Context

There is a persistent and urgent debate ongoing in Europe about supporting the repatriation of foreign children and families from Syria and Iraq. The conversation in capitals is frequently driven by political dynamics and would benefit from a greater level of nuance as well as stronger evidentiary footing in the reintegration experiences of those children and mothers who have already returned.

To more fully understand reintegration of children from Syria and Iraq to date and take stock of the experiences and practices around the returns that have taken place since 2015, UNICEF began a series of conversations with front-line workers in western European countries in mid-2020. Documentation has previously been done on experiences in Kosovo and Central Asia, but there has so far not been a larger-scale review of reintegration of children in western Europe. That is partly because returns have been gradual and are usually only made up of a few children or families at a time. Returns have also remained low compared to overall caseloads that remain in Syria. But by defining a broader scope of inquiry, including a number of neighboring countries, a picture has emerged of experiences and practices around reintegration on a larger scale. This paper aims to provide an initial documentation of those experiences and lay the foundation for a dialogue among social workers, mental health professionals, and other front-line actors about the progress, lessons learned, and challenges to date.
This paper is based on the perspectives shared with UNICEF in over a dozen key informant interviews with individuals directly supporting children returning to Belgium, France, the Netherlands, Sweden, Finland, Germany and the United Kingdom. These countries account for about 87% of the overall caseload of European children who were identified in camps in north-east Syria. Jointly, the front-line professionals consulted have supported almost 250 child returnees in child protection systems that share common frameworks, comparable resources, and a number of similar social and cultural dynamics.

There are also numerous differences, and these have helped shape the identification of good practices and emerging recommendations. This paper specifically focuses on the experience of children returning alone or with their parents (almost exclusively mothers). It does not make any efforts to capture the practices and experiences around adult “fighters” or individuals deported or extradited to Europe on legal grounds without children. Because so many adult men have been apprehended or killed in Syria and Iraq, children almost always return unaccompanied or with their mothers. The language in this paper reflects this reality, though recommendations for mothers might equally apply to fathers if such returns occur in the future.

The sensitive nature of child-returnee cases complicates the authorship of this paper. To ensure an extremely high degree of anonymity for returning children, all measures have been taken to conceal individual case descriptions. References to countries are also rare and limited to public knowledge, because UNICEF has not sought these governments’ approval to document specific practices.

Rather than focusing on the experiences of individual countries, the purpose of this paper is to try to gain an aggregate picture of reintegration practices, experiences and lessons in the context of western Europe to date. The author found consistent trends across these countries, which are characterized by similar social services systems, and similar approaches and constraints as they pertain to returnees. The value in bringing together this collective picture, is also to lay the groundwork for an exchange on some of these issues and provide feedback based on what has worked, and areas where additional policy refinement might be proposed.

The perspectives expressed and relayed in this paper, do not reflect the corporate views of UNICEF, but rather serve to summarize the consultations with front-line practitioners. Any questions about the paper or its content can be directed to: Anna Knutzen
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Caseload and Preparing for Returns

Capturing the full number of returns is complicated by a number of factors: 1) the high level of confidentiality around state-sponsored repatriation missions; 2) media safeguards critical to ensuring children’s anonymity and to shield them from media coverage upon return; and 3) the fact that returns happen via a number of different pathways that all have to be considered jointly for a full picture to emerge. Spontaneous returns present the greatest challenge in this regard, as they often receive little coverage and may not be referred for reintegration assistance.

This paper reflects only on the returnees being supported by child protection actors. More than 250 such children have returned to Belgium, Finland, France, Germany, Netherlands, Sweden, and the United Kingdom, and most of them are under the age of six. Experience with adolescent returnees is more limited, but a rich set of reflections has nonetheless emerged on the unique needs of this demographic. The overwhelming majority of returning children have experienced family separation, either because of the conflict, before departure or upon arrival. Children who return and remain with their mothers are the exception.

Differing Return-Journeys and Support Implications:

Child-returns to western European countries have generally followed one of three pathways:

1. **The identification and government retrieval of children from Syria and Iraq**: this is most commonly referred to as a “repatriation.” Due to a range of political and legal factors, European countries have mostly repatriated separated or unaccompanied children or orphans via this modality, and only a few mothers have accompanied their children, based on humanitarian grounds or court orders.

2. **Deportations/extraditions from Turkey**: for the most part, this has constituted families in administrative or other forms of detention where returns are coordinated through embassies. These cases reportedly increased in 2020 due to families escaping or being smuggled from Al Hol camp to Turkey where they could access consular services. The majority of returns to Europe have taken place via this pathway.
In all of the known cases of state-sponsored repatriation or deportation (scenarios 1 & 2), children are automatically referred to social and reintegration support services. In many cases, a social worker is part of repatriation missions, but if not, children will be met by a social worker upon arrival at the airport and will follow their case at least until a permanent custody assignment has been made.

In the case of spontaneous returns, the cases are neither systematically identified nor referred for reintegration support, although both children and caregivers are often eligible for voluntary enrollment in various social services or may qualify for other forms of re-entry support from the state. This, however, requires some level of initiative from the accompanying parent or caregiver. Finland, for example, has "immigration services" available for all Finnish individuals returning from abroad. Individuals returning from Syria and Iraq could therefore avail themselves of assistance with housing and employment but would not have been automatically referred to assistance with child protection needs or reintegration as such.

Given that many parents have been investigated by the police for traveling to Syria, and may face arrest upon return, most children returning are thought to be identified and referred to social services. However, many social workers do know of cases of returning children whose parents chose not to identify or enroll them in social services, and express some concern in the voluntary nature of reintegration support in such cases.
Preparatory Measures and Care Arrangements:

Depending on the pathway of return, a state may undertake varying degrees of preparation. In cases where the state is supporting repatriation, there is an opportunity—often underutilized—to prepare for children’s return. Returns from Turkey are consistently identified as the most streamlined, from the standpoint of social worker’s ability to lay the groundwork for successful reception, care arrangements, and support. In these cases, the embassy in Turkey is often able to have in-depth engagement with returnees (who are in administrative detention) in the lead-up to return and answer a range of important questions for social workers in advance. In these cases, embassies can complete social work questionnaires with returning parents to review children’s health status, nutrition, clothing size, vaccinations, mental health, language ability, and family ties.

