
What About the Camp Followers – and their Children?¹

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Abstract

UN Security Council Resolution 2396 (2017) on Foreign Terrorist Fighters (Returnees and Relocators) urges nations to improve information and evidence sharing while developing tailored prosecution, rehabilitation and reintegration strategies; including programs addressing radicalization in children associated with “Foreign Terrorist Fighters.” The need for such programs has gained urgency since the collapse of Islamic State (IS)/Daesh, with the detainment of IS family members in overcrowded camps in Syria, and their uncertain fate following the Turkish military Operation PEACE SPRING, in October 2019. Approximately 2 million children underwent Daesh indoctrination June 2014 – 2019, and this process continues to be led by women in many detention camps. The heightened sense of vulnerability to terrorist attacks in Western nations has led many nations to refuse the return of children to their home country, or initial entry - fearing that their past radicalization will lead to future terrorism. Such decisions contravene, among other instruments, the UN Universal Declaration of Human Rights (1948), Convention on Refugees (1951), Convention on the Reduction of Statelessness (1961), the Convention on the Rights of the Child (CRC 1989), and the Optional Protocol to the CRC on Children in Armed Conflict (OPAC, 2000). This paper examines emotional traumas experienced by Daesh “camp followers,” particularly the children, and the psychological rehabilitation and social reintegration challenges they face as they grow to adulthood. This paper argues that the psychosocial support needed for rehabilitation and reintegration is better found in Western societies than in refugee camps, which are often incubators for future terrorists.

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Introduction

The collapse of Islamic State (hereafter called Daesh) as a geographic entity in late March 2019 contributed to swelling the largest number of forcibly displaced people in world

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history.³ This paper argues that Daesh *camp followers* (i.e. non-combatant women and children) should be allowed to return to their country of origin based on international law and moral reasons. The paper discusses how failing to do so opens Western nations to the potential development of a new generation of radicalized youth. This paper describes the environmental (i.e. climatic and psychosocial) conditions that Daesh are living in northeastern Syria and the extensive psychosocial barriers to reintegration prior to explaining some ways of addressing this problem. Finally, the paper argues that repatriation of carefully vetted camp followers is worth the financial cost and the risks of importing terrorism or radicalized future terrorists, as leaving them in detention camps reinforces the prevailing Daesh narrative of victimization by colonialist Western nations.

Humanitarian Crisis

Ursula Mueller, Deputy Emergency Relief Coordinator of the United Nations (UN) Office for the Coordination of Humanitarian Affairs (OCHA) briefed the UN Security Council that there are 11 million people requiring regular assistance in Syria, of which 5 million require “acute assistance” (UNSC, 2019, 19 December). According to the 14 November 2019 *Joint Communique of the Ministers of the Global Coalition to Defeat ISIS*, approximately 7.7 million people “were liberated from Daesh/ISIS control.”⁴ Furthermore, the launch of military operations in northeast Syria by Turkish Armed Forces and allied non-state groups on 9 October has forced more than 200,000 people to flee their homes (OCHA, 2019, 25 December).

Prior to the start of Operation PEACE SPRING on 9 October 2019, northeast Syria became a temporary home for approximately 710,000 people displaced from earlier phases of the conflict, around 91,000 of whom remain in camps located at Al Hol, Areesha, Newroz and

³ Approximately 72 million (m) people are now refugees, of which 41.3 m are internally displaced people (IDP), 25.9 m are refugees, and 3.5 m are asylum seekers. The largest concentration is 6.7m in Syria. (UNHCR *Figures at a Glance*, 19 June 2019, retrieved from <https://www.unhcr.org/figures-at-a-glance.html>)

⁴ <https://www.diplomatie.gouv.fr/en/french-foreign-policy/security-disarmament-and-non-proliferation/news/news-about-defence-and-security/article/joint-communique-by-ministers-of-the-global-coalition-against-daesh-washington>

Roj in Al-Hasakeh Governate, Abu Khashab in the Deir-ez-Zor Governate, and Mahmoudli in the Ar-Raqqa Governate. As of 18 December 2019, 70,590 people remain displaced from Al-Hasakeh, Ar-Raqqa, and Aleppo Governorates, with 53 percent of these people finding temporary residence in the Al-Hassakeh Directorate – home of the Al-Hol Internally Displaced Person (IDP)/detainee camp. (OCHA, 2019, 25 December; 29 December).⁵

Many Daesh fighters, their supporters, and families, i.e. their *camp followers*, hold Western nation passports. Approximately 42, 000 of these people come from 120 nations other than Syria and Iraq (EU RAN, 2017, p. 15, para. 2.1). Cook & Vale (2019, Abstract) report that this figure may be as high as 52,808 foreigners, of which 6,902 are foreign women and up to 6,577 are foreign minors. The Child Justice Advocacy Group ((CJAG), 2020, 28 January) quotes Cook & Vale’s (2018) estimate that 4,640 children travelled to Iraq or Syria, either alone or with their families, from more than 80 countries to join Daesh before and after the declaration of the caliphate in June 2014. CJAG (2020, 28 January) also quotes Cook & Vale’s (2019) report that approximately 1,460 children who travelled to, or were born in, Iraq or Syria to parents who left their home countries to join Daesh have since returned to their countries of origin.⁶

Whatever the precise figure of foreign returnees and minors, Western Europe and North American governments are refusing their return home based on the fear that the adults

⁵ Precise numbers of Daesh camp followers are difficult to verify in the confused, fluid conditions of a conflict zone. According to Mekhennet & Warrick (2016, 7 October) there were approximately two million children within the total population of six million within the geographic Daesh boundaries. Population estimates after the collapse of Daesh are much smaller. Al-Ghwell (2019, 29 December) states that “Daesh controlled more than 50,000 square kilometres of territory in Syria and Iraq, covering a population of roughly 4 million people.” In November-December 2019 three new informal IDP settlements were established at: Tweineh (estimated 4,120 people), Tal-Samen (estimated 20 people) and Daham (estimated 1,800 people) whereas fighting forced the evacuation of the Ein Issa and Mabroka camps closer to the Turkish-Syrian border. According to UNHCR, as of 30 November, more than 17,500 people have crossed into neighbouring Iraq (UNSC, 2019, 19 December; OCHA, 2019, 29 December; 25 December). As of 18 December 2019, an estimated 129, 041 displaced people are reported to have returned to their places of origin, the vast majority of whom are Syrian and Iraqi citizens. Of these, 118,936 have returned to Al Hasakeh and Ar-Raqqa Governates, including: 18,200 to Qamishli, 7,625 to Tal Tamer, 8,425 to Al-Malikeyyeh, 42,869 to Ras Al Ain and 41,817 to Tal Abyad in Ar-Raqqa. Of these returnees, an estimated 50,000 people have returned to areas currently under Turkish control. In Aleppo 10,105 have returned, mainly to Menbij.

⁶ The countries from which most children have been recruited are France (460-700), Morocco (391), Kazakhstan (390), Tajikistan (293) and Germany (290) (Cook & Vale, 2018).

are radicalized to violence, and it is anticipated that their children have been, or will be radicalized to violence. The estimated number of non-Syrian or Iraqi citizens is estimated to be between 10 to 11, 000, of which 7000 are children under age 12 (HRW, 2019, 23 July; IRC, 2019, 16 September). However, than 350 children born to other than Syrian or Iraqi parents living in the three camps in northeast Syria are known to have been repatriated to their home country between January and early October 2019 of the more than 9,800 in the three camps in northeast Syria. Between January and early October 2019, Kazakhstan took back 156 children— slightly more than 50% of all children known to have been repatriated. In Europe, Kosovo repatriated 74 children, France 17, and Sweden 7 among others. Other European countries who have repatriated their children include Belgium 6, Norway 5, the Netherlands 2, and Denmark repatriated one child. (Save the Children, 16 October 2019). Given that at least six international law instruments⁷ should protect such vulnerable people, this relatively low repatriation ratio of 0.0357 percent begs the question of “why so low?”

The repatriation issue gained urgency with the 11 November 2019 decision to deport captive Daesh fighters and their camp followers from Turkey to their countries of origin (Onishi & Pelletier, 2019, 17 November) and with decisions by Australia, Belgium, Germany, the Netherlands, and the United Kingdom (21 November 2019) to approve the return of orphans and small children.⁸ This paper argues that vulnerable people of suspect loyalty should be permitted to return after a threat-risk assessment - as it is the safest course of action to facilitate the long-term deradicalization of more indoctrinated children and young people – and to prevent, or at least hinder, the reconstitution of Daesh on a conventional battlefield.

Daesh remains a potentially potent enemy to the Western nations since its ideology persists in the detention camps and jails in Syria and Iraq, and to a lesser degree in the European countries where some former fighters and camp followers have returned. Many Daesh camp followers experienced aerial and artillery bombardment, witnessed torture and

⁷ The international law instruments are the UN *Universal Declaration of Human Rights, 1948*; the *Geneva Conventions and Additional Protocols, 1949* (Convention 4); the *Refugee Convention, 1951*; the *Convention on the Reduction of Statelessness, 1961*; the *Convention on the Rights of the Child, 1989*; and the *Optional Protocol on the Rights of the Child in Armed Conflict, 2000*.

⁸ Source: <https://amp.dw.com/en/uk-to-repatriate-british-orphans-of-islamic-state-fighters/a-51359600>.

executions, and some have conducted executions under duress (EU RAN, 2017) before arriving in Internally Displaced People (IDP)/detention camps. Prior to their arrival – and after arriving in detention camps - many Daesh camp followers have suffered from, and will continue to suffer from mental health challenges, malnutrition and communicable diseases. It is highly probable that their incidences of long-term psychological trauma will be higher than in the general population based on the psychosocial environments in the detention camps.

Methodology

This paper addresses the moral, legal, political, medical, psychosocial, and practical reasons for repatriating selected Daesh camp followers through an examination of peer-reviewed articles, legal documents, humanitarian agency situation reports, and contemporary media reports on a rapidly evolving humanitarian crisis. No literature was found using this particular multi-disciplinary approach in describing the intertwined legal, political, and psychosocial issues. As such, it is a retrospective review that relies on an extrapolation of reported trends in these fields of inquiry. The case study method is used to examine the psychosocial conditions in Al Hol, largest and most well-documented IDP/detention camp in northeastern Syria, in anticipation that it reflects conditions in other IDP/detention camps in northeast Syria.

Case studies facilitate an in-depth exploration of complex problems (Creswell, 2009), such as the psychosocial impact of continued detention of non-combatant Daesh “camp followers” in theatre, post-conflict, and the potential challenges for Western societies in accepting returning Daesh children who are feared as future terrorists. Case studies can also illustrate the barriers to successful integration for traumatized children as they grow to adulthood in Western societies. The paper examines the conditions in Al-Hol with a view to explaining how environmental conditions contribute to psychosocial problems. Given that case studies are bounded by time and activity, this study describes the environmental (climatic and social) conditions in the largest detention camp in northeast Syria, drawing data from the humanitarian agencies running the camp, and international media who have reported on

conditions in the period from the collapse of Daesh in late March 2019 through early 2020. The purpose of this case study is to draw inferences as to how the social environment affects the psychological status of the Daesh camp followers, with emphasis on the children below 12 years of age living in the “Foreigners’ Annex.”

