Rehabilitation & Reintegration of Radicalized Afghan Youth in Detention

Through Psychological Intervention

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Glossary

AIHRC	Afghan Independent Human Rights Commission
AISS	Afghanistan Institute of Strategic Studies
APRO	Afghanistan Public Policy Research Organization
AREU	Afghanistan Research and Evaluation Unit
CVE	Countering Violent Extremism
EF	PoMA, Peace and Democracy Foundation
ICRC	International Committee for the Red Cross
IED	Improvised Explosive Devices
ISK	Islamic State in Khorasan
JI	Jemaah Islamiya
JRC	Juvenile Rehabilitation Center
R4R	Rehabilitation for Reintegration
UK	United Nations
UNAMA	United Nations Assistance Mission in Afghanistan

Executive Summary

This document presents a proposal for an ambitious and unprecedented series of interventions, both in baseline research but also in terms of pyscho-social support to vulnerable Afghan youths.

Introduction

This ambitious project as preparation for negotiations with the Taliban began, and during a year in which civilian deaths from conflict had already reached record levels by the mid-year point. By October of 2018, over 8,000 civilian deaths from conflict had been recorded, with suicide and non-suicide improvised explosive devices (IEDs) by armed opposition groups the leading cause with over 1,000 deaths.[1] Vulnerable Afghan youth have been recruited by the Islamic Emirate of Afghanistan, Haqqani Group or other ideological affiliates to carry out suicide attacks for years. This year, the Islamic State in Khorasan (ISK) also emerged as a bloody sponsor of suicide attacks, particularly against religious minorities.[2]

It is clear that after almost two decades of Western military intervention, Afghanistan is not safer than it was in 2001, and by many accounts is in fact less secure. The nation has a large youth bulge and successive generations of youth have known no peace. Non-state actors have developed well-honed methods for the recruitment and radicalization of youth to engage in acts of violence and the state is ill-equipped to deal with this looming threat.

Therefore, there is a critical need for interventions aimed at the rehabilitation and reintegration of juvenile detainees being held in Juvenile Rehabilitation Centers (JRC) located in prisons across all 34 provinces of Afghanistan. Many of these youth detainees have been recruited by groups such as the Taliban and ISK, indoctrinated with violent extremist, radical ideology, for the purpose of carrying out the deadly suicide bombings that have continued to plague Afghanistan at all too-often intervals. Policymakers may well ask why the Government of the Islamic Republic of Afghanistan should invest sparse resources on a population of youths housed in the JRCs. Systematic and timely intervention to ensure the rehabilitation of the JRC population is a matter of critical importance for the current and future national security of Afghanistan. However, effective rehabilitation and reintegration cannot be undertaken without examining the psychological issues that create the conditions for radicalization and indoctrination into violent extremist ideology. There has been a growing consensus that effectively tackling the issue of violent extremism, particularly the phenomen of suicide bombings, requires a shift in emphasis from ideology towards psychology,[3] both in terms of pathologizing the factors driving propensity to engage in acts of violence, as well as the potential treatments to be harnessed for rehabilitation. There are other factors that contribute to the recruitment of vulnerable children however psychological and traumatic experiences make them more prone to join and engage in violent acts.

This project is therefore based on the understanding that psychological and social support to radicalized youth should not be undertaken in isolation and that effective and sustained rehabilitation and reintegration is predicated on understandings of the underlying pathologies driving violent extremist

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[1] UNAMA (2018) "Afghan Civilians Continue to be Killed in Record High Numbers - UN Report," https://unama.unmissions.org/afghan-civilians-continue-be-killed-record-high-numbers-%E2%80%93-un-report.

[2] UNAMA (2018) "Quarterly Report on the Protection of Civilians in Armed Conflict," 1 January to 30 September 2018, https://unama.unmissions.org/sites/default/files/unama_protection_of_civilians_in_armed_conflict_3rd_quarter_report_2018_10_oct.pdf.

[3] Adam Lankford, "What You Don't Understand About Suicide Attacks," *Scientific American,* July 27, 2015 https://www.scientificamerican.com/article/what-you-don-t-understand-about-suicide-attacks/.

radicalization. There is no data on this coming out of Afghanistan and to date, no literature to suggest that any similar program interventions have been undertaken.

This project therefore aims to demonstrate that the problem at hand is not simply the result of cultural, political and ideological forces, but rather it seeks to draw links between psychological causal factors driving youth towards violent extremism in general, and suicide bombing in particular. This project is critical in the context of the JRCs because a youth detained for petty criminal activity such as theft, is at risk of exposure to extremist ideology from other, radicalized detainees. When this youth is released there is a risk that they will engage in a suicide bombing despite there being a low risk of this before detention at the JRC. In other scenarios, due to the lack of clear programmatic rehabilitation interventions in place, a previously radicalized youth may simply reenage in acts of violent extremism upon release. Furthermore, there is not only a risk scenario released JRC detainees joining known groups but also of spawning their own, new, freshly radicalized, violent extremist groups. In mid-2018 youth detainees were transferred to the Kabul JRC from the Bagram prison, where high risk detainees such as those affiliated with violent extremist groups are held. This means that the JRC population of 300 youths, who may not have been radicalized previously, is at risk of falling prey to violent extremist ideology. There is therefore a need to address this issue immediately.

The proposed project has been formulated under the assumption that the youth detained in JRCs including, and perhaps especially, those who have been radicalized by violent extremist groups, have been victims of abuse before and during incarceration. This assumption frames the focus of this project on the importance of assessing trauma levels of Afghan youths detained in JRCs.[4] Once an assessment, including of severity of trauma levels, as well as a typology of traumatised detainees has been conducted, the project seeks to undertake activities aimed at better rehabilitation and reintegration outcomes for youth detainees such as including employability, better capacity building outcomes for staff of the JRCs, better community involvement in the rehabilitation and reintegration of traumatized and/or radicalized youth detainees.

Such a programmatic intervention at this juncture is critical given the exposure risk from close proximity to former Bagram detainees to ideological views of armed opposition groups. This constitutes a social tinderbox that requires addressing before more youth are radicalized through further and more intimate exposure to radicalization. psychological interventions to youth in JRCs are therefore critical for mitigating future risks of youth detainees maintaining hardline ideological beliefs and becoming radicalized adults, or of youth detainees engaging in acts of violent extremism, such as suicide bombings, upon release. This project seeks to treat all youth, including those displaying propensities towards violent extremism, as being in need of psychological support, whether suffering from trauma or from sociopathy. This project therefore frames interventions around the assessment of psychological symptoms and the treatment of these via psychological therapeutic activities.

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[4] Justin Snair, Anna Nicholson and Claire Giammaria, Countering Violent Extremism Through Public Health Practice: Proceedings of a Workshop, (The National Academies Press: Washington Press: Washington Press, 2017).