“"The last boy who returned from Turkey, was 4 years old. His grandmother gave him a tour of his room on video while he was still in Turkey so he knew all about where he was going and what it would look like. It was still difficult to be separated from his mother at the airport, but he was prepared.""

Returns from Syria are often more challenging. The high level of secrecy surrounding repatriation operations, the desire to shield these missions from media attention, and the lack of information about children before their arrival, make it more difficult to obtain basic information and secure long-term care arrangements in advance. Social workers usually have very little notice of these repatriations and receive minimal case information in advance.

Due to a range of national security and procedural considerations, the legal status of mothers may not be known to social workers in advance of arrival. For example, they may not know whether the mother will be arrested on arrival. This can mean that there is little lead-time in securing care arrangements in advance. Partly to address this challenge, one country has established a dedicated coordinator position, embedded in its police force. This individual strengthens preparatory coordination, without disclosing charges against the mother before they are officially made.

Some countries have made remarkable efforts and investments to prepare proactively for return for all children known to be in Iraq and Syria. In the Netherlands, for example, social workers conducted a comprehensive mapping of more than one hundred potential care arrangements for all children known to be in Syria, Iraq, and Turkey. This effort was a model practice from the standpoint of laying the groundwork for returns, however those returns then remained elusive for mostly political
reasons, leaving families disappointed and increasingly desperate for political action. This effort was a model practice from the standpoint of laying the groundwork for returns, however those returns then remained elusive for mostly political reasons, leaving families disappointed and increasingly desperate for political action. Partly to prevent building expectations, other countries have prepared little in the way of groundwork before children actually return.

All the countries reviewed have exemplary existing child protection and social service infrastructure available. They have been able to leverage a range of resources to provide multi-disciplinary support to returning families including but not limited to mental health and psychosocial needs, support with family dynamics, education and social reintegration. Drawing upon professionals with experience supporting other marginalized communities or at risk caseloads (such as refugees, gang members, etc.), can provide a strong foundation from which to devise a reintegration support program.

**Good Preparation Practices Identified:**

- Systematically identify spontaneous returns and encourage voluntary inclusion into reintegration support.
- Build multi-disciplinary support teams with experience dealing with individuals who are at risk or who have faced various forms of exploitation—for example young people in gangs, victims of sexual violence, refugees, etc. Such teams will be prepared to support returning children with the range of their experiences.\(^6\)
- Obtain and share advanced information on children returning, both to inform care arrangements and to help social workers prepare for their return. This requires good and proactive information-sharing between Ministries of Foreign Affairs, Security Services and Social Services.
- Identify and prepare care arrangements as much as possible before return but manage expectations of families and inform them of applicable procedures, so it does not contribute to confusion and inadvertently to frustration or resentment.
- Preparing children for separation, by informing them of their care arrangements and plans for care upon arrival.
Coordination between different parts of the government can be a challenge. Specifically, the exchange of information between Ministries of Foreign Affairs, Judicial bodies, Ministries of Interior, the Police and Ministries providing Social Services.

The lack of information on orphan or abandonment cases can be particularly challenging for those supporting children upon return.

The lack of a case management system in Syria makes handover of critical information strongly dependent on the individual case, and therefore ad hoc rather than systematic.

Preparation Challenges Identified:

- Coordination between different parts of the government can be a challenge. Specifically, the exchange of information between Ministries of Foreign Affairs, Judicial bodies, Ministries of Interior, the Police and Ministries providing Social Services.
- The lack of information on orphan or abandonment cases can be particularly challenging for those supporting children upon return.
- The lack of a case management system in Syria makes handover of critical information strongly dependent on the individual case, and therefore ad hoc rather than systematic.
Arrival, Care Arrangements and Custody Decisions

Upon arrival, and often before leaving the airport, a number of procedures are carried out. In cases where mothers are the subject of arrest (e.g. Red Notice extradition from Turkey), child or social welfare staff are present to take temporary custody over any children. Temporary and/or long-term custody proceedings are then initiated, while children are placed with extended family or in foster care.

Some countries conduct a full medical examination at the airport to determine whether referrals are needed. Belgium has automatically referred returning children to the hospital for a comprehensive medical evaluation. Extended family are engaged in advance and are able to accompany the child during any required procedures; this has been found to be a helpful transition phase. The arrival at the airport also offers the opportunity for a “handover” of information between individuals accompanying the child and the social workers taking on their case. Social workers use this opportunity to gain as much information from the parent (usually mother) as possible—an opportunity that is particularly critical in the majority of cases where mothers are separated from their children.

Legal Status of Mothers

Parents who travelled from Europe to Syria or Iraq are almost always the subject of criminal investigations either in abstentia or upon return. Therefore, in most cases, mothers are arrested upon arrival, often on charges related to joining a terrorist organization, but sometimes also for charges of child-abduction or parental negligence. This has major implications for children and their care arrangements. In most countries, children are separated from mothers upon arrival at the airport and transferred either into temporary custody of a family member or into the foster care system. Children then have the opportunity for regular visits with the mother while she remains in prison or is undergoing judicial review.

