Children and Armed Conflict: Introduction and Overview

Michael G. Wessells
Columbia University

Worldwide, children suffer a diverse and toxic array of effects of armed conflict, which increasingly are protracted and intermixed with problems such as terrorism. To support war-affected children, it is necessary to understand how children have been affected by war and to use appropriate conceptual analyses to inform the design of effective interventions. This paper introduces 2 thematic Special Issues of this journal that are devoted to children and armed conflict. The present Special Issue focuses on the task of understanding how children are affected by war, whereas the second Special Issue will focus on how to intervene on behalf of war-affected children. This paper situates the empirical papers in the present Special Issue in the context of recent changes in the developing study of children and armed conflict. Featuring the rise of systems thinking evident in ecological frameworks and child protection systems, it emphasizes resilience approaches and the movement away from deficits frameworks that underscore disorders such as posttraumatic stress disorder (PTSD). It also identifies numerous obstacles to achieving a comprehensive understanding of war-affected children. Primary among these are a weak evidence base, insufficient attention to contextual diversity, use of nonholistic approaches, and the marginalization of children’s agency. Against this backdrop, it provides an overview of each of the 6 papers in this Special Issue, and concludes with a brief overview of the second, companion issue on children and armed conflict to be published in this journal.

Keywords: children, armed conflict, ecological framework, resilience, participation

Over the past decade, armed conflicts have morphed in ways that pose profound threats to peace and human well-being. The long term nature of armed conflict is conspicuous in countries such as Afghanistan, Colombia, Iraq, South Sudan, Syria, and Yemen, among others. The deadly nature of contemporary armed conflicts is most visible in the Syrian war, which has featured chemical attacks on civilians, caused nearly 200,000 deaths, and left a multitude of unexploded remnants of war (Human Rights Watch, 2015). Also, the interconnections between armed conflict and terrorism are visible in Syria, where the Islamic State (ISIS) controls significant amounts of territory in the north. Globally, ISIS has launched repeated terrorist attacks, most notably in France in 2015 and Brussels in 2016. However, Boko Haram, which has repeatedly attacked villages in Nigeria and other countries, abducted large numbers of girls, and used terror tactics, was ranked ahead of ISIS in being the deadliest terrorist group in 2014 (Institute for Economics and Peace, 2015).

Armed conflicts contribute mightily to the unprecedented levels of human displacement visible globally. The United Nations High Commissioner for Refugees (UNHCR, 2015) estimates that at present, approximately 1 in every 122 people worldwide is displaced, due largely to armed conflicts. Indeed, by the end of 2014, the number of forcibly displaced people worldwide had risen to nearly 60 million people. This figure, which includes both refugees and internally displaced people (who remain within the borders of their country) is the highest level ever recorded and contrasts with the figures of 51.2 million displaced people in 2013 and 37.5 million displaced people a decade ago. The resulting flood of refugees into Europe and other developed areas has created a humanitarian crisis, sparked political conflict, and enabled the rise of right-wing politicians who stand on platforms of fear and xenophobia, including in North America and the European Union.

Armed conflict exacts a heavy toll of suffering on children (people under 18 years of age), who comprise approximately half of the population of most war-torn countries and who comprise half of the world’s refugee population (UNHCR, 2015). Attention is often given to the physical attacks on children and their families, and the enormous damage inflicted by bullets, bombs, shrapnel, landmines, and unexploded remnants of war. However, the full impact of war on children becomes apparent when one considers the enormity of the psychological harm caused to children, the shattering and toxification (rendering them sites of high, unrelied levels of stress) of their social environments, the lack of access to basic necessities and security, and the loss of important sources of social support for their well-being. Without addressing these issues, large numbers of children will be forced to endure preventable suffering, children may be drawn into ongoing cycles of violence, and societies may compromise the development of one of their most precious resources—their children.

A high priority, then, is to support the well-being of children in situations of armed conflict and in postconflict settings. However, the provision of adequate supports is fraught with challenges. Immediate obstacles are security and operational challenges such as the dangers inherent in war zones, lack of access to affected people, shortage of funding, and a fragmented humanitarian sys-
tem (Minear, 2002). In addition, the dizzying complexity, diversity, and fluidity of 21st century armed conflicts makes it difficult to generalize across conflicts or even across different regions or times within the life of a single armed conflict. A grave risk of oversimplification arises when the category of “war-affected children” is regarded as homogeneous. War-affected children differ significantly in gender, developmental stage, ability status, culture, and a host of other factors. Moreover, there is little commensurability between contexts such as those of heavy, ongoing attack (e.g., Syria or Gaza) and those in which children and families live in areas that have been affected indirectly or at a distance by war but are not themselves suffering repeated attacks and assaults.