Review of Literature

The Phenomenon of Suicide Bombings

As the phenomenon of suicide terrorism has spread globally, it has emerged as a research focus across disciplines including psychology, sociology, security studies and political science. Aside from explorations of the political, ideological or theological underpinnings, research into the phenomenon of suicide bombing has focused on pathologizing behaviours and mindsets or on exploring motivations.[5] Although the Afghan Taliban eschewed the tactic prior to the large-scale international intervention in 2001,[6] by 2006, inspired by al-Qaeda methods employed in Iraq, suicide bombings had become entrenched in the Quetta Shura's strategy and the phenomenon has been a regular occurrence since, causing horrific casualties, disrupting daily lives, and fomenting economic and political instability.[7] In 2016 Human Rights Watch reported that the Taliban had ramped up their efforts recruit children to undertake suicide bombings.[8] In 2017, Afghan police uncovered a large-scale people-smuggling operation in which Afghan children as young as four were being smuggled to Pakistan to be trained as suicide bombers.[9] It is clear, therefore, that certain young males are more vulnerable in general, and therefore more vulnerable to being radicalized and recruited for suicide bombings.

In attempts to assess such vulnerabilities, early studies created psychological profiles of people drawn to suicide bombing as uneducated, unemployed, socially isolated single males from their late teens through to their early twenties twenties.[10] In subsequent years, such profiling has been disproven with suicide bombings carried out by married educated and wealthy men, as well as by females, and children. Indeed, in Afghanistan, although the absence of female suicide bombing cases has noted by research, there has been an increasing trend of using underage males to undertake suicide bombings.[11]

Some research has focused on the psychology of coercion and how this can take advantage of mental health problems and self-destructive urges that they can cause.[12] Analysis has also focused on comparisons between different cases in order to create behavioural and psychological profiles for suicide

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[5] S. Atran (2003), Genesis of suicide terrorism, Science, 299 (5612), 1534-1539; J. M. Post, F. Ali, S. W. Henderson, S. Shanfield, J. Victoroff & S. Weine, (2009), The psychology of suicide terrorism, Psychiatry: Interpersonal and biological processes, 72(1), 13-31.

[6] Anand Gopal, (2010) The Battle for Afghanistan: Militancy and Conflict in Kandahar, New America Foundation, 36.

[7] Nicholas Wilkey, (2014), Suicide attacks in Afghanistan and Pakistan (Doctoral dissertation).

[8] Human Rights Watch, "Afghanistan: Taliban Child Soldier Recruitment Surges," February 17, 2016, https://www.hrw.org/news/2016/02/17/afghanistan-taliban-child-soldier-recruitment-surges.

[9] Frud Bezhan & Satar Furogh, "Afghan Police: Children Kidnapped to be Suicide Bombers for Taliban," *Radio Free Europe/Radio Liberty, July 20, 2017, https://www.rferl.org/a/afghan-police-children-kidnapped-by-taliban-to-be-suicide-bombers/28606744.html.*

[10] Merari Ariel 1990 The Readiness to Kill and Die: Suicidal Terrorism in the Middle East Origins of Terrorism Walter Reich New York Cambridge University Press.

[11] Human Rights Watch.

[12] A. Lankford, (2014), Précis of The Myth of Martyrdom: What Really Drives Suicide Bombers, Rampage Shooters, and Other Self-Destructive Killers, Behavioral and Brain Sciences, 37(4), 351-362.

bombers.[13] A study Adam Lankford took a bottom-up approach to the analysis of suicide bombing cases and outlined the conditions required for a suicide bombing to occur and offers security officials a framework for formulating preventative measures to reduce the instances of suicide bombing. Lankford establishes that suicidal intent can develop as a result of individual, social or situational factors and that these are often the result of mental illness, personal crises, or substance abuse.[14] The study also established that peer approval of suicide terrorism is also decisive in motivating would-be suicide bombers.[15] Importantly for this proposed project, Lankford recommends for counterterrorism policy makers to engage more closely in developing accurate psychological and behavioural profiles of would-be suicide bombers.[16] Such a psychological and behavioural typology requires the collection of data of the mental health state and the behaviours of radicalized youths.

Mental Health Research in Afghanistan & Beyond

The kind of mental health data that might explain the motivations and mindsets of would-be suicide bombers in Afghanistan discussed above does not exist. Indeed, there remains a dearth of overall mental health research in Afghanistan. However, studies on the effects of conflict on youth are numerous and provide useful insight for the Afghan context. In this regard, cross-sectional and household-based studies show that the prevalence of depression, anxiety, and PTSD in the region is notably high among women, along with explores to tragic and traumatic events, is a high risk factor.

However, it is important to note that traumatic events are not the exclusive causes of such mental illnesses. Poverty, limited social mobility, and poor governance are also significant factors. A recent study found that 85% of Afghan citizens surveyed had personally experienced or witnessed a traumatic event, and that there is a very high proportion of the population at risk of PTSD.[17] Many of these traumatic events or experiences are simply the facts of daily life in Afghanistan. Indeed, a study by Miller & Rasmussen shows that less than 15% of reported PTSD reported cases were attributed to direct war exposure.[18] These findings were echoed in a subsequent study by which pointed to a combination of demographic and socioeconomic characteristics linked to social exclusion that compound vulnerabilities.[19] Similarly, Miller and Rasmussen found that daily and basic needs and medication that are not met on an ongoing basis throughout life account for a far higher percentage of PTSD cases.[20] Such conditions have profound effects on the youth, so much so that pessimism and general cynicism towards their environment and upbringing

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[13] A. Lankford, (2013). A comparative analysis of suicide terrorists and rampage, workplace, and school shooters in the United States from 1990 to 2010. Homicide Studies, 17(3), 255-274.

[14] A. Lankford, (2011). Requirements and Facilitators for Suicide Terrorism: An Explanatory Framework for Prediction and Prevention. Perspectives on Terrorism, 5(5/6), 70-80.

[15] Ibid 74.

[16] Ibid 77.

[17] European Union Program for the Islamic Republic of Afghanistan, (2018) National Mental Health Survey and Assessment of Mental Health Services: Final Report.

[18] Miller and Rasmussen (2010).

[19] Trani and Bakshi (2013).

[20] Miller and Rasmussen (2010).

has led many of them to flee, in unprecedented numbers, to European nations. Most importantly, findings from other conflict zones suggest that early interventions in mental health among the youth could drastically reduce global symptoms and prevalence. Good physical health and a higher level of hope-optimism towards the future can serve as protective and preventive factors.

The academic field of social ecology calls for contextualizing varying social and cultural spaces and the time-scales in which certain phenomena occur.[21] This applies to resilience and mental health research as well, and has significant implications for those working across cultures in conflict zones or in humanitarian settings with children, women and other vulnerable, displaced, or insecure populations.[22] How we measure resilience is one primary challenge. As Luthar and Brown have argued, integrated levels of inquiry and transdisciplinary approaches must be emphasized.[23] The true challenge thus becomes ensuring that resilience research is both global in its reach and possibility, while simultaneously remaining historically, locally and temporally specific in its relevance and accuracy.[24] As Panter-Brick and Eggerman note, the family unit and community connectedness prove to be the most reliable factors for general mental health. An understanding of local "expressions of social hope,"[25] or the specific sociocultural milestones that are important for populations, is essential to understanding the process of human and mental development of people, particularly of the youth whose eyes are geared more towards the future than later generations.