Impacts of Detention - Al Hol, a Case Study

As psychosocial conditions arise from, or at least influenced by the environmental conditions, a description of the conditions in the camps is necessary prior to describing the psychosocial impact of the environmental conditions on the inhabitants.

Conditions in the Al-Hol Camp

Al-Hol was built after the first Gulf War in 1991 to house Iraqi refugees (Moaveni, 2019, 5 September). It was re-opened in 2003 to house refugees from the second Gulf War as one of three camps. The camp was built to house 10, 000 Internally Displaced People (IDP) and refugees (UN Human Rights Commission (HRC), 2 July 2019). Its total area is less than four square kilometres. The UN, led by the Office for the Coordination of Humanitarian Affairs (OCHA), is working with 35 “partner” humanitarian agencies (OCHA, 2019, 29 May) in the providing relief. The massive influx of Daesh camp followers after the fall of Baghouz in March 2019 exceeded its capacity in almost any conceivable parameter as the population swelled to over 73, 000. Whatever the precise number, the following descriptions reflect the recent and forecast environmental conditions in the northeast Syrian detention camps. Al-Hol has been described as a “purgatory like existence” and an “appalling existence” (IRC, 2019, 16 September). Al-Hol could also be described as an ongoing humanitarian – and potentially political - disaster in slow motion for the reasons which follow.

Demographics. Providing verifiable statistics is challenging as officials admitting individual people into the camp did not conduct intake fingerprinting and facial recognition, as had been done for the male jihadists who had been arrested and imprisoned (Dunford &

Cafarella, 2019, 13 May). “Determining the precise number of children in the camp, along with their paternity and nationality, is also difficult. The camp prisoner lists are incomplete and do not align with governments’ lists of their citizens; there are people in the camp who are not on any list, and people on lists who do not appear in the camp at all (Zelin, 2019, October, p. 3 quoting Moaveni, 2019, 5 September). The most detailed OCHA report, *Situation Report No. 4*, dated 29 May 2019 states that the population of Al Hol is 73,782 people or 21, 331 households. The *Situation Report* observes that “the vast majority of the camp population are women and children (91%), with around 65% under the age of 12. The Al Hol camp population consists of Iraqis (43%), Syrians (42%) and Third Country Nationals (15%). (OCHA, 2019, 29 May). Sly (2019, 19 June); UN HRC, 2 July 2019; Zelin (2019, October, p. 3); and Moaveni, 2019, 5 September) quote the UN April 2019 population estimate of 73, 000; 94 percent of whom are women and children (UNSC, 2019, 19 December). Sly (2019, 19 June) quotes a UN estimate that 49, 000 of this total are children, with 95 percent being under age 12. Approximately 20, 000 children are under five years of age (Wright, 2019, 3 June), meaning that they have only known Islamic State rule and lifestyle. As of January 2020, the population of Al Hol is 66,101 people (18,208 households); comprising of 46 per cent Iraqis (30,724), 39 per cent Syrians (25,780) and 15 per cent third country nationals (TCNs) (9,597) (OCHA, 2019, 13 January).

Foreigners’ annex. Clarke (2019, 23 September) and Sly (2019, 4 October) state that approximately 10, 000 of the inhabitants of al-Hol come from countries other than Syria or Iraq, whereas Human Rights Watch (HRW, 23 July 2019) estimated 11, 000 people. OCHA (2020, 13 January) refines these estimates in stating that the figure is 9597 people – who are housed in the “foreigners annex” in the southeast corner of the camp. Wright (2019, 3 June) quotes OCHA figures that as at 29 May 2019, 20, 000 residents of al-Hol are under five years of age. Foreign women from over 40 nations in the Annex have given birth to approximately 700 children (Radio Free Europe, 27 June 2019, 1142 GMT; 00:30).

Few services are available inside the Foreigners’ Annex, and Annex residents also face extreme movement restrictions that constrain their access to these services outside of the

Annex. Health services in the Foreigners' Annex are also required beyond 17.00 hours; and the relatively fewer referrals from the Annex to field hospitals during December indicate Camp Administration place greater restrictions on Annex residents' freedom of movement, and women are for instance regularly forced to give birth alone in their tents. Lack of sufficient guards to provide security in the Annex to activate distribution sites remains a challenge for Camp Administration to provide timely and adequate assistance (OCHA, 2020, 13 January).

Infant and child mortality. The International Rescue Committee (IRC) reports that between December 2018 and 1 September 2019, 339 deaths of children were recorded - over 80% of the 406 total deaths in Al Hol camp to that date (IRC, 2019, 16 September). The most recent IRC data reveals that a third of these deaths occurred in tents, with children not even reaching medical facilities. The main causes recorded are severe malnutrition with health complications, diarrhea with dehydration and pneumonia - a proxy indicator of poor health conditions upon arrival and poor access to humanitarian assistance and basic health care.

Unaccompanied/separated children (UASC). OCHA *Situation Report No.4*, (29 May 2019) notes challenges in caring for 480 unaccompanied/separated children identified of whom 88 are in interim care units waiting for family tracing and reunification. There are also numerous pregnant girls and women (many under the age of 18), as well as unaccompanied elderly people and persons with disabilities. While children are dying across the camp, the highest numbers of deaths under age 5 are of children living in the Foreigners' Annex. Recent data indicates that a third of all child deaths since December 2018 were of children living in the Annex. Of the 339 deaths of children recorded by 1 September 2019, 90 (as of 1 August 2019) took place in the Foreigners' Annex to Al Hol. (IRC, 2019, 16 September). In just one week in December, 2019 mobile medical teams identified 2,000 medical cases – the majority children – in the Annex, and 73 cases of chicken pox were reported over a three-week period in November. Health services in the Foreigners' Annex are also required beyond 17.00 hours; and the relatively fewer referrals from the Annex to field hospitals during December indicate Camp Administration place greater restrictions on Annex residents' freedom of movement.

Security. As Zelin (2019, October, p. 2) describes, (the) “SDF⁹ has been burdened with maintaining an unsustainable status quo at the camp without a long-term vision or the resources for reintegrating and repatriating the women and children housed there...Facilitating a breakout for this population would also help restart the Islamic State’s multigenerational plan of socially engineering children by allowing them exposure only to life within the framework of its ideology.” Many NGO/IO partner agencies temporarily suspended humanitarian assistance activities due to security concerns from October to December 2019. OCHA assesses that the security situation in the camp worsened since the December 2019 update. Aside from battlefield trauma, traffic accidents, and disease adult deaths have occurred from fire and drowning – and murder (OCHA, 2020, 13 January). On 1 January 2020, two murders of a man and a woman were reported, with two other attempted murders reported in Phases 2 and 8, and kidnapping attempts of three children. On 19 December 2019, residents gathered at the Annex to protest the restriction of movement outside the camp, and gunfire to disperse the crowd resulted in the death of one child. Additionally, 14 tents were burned in December 2019, causing one death. Cases of theft continue to be reported, including at the distribution site in Phase 5, in communal kitchens and clinics (OCHA, 2020, 13 January).

Environmental Conditions

Food, clothing, and shelter. Inhabitants of the camps are subject to the vagaries of climate, with summer temperatures of approximately 100 degrees Fahrenheit to below freezing in winter.¹⁰ There is no guarantee of shelter in Al Hol. Tents are supplied by OCHA and by the humanitarian partner NGOs and IOs. Partners are in the process of replacing up to 3,000 tents across the camp with 1,177 tents already replaced in Phases (i.e. camp sectors) 1 and 2 and 1,762 requiring replacement in Phases 2, 3, 4 and 5. Heavy floods in December 2019 damaged many tents, mainly in Phases 5, 6 and 8. Food is often less than adequate for nutritional needs (Struys, 2019, 28 March). OCHA *Situation Report No. 4* (29 May 2019)

⁹ Syrian Defence Force.

¹⁰ <https://www.accuweather.com/en/sy/al-hasakah/311866/february-weather/311866?year=2020&view=list>

reports that 206 additional kitchens are needed, and that while fresh food and vegetables are available in the market, low purchasing power is a key barrier for a significant number of camp residents to diversify their diet. Malnourishment has been observed among children (Sly, 2019, 19 June). OCHA (2019, 1 August) noted that the number of acute cases of malnutrition with additional health complications had dropped over the previous month.

Water, Sanitation, and Hygiene. According to OCHA by August 2019, there had been an overall improvement in the water, sanitation, and hygiene situation in the camp with a new water pump being installed at Dabaghya Reverse Osmosis station serving around 25,600 individuals, in addition to four additional filling stations providing domestic water, two of which are located in Phase 1 (i.e. camp sector). A further seven water tanks have also been installed in the Foreigners' Annex (OCHA, 2019, 1 August). OCHA (2020, 13 January) reports that camp water quality was a critical issue in November and December 2019 due to noticeable turbidity in Phases (i.e. camp sectors) 1, 2 and 4 until humanitarian partners solved the problem with turbidity reported in Phase 1, with action ongoing as of 13 January 2020. Humanitarian partner agencies partners halted the delivery of unsafe drinking water and added new testing measures at the main gate. While all camp water tanks passed the quality standard, 20 per cent of jerry cans were contaminated. During three visits to the foreign annex section of al-Hol in June 2019, Human Rights Watch (HRW) found overflowing latrines, sewage trickling into tattered tents, and residents drinking wash water from tanks containing worms. OCHA (2019, 29 September) estimates that 20, 000 personal hygiene kits are needed per month and that the target would not be met from November 2019 onward. Garbage collection is inadequate. HRW reports that some children have skin rashes, emaciated limbs, and swollen bellies – a sign of malnutrition. These children were observed searching through mounds of garbage under a scorching sun or lay limp on tent floors, their bodies dusted with dirt and flies. Alexandra Bain, director of the Canadian Families Against Violent Extremism (FAVE) quotes reports from Canadian inhabitants of al-Hol that claim that SDF guards have shut down food delivery, medical clinics, and garbage collection on occasion (Brewster, 2019, 11 October).

Disease. Water-borne diseases are prevalent. Hundreds of cases of diarrhea have been observed according to Ramadan Zaher, manager of the Kurdish Red Crescent clinic (Sly, 2019, 19 June). Children are dying from acute diarrhea and flu-like infections according to aid groups and OCHA camp managers. (Sly, 2019, 19 June). OCHA (2019, 1 August) reported that the number of diarrhea cases dropped from 1,000 a week at the end of June to 657 at the end of July.