Perhaps most important for this issue of Peace & Conflict: Journal of Peace Psychology, there are unresolved but fundamental conceptual and empirical issues. Key among these is the question: How have children been affected by armed conflict? Only when we understand how children are affected by war—including children’s own perspectives—in diverse contexts will we be in a good position to organize appropriate supports for them.

This special issue grew out of the conviction that psychologists have both a responsibility to help support war-affected children and valuable approaches and insights that should inform comprehensive supports. The purpose of this issue is to bring forward recent empirical and conceptual work that advances our understanding of war-affected children and helps to lay the foundation for effective interventions that support them. To situate the research presented in this issue, it is useful to outline important developments in the evolving field of children affected by armed conflict. Because more complete reviews are available elsewhere (Boothby, Strang, & Wessells, 2006; Donald, Dawes, & Louw, 2000; Fernando & Ferrari, 2013; Machel, 2001), the paper will first provide a broad overview of some landmark changes afoot in this complex field. Next, the paper will identify several key challenges that lie ahead. It then describes briefly each of the papers in this special issue, and it closes with a discussion of the forthcoming companion issue on intervention.

Recent Changes in the Field of Children Affected by Armed Conflict

The rapidly growing field of children and armed conflict spans anthropology (Boyd & de Berry, 2004; Boyd & Gibbs, 1997; Eggerman & Panter-Brick, 2010), child rights (Cohn, 2014), law (Drumbl, 2012), political science and economics (Annan, Blattman, Mazuran, & Carlson, 2011; Singer, 2005), psychology (Barber, 2009; Boothby, Strang, et al., 2006; Cairns, 1996; Donald et al., 2000), and sociology, among other disciplines (Cook & Wall, 2011). The field has both research and applied dimensions, both of which have contributed to knowledge about war-affected children. For this reason, this section examines selected landmark changes in both research and practice.

This paper emphasizes the contributions of psychology. Although psychology holds no privileged position in humanitarian action on behalf of war-affected children, psychological concepts, methods, and approaches are increasingly recognized as important elements in a comprehensive approach to understanding and supporting war-affected children (Inter-Agency Standing Committee [IASC], 2007). This section includes critical commentary because some of the changes are still in process, and are partly aspirational. Also, it cannot be assumed that the changes described are entirely positive. If there is one constant in the field of children affected by armed conflict, it is the need for critical reflection aimed at improving our work.

An Ecological Systems Framework

In the 1990s, Western conceptual frameworks for psychopathology, most notably that of the Diagnostic and Statistical Manual of Mental Disorders (4th ed.; American Psychiatric Association, 1978), guided the research by many psychologists on war-affected children. Particularly prominent were studies of the incidence of problems such as PTSD, depression, and anxiety (Apfel & Simon, 1996; Yule, Stuvland, Baingana, & Smith, 2003). For the most part, this research had an individual focus insofar as the problem—mental disorder—was located within individuals.

Over the past decade, however, research has been guided increasingly by an ecological systems framework (Betancourt et al., 2013; Boothby, Strang, et al., 2006; Dawes & Donald, 2000; Miller & Rasco, 2004; Reed, Fazel, Jones, Panter-Brick, & Stein, 2012; Tol, Jordans, Kohrt, Betancourt, & Komproe, 2013; Ungar, 2012) that is rooted in the work of Bronfenbrenner (1979). Ecological frameworks emphasize the importance of children’s social environment, which is frequently broken down into micro-, meso-, and macrosystems, with extensive interactions occurring within and across levels. Similarly, children’s social ecologies are depicted as nested circles with the child at the center and surrounded by family, community, societal, and international levels. Within each level, there may be diverse actors and social relations. For example, the community level may include schools, peer groups, religious groups and institutions, community action groups, and formal actors such as the police.