At the macro-level, measuring resilience could thus be framed and understood in terms of community and trajectory. Those around an individual provide a support group and network. The future trajectory that this social context places the individual on, along with an understanding of the past and present can assist them in ordering their own world.[26] Focusing on the absence of mental problems, regardless of a person's experience with traumatic events, proves to be a significant and detrimental shortcoming to research. This focus on the immediate present, prevalent among trauma psychiatry in the West, has little connection to or capacity to account for how an individual is perceiving their past or their future. As Panter-Brick and Eggerman put forth, the emic view of resilience in Afghanistan is best encapsulated by the phrase "life feeds on hope" which carries an understanding of the future and the present in a way absent from many other approaches to trauma, which tend to focus on the past. As Miller et al argue regarding the nature of cultural specificity and global relevance:

> This reliance on Western psychiatric instruments and the failure to appropriately standardize or adapt existing measures for use with specific refugee populations reflect an essentialist belief within the Western mental health professions that core symptoms of psychopathology and their underlying causal mechanisms are essentially culturally invariant.[27]

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[21] Bookchin, 1990.

[22] Betancourt & Khan, 2008.

[23] Luthar, S. S., & Brown, P. (2007). Maximizing Resilience through Diverse Levels of Inquiry: Prevailing Paradigms, Possibilities, and Priorities for the Future. Development and Psychopathology, 19, 931-955.

[24] Smith.

[25] Panter-Brick and Eggerman (2012).

[26] Werner, 2000 16.

[27] Miller, 2006.

Correlations Between Trauma & Tendencies towards Extremism

There is a growing body of research that has drawn correlations between radicalization and mental health, particularly to trauma.[28] A lack of social cohesion and social capital, as occurs in insecure contexts such as Afghanistan, has been identified as decisive in causing negative mental health effects that consequently drive violent extremism.[29] In one study, 45% of radicalized youths reported having been the victims of physical abuse.[30] The same study found that 21% of radicalized youths reported having been the victims of childhood sexual abuse.[31] A further 57% reported experiencing mental health problems, as diagnosed by a medical practitioner, either preceding or during their extremist involvement. Another 72% reported problems with alcohol and/or illegal drugs.[32] While traumatic stress is not an automatic trigger for involvement with violence or violent extremism—indeed, it does not appear in most instances of radicalization—it is often a key contributor in combination with other pathways to violence in general. Extensive interviews with 44 former members of violent white supremacist groups by the University of Maryland revealed the following:

1) A strong relationship with at least one competent adult;

2) Feeling connected to a positive role model/mentor;

3) Having talents/abilities nurtured & appreciated;

4) Having a sense of belonging to a community, group or a cause larger than one self.

Furthermore, the *Neuchâtel Memorandum* also notes that a child's path to radicalization is often rooted in vulnerability factors that expose them to risks of abuse, such as displacement, conflict, poverty, etc.[33] Although there is a growing consensus around the role that trauma plays in radicalization, there does not, however, appear to be a significant corpus of research that has relied on assessing trauma levels of radicalized youths.

Juvenile Rehabilitation Centers (JRC)

The are Juvenile Rehabilitation Centers located in the prisons in all 34 provinces of Afghanistan. These are presided over by Afghanistan's Minister of Justice. The combined population of these JRCs is over 1,000 juveniles, of whom roughly 100 are females.[34] Each of the juveniles detainees has the right to be treated

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[28] Yasir Abasi, (2008) "Mental Health & Radicalisation: Is there a link?" https://www.rcpsych.ac.uk/pdf/Yasir%20Abbasi.pdf

[29] H. E. Alcalá, M. Z. Sharif, & G. Samari, (2017) Social Determinants of Health, Violent Radicalization, and Terrorism: A Public Health Perspective. Health equity, 1(1), 87-95.

[30] Justin Snair, Anna Nicholson and Claire Giammaria, Countering Violent Extremism Through Public Health Practice: Proceedings of a Workshop, (The National Academies Press: Washington Press: Washington Press, 2017) https://www.nap.edu/read/24638/chapter/3#10.

[31] Futures Without Violence, "Youth Trauma & Radicalization," https://www.futureswithoutviolence.org/wp-content/uploads/FWV_blueprint_7-Youth.pdf.

[32] Ibid.

[33] Global Counterterrorism Forum, "Neuchâtel Memorandum on Juvenile Justice" 2015 https://toolkit.thegctf.org/Portals/1/Documents/En/Neuchatel_Memorandum_on_Juvenile_Justice.pdf

[34] UNAMA "Rule of Law, Report on JRC," 2016, https://unama.unmissions.org/sites/default/files/2016_12_04_jrc_report_final-english.pdf.

in a manner: "*consistent with human rights and fundamental freedoms, with a view to counteracting the detrimental effect of all types of detention and to fostering integration in society.*"[35]

Inspections are conducted by UNAMA, the Afghan Independent Human Rights Commission (AIHRC), and the International Committee for the Red Cross (ICRC) and have found that the facilities meet the minimum standards set out in the United Nations Rules for the Protection of Juveniles Deprived of their Liberty.

Despite this, the JRCs suffer from a host of problems. Among the major issues are:

❏ Lack of adequate services
❏ Absence of psychological support
❏ Attention to youth vocational development, as well as easily accessible recreational activities.

Youths being held in JRC suffer from isolation and other traumatic detention conditions, lack of access to judicial processes, social stigma from criminality and neglect of rehabilitation and reintegration needs.[36] Beyond this, little systematic effort has been made to introduce psychological support and vocational skill for youth kept in these retention centers for better reintegration into society post-release. The situation in JRCs leaves these youth unprepared to face the outside realities once released. This lack of vocational and psychological preparedness can leave mainly the male vulnerable to leaning on radical ideologies and recruitment by extremist groups, and the female to illegal activities (mostly prostitution) to secure a livelihood both these tendencies can be witnessed (though we don't have conclusive evidence for it) while in JRCs.

Importantly, youth detainees have been transferred from Bagram prison, where many security detainees are held. This is highly problematic, as there is a high risk that detainees held at Bagram will have been exposed to highly radicalized and ideological elders, and this will have entrenched psychological and behavioural patterns. In turn, by moving these to detainees to the JRC, there is a high risk that radicalization will spread to previously unexposed detainees there. Research into other global contexts has indeed found that prisons can indeed become breeding grounds for the spread of radical and violent ideologies.[37]

Harnessing Psychological Support as a Tool for Rehabilitation & Reintegration for Radicalized Youth

Global Best Practice

There is an emerging body of research and policy work aimed at best practice for juvenile justice and rehabilitation in counterterrorism contexts. These emerging logics in the global best practice of youth detainee rehabilitation, reintegration and countering violent extremism (CVE) frame this research project.

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[35] Ibid.

[36] "Hope Behind Bars: The Boys of the Kabul JRC," Samuel Hall, 2017, http://samuelhall.org/wp-content/uploads/2017/08/Samuel-Hall-Hope-behind-bars-2017-for-Children-in-Crisis-.pdf.

