The psycho-social impacts of deployment-related encounters with children (DREC): Promoting prevention, intervention, and policy change

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INTRODUCTION

Global trends show that armed conflict is becoming increasingly complex, with children increasingly engaged in armed violence in a variety of roles (Østby, Rustad, Haer, & Arasmith 2022; Tynes 2018; Whitman & Baillie Abidi 2020).

Encountering children during military deployment can present important moral, ethical and strategic challenges to military personnel that may place them at risk of traumatic stress and other consequences.

Scant research exists on the nature and impacts that **deployment-related encounters with children (DREC)** have on military personnel.

Military personnel, leaders, policy makers and mental health practitioners require better guidance for how best to prepare military personnel for DREC, and support those experiencing difficulties in their aftermath.

OBJECTIVES & METHODS

We undertook a multi-phase, multi-method research program to describe the nature and impact of DREC and provide recommendations for mental health prevention, intervention and policy change.

Phase 1: Systematic review of existing evidence on the nature and impacts of DREC.

- Studies that reported DREC, policies, training or programs for deployed military personnel about DREC
- 2712 studies were screened, with **17 included**, comprising 86 independent child encounters.

<u>Phase 2:</u> Thematic analysis (Braun & Clark, 2006) of qualitative interviews with Canadian Veterans on psychosocial impacts of DREC (N = 13).

Phase 3: Participatory Action Research (PAR): Workshops actively engaging Veterans with lived experience to help refine findings and identify gaps and recommendations.

Western









RESULTS: SYSTEMATIC REVIEW

Nearly all studies identified were qualitative in nature, representing data obtained from clinical and anecdotal accounts.

Type of Outcomes

Types of DREC (studies: n, %):
Armed children (37, 43.02)
Ambiguous DREC (23, 26.74)
Children used as porters or human shields (8, 9.30)
Children as suicide bombers (6, 6.98)
Sex related (4, 4.65)

Training & policy findings:

Only 2 accounts described reception of pre-deployment training relevant to DREC.

During the Encounter 23.26 Failure to Engage Physical Injury(ies) to Soldier(s) Casualties of Soldier(s) Taken Hostage Well-being 29.07 Psychological Consequences 40.70 Mental Health Substance Use Hostility/Aggression Suicidal Ideation(s) Suicide Attempt 18.60 Social Consequences Relationship Related Professional Related Moral/Religious Consequences 29.07

Four out of 5 accounts that commented on policy underscored the lack of available policies governing rules of engagement for child encounters.

PRELIMINARY RESULTS: THEMATIC ANALYSIS

Impacts of DREC

Psychological

Existential

Professional

Physical

Social

THEMES

Types of DREC

- Recruited/used in violence
- Part of the population
- Ambiguous

Contextual factors

- Mission framework
- Deployment environment
- Personal context

Appraisals of DREC

- Socio-cultural
- Strategic/tactical

"All it was was 'fighting aged males.' Well, can somebody define to me what a fighting aged male is, or is that my own call?"

Coping

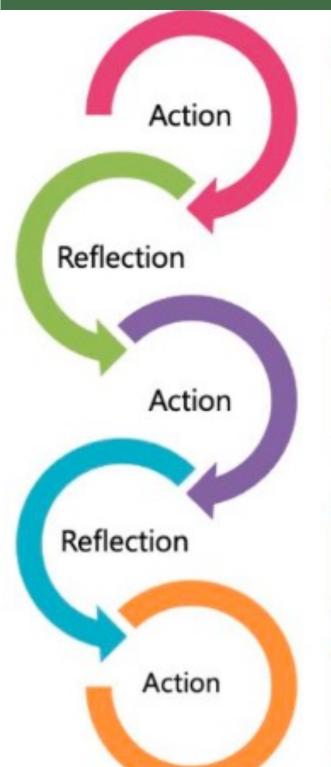
- On deployment
- After deployment

Supports

- Formal
- Informal

"I was abused as a kid and — but I took it especially close to heart seeing that [...] the amount of abuse and it just brought back a lot of hurtful memories. It bothered me actually bad too. [...] It's just so wrong. There's no right about it."

PARTICIPATORY ACTION RESEARCH



- Establish research team, including those with lived experience Orient team members to PAR approach
- Reach agreement on PAR ethics, objectives and process
- Review Phase One findings from interviews
 Workshop #1 facilitated review session: What key themes
- emerged? What further questions have emerged?
- Continue to build relationships within PAR Team
- PAR Team collectively designs data collection plan
 Collaborate to implement data collection and analysis
- Facilitated review session: what are the research outcomes so far?

 How are the research questions evolving? How are we working

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- together? Is everyone able to participate to the extent they'd like?
 Collectively identify research outcomes and implications

Develop knowledge translation plans (e.g., training and policy

Preliminary Findings

Gaps:

- No mechanism to document DREC or screen for their impacts
- Lack of identification of need for services related to DREC

"I'm not broken, I'm part of a system that has issues."

Recommendations:

 Engaging military personnel in scenariobased training focused on DREC may help prevent operational and mental health injuries



Figure 1: Word map of the elements of circles of support identified in Workshop #3.

DISCUSSION & RECOMMENDATIONS

The psycho-social impacts of DREC are multifaceted and have important implications for the well-being of military personnel.

changes)

- Minimal guidance exists to support military members who encounter DREC, and additional research is needed to support those at risk of exposure to DREC.
- PAR work is ongoing, as we invite policy makers, military leaders, clinical personnel, and partner organizations to help refine our understanding of gaps and provide additional recommendations.