A benefit of this approach is that it enables a much more nuanced understanding of how children are affected by armed conflict. Research on PTSD in war-affected children has typically focused on the effects of exposure to horrendous, potentially overwhelming events such as attack, seeing people killed, seeing dead bodies, and so on. Yet some of the greatest sources of suffering for war-affected children are everyday sources of distress (Miller & Rasmussen, 2010; Wessells & Kostelnky, 2012) that arise from the transformation of their social environment and the proliferation of risks at multiple levels. These risks include displacement, loss of loved ones, separation from parents or caregivers, family violence, sexual exploitation and abuse, trafficking, living and working on the streets, HIV and AIDS, engagement in dangerous labor, recruitment by armed forces or armed groups, or trafficking, among many others. Many of these risks intertwine with and stem from wider, macrolevel risks such as chronic poverty, discrimination, or weak or bad governance (Collier et al., 2003).

Ecological approaches also help to depict the environmental transformations ushered in by war as both cause and effect. They not only cause significant harm and distress but also constitute changes in children’s well-being, which in many developing countries is defined in relational terms rather than individual terms. For example, if war-affected, highly stressed parents beat their child more severely, that beating harms the individual child and also the child-parent relationship that children see as essential for their well-being. Ecological approaches capture the relational and trans-
actional complexities in children’s lives better than do individually focused approaches.

Ecological systems frameworks invite researchers to think less about individual problems than about the multiplicity of risks that arise in children’s social environments, and to look beyond issues such as attacks and killing and take stock of the diversity and complexity of the threats that children face in zones of armed conflict. Thus they move beyond the reductionist, individual emphasis that is inherent in pathology-focused frameworks. In contrast to strictly curative approaches, they encourage practitioners to reduce the preventable risks to children in war zones, thereby strengthening prevention. At the same time, they provide a more contextual understanding of psychopathology in war-affected children.

In regard to intervention, ecological approaches encourage interventions that feature work at family, school, and community levels. Such multilevel approaches are much more likely to be effective than are single-level approaches. Multilevel intervention approaches are also instrumental in addressing one of the greatest challenges in war zones—the paucity of quality supports for severely affected children. In some developing countries affected by war, there are only a few psychiatrists or clinical psychologists, who are hopelessly overburdened. For this and other reasons, there is increasing emphasis on integrating mental health supports into primary care, organizing step-down care, and supporting low-cost, community rehabilitation approaches (Patel et al., 2007).

Ecological systems frameworks, however, are still in their early stages of development. No unified ecological systems framework exists. Also, in emphasizing children’s social ecologies, one should keep sight of the importance of individual factors such as temperament and self-regulation (Masten, 2001). Further, it remains unclear which elements, processes, and interactions have the greatest impact on children living in war zones or offer the greatest leverage in supporting war-affected children. Much needed is research on the effects of social transactions at different levels and across levels (Dawes & Donald, 2000; Tol, Jordans, et al., 2013).

Resilience

Both research and practice over the past two decades has shifted away from deficits approaches toward resilience-oriented approaches (Boothby, Strang, et al., 2006; Fernando & Ferrari, 2013; Luthar, 2006; Masten & Narayan, 2012; Ungar, 2008, 2012; Wessells, 2012). This shift has occurred not only in regard to war-affected children but also more broadly to child development, areas such as disaster risk reduction, and diverse areas of scientific inquiry (Ager, 2013; Masten, 2014; Masten & Narayan, 2012; Masten & Obradovic, 2008). Whereas deficits approaches emphasized problems such as psychopathology among war-affected children, resilience approaches emphasize war-affected children’s ability to cope with, adapt to, and navigate complex environments that are saturated with adversity. The shift toward resilience approaches is based, in part, on evidence showing that the majority of war-affected people do not develop PTSD or other mental disorders (Steel et al., 2009). Many children exhibit remarkable functionality and well-being amid circumstances that might have been expected to produce negative outcomes (Masten & Narayan, 2012; Reed et al., 2012; Wessells, 2006). Also, evidence of post-traumatic growth (Bonanno, 2004; Calhoun & Tedeschi, 2014) has indicated that it is misleading to think of PTSD as having only negative effects. At the same time, it is important to recognize that children in war zones such as Palestine may be exposed to such strong doses of violence as to produce relatively high levels of psychopathology (Qouta, Punamaki, & El Sarraj, 2003).

