Reintegration of former child soldiers in northern Uganda: coming to terms with children’s agency and accountability

Grace Akello, Annemiek Richters & Ria Reis

Reintegration processes of formerly abducted children have yielded limited success in northern Uganda. The article seeks answers to the question why reintegration processes in the area have failed. The approach of one Christian non-governmental organization towards reintegration is compared with the ideas and strategies of formerly abducted child soldiers and people in their communities on how best to deal with their violent past.

Keywords: cen, child soldiers, psycho-trauma, reintegration, Uganda, WorldVision

Introduction

Reintegration processes of formerly abducted children have yielded limited success in northern Uganda. For example, three months after the rescue of 300 such children in 2004–2005, none were found residing in the community in which they were supposed to have been reintegrated.1 Other data show that over 70% of prisoners in the juvenile crime unit in the Gulu District, Uganda are former child soldiers, incarcerated on charges of rape, assault and theft (among other crimes, information supplied by a regional psychiatrist).2 In the literature, explanations for failed reintegration of former child soldiers are often sought on an individual level – such as a child’s psycho-trauma that in turn lead to behavioural problems, or a habitual recourse to violence as a survival strategy. Other explanations are sought on a community level – such as the community’s difficulties in accepting the innocence of a child who was forced to kill, or who has children by a rebel father that in turn lead to stigmatization and rejection of the child (Omona & Matheson, 1998; Unicef, 2004; Singer, 2005).

This article seeks answers to the question why reintegration processes in northern Uganda have failed, by critically analyzing the perspectives and strategies of one Christian non-governmental organization (NGO) in particular, regarding reintegration. It also compares the perspectives and strategies of formerly abducted child soldiers and their communities with regard to how to best deal with their violent past. Special attention will be given to conflicting ideas on:

1. Who is responsible; and
2. A culture-specific idiom of distress (the way in which distress is experienced and expressed) among children who are being rejected by their communities (these children feel that they are being harassed by cen, the revenging spirits of those they killed. Community and children’s strategies for healing cen will be discussed in relation to the aim of reintegration).

We will argue that for successful reintegration to take place, children and their
communities have to come to terms with the unavoidable change in the status of such children, and to deal with issues of accountability in a way that answers the needs of both the community and the anxieties of the children involved.

This article is based on ethnographic fieldwork of the first author that took place over a 1-year period. In the pilot phase of the study (July – December, 2004) she spent 5 weeks at the World Vision Centre for Formerly Abducted Children (WVCFAC) in the Gulu District, Uganda, among the approximately 400 ex-combatants living at the centre at the time. Insight was gained through participatory observation during group and individual counselling sessions and morning devotions, and by in-depth interviews with 80 ex-combatants. In-depth interviews were also carried out with six child mothers. A group counselling session on HIV/AIDS was conducted with 150 former child soldiers. Additional data were gathered through: informal discussions, observation and diagrammatic illustrations of common illnesses and medicines used by ex-combatants, and interviews with the centre counsellors, a centre nurse, and the centre coordinator. Finally the first author participated in a so-called ‘hand over ceremony’ of a child to the community at the barracks close to the Gulu District airstrip, and in the reintegration of one ex-combatant in October 2004 at Bungatira village. In the second phase of the ethnographic fieldwork (July 2004 – January 2005) an ex-combatant child (Apiyo) was selected for extensive follow-up. The history of Apiyo’s life (See Box 1) is a good starting point for an analysis of the problematic discrepancy between the well-meant efforts of NGOs to reintegrate child soldiers with their communities, and the compelling need of these children and their communities to come to terms with accountability, and feelings of guilt and revenge.

The reintegration process

In the Gulu District many national and international organizations are active in the field of refugee relief. Since 1995 two NGOs have been responsible for the reintegration process of formerly abducted children in northern Uganda. One is the Gulu Support the Children Organization (GUSCO), a local NGO facilitated by Save the Children in Uganda (SciU) that bases its rehabilitation and reintegration process on traditional Acholi ways, such as involving clan leaders and a traditional cleansing ceremony in the process. The other is World Vision (WV), an international Christian relief and development organization. Its format for counselling and reintegration has its roots in Christian ideas about confession and repentance of sins, and healing by forgiveness and seeking refuge with God. Since there was a strict ban on researchers by GUSCO, the first author worked with World Vision only.

