



# Dealing with returned women in the Western Balkans: challenges and opportunities from a practitioner's perspective

Authored by **Erinda Bllaca Ndroqi**, RAN External Expert

Radicalisation Awareness Network

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## Introduction and context

This paper analyses the existing approaches towards returned women in the Western Balkans (WB), from a practitioner's perspective, covering:

- a) **approaches for reintegration and rehabilitation** in working with women returnees from Syria and Iraq in the WB, with a focus on social and functional integration, trauma care, education and other relevant measures;
- b) **roles and responsibilities** in the engagement and coordination amongst state and non-state actors as part of rehabilitation and reintegration (R&R) approaches;
- c) identified **challenges**, capacity gaps and **needs** to address in order to strengthen future interventions.

The paper focuses on the four case studies of Albania, Bosnia and Herzegovina, Republic of North Macedonia and Kosovo\* due to their relevance in the region when it comes to working with a significant number of cases of returned women, availability of different types of programmes for returnees in general, and relevant lessons learned in the R&R of returned women.

The paper has three key objectives:

- (1) to provide a systematic overview of existing R&R approaches towards returned women in the WB;
- (2) to identify remaining gaps and needs;
- (3) and thereby to identify opportunities for further improvement of existing approaches in working with returned women.

The paper builds on the analysis of different sources on the issue of returnees in the WB, including collected articles and existing national protocols/guidelines and frameworks with regard to rehabilitation programmes in the WB region. Furthermore, interviews with government officials as well as frontline practitioners at the central and local level were held to identify lessons learned and best practices.

The voluntary and government-led return to the WB of over 500 individuals who travelled to conflict zones brought numerous challenges that impacted on processes of R&R, particularly when working with returned women and children <sup>(1)</sup>. Today, various practices are known through reports and case studies, identifying the need for a holistic approach that includes psychosocial, medical, legal, educational and mental health support. Although each case has similar elements in terms of expected psychological and emotional concerns, each one remains unique in terms of interventions. The cases of returned women in Kosovo\* on 20 April 2019, Bosnia and Herzegovina <sup>(2)</sup> in December 2019 <sup>(3)</sup>, and recent repatriation cases of five women in Albania <sup>(4)</sup> have shown that the process of rehabilitation, resocialisation and reintegration takes a lot of time and requires human resources and capacity as well as continuous and harmonised multi-agency support.

## Existing approaches: Systematisation

In recent years, the WB has faced a number of challenges in developing programmes for the R&R of returnees. In almost all countries from the region, the existing national preventing and countering of violent extremism (P/CVE) strategies have shifted from a whole-of-government to a whole-of-society approach, facilitating multi-agency support and tailored interventions <sup>(5)</sup>. The shift was initiated because WB authorities

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\*This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo Declaration of Independence.

<sup>(1)</sup> Shtuni, A. (2020, January 9). *Returning Western Balkans foreign fighters: A long-term challenge*. Italian Institute for International Political Studies. <https://www.ispionline.it/en/publicazione/returning-western-balkans-foreign-fighters-long-term-challenge-24762>

<sup>(2)</sup> Bosnia and Herzegovina repatriated 25 nationals in late December 2019, and is currently waiting for an additional mission.

<sup>(3)</sup> Perešin, A., Hasanović, M., & Bytyqi, K. (2021). Female returnees from Syria to the Western Balkans: Between regret and 'caliphate nostalgia'. *Perspectives on Terrorism*, 15(5), 29-45. <https://www.universiteitleiden.nl/perspectives-on-terrorism/archives/2021#volume-xv-issue-5>

<sup>(4)</sup> The latest repatriations (2019, 2020 and early 2021) happened in Albania with the return of five women and 14 children.

<sup>(5)</sup> Principles that are endorsed in the RAN Manual on Rehabilitation of radicalised and terrorist offenders for first-line practitioners.

faced tremendous needs that accompanied the repatriation process. The considerably high number of returned women and children was not originally considered as posing an immediate threat to national and regional security and community stability, but it underlined capacity gaps in the resocialisation and R&R arena in the region. Primary prevention in P/CVE work, such as awareness raising, requires common terminologies and a shared understanding of local and regional factors that drove people to travel to Syria and Iraq. More so, R&R of returnees, *as processes of tertiary prevention*, require even more stable relationships between frontline practitioners and security and non-security institutions as well as between practitioners and returnees, to be able to develop the trust needed for social and functional interventions.