Most research indicates that resilience has multiple sources, including individual factors such as temperament, self-regulation, cognitive competence, self-efficacy, and hope (Luthar, 2006; Masten, 2001; Masten & Narayan, 2012). The importance of the social environment is indicated by evidence showing that the potentially negative effects of exposure to risk factors can be offset or mitigated by protective factors (Rutter, 1979, 1985). Although war zones have many risk factors, they may also contain protective factors for children such as being with caring parents or adults, access to education, peer support, and religious support, among others (Betancourt & Khan, 2008). If a child is exposed to a greater number or strengths of risk factors than protective factors, she will likely experience negative outcomes. Yet if the protective factors equal or outweigh the risk factors, she may exhibit well-being even under adversity. From this standpoint, resilience is dynamic rather than static. A child who does relatively well and exhibits resilience at one moment due to a preponderance of protective factors over risk factors may become overwhelmed and dysfunctional if, at a subsequent moment, the balance is disrupted and risk factors dominate.

Conceptualizations of resilience are increasingly systemic in orientation (Cicchetti, 2010; Masten & Narayan, 2012) and feature the complex interplay over time of risk and protective factors in children’s social ecologies, individual factors such as temperament, and biological factors, including neurological and epigenetic factors (Sweat, Meaney, Nestler, & Akbarian, 2013). In this view, children’s development is embedded within interacting systems that range from the individual to the community level. Resilience is not a property of children per se but of the interacting systems mentioned above. Indeed, resilience has been defined as “the capacity of a dynamic system to withstand or recover from significant challenges that threaten its stability, viability, or development” (Masten & Narayan, 2012, p. 231). This view resonates with conceptualizations of resilient collectives, such as families (Masten & Narayan, 2012), communities (Wessells, 2012; Norris, Steen, Pfefferbaum, Wyche, & Pfefferbaum, 2008), and societies.

The shift toward resilience approaches has significant implications for practice. Deficits focused approaches were limited in their focus on disorders and frequently overlooked the coping ability of war-affected children, who were portrayed as victims. They also led to unsustainable programs such as stand-alone Western counseling centers that collapsed when the external funding had ended. In contrast, resilience approaches encourage practitioners not merely to address deficits but to enable the well-being of war-affected children. In addition, resilience approaches encourage practitioners to work simultaneously to reduce risks and strengthen protective factors. By emphasizing children’s coping and adaptation, resilience approaches heighten attention to children’s agency, which itself is important for healing (Hobfoll et al., 2007; Masten & Narayan, 2012) and a valuable intervention resource and a source of dignity and well-being for war-affected children. Conceptualizations of resilient systems have encouraged practitioners to focus more on developing resilient families, communities, and societies, thereby strengthening the focus on collective well-being.

This article is copyrighted by the American Psychological Association or one of its allied publishers. This article is intended solely for the personal use of the individual user and is not to be disseminated broadly.
and transforming war-affected children’s social ecologies (Norris et al., 2008; Wessells, 2012).

A critical issue is that theorizing about resilience remains in its nascent stages, because there are numerous, competing definitions of resilience (Barber & Doty, 2013) and no well-established theory of resilience exists at this juncture. Also, an emphasis on the resilience of war-affected children can obscure the fact that significant numbers of children suffer problems such as PTSD and depression, do not exhibit resilience, and need specialized interventions. To speak of most war-affected children as resilient can create the impression that they are fine and need no additional support, when the majority do need support in gaining access to quality education or appropriate shelter, or in addressing the chronic poverty that, left unattended, may cause them to drop out of school in order to work and earn money to help support their families.

Child Protection

Globally, psychosocial support for war-affected children has become thoroughly intertwined with work on child protection, which relates to “the prevention of and response to abuse, neglect, exploitation, and violence against children” (Child Protection Working Group, 2012, p. 13). Child protection is closely related to the mental health and psychosocial well-being of war-affected children. In conflict settings, child protection actors work to prevent risks such as sexual exploitation and abuse, recruitment into armed forces or armed groups, or separation of children from their families. In this respect, child protection is the preventive arm of efforts to support children’s mental health and psychosocial well-being.

Over the past decade, the global child protection sector has shifted away from protecting particular groups of vulnerable children, such as sexually abused children or children living or working on the streets, toward strengthening national child protection systems (Wulczyn et al., 2010). The former approach overlooked connections across categories of vulnerability. For example, a child who lives on the streets today might become a child soldier tomorrow (Wessells, 2006; Zack-Williams, 2013). The shift toward child protection systems strengthening aimed to correct these limitations and recognized that systemic issues require an equally systemic approach.