[37] A. W. Kruglanski, M. J. Gelfand, A. Sheveland, M. Babush, M. Hetiarachchi, M. Ng Bonto, & R. Gunaratna, (2016). What a difference two years make: Patterns of radicalization in a Philippine jail, Dynamics of Asymmetric Conflict, 9(1-3), 13-36.

For instance, the Global Counterterrorism Forum's Rehabilitation and Reintegration Toolkit is designed around the principle that there are alternatives to prosecution and incarceration and that focus should be placed on better social work and psychological support.[38] The toolkit recognises that youths kept in detention, whether traumatized or not, are at risk of being radicalized and further traumatized by their peers. The *Neuchâtel Memorandum on Juvenile Justice* states that, "a juvenile justice system should have a rehabilitative goal...even for terrorism-related offense."[39] The same memorandum also states that detention conditions must ensure that minors can physically and mentally develop in a way and that psychological support and frequent contact with families are important.[40]

The UN Secretary General's Plan of Action to Prevent Violent Extremism identifies push factors that create conditions conducive to violent extremism: marginalization and discrimination, poor governance and violations of human rights and the rule of law, prolonged and unresolved conflicts; or imprisonment where radicals are held.[41] All of these conditions are exhibited amongst JRC detainees in Afghanistan.

A strategy that has emerged in attempts to deradicalize detainees has focused on mollifying hardline *jihadi* ideology by relying on Islamic scholars with "epistemic authority" to successfully engage with detainees in spiritual dialogue. The aim of this to eventually convince the detainee that terrorist ideology has perverted the true spirit of Islam, and to emphasis the religious injunctions against suicide and violence against civilians.[42] In Indonesia, former Jemaah Islamiya (JI) fighters are employed to engage detainees in deradicalization programs.[43] In Saudi Arabia, deradicalization efforts have focused on vocational training, theological discussions to negate manipulation of Islamic doctrine, psychological counselling and treatment, and job placements upon release.[44] A notable rehabilitation program was that of Algeria, which suffered from a civil war after fighters returned from fighting in Afghanistan radicalized and engaged in conflict against the state. There, militants who renounced violent extremism were pardoned and reintegrated through education and employment-focused programming aimed at improving their chances of socioeconomic success.[45]

Closer to Afghanistan, Pakistan engaged in reintegration of children recruited by the Tehreek-e Taliban Pakistan (TTP). Their strategy was reportedly to assess children for low or high risks of reoffending, due to the links that their families had with militants. Children assessed as being of low-risk were reintegrated sooner. Those assessed as being of higher risk were detained for longer during which time they participated in further deradicalization activities. Monitoring teams reported on whether communities that children were reintegrated within had ongoing militant presence, whether children had

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[38] Global Counterterrorism Forum, https://toolkit.thegctf.org/en/Rehabilitation-and-Reintegration/Detail/id/61.

[39] Global Counterterrorism Forum, "Neuchâtel Memorandum on Juvenile Justice" 2015 https://toolkit.thegctf.org/Portals/1/Documents/En/Neuchatel_Memorandum_on_Juvenile_Justice.pdf.

[40] Ibid.

[41] Futures Without Violence, "Youth Trauma & Radicalization," https://www.futureswithoutviolence.org/wp-content/uploads/FWV_blueprint_7-Youth.pdf.

[42] A. W. Kruglanski, M.Gelfand, & R. Gunaratna, (2010), Detainee Deradicalization, APS Observer, 23(1).

[43] Ibid.

[44] Ibid.

[45] Khalfan, Omar (2013) "Understanding De-radicalization Definitions and Contemporary Theories of De-radicalization," African Centre for the Study and Research on Terrorism (ACSRT). Vol 4 N° 2.

maintained school enrolment or gained and maintained employment. This monitoring was reportedly undertaken on weekly or monthly basis dependent on the risk level the child was assessed at.[46]

Another important aspect of best practice in the provision of psychological support to radicalized minors is the emphasis on training staff dealing with them in trauma-informed care and practice.[47] The practices are being mainstreamed global in health care, education and also in justice systems, globally. In juvenile justice, trauma-informed practice entails employing an organising framework for rehabilitation into society by approaching it with the mental health needs of youth detainees. In the case of JRCs, emphasis would be placed on ensuring staff have been trained in trauma-informed practice so as to ensure that their interactions with youth detainees create the conditions by which the mental health drivers of continued radicalization are addressed rather than exacerbated.[48]

Research Questions

The above literature review revealed that there are significant gaps, especially as regards effective interventions aimed at rehabilitation and reintegration of radicalized youth is concerned. Namely, the trauma and psychopathology levels of detained and potentially radicalized youth are unknown, and since this is considered by some to be a prerequisite for successful rehabilitation, then this is a gap that requires addressing.

This project therefore aims to address not only the psychological needs of JRC detainees and the staff that work with them, at the micro-scale, but also to address the scientific imperative to address the growing need for critical research on the role that psychological pathologies such as trauma play on radicalization among youths, especially in crisis contexts such as Afghanistan.

The research questions underpinning this proposed project are therefore:

1. What is the psychological condition of JRC detainees?

    a. What pathologies such as trauma are being expressed?

2. What are the radicalization levels of JRC detainees?

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3. Are there correlations between between radicalization and psychopathologies such as PTSD?

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[46] Abdul Basit, "Pakistan's Militant Rehabilitation Programme: An Overview," Counter Terrorist Trends and Analysis 7 (9) (2015).

[47] S. J. Ko, J. D. Ford, N. Kassam-Adams, S. J. Berkowitz, C. Wilson, M. Wong, C. M. Layne, (2008), Creating trauma-informed systems: Child Welfare, Education, First Responders, Health Care, Juvenile Justice, Professional Psychology: Research and Practice, 39(4), 396-404.

[48] J. D. Ford, M. E. & Blaustein, (2013), Systemic Self-regulation: A Framework for Trauma-informed Services in Residential Juvenile Justice Programs. Journal of Family Violence, 28(7), 665-677.

     a.   Are detained youths who express particular psychological symptoms also more likely to express violent extremist views?

The project is designed around the logic that only after the first step of assessing the trauma levels of detained, and potentially radicalized youths, can the second stage of this proposed project, of attempting rehabilitation and reintegration interventions, be undertaken.

Project Objectives

The overall objectives of this project are therefore to:

I.   Collect psychological data on youth detained in JRCs, aimed at:

- ❏ Assessing trauma levels according to standards of international psychological best practice
- ❏ Assessing for symptoms of sociopathy
- ❏ Assessing intensity of radicalization
- ❏ Assessing for propensity to commit acts of violence, including demonstrations of violent behavior in the JRC
- ❏ Assessing their ties to armed opposition groups
- ❏ Building a picture of specific traumatic experiences that have driven their radicalization and/or association with armed opposition groups

II.   Provide psychological support through groups based on homogeneous traits and symptoms being expressed, aimed at:

- ❏ Collective learning of youth problems
- ❏ Determining tailored solutions based on the different psychological support needs.
- ❏ there will be groups for like coping skills , problem-solving, trauma, and building resilience 2- there will be individual sessions for severe cases up to 3-5 times a week

III.   Provide training to staff, aimed at:

- ❏ Building capacity in how to deal with youth radicalized in violent extremist ideology and to assess danger levels
- ❏ Ensuring that staff are trauma-informed and able to assess whether youths for warning signs that intend to join violent extremist groups and how to halt recruitment.