## Kosovo

Kosovo has seen the highest concentration of returnees from Syria and Iraq – including those repatriated – in Europe, relative to population size. This process represents a case study *per se* when considering the demographic shift from repatriated male adults to women and children: the return of 110 Kosovars on 20 April 2019 brought home 32 women, 74 children and 4 men. While all men were detained, returned women and children were quarantined at a dedicated reception centre where, over the course of 3 days, they were screened for infectious disease and received medical check-ups, as well as psychiatric and psychosocial evaluations. All the returnees were interviewed by social workers in order to identify their immediate needs. Upon the first screening, all 32 returned women were investigated and kept under strict surveillance. On 3 September 2019, the Basic Court of Pristina issued the first verdict against a returned woman who received a 2.5-year suspended prison sentence. This proved to set an example for subsequent cases. Until August 2020, 27 out of 32 returned women received prison sentences. Kosovo was the first country to start criminal investigations for returned women. Public authorities have explained that most of the cases were suspended due to the travels of these women to conflict zones and were reopened once the process of repatriation was accomplished <sup>(6)</sup>.

Upon arrival of the returnees, the Kosovo authorities implemented a 72-hour emergency plan, coordinated by the Division for Prevention and Reintegration at the Ministry of Interiors. These 72 hours were predominantly used for medical, psychiatric and psychological assessments as well as referrals to hospitals, if necessary. After compliance with the emergency plan, the returned women and children agreed to be transferred to their families.

The process of reintegration of a high number of returned women and children together with the need to tailor these approaches to diverse profiles has put the capacities for R&R in Kosovo under heavy stress. Most returned women experience trauma, depression and other forms of post-traumatic stress disorder (PTSD) that require continuous support. Of particular importance remains the support of intergovernmental and international organisations in providing repatriated women with parenting training and supporting economic reintegration plans <sup>(7)</sup>.

Due to the growing need for continuity of the interventions, the government-led rehabilitation approach opened up to contributions from the civil society actors, as they were locally based and often enjoying unrestricted access and experience with marginalised groups and good ties with the local governmental structures and communities <sup>(8)</sup>.

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<sup>(6)</sup> See: <https://www.zeriamerikes.com/a/kosovo-syria-/4887472.html>

<sup>(7)</sup> International Organization for Migration. (2020). *Reintegration of returning foreign terrorist fighters (RFTF) and their families from conflict zones. Intervention factsheet*. [https://albania.iom.int/sites/g/files/tmzbd1401/files/inline-files/pcve\\_project-factsheet-reintegration-of-rftfs\\_ongoing\\_0.pdf](https://albania.iom.int/sites/g/files/tmzbd1401/files/inline-files/pcve_project-factsheet-reintegration-of-rftfs_ongoing_0.pdf)

<sup>(8)</sup> Source: Interview with Dr Feride Rushiti, Executive Director, Kosova Rehabilitation Centre for Torture Victims.

Opportunities	Gaps and needs
<p>Repatriation as an opportunity for sustaining R&amp;R of returned women:</p> <ul style="list-style-type: none"> <li>• Dynamic approach towards needs assessment is being used to adapt to changing needs</li> <li>• Inter-professional approaches towards functional and social reintegration measures</li> <li>• Good processes in place to identify and contact families of origin</li> <li>• Broad availability of basic and easy-to-access information for women returnees to be informed about their return process</li> <li>• A government-led process that facilitates inclusion of civil society actors during R&amp;R</li> </ul>	<p>Continuity and sustainability in case management processes remain a challenge:</p> <ul style="list-style-type: none"> <li>• High staff turnover and burnout</li> <li>• Lack of preparedness of local government authorities</li> <li>• Lack of continuity of risk &amp; needs assessment</li> <li>• Need for adequate funding</li> <li>• Limited economic opportunities and stable employment for women returnees' reintegration</li> <li>• Gaps in risk and needs assessment of women returnees and their potential radicalisation upon return to families of origin</li> <li>• More engagement with local communities needed to boost resocialisation and community acceptance</li> </ul>