Rescue and handing over

Immediately after abducted children are rescued through a state army attack on the Lord’s Resistance Army (LRA), an announcement is made over local FM radio stations. In addition, radio calls are made directly to both GUSCO and World Vision, so that they will come and collect the children for rehabilitation and reintegration within their communities. This process takes place in a series of distinct steps. First, the children’s general health is checked and any problems are then taken care of then. Some of the children are found with severe gunshot wounds. Usually a substantial proportion of them are also severely malnourished. Often, there are pregnant girls or child mothers amongst them. For treatment, the two NGOs use the
Lacor hospital, or their own clinics where some of the sick ex-combatants are also taken for medical care. Those who have been medically examined and declared ‘healthy’ are taken from any of the two centres for rehabilitation, and subsequent reintegration back into their own communities.

The ceremony of handing over ex-combatants to the rehabilitation centres is adult oriented. The children, for whom these ceremonies take place, play a passive role. The main players involved are state security representatives at district level, high-ranking army commanders, coordinators of the two NGOs and some

---

**Box 1: An uneasy homecoming**

Apiyo is a 14-year-old girl who was abducted by the Lord Resistance Army (LRA) rebel group in northern Uganda when 7 years old. During a military offensive of the Ugandan state forces, 4 years later, she was rescued and taken to the WVCFAC for rehabilitation and reintegration. During her stay in this Christian centre, she received counselling that had the specific aims of processing her traumatic memories, encouraging her to confess and repent the violence she had committed and absolve her from feelings of guilt. In the meantime Apiyo’s family was notified that she was found and that she would be reunited with them. After a few weeks in the centre, counsellors finally brought Apiyo, (then 11 years old), to the camp where her family was living. To ease the family’s acceptance of the child she was given some money and household items as starting capital. Apiyo used the money to forge friendly relations with people by lending it to them, but when the money was gone, it was never paid back and the relationships collapsed. Other challenges arose as a result of having confessed that she had killed various people in her village, including close kin. As a result, the community harassed her, referred to her as a killer and a person whose ‘head is sick’. In school, children frequently laughed at every mistake she made and constantly involved her in fights. They also openly resented the special attention Apiyo received from her counsellors, which in turn made the girl decide to bar any follow-up activities by the World Vision (WV) counsellors.

In the meantime, Apiyo also started to develop symptoms of ill health, the most prominent being sleeplessness and nightmares in which the spirits of people killed by her (cen) appeared and threatened revenge. Following her family’s advice she took medicines for sleep and regularly burned leaves of the plant atika, which is thought to chase away evil spirits. However, the spirits chasing her were too strong. After 1 year Apiyo, again followed her family’s advice, and at the age of 12 she asked to be allowed into the army, knowing that the environment of the army would chase away the spirits. However, even though the state was indiscriminately recruiting boys at this time, regardless of their age, Apiyo was not accepted into the army. This left Apiyo and her family with no other options. At 12, Apiyo rejoined the rebel group, but not for long. She was taken captive again by the state army and sent back to the WVCFAC. At the time of the interview, the now 14-year-old girl had been reintegrated again, but not with her family. She was placed and accepted as the caretaker of a sickly friend with HIV/AIDS registered in a WV antiretroviral treatment programme. In that situation she still has to confront the spirits of the dead, but they are not as vengeful as they were during the first reintegration.

Currently, Apiyo goes to a school within the municipality where she was not introduced by any of the NGOs dealing with former child soldiers, so none of the children ‘know her history’. She has, however, discovered that one of her close kin has recently moved near this school and is intending to take their children to ‘her’ school. The good thing is, within the municipality, there were so many schools that she could easily change to another school where no one ‘knows her very well’.

---

Akello et al.
spectators. This is especially common in ceremonies with wide publicity, and on occasions when ex-combatants are flown into the district by light aircraft. Different high-ranking officials make speeches about the ex-combatants, largely portraying them as vulnerable innocent victims who need all the support, encouragement and help they can get to become part of the community again. We will come back to this below.

The counselling process at World Vision After the handing over ceremony, GUSCO and WV will take the children to their own centres where the rehabilitation occurs. The World Vision centre for formerly abducted children is an institution occupying about 1 km² of space enclosed by a fence wall. In 2004, it had two office blocks, a central isolated building for ‘church’ activities, and two big blocks serving as dormitories for boys and girls, respectively. There is also a small room at the boys’ block, which serves as a centre clinic, and numerous smaller huts for child mothers and their children.

