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CONCLUSION PAPER

RAN FC&S multi-meeting

With input from RAN Rehabilitation, RAN Y&E, RAN LOCAL and RAN POL
19 and 20 May 2021, Online

Dealing with returning children and their mothers from Daesh: taking stock and going forward

Key outcomes

The RAN multi-meeting of the FC&S Working Group (with input from the RAN Rehabilitation, Y&E, POL and LOCAL Working Groups) addressed the topic of children and their mothers returning from previously Daesh controlled territory. The meeting served as an opportunity to assess the current state of play as regards child returnees and their mothers and to explore the type of structures that can help practitioners support them. The meeting gathered 31 practitioners, including social workers, local P/CVE coordinators, psychologists/psychiatrists, teachers and returnee coordinators, who have experience in working with returning children and their mothers. This conclusion paper first presents the main lessons learned and the highlights of the discussion and concludes with recommendations formulated by practitioners. Also, some of the main recommendations were:

- It is important **to rely and build on structures that are already in place** (i.e. multi-agency roundtables), to work on the local level and to limit the number of practitioners involved in each returnee case.
- Consider the **delicate balance of info sharing and communication** for each given situation. Transparent and clear communication among all the practitioners involved is of utmost importance. Communication with media could result in a transparent image for the key actors and less sensationalised reports in the media. Sharing too much information, however, can undermine a successful reintegration process.
- It is important to **monitor both physical and mental wellbeing** of returnees upon arrival at the airport. It is advised to consider the presence of psychologists, doctors, dermatologists and other medical specialists.
 - o Following their return, the children and their mothers need time to **adjust to their new reality**. This takes priority before working on important issues, such as the ideological component.
 - o Define a joint long-term goal with all actors and make sure to plan regular (mental health) check-ins, especially before important decisions such as a child starting school or a parent's release from prison.
- Practitioners need to **keep an open mind** to create a safe space in order to work with families and build trust. To gain trust, returning families need to feel accepted, respected and not judged.
- Working with families and children returning from Iraq and Syria can be challenging for practitioners supporting the families, so it is necessary to **organise supervision and counselling** for practitioners.

This paper outlines the current state of play on returns of mothers and children, before it presents the main highlights of the discussion, including main challenges in EU Member States. A discussion on experiences and good practices from Belgium, Finland, Kosovo and Sweden follows, before the paper concludes with key recommendations.

Highlights of the meeting

The current state of play

Several reports have emerged in recent years about the dire living conditions in displacement camps in Syria and Iraq, such as al-Hawl¹. The camps hold individuals who have fled Daesh territory, as well as those who were and sometimes still are connected to the terrorist organisation. Al-Hawl is currently (numbers from 2020) hosting over 68 000 people. Approximately 11 000 of them are women and children from 62 countries. Generally, it is extremely difficult for EU Member States to collect information about the people stranded in these camps. As camps in North Syria are managed by non-state actors, it can be a challenge to gain access to these camps and provide appropriate humanitarian aid. As detainees are not officially registered at the camps, it is also extremely difficult to find individuals to prepare their repatriation.



Some countries like Kosovo, Kazakhstan and Russia have been actively repatriating women and children from Syria and Iraq. However, many European Member States are still in the process of discussing whether to contribute to active repatriation and how to make this decision on a case by case basis². The possibility that residents of camps (for example Al-Hawl) could return to their home countries at some point (on their own or by active repatriation) leaves policymakers and practitioners with the complex task of preparing for and implementing reintegration and rehabilitation initiatives for the children and their mothers.

1: Main challenges for practitioners dealing with child returnees and their mothers from Daesh (formulated by practitioners during this RAN FC&S meeting on 19-20 May 2021).

Participants discussed the most pressing gaps and challenges they currently encounter when working with child returnees and their mothers (see figure 1). Some tentative proposals on dealing with these challenges from countries with recent experience are presented in the following sections.

¹ Christian Vianna de Azevedo, "[ISIS Resurgence in Al Hawl Camp and Human Smuggling Enterprises in Syria](#)", Perspectives on Terrorism, August 2020, Vol 14, No. 4 (August 2020), pp. 43 - 63.

² Deutsche Welle, "['Islamic State' returnees in Kosovo guided back into society](#)", Deutsche Welle 02.10.2019.