## Bosnia and Herzegovina

Bosnia and Herzegovina used a “soft” approach with the first six women who were repatriated in December 2019: none of them were brought before the court for joining IS <sup>(9)</sup> after being declared incapable witnesses due to the effects of the trauma they suffered in the conflict zones <sup>(10)</sup>.

The Ministry of Security is the authority in charge of the repatriation programme, which started with a pre-arrival phase, involving responsible bodies at national and local levels. The reception phase was completed with the 10-day risk and needs assessment that included health and psychological evaluations, initial interviews and temporary accommodation. Following the reception, the process continued with the establishment of a mobile mentorship team helping returned women to find psychological services in their communities.

The Reintegration and Financial Support Fund for Returnees and their Families was established in cooperation with the International Organization for Migration, with the aim of supporting returnees and their families to start new jobs and achieve financial independence.

What differentiates the profile of returned Bosnian women to other WB countries is their lower average economic status level, their level of education and their origins from urban areas. These returnees were well educated, with at least a high school degree (four), up to university (one), and even a master's degree (one). The acceptance and return to their communities helped the returned women to overcome initial stigma and get assistance for their suffering and trauma. Yet, there are some concerns with regard to the efficiency of the deradicalisation programmes for the returned women, as there is no additional support for follow-up and evaluation of their personal experiences <sup>(11)</sup>. Beyond the degree to which they can reintegrate into families and societies, the success of reintegration of returned women will depend significantly on their economic prospects. Gaining economic independence can be a factor in leading people away from extremist networks and narratives <sup>(12)</sup>.

<sup>(9)</sup> Bosnia and Herzegovina is known for low sentencing rates of returned foreign terrorist fighters (FTFs). Bosnia's state court has tried and convicted 46 people who returned from Syria or Iraq over the past few years.

<sup>(10)</sup> Perešin, A., Hasanović, M., & Bytyqi, K. (2021). Female returnees from Syria to the Western Balkans: Between regret and 'caliphate nostalgia'. *Perspectives on Terrorism*, 15(5), 29-45. <https://www.universiteitleiden.nl/perspectives-on-terrorism/archives/2021#volume-xv-issue-5>

<sup>(11)</sup> Jahic, D., Jahic, A., & Sahinkaya, E. (2021, May 17). *Pandemic adds to fear for Bosnians awaiting repatriation of families in Syria*. Voice of America. <https://www.voanews.com/a/extremism-watch-pandemic-adds-fear-bosnians-awaiting-repatriation-families-syria/6205929.html>

<sup>(12)</sup> Perešin, A., Hasanović, M., & Bytyqi, K. (2021). Female returnees from Syria to the Western Balkans: Between regret and 'caliphate nostalgia'. *Perspectives on Terrorism*, 15(5), 29-45. <https://www.universiteitleiden.nl/perspectives-on-terrorism/archives/2021#volume-xv-issue-5> (p. 39).

Opportunities	Gaps and needs
<p>Repatriation as an opportunity:</p> <ul style="list-style-type: none"> <li>• Good processes in place to identify and contact families of origin</li> <li>• No convictions of returned women (this makes it easier to implement reintegration programmes)</li> <li>• Proactive engagement of local and women-led civil society organisations in R&amp;R</li> </ul>	<p>Rehabilitation programmes are not analysed:</p> <ul style="list-style-type: none"> <li>• Lack of screening for potential threats of further radicalisation upon return to families of origin</li> <li>• Lack of incentives for stable employability</li> <li>• Lack of preparedness of local government authorities</li> <li>• Need for more engagement with local communities towards resocialisation and community acceptance</li> </ul>

## Republic of North Macedonia

The government-led efforts to repatriate nationals who travelled to Syria and Iraq started in 2018 with the repatriation of 7 nationals; it continued with the repatriation of 3 women in 2019 and, more recently, 5 women, 14 children and 4 men in 2021 <sup>(13)</sup>.