Health care. OCHA *Situation Report No. 4* (29 May 2019) observes that 35 humanitarian partner agencies continue to implement and scale up their response in Al Hol as three field hospitals were established in Phases (i.e. camp sectors) 1, 4 and 7. OCHA anticipated that the expansion of services will greatly improve people's access to life-saving health care and reduce the number of referral cases to neighbouring hospitals, with only the most critical cases transferred. OCHA *Situation Report No.4* (29 May 2019) reports that 12,000 children were vaccinated against measles and Measles, Mumps, Rubella (MMR). Specialist medical services are available through three delivery clinics, two HIV and TB clinics, and two static and two mobile teams for vaccinations and leishmaniasis.

According to OCHA (2020, 13 January), a humanitarian partner has confirmed Five mobile health care teams are providing primary health services in the Foreigners' Annex, where environmental conditions are particularly challenging. According to OCHA (2020, 13 January), there is still inadequate coverage of health services overall, particularly as winter weather puts more residents, including young children, at risk of seasonal illnesses. There are five mobile teams providing health, nutrition, reproductive health and immunization services, however there is an urgent need for permanent clinics, particularly in the Annex, Phases 6 and 8 (OCHA, 2020, 13 January). Most mental health partners who departed in October 2019 had resumed their activities by 13 January 2020 although gaps still remain, particularly in Phases (i.e. camp sectors) 5, 7 and the Foreigners' Annex, on key protection services including sustained and structured psychosocial support (OCHA, 2020, 13 January).

Education. OCHA *Situation Report* (concerning al Hol) No. 4 (29 May 2019) provides the precise figure of 23,328 children aged 3 to 19 years old in the camp. Of these, 11,000 aged

6 to 18 are estimated to have not been exposed to learning for at least five years. Three UN partners are currently providing educational services in Al-Hol, reaching around 5,500 children, of which 480 are aged 3 to 5; activities are taking place in Phases (i.e. camp sectors) 1, 3 and 4. Existing partners, in addition to two more, are planning to reach a further 8,945 children, benefitting 13,134 in total. This will bring the provision of services to 56 per cent of the target population. Situation Report No. 4 concludes that “despite concerted efforts, the education sector will still have a gap of 46% of targeted children and youth. Currently, there are no interventions in Phases 2 and 4.”

Ideological Factories?

While the camp conditions are primitive and unhealthy, they create resentment among detainees of differing degrees of allegiance to Daesh. This can also lead to anger and resentment toward those who have incarcerated them, or who are perceived to have created the conditions for their incarceration, i.e. the Western democracies. Detainment camps and prisons may contain violent and potentially violent offenders but they can also have an unintended consequence of becoming an “ideological factories.” Although the majority of women fulfilled roles such as wives and mothers, others were members of the Khansaa Brigade, its all-female religious police unit. Many also worked as recruiters and propagandists; however, the more longitudinal problem may be their role as educators (Margolin, Cook, & Winter, 2019, 26 October, para. 9). As Simon Cottee and Mia Bloom (2019, 28 March) argue, the chief danger posed by the non-combatant women is not as fighters but as incubators of the next generation of IS fighters. Many of the *Ashbal al-Khilaifah* (Cubs of the Caliphate) propagandists; however, the more longitudinal problem may be their role as educators (Margolin, Cook, & Winter, 2019, 26 October, para. 9). As Simon Cottee and Mia Bloom (2019, 28 March) argue, the chief danger posed by the non-combatant women is not as fighters but as incubators of the next generation of IS fighters. Many of the *Ashbal al-Khilaifah* (Cubs of the Caliphate) children have been indoctrinated by

their parents to display absolute loyalty to IS, which after the age of nine has been reinforced through brutal training (EU RAN, 2017, p. 20). Kurdish security officials, affiliated with the U.S.-allied Syrian Democratic Forces (SDF), say they have the troops to guard the facilities but do little else. According to an unnamed intelligence official,

We can contain the women, but we can't control their ideology...There are many types of people here, but some of them were princesses among ISIS. There are spaces inside the camp that are like an academy for them now....The children need help here. You can see it...How do we stop them becoming their parents?" (Loveluck & Mekhennet, 2019, 3 September)

Dangerous Victims?

Daesh children are not necessarily innocent victims. This heightened sense of vulnerability to terrorist attacks in Western nations has led many nations to refuse the right of return to Daesh children and their caretakers - fearing that their previous or future radicalization by their mothers will lead to terrorism when they reach adulthood. Many Daesh boys have received religious-based military training (Alsaleh, 2019, August) from age 6. Some have been employed as executioners (EU RAN, 2017). Host nation fear of future terrorist violence is based on evidence, which has been corroborated, and widely publicized, leading to reinforcing the fear.

Such fears contravene many keystone U.N. legal instruments. With regard to the human rights aspects of the camp follower issue, earlier UN conventions on Universal Human Rights (1948), Refugees (1951), and Reduction in Stateless People (1961) and the Geneva Conventions and Additional Protocols of 1949 (Fourth Convention) describe a humanitarian approach to protecting vulnerable people.

Arguments against repatriation are at once vengeful and practical. If they are left to the vagaries of life in a detainment camp some will die due to living conditions and possibly violence in a future conflict. Arguments for repatriation are more difficult to make as programmes supporting social integration, ideological disengagement, and rehabilitation are

expensive, time consuming, and could be perceived as taking opportunities away from their non-radicalized peers. However, similar to child soldiers, without reintegration the children become more dangerous as adults as they will have few marketable skills and many will be forced by circumstances to turn to crime or to return to their roots in a future Daesh resurgence.

Al-Hol has been described as “a mini-ISIS caliphate,” and “Guantánamo in the desert” (Moaveni, 2019, 5 September). If Daesh children are left in the care of Syrian jailors and the influence of older more dedicated IS fighters their indoctrination will continue, and the probability of their becoming members of “IS 2.0” with a desire for revenge against the West will be more likely. Leaving the younger Daesh adherents to their own devices will almost certainly perpetuate the challenge of containing IS.

Discussion

The discussion addresses three essential topics: 1) the international law instruments which protect vulnerable people and their right to citizenship; 2) the psychological trauma suffered by many Daesh camp followers; 3) anticipated challenges in repatriation; and 4) practical reasons to repatriate Daesh camp followers in the face of forecast risks of radicalization and future terrorist violence.

Legal Arguments for Repatriation of Camp Followers

The presumed legal right of return of Daesh camp followers to the countries of citizenship has been complicated by marriage across nationalities, by remarriage following the death of an Daesh Foreign Terrorist Fighter spouse, by the birth of children within the geographic Daesh boundaries, by the death of both parents - and by the lack of documentation held by orphans, many of whom are rendered stateless, and unable to comprehend, let alone address their vulnerable situation. International law is designed to offer protection to these vulnerable people.

International Law

UN Security Council Resolution 2396 (2017) on Foreign Terrorist Fighters (Returnees and Relocators) is practical as well as aspirational in tone. First of all, it requires Member States to develop and implement systems to collect biometric data and to develop watchlists or databases of known and suspected terrorists, including Foreign Terrorist Fighters (FTF) while it also obliges Member States to require airlines operating in their territories to provide Advanced Passenger Information (API) to the appropriate national authorities and to develop the capability to collect, process, and analyze Passenger Name Record (PNR) data. FTF estimates range between 30, 000 to 40, 000 (GCTF, n.d. b), of which 20-30 percent are believed to be female, which would equate to 6, 000 to 8, 000 women. This number should be manageable within the national capacities of advanced Western democracies to monitor API and PNR. Secondly, UNSCR 2396 (2017) adds measurable benchmarks to the more aspirational S/RES/UNSCR 2178 (2014), which calls on Member States to prevent and suppress FTF recruiting, organising, transporting or equipping; to prevent and suppress FTF financing; and to prevent FTF travel. UNSCR 2396 (2017) calls on Member States to develop tailored prosecution, rehabilitation and reintegration strategies, including programmes addressing radicalization in prisons focused on the needs of children associated with “Foreign Terrorist Fighters.”¹¹ This second aspect is aspirational in nature, and is dependent on political willingness and readiness in terms of educational, medical, and psychosocial infrastructure to implement it. Finding the financial and human resources to implement such programs is where the challenge lies.

¹¹ The need for individually tailored assessments and reintegration programmes for non-combatant camp followers is seen in the Global Counterterrorism Forum (GCTF, n.d. b) report *Good Practices on Addressing the Challenge of Returning Families of Foreign Terrorist Fighters (FTFs)*, Section B: Individually Tailored Interventions, Good Practice Numbers 5- 7, pp. 4-6; and Section D: Responses for Returning Children, Good Practice Numbers 11-14, pp. 8-10. This report echoes the approach for adult FTFs recommended in GCTF report (GCTF, n.d. a), *Rome Memorandum on Good Practices for Rehabilitation and Reintegration of Violent Extremist Offenders*, Good Practice Number 3: An important first step can be developing an effective intake, assessment & classification system for new inmates, pp. 5-6; and Good Practice Number 8: Psychologists can play a key role in the rehabilitation process and could be fully integrated into these programs, p.8.

The Third Geneva Convention

International humanitarian law seeks to limit suffering during armed conflict, with a particular emphasis on non-combatants. The *Third Geneva Convention* (1949) describes camp followers as “civilians accompanying armed forces” in Article 4A (4)¹² if they are providing a service to an armed force engaged in an international conflict. The Convention definition does not necessarily apply to women and children as not all provide a direct service to Daesh fighters.¹³ Daesh camp followers are distinguished in numerous ways:

1. Customary international law regarding universal human rights, citizenship, refugees, stateless people, and children supports the argument for the right of return – or initial entry to Western democratic states. This unique characteristic of immigration to Daesh, with the assumed right of return to their country of citizenship, led to the specific mention of “returning and relocating” in UN Security Council Resolution (UNSCR) S/RES/2396 (2017), p. 3/13;
2. Enticement to immigrate to Daesh and initial indoctrination through the dissemination and consumption of sophisticated Internet propaganda. Approximately 45 percent of its media outreach focused on building and sustaining the caliphate, with messaging on “traffic police, charity work, judicial systems, hospitals and agricultural projects (Hamid, 2019, 31 October);
3. Daesh was built through world-wide recruitment, as citizens from 120 countries immigrated to join Daesh between 2014 and 2019
4. arranged marriages of teenage female Daesh immigrants soon after arrival to adult male Daesh fighters, many of whom were killed, leading to serial marriages for many young women, and subsequently,

¹² *Convention (III) Relative to the Treatment of Prisoners of War*, Geneva, 12 August 1949.

¹³ Camp followers have re-appeared in three distinct guises in 21st Century warfare: 1) private logistic contractors on fixed bases with roles in supporting the field force or in post-conflict reconstruction; 2) private military and security (PMSC) contractors providing field logistic support, armed guards, trainers, and direct action specialists; and, 3) the wives (some of whom are combatants) and the children of Daesh fighters, who are citizens of approximately 120 (EU RAN, 2017, p.15, para. 2.1) countries.