Cases where mothers and children remain together have been the exception. One notable such exception is the judicial system in Finland, which is shaped around the idea that a mother can be both a criminal and a good mother. Specific infrastructure therefore exists to allow the woman to remain with her child while criminal proceedings are ongoing (usually in a safe-house or other home-like environment). Other countries, similarly, allowed women to remain in house arrest with their children while investigations and judicial proceedings were underway. Some countries, like Sweden, have grappled with the difficulties around conducting investigations and prosecuting those suspected of crimes. This has led to a lower rate of arrests.
In most countries, custody procedures do not begin until a child has physically returned, necessitating a temporary arrangement until families have undergone assessments and courts have made long-term custody determinations. While some countries will allow extended family to serve as temporary carers, other systems—notably France—require the child to be placed into temporary foster care while placement is reviewed. The family placement process can be swift if there is a parent who did not travel abroad and will care for the child upon return (this is common in “abduction” cases). However, in the majority of cases where a parent is not able to care for the returning child, custody decisions often take a long time. An average of 1-2 years to reach a permanent care arrangement is not uncommon and means that children often spend prolonged periods of time in temporary care.

The assessment of families presents a major challenge both to authorities, and to family reunification. These procedures are often lengthy, and somewhat ambiguous. The aim is to identify whether a family environment would be suitable to a returning child, but the degree that ideology of family members can and should contribute to this determination is not always clear. For example, if there is a “radicalized” uncle who regularly visits the family home, could this put the child at risk? Clear guidance on assessing children’s best interest in such cases could be useful.

Legal experts have identified this key gap in the law as it pertains custody decisions in “radicalization” cases. In most countries there is a lot of legal ambiguity around when and based on which criteria children should be separated from their parents based on the parent’s ideology. This is not a problem isolated to “Islamic extremism,” or “terrorism” cases, but has manifestations in a variety of forms of religious, social, or political ideology that the state characterizes as extreme (e.g. white nationalism, extreme veganism, etc.). The legal ambiguity on the parameters of what constitutes harm, and which tools should be applied to support children in these cases, presents a growing dilemma. In the United Kingdom, family courts have frequently assigned custody of returning children to other family members—even in cases where a court did not find a woman guilty of crimes. In such cases the act of taking a child to Syria was itself deemed to be an act of “harm” justifying separation.⁹

“Judges have constructed a new category of harm, and it is at its core ideological.”
Critics find this trend problematic. It remains clear that “extremist” views could result in behavior or practices that put children at risk. Evidence of such potential harm has successfully prevented children from being taken to Syria in some cases. But child custody cases should present evidence of harm to the child in question and not be based on a general harm believed to stem from an ideology. An accompanying best interest determination should present evidence that the harm from the ideology outweighs the harm of separation. Given the “severe risks endured by the child as a result of separation from the caregiver, and the long-term effects of separation on the child,” this requires careful consideration. There are tools and recommendations that have been developed, to guide judges, attorneys, clinicians, and child advocates, in “considering how the proposed placement will impact, assist, potentially harm, or possibly repair the child’s existing attachment system.” Greater legal clarity is also needed to define “harm” in such cases and to identify a range of tools—in addition to separation—to support these children and caregivers. Social workers have proposed a mechanism to add a safety or support network around the child without removing custody which can be counterproductive, adversely affect the relationship, and further undermine children’s rights.

While some mothers made informed decisions, others are themselves victims of deception and misinformation, predatory recruitment or dysfunctional marital dynamics that may include various forms of submissive gender roles or abuse. In such cases, mothers may have played the overwhelming role of protector, keeping their children alive through unthinkable tragedy and protecting them from further harm. A review of individual cases reveals a messy reality, and the need to consider cases individually. Social and judicial frameworks that do not recognize this complex picture can do further harm, by fueling social stigma, breeding resentment, and removing children from parental care without demonstrable justification based on established parameters of parental negligence or harm.

Another prevailing challenge in custody decisions, is the practice of separating large groups of siblings (this has been observed in cases of four or more children returning). There are two reasons cited in such decisions: 1) the burden it would place on carers—often grandparents—to care for a large sibling group; and 2) protection for children who have been publicly identified within a sibling unit and would be at risk of identification if kept together.

“One judge realized he had made a mistake in separating four siblings to live with two different sets of grandparents. They were missing their siblings and he revised his decision to reflect their ongoing attachment to the siblings and to the other grandparent.”

While in some extreme cases this may be found to be in the children’s best interest, there is a clear consensus among child protection and mental health professionals that keeping children together should be an utmost priority, and would often outweigh other considerations.
Some judges have been adaptive to feedback about children’s separation and amended custody arrangements in response to children’s attachment.

**Good Practices Assessing and Prioritizing Best Interest:**

- Care arrangements that honor children’s attachment to their mothers and allow contact and maintain family unity as much as possible.
- Approaches that allow children to remain with their mothers during investigations and legal procedures until such a time as separation is required.
- Preparation for separation, keeping the child with their siblings and family whenever possible, safe, and found to be in their best interest.
- Approaches that allow attachment to guide custody arrangements are ideal. Consulting children and social workers to inform this is critical.
- Child participation and considering the children’s views in best interest and custody decisions is critical. Many have strong relational bonds with family members, despite having lived abroad.
- Allowing contact with the mother is a standard practice in European judicial systems. In situations where children are separated from mothers upon arrival, extra measures can and should be taken to ensure these mothers have the opportunity to be present in their children’s lives while serving their prison sentence.
- Establishing a feedback loop between reintegration support staff and judges so that custody arrangements and other aspects can be adjusted as required.

**Challenges Identified:**

- Prolonged placement of returning children into temporary care arrangements remains a key challenge. It often takes 1-2 years for the long-term care arrangement to be put in place, leaving children in prolonged transition when they most need a permanent home.
- Need for specific regulatory frameworks/guidance on the parameters for separating children in cases of “radicalization” more broadly, and specifically whether or not traveling to Syria in itself warrants removal from parental care. This should include guidance on best interest assessments in such cases, and how to understand “last resort” in keeping with the CRC guidance on preservation of family unity (see General Comment 14 specifically section 1(c) on preservation of the family environment and maintaining relations).
Limited use of alternatives to family separation calls for the need to identify a range of tools—in addition to separation—to support children and families experiencing forms of “extremism” or “radicalization” in their home environment. Such child welfare tools and services should strengthen the safety network around a child, increase support available, and prevent isolation or children being “lost” for follow-up based on parental alienation.