The United Nations Children’s Emergency Fund (UNICEF) has defined child protection systems as “certain formal and informal structures, functions and capacities that have been assembled to prevent and respond to violence, abuse, neglect, and exploitation of children” (UNICEF, UNHCR, Save the Children, & World Vision 2013, p. 3). Child protection systems include laws and policies, human and financial resources, governance, means of data collection and system monitoring, child protection and response services, and nonformal supports of families and communities. Formal governmental actors such as social welfare officials, police, government social workers, and magistrates lead the child protection system at national and subnational levels. At grassroots levels, nonformal actors such as families, communities, and leaders such as elders, teachers, or religious leaders play a highly visible role. At societal levels, the media, government leaders, and civil society organizations may contribute to children’s protection. Because problems such as child trafficking cross international boundaries, international actors also contribute to or support national child protection systems.

This systemic approach is congruent with the ecological systems approach discussed above and promises to improve efforts to prevent violence against children (UNICEF et al., 2013). The systems approach encourages child protection and psychosocial practitioners in war zones to enable collaboration between government and nonformal actors in protecting children, or address systemic issues such as the discrimination against girls or minority groups of children who have little protection under the law. It also encourages practitioners to make connections across humanitarian sectors such as education, health, and social welfare. Although systems strengthening is best done in more stable contexts, it may be possible to work even in war zones in a way that simultaneously provides urgent assistance and provides sustainable, longer-term supports via system strengthening (World Health Organization, 2013). As pointed out in the global standards on child protection in emergencies, “... the response phase may provide an opportunity to develop and strengthen national child protection systems, including community-based systems” (Child Protection Working Group, 2012, p. 30).

Numerous concerns surround efforts to protect children and strengthen national child protection systems. Such efforts frequently exhibit colonial, universalist biases in which models developed in countries such as the U.S. and the U.K. are exported to developing countries (Freymond & Cameron, 2006; Wessells, 2015). These efforts fail to recognize that there is no “one size fits all” approach. Systems strengthening efforts have also been dominated by a top-down approach in which the government or international actors have imposed particular structures such as community-based child protection committees. Imposition typically leads to low levels of community ownership and sustainability (Wessells, 2009a), and can trigger backlash and frustration among local people (Wessells et al., 2015). A stronger approach is to avoid strictly top-down work in favor of a mixture of top-down, bottom-up, and middle-out approaches (Wessells, 2015).

On the practical side, it has been difficult to achieve highly effective coordination of work on mental health and psychosocial support for war-affected children. Under existing global standards and guidelines, war-affected children are entitled to psychosocial support, and to referral and specialized treatment if they need it. Yet in many contexts, psychosocial work is poorly coordinated with that on mental health, and there is a paucity of effective referral mechanisms and quality specialized care for war-affected children. Part of the problem is that aid is organized into clusters, such as the health cluster, the shelter cluster, the education cluster, and the protection cluster, with each cluster coordinating the work of many agencies and actors. Whereas psychosocial work is coordinated under the child protection subcluster, mental health work is usually coordinated under the health cluster. It has proven difficult to enable effective communication and collaboration across clusters, a point that will be returned to below.

Ongoing Challenges in the Field of Children Affected by Armed Conflict

In addition to the concerns identified above, numerous challenges continue to limit the understanding of and the organization of effective supports for children affected by armed conflict and
are too numerous to review here. Of high importance are the ethical challenges associated with research and practice regarding children in war zones, which have been reviewed elsewhere (see Graham, Powell, Taylor, Anderson, & Fitzgerald, 2013; Wessells, 2009b). This section raises four main challenges that perhaps have not received the attention they deserve.

### Limited Evidence Base

The field of children affected by armed conflict is limited by a weak evidence base (Betancourt & Williams, 2008; Boothby, Strang, et al., 2006; Tol et al., 2011; Tol, Jordans, et al., 2013; Wessells, 2006). Indeed, extant global guidelines and standards on child protection and also on mental health and psychosocial support are based more on practitioner expertise, which is a valuable source of evidence and yet not as strong as evidence based on independent research using robust designs (Wessells & van Ommeren, 2008). Overall, there is a paucity of empirical evidence regarding which interventions were effective, much less their comparative effectiveness or their cost effectiveness or scalability.