5. the birth of children of dual-nationalities, and the blending of children of different deceased fathers in families;
6. the moulding of Daesh children, particularly the boys from age 6, into deeply ideologically indoctrinated child soldiers with terrorist motivation (Kizilhan, 2019; Pašagić, 2019), who do not fit extant Disarmament, Demobilization, and Reintegration (DDR) models used in deradicalizing child soldiers and adult terrorists;
7. although Daesh was defeated on the battlefield in March 2019, there was no unconditional surrender, as there was between the Allies and Germany and Japan in the Second World War;
8. many of mothers of children born to Daesh fighters have sworn to continue the fight through raising the next generation of warriors; and,
9. in summary, Daesh remains a potent ideological enemy which may reconstitute itself as an armed force in the future, and inspire lone-wolf terrorism in Western countries in the interim.

Presumed legal protections for every person

Decisions to deny the right of return to IS camp followers are in apparent contravention of the: 1) UN *Universal Declaration of Human Rights* (1948), 2) the Geneva Conventions and Additional Protocols, 1949 (*Convention IV*), 3) the UN *Convention on Refugees* (1951), 4) the UN *Convention on the Reduction of Statelessness* (1961), 5) the UN *Convention on the Rights of the Child* (CRC 1989), 6) the *Optional Protocol to the CRC on Children in Armed Conflict* (2000), 7) the Paris Commitments of 2007, 8) *Paris Principles and Guidelines on Children Associated with Armed Forces or Armed Groups* (Paris Principles, 2007), and the 9) *Vancouver Principles on Peacekeeping and the Prevention of the Recruitment of Child Soldiers* (Vancouver Principles, 2017). The first four laws were promulgated in the aftermath of the Second World War, when the community of nations sought to reduce the hardship wrought by this conflict. The fourth through ninth legal

instruments were enacted following the Iran-Iraq War (1980-1988) and a series of post-colonial wars in Africa and south-west Asia which were characterized by the large-scale employment of child soldiers.

UN Universal Declaration of human rights

The UN *Universal Declaration of human rights, 1948* (UDHR) Article 15 provides that every human being is entitled to the citizenship of a nation, and that their nation is obliged to accept their return in Article 13. However, Article 15 (2) does clarify that “No one shall be arbitrarily deprived of his nationality...,” which appears to allow for the possibility of revoking citizenship. In the contemporary context of Daesh camp followers in the U.K. this could be observed in the stripping of British citizenship from Shamima Begum, an alleged member of the IS *Diwan Hisbah* (morality police) by Home Secretary Sajid Javid on 19 February, 2019, or in the Home Exclusion Order levied against Begum’s recruiter Tooba Gondal in November, 2018.

The Geneva Conventions and Additional Protocols, 1949 (Convention IV)¹⁴

Convention IV prohibits children under 15 from being recruited as soldiers and discourages their employment if under 18, as well as taking direct part in a conflict. Such children have right to food, medical care, protection, reunion with families when possible. If prosecuted for war crimes, they are entitled to separate quarters from adults and exemption from death penalty if under 18 years of age. The United Nations Security Council adopted a report from the Secretary-General and a Commission of Experts in 1993 which concluded that

¹⁴ The Geneva Conventions of 1949 are the foundation of international humanitarian law, which seek to reduce suffering in war. Geneva Conventions I, II, and III address the treatment of wartime combatants. Adopted in 1949, the *Geneva Convention relative to the Protection of Civilian Persons in Time of War*, commonly known as *Convention IV* or GCIV, has been ratified by 196 State Parties. The Additional Protocol I has been ratified by 174 State Parties. The age of a child is considered to be under 15 years of age. The International Committee of the Red Cross (ICRC), custodian of the Geneva Conventions, does not have the power to enforce the Conventions. State-Parties enforce the Conventions within their borders, and may levy sanctions against other states for alleged violations. The original *Geneva Convention*, which covered the “amelioration of the condition of the wounded in armies in the field,” was first adopted in 1864 following a proposal by Henry Dunant, founder of the ICRC.

the Geneva Conventions had passed into the body of customary international law, thus making them binding on both signatories – and non-signatories - to the Conventions whenever they engage in armed conflicts. This acknowledgement remains non-enforceable and has essentially been ignored by parties to armed conflict since this decision. In effect, the law remains valid, it just needs to be applied.

Convention IV makes frequent use of the term “Occupying Power” to describe the victors in armed conflict. This term makes sense in the context of the First and Second World Wars in that *Convention IV* seeks to assign certain responsibilities for the care of non-combatants post conflict. Notably, Article 50 of *Convention IV* states that “the Occupying Power shall, with the cooperation of the national and local authorities, facilitate the proper working of all institutions devoted to the care and education of children.” Article 50 adds,

Should the local institutions be inadequate for the purpose, the Occupying Power shall make arrangements for the maintenance and education, if possible by persons of their own nationality, language and religion, of children who are orphaned or separated from their parents as a result of the war and who cannot be adequately cared for by a near relative or friend (GCIV, 1949, Art. 50, para. 3).

Article 50 also states that the mothers of very young children should remain with their children,

The Occupying Power shall not hinder the application of any preferential measures in regard to food, medical care and protection against the effects of war, which may have been adopted prior to the occupation in favour of children under fifteen year, expectant mothers, and mothers of children under seven years (GCIV, 1949 Art. 50, para. 5).

Denial of humanitarian access to children and attacks against humanitarian workers assisting children are prohibited under GCIV and its Additional Protocols.¹⁵

¹⁵ Art. 23, 142 Geneva IV; art. 54, 70, 77 AP I, art. 14, 18 AP II.

Refugee Conventions

Grounded in Article 14 of the *Universal Declaration of human rights, 1948*, which recognizes the right of persons to seek asylum from persecution in other countries, the *United Nations Convention relating to the Status of Refugees*, adopted in 1951, is the centrepiece of international refugee protection today. The core principle is *non-refoulement*, which asserts that a refugee should not be returned to a country where they face serious threats to their life or freedom. This is now considered a rule of customary international law. The *1951 Refugee Convention* has been amended only once, in the form of the *1967 Protocol Relating to the Status of Refugees*, which removed the geographic and temporal limits of the 1951 Convention. The 1951 Convention, as a post-Second World War instrument, was originally limited in scope to persons fleeing events occurring before 1 January 1951 - and only valid within Europe. The 1967 Protocol removed these limitations and thus gave the 1951 Convention universal coverage to all refugees at any time.

1961 Convention on the Reduction of Statelessness.¹⁶ Otherwise stateless people can take the citizenship of where they were born, the place where they were found if orphaned, or the nationality of one of their parents. This Convention also influenced the February 2019 decision by the U.K. Home Secretary to revoke Shamima Begum's citizenship as her mother was born in Bangladesh.

R2P. The Responsibility to Protect (R2P) doctrine arose in the late 1990s following conflicts in Somalia, Rwanda, Bosnia, and Kosovo. This doctrine encourages nations to both protect threatened minorities through *humanitarian intervention*, and to care for the refugees displaced by conflict. Initially led by Canada and Norway, R2P gained widespread acceptance between 1999 and September 2001. The UN General Assembly commissioned the International Commission on Intervention and State Sovereignty (ICISS) to define the parameters of R2P in September 2000, which delivered its *Report (ICISS, 2001)* 30 September 2001. Aside from the duty to care for refugees, Chapter 5 of the *Report*, "The Responsibility to Rebuild," encouraged nations to contribute to peacebuilding efforts,

¹⁶ Multilateral treaty with 73 contracting parties. Not fully adopted as there are only six signatories, and three ratifications. Effective from 13 December 1975.

security, justice & reconciliation, and development post conflict (ICISS, 2001, pp. 39-45). R2P has lost much influence since September 2001 as the practical security demands of the so-called “Global War on Terror” (GWOT) took precedence.

International Law Protecting Children

This sense of vulnerability to terrorist attacks in Western nations has led many governments to refuse the right of return, based on the UN UDHR, 1948, to Daesh children - fearing that their past or future radicalization by their mothers will lead to terrorism when they reach adulthood. Such fears contravene many keystone instruments of international law.

Convention on the Rights of the Child 1989 (CRC)

When the UN Charter was signed in 1945, and the UNUDHR in 1948, they promised equal rights for all but there were no specific mentions of children. This keystone document is based on the premise that children have their own rights – distinct from adults. This distinction is intended to protect the rights of children who live in conditions of workplace abuse, conflict, poverty, and criminal violence. The CRC lays out the legal definition of a child as being a human being below the age of 18 years – with the caveat that it applies - unless the age of majority is reached earlier where they live. Professor Geraldine Van Buren (Jolie, 2019, 20 November), one of the drafters of the CRC describes its purpose,

The convention tells us to look at the child’s right to participate in decisions affecting them through a child’s eye, and to provide information in a format appropriate to a child. It’s based on upon the best interests of the child, which has been a fundamental principle of American law since at least the 19th Century.

Ironically, despite being one the principal drafters of the CRC, the U.S.A. has yet to ratify it. According to Van Buren, the U.S.A. was not alone in this, but other countries have added legal protection for children through adopting the Convention. Van Buren summarizes

the CRC as “a Bill of Rights for children. The main aim is to act as an early warning system, so that children and adults can point out that any particular policy or law, or lack of policy or law, has a detrimental impact on children...” (Jolie, 2019, 20 November). Van Buren believes that “It also provides a safety net, which all children need to have if their government fails them” (Jolie, 2019, 20 November). It could be argued that a refusal to admit the return of minors, particularly orphans, could be construed as such a case.

OPAC 2000. Aleksandar Pašagić (2019, p. 111) asserts that “there is no universal definition of a child soldier.” While the *UN Optional Protocol to the Convention of the Rights of the Child on the Involvement of Children in Armed Conflict, 2000* (OPAC 2000)¹⁷ does not provide a succinct definition of “child soldier” much of the wording draws a distinction between the status of those persons under 18, whom Article 3(1) describes as “being entitled to special protection.” Article 6, paragraph 3 also states that,

States Parties shall take all feasible measures to ensure that persons within their jurisdiction recruited or used in hostilities contrary to this Protocol are demobilized or otherwise released from service. States Parties shall, when necessary, accord to these persons all appropriate assistance for their physical and psychological recovery and their social reintegration (OPAC, 2000, Art. 6, p. 3).

Article 7, paragraph 1 appears to assign specific responsibilities for psychosocial reintegration to signatories,

States Parties shall cooperate in the implementation of the present Protocol, including in the prevention of any activity contrary to the Protocol and in the rehabilitation and social reintegration of persons who are victims of acts contrary to this Protocol, including through technical cooperation and financial assistance. Such assistance and

¹⁷ As of September 2019, 170 states are party to the *Optional Protocol* and a further 13 states have signed but not ratified it.

cooperation will be undertaken in consultation with concerned States Parties and relevant international organizations (OPAC, 2000, Art. 7, para.1, p. 4).

In effect, *OPAC 2000* obligates State Party signatories to repatriate their citizens, provide physical medical treatment, psychological rehabilitation, and assistance in social reintegration.