IV.   Improve post-release prospects through psychological support, aimed at:

- ❏ Bi-weekly psychological support groups to examine symptoms and

individuals experiencing severe mental health challenges will have direct counseling with a psychologist.

❏ Aimed at increasing resilience which will reduce recidivism, address trauma symptoms and help recovery. Where needed, capacity building and supervision for prison staff

❏ Aimed at reducing psychological symptom reduction post tests, by involving assessment scales (baseline and post training evaluations.

V.   Provide educational and vocational programming, aimed at:

❏ Enhancing vocational skills, tolerant religious understandings, psychological social support, family and societal reintegration of 1,000 prisoners by the end of 2020

❏ Enhancing participants' employability upon release

❏ Building literacy levels through in Persian and Pashto calligraphy

❏ Enhancing participants' employability upon release

❏ Providing therapeutic benefit via artistic expression

❏ Extending their exposure and acceptance of differing world views through sessions on religion, poetry and spirituality.

❏ Fostering counter-narratives spirituality and religion to extend their exposure and acceptance of varying world views.

VI.   Facilitate community engagement, aimed at:

❏ Providing mentoring services to youth detainees, modelled on a "big brother/big sister" program.

❏ Post-release employability and integration purpose building relationships with private and public organizations, industries, financial institutions and marketing agencies for placement, financial and non- financial services support.

❏ Involving and improving on existing programs of PARSA and other organisations providing TVET to at-risk youth.

❏ Encouraging family involvement in the rehabilitation process through monitoring and fostering feedback loops before, during and after release.

Project Beneficiaries

The proposed project will provide positive outcomes for the following beneficiaries:

I. Direct Beneficiaries

- ❏ Juveniles detainees in JRCs, including:
    - ❏ Minors caught in the act of blowing engaging in a suicide bombing who did not succeed.
    - ❏ Minors transferred from Bagram prison who have been exposed to radicalization.
    - ❏ Minors who were already in the JRC who are now being radicalized due to what they are being exposed to from other detainees.
- ❏ Staff participating in psychological aid trainings, including:
    - ❏ Administration staff to better inform and change policy.
    - ❏ Direct contact staff to build capacity in effectively and ethically dealing with at-risk youth generally, and particularly to create trauma- informed environments.
    - ❏ Mental health care-providers to sustain long- term prevention.
- ❏ Community leaders/ elders how to facilitate support for youth who are conflicted about their lives and to create the ground conditions for successful reintegration upon release.

II. Indirect Beneficiaries

- ❏ Families of detained youths: through harmonious and income-generating outcomes.
- ❏ Society at-large, by reducing future propensity towards acts of violence by detained youths.
- ❏ The Government of the Islamic Republic of Afghanistan and its partners, by addressing the issue of radicalisation and rehabilitation among detained youth.

Project Design & Methodology

This proposed project has been designed based on a desk-study and consultative discussions with practitioners, policy-makers and relevant government entities. However, the steps as explained here require strengthening and support by visits to the prison facilities and a subsequent feasibility study at the preliminary stage of the project. This is to allow for pragmatic adjustment to the varying realities of the detention context in which the project is intended to be implemented. A pilot study stage will buttress the concept, focusing on the differential needs of different types of prisoners. Coordination with prison authorities will be established through field visits and through contact with relevant government officials who are in charge or can influence access. The project services will be accessible to all participants.

However, the aim is to tailor engagement activities to the different categories of prisoners, segregated along the lines of gender, remaining prison time and types of imprisonment. detainees with longer remaining prison sentences will be included for activities that have a longer-term strategy in mind (such as tutorial classes) it will incentivize prisoners to join the activities under existing programmes such as Rehabilitation for Reintegration (R4R see below), if participation counts as jail time (this has to be negotiated with detention facilities and legal experts during the initial stage).

The proposed project will begin engaging in the following activities aimed at understanding what kinds of psychological support interventions might work in effecting lasting and positive change within the operations of the JRCs. This will require the collection of data on the psychological and backgrounds of the JRC detainees over period of roughly two months.

Following this, the project lead and support researchers will take a period of weeks to collate and analyse data and create categories of trauma, pathology and radicalization types. Project staff may also decide that some detainees are not suitable for project interventions due to severe mental health or social issues, risk of violence against staff or others etc. Then youth detainees will be assigned to a number of groups for collective psychological support. Youth will be selected for shared symptoms and other social indicators. Also, determinations will be made for what psychological interviewing techniques will be employed by mental health care providers.

Then four months of intense psychological intervention will commence. This will focus on group and individual counselling, spiritual counselling, and family mediation where possible.

After this period, the project staff will assess which psychological support interventions were successful or otherwise, the reasons for this, any lessons learned, and any further gains that have been made which could be integrated into future programmatic interventions. This will be compiled into a report of the results and insights of the pilot phase.

Based on the contents of this report project staff will decide what programming will continue in the Kabul JRC and what will be commenced in newly established project sites at other JRCs across the country.

Primary Data Collection & Early Psychological Support Activities

1. Collecting data on trauma levels amongst radicalized youth detainees, aimed at:

- ❏ Understanding severity of psychological support needs in JRC
- ❏ Determining types of psychological disorders present, eg. sociopathy
- ❏ Building understandings of psychological factors/personality traits/ traumatic experiences that led to violent extremist and suicidal ideation
- ❏ Assessing associations between trauma and terrorism
- ❏ Assessing trauma levels according to standards of international psychological practice
- ❏ Assessing propensity for committing acts of violence

2. Psychological support groups based on homogeneous traits and symptoms being expressed, aimed at:

- ❏ Collective learning of youth problems
- ❏ Determining tailored solutions based on the different psychological support needs.
- ❏ Psychological rehabilitation dealing with and processing trauma resilience coping/ problem-solving
- ❏ Group sessions for aimed at sharing coping skills, problem-solving, traumatic experience, and building resilience
- ❏ Individual sessions for severe cases up to 3-5 times a week

3. Training staff in how to deal with youth radicalized in violent extremist ideology and to assess danger levels. The staff training syllabus will focus on:

- ❏ Determining whether they are affiliated with Taliban, ISK, or others.
- ❏ Engaging with them to prevent them from engaging in acts of violence
- ❏ Engaging with them to prevent suicidal ideation
- ❏ How to begin exacting psychological change amongst the most violent youth (ISK recruits being the most at-risk) through psychological rehabilitation.
- ❏ Assessing future challenges and finding ways by which to mitigate these as part of rehabilitation program.
- ❏ Direct clinical intervention with severe cases and individuals expressing suicidal ideation and symptoms of trauma.