Lessons learned from recent experiences

Repatriating children and their mothers: the approach in Kosovo

Kosovo is one of the few countries that has repatriated a large number of returnees all at once. In 2019, the country repatriated 106 women and children from Syria and Iraq. The group included 65 children born in Kosovo and Syria, as well as nine orphans. The country developed a 72-hour-plan for returnees upon arrival:

- ❖ A first medical check takes place at the airport. Afterwards, the returnees are taken to a 'resilience centre' where they stay for **72 hours**:
 - For two days, a range of different doctors (e.g. paediatricians, gynaecologists, dermatologists) provide medical support and health checks for the returnees.
 - For the entire duration (72 hours), a team of first-responders, psychologists and psychiatrists remains with the returnees.
- ❖ From the resilience centre, returnees are transferred to a community health centre, where they participate in a two-week programme with more health checks. The next step is to receive state housing by the Ministry of Internal Affairs.
- ❖ This plan has proved efficient as it allows (mental) health practitioners to **assess the condition of the returnees quickly**. Many returnees suffered from diseases, such as Lyme disease, or needed gynaecological support after giving birth unassisted.
- ❖ Generally, children are **not separated from their mothers**. If mothers are prosecuted, they are kept under house arrest, so they can stay with their children.
- ❖ Many children showed signs of trauma and PTSD, such as stress, anxiety, unwanted memories, nightmares, chest pains or rapid heartbeats. Therefore, **regular mental health check-ups** are important, especially before children start school.
- ❖ All practitioners seek to create an atmosphere of **trust and acceptance** by implementing many different activities with the children. So far, their integration process is positive and they are successful at school. However, the process is still ongoing and constantly assessed, monitored and evaluated.³

Structures and procedures in Belgium

- ❖ Children born in Belgium or with ties to Belgium **under the age of 12** may be repatriated with their mothers. For older children and their mothers, decisions are made on a case-by-case basis.
- ❖ In preparation of repatriation, a **local task force** reviews each of the individuals returning, sets up individual and tailor-made programmes involving all relevant actors (hospitals, juvenile justice, guardians, prisons etc.). Local police forces work with remaining family members on **trust building** in order to include them in the reintegration process.
- ❖ When children do not speak Flemish or French, families may be supported with the **interpretation** as children can find it difficult to trust interpreters they do not know.
- ❖ Children under the age of 3 **are not systematically separated** from their mother and there is the option of arranging to keep mother and children together in prison.
- ❖ Returnees arrive to the Zaventem Airport where there is a **special area for the children** which includes toys. **Local police** is present to either separate the children from the parents or to accompany their arrival as a family. If children are separated from the parents, the returning families are informed upon arrival.
- ❖ There is a **questionnaire and an information sheet** provided by the DJSOC-TERRO (Central Counter Terrorism Division of the Federal Police) that is sent to all involved actors before the return of a child, so that everybody is on the same page. The questionnaire allows for the practical return of the individuals and plans socio-psychological follow-up sessions.

³ Curious to learn more about Kosovo's approach? Learn more here: [RAN Study Visit Returned Women and Children – Studying an Ongoing Experience on the Ground](#) (2019).

Lessons learned from interviews with child returnees

In Belgium, interviews with returned children have been performed by the police (only if the age allows it and only in agreement with juvenile justice). For these interviews, the 'TAM protocol' is used, which is a protocol that was originally designed for young witnesses and victims (for example victims of sex offenses). Some key insights about the lives and profiles of the child returnees in Belgium include:

- ❖ Children in Daesh territories may be considered adults from the age of 9 and when they show signs of puberty. This has severe consequences for their responsibilities (see more information below).
- ❖ Boys and girls show different types of vulnerabilities due to their different experiences:
 - Upon arrival in Daesh territory, boys from age 9 were usually separated from their mothers and siblings and sent to a *madafa* for men (a transitory house until the rehousing with the rest of the family). Until the age of 15 or 16, there was no mandatory military training camp.
 - For some boys, it was perceived as a positive experience in the beginning (example from a practitioner: *'It's fun, they had a motorbike, they have friends, they have pizza and go to the market, while the girls were mainly required to remain indoors'*).
 - The stage afterwards was more traumatising, when cities in Daesh territories were bombed: While girls were usually evacuated with their mothers and younger male siblings, older boys were often left to their own responsibility and had to navigate their way of surviving on their own. Some children lost their parents and had to rely on people they did not know.
- ❖ Some people who travelled from the EU to Daesh were living in deprived parts of society. In Daesh territory, some of them experienced better social conditions (for example better housing) than they were used to in their home country. The starting phase therefore provides some of them with good memories, which might have actually contributed to their mental wellbeing and may have contributed to resilience building. This may be difficult to hear or acknowledge for practitioners, especially in countries that have been victims of terrorist attacks organised by Daesh.
- ❖ Most children did not have any education at all, sometimes very little.
- ❖ A specific challenge is posed for returnee children of martyrs, who have a specific status and could attract specific people (from the Islamist extremist sphere) who want to take care of the child and marry the mother.
- ❖ Open sources tend to generalise children's experiences in Daesh territory, but they are very different and depend on the kind of child (there is a difference for i.e. children who lived in Syria or Iraq can be Yezidi children, local Muslim children, children of Foreign Terrorist Fighters, etc.).