Prior to the repatriation process, the Republic of North Macedonia governmental agencies initiated the preparatory phase with the provision of infrastructure and reception facilities, training and coordination with various state and non-state actors. In 2020, the North Macedonian parliament adopted a holistic approach towards R&R for the returned women and children, integrating central and local municipalities into individual tailored interventions for the returnees.

Upon arrival, the returned women and children are kept in the border reception centres for the first medical and psychological examinations, followed by a 14-day quarantine phase where risk and needs assessments and further criminal investigations for any potential criminal involvement of the returned women are completed. After the quarantine phase, the returned women are transferred to local communities and families, while the returned men are detained and transferred to detention facilities <sup>(14)</sup>.

The process of rehabilitation while returned women are transferred to local communities is presented as concerted intervention that involves legal, medical, psychological, social, economic and religious measures and reflected in the individual treatment plans. These individual plans are drafted by local authorities and approved at central levels. This methodology is part of the multi-agency approaches that follow R&R processes.

The implementation and follow-up of the cases have faced various challenges, especially in the municipalities that are currently following the reintegration processes of the returned women. Out of 14 municipalities (hotspots), the Centre for Social Welfare, which is the authority in charge of follow-up of the individual treatment plans, has set up only seven local multidisciplinary teams due to the lack of local structures in each municipality and the lack of staff. The local multidisciplinary teams are overburdened to follow the implementation of individual treatment plans, assess the progress, and recommend and refer cases accordingly in all 14 municipalities.

<sup>(13)</sup> Official data say the number of FTFs in the Republic of North Macedonia is 156. See: <https://www.icsve.org/isis-repatriations-in-north-macedonia/>

<sup>(14)</sup> Vanchoski, A., Shikova, N., & Musliu, A. (2020). *Enhancing the understanding of foreign terrorist fighters (FTF): Challenges for rehabilitation, resocialization and reintegration of returnees in the Republic of North Macedonia*. NEXUS Civil Concept. [https://kbb9z40cmb2apwafcho9v3j-wpengine.netdna-ssl.com/wp-content/uploads/2018/01/nexus\\_ftf\\_rrr\\_eng.pdf](https://kbb9z40cmb2apwafcho9v3j-wpengine.netdna-ssl.com/wp-content/uploads/2018/01/nexus_ftf_rrr_eng.pdf)

European Commission. (2018, April 17). *Commission staff working document. The former Yugoslav Republic of Macedonia 2018 Report*. European Commission, SWD(2018) 154 final. <https://ec.europa.eu/neighbourhood-enlargement/sites/near/files/20180417-the-former-yugoslav-republic-of-macedonia-report.pdf> (p. 38).

Opportunities	Gaps and needs
<p>Repatriation processes as an opportunity:</p> <ul style="list-style-type: none"> <li>• Multi-agency approach that combines and addresses the needs of the returned individuals (from state-sponsored institutions on a central level and research institutes to local municipalities and NGOs)</li> <li>• No convictions of returned women (this makes it easier to implement reintegration programmes)</li> <li>• Proactive engagement of local and women-led civil society organisations and academia in R&amp;R</li> <li>• Opportunities to jointly work in understanding and addressing the Macedonian multicultural and multi-confessional context</li> </ul>	<p>Rehabilitation programmes are not fully analysed:</p> <ul style="list-style-type: none"> <li>• Understaffed social welfare structures showing lack of profiled education and experience in dealing with P/CVE issues/programmes</li> <li>• Lack of a more structured form of cooperation between all stakeholders in the national setting</li> <li>• Lack of preparedness of local government authorities</li> <li>• Need for more engagement with local communities towards resocialisation and community acceptance</li> <li>• Better understanding of the gradual shift of the radicalisation processes and the dissemination of extremist narratives into the less visible online spaces</li> </ul>