Secondary Rehabilitation Activities

1. Vocational Training in handicraft, woodwork, pottery, tailoring and embroidery, aimed at:

- ❏ Enhancing vocational skills, tolerant religious understandings, psychological social support, family and societal reintegration of 1,000 prisoners by the end of 2020

- ❏ Enhancing participants' employability upon release

2. Education, aimed at:

- ❏ Building literacy levels through in Persian and Pashto calligraphy

- ❏ Enhancing participants' employability upon release

- ❏ Providing therapeutic benefit via artistic expression

- ❏ Extend their exposure and acceptance of differing world views through sessions on religion, poetry and spirituality.

3. Education, aimed at:

- ❏ Fostering counter-narratives spirituality and religion to extend their exposure and acceptance of varying world views.

4. Psychological Interventions:

- ❏ Bi-weekly psychological support groups to examine symptoms and individuals experiencing severe mental health challenges will have direct counseling with a psychologist.
- ❏ Aimed at increasing resilience which will reduce recidivism, address trauma symptoms and help recovery. Where needed, capacity building and supervision for prison staff
- ❏ Aimed at reducing psychological symptom reduction post tests, by involving assessment scales (baseline and post training evaluations.

4. Community Engagement, aimed at:

- ❏ Post-release employability and integration purpose building relationships with private and public organizations, industries, financial institutions and marketing agencies for placement, financial and non- financial services support.
- ❏ Involving and improve on existing community-based, vocational and youth support programs programs of organisations such as PARSA.
- ❏ Providing mentoring services to youth detainees like a – "big brother/big sister" program.
- ❏ Encouraging family involvement in the rehabilitation process through fostering feedback loops before, during and after release.
  - ❏ Including family mediation to help them understand why they should accept the child.
- ❏ Providing emergency referral and references through the hotline which is

already created but have one specific to deal with these cases

Staff Training Programming

The staff training program will focus on building capacities to effectively and ethically deal with radicalized youth who externalize their psychological problems through violent behaviors. Staff will be trained in how to respond to them, how to work with them safely when they are violent, how to support them and foster a feeling of connectedness so that they can feel connected and prevent them from (re)joining an extremist group and engage in acts of violence upon release.

Furthermore, the staff training will aim to build understandings of the importance of engaging in trauma-informed practice. This will place each detainees psychological situation at the forefront of interactions and will aim to mitigate any continuation of trauma that might eventuate in future acts of violence. This will be accompanied by training in how to assess for warning signs that youth detainees intend to join violent extremist groups and how to halt their recruitment or sustained association.

A high-risk outcome would be to engage youth in this project's activities and then to have them abandoned after the funding period ends. It is critical, and a matter of national security, that there is sustained contact and monitoring of project participants. If they feel abandoned, they will be at risk of rejoining radical groups. These youth will also prevent other youth from being radicalized. They can harnessed by stakeholders in the CVE sphere as future mentors and youth leaders in order mitigate against further waves of recruitment of youth into radical violent extremist groups.

Therefore, staff will be trained do conduct mental health follow-up of released detainees. This will be long-term vision for establishing the success rate of rehabilitation and reintegration and will seek to measure against metrics such as sustained placement in jobs, sustained contact with mentors, participation in community based support programs, contact with family,

Engagement Programming

The different portions of the engagement program (vocational training, psychological interventions, trainings on cultural tolerance and pluralism) will be led by professionals in the respective fields. Involvement and coordination with organizations that are already working in a respective field, such as skill building and vocational training, or psychologists working in the Afghan context, will be established for each part of the project. Contacts with other think tanks, e.g. Afghanistan Institute of Strategic Studies (AISS), Afghanistan Research and Evaluation Unit (AREU), Afghanistan Public Policy Research Organization (APPRO), that can support the successful implementation, have already been established.

Education Programming

Teaching material for the section on spirituality and religion will be based on such high sources of religious authority such as the Quran, Hadith, the major Quranic interpretations (*tafsirs*), interpreted by moderate reformist scholars. Occasionally, a reputed religious scholar (Afghan or non-Afghan) will be invited during

these debates to share their own experiences and answer questions the inmates may come up with. Translation will be provided by the Foundation in such cases where the guests are unable to speak an official language. Books will be made available for inmates interested in reading and classes and activities for female and male inmates will be held in separate premises.

Psychological Interventions & Support Programming

Psychological support interventions will involve the running of group counselling sessions. These will focus on themes such as building skills in coping and problem-solving, sharing trauma through group therapy and building resilience by sharing and group learning. Amongst the methods employed will be building skills on the part of youth detainees to identify and label their feelings, build coping-strategies for difficult feelings and skills for channeling feelings through clear and civil communication.

Individual sessions with mental health professionals will be arranged on referral after group sessions for severe cases 3-5 times a week.

Groups will be assigned not only according to shared symptoms but also shared behavioural patterns which may have been shaped by their past experiences. Amongst the different groups of youth detainees that will be engaged, will be minors who made preparations for but were arrested prior to being able to engage in a suicide bombing, youth detainees who were transferred from Bagram prison and were exposed to radical and violent extremist ideology, and youth detainees who were not previously radicalized but are now being exposed through close contact with others in the JRC.

Reintegration Programming

The activities will also for post-release employability and integration purposes are aimed at building relationships with private and public organizations, industries, financial institutions and marketing agencies for placement, financial and non-financial services support. These will further improve current vocational training programs involving PARSA and other non-government organisations engaged in such interventions.

Primary Project Activity Log Frame

	Project Summary	Indicators	Outcome Verification	Risk/Assumptions
Goal	Assess trauma levels amongst radicalized youth detainees and provide psychological support to them as part of rehabilitation and reintegration strategy	% of detainees displaying signs of trauma reduced, % of detainees displaying hardline radical views	Reporting of trauma levels based on baseline data collection	That staff collecting data will be able to do so effectively and accurately
Outcomes	Enhance understandings of trauma levels amongst radicalized youth detainees; Build capacities of JRC staff; Harness psychological support strategies to reduce trauma symptoms, aid recovery and increase resilience; Reduce recidivism and improve prospects for rehabilitation and reintegration upon release	Data on trauma levels and radicalization levels Trauma symptoms reduced Participation in psychological support groups Staff show improved capacity after training	Reporting of changes in trauma levels at intervals Attendance records of psych. Support groups Attendance records of staff training	That some of the youth detainees will not be released but rather transferred to adult prisons
Outputs	1. Data collected on trauma levels amongst radicalized youth detainees according to standards of international psychological best practice in order to assess propensity for committing acts of violence, scope for	Collected data stored in database	Practical testing and final project presentation	That metrics employed are accurate That data collection methods are effective
	2. Youth detainees participate in psychological support groups based on homogenous traits and symptoms being expressed	Participants hand in all assignments completed and in a timely manner & demonstrate their improved literacy and calligraphy skills gained in the lessons and through an examination at the end of the course	Written and oral examination of learned material	Some youth detainees displaying signs of high trauma levels will not be able to complete the course
	3. Staff trained to deal with youth radicalized in violent extremist ideology and to assess danger levels.	In mid-term and end-evaluations, staff show an increased capacity to deal with radicalized youth detainees and to assess danger levels effectively .	Mid-term and final evaluations. Staff self-evaluations.	That staff demonstrate skills gained practically
Activities	1. Collect data on the trauma levels of youth detainees (and create typology of homogeneous expressed symptoms)	Collection of data in database and creation of a trauma typology/gradation	Database and reporting of trauma levels	That data will be collected accurately and database managed effectively
	2. Run psychological support groups (based on homogenous traits and symptoms being expressed)	Number of completed classes	Attendance records	Some participants may not respond well to psychological support at first
	3. Run training sessions for JRC staff in dealing with youth radicalized in violent extremist ideology and to assess danger levels.	Number of completed training sessions	Attendance records	That staff are receptive to training