Insights from the Swedish approach

In 2019, seven young orphaned children of a Daesh fighters were taken from a Syrian refugee camp to Swedish authorities in Iraq. From there, they were brought home to Gothenburg in Sweden. The Swedish speaker highlighted the following insights

- ❖ In Sweden, municipalities have the main coordinating role. Returnees are dealt with in the **ordinary structures of social services, youth centres and schools**. No special structures have been set up.
- ❖ It is important to map **the environment that was the cause of radicalisation** in the first place. In order to tackle possible future issues in this neighbourhood, it can be of use to get to know the motivations for joining a terrorist organisation.
- ❖ It can be a challenge to stay in contact with the mothers in particular, as they distrust the authorities. However, it is usually easier to approach children through, for example, **day care facilities and schools**.
- ❖ Orphans were placed in **foster families** who were specialised in dealing with traumatised children. Furthermore, the children are encouraged to take part in **sports and cultural activities** to create a new social positive environment.

Curious to learn more? RAN is planning a study visit to the City of Gothenburg in the second half of 2021. A call for participants with more details and ways of signing up will be published shortly on the [RAN website](#).

Key lessons learned in Finland

Finnish experts highlighted the importance of common long-term goals, transparency and trust building measures. Drawing on their experience reintegrating child returnees, the following lessons learned were highlighted:

- ❖ It is important to meet daily needs. Returning families need time to **settle down**, become accustomed to their new surroundings and understand they are not under threat.
- ❖ The **feeling of trust** is key for a long-term and sustainable working relationship. In some cases, families may not initially see that they need support, so practitioners (such as family and social workers) should be firm, but not pressure them. Restorative work with remaining family members can help create trust.
- ❖ Tackling ideological components of rehabilitation of the mothers is important, but should only be attempted once the **functional integration** (housing, medical care, everyday life) has been achieved.
- ❖ **Transparency and communication** with practitioners is key in the reintegration of children. For instance, when teachers are unsure or frightened about handling child returnees, it is important to provide support and hold meetings to discuss the issues in advance.
- ❖ **Support and supervision for practitioners** is key since cases of returnees can be quite difficult.

Curious to learn more about the Finnish approach? Please consult the recently published [report](#) National modelling for arranging long-term support measures for children returning from conflict zones and their family members' of the Centre of Excellence on Social Welfare in the Helsinki Metropolitan Area.

Consider gender-sensitive approaches

The high number of young women who left their European home countries to travel to Syria or Iraq to join Daesh or other terrorist groups contributed to a **rethinking of the narratives** around radicalised females. Gender aspects of radicalisation have come to the forefront of P/CVE. Below are some points to consider that have been discussed in a break-out group during the meeting:

- Practitioners need to reflect on their own gender stereotypes in order to **avoid blind spots** and to create gender-sensitive responses.
- The radicalisation of females can have just as **many different drivers** as the radicalisation of males. In contrast with many assumed gendered stereotypes, women can have ideological reasons to join and men can also be manipulated and radicalised out of purely emotional reasons.
- Understanding the differences between **the different groups** returning (men, women, girls and boys) is important to create long-term rehabilitation plans and help them to achieve their goals.
- For women and children separated upon return or repatriated separately, special challenges can occur in the rehabilitation process. It may be useful to consider **joint activities** for both mothers and their children.

Recommendations

The main recommendations mentioned earlier in this paper are elaborated below.

Organisational, logistical and practical recommendations related to multi-agency work

- Rely on the **structures that are already in place**. For effective creation of rehabilitation plans for children, make use of the multi-agency structures, with a focus on social services, schools and youth services.
- A multi-agency group of practitioners needs to act as soon as possible. Try to create solutions that are as **pragmatic** as possible. Set up a plan to assess the **mental and physical health and well-being** of the returning children and their mothers as soon as they arrive.
- **Limit the amount of people involved in each case**. For example, only give vital details to a small group of people who are in charge of a case, such as information about where returning children currently reside (inform only their contact point for example) or which schools they attend (inform only the headmaster). This may prevent unnecessary stigmatisation or fear.