Paris Principles and Paris Commitments 2007

The definition of child soldier is implicit in the *Paris Principles, 2007*,¹⁸ description at paragraph 2.0 “Definitions,” sub-paragraph 2.1,

2.1 “A child associated with an armed force or armed group” refers to any person below 18 years of age who is or who has been recruited or used by an armed force or armed group in any capacity, including but not limited to children, boys, and girls used as fighters, cooks, porters, messengers, spies or for sexual purposes. It does not only refer to a child who is taking or has taken a direct part in hostilities.

The “Paris Commitments” provide guidelines for protecting children from recruitment as child soldiers, and provide assistance for those already enlisted in state armed forces or armed groups. They complement the political and legal mechanisms available to the UN Security Council, the International Criminal Court (ICC), and other organizations trying to protect vulnerable children from exploitation and violence (UN, 2007).

Vancouver Principles, 2017

The *Vancouver Principles, 2017* builds on the *Paris Principles, 2007*. The 17 principles adopted focus on preventing the recruitment and use of child soldiers by state armed forces, and by irregular armed groups. In November 2017, 54 UN Member States were

¹⁸ The *Paris Principles 2007*, built on the *Capetown Principles, 1997*. Retrieved from <https://www.unicef.org/infobycountry/files/ParisPrinciples310107English.pdf>

founding endorsers of the Vancouver Principles. As of 1 October 2019, there are 95 endorsing nations, with notable exceptions being the People's Republic of China, the Russian Federation, and the U.S.A. (GAC, 2019).

Psychosocial Rationale for Repatriation

Western concerns as to the danger posed by the revival of Daesh as a state defined by territory, or as an inspiration for lone wolf attacks in the West are evidence-based. There were 143 Daesh inspired attacks which killed approximately 2000 people and wounded many more between 2014 and 2017 (Barrett, 2017, p.14). Furthermore, there were three major terrorist incidents in London, United Kingdom between October 2019 and early February 2020.¹⁹ The reasons for fearing the repatriation of potentially radicalized to violence citizens are self-evident and do not require extensive additional explanation in this paper.²⁰ As then British Foreign Secretary Sajid Javid explained to Members of Parliament (M.P.) 15 October 2019:

We don't want to see foreign fighters return to the U.K. We think the right course is for them to face justice, if that's possible and practical, in the region....But of coursegiven the fluid situation, we're going to have to keep all of this under review (Ensor & Lyons, 2019, 18 November).

Home Secretary Sajid Javid issued a Home Exclusion Order against one female camp follower, Tooba Gondal, (born 1994, an alleged IS recruiter) in November 2018; and stripped one of her recruits, Shamima Begum,²¹ of her citizenship 19 February 2019. Begum was

¹⁹ The three incidents are: 1) the apprehended plot to bomb St. Paul's Cathedral, alleged to have been perpetrated by British citizen Safiyya Amira Shaikh, 36, from Hayes, Middlesex (Binding, 2019, 16 October; Evans, 2019, 16 October); 2) the London Bridge double murders committed by Usman Khan on 29 November 2019 (The Guardian, 2019, 30 November); and 3) the wounding of two citizens on High Street, Streatham 2 February 2020 by Sudesh Amman (Dodd, Sabbagh, & Syal (2020, 2 February; *The Guardian*, 2019, 3 February).

²⁰ The legal reasons for denying the right of return to the country of citizenship, and the psychosocial dynamics within the country of citizenship are the subject of a separate paper by the author of this paper.

²¹ Born 1999, a member of the Bethnal Green Trio, with Amira Abase and Kadiza Sultana. The trio departed the U.K. 17 February 2015 without notifying their families. Begum served in Diwan Hisbah, (IS morality police),

stripped of her citizenship based on the contention that she also held Bangladeshi citizenship through her mother's birth there. The Bangladeshi Ministry of Foreign Affairs denied her entry as a citizen as she had never applied for dual nationality, and had never visited there.²² Although certain lawyers argue that she does hold Bangladeshi citizenship, Begum is effectively stateless, contravening the *UN Convention on the Reduction of Statelessness* (1961) and given her age at the time of the events - the *UN Convention on the Rights of the Child* (1989).

Adding to the complexity of the case, then Home Secretary Javid told the House of Commons that while he could not comment on individual cases, "Children should not suffer. So if a parent does lose their British citizenship, it does not affect the rights of the child." Javid was then accused of breaching the 1948 *UN Universal Declaration of Human Rights* by Shadow Home Secretary Dianne Abbott, which states that "no-one shall be arbitrarily deprived of their nationality" (BBC News, 2019, 21 February, para. 18). The word "arbitrarily" may offer the U.K. government the legal basis required to deny the right of return. Javid stated that the power to deprive a person of citizenship was only used "in extreme circumstances when someone turns their back on the fundamental values and supports terror" (BBC News, 2019, 21 February, para. 15). The Home Office decision is also supported by the 1981 *British Nationality Act*, which states that a person can be deprived of their citizenship if the Home Secretary is satisfied that it would be conducive to the public good" (U.K., 1981, sect. F117 (2)), and they would not become stateless (U.K., 1981, sect.117 (4)) as a result. Although appeal courts exist, in accordance with U.K., 1981, sect.119 (40A), there is an historic bias towards assuring societal security rather than individual liberty. In November 2019, the Special Immigration Appeals Court (SIAC) rejected Begum's appeal based on statutory rape by Dutch-born Yago Riedjik (deceased), her older IS fighter first husband (married 2015, when she was 15). However, this complex problem cannot be wished

and was filmed by BBC carrying a Kalashnikov rifle in al-Hol detainment camp 18 February 2018. Begum lost three children to disease.

²² Shamima Begum will not be allowed here, Bangladesh says, *BBC News*, 21 February 2019. Retrieved from <https://www.bbc.com/news/uk-47312207>

away by closing the doors to citizens – which is why this paper seeks to add additional psychosocial nuances to the political discussions.

Psychological Trauma

Although many people exposed to trauma²³ demonstrate few or no lingering symptoms, some individuals who have experienced repeated, chronic, or violent traumas, such as survivors of prisons, concentration camps, and slave labour camps are more likely to exhibit pronounced symptoms and consequences, including substance abuse, mental illnesses, and health problems (Herman, 1992). Koehler & Popella (2019, June) make reference to a European Union Radicalization Awareness Network (RAN) study which describes the special challenges posed by members of “multi-problem target groups,” which speaks to the complex nature of foreign terrorist fighters and returnees who may be suffering from substance abuse, addiction, disabilities, and behavioural problems. In the case of minor children, there may also be significant deficits in socialization and in education which could lead to continued radicalization, and a need for intervention.²⁴

Environmental factors can greatly influence the prevalence and persistence of psychological trauma (Schmidt, 2007). Scholars have recently documented the phenomenon of historical trauma as “the cumulative emotional and psychological wounding, as a result of

²³ *Trauma* has several definitions. To a physician it refers to wounds that result from physical injury, ranging from the minor cuts and bruises sustained after an accidental fall to the life-threatening lacerations to internal organs and bone fractures resulting from a car crash – or combat. The *Diagnostic and Statistical Manual* (DSM) 5, (American Psychological Association (APA), 5th Ed., 2013) defines *trauma* as “Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways: directly experiencing the traumatic event(s); witnessing, in person, the traumatic event(s) as it occurred to others; learning that the traumatic event(s) occurred to a close family member or close friend (in case of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental); or experiencing repeated or extreme exposure to aversive details of the traumatic event(s)” (p. 271).

²⁴ The *Aarhus Model* used in Denmark deradicalization programmes notes the need to have both a prevention and an “exit strategy” to address already radicalized people who have intentions and capabilities of committing politically and/or religiously motivated violent crimes and terrorism. The Aarhus Model is based on the Life Psychological theory of approaching the targeted young people by treating them as individuals striving for agency in their own life, and in community life (Bertelsen, 2015, p. 241). The Aarhus Model builds on the principle of *inclusion*, which can be defined as meaningful participation in common cultural, social, and societal life. Aarhus Model interventions are delivered by multi-disciplinary teams drawing specialists from Schools, Social authorities, and Police (SSP), as well as experts in the fields of politics, sociology, psychology, acculturation and religion, at Aarhus University (Bertelsen, 2015, p. 242).

group traumatic experiences, which is transmitted across generations within a community” (SAMHSA, 2015). Individuals who have experienced trauma are at an elevated risk for substance use disorders, including abuse and dependence; mental health problems (e.g., Post Traumatic Stress Disorder (PTSD), depression and anxiety symptoms or disorders, impairment in relational/social and other major life areas, other distressing symptoms); and physical disorders and conditions, such as sleep disorders (CSAT, 2014). Persons diagnosed with PTSD exhibit a pattern of injury in the areas of the brain responsible for decision making, memory and reasoning leading to feelings of helplessness and hopelessness, and anger and depression. The disorder impairs a person’s ability to function in day-to-day life.

Post Traumatic Stress Disorder

Understanding of PTSD has evolved over the past 40 years. DSM-III-R (APA, 1980) considered PTSD primarily from the perspective of traumatic events, and relatively circumscribed traumatic events, such as combat, disaster, and rape. Some scholars noted that in contrast to a brief circumscribed traumatic event, prolonged, repeated trauma can occur only where the victim is in a state of captivity (e.g. such as in a detention camp), unable to flee, and under the control of the perpetrator, and made a recommendation for inclusion in DSM-IV as “DESNOS (‘Disorders of Extreme Stress’ Not Otherwise Specified)” (Herman, 1992, p. 377). Captivity may bring the victim into prolonged contact with the perpetrator – or an alleged perpetrator, which creates a special type of relationship, one of coercive control. According to Herman (1992, p, 378) this relation remains whether the victim is rendered captive primarily by physical force (as in the case of prisoners and hostages), or by a combination of physical, economic, social, and psychological means. PTSD is diagnosed after the symptoms of intrusive memories (e.g. flashbacks or unwanted dreams of the traumatic event(s)); avoidance of triggers (e.g. reminders), negative changes in mood (e.g. anger); and changes in physical and emotional reactions occur (e.g. hypervigilance) are present for more than one month since the traumatizing event without abatement. PTSD symptoms may also arise years after the traumatizing events. (APA, 2013, DSM 5, pp. 271-280) which could

possibly apply to Daesh family members. Children with PTSD display symptoms similar to adults, but the signs of this affliction in children may manifest differently than in adults (Kizilhan, 2019).