The daily procedures in the centre are similar throughout the week. At 7 o’clock a bell wakes staff and children. They prepare for prayers, also called morning devotion, which is scheduled for 8 – 10 o’clock. This devotion takes the Pentecostal format, with an hour of singing, dancing and giving testimonies, followed by the teaching of a preacher or pastor on topics such as forgiveness, the Ten Commandments, and peace. Sessions will then be adjourned for staff and children to have breakfast. After the break, individual or group counselling sessions will occasionally take place. Often, group counselling sessions involve teaching by invited Pentecostal preachers. During the sessions observed by the first author, few children stayed until the end. Most preferred to talk to each other during the sessions, or join others who played in the compound.

In individual counselling, a counsellor and ex-combatant interact in a private setting. Such counselling serves several explicit purposes. On the one hand, the counsellor needs to document the former child soldier’s biographic data to allow the tracing of their kin. On the other hand, it is also thought that counselling will help the child to process his or her memory, and cope with the violence they have survived, witnessed or committed. Success in counselling is measured by the extent to which children can freely discuss their experiences. Memories are accessed through story telling or drawing. Special attention is given to children’s active participation in violence (such as murder, rape, looting property, and amputating the limbs of people). However, counsellors deliberately, or following instructions, will not inquire directly about the child’s participation in this violence at their own initiative. Talking about the crimes committed, by the child him/herself, often amounts to a climax in the counselling process. The counsellor will explain to the child that it was not their fault that they were abducted and subsequently forced to carry out such atrocities. The child is then advised to forget those acts, and forgive those who made them do such things.

One of the explicit aims of the WV centre is to instill Christian values in the children, before they are reintegrated back into their communities. Counsellors believe that if they do not succeed in converting the child and making them confess and repent their involvement in violence, the reintegration process will be delayed. In theory, therefore, the time spent at the centre depends on the readiness of a child to open up about the atrocities they have committed. Children who prefer not to share their experiences are
considered difficult cases. In practice, an individual’s duration of stay at the centre is determined by the demand on the facilities. In 2005 for instance, some children spent over a year at the WVCFAC, mainly because there were few child soldiers being rescued. Reintegrating children as soon as possible would mean that the centre ran out of business. When the state armed forces frequently attack the rebel fighters and more children were freed, the maximum time an individual might spend at the centre is 3 weeks.

Reintegration back into the community Reintegration is at its peak when the child is taken to their community of origin, or to their family. It is a prerequisite that the counsellor goes to the homestead where reintegration will take place a week in advance to counsel the parents about bringing back their child. On the day itself, the coordinator brings with him 300 000 shillings (approximately 136 euros), a mattress, basin, hoe and other household utensils to give to the child. The child, accompanied by two or three counsellors, is then transported to his or her parents. Often, on arrival, the community insist on an ancient cleansing ritual whereby people make the child step on eggs or sprinkle water on his or her feet using the branches of the Olwedo tree. We will come back to this ritual later. Depending on how busy the counsellors are, often the process of reintegration takes less than 1 hour. The child is then left with his or her people. Occasionally counsellors do a follow-up on their clients. Distance of the homes for the centres, the disappearance of the child and, as in the case study of Apiyo, the children’s reluctance to be visited by counsellors again, were all given as contributing factors for the low intensity of contact with the centre after reintegration.

A view on trauma, repentance and innocence

The course of the rehabilitation and reintegration process of former child soldiers is based on a view in which Christian values are blended with psychotherapeutic concepts. This view is constructed around two related but distinct themes. One theme centres on the necessity of repentance and being forgiven. ‘Post-traumatic therapeutic counselling’ should bring about repentance and forgiveness. Another theme centres around issues of vulnerability, innocence and victimhood, issues closely related to core western ideas that children are essentially vulnerable (Christensen, 1997).

This view is often expressed during the handing over ceremony of the former child soldiers by the army to the NGOs. In the speeches delivered at the ceremony, frequently the term ‘trauma’ is used, always followed by the recommendation that counselling be carried out for these ‘innocent victims’. Counseling, it is explicitly asserted, will help the children to come to terms with their traumatic events, rework through their memory of witnessing and being forced to carry out extraordinary events, and will ensure rehabilitation of the formerly abducted children. In the speeches, the violent acts of the children are explained by emphasizing that they have been forced to do such horrendous things. Since they have witnessed and experienced such extraordinary events, they are traumatized and need community support and sympathy.