Decisions to separate siblings—even in large family units—should be a last resort based on a clear demonstration that doing so is in their best interests and outweighs the interest in maintaining sibling bonds and their right to family life (see General Comment 14 specifically section 1(c) on preservation of the family environment and maintaining relations).
While family and social reintegration are in some ways distinct, they remain inextricably linked in the case of children. Most adults (or adolescents) who were recruited, or travelled on their own to Syria and Iraq, did so at least in part because of dysfunction in their own personal, family, or social environments. Their return, or the return of their children, is therefore likely to be marked by a re-entry into some of those dynamics, magnified by a complex set of social and familial reactions related to their decision to go to Syria.

Children who were born there, may be viewed through the prism of their parents’ choices, and can—through no fault of their own—conjure up familial and social reactions related to this. Regardless of the specific dynamics, families exercise an enormous influence on children’s social lives, experiences, and support upon return.

Social and familial isolation is common among those who travelled to Syria, and in many cases predates their departure. Due to their parents’ gradual “radicalization,” some children experienced significant social isolation before traveling to Syria. Some have had minimal contact with their extended family, not been enrolled in school, and led a withdrawn and sheltered life before departure. This can affect their existing familial bonds, and be a factor in their reintegration, particularly if they are viewed—even by their own families—as having somehow been “damaged” by their parents.

Grandparents are often the caregivers upon return, but they can have extremely complex relationships with their children (the returning children’s parents) and events surrounding their departure or recruitment. Extended family members are often marked by extremely high levels of guilt around what they failed to see, and how they might have prevented the person from leaving in the first place. Sometimes, the departure was predicated upon or led to marital rifts between grandparents. These dynamics are often still present and can be amplified by caring for returning children.

“I’ve seen a number of grandparents get divorced over this because they have such different ideas of how to respond to the actions of their children who went to Syria.”

Familial dynamics and resentment in ethnic or religious minority communities can also
manifest in unique challenges. Some families may feel that “shame” has been brought on the family through this extremist association. Such family dynamics can complicate extended family willingness to be associated with and provide support to returning children. Relatives may want to conceal the identities and backgrounds of repatriated children. Disagreements about how to approach the family narrative and reintegration can put family members at odds with the child’s parents. If the child’s parents are living, this tension may be palpable to children, and can manifest in major home-level tensions and conflicts over care arrangements, social service support, and other aspects of reintegration. Grandparents may also be personally impacted by social stigma. Some grandparents have in some way “aided” or been accused of aiding their children in Syria by transferring money to them—often in desperation of the life they lead in Syrian camps. This can have significant repercussions both legally and socially.

Children who were born in Syria sometimes have strong bonds with their grandparents—often forged over hours spent chatting on video calls. But in other cases, they may be getting to know each other for the first time. Because the child was born abroad, grandparents or family members may not know the child’s other parent (usually father), or their knowledge may be minimal. In some cases, a returning child may have an “infamous” parent, who has been accused or found guilty of violent crimes or whose actions have been widely covered in the media. While every effort is made to protect children from this association, it can present challenges both in terms of navigating social stigma and creating a truthful but restorative personal narrative for the child.

If the parents are imprisoned or dead, some of these dynamics may be less pronounced in the short-term, but may continue to emerge as children grow older and confront sometimes conflicting familial narratives of their own lives and the lives of their parents. It can also put children in the uncomfortable and unhealthy position of adapting to these dysfunctional dynamics, and being asked to revise their own story, narrative, or identity, to accommodate this dysfunction.

“The [returning] children have been told not to tell their grandmother that their father is dead, because she does not know and it would be too hard on her to find out.”

How to deal with religious education and identity can represent another point of tension. In cases where the child’s parent was a convert to Islam, but the extended family practices another faith, questions can arise about how to shape a child’s religious identity. In cases where grandparents or family members follow different religions, tensions can arise around these questions. Even in families that practice the same faith, the practice and theology can vary dramatically, leading to questions about how to support a positive faith identity and support religious education.

Despite these dynamics and challenges, grandparents represent one of the most critical family connections many returning children have. In about 90% of returnee cases, grandparents are eager and willing to care for
heir grandchildren upon return. They are a critical resource for reintegration of children. At the same time, it can be overwhelming for them to care for young children. Some end up being willing but physically or otherwise unable to do so, which can be extremely difficult and perpetuate an existing sense of failure. Approaches that support grandparents and extended family members to care for children can be key to positive return and reintegration experiences for children, and to preventing family separation, and repeated changes in the children’s care arrangements. Recognizing grandparents’ limitations and challenges and providing targeted support can maintain and restore this critical relationship over the medium-term.

Mitigating the Effects of Separation:

Almost all children returning have lost or been separated from family members. In some cases, mothers have consented to separation in the camps, or agreed for children to return to the country of origin while they serve prison sentences in Turkey or Iraq. Others have been orphaned, abandoned, or had a parent stripped of citizenship and rendered ineligible to return with them.

For children who do return with mothers, the separation upon arrival is an extremely difficult experience. Social workers express consistently that family separation is one of the most difficult aspect for children returning and is often a greater challenge to their reintegration than experiences they had in Syria. In some cases, children can be prepared for this moment. Social workers across the board have found that the bond between returning children and their mothers is generally very strong. Similarly, many grandparents have strong bonds with the children, who recognize them and have developed a relationship via photographs and video calls. This can help the transition into extended family care arrangements enormously.