Stigmatisation by the media, communities or families

- **Communication** to the media can help to deconstruct prejudices and, ultimately, fear. For example, it is possible to create bonds with journalists by communicating transparently to the media about how children are being repatriated (but not about the exact time and place of their arrival). Providing context can help maintain more neutral reporting and prevent sensationalised messages. Sharing too much information to many people, however, can undermine a successful reintegration process and result in the stigmatisation of the women and children (see point above).
- In some cities, there are certain **neighbourhoods** that are more prone to unrest and risks of radicalisation. When children return from Daesh territory, it is recommended they are not placed in these neighbourhoods.
- **Build trust** with the returning children, mothers and remaining family members by providing a **fixed point of contact** on the long term. Some families may be hesitant to accept support that is offered or may even overlook the fact that they need support in the first place. Regularly scheduled check-in sessions with the families is crucial.

Working with the target group of children and women

- It is important for practitioners to **keep an open mind**. Returning families need to feel accepted, respected and not judged.
- It is important to **monitor both physical and mental wellbeing** upon arrival at the airport. It is advised to consider the presence of psychologists, doctors, dermatologists and other medical specialists.
 - Following their return, the children and their mothers need time to **adjust to their new reality**. This takes priority before working on important issues, such as the ideological component.
 - Define a joint long-term goal with all actors and make sure to plan regular (mental health) check-ins, especially before important decisions such as a child starting school or a parent's release from prison.
- Try to offer **many different activities** for the children as they may experience a lot of things for the first time, such as seeing snow or riding public transport.
- Provide children with space for **dialogue, art and music** as it can help them to digest their emotions and to create a new positive environment.
- When interviewing child returnees upon arrival, ask **open questions**. Give them as much space as they need and try to not to ask too many questions. If possible, record the interview so it does not need to be repeated in the future.
- Provide **supervision and support** for practitioners working with the target group. This does not only help them to deal with difficult situations, but also helps them not to fall into stereotypical thinking.
- If possible, **joint activities** between children and their parents can help create a feeling of safety and provide a trusted environment.
- Do not consider children as one standard target group. Consider the **different experiences boys and girls** may have had while living in Syria or Iraq (receiving military training versus being at home) and the different gender roles they were prescribed.

- Take into account the specificities of orphans. Especially when one of their parents was a **prominent jihadi figure**, this can influence a child's rehabilitation process. Being the child of a perceived "martyr" can attract attention from the extremist scene.

Follow up

A possible follow-up of this meeting could address the question of how to deal with the returning children in the long-term and related challenges, such as when the children become adolescents, start looking for their roots online and are confronted with news articles about their parents. Another aspect of this long-term strategy is the question of how to measure success of the reintegration activities conducted.

Further reading

Information on the psychological aspects of dealing with returning children:

- Sischka, Kerstin (2020). [Female Returnees and their children. Psychotherapeutic perspectives on the rehabilitation of women and children from the former territories of the so-called Islamic State.](#)

Information about the safety situation at the al-Hawl camp:

- De Azevedo, Christian Vianna (2020). ["ISIS Resurgence in Al Hawl Camp and Human Smuggling Enterprises in Syria"](#) Perspectives on Terrorism, Vol. 14, No. 4, pp. 43-63.

RAN publications on this topic:

- RAN Specialised Paper [Repatriated foreign terrorist fighters and their families: European experiences & lessons for P/CVE](#) (2021).
- RAN Study Visit [Returned Women and Children – Studying an Ongoing Experience on the Ground](#) (2019).
- RAN Manual [Responses to returnees: Foreign terrorist fighters and their families](#) (2017).
- RAN Issue Paper [Child returnees from conflict zones](#) (2016).
- RAN Ex Post Paper [Building resilience among young children raised in extremist environments – specifically child returnees](#) (2016).

Audiovisual resources:

- RAN webinars on returning women and children in French and German were hosted earlier this year. The German recording will be available on the RAN YouTube channel shortly and the French readout will be published on the website soon.
- The award-winning podcast by BBC Sounds ["I'm not a monster"](#) tells the story of an American woman who took her children with her to the conflict zone, and who is now in jail in the US.
- This documentary ([Children of the Enemy](#)) tells the story of a grandfather's experiences to return his seven (orphaned) grandchildren to Gothenburg, Sweden.
- [Reintegrating returnee children into European society - YouTube](#)
- [Foreign terrorist fighters \(FTFs\) and their families - YouTube](#)