In the reintegration process as it is carried out by the NGO World Vision these ideas are applied in different ways. When entering the fenced complex of the WVCFAC one sees the writings on the wall; biblical excerpts concerning forgiveness, love, peace and extorting the children not to fear. The centre coordinator disclosed that these writings
are meant to help re-shape the rescued children’s thinking since ‘they are powerful messages which they need’.

As we have seen, Christian devotions form an important element in the counselling process at WVCFAC. Testimonies given during the morning rituals focus on the miraculous work of God, and forgiveness is a recurring and important topic in everyday preaching. Visiting preachers often admonish the children to ‘turn away from their sins and give their lives to Christ’. This desired outcome also is the focus of individual counselling. Conversion and repentance of the evil done during combat is seen as a necessary step for the child to be redeemed and healed. Being led to Christ in practice means that the ex-combatant, after confessing his or her sins, is advised to forgive those who forced him to do such horrendous acts and told to say a prayer in which he becomes saved. Difficult cases were according to one counsellor ‘those ex-combatants who did not readily talk about their experiences in the bush’. Giving an example of one male former child soldier she argued, ‘if only he would open up, talk about all evil things he had done, he would be led to repent them and then be reintegrated in his community’.

In short, right from the hand over ceremony to the actual reintegration, key persons addressing issues of reintegration of former child soldiers portray them as vulnerable people in need of special attention. However, the notion of the need for repentance of former child soldiers is ambiguous. By stressing the fact that the children were abducted, and thus forced to commit their horrendous acts, their essential innocence is emphasized throughout the reintegration process.

**Community perspectives on rehabilitated child soldiers**

In spite of the counsellors’ insistence on former child soldiers’ innocence regarding the atrocities they have been involved in, experience of such children point to widespread community resistance to their reintegration. Apiyo explained in relation to the 300,000 shillings donated to her by the NGO: ‘As long as the money is still there and you are lending it to people around, they pretend to be your friend. When the money we were given is finally over, everyone in the camp changes. Even those who borrowed the money from you become so cruel; you do not know where to begin to ask for your money back.’

In numerous focus group discussions, displaced children described how in the community or in camps where the *latin lum* (child from the bush) is reintegrated, there is frequent harassment, verbal abuse and *bolo doge kum dano moo Ilum* (wherever that person passes and whatever he or she is doing, people keep on criticizing and talking against him or her). S/he is called names such as murderer, killer, and thief.

There is a clear stigma attached to being labelled a formerly abducted child. This stigma is rooted in different notions of what having been a child soldier means. Firstly, it is widely known that, motivated by poverty, misery, seeking revenge or curiosity, or by seeking healing from evil spirits, some freed ex-combatants voluntarily joined the armed struggle. This obviously undermines the official talk on innocence. The fact that a substantial proportion of ex-combatants, particularly boys, find it difficult to live a life outside armed struggle and become involved in looting and harassing people does not help the image of innocence of formerly abducted children either. Another source of stigma lies in ideas about the effects of traumatization, which in itself are accurate. That people know about these effects is especially problematic for ex-combatants who are of school-going age. They find the schoolteachers, administration
and pupils equipped with skills to interact with them. This is because various NGOs, including Norwegian Refugee Council, SCiU and WV, organized a number of different teaching sessions and workshops for teachers and community leaders. Therein, they are taught how to identify and counsel ex-combatants. One is taught characteristics of traumatized children, such as ‘being aggressive’, ‘not-friendly’, ‘hyper-alert’, ‘not respecting others’. Teachers interviewed often mentioned that traumatized children are ‘those from the bush or formerly abducted children’.

A third source of stigmatization lies in the idea of evil spirits. We will come back more extensively later to this issue, suffice it to say that cen, who are thought to harass the former child soldiers are considered impure and dangerous to the health of anyone coming into contact with them. Prior to the establishment of WVCFAC and GUSCO, the state army would line up all the rescued child soldiers in any of the streets of Gulu town and instruct the spectators to identify and take their kin with them. This was a problematic approach since, as a WV counsellor disclosed: ‘No one, not even parents of ex-combatants, would select their children from the people lined up. The soldiers kept announcing the line-up over the radio and kept parading the rescued child soldiers even in the market for over one month. People passing by would instead throw insults at them, and a substantial proportion feared to use those streets lest they picked up cen brought back by ex-combatants’.