## Albania

Albania faced the voluntary repatriations of 30 men, 7 women and 8 children during the period 2012-2019. Later on, the Albanian government was directly engaged with two repatriation missions, bringing back 5 women and 14 children. In 2019, the Albanian government, in coordination with the national Coordination Center for Countering Violent Extremism, local municipalities and civil society organisations (CSOs), developed a pilot programme that shaped processes of R&R for the voluntary repatriations, involving 12 women, 23 children and 13 men. As part of the programme, implemented by the Institute for Activism and Social Change in one municipality, frontline practitioners were able to build knowledge, expertise and information on the challenges and lessons learned in designing and implementing intervention plans. This was the first multi-stakeholder pilot effort that led towards the preparation of an interinstitutional National Action Plan on Repatriation.

According to the interinstitutional action plan, the process of reception is designed in various stages that include the moment of arrival, first rapid screening, and transfer to the reception centre for in-depth medical, psychological and psychiatric examinations (14-day quarantine phase). During this phase, the multi-agency authorities are able to develop individual treatment plans and assign local municipal structures to follow the process of reintegration.

In the case of Albania, the returned women requested to be accommodated in the capital and not with their families of origin, due to fear of refusal, stigmatisation and their unstable psychological status that could require specialised tertiary services. They have shown visible signs of PTSD, anxiety, frequent panic attacks, depression and sleep deprivation. Almost all of them feared losing their children. Some of them expressed constant fear from the stigmatisation of themselves and their children.

Additionally, local municipal structures faced difficulties in finding appropriate and stable accommodation for the returned women, assistance with registration of children in kindergartens and primary schools, assistance with assigned supporting teachers, psychological support, financial support for rentals and furniture, medication, food and material supplies, employment orientation sessions, etc.

Official sources from the General Directorate of Prisons report one returned woman in pretrial detention for a terrorism-related offence.



Opportunities	Gaps and needs
<p>Repatriation processes as an opportunity:</p> <ul style="list-style-type: none"> <li>• The government's political and security priorities to return Albanian citizens</li> <li>• Previous pilot programmes that have prioritised basic interventions and individual treatment plans</li> <li>• Preliminary training and capacity building for frontline practitioners, educators and law enforcement personnel</li> <li>• Civil society actors engagement as resource centres</li> </ul>	<p>Rehabilitation programmes are not fully analysed:</p> <ul style="list-style-type: none"> <li>• Need for assigned roles of the local actors, in order to avoid overlapping. In this way, collaboration and information sharing will help with the R&amp;R interventions</li> <li>• Needs to include prisons and probation authorities as part of the rehabilitation processes with roles that help prioritise interventions and follow up on release or application of alternative sentences</li> <li>• Particular attention to and human resources for mental health</li> <li>• No system that could reduce professional burnout</li> </ul>

## Identified gaps and needs through different stages of R&R for WB partners:

- Lack of preparedness and resources at the emergency reception centres (or detention) or equivalent first points of arrival for returnees, including missing facilities and gaps in the planning process after the immediate return of women.
- Language barriers and lack of specialised professionals (health, mental health, psychological support) further hamper the work with returned women who may be distant, very quiet and sometimes resistant to first contact with state authorities.
- Lack of substantive communication continues to undermine the establishment of trust with returned women, which may have adverse effects on the planning and implementation of interventions in R&R. (Need for compliance with the principle of “do-no-harm”.)
- During the process of repatriation/negotiations to return, misinformation about the treatment of returned women upon their return can cause fear, refusal, or even threats from recruiters in the camps in Syria and Iraq. Provision of clear and relevant as well as practical information and in an easy-to-understand language is needed to strengthen awareness about the repatriation and R&R process for returnees. Resources need to be invested to strengthen confidence in the process.
- Rehabilitation: upon arrival, returned women are usually held at reception centres for around 72 hours, followed by medical and psychosocial examinations, identifying the needs, and in some cases initiating judicial proceedings. Subsequently, the rehabilitation phase at the reception centre starts with programmes tailored to each individual case. Government entities responsible for the rehabilitation process initiate a case management process to co-design the support plan for returned women.
  - Lack of experience, expertise and information from the teams of psychologists, social workers, medical staff, teachers, cleaners and caretakers who work with returned women.
  - Working conditions and time pressure for frontline practitioners are challenging without adequate compensation for the needed expertise. Support from local CSOs has been crucial in addressing these challenges.
  - The ability to anticipate physical and psychological needs of returned women is limited given the lack of knowledge and communication with practitioners who work with clients in the camps. Such gaps may impact negatively on the implementation of interventions in the reintegration phases.
  - There is an immediate need for the emergency staff to know how to identify signs of violence, physical or sexual violence, PTSD, depression or other severe mental health disorders.