In the child protection sector, relatively few studies have used robust designs that enable causal attribution or broad generalization to national populations. With a few notable exceptions (e.g., Betancourt, Brennan, Rubin-Smith, Fitzmaurice, & Gilman, 2010; Boothby, Crawford, & Halperin, 2006), there has been a shortage of developmentally oriented studies that analyze the developmental trajectories of war-affected children over time.

Fortunately, as illustrated by the papers in this special issue, much empirical research on war-affected children is under way, and attention is also being given to the use of more robust designs (e.g., Bass et al., 2013; Bolton et al., 2007; Tol, Song, & Jordans, 2013). This movement toward the use of robust designs, however, should be moderated by use of humane methods that respect people’s voice and agency and also by a recognition that randomized control trials are not always feasible or the best starting point in war zones (Boothby et al., 2012). Equally important, practitioners have shown increased interest in and commitment to developing a stronger evidence base regarding war-affected children, as reflected in the work plans of the global Child Protection Working Group (www.cpwg.org). Valuable networks such as the Child Protection in Crisis Learning Network (www.cpc.org) are enabling the collaboration of global Southern and Northern actors and academic-nongovernmental organization partnerships in developing the evidence base and using it to strengthen practice and policy.

### Low Contextual Sensitivity

In the quest to understand how children are affected by armed conflict, researchers have tended to impose Western models and measures that are presumed to be universal. This is part of a wider trend toward exploiting U.S. and Western psychology to non-Western contexts (Freymond & Cameron, 2006; Moghaddam & Lee, 2006; Wessells, 2009b). The push for universalization, however, has often encouraged questionable scientific practices such as taking instruments developed in countries such as the U. S. and applying them “off the shelf,” without adequate attention to external validity.

With respect to practice, the universalization tendency has led to the conduct of assessments that presuppose that the main problems of war-affected children are things such as PTSD or child protection issues as defined by international child protection workers. Such assessments frequently lead to Western interventions that do not fit the local context well. Not uncommonly, such interventions fall apart rapidly once external funding for them has ended (Harrell Bond, 1986; Wessells, 2009a, 2009b).

The use of preconceived, universalized measures also tend to marginalize indigenous understandings and practice, some of which have considerable value (Kostelný, 2006). During the war in Angola, for example, workers in a trauma-focused project had been measuring exposure to horrendous events and the expression of trauma symptoms (Wessells & Monteiro, 2000). Yet a highly skilled Angolan practitioner encountered a 10-year-old girl who had lost her parents and her home in an attack on her village who spontaneously said that her biggest problem was that she had to run away and had not conducted the burial rites for her parents. Asked why that was such a problem, the girl said that where she lived, people believed that when people died, their spirits did not automatically go to the realm of the ancestors but remained trapped in between the visible world of the living and the invisible world of the ancestors. The spirits were seen as being upset and able to cause problems such as illness not only in the girl but in anyone who was around her. She said that the local burial rituals needed to be conducted in order to honor the ancestors and enable the parents’ spirits to transition to the realm of the ancestors. Such practices constitute local, sustainable strengths that could be used to support war-affected children in that context, yet they would likely be neither identified nor used in Western, universalized approaches.

Fortunately, there are numerous ways of addressing this challenge. Perhaps the most important is to listen first, grounding one’s expert knowledge. This can be done in a systematic manner by using methods such as ethnography (Eggerman et al., 2010), and participatory ranking (Stark, Ager, Wessells, & Boothby, 2009), among others. Also, one can use the findings from open-ended qualitative methods to derive locally relevant indicators of children’s distress or well-being, and then incorporate measures of those indicators in quantitative surveys (Bolton & Tang, 2002). Further, practitioners can intermix local and Western approaches in their practice, thereby including universalized problems such as depression and culturally particular problems. In the Angolan example above, the Angolan practitioner, Carlinda Monteiro, and her team subsequently worked not only on Western defined issues such as trauma but with traditional healers on local maladies such as spiritual distress (Wessells & Monteiro, 2004).

### Nonholistic Approaches

Two decades ago, the landmark UN Study on Children and Armed Conflict led by Graca Machel (1996) detailed the holistic effects of armed conflict on children and called for holistic approaches to supporting war-affected children. This call was reinforced by the 10-year strategic review of the Machel Report (UNICEF, 2009) as well. Even today, however, these calls remain largely unanswered.