Secondary Project Activity Log Frame

	Project Summary	Indicators	Outcome Verification	Risk/Assumptions
Goal	Rehabilitate and reintegrate youth detainees by providing vocational development, education programs, and psychological support	% of detainees displaying signs of trauma reduced, % of detainees displaying hardline radical views, % change in number of detainees with improved literacy levels	Impact assessment report, quarterly, half yearly and annual report	Some detainees will not respond to psychological support or vocational training due to severity of psychological/ radicalization level
Outcomes	Enhance vocational skills, tolerant religious understandings, psychological social support, family and societal reintegration of 1000 prisoners by the end of 2020	Psychological symptoms, vocational skills, tolerant religious understandings, family and societal reintegration of detainees	Psychological symptom reduction post tests. Monitoring reports of psychological support services, follow up with participants released before 2020 Post-training assessments of skill and understanding levels	Fostering family support may be impossible for some detainees due to particular circumstances Some may be too radicalized/ traumatized to respond to interventions
Outputs	1. Employability: Youth detainees will complete a professional vocational training course to establish or enhance their employability upon release	Participants attend a minimum of 80% of all classes and instructions	Practical testing and final project presentation	Detainees are interested in enrolling and maintaining attendance Potential risks to trainers, will need to be mitigated
	2. Education: Youths detainees will complete literacy classes, Persian and Pashto calligraphy	Participants hand in all assignments completed and in a timely manner & demonstrate their improved literacy and calligraphy skills gained in the lessons and through an examination at the end of the course	Written and oral exams to assess literacy & proficiency levels Completion reports of trainers Certificates of completion awarded to participants	Some youth detainees displaying signs of high trauma levels will not be able to complete the course
	3. Spirituality and Religion: up to 1,000 youth detainees will be engaged in participatory sessions on spirituality and religion to extend their exposure and acceptance of varying world views.	In mid-term and end-evaluations, participants show an increased ability to accept and respect different or contradicting ideologies and ideas.	Mid-term and final written and oral examination to assess participants' analytical skills & any changes in worldview	Some extreme hardline detainees may be too radicalized to respond to differing spiritual views
	4. Psychological Interventions: Participants will go through bi-weekly psychological support groups to examine symptoms and individuals experiencing severe mental health challenges will have direct counseling with a psychologist	Increase resilience which will reduce recidivism, address trauma symptoms and help recovery. Where needed, capacity building and supervision for prison staff	Assessment scales (baseline and post training evaluations) Psychological symptom reduction post tests	Psychological counsellors will be able to provide necessary support to address symptoms

	Project Description[49]	Indicators	Outcome Verification	Risk/Assumptions
Outputs	5. Community Engagement: Participants will be provided with mentoring services and network building program with other community stakeholders	Improved mentoring services Improved networking and coordination amongst different partners and government agencies involved with JRC	Enrollment records of detainees in mentoring program. Monitoring reports demonstrate sustained contact between JRC & community stakeholders	Community stakeholders will be receptive to project outreach efforts
Activities	1. Employability: Run training sessions for detainees on handicrafts, woodwork, pottery, tailoring and embroidery	Number of completed trainings	Attendance records Post-training assessments of skill and understanding levels Number of participation certificates awarded	Some youth detainees displaying signs of high trauma levels will not be able to complete the course
	2. Education: Run classes for literacy, Persian and Pashto calligraphy	Number of completed classes	Attendance records Number of exams sat Number of participation certificates awarded	Participants will find class format interesting/manageable
	3. Spirituality and Religion: Run participatory sessions aimed at exposing detainees to varying perspectives on spirituality and religion	Number of completed classes	Attendance records Number of exams sat Number of participation certificates awarded	Participants will be receptive to hearing varying opinions on spirituality & religion
	4. Psychological Interventions: Run bi-weekly support groups to examine symptoms and refer for psychological counselling as required.	Number of completed group sessions	Attendance records of support groups and counselling sessions	Participants will be receptive to attending sessions
	5. Community Engagement: Run mentoring sessions and network building events with other community stakeholders	Number of mentoring sessions Number of networking events	Attendance records of mentoring sessions Attendance records of networking events Monitoring reports of activities	Participants will be receptive to attending sessions & events

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[49] The community engagement phase will be undertaken as a continuation of R4R and contingent on securing additional funds.

Project Partners

An Afghan civil society organization, PoMA, has already embarked on a large-scale, two-year involving vocational training and mental health support in order to rehabilitate adult prisoners, including those convicted of participating in insurgent activities or membership in extremist groups (called Rehabilitation for Reintegration or R4R). The purpose of that project is to reduce chances of radicalization or help reform the radicalized. It is therefore logical that this proposed project be a parallel program dealing with Juveniles which PoMA would undertake simultaneous with its R4R program. This would allow the proposed project to take advantage of the expertise, experience, lessons learned and relationships already garnered by PoMA.

PoMA, Peace and Democracy Foundation (EF hereafter) was officially registered in 2017 as a non-for-profit organization at the Ministry of Justice of Afghanistan. PoMA is Perso-Arabic word meaning the midpoint between two extremes. The term constitutes the core tenet and philosophy of the foundation. PoMA adopts a two-track approach in its activities. Firstly, advocating for policy change at the highest level of decision-making by working closely with the government. Secondly, working with local communities through a bottom-up approach. PoMA comprises a dedicated and varied cadre of experts and works in partnership with domestic research institutions such as Afghanistan Institute of Strategic Studies (AISS) Afghanistan Public Policy Research Organization (APRO), as well as with regional and international organizations such as Asia Centre at the University of Sussex and the University of Cambridge in the UK. PoMA is well poised to use its pool of in-house analysts and experts as well as outside academics, and practitioners who are in regular contact with ordinary people to create an effective work environment, bring community-wide change, and collaborate with civil society organizations.

The reason why PoMA Foundation has chosen to address this issue is due to its social and financial benefits for society at large. Currently, programs such as this are non-existent that address the root causes of radicalization in Afghanistan's JRCs by providing psychological support and vocational training. This is a gap that EF wishes to fill. The social benefits will accrue to both the direct and indirect beneficiaries by enhancing the mental health and employment capacity of juveniles once released. This can benefit the society at large by helping to reduce chances of violence, intolerance, and, admittedly in a very small scale, unemployment rates. The initiative helps chart the way for one important strategy to assuage and diminish reasons for the military campaign ongoing in the country. A successful achievement of R4R goals can show the way forward to better deal with radicalized tendencies in one important environment where they can spread.