Childhood Trauma and Later Life Function

There is deep literature base which documents that early adverse experience, including prenatal stress and stress throughout childhood, has profound and long-lasting effects on the development of neurobiological systems, thereby “programming” subsequent stress reactivity and vulnerability to develop PTSD (Sherin & Nemeroff, 2011). However, although the prevalence of PTSD in the Iraqi population is well documented, there are few studies regarding the progression of symptoms in male and female child soldiers, and there are relatively few epidemiological studies on the psychological impact of the effects of trauma in children living in the refugee camps that occurred as a result of IS activities (Kizilhan, 2019). Some of the best studies are those reported by Dr. Jan Kizilhan, a prominent Kurdish psychologist from Germany who oversees the Institute of Psychotherapy and Psychotraumatology at the University of Duhok, founded in 2017.²⁵

Kizilhan & Noll-Hussong (2018) conducted a study of 81 former Yazidi male child soldiers²⁶ between the ages of 8 and 14, who had been torn away from their families and forced into fighting for Daesh. Kizilhan (2019) and Kizilhan & Noll-Hussong (2018) found that “PTSD and other mental disorders are highly present among former child soldiers in northern Iraq.” Percy (2019, 3 November) describes an interview with Ziad Ahmad Basheer, a

²⁵ The Institute’s mission is to train the first generation of psychotherapists in Iraq and to integrate licensed psychotherapy into the nation’s health system and eventually - the broader Middle East. Percy (2019, 3 November) describes the challenges he faces on a daily basis. Dr. Kizilhan completed two doctorates, one in psychology and the other in minority religions of the Middle East, and has published 25 books; his most recent is on the psychology of the Islamic State, a best seller in Germany. Now 53, he has spent more than 20 years treating refugees of war and genocide from all over the world.

²⁶ Thirty-two Yazidi boys and 31 Muslim boys who were not child soldiers in Iraq served as control groups. A structured psychological interview and established psychometric questionnaires were used to assess traumatisation and mental disorders. The child soldiers showed a significantly higher prevalence of PTSD (48.3%), depressive disorders (45.6%), anxiety disorders (45.8%) and somatic disturbances (50.6%) than the boys who had not been child soldiers. Developmentally crucial self-esteem was significantly reduced in former child soldiers. No significant differences between the two control groups could be found.

graduate student at Iraq's first (and only) master's program in psychotherapy. Basheer observed a tendency for traumatized Yazidi civilian children to faint in saying, "This is very normal. They are trying to go to another place." Percy (2019, 3 November) describes children fainting up to 20 times a day and how Yazidi women who have been raped "are always having dissociations." Dr. Kizilhan describes dissociations as a survival strategy to avoid having to live in the real world explaining that "It's very normal to leave reality to survive....But if it becomes too frequent, it can be pathological....If you have to leave reality, the body will survive, but the soul will not." (Percy, 2019, 3 November)

Children are more likely to develop PTSD than adults (Singer, 2005; Derluyn et al., 2004). Perhaps due to their age and more limited communications skills, children, particularly very young children, cannot express themselves verbally as well as adults and express themselves in other ways. For example, children may process their trauma through drawing (Kahn, 2008) and through games (Kizilhan, 2019) when they reenact their traumatic experiences. Some children become withdrawn, lose all interest in playing and other normal childhood activities, they may be hyperactive, suffer severe mood swings (fits of rage and aggression), or not display any emotional signs associated with pleasure (Singer, 2005). Older children may have problems at school, lose interest in meeting friends, or in leisure activities in general.

Learning. PTSD may arise following one acute but transient traumatic event, such as participating in combat or being the passive victim of bombardment. It may also be linked to witnessing a traumatic event, such as a violent death, a series of traumatic events, or to repetitive or continual lower level stress, such as being in fear for your life in dangerous conditions or of severe illness or privation. The chronic dysregulation of the brain's early warning and survival system (i.e. fight, flight, or freeze) – the amygdalae - can lead to functional impairment in certain individuals who become "psychologically traumatized." Decreased serotonin production disrupts the normal hormonal balance between the amygdalae and the hippocampus, leading to a reduction in the volume of the hippocampal region of the brain responsible for memory formation and storage. Aside from the dissociations described

in the preceding paragraph, psychologically traumatized individuals will display symptoms such as irritability, insomnia, impulsivity, shorter, divided attention spans, enhanced startle responses, flashbacks, and dissociative behaviour as they are continually on the alert. This condition makes learning and retaining new information more challenging as the pre-frontal cortex also loses volume and activation is “turned off” during the near continual alert phase (Sherin & Nemeroff, 2011; Singer, 2005).

Social interaction. Children suffering war trauma induced PTSD “were slow to understand instructions and found it difficult to play or show emotion” (Percy, 2019, 3 November). *DSM 5* (APA, 2013) Section II – “Diagnostic Criteria and Codes” now includes PTSD in a new section titled “Trauma- and Stressor-Related Disorders.”²⁷ This new section now includes diagnostic criteria for children six years of age and under as well as *Reactive Attachment Disorder* (RAD), which is characterized by noticeably disturbed and developmentally inappropriate ways of relating socially in most contexts. RAD arises from a failure to form normal attachments to primary caregivers (i.e. mother and father) between the ages of six months and three years. Such failures could result from severe experiences of neglect, abuse, abrupt separation from caregivers, frequent changes of caregivers, or a lack of caregiver responsiveness to a child’s communicative efforts when stressed. RAD symptoms include attempts to solicit comfort from adult strangers, reluctance to accept comfort from familiar adults, and self-harm, harming animals, and attempts to harm family members. Children affected with RAD may have very disturbed working models of relationships that may lead to interpersonal and behavioural difficulties in later life. Given its relative infrequency in the general population, there are few studies of RAD’s long-term effects, and clarity about the presentation of the disorder beyond age five is lacking (Boris & Zeanah,

²⁷ *DSM-5* (APA, 2013, pp. 271-272) Diagnostic criteria 309.81 (F43.10): 1) *Intrusion*: a) Recurrent involuntary intrusive memories, dreams or b) Dissociative reactions (i.e. flashbacks); 2) Persistent *avoidance* of stimuli (i.e. triggers - people, places, objects, conversations, situations); 3) *Negative cognition & mood alterations*: Anger/Depression Distorted thinking patterns; 4) Alterations in *arousal & reactivity*: Hypervigilance, sleep loss, concentration problems, flash temper, reckless behaviour, exaggerated startle reaction. Persons on the PTSD spectrum may self-medicate, present after one acute incident to delayed expression over years. PTSD changes the subject’s world view. There is a *moral injury* (coined by Dr. Jonathon Shay) element leaving the subject with a sense of broken trust, a “scared soul.”

2005). However, the opening of orphanages in Eastern Europe, particularly in Romania, following the end of the Cold War in the early 1990s provided opportunities for research on infants and toddlers brought up in very deprived conditions (Zeanah, Smyke, Koga & Carlson, 2005). Given its relative rarity, RAD is one of the least researched and most poorly understood disorders in *DSM 5*. There is little systematic epidemiologic information on RAD, its course is not well established and it appears difficult to diagnose accurately. However, attachment disturbances have been central to the psychological literature on the effects of institutionalization and emotional deprivation for more than 70 years. Early studies of institutionalized children by Austro-American psychiatrist René Spitz (1945; 1946) reveal that children raised in conditions of extreme deprivation will be incapable of self-care and of normal social interaction.²⁸ Such children would be much easily moulded into child soldiers or terrorists than children raised in a nurturing environment due to their complete dependence on their care givers and due to their suggestibility (Kizilhan, 2019).

Neuroplasticity

Neuroplasticity, which is the capacity of the brain to change, makes disengagement from Daesh and reintegration within Western societies possible. Lasting change to the brain occurs throughout an individual's life course due to microscopic changes in individual neurons leading to larger-scale changes such as cortical remapping in response to injury (visible and non-visible). Neuroplasticity also facilitates learning a new language, playing a musical instrument, or recovering from a brain injury such as a Traumatic Brain Injury or a stroke.

Late 20th and early 21st Century research in to the effects of psychological trauma as manifested in PTSD, anxiety disorders, and depression reveals that the prospects for a full or

²⁸ René Spitz's studies in the 1940s established that young children deprived of nurturing human touch and human interaction would fail to thrive and die despite good food, safe housing, proper hygiene, and adequate medical care. Spitz reported that babies raised in a foundling home environment under the clinical care of nurses working eight hour shifts, failed to grow and develop – and more than a third died. Most children were physically, mentally and socially retarded and 21 of them were still living in institutions after 40 years, still unable to care for themselves because of their early deprivation.

partial recovery from emotional trauma is possible throughout the life span (Hensch & Bilimoria, 2012; Bremner, Elzinga, Schmahl, Vermetten, 2008). However, the developing brain exhibits a higher degree of plasticity than the adult brain, particularly during early life when the brain is actively shaped by environmental input (Hensch & Bilimoria, 2012). Pre-pubescent children have sensitive periods in which they rapidly develop seeing, hearing, receptive language, speech production, and higher cognitive functions. Conversely, adverse childhood experiences (ACE) or early life stress (ELS) increase the risk for engaging in harmful behaviors such as substance abuse, gambling, gang involvement, and violent crime. They have also been correlated with alterations in immune function and levels of inflammatory markers known to be associated with a variety of chronic illnesses, including cardiovascular disease, autoimmune disease, asthma, liver cancer, and depression (Hensch & Bilimoria, 2012; Shonkoff, Boyce, & McEwen, 2009). ACE have been linked to a number of cognitive deficits, including difficulties with memory and executive function, and affective deficits such as problems with reward processing and emotional regulation (Pechtel & Pizzagalli, 2011). Many Daesh children will have significant early memories of violent events during the existence of the Caliphate and of privation in the detention camps. They develop psychological “survival strategies” (Kizilhan, 2019) to cope with the adverse events they experience. Children also have a greater capacity to learn new coping mechanisms and to recover from their emotional trauma, which makes their reintegration or introduction to a new social environment less challenging than it would be for adults.

Treatment of PTSD

Medicinal. Kaminer, Seedat, & Stein (2005) noted that the diagnosis and treatment of PTSD in children differs from that of adults. For example, while selective serotonin reuptake inhibitors (SSRI) appear to be effective in treating children as well as adults, the utility of using benzodiazepines²⁹ in pediatric PTSD was not yet established at that time (Kaminer,

²⁹Benzodiazepines are group of medications used to treat several different anxiety disorders, including PTSD. Some examples of these medications include: lorazepam (Ativan®); clonazepam (Rivotril®); alprazolam (Xanax®) and oxazepam (Serax®). Other benzodiazepine medications are available, but are less commonly used

Seedat, & Stein, 2005, p. 124). It is now known that benzodiazepines provide short term relief from distressing feelings, but can become a problem in the long run as the patient can develop a dependence on the medication and end up feeling that he or she cannot face stressful situations without it. In other words, if benzodiazepines provide an escape from reminders of your trauma, you never truly learn to manage your stress – which makes it harder to recover from PTSD.