Nonholistic, fragmented approaches owe largely to the deeply fragmented humanitarian architecture (Minear, 2002). Workers in the water and sanitation sector, for example, may not see psychosocial support for war-affected children as their priority or as
within their expertise. Yet the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* call for integrating a psychological lens into the provision of supports in multiple humanitarian sectors (*IASC, 2007*). In regard to the shelter sector, for example, they call for privacy, the lack of which is a significant source of distress for displaced people, and also for provision of space where burial rituals and other cultural practices may be conducted. As mentioned above, it has proven to be challenging to get practitioners to engage in the intersectoral collaboration that is needed (*Williamson & Robinson, 2006*). Practitioners may feel out of their depth in attempting such integration, and they may feel that their main priorities are those defined by their particular sector. In addition, practitioners’ approaches frequently reflect donor priorities, which themselves tend to be siloed.

Nonholistic approaches are particularly evident in regard to psychosocial and child protection issues that interconnect with economic problems. Due to their families’ lack of money, war-affected children frequently drop out of school and engage in dangerous work, join armed groups in order to earn money, or engage in sex work as a means of survival. Also, chronic poverty is part of the problems of structural violence (*Christie, Wagner, & Winter, 2001*) that are drivers of many of the problems facing war-affected children. Addressing such problems requires multidisciplinary collaboration across economics, child protection, and psychology, yet effective collaboration has been relatively rare. Economic interventions such as the provision of cash have typically been designed to focus on adults and household income, and the results have seldom benefited children (*Child Protection in Crisis Learning Network, 2011*). Similarly, psychosocial or child protection supports developed by psychologists have often not included economic components that could, for example, enable children to earn money on a sustainable basis while also attending school.

### Low Levels of Child Agency

Children’s rights to participation are a pillar of the UN Convention on the Rights of the Child and also regional standards such as the African Charter on the Rights and Welfare of the Child. Among practitioners, child participation is a cornerstone of existing standards and guidelines, and it is something of a mantra heard frequently in meetings.

Nevertheless, meaningful child participation remains an elusive goal, because children affected by armed conflict are frequently voiceless and invisible. Also, most assessments of war-affected children are designed and conducted by adults, who may not be fully attuned to the perspectives of girls and boys of different ages and social positions. Typically, it is adults who develop widely used interventions such as child protection committees (*Wessells, 2009a*), as well as child-friendly spaces (*Kostelnky & Wessells, 2013*). Although children may be consulted, their participation tends to be tokenistic, because they hold little real power to make decisions. Such treatment of children is often grounded in intersectoral collaborations that do not fit local contexts (*Boydren, 1990*).

Low levels of child participation not only rob children of a sense of empowerment but also undermine their wider agency, which is essential for healing, developing a sense of self-efficacy, and making meaning in difficult circumstances (*Bandura, 1989, 2001; Barber & Schluterman, 2009; Hobfoll et al., 2007; Masten & Narayan, 2012*). Further, children’s agency is a largely untapped source of support for war-affected children. Empowered children tend to draw on their strengths and insights and use their social networks and creativity to help develop effective supports for other children. Indeed, the UN Security Council Resolution 2250, adopted December 9, 2015, pointed out the importance of youth, including teenagers, as peacebuilders and as people who can help develop means of preventing violent conflict and thwarting terrorism. Tacit within this resolution is the idea that young people are political actors who have political consciousness and who can potentially use their capacities for peace with social justice.

However, it should be recognized that the push for child participation derives in no small part from Western conceptions of childhood. In many societies, social norms require that children be seen but not heard, as they are expected to defer to and obey adults. If this cautions against cultural relativism, it should not be taken as a warrant for imposing Western views. An important first step in avoiding imposition is to initially gain an understanding of local constructions of childhood. This step is seldom taken by psychologists and child protection workers. Through subsequent dialogue with local people, one can find commonalities between various traditional practices and those encouraged by Western ideas of childhood. This dialogue may lead to social change in the direction of greater child participation but without trampling local beliefs and practices (*Cook & Du Toit, 2005*).