In cases where mothers go to prison after return, regular access to the mother is possible in most cases. Children are usually able to have weekly visits and can sometimes have video calls. Women can also prepare materials for the children—such as CDs where they record themselves reading goodnight stories to the children.
Prolonged legal limbo of mothers can complicate family dynamics, care arrangements, and slow social reintegration. Addressing the problem of parental alienation.

Some families struggle with conflict around religious and political views which can undermine religious and social identities. The potential role of faith communities, and religious leaders/institutions can be complex. This may be leading to an under-utilization of this potential resource and community. Concrete positive examples are limited, and more specific thinking may be needed on how to approach this well.

Good Practices Identified:

- Social workers and mental health professionals can promote a culture of openness within the family.
- Dedicated support to extended families to agree on a common narrative, and constructive story that can help support children’s sense of belonging, identity, and social reintegration.
- Allowing prison visitations and regular contact with the mother.
- Enabling grandparents to support returning children, by helping ease the “burden” and ensuring they have enough support. This has involved supporting grandparents in everyday life. (Example: social worker supporting grandparents once per week with preparing dinner, helping around the house, brushing teeth, etc. This supports transition and can be key to sustaining a positive care arrangement.)
- Working with foster families to understand and prioritize the best interests of children, particularly as it pertains to family contact.
- Formation of reintegration support groups, that help returnees to be connected to services and feel adequately supported.
- Protecting the privacy of returnees in line with Article 16 of the CRC and principles upheld in the European Union General Data Protection Regulation. This has included taking steps to ensure that images or personal details are not publicized in the media and identifying details are omitted from court documents that may be filed related to their relatives.

Challenges Identified:

- Prolonged legal limbo of mothers can complicate family dynamics, care arrangements, and slow social reintegration.
- Addressing the problem of parental alienation.
- Some families struggle with conflict around religious and political views which can undermine religious and social identities. The potential role of faith communities, and religious leaders/institutions can be complex. This may be leading to an under-utilization of this potential resource and community. Concrete positive examples are limited, and more specific thinking may be needed on how to approach this well.
Mental health and psychosocial distress is a natural reaction among some returning children who have had extremely difficult experiences, and should not be stigmatised. However, mental health professionals working with these children indicate that most of them do not manifest signs of severe trauma and assumptions that all children are deeply ‘traumatised’ should be avoided. This terminology—commonly used by security actors and non mental-health practitioners—is unhelpful to most children’s recovery, and can further stigmatize and undermine reintegration. Furthermore, this focus can distract from addressing some of the greatest sources of stress facing many children upon return: separation from mothers or caregivers, repeated transitions in care arrangement, social stigmatization, language and cultural adaptation. In fact, many children will recover if they receive necessary support and benefit from critical protective factors that can mitigate the effects of harmful experiences such as supportive family and community.

That is not to ignore specific experiences of conflict or violence, which may have a real and lasting impact on children’s wellbeing. But even when exposed to the same threats and acts of violence or coercion, each Individual child will be impacted differently by his or her experience. While one child may be profoundly emotionally harmed and unable to function, another child may demonstrate considerable resilience and capacities to recover, particularly in the context of continued support from family, friends and community members. As each child has their own experience and a unique way of coping, practitioners should avoid making assumptions, and listen to what children say about their experiences, as well as the ways they understand, express, and live the various consequences of those experiences. In fact, those working with returnees caution against overly clinical approaches that often undermine trust and further alienate returnees. Identifying counselors or mental health professionals who know the proper traditions and customs and speak the same languages, understand the context in Syria, or may have experience working with refugees or similar cases can be extremely effective.

Grappling with Difficult Experiences:

Mental health professionals also stress the importance of giving returnees space to comprehend and grieve their losses, but the social context can make this challenging. It is hard to over-state the amount of loss most children (and many of their parents) have experienced over the course of their recent lives. These can be both internal and external losses and take a myriad of forms (e.g. separation from parents, leaving extended family, loss of a sense of security and comfort, school, routine, security, identity). Mental health
professionals further stress the importance of understanding the reactions to loss, and how to distinguish between normal and abnormal grief. Assisting in appropriate mourning will be one of the key tasks for social workers in these contexts and essential to understanding other psychological reactions and setting them in context.

While many western families and front-line workers may assume that an individual’s return to Europe is marked by joy, the reality may be more complicated. While leaving a camp like Al Hol or Roj will be a relief for many adults, some children have spent a formidable part of their childhood there and may have a more complicated relationship with the departure. They may leave behind friends, loved ones, and a social context where they fit in. When they arrive, they may struggle with language, lack social reference and entry points, and face an overwhelming amount of social stigma. Children may have little or no memory of life in the country of nationality, and in some cases have never been there at all. Repatriation can therefore involve a huge number of new, unfamiliar, and potentially uncomfortable experiences, more akin to those of a refugee, than someone returning “home.”

Many of these children have come to fear airplanes, with heightened ‘startle responses’ because of the presence of bombers in the skies above Syria. Putting on new clothes, meeting new people who may speak another language, eating unfamiliar foods, are all inevitable parts of repatriation and reintegration, but they can upset a routine that children found familiar, comfortable and predictable, even where the child lived in deprivation.

Many returning children have directly experienced or witnessed violence and have survived the death of loved ones. Relatives and friends may have been buried in Syria, in graves which are now halfway around the world. Others may have had to leave loved ones buried in collapsed buildings without the opportunity to appropriately mark and mourn their loss. Some children were abandoned or do not know what happened to one or both of their parents—a situation that can in some cases cause far greater distress than death of a loved one.