CBT and NET. Effective treatments for PTSD, like Cognitive Behavioural Therapy (CBT or talk therapy), help the patient to avoid distressing situations and memories (US VA, 2020, 14 February). Kizilhan’s staff use Narrative Exposure Therapy (NET), a short and pragmatic treatment for victims of torture and genocide. developed in the aftermath of the civil wars in the Balkans in the 1990s. NET recognizes that emotional trauma can reorganize autobiographical memory, making it hard for victims to feel safe in the present moment. The NET therapist carefully leads the survivor through their autobiography, which allows the victim to find distance from past traumas in a safe environment. Survivors have shown improvement after only a dozen or so sessions; it has been applied over the past 15 plus years in conflict zones, including Sri Lanka and parts of East Africa. In any case, this potential recovery, or at least improved symptom management, is dependent on removal from the stressful environment and on the availability of professional assistance from physicians, psychiatrists, psychologists, social workers, and other rehabilitative specialists. Such specialists are not commonly available to the inhabitants of a detention camp – which contributes to the stress.

Psychosocial Factors in Reintegration

Traditional “deradicalization programs” focus on combatants, most of whom are adult males. This focus is insufficient to deal with the complex politico-social problem of

in children and adolescents. In any case benzodiazepines are potentially addictive and may lead to physical and or psychological addiction. They should be taken for short periods to decrease anxiety prior to beginning non-pharmaceutical Cognitive Behavioural Therapy (CBT) to assist in dealing the emotional stressors.

(https://keltymentalhealth.ca/sites/default/files/documents/benzodiazepines_medication_information_-_may_2013.pdf)

reintegrating foreign Daesh camp followers, primarily female (and their children) in their countries of origin. As there is no single profile of a terrorist, there is no single profile of a returnee (EU RAN, 2017, p. 83). The psychosocial infrastructure needed to prevent R2V, continuing support of radicalized fighters, recruitment, and the dissemination of propaganda is better found in Western societies than in refugee camps, which are often incubators for terrorists. Individual risk assessments and individual reintegration programs will have to be developed and mentored at local level. Such programs should address, (but are not limited to), the factors which follow.

Failed eschatology. Having your life's purpose evaporate in the collapse of Islamic State is likely to engender sentiments of resentment, hatred, retribution, and possibly a belief that this collapse is just a temporary pause before regaining military strength and starting the fight for final victory. Webber et al. (2017), Kruglanski et al. (2014); and Kruglanski & Orehek (2011) note the tendency for reduction in extremist views if the former terrorist undergoing deradicalization can be given another *raison d'être*, and re-earn personal significance. Any deradicalization strategy must seek to dissuade the Daesh camp follower that this collapse is a permanent change without taking away the positive aspects of their religious beliefs.

Recidivism. The issue of measuring permanent change in a member or supporter of Daesh is a challenge. An article in *The Independent* (Dearden, 2019, 11 December) in the wake of the 29 November murders committed by Usman Khan quotes Ian Acheson,³⁰ who led an independent review of the extent of Islamicist extremism in the U.K. custody and probation system. Acheson, a former prisoner governor, pointed out the potential for “gaming the deradicalization courses, “They knew what to say and do to pass the programme....There are levels of naivety here....it's one thing to say they ticked every box, have they ever considered false compliance?”

³⁰ Ian Acheson, FRSA, Senior Adviser at the U.S. based Counter Extremism Project, and a contributor to the Tony Blair Institute for Global Change is a former prison governor with extensive experience in prison security and counter terrorism. He is also an Ulsterman who grew up in Northern Ireland during the Troubles. Mr. Acheson seeks to integrate this knowledge in his approach to assessing the threat of Islamicist extremism in the United Kingdom. (<https://institute.global/contributors/ian-acheson>)

Acheson's 2016 Report on behalf of the Ministry of Justice is noteworthy in its emphasis that Islamicist extremism cannot not be viewed in isolation in prison communities that include Islamicist extremists, but also common criminals and persons with mental health challenges who are vulnerable to conversion to Islamism (paras 7-8).

Unique to males. Male child soldiers may harbour a unique emotional burden of simultaneously being both the victim of violence during the Daesh training process, and perpetrator of violence, including deadly violence against captured SDF personnel. 40 They are, therefore, a distinct group among children and adolescents in war regions. They are victimized twofold because they first, are exposed to traumatic experiences and later, are blamed and stigmatized for the atrocities they have committed. 41 This fact alone challenges their integration and reacceptance. If they are left in the care of Syrian jailors and the influence of older more dedicated IS fighters their indoctrination will continue, and the probability of their becoming members of "IS 2.0" with a desire for revenge against the West will be more likely. Leaving the younger IS adherents to their own devices will almost certainly perpetuate the challenge of containing IS. Even children who are successfully reunited with their families, however, have little prospect of smoothly taking up life as it was before. Reintegration programmes must re-establish contact with the former Daesh family and their host community as leaving them socially isolated can lead to feelings of oppression – which contributes to the recruitment cycle.

Unique to females. Some of the teenage, now adult female recruits to Daesh who were dissatisfied with life in a Western society were drawn by the Utopian goals, by the prospect of "marrying a warrior," and by the presumed sense of future empowerment (EU RAN, 2017, p. 21, para. 2.3.2). Female camp followers are not necessarily victims without agency in their life choices. Many remain highly ideologically committed to IS goals, and some worked in recruitment and in disseminating propaganda. Ideologically-committed female IS returnees will pose a risk to other less committed female returnees after repatriation. Formal security interviews of camp followers assessing individual risk to Western society prior to repatriation

and semi-structured academic interviews on return may yield further data as to how this process may unfold for camp followers.

Sexually Based Gender Violence may be a contributing factor in the disillusionment of many of the female IS members now petitioning to return to their former homes. It was considered normal for a Daesh girl to be married at the age of nine, or at the latest by 16 or 17 (Benotman & Malik, 2016, p. 45). In the Islamic State, the woman's role is 'building the Ummah, producing men, and sending them out to the fierceness of battle' (Benotman & Malik, 2016, p. 45 quoting Daesh publication *Dabiq* 11, 2015, 09 August, p. 41). Reunification may be particularly difficult for young women who were or sexually abused, in part because cultural beliefs and attitudes can make it very difficult for them to stay with their families or to have any prospects of re-marriage. Studies of female child soldiers have revealed that with so few alternatives, many young women eventually turn to prostitution (UN SRSG CAC, 1996, para. 51).

Both male and female children may have lost their fundamental trust and confidence in the words of people, and perhaps even in humanity in general (Braga, Mello, & Fiks, 2012; Retzlaff et al., 2013). In either case, aedapting to the rountine western education system will be challenging for the students, their teachers, and administrators who are managing their re-integration or intial introduction to schools in Western countries.

Education. The lack of, or gap in formal education experienced by many Daesh born children will be a significant challenge in preparing them and their prospective communities for reintegration – or relocation if they have never been to a school with a Western curriculum. They will be behind their peers in age and many will need remedial language training. Many will have to come out of school to attend mental health appointments to assist them in overcoming the challenges discussed earlier. The challenging process of reintegration, or integration for the youngest, must help children to establish new foundations in life based on their individual capacities. The child camp followers of Daesh have grown up deprived of many of the normal opportunities for physical, emotional and intellectual development that are found in stable, peaceful societies. As the *Convention on the Rights of the Child 1989*,

Article 39 observes, recovery (from emotional trauma) and reintegration should take place in an environment that fosters the health, self-respect and dignity of the child. Given the environment described previously in this paper, the chances of this occurring in a detention camp are remote.

Education, especially completion of primary schooling, is a high priority as education is more than just a route to employment for children and young adults leaving Daesh. Education normalizes life and helps them to develop an identity separate from that of Daesh. The development of peer relationships and improved self-esteem may also be facilitated through recreational and cultural activities. Most if not all former Daesh camp followers will have fallen far behind in their schooling, and may be placed in classes with much younger children.

Preventing future recruitment

Former Daesh children that received military training or participated in combat or in executions may find it challenging to disengage from the Daesh indoctrination that violence is a legitimate means of achieving one's political aims. Experience in the African Disarmament Demobilization and Reintegration (DDR) demonstrated that this is particularly true where the frustrations of poverty and injustice remain. The challenge for Western governments and for the host civil societies is to channel the energy, ideas and experience of disillusioned youth into contributing in positive ways to the creation of their new, post-conflict society.

According to Dr. Kizilhan, "Psychotherapy is also effective for combating brainwashing...It just takes longer, maybe two or three years. But children are much easier than adults to deprogram" (Percy, 2019, 3 November).

Supporting families. Kizilhan (2019) observes that it takes 12 to 24 months of stable socio-educational care to lay the basis for successful psychotherapy leading to developing new allegiances. Effective social reintegration depends upon support from families and communities. Research in the reintegration of child soldiers in Africa reveals that families may also be worn down by conflict, both physically and emotionally, and face increased

impoverishment. The field visits and research undertaken for the Machel Report (UN SRSG CAC, 1996) report stressed the importance of links between education, vocational opportunities for former child combatants and the economic security of their families. These are most often the determinants of successful social reintegration and, importantly, they are the factors that prevent re-recruitment.

Maintaining identity and self-esteem. As pointed out by the Muslim Council of Britain (MCB), one of the criticisms of the U.K. government's Prevent program is that it is considered to stigmatize Islam in general, rather than just the violent aspects of Islamism (Siddique, 2018, 22 March). The MCB Safe and Secure program aims to avoid casting any negative shadow on Islam while emphasizing the right to live in a violence free environment. The challenge for mentors will be to provide a religious environment which celebrates the positive community affirming aspects of Islam while isolating those aspects which reinforce a sense of being part of a persecuted outgroup. Another possible route to raise camp follower self-esteem and independence after return is through assistance in completing education and in job training.

Counter-narratives. Former Daesh camp followers and child soldiers who return to a Western community are also subject to social settings in which radical views are still prevalent. It will be difficult to disengage from this ideology and simultaneously process their experiences and stress. Given insufficient access to mental health professionals, and in the absence of consistent deradicalization measures, there is a high probability that a significant number of former Daesh children will fail to recover from their prior trauma. They may become chronically mentally ill and/or maintain some semblance of the radical ideology. For boys and girls who grow up in a male-led gang or a Violent Extremist Organization (VEO) and who have known nothing else, their ability to choose among belief systems and behaviours is limited. Such people will be vulnerable to manipulation and indoctrination. In such a setting, it seems a given that some will join another radical political organization or a VEO.

Community security may be enhanced if the cycle of indoctrination can be broken. The camp followers' testimony could be part of an intrinsic counter-narrative as they could be persuaded to speak to the lies and hypocrisies perpetrated by IS leaders and the violent acts, war crimes, and crimes against humanity committed by many IS fighters. A counter-narrative based on first-hand testimony could become a powerful deterrent to future generations of discontented youth who seek to devote themselves to a higher cause.

Community education

The element of fear amongst the communities receiving returning camp followers could lead to confrontations and a loss of mutual trust. Many teachers, parents, and administrators may object to having former Daesh children enrol in schools, fearing that they will have a disruptive effect. Programmes must address these wider community concerns. Specific measures may be required, such as establishing special classes for former Daesh children who can then progressively be reintegrated into regular schools. Older children require training – and coaching -in life-skills related to their new environment and in finding vocational opportunities. Preparing older children to find employment will not only help them survive, but may also facilitate their acceptance at home and provide them with a sense of meaning and identity. Such programmes would have to have long-term sustained funding in order to bring about the gradual reintegration of returning Daesh children. Feelings of estrangement and isolation of the returnees creates fertile soil for re-recruitment. Building trust between the Daesh returnees and the receiving societies during the reintegration process is crucial in achieving deradicalization. Public education and trust building activities such as the creation of sports clubs in the British Prevent program could be of benefit.

