLOYMENT TRAINING & POLICY RELATED TO CHILDREN

Ultimately, we aim to influence future training by first gaining a better understanding of what current training entails, to analyze the gaps, understand current operations, and examine how current military members are interpreting roles and responsibilities. The examination of current training should involve those who design and deliver training.

LEARN WITH OTHER SECURITY PROFESSIONALS

We will endeavour to understand the experiences of Canadian police in relation to their interactions with children engaged in armed violence in domestic contexts. For example, police who deal with youth gangs have procedures in place that could be instructive and inform military policies and practices.

HOST VIRTUAL PAR WORKSHOPS

Finally, we will host virtual workshops, designed to enhance access for participants from broader geographical regions. These workshops will focus on moving the yard stick in terms of evolving questions and identifying opportunities to advance our understanding of the training and care required to support CAF members who are or have working in complex conflict environments with children.

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ANNEX A

Participatory Action Research Ethics Agreement

Participatory Action Research (PAR) is an open, collaborative approach to research that builds knowledge through iterative cycles of reflection and action. The PAR approach situates power within the research process with those who are most affected by an issue and its interventions. The intention is that the participant is an equal partner with the researcher (Boyle, 2012).

The “participatory” nature of PAR refers to the active involvement of stakeholders, particularly those with lived experience with an issue. PAR elevates the need for us to provide collective and collegial care for one another. We are engaged in a research process by working together, generating knowledge as we go.

Please review the following ethics guidelines for our PAR project and sign below.

- All data gathered during this PAR project will be housed at Mount Saint Vincent University. This includes notes from our workshops and meetings, interview and focus group transcripts, contact information for participants and signed consent forms.
- Confidentiality: although the research team will take every precaution to maintain confidentiality of the data, the nature of group discussions prevents the researchers from guaranteeing confidentiality. We ask all participants to respect the privacy of fellow participants and not repeat what is said in the meetings or workshops to others.
- Privacy: we are collectively responsible for protecting the privacy of one another. Some of us may not be comfortable having our names associated with this project, so we will make every effort to provide anonymity within correspondence and publications. If you are comfortable with having your name associated with this project (in correspondence and publications), please provide your initials here: _____
- Collaboration: we are committed as a research team that everyone will have opportunity to validate data, analysis and interpretation as we proceed.

Should you have any questions or comments, please contact either San Patten (PAR Coordinator) san.patten@dal.ca or Catherine Baillie Abidi (Principal Investigator) Catherine.BaillieAbidi@msvu.ca

Signature of agreement:

Your name (please print)

Your signature

Date

ANNEX B

Agenda: 20 October 2022

Location: Faculty Lounge, 407-409 Seton Building, see building #5 on the Campus Map.

TIME	ACTIVITY & PROCESS DESCRIPTION
0930-1000	Breakfast & Set-up
1000-1045	Welcome & Introductions Project Rationale & Workshop Context Statement of Respect & Confidentiality
1045-1200	Collaborative Review of Phase I Findings Preliminary findings from Phase I interviews will be explored including: <ul style="list-style-type: none"> • Encounters: types of encounters, troubling aspects of encounters with children • Occupational context: encountering children part of larger stress of deployment, preparedness • Personal context: perceptions of normality, expectations and ambiguity, influence of personal history, and personal history • Health consequences: acute and chronic mental health, physical health and moral injury impacts
1200-1300	Lunch
1300-1330	Plenary Discussion – Collaborative Review <ul style="list-style-type: none"> • What is missing? • Who is missing from the discussion?
1330-1500	Highlighting Priorities <ul style="list-style-type: none"> • Exploring implications of the findings in relation to training, support, and policy development.
1500-1515	Coffee Break
1515-1600	Stakeholder Mapping <ul style="list-style-type: none"> • Develop an action plan for next steps in PAR project. Closing



CHILDHOOD OF RISK
CULTURE
WHERE IS THE ACCOUNTABILITY?

PREPARATORY TRAINING



SUPPORT SERVICES



UNDERSTANDING PROTECTIONS



WHO



NEXT STEPS

- PROCESS THIS DATA + MAKE REPORT
- FIND PEOPLE IN THESE SITUATIONS WHO WERE NOT IMPACTED - WHY?
- BRING IN MORE PEOPLE + DIVERSITY
- UNDERSTAND/ANALYZE TRAINING GAPS
- KNOWLEDGE SHARING WITH OTHER NATIONS?
- LEARN FROM CANADIAN POLICING OF STREET GANG YOUTH

SEARCH WORKSHOP

REPORT + DEBRIEF IN THE FIELD

KEEP RECORDS.

SHARE LEARNINGS

PTSD

INSOMNIA

NO OFF RAMP