Project Timeline

The project will follow the timeline explained below but different activities are to take place simultaneously or sequentially, proceeding ahead if not derailed by unforeseen circumstances:

1.	Initial Phase/Preparation	Timeline
1.a	Assessment of the facilities and beneficiaries and a desk review	Two to three months (depending on the level of timely cooperation by relevant government authorities)
1.b	Curriculum design and development and refining of the interventions	Three to four months (depending on how 1.a proceeds)
1.c	Recruitment and training of prison staff while continuing to design the course curriculum, pedagogical approach, refine other set of interventions as well as area study and selection of training and partner organizations	One to two months (after 1.a and 1.b have been accomplished)
2.	Pilot Implementation	Timeline
2.a	Refining training material and type of activities for selected beneficiaries and trainees after initial phase evaluation - this may include consulting with inmates	One to two months (after stage 1. has been completed and not in parallel)
2.b	Resource development and review (manuals, trainings, assessments tools, guidebooks, etc…)	One to two months (parallel to 2.a)
3.	Revised Implementation	Timeline
3.a	Introduce revised material into the teaching curriculum and list of activities	One to two years (dependent on suitable conditions)
4.	Final Monitoring, Evaluation and Recommendations	Two to three months (parallel to the last stages of 3.)

Project Organisational Structure
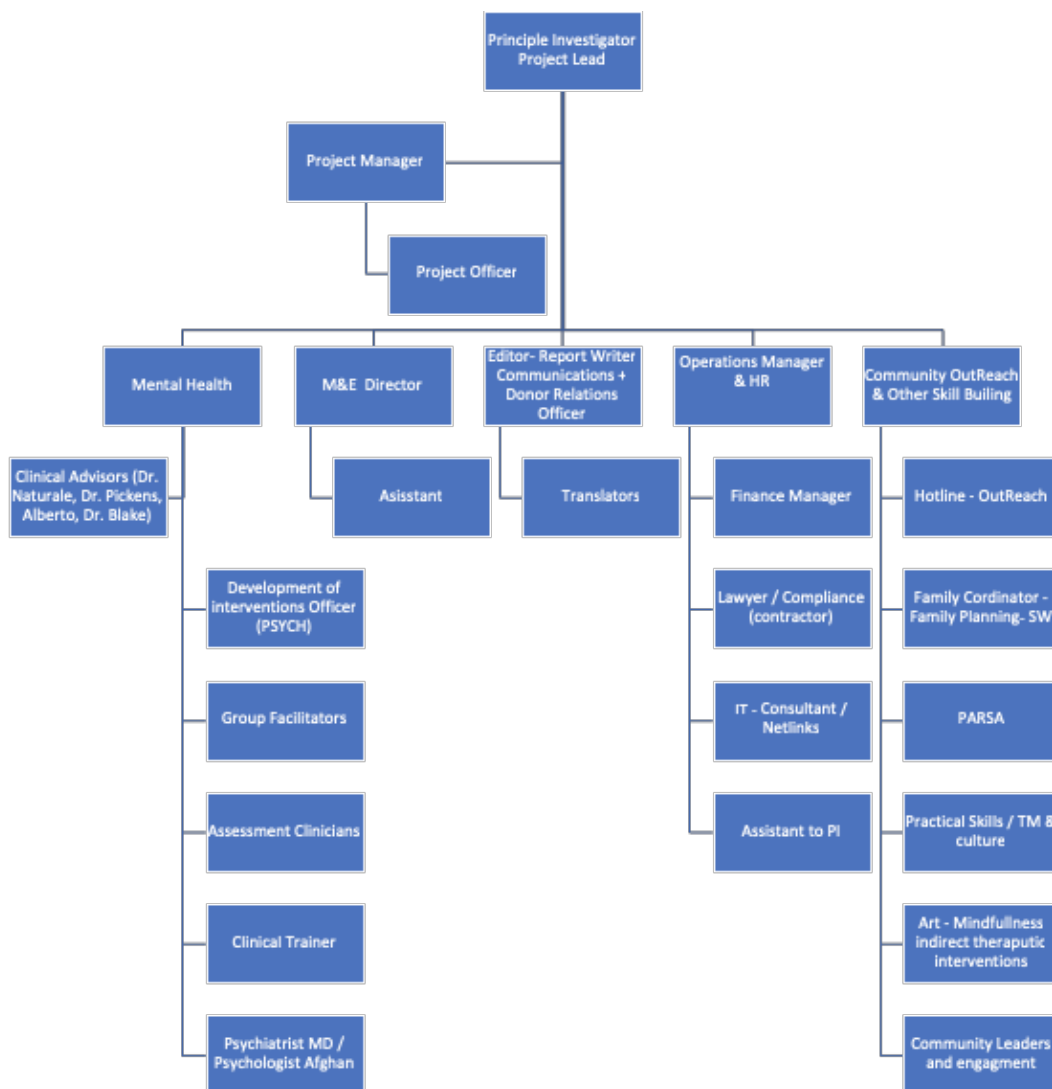
Ethical Concerns & Safeguards

The ethical concerns of this research are manifold. Foremost, as it concerns both working with youth, and then detainees, and then detainees with potential mental health issues, emphasis will be placed on conducting research and further interventions in the most sensitive and ethical manner. Project staff will seek to gain consent to work with detainees' families, but will operate on the assumption that prison authorities have granted consent to work with detainees in the JRC. Formulating project-specific ethical guidelines is therefore crucial.

There are further concerns about any adverse physical or mental effects that working with youth detainees may have on JRC staff, project partners or researchers. This project has been formulated with these ethical concerns at the forefront and takes into close consideration the growing corpus of research and best practice principles around working with youth,[50] detainees as well those suffering from trauma.[51]

Cannot guarantee that they will not reoffend or participate in future acts of violence. But what can be guaranteed is that this project will do no harm to the youth, the staff, and the indirect. This is because the project focuses establishing what psychological issues are and attempting to address these

This will adhere to the overall Do No Harm principles.[52] This research will therefore adhere to the guidelines laid out by global best practice and will commit to imputing safeguards into research design and into the design activities, especially as regards interactions between youth detainees and JRC staff, project partners and researchers.[53] Trainings provided to staff of JRCs as well as to trainers employed for educational or vocational activities, or other stakeholders who may take part in networking or mentoring, will be briefed on the importance of Do No Harm principles and the ethical safeguards that the project must ensure (see Annex X for ethical guidelines).

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[50] Langhinrichsen-Rohling J., Arata C., O'Brien N., Bowers D., Klibert J. Sensitive research with adolescents: Just how upsetting are self-report surveys anyway? Violence Vict. 2006;21:425–444; Hiriscau, E. I., Stingelin-Giles, N., Wasserman, D., & Reiter-Theil, S. (2016). Identifying Ethical Issues in Mental Health Research with Minors Adolescents: Results of a Delphi Study. International Journal of Environmental Research and Public Health, 13(5), 489

[51] Royal College of Psychiatrists' Working Party . Guidelines for Researchers and for Research Ethics Committee on Psychiatric Research Involving Human Participants. Royal College of Psychiatrists' Working Party; London, UK: 2000.

[52] Ibid..

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Annex: Ethical Guidelines

Annex II: List of Relevant Literature

Annex III: Proposed Budget