The new format for the reintegration process where children are taken individually to their communities, after having prepared these communities for it, clearly tries to break with such stigmatizing procedures. However, the hand over ceremony, as well as the formal reintegration within the community does attract attention to the child as a child with a problematic past. Some freed children request not to be taken back to their communities or places of origin. A substantial proportion has migrated to a labora farm – a self-supporting institution put in place by the state where former rebels are settled and sometimes facilitated in their activities by the state. They engage in farm and other income-generating activities. Reports from the SCiU-Gulu office show that the former rebels, having been ‘reintegrated’ and then ‘rejected’ by their communities, often relocate to this farm. Others have gone back to the rebel group to re-join the armed struggle or, in case of girls, as ‘wives of the rebels’.

It was reported in group, and individual, narratives how child mothers face severe rejection in particular. They and their children are viewed as people with direct links to the killers. Some remain in touch with their ‘husbands’ and stories have been told about ‘rebel commanders who collected their wives and children after reintegration’. The maintaining of links with the rebels puts child mothers in a delicate situation, especially when the ‘husband’ is thought to have committed atrocities within the community.

The unwillingness of communities to welcome formerly abducted child soldiers, is based on the refusal to accept the idea that such children are not accountable for the crimes they have committed. The fact that communities will insist on traditional cleansing rituals for child returnees also points to this issue. There is a story about the father of one ex-combatant who advised him to leave the camp and find somewhere else to stay after he had disclosed that he had killed his paternal uncle. His father did not want to be associated with a criminal, let alone someone who murdered his own brother. The revenging spirit of close kin can be perceived to be very dangerous, to both the ex-combatant and those living with him.
A perspective from within: child soldiers and their symptoms

Formerly abducted children are very conscious about the negative attitudes of the people around them. When Apiyo was asked about her experience in the primary school where World Vision counsellors introduced her, she replied as follows:

At the school, no child wanted to interact with me at first. All the children, even the girls, in my class would run away each time I would want to interact or play with them. I was staying alone most of time. In class, they left a desk for me on my own, yet some children were sitting on the floor since there were very few desks. They often laughed and joked that cen can get me at any time and force me to kill them. Then the teachers started telling them that ‘it was not my problem that I was abducted’. All the ‘bad things I did, such as killing people, was simply because I was forced to’. Then everybody’s attention would be on me. Children slowly started coming closer to me and asking me everything about the bush. I told them. Perhaps it was a mistake that I told them about the people I killed myself. They started to fear me again. They started calling me como ma wiye lit (somebody whose ‘head is sick’), a mad person, and a killer. During such times I would fight with the other children. I would fight with boys older than me and they would sometimes overpower me. I would then threaten to kill them if I found a gun. The teachers would then call me aside and ‘talk to me about how to behave in a school’. They told me that I should always forgive others. And sometimes they would punish me for fighting. The children also reported me for killing people they knew. On my way home, I would hear people talk and laugh about me. People would call me names and abuse me everywhere I went. I had to leave that place since, by then, I was not even able to sleep. I wanted to join the army, but they refused me.

So I went back to the bush till I was rescued again.

In focus group discussions and in-depth interviews with ex-combatants, it was commonly disclosed that they did not feel like innocent victims. They even recognized that there were various incidents where it had been possible to let a captive free, but that they chose nevertheless to kill him or her. For instance Apiyo discussed the following:

One night we went to a trading centre. We went into one of the shops that had the highest number of commodities. After we had looted everything, the commanders told us to start moving back into the bush again. I had talked to the shopkeeper during the day to ask him to reduce the prices of the clothes he was selling and he had just thrown insults at us. Since I had a gun, I shot him in the head at a close range. He died instantly. It was my own choice to kill him. Till this day, the cen of this man comes at night to disturb me. Sometimes he comes with a gun to shoot me as well. Sometimes also, we came to capture some people, but after some distance the commanders would not decide on what to do with them. So they would leave the decision to any of the younger soldiers. Often times, we enjoyed killing them ourselves. After some time in bush, you can do certain things without fear.