Policy maker education. Most people make decisions based on their personal and professional experiences. Fairness in addressing the issue of returning IS camp followers could be facilitated by addressing the pernicious effect of prejudice, confirmation bias and self-fulfilling prophecies in setting the stage for unanticipated – and unintended consequences. Believing that all IS camp followers are dangerous leads to looking for proof

of dangerous intent, distrust, social isolation, grievances – and re-starting the disenfranchisement/radicalization cycle.

Kizilhan & Noll-Hussong (2018) stressed that treating child soldiers with PTSD who are from traditionally family- or collective-oriented societies like the Yazidis requires a different, culturally sensitive approach and adapted skills for an effective and specifically psychotherapeutic treatment. Furthermore, Kizilhan (2019) observes that better psychosocial care for such people in order to allow them to cope with the mid and long-term consequences of the violence they were exposed to. Kizilhan (2019; 2018) observes that,

the medical and psychological problems that occurred as a result of the combination of individual perception of traumatic experiences, collective and cultural traumatisation and the subsequent migration and refugee crisis are therefore quite extraordinary. They require new and well-thought-out concepts of integrated medical care.

The need for culturally sensitive care is echoed by Mohammed Abbas, an Iraqi-born British psychiatrist, who emphasizes the resilience of the Iraqi/Yazidi people. According to Abbas; “There is an assumption of vulnerability in the West, but we have a collectivist society, which gives meaning to life” (Percy, 2019, 3 November). This need for culturally sensitive care in reintegration and rehabilitation is echoed in the UN Office of Counter-Terrorism (2019) *Handbook Children affected by the foreign-fighter phenomenon: Ensuring a child rights-based approach*, Section 5: Rehabilitation and reintegration (pp. 65-72).

Approximately 80 percent of mental-health related research is conducted in the United States, Canada and Europe (Percy, 2019, 3 November), and patients originally from non-Western countries may have different perceptions of disease and healing if they are recent immigrants (Srivastava, 2007). The local caregivers (therapists, social workers, teachers, carers, etc.) should have basic knowledge of transcultural treatment (Kizilhan, 2019). In Iraq, people suffering from psychological disorders often consult religious healers or rely on home remedies, in part because of the shame attributed to mental health disorders. Dr. Kizilhan

describes the challenges of working with para-professionals with limited training in Cognitive Behavioural Therapy (CBT), “They can be helpful....But they are not psychotherapists. Psychotherapy is a scientific method” (Percy, 2019, 3 November). Kizilhan recommended that those not trained in CBT should focus on stabilization, not psychotherapy as stabilization was necessary before psychotherapy could begin. Most importantly, it should be realized that as PTSD can be a life-long affliction, psychosocial therapies may take years of supervision in a stable environment (Kizilhan, 2019, p.4) and that the educational and psychosocial support workers must try to recreate the stable aspects of the social environment that existed prior to the child becoming radicalized and/or violent (Kizilhan, 2019, p. 5).

Practical reasons for repatriation

Future of international law. International law post the Second World War has tended to reinforce the responsibility to care for vulnerable people, whether they are refugees, Internally Displaced People (IDP), stateless people, or children. These laws are intended to protect not only current, but also future generations of vulnerable people. Although international law is aspirational in nature and most often overridden by state’s interests – there are established international legal norms. There is a risk of losing, or at least of reducing the significance of humanitarian law if greater weight is not accorded to it in practice by state signatories.

Ethical reasons. Aside from the basic legal tenets of waiting to prosecute until a finding of guilt or children do not have full agency, there are several moral and ethical reasons for permitting the return or relocation of Daesh camp followers. First of all, holding unpopular views is not illegal, although advocating violence in support of those views is illegal. Second, young children under 12 may not yet be radicalized, and young orphans will almost certainly not be radicalized. Lastly, children should not be held responsible and pay for the crimes of their parents. Ethically, denying the right of return to non-combatants calls into question the value of citizenship, and whether denying certain minority groups this right creates a de facto second class citizenship. There is also the long held presumption that

rehabilitation rather than revenge is basis of correctional services in democracies. Denying the right of return may have a basis in fear of terrorism, but there is an element of revenge at play – at least in the minds of the Muslim minority. Unfortunately, one of the reasons for not accepting returnees and relocators is the possible emotional and economic impact of breaking up family units if one or both parents are tried for terrorism related offences and sent to prison. Given the poorer psychological and social outcomes for children separated from their parents, it is often believed to be more effective to keep children with their parents – whatever their political views.

Rehabilitation. According to the Norwegian Refugee Council (NRC) report *Barriers from Birth* (2019), there are an estimated 45,000 displaced children in camps are missing civil documentation who may face exclusion from Iraqi society: barred from attending school, denied access to healthcare and deprived of their most basic rights. These same barriers exist for many of the estimated 7000 children in Daesh families in northeastern Syria. They will be relegated to the margins of Syrian society, spending their lives in detainment/IDP camps – which are fertile ground for indoctrinating the next generation of Daesh fighters and camp followers – with little hope of rehabilitation.

Leaving former Daesh family members in worn-torn northern Syria or southern Iraq is not a feasible solution if the Western democracies wish to rehabilitate them. Figures from the Iraqi Ministry of Health list 138 psychiatrists and 60 social workers in a country with a population of more than 38 million, i.e. one psychiatrist for every 275,000 people (Percy, 2019, 3 November). Iraq has suffered 40 years of continuous conflict – Saddam Hussein’s dictatorship, the eight-year (1980-1988) Iran-Iraq war, the two Gulf wars, decades of economic sanctions, a civil war, the Islamic State. According to Virginia Lee, a mental health manager with MSF (Doctors Without Borders), “Even if these people survived the occupation of ISIS they are also dealing with layers of trauma from past conflicts over the decades, and maybe they never dealt with the trauma before ISIS” (Percy, 2019, 3 November). It is not surprising that Iraq has few mental health professionals to treat an epidemic of war-induced psychological disorders.

Dutch advocates for bringing Daesh children home point to a May 2018 “long-term safety analysis” by the National Coordinator for Counterterrorism and Security. It noted that half of the children are younger than 4 and that failing to retrieve them would pose more of a threat to national security. These toddlers and young children are of such a young age that indoctrination has not yet been able to have occurred,” said a redacted copy of the analysis seen by *The Post*. “If a return does not take place, these children may pose a risk later in life.” (Loveluck, Mekhennet, Morris, Martins, 2019, 23 December) A decision to return or relocate Daesh camp followers may break, (or at least hinder) the Daesh recruitment cycle by providing an alternative narrative to the commonly held victimization narrative. There are numerous unknowns in the attempt to rehabilitate and reintegrate former Daesh members. Reintegration may humanize Muslim minorities among majority populations and may assist Muslim communities in deterring the Daesh recruitment narrative, which may provide allies to assist security service surveillance of potential trouble makers. It can be argued with greater certainty that to not do so will feed victimization narrative internally and fuel lone-wolf attacks.

It is increasingly difficult to limit the spread of ideas – both healthy and unhealthy. Our global society is linked by near real time communications and rapid travel. Preventing the exchange of ideas and restricting travel would require censorship and strict movement controls which would affect the democratic rights of all citizens to liberty of the person and free speech and association.

Al-Hol has been described as “the camp of death,” “a test from God,” “a mini-ISIS caliphate,” “Guantánamo in the desert” (Moaveni, 2019, 5 September). Permitting the repatriation and relocation would remove a critical building block in long-term strategy to reinvigorate ISIS, i.e. the Muslim as victim of the West narrative, as it would challenge the underlying premise of interdict the Daesh indoctrination process.

Balanced approach?

In fairness to governments, laws cannot be based only on the circumstances of individual cases. Decisions to implement executive orders are frequently made in difficult conditions of limited time and incomplete information.³¹ While this might be acceptable in wartime, it is questionable to apply such standards in peacetime, even with a valid terrorist threat. As such, executive measures in peacetime are usually time limited to protect the basic human rights of the detainee. As well, the continuing validity of laws is frequently determined through individual court challenges. The challenge for law makers, i.e. elected representatives is to find the balance between security and citizenship.

UN Security Council Resolution 2396 (2017) on Foreign Terrorist Fighters (Returnees and Relocators) is two-track, in that it urges nations to improve information and evidence sharing while developing tailored prosecution, rehabilitation and reintegration strategies; including programmes addressing radicalization in children associated with “Foreign Terrorist Fighters.”

The balance between human rights, citizenship, and security is leaning heavily toward internal security in denying the right of return to IS camp followers. Allowing such people to return to Western societies is not *prima facie* soft-headed. Wright (2019, 15 April) and other journalists have observed that many children learn only Islamic State beliefs in al-Hol and in the other detainee camps. If the international community does not find a way to rehabilitate these children and reintegrate them into society, that is the next generation of ISIS. U.S. Deputy Assistant Secretary of Defense for the Middle East, Mick Mulroy describes the need for a clear strategy,

We need to pick one. We need to fund it. And we need to do something.... If we don't do it as an international community, not just the United States, it's a problem that our kids will be dealing with (if we don't do that, we will be back there, for sure, doing this again), we owe it to the people that live there, who have borne unspeakable

³¹ These circumstances reflect two of Simon's (1955; 1956; 1957) conditions of *bounded rationality*. The third condition is that of the limits of human cognitive processing capacity, both as individuals and collectively.

burdens, and we owe it to the men and women that are going to come after us at the State Department, at the Defense Department, that we don't just leave this undone (C-Span, 2019, 2 October).

Future research

Little research has been done to establish best practices in returning camp followers to Western societies. This rapidly evolving complex psychosocial and political issue would benefit from longitudinal research to: 1) identify tools to measure effectiveness in assessing progress and commitment in deradicalization; 2) identify specific psychosocial challenges faced by Daesh children in adapting to a new environment; 3) identify the unique costs borne by each nation accepting returning Daesh camp followers, in view of the differing numbers and existing medical, psychosocial, and educational infrastructure.

Conclusion

This paper argues that customary international law and UN Security Council Resolution 2396 (2017) on Foreign Terrorist Fighters (Returnees and Relocators) provide sufficient legal guidance from which Western nations might improve collaborative information and evidence sharing protocols while developing nationally tailored prosecution, rehabilitation and reintegration strategies to address crimes committed by Foreign Terrorist Fighters. UNSCR 2396's call to nations to include programs addressing radicalization in "children associated with Foreign Terrorist Fighters" is prescient, in that it forecasts that the psychosocial support needed for rehabilitation and reintegration is better found in Western societies than in detainment and refugee camps, which are often incubators for nurturing the growth of future terrorists.

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