Diverse means exist for making children’s agency more central in research and practice regarding war-affected children. One is participatory action research (PAR) in which people define a problem, identify a means of addressing it, and themselves implement and evaluate it. Quite often, outside facilitators and researchers help to support this work. Applied to teenagers, the PAR approach empowers young people to identify and address their own, self-defined problems, often with mentoring, facilitation, and capacity building by others. In postconflict zones, PAR approaches have yielded positive results for war-affected children such as girl mothers (*McKay, Veale, Worthen, & Wessells, 2011*). An important ethical caution, however, is that participatory, group-oriented methods are not appropriate in all contexts. In zones of active conflict, they may cause intended harm, as youth meetings may be seen as venues for recruitment, political activism, or terrorism.

### Overview of This Issue

This special issue brings together the work of distinguished researchers whose efforts help to illuminate how armed conflict affects children, particularly in regard to their lived experiences and psychosocial well-being. The papers span widely differing contexts, including Nepal, Sierra Leone, Somalia, Sri Lanka, Uganda, and Canada (for refugees from Rwanda and Angola). Conceptually, the papers are informed by ecological systems and resilience frameworks, attend to child protection, and demonstrate respect for children’s agency. Methodologically, they exhibit a commitment to learning from and into account children’s views, voices, and lived experiences; analyzing gender and context differences; and using mixed methods.

*Kohrt et al. (2016)* examine children’s pathways for joining the Maoist armed group in a communist revolution against the Government of Nepal. Their data show that 80% of child soldiers,
particularly girls, were not forced but had decided to join the armed group. Important gender differences emerged in regard to what motivated decisions to join the armed group. Whereas girls were more likely than boys to cite the importance of personal connections with members of the armed group, inability to achieve other goals in life, and the appeal of the armed group’s philosophy, boys were more likely than girls to cite the importance of poor economic conditions. These differences remind us that “war-affected children” differ considerably according to gender, and that girls and boys will need differing prevention and reintegration supports.

Next, Stark, Landis, Thomson, and Potts (2016) analyze the situation of young female survivors of sexual violence in northern Uganda. During one year, they tracked the views of young survivors not only on the sexual violence itself but also on the formal and informal supports that were present in their social ecologies. Stigma was found to be the greatest source of psychosocial distress for the girls, who were frequently blamed for what had happened. The girls benefited from informal support, mostly from their friends and also from their family networks. However, informal supports were highly complex and not uniformly helpful, as family members sometimes added to girls’ stigma. Their study underscores that for survivors of sexual violence, formal supports are not enough and that more attention should be given to working with survivors’ families and communities, enabling them to provide supports of high caliber.

Kostelny and Ondoro (2016) investigate the problems facing internally displaced children in Somaliland and Puntland, the two more stable areas within Somalia. Using ethnographic methods, they show that internal displacement and structural violence are interconnected. In contrast to media emphases on physical attacks, they report that the most serious harms to children were everyday stresses such as being out of school; pressure to sniff glue, chew khat, and drink alcohol; heavy work; parental neglect; and exposure to sexual violence. These local views offer a different perspective from those of traditional, expert driven child protection methods that elicited emic understandings and perspectives, they identified significant spiritual problems associated with evil spirits and witchcraft, and also moral problems associated with the use of violence to solve problems. Within an ecological resilience framework, they identified mostly nonformal resources for children at individual, family, and community levels, and they call for improved connections across the supports at those levels. Their findings highlight the gap that frequently exists between local understandings of war-affected children and those constructed by international agencies.

Efevbera and Betancourt (2016) report on the biggest expressed needs of youth in pre-Ebola Sierra Leone, at both six and eight years after the war had ended. In a free listing methodology, youth identified mostly problems that were not related to armed conflict per se but to current daily stresses such as difficult economic and living conditions. These finding serve as a poignant caution against the frequently made assumption that the conflict itself or psychological disorders such as PTSD and trauma are the main problems young people face in post war zones. They also remind us of the importance of listening to young people’s views of their own lived experiences.

Collectively, these empirical papers add to our base of understanding the situation, needs, and strengths of war-affected children. They help to set the stage for the second special issue (forthcoming) in this journal on children affected by armed conflict, which addresses interventions on behalf of war-affected children. Together, the two issues give a picture not only of a rapidly developing field but also of the enormity of children’s needs and the availability of appropriate intervention strategies. All the authors hope that these special issues will help to invite future generations to use their psychological knowledge to support the well-being and rights of war-affected children.

References