In instances where the former child soldiers had decided to commit horrendous acts themselves, it was clear to them and to others, what they had done. They would then discuss among themselves ‘the feeling of acting independently’ and how the cen of the people killed keeps disturbing them. Female ex-combatants were sometimes harassed by cen in the ‘form of huge men wanting to rape them’. Apiyo and three child mothers discussed their experiences thus:
'Such cen can even come to attack you during the day, but when you scream, it is instead a source of happiness to the people around. People argue that it is the only way you can pay for the bad things you did in the bush.'

Cultural leaders in the Gulu District have described cen as 'the entrance of an angry spirit into the physical body of a person or persons that seeks appeasement, usually in the form of a sacrifice or, in the case of a 'wrongful death', compensation and reconciliation between the clan of the offended and offender. The spirit manifests as cen, which will 'haunt' the wrongdoers by entering their mind or body in the form of visions and nightmares that may result in mental illness and sickness until the wrong is made right. Cen can also send nightmares and sickness to the entire family of the individual involved, so threatens not only the individual, but the family and community' (Liu Institute for Global Issues & Gulu District NGO Forum, 2005). In essence, cen means evil spirits. Dimensions of the evilness take the form of revenge, vengeance, pollution, causing harm to the individual and the community through illnesses, misery and mysterious deaths. Children describe the symptomatology of cen as nightmares, sleeplessness, seeing images of men who want to attack them, and disturbing recollections. The psychiatrist who was interviewed concerning such symptoms in former child soldiers mentioned how they were usually diagnosed with severe forms of depression, coupled with anxiety. The notion of cen can thus refer to a multiplicity of symptoms, including feelings of guilt, hearing voices, nightmares and feeling frightened or sad.

In explanations of cen the one who suffers from cen is not always held accountable for being attacked by the angry spirit. On the one hand, one can pick up cen if one comes into contact with a dead body. A substantial proportion of displaced children (not only ex-combatants) in interviews disclosed how they have often seen dead bodies and even mistakenly stepped on them. They are advised to put branches (any type of branches but especially of the olwedo tree) on such dead bodies in order to ward off cen. This was often a sufficient therapy. Therefore, there is a measure of chance in contracting cen. If that is the case, the symptoms can easily be warded off or removed. When they do not disappear, this indicates a person's guilt in having committed a crime. One 15-year-old ex-combatant who preferred to settle within Gulu municipality and not with close kin in the camps, often gossiped with his friends in the neighbourhood, telling them how wise he had been by regularly deceiving the commanders by saying that he had shot the captives dead, while in reality he had let them escape. He had never been disturbed by cen. He sympathizes with other ex-combatants who frequently carried out horrendous acts by themselves. It is such ex-combatants who are constantly disturbed by the cen of the captives they had killed. According to this boy, in cases where ex-combatants were simply ordered to kill or killed jointly, not they but the commanders who were responsible for ordering the killing would be disturbed by cen.

The community also acknowledges that not all ex-combatants have the problem of cen. Therefore, before the ex-combatant is accepted into the community questions are often asked, such as: Has the person complained of cen lately? How severe is it? Has the person tried to use medicines to aid sleep and the atika plant to the extent of making incisions in the forehead, and yet there is still no improvement? If so, this is an observable indicator that such a person is not an innocent victim, but a murderer. When the child has tried all available approaches and the cen is still disturbing them, then the latter is explained in terms of 'guilt'.
Therapeutic measures

Children's first resort for dealing with symptoms consists of medicines for sleep. They are readily available in over-the-counter pharmaceutical stores in the Gulu district. Other sources include grocery shops, hawkers and market vendors. It is the buying of medicine by symptom, which makes it easy for the children to get medicine for any ill-health symptom. If an individual can buy medicines for 'headache', 'fever', 'desire to stay under the sun all the time', then hawkers know that ex-combatants need medicines for sleep. They stock different types of medication including; valium, pilitons, and some tranquilizers. These are dispensed according to the amount of money an individual can raise. For instance, each tablet of valium is 100 shillings. So a child is given the number of tablets according to the amount of money they can afford.