## Identified opportunities:

- Efforts in R&R can be improved by boosting effective multi-agency cooperation amongst government entities as well as through the inclusion of non-governmental actors and experts in the case management processes.
- Beyond the degree to which they can reintegrate into families and societies, the future of women returnees and the success of their reintegration will depend significantly on their legal status and their economic prospects. Gaining economic independence can be a factor in leading people away from extremist networks and narratives.
- Specialisation and training of frontline professionals can be an added value compared to including new institutions in order to avoid long “chains” of communication. Avoiding a high fluctuation of practitioners in working with women returnees is crucial to reduce loss of trust between client and service provider and ensure good counselling.
- The importance of preparing an enabling environment cannot be overstated. The receiving communities and frontline workers need to be prepared for the inclusion of women returnees and their specific reintegration needs through mutually owned processes and well-developed action plans, standard operating procedures and preparatory training.
- Good practices in rehabilitation work also include preparing communities for the returned women, in order to reduce suspicion and mistrust. These efforts should also ensure that necessary assistance given to them (e.g. housing assistance, support in finding a job or returning to school) is not perceived as undue competition or discrimination against other members within the community.
- Reintegration is the final phase that does not provide a clear idea of time frame, needs or changing conditions. Building an enabling environment for reintegration is an area where the work of local organisations and practitioners has been instrumental in addressing challenges around stigmatisation of returned women, their families and the communities they are reintegrated into. Many support activities to returnees and their community members are already taking place and require adequate resources and support to be scaled up. This includes, but is not limited to, psychosocial support, counselling, vocational training, employment opportunities, support for administrative matters, such as obtaining birth certificates, and educational and recreational activities for women and their accompanying children.

## Key lessons learned and recommendations

While dealing with returned women, several WB partners have developed joint multi-agency programmes that are oriented towards community-based rehabilitation programmes. Such programmes have integrated gender-specific procedures that are oriented towards trauma and violence management.

1. A coordinated approach, with clear roles and responsibilities of multi-level professionals, is a precondition for the identification of needs and development of consensual treatment and rehabilitation programmes for returned women. Such a coordinated approach would avoid duplication of activities or competition and foster sustainable programming and synergies.
2. Access to information by returned women about the repatriation processes provided by the government and the different phases that follow rehabilitation efforts can be a good avenue to fight stigmatisation and build trust amongst them. If combined with clear and agreed-to plans, easy-to-understand information embraced by the returned women can become a driver towards their stable R&R. Working with returned women can empower compelling narratives and preventive approaches. By introducing clear treatment plans that engage them and their families of origin proactively, frontline practitioners can facilitate smoother reintegration processes. These concrete and tailored interventions in the WB can help push repatriation processes by good examples.
3. Community engagement is critical for the success of R&R efforts. When it comes to reintegration, the governments must work with communities to reduce the stigmatisation of returned women. CSOs remain strategic partners to engage in P/CVE initiatives, including in R&R efforts: they are locally based, enjoy unmatched access to communities, and have unique knowledge of relevant dynamics that may help or inhibit the reintegration of returned women into society.

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### About the author:

**Erinda Bllaca Ndroqi** (PhD) is a legal researcher and a human rights practitioner. She is the executive director of the Albanian Institute for Activism and Social Change. Her organisation is known for the implementation of the first pilot programme on R&R of returned foreign terrorist fighters and their families. She is a CoE HELP national consultant and is currently implementing a programme dedicated to the role of the prisons system during R&R of the prisoners convicted for terrorism in Albania.

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