The loss—even of someone who may be a criminal or have done horrible things—needs to be recognized in order for them to have space to recover from these experiences. It is also critical that children maintaining positive memories from these years and of those they have lost, is normalized, understood, and not shamed. Social workers, foster parents, and mental health professionals supporting them can create a safe space that facilitates opportunities to show their love, commemorating the person, and mourning their loss (e.g. holding a memorial, remembering their names, or finding some other appropriate way to mark the loss).
Unique Support Needs of Adolescents:

A minority of children returning may have been directly involved in hostilities or forced to perpetrate crimes. The widely circulated ISIS propaganda involving children was all too effective in branding children—particularly older boys—as a security threat. Even though very few returnees to Europe have been of this profile, the stigma and prejudice toward older returnees is very pronounced. This has not been helped by the public dialectic around “child soldiers” and the low threshold under which returnees are considered “foreign terrorist fighters” in some countries. 17

Some older children’s reintegration involves “a reconstruction of the child’s place and role in the social world” 18. Whether or not their experience differs from that of younger children, adolescents have a particular need for social acceptance in their country of origin and need help “creating a bridge into a loving and accepting community.” 19 Their own understanding and rationalization of what has happened, their ‘personal narrative’, is thus key to their mental health and psychosocial wellbeing. Finding and developing social relationships are also key, and can be supported through a community-based approach, identifying long-term mentors, and facilitating peer support between children of similar ages and shared experiences, to help make sense of the their past and their reimagined identity in the present.

“Adolescents need to feel loved and accepted in the country of origin and have someone accompany them for the long-haul who can honor their past and help them bridge into a loving and accepting community.”

Education reintegration is the most challenging for this group of children. The long gaps in formal and informal education, often leave them significantly behind their peers in terms of educational benchmarks, and acquisition of knowledge and life skills. This can affect self-esteem as well as social reintegration. Even with access to supplementary support, returning to formal learning environments may be difficult for them due to stigmatization and fear from teachers and other students. This is often compounded by a sense of shame and loss of status for having missed formal education during younger years. Because of their background, these students may also struggle with concentration, motivation, and adhering to behavioral expectations. For this reason, dedicated and tailored approaches are recommended to supporting all children with their educational reintegration. Older children often particularly benefit from supplementary tutoring and mentoring and can thrive in educational institutions that allow for individualized learning pathways.
Confronting and Constructing new Social Identities:

Mirroring the complex profiles of the cases themselves, there are often conflicting social narratives surrounding returnees. The oversimplified depictions from tabloids have only fueled resentment and misinformation and contributed to toxic public rhetoric. Returning children and parents are therefore often at significant risk. Even those supporting returnees in Europe are sometimes threatened or harassed for doing so. Some children have been featured in abusive content or propaganda that remains available on the internet. All of this contributes to a social narrative that is harmful to children’s recovery, and fuels social alienation rather than inclusion. This social context is not just toxic for returning mothers or receiving families/caregivers. Children too, are confronted by stereotypes, ostracization, and black and white narratives that harshly judge and hurtfully label people they love. In a gravely polarized social, political, and informational context, reconciling complex narratives and identities remains an enormous challenge.

In an attempt to protect children from this stigma, well-meaning caregivers, community members and teachers have a tendency to unintentionally dismiss children’s experiences in Syria and enforce a narrative that they are “fine.” But such goodhearted optimism, can be harmful, and stifle identification of varying and often complex emotional and social needs, and thus undermine recovery. Returning children need to be in safe and accepting environments where they are able to freely express their emotions and needs and receive support from a nurturing adult they trust. Since enrollment in post-return services are typically voluntary, “sanitizing” of narratives can undermine the support children receive— preventing them from receiving the protection, stability and nurturing care they need during the process of reintegration.

There are also a significant number of cases where returning children are given new identities and names. Children are sometimes encouraged to adopt new narratives or “cover stories” by their families, in hopes of easing their social reintegration. In some countries, judges oversee the assignment of new or temporary names for children upon arrival. This is done in the spirit of protecting these children from social stigma, media attention, and from being identified to anyone who might wish them harm. But it can be problematic. Very young children may not internalize the change as much, but some will struggle and confront an alternate identity that has not been fully shared, and another which is hidden. Carers will need to have a plan in place to support children in this process of re-discovery, and to help them work through unresolved feelings, answer difficult questions, and listen, never dismiss negative reactions or experiences, as they navigate their new legal identity and live/remember in their real identity. Age,
Sensitizing family and community members so that they can better understand what children are going through and support them. During reintegration, children need high levels of care, compassion and acceptance. They will be better able to see themselves in a positive light if those around them are also able to do so.

Recognize that many aspects of the “home” culture may feel foreign to returnees. Giving them time to become comfortable in new foods, clothes and environments, and giving them space to express what and whom they miss.

Identifying mental health professionals who take a less clinical and more holistic approach to providing support. This can be key to building trust and helping returnees feel understood. Practitioners who have experience working with children affected by other forms of migration, violence, or abuse, may be well placed.

Social workers and mental health professionals can help families with mourning and loss by suggesting and supporting rituals, and working with families to identify a few positive things to share with children about their parents, including stories, pictures, and memories (e.g. “your father really loved you, and he used to love bouncing you on his knee, making you laugh, etc.”).

Social workers and mental health practitioners can assist families with mourning and loss: in lieu of a funeral, alternative rituals can be adopted, through discussion with the child and family, and in collaboration with a local religious group if wanted. In addition, alternative ways of memorialising the loss can be identified: (e.g. planting a tree that the child can visit every time s/he misses her relative).

Personality, culture and family values, especially the way the parents or receiving caretakers react will all affect the child’s ability to accept the changes enforced to protect them. The lack of synchronicity and different experiences within families can create problems.

Prolonged legal and judicial procedures upon return can perpetuate an identity crisis—even within a nuclear or extended family. The secrecy, speculation, and legal limbo facing many returnees make arriving at a common narrative more difficult. In many cases when mothers return with children, the emphasis of the family narrative—sometimes legitimately but sometimes fueled by a desire to avoid criminal responsibility—can focus on how the father is responsible for the family suffering. Children, of all ages but especially younger children, must be protected against such narratives, as their sense of worth is often nurtured in knowing that they are wanted and loved by both parents, especially one that is absent. Not recognizing this can have profound effects on their own identity, self-worth, and long-term psychological wellbeing.