If the child has no money, the plant atika is readily available. The plant is scrubby and has a characteristic smell. The most common use of the shrubs is to chase mosquitoes from the house. However, they are also used by many people in Gulu to chase cen away. Children burn these plants on partially broken pots as a therapy. Some have indicated that they fixed branches to the doorposts and windows, and on roofs, and at the time for sleep, smeared it on their heads and mats. However, when the disturbance by cen is severe (occurring on a daily basis and with a scary presentation, such as when the cen wants to kill the child affected), then a ceremony is organized by the child's kin. That ceremony must involve an ajwaka. In brief, the ceremony involves making animal sacrifices by the Riverside. A goat or chicken is slaughtered and its blood sprinkled on the person affected. The animal is then cooked or roasted without salt and eaten. During all this time there must be no verbal exchange by the participants. After the ceremony, the people who participated go back home without talking or looking behind. The child for whom the therapy is being sought sits by the door of the house where it lives. Extract from the atika plant is applied to incisions on its forehead by the ajwaka. After that the child enters the house backwards. Also, the branches of atika are affixed at the doorposts and the windows, and sprinkled where the child is being frequently disturbed by cen while they sleep. That marks the end of the ceremony.

It is expected that after such an elaborate ceremony, the (ex-combatant) sufferer of cen will not be affected again. Some children interviewed indicated that atika had been effective in chasing cen. However, for Apiyo (See Box 1) the plant did not work. This was after its extract was applied into incisions on her forehead. Therefore, she felt that she had only one more option to try – namely to re-join the armed struggle. Indeed, when she was in possession of the gun again, she was rarely disturbed by cen.

A psychosocial view on cen

Surprisingly no ex-combatant among those interviewed indicated that s/he had ever had such a problem with cen while in captivity, neither before nor after they were freed by the government, and they had decided to return to the bush. Therefore it could be postulated that the symptoms of cen in formerly abducted, displaced children are a reaction to the lack of acceptance of ex-combatants by their own kin and their communities. Or, in psychosocial terms: the systematic exclusion of ex-combatants and communal isolation are likely to form a second traumatization accounting for the mental ill-health symptoms exhibited by former child soldiers. When the community recommends armed struggle as the best way to deal with cen,
implicitly the ex-combatant is instructed to find a group where she or he can establish relationships, build networks, and gain trust and perhaps find people who live according to his or her norms. In short, in the context of armed struggle, it is postulated here, *cen* does not disturb the ex-combatants when they are able to find a sense of belonging, a social support system and relationships within the armed struggle more easily than when they are reintegrated back into the civilian community. The community of armed persons does not blame them, since people involved in armed struggle can legitimately kill, loot and perform otherwise horrendous acts. When in armed struggle, former child soldiers can acknowledge that they carry out these acts in their own right as well. Thus, in those circumstances the ambivalence of being an innocent victim who has committed crimes does not apply to them. When ex-combatants re-join the armed struggle, they return to what they know how to do best — namely survive in adversity through militaristic ways. As already mentioned, a substantial proportion of these ex-combatants have been in armed struggle since their early childhood. Rejoining the armed struggle by ex-combatants serves also to get out of the community where people see them as guilty and yet cannot easily try and sentence them. Therefore, sometimes rejoining the armed struggle is perhaps best for both the ‘health’ of the community and the ex-combatants themselves. In the light of the need to establish a peaceful society however, this last resort of children to deal with their violent past — by returning to a context where violence is seen as normal — is a direct failure.

**Coming to terms with accountability**
The words counselling and rehabilitation are used by many people to mean different things. In Gulu, the first authors’ initial encounter with the frequent use of the word counselling was where one of the WV counsellors often referred to ‘group or individual counselling sessions’, whereby these terms applied even to gathering ex-combatants for announcements. Counselling was used also for teaching sessions. It was used for meetings where material support or basic necessities were distributed to ex-combatants. When the researcher inquired if she could stay at the centre till the last session of the day, the centre coordinator advised that it would be dangerous ‘since boys and girls involved in counselling sessions with each other after dusk’. In another context, counselling was used at Noah’s Ark (a Christian-founded NGO with its headquarters in Kampala focusing on the wellbeing of displaced and vulnerable children) shelter where ‘counsellors’ go for fieldwork and research to inquire about how much people know about Noah’s Ark. If any negative comments were made about Noah’s Ark or its staff, the community was counselled by being ‘advised’ to adopt a positive and self-reliant attitude. Counselling was again used in churches for people who go for prayers and at Caritas (a Catholic-based NGO with headquarters at the district major cathedral) where people go to see a lamiyi tamu (giver of advice). There, they were counselled through various procedures including ‘doing’ dream analyses with the ‘experