

In the minds of many, children are considered innocent bystanders to war, not active combatants. This view, however, is not in keeping with modern rules of war, which see youth as “a commodity for plunder,” marking a troubling period of deepened involvement of societies’ most vulnerable citizens (McIntyre, 2003). Research in this area has concentrated on the vulnerability of children drawn into conflict, their moral development and the devastating impact of trauma. Sadly, more work has been done on how a war environment interferes with healthy moral development of children than on how the developing child relates to it, the interaction between the developing child and the world of conflict which surrounds her.

This narrow view of children involved in armed conflict may have occurred in response to a deepening appreciation of the traumatic experience of war and the accompanying use of a psychological framework. Its emphasis on Post-Traumatic Stress Disorder (PTSD) has resulted in an approach that does not fully balance the concepts of individual agency and victimization. The prevailing approach to the rehabilitation of former child soldiers places the child at the center of the complex issue of post-conflict healing, while at the same time denying them any role in further peace-building activities. Or, as Boyden & Mann (2000) put it: “the notion of rehabilitation implies that it is the child rather than society that needs changing.” The fact is that both face the challenge of transitioning successfully from conflict to peace.

An ecological, strengths-based theoretical framework provides a basis for analysis of the social, economic, and political reality of child soldiers as it takes into consideration the complex dynamics of social functioning and social oppression. In appreciating the interdependent nature of the situation, a child-in-environment paradigm functions alongside the radical notion that the

situation faced by children involved in armed conflict cannot be understood in isolation from the larger systems in which they operate. Not only does “prolonged conflict and the resulting disruption of the community infrastructure and resources affect everyone in the community,” but one of the characteristics of modern conflict is how entire communities are targeted (Farwell & Cole, 2001/2002). Therefore the situation faced by children involved in armed conflict cannot be understood in isolation. Any discussion of child soldiers must recognize the dynamic relationship between the socio-eco-geo-political environment and the individual child.

The prevalence of failed states, advances in technology, and an enduring small arms trade have all contributed to the increased recruitment of child soldiers throughout the world (CETO, 2002). Internal hostilities operate differently than other wars—lines of power are drawn not through the gracious favors of complex and mannered diplomacy, as allies sign pacts and make assurances of support, rather it is increasingly characterized along ethnic/regional lines with no regard for the distinction between civilian and military populations. The proliferation of lightweight and easy-to-use small arms only adds to the temptation to enlist those elements of the community left out of wartime activities because of the lack of skill—namely children. “This dynamic has made possible a new mode of war, where immoral leaders seek to convert vulnerable, disconnected children into low-cost and expendable troops, who fight and die for their own causes” (Singer, 2002).

Child soldiers are considered by some to be faster, more agile, and resilient than traditional combatants (Hughes 2000). They are also more vulnerable to harsh recruitment techniques, more easily shaped to their new role, and less resistant in the face of authority. It is for this very reason

that young children are seen as ripe for combat. As Jo Becker points out in the Human Rights Watch World Report 2004, “commanders see children as cheap, compliant, and effective fighters.” It is, in part, their level of cognitive maturity that makes them so. Kuruppuarachchi and Wijeratne of Sri Lanka, commenting on this issue assert, “immaturity makes them less likely to contradict orders and more likely to be fearless. They are therefore ideal tools to be used in the hazardous and inhumane activities in the front line” (LTE Lancet, 05-15-04). Furthermore, there is the sad truth that the shock value of child soldiers on of-age infantry personnel is a savvy war tactic as they may prove more hesitant to fire on children (Hughes, 2000; CETO, 2002).

Evidence tends to suggest that the systematic emotional undernourishment of these abducted children scars them in profound ways, fundamentally altering the healthy development of the self. Some argue that exposure to and participation in violent acts dramatically impacts on the minds of children. These traumatic experiences shape and socialize a child to soldier, with no regard for the humanity or psychological development of that individual. Scholars have focused rather significantly on the impact involvement and exposure to armed combat has on moral development. The developmental psychologist, Lawrence Kohlberg’s classic work—particularly his stage theory—has served to shape many arguments about the detrimental affects of this form of trauma on young children. Operating under the belief that most moral development occurs through social interaction, some have chosen to marry the issues of child soldiering and moral reasoning. It has been a topic of great interest and examples abound in the literature, probably most capably in *The Moral Development of Child Soldiers: What Do Adults Have to Fear?* by Jo Boyden (2003).

The many ways that war *may* impact on the personality development and identity formation of a child is profound. The after effects of trauma may prove considerable, influencing how a child views the world as well as her responses to the social environment in which she finds herself. Exposure to war may produce certain patterns of behavior in child soldiers. For example, the physical survival of children may be accompanied by certain ingrained coping mechanisms, fear-conditioned responses such as regressive or aggressive behavior, and an orientation towards violent exploitation (Pearn, 2003). They have been highly educated in the dark art of survival by any means, developing certain responses that served them well in wartime but which may not be conducive to maintaining a peaceful society. Furthermore, as trauma survivors they may experience an array of symptoms associated with exposure that are:

- physiological
 - (e.g., eating and sleep disturbances, increased sweating, concentration difficulties),
- behavioral
 - (e.g., defiance, aggression, hyperactivity, and withdrawal),
- and emotional
 - (e.g., fears of separation, despondency, general fearfulness, weeping, and nightmares)

(Joshi and O'Donnell, 2003).

Individuals suffering from acute symptoms may be in need of specialized treatment to bring them back to a place of health, as the trauma may prove so severe as to preclude any ability to positively contribute to peacetime activities. The diagnosis of Post-Traumatic Stress Disorder (PTSD) has been generously applied to survivors of war, rape, abuse, and terror. The umbrella definition is promiscuously inclusive, covering brief and long-term exposure equally. Witnessing the murder of a neighbor is just as likely to lead to PTSD as is years of participation in armed

conflict. Despite its prolific application to situations around the world, current definition of PTSD remains generalized.

PTSD: A syndrome that results after exposure to a stressor of extreme magnitude, marked by emotional numbing, reliving aspects of the trauma, intense responses to other stressful events, and other symptoms such as hyper-alertness, sleep disturbance, guilt, or impaired memory or concentration (National Center for PTSD).

The PTSD framework is useful in that it recognizes the less tangible harm of trauma—that bombs traumatize populations in addition to destroying community infrastructure. A holistic approach to post-conflict assistance gives consideration to the ways in which individuals relate to one another and their environment in the wake of grave trauma. This is, of course, to be applauded. However, the PTSD model of intervention is not without its limitations—including methods of diagnosis and treatment, the disregard shown to local understanding of the experience, and the idea that the PTSD paradigm can be profoundly disempowering and counterproductive to healthy rehabilitation.

PTSD is treated by a variety of forms of psychotherapy and drug therapy. There is no definitive treatment, and no cure, but some treatments appear to be quite promising, especially cognitive-behavioral therapy, group therapy, and exposure therapy...*Exposure therapy involves having the patient repeatedly relive the frightening experience under controlled conditions to help him or her work through the trauma (National Center for PTSD).*

Some question the applicability, the appropriateness, of a perspective guided by a PTSD framework, believing that at best it is too widely applied and at worst “echoes Western colonial and racist psychology” (Agger, n.d.; Boyden, 2000; Bracken, Giller & Summerfield, 1995; Pupavic, 2002). Criticism centers on several points abbreviated below:

- Based on Western notions
 - Definitions of “trauma” and “disorder”
- Narrow checklist of symptoms
 - Focus on violence, not how it is processed
- Medical model
 - Experience as illness
- Racist and imperialist
 - Assumption that outside force must manage a helpless people
- Deficit-based
 - Denies position of strength, resilience
- Unrealistic
 - Treatment requires one-on-one therapy in a clinical setting
- Not culturally-sensitive or appropriate
 - Notion of “talk therapy” not in keeping with local belief systems

There are those who “voluntarily” join and do so for a variety of reasons. For some it is a way to organize the violent chaos taking place around them. Others may join up simply “because they noticed that gunmen ate better than those whose rice they stole” (*Economist*, 1/31/04). Some scholars have been quick to assert the agency of these children, to view them as self-aware freedom fighters in contradiction with the assumption of child combatants as passive victims (West, n.d.). Or, have taken issue with media portrayals which exoticize the Continent, questioning Western notions of “innocence” and “vulnerability,” even the terms “youth” and “trauma” to understand this complex issue, choosing to argue the resourcefulness children demonstrate in choosing to take up arms, characterizing it as an “appropriate adaptive strategy,...an extremely practical survival mechanism” (West, n.d.).

Whatever the child’s stated reason for participating in combat may be after she has been separated from the war environment, one must recognize the limitation of choice in this matter. Both direct and indirect coercion may play a part in child recruitment practices, such as:

employment or survival, self-esteem, as a means of redressing injustices, revenge, or pressure from peer group (Mendelson and Straker, 1998). Even among those considered “volunteers” we should recognize the limited ability of children in these circumstances to make informed and free choices. Wessells (1997) asserts the position that a child’s involvement in the military may never be regarded as entirely voluntary (Mendelson and Straker, 1998). Even absent the quaint notion of an “age of consent,” in an environment characterized by deprivation, with a military force providing access to shelter, protection, and food, the ability of anyone to exercise free will is questionable.

That armed conflict affects children and childhood development is well-documented. That involvement irrevocably leads to broken souls and moral dissolution is, however, up to debate. Boyden (2003) explores the issue by reviewing the literature, noting the “shortage of systematic empirical research in this area.” Contrary to her more alarmist colleagues, Boyden (2003) does not ascribe to a theory of moral devolution. Children are able to negotiate a landscape marked by violence and limited resources without losing their humanity, she argues. In fact, research suggests that “children may not be as liable to moral disorientation as many imagine.”

An appreciation for environmental impact supports criticism of traditional approaches to the study of war-affected children, which “tended to be highly medicalised and to emphasise individualized therapeutic care of traumatized children in clinical settings” (Boyden & Mann, 2000). War experience is thereby characterized as an illness that must be cured and war-affected children by extension, an affliction. Traumatic experiences are viewed out of context, as the primary component which defines an individual’s personality, rather than as an integrated aspect

of self. Psychological research on the moral development of child soldiers is generally guided by a pathological framework, with deficits-based research which consists of trauma checklists—frequency and type of violence witnessed—rather than coping processes and resilience demonstrated (Boyden, 2003). A medical model allows children to be easily divorced from their environment, as victims who suffer the effects of war with no acknowledgement of their capacity as agents. They are wholly infected by the pathogen of war, lumped together into one unvarying group of profoundly traumatized victims. This is not only insulting to the strengths that children do exhibit, but does not support an empowerment strategy to aid. If we view children as broken and our own responsibility to fix them, what role does that leave for the children but as passive recipients to donor largesse? We need to recognize children for what they are—experts in their own complex experience, valued partners in community healing, future leadership, and potential peace-builders.

While presenting individuals with incredible challenges, soldiering does not unequivocally empty a child of its potential. Certain core pathologies may of course be attributed to wartime experiences, but there are also several central processes which are exercised very much to the benefit of the child. Positive aspects of the soldiering experience have been cited—bonding with a peer group, a sense of purpose, a semblance of order, security, and solidarity are among those listed (Mendelson and Straker, 1998). These elements contribute to a child's ability to endure. Mastery of war craft may feed a child's inherent yearning for competence, especially in those of school age. Children's exposure to political ideology may allow them to organize the events taking place around them, rather than succumbing to chaotic circumstance. Although the "role will be characterized by violence, brutality, deprivation, death, sexual exploitation and callous

indifference to other,” the military may prove a psychological stand-in for a lost parental presence, providing a framework of understanding, a social role, and the opportunity for physical survival where there otherwise would be none (Faulkner, 2001). A child exercising tremendous resilience, making use of her own internal capacities to stay alive, to construct or participate in a vehicle that will allow her to endure should not be treated as simply a victim, if only because it robs the community of her strengths in peace time.

Faulkner (2001) ably links the issue of rehabilitation with “the larger dilemma of national reconciliation and peace building.” Therefore, the lag time between close of active conflict and the initiation of child-centered rehabilitation efforts must be narrowed to increase the likelihood of success and to protect these children from the very real threat of re-recruitment. This will also contain the threat that these children, mobilized, would pose to neighboring countries. A force of battle trained, experience children will not sit politely in a vacuum, but will be led into further conflict as suits the desires of those who would seek to make use of their dubious talents. Access to a safe environment and exposure to normalizing influences are essential to psychosocial recovery. This is an essential step towards regional stability and peace.

Economic empowerment, capacity building that transforms the skills developed through war craft into positive and healthy behavior, trauma-healing that occurs with an exercise of indigenous leadership, and community-building tasks must all take place alongside one another. It’s not enough to affect change in an individual. Corrective measures must be taken on several fronts if rehabilitation efforts are to prove lasting. In their research, Hill and Langholtz (2003) cite elders in Sierra Leone, Uganda, and Angola who have noted that “youth with limited

education and economic opportunities who view violence as normal and who have seen the power of a gun are at risk for continuing cycles of violence.” This is why it is essential that these young people receive proper and adequate attention—the issue of re-recruitment into freelance mercenary corps should be of great concern. As the world learned when conflict in Sierra Leone and Angola came to a close, and the curtain rose on new theatres in Liberia and Cote d’Ivoire—these children may prove a vastly destabilizing force if ignored (Becker, 2004).

The interrelatedness of trauma and psychosocial development in the population is significant. The impact of this trauma is experienced not only in the minds of children, but also impacts on social cohesion. This is why the reintegration of child soldiers must go hand-in-hand with concerted community recovery. Investment in the social reintegration of former child soldiers must contribute to national reconstruction and reconciliation efforts, if we are to “address the structural conditions that make it so easy to militarize African youth,” as Alex de Waal so argues (Faulkner, 2001; McIntyre, 2003). We must work to reduce both the supply and the demand for this precious resource.

Continued social and economic marginalization of these children can only make for a lingering risk of destabilization. It is counterproductive and may threaten peace-building activities.

Community-based strategies empower the communities to exercise control over their collective lives, to heal together. Facilitating the empowerment of communities to exercise control over their collective lives counteracts the destructive effects of wartime on communities as well as on the emotional lives of the extended families that populate them. Programs that address the

behavior of individual children while ignoring the context of vulnerability do not operate to the full benefit of communities that must provide sustenance while healing social bonds.

Transitioning children out of war is an intensive and time-consuming endeavor. The World Bank recommends “a reasonable period, at least three to five years, of committed resources,” which grant applicants should be quick to remind them of repeatedly (World Bank, n.d.). We must remain mindful of the fact that recruitment is a *process* whereby children are conditioned to unquestioningly obey, desensitized to violence, and indoctrinated. Rehabilitation efforts need to be as comprehensive; part of which needs to be to allow new role models to replace the old. It is no accident of place and time that pushes children into warfare but, “a result of sustained and orchestrated brutalization [that] these children [are] turned into some of the most vicious and inhumane killers at the disposal of various factions” (Faulkner, 2001). Therefore, “a longer-term perspective on the transition process to civilian life for child soldiers” is required (World Bank, n.d.).

Children are (or certainly should be) universally recognized as any society’s most precious asset: the future. The successful rehabilitation and reintegration of former child soldiers lays the groundwork for a stable and lasting peace. To this end the World Bank has funded Christian Children’s Fund Angola land purchase and small business start up programs. Their approach to social reintegration has been to identify school, job, and vocational training placements, which are “vital for building hope for the future and giving young people skills that will enable them to support themselves”—with the added benefit of linking psychosocial healing with economic reconstruction (Wessells, Poulton, & Javed, n.d.).

Hill and Langholtz identify the innovative approach taken by the United Nations Children's Fund (UNICEF) to encourage school attendance, which has multiple benefits for the community, including: mobilizing former child soldiers in a healthy and constructive manner, new infrastructure (e.g. school house), and a future oriented toward education and the ability to locate a livelihood outside of the realm of soldiering. Since returning students may be self-conscious because of the disparate ages between themselves and others, UNICEF created a program of accelerated learning, which halves the "catch up" period required, thereby effectively narrowing the age gap significantly. The development of a new peer group comprised of former child soldiers and others holds so much promise in the possibility of knitting together these two groups among the community at large.