**Good Practices Identified:**

- Sensitizing family and community members so that they can better understand what children are going through and support them. During reintegration, children need high levels of care, compassion and acceptance. They will be better able to see themselves in a positive light if those around them are also able to do so.
- Recognize that many aspects of the “home” culture may feel foreign to returnees. Giving them time to become comfortable in new foods, clothes and environments, and giving them space to express what and whom they miss.
- Identifying mental health professionals who take a less clinical and more holistic approach to providing support. This can be key to building trust and helping returnees feel understood. Practitioners who have experience working with children affected by other forms of migration, violence, or abuse, may be well placed.
- Social workers and mental health professionals can help families with mourning and loss by suggesting and supporting rituals, and working with families to identify a few positive things to share with children about their parents, including stories, pictures, and memories (e.g. “your father really loved you, and he used to love bouncing you on his knee, making you laugh, etc.”).
- Social workers and mental health practitioners can assist families with mourning and loss: in lieu of a funeral, alternative rituals can be adopted, through discussion with the child and family, and in collaboration with a local religious group if wanted. In addition, alternative ways of memorialising the loss can be identified: (e.g. planting a tree that the child can visit every time s/he misses her relative).
• Finding ways to undertake life-story work with returning children and mothers and help them reconcile different identities and aspects of their lives.

• Providing children dedicated help re-constructing their social identities over time. Long-term mentoring and accompaniment, life-story work, and targeted counseling can all have an important role to play in this process.

• For adolescents, a dedicated effort to ensure their social acceptance and inclusion is critical. Identifying individuals who can accompany them over the long-term, who can also honor their past and provide a bridge into a loving and accepting community, is key.

• Community support groups have been used in some cases to mobilize broader social and reintegration support for returnees. This can be a powerful tool to build acceptance and develop a support network.

• Alternative education approaches for older children, through tutoring, online education, or schools set up to support a variety of learning needs can provide a helpful bridge and allow greater flexibility.

Challenges Identified:

• Approaches that prescribe alternate identities should only be used when such identity protection is clearly needed and should be based on the children’s best interest. This should be accompanied by age-appropriate communication with the child so they understand the need for this measure.

• Addressing the problem of parental alienation can be difficult and re-emerge after repatriation.

• Balancing relational and cognitive approaches to mental health and reintegration needs, recognizing the need for relational recovery and social belonging are among the most critical needs in many cases.

• Prevailing political and social beliefs that adolescents have a different status, risk profile, and needs, undermines their repatriation process and social reintegration.

• Need for a concerted global effort to wipe out abusive content, and inappropriate coverage of children used by armed groups. Similarly, harmful coverage of returnees should be prevented and removed whenever possible.
Systemic Challenges Facing Social Workers and Mental Health Professionals supporting returning Children:

Given the number of actors involved in repatriation and reintegration, bottlenecks and bureaucracy are inevitable. But strong cooperation between the security, judicial, and social services sectors remains critical. Particularly in cases where children or mothers are not in contact with the law, this should also include a strong deference to and empowerment of child protection and mental health professionals to support individual needs and social reintegration.

Approaches that assume the need for “deradicalization,” are specifically cited by those working with returnees as fueling social stigma and undermining the reintegration process. Similarly, attempts to get social workers or psychiatrists to report on their work with returnees undermines the integrity of their work and the trust they build with families. Instead, security actors should trust, empower, and resource social workers to support reintegration over the medium and long-term, while maintaining the standard referral or “alert” procedures in cases where an individual risks harming themselves or others (these protocols are already well established as a professional ethical responsibility).

“Initially there was some tension with national security when I said I would not report on returnees. They were not happy. But now, they have seen how much stronger the relationships have become and they are happy understand the importance.”

In one country, returnees were initially prohibited from having contact with one another—a policy justified on security grounds but which has increased returnees’ sense of isolation. In recognition of the fact that these children and mothers may have few friends and derive great comfort from contact with friends who have shared experience, space should be given to these relationships, unless there are indications that they are harmful.

Strong information sharing protocols are critical to improve the reception and reintegration of returning children. While it is acknowledged that there are real security concerns facing returnees, the securitization of reintegration has potentially damaging manifestations. Among them is the lack of coordination among actors supporting reintegration. While the intention is
sometimes to protect children, moves to withhold information about a child that is vital to social workers, judges, mental health professionals, and foster carers assigned to support these children, can undermine their ability to provide support.

There is a clear consensus among those working with returnees, that their reintegration will take time, and should be resourced and supported over the medium and long-term. Mechanisms and resources are needed to follow-up on cases over time and ensure there is a group of people around the child that can accompany them over years through their reintegration journey.

Social workers and mental health professionals in multiple countries pointed out that the challenges facing the returning children is the tip of the iceberg. They point to acute examples of a growing social problem that involves children caught in a polarized world where extreme views are on the rise. There is a gap of resources and tools, both legally and socially, to identify and support children in such situations. Organizations like UNICEF have been encouraged to play a convening role in bringing together actors for the purposes of having this discussion and identifying a way forward with the aim of supporting children and helping their best interest be realized in such circumstances.