Reintegration efforts are complicated by the fact that former child soldiers are blamed and stigmatized for their participation in wartime atrocities—often against the communities from which they were abducted (Derluyn, Broekaert, Schuyten, and de Temmerman, 2003). Of course military commanders exploited this psychological vulnerability, forcing children to "commit horrifying acts of violence within their own communities with the intention of breaking the bond between children and their communities *so that the children will fear ever returning home,*" and would thus be less likely to attempt to run away (Hill and Langholtz, 2003).

What forms should reconciliation efforts take to effectively overcome the emotional pain suffered not only by the children, but by a community that once suffered at their hands? An approach emphasized in the literature is community-based treatments that make use of

“indigenous religious and cultural methods” (Mendelson and Straker, 1998). One-to-one therapy may not be appropriate to a culture with a strong collective identity or where belief systems warn against speaking of past transgressions. Rather than impose foreign models, programs should build on “the practices that people have used to survive and heal through history” (Agger, n.d.).

In Bantu cultures, for example, rural peoples believe that children who kill in combat are contaminated by the unavenged spirits of the people they had killed. Trauma is less the problem than is the breach between the living community and the community of the ancestors. A traditional purification ritual may be more appropriate in this context than would Western counseling. In fact, many people believe that talking about one’s war experiences invites the bad spirits to re-enter.

(Honwana, 1997, cited in Wessels, Poulton, & Javed, n.d.)

Indigenous forms of what we might term “therapy” have the advantage of being “accepted by local communities, and thus are more sustainable” (Hill and Langholtz, 2003). They are authentic to the culture and may serve to strengthen the connections that transcend the war experience. Healing rituals may even serve as a rite of passage for those who were not afforded them. Just as these children were often given amulets, “which they are told will make them impervious to bullets” as part of their indoctrination into the world of child soldiering, these children may receive spiritual sustenance in rituals of group forgiveness and cleansing (CETO, 2002).

Targeting children without engaging the community is not unlike attempting to seed untilled land. They will wash away with little chance of developing roots if their environment is not properly cultivated. Practitioners must share the simple common goal of assisting the community in embracing those they have lost. Indigenous practices are sustainable in addition to being

effective. Local communities have a vital role to play in post-conflict healing, reconciliation, and the social reintegration of war-affected children. The use of cleansing rituals is a vehicle for community empowerment. Most importantly, in healing social bonds and resolving social displacement, traditional rituals are excellent tools for peace-building.

Culturally appropriate cleansing rituals practiced by local spiritual leaders pave the way for community healing. In addition to the emotional/psychological/spiritual benefits, it addresses a social need, a return to kinship if you will. The World Bank documents the importance of these practices for children in Uganda, who were eager for cleansing ceremonies “so that their communities do not view them as *cen* (contaminated)” (World Bank, n.d.).

Development efforts must target traditional healers, as they “play a critical role in helping the community to forgive the former child soldiers for their atrocities” (Hill and Langholtz, 2003). Purifying rituals are in some ways a pre-condition of meaningful peace. They punctuate the war, delineating a shift to peace. A wonderful example of the effect is an Angolan cleansing ritual as documented by Wessells (1997), in Mendelson and Straker (1998):

First, he lives with the child for a month, feeding him a special diet designed to cleanse. During the month, he also advises the child on proper behavior and what the village expects from him. At the end of the month, the healer convenes the village for a ritual. As part of the ceremony, the healer buries frequently used weapons—a machete, perhaps, or an AK-47—and announces that on this day the boy’s life as a soldier has ended and his life as a civilian has begun.

Though many strides have been made in the field of child protection, they typically have taken legal form. These guarantees are only effective if the state is intact; therefore the support of the demobilization, rehabilitation, and reintegration of former child soldiers is intrinsic to the

rebuilding of the state. One cannot reasonably be separated from the other. Concerted, systematic efforts to rehabilitate these children are not only morally imperative but serve as a safeguard against a failing state in the future and the security concern that represents. Successful reintegration is a sign of successful rebuilding. Children must be made a priority, as they are the linchpin between past instability and future state health. Just as an essential part of recruitment is to drive a wedge between conscripts and community, national reconciliation efforts should focus on healing that divide.

The author would like to thank Paul Miller for his support, inspiration, and example; Cudore Snell, D.S.W. for his great confidence; and, John Williamson and Frances Frick Burden, Ph.D. for their guidance in this process.

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