**Good Practices Identified:**

- Existing ethical and confidentiality obligations should guide work with returning families. Professionals have successfully pushed-back against exceptions that could undermine the trust necessary to build therapeutic relationships.
- Informing both the families, and law enforcement on the parameters of information-sharing and then strictly adhering to this supports trust-building.
- Social workers and mental health professionals should be trusted, empowered, and resourced to support reintegration over the medium and long-term, even after a permanent custody assignment has been made.
- Strong coordination and information sharing protocols should be put in place to ensure social workers and mental health professionals know as much about individual cases as possible before arrival.
- Allowing returning children to have contact with each other and continue their friendships as a way of bridging the transition.
Challenges Identified:

- Over-emphasis on confidentiality that inadvertently negatively impacts the ability of foster families or service providers to support children (e.g. withholding information related to their experiences in Syria even when this would be critical to support their care).
- Approaches that prohibit contact between returnees can further isolate them and undermine reintegration.
- Need for approaches that address a range of growing forms of social and political polarization and violent ideology and that include tools for identifying and supporting children caught up in such environments.
- Funding and resourcing for reintegration is sometimes limited in scope and length.
- Culture of secrecy around returnees can undermine efforts to secure community support and understanding among caregivers, teachers, and others working with these children.
- Support staff have received threats and hate messages for supporting returnees.
Conclusion: Toward a Child-Sensitive Approach to Reintegration

As difficult as some aspects of social and familial reintegration can be, social workers overall report positive initial outcomes. Children and mothers are adapting, as are the communities into which they have returned. Reception at the community level may be improving as well. As teachers, foster carers and others have met returning children, fear has given way to good will and greater openness, involvement and support.

There are also a range of things front-line workers are doing to mitigate against the challenges they see. For example, working to find ways to move beyond approaches that focus only on clinical mental health service provision to more comprehensive community based mental health and psychosocial approach- that supports children to recover sustainably through promoting their overall development, wellbeing and resilience, using a multisectoral and multi-layered approach that also supports children’s caregivers, families and communities- as part of family, social and community reconciliation and reintegration. This is difficult but critical work for transforming the often dysfunctional familial and community dynamics into which children are returning. Social workers and mental health professionals are also helping children develop a narrative that is close to the truth but does not put them at risk or give them additional stigma. Giving those who are supporting returning children directly, as much information as possible about their backgrounds and experiences remains challenging, but possible.

All of this is long-term work, and requires a social support network that can see children through immediate needs, medium-term manifestations of any experiences in Syria and Iraq, and also the long-term questions that may arise as they reflect on their own family story, the plight of their parents, and the social context which gave rise to their story. Social services and child protection systems in Europe are very well placed to do this work. They are also skilled and equipped to support these returnees, as they have experiences and resources to draw upon working with other vulnerable populations (e.g. sex abuse survivors, children in gangs, refugees, etc.). But they must be empowered, resourced, and encouraged to accompany children and their families and communities for the long-term.

There is also a need to re-think securitized approaches and frameworks for reintegration and “deradicalization.” Supporting returning children without understanding the bigger picture or long-term dynamics they face is unlikely to succeed. Instead, there is a need for
a holistic approach to understanding the complex dynamics and circumstances that led to children’s departure, moving beyond a narrative of “radicalization” to understand the social and familial nuances and dysfunction that put these children at risk.

A more nuanced perspective will shed light on options that may exist for addressing underlying risks and adopting community and child protection approaches that strengthen the support system around children facing growing isolation and social withdrawal. A security-oriented approach can and often does disempower social workers and practitioners who are best placed to support reintegration. A greater level of investment, resourcing, and at times deference to front-line actors can have the unexpected byproduct of improving their ability to provide support and lay the groundwork for community and social reintegration that is otherwise all too often elusive. Such an approach is needed not only for children returning from Syria and Iraq, but for thousands of children who find themselves in increasingly isolated familial and social environments in an increasingly polarized world.
Endnotes


2. See “Repatriation and Reintegration of Children from Uzbekistan Affected by Armed Conflict in Syria and Iraq” a joint product between the Government of Uzbekistan Joint Steering Committee on Repatriation and Reintegration and UNICEF.

3. This is based on the population in Al Hol and Roj camps, based on the latest available data (fall 2020). There are no indications the accuracy would be called into question factoring in spontaneous returns the predate the collection of this data.


5. This could range from support with housing, to welfare or employment support.


7. In March, 2021, a woman in Sweden was sentenced to three years in prison on charges of parental negligence. She had three children. One was placed in the care of the biological father, while two other half-siblings, were placed in foster care. For additional details see: https://www.expressen.se/kvallsposten/krim/mamma-som-reste-till-domd-till-ars-fangelse/

8. In 2019, none of the 150 adults who had returned from Syria to Sweden had been successfully prosecuted, though prosecutors maintained that there was evidence of potential criminal liability. For more see: https://www.thelocal.se/20190224/sweden-debates-fate-of-returned-foreign-fighters/

9. Dr. Fatimah Adash, Department of Law, University of Goldsmiths, as presented at the Council of Europe Thematic meeting on reintegration of children affected by armed conflict. November 2020.


Much of this section has been informed by the extensive work and writing done by Dr. Lynne Jones, a child psychiatrist specialized in the effect of war on children. For more on her myriad of recommendations see the books, papers, and talks she has published on these issues including: “Then They Started Shooting: Children of the Bosnian War and the Adults they Became.” Bellevue Library Press, 2013. Two recent publications augment these perspectives with a specific view to the intersection between loss and displacement. See: Grief, loss and mourning in displaced and refugee communities. In Suzan J. Song, (Ed.), Child/Adolescent & Family Refugee Mental Health: A Global Perspective. Springer Nature Publishers New York, NY: 2020. As well as: Adversity and resilience: 10 lessons I have learnt from working with children in humanitarian emergencies: L. Jones, Archives of Disease in Childhood (2019) doi: 10.1136/archdischild-2019-317964
17. Belgium has said it would repatriate children under 10, but any child above that age would be considered on a case by case basis because of their possible status as “foreign terrorist fighters.” Similar policies prevail in other countries, buttressed by low ages of criminal responsibility (10 years in the United Kingdom, and 13 in France and the Netherlands), and a plethora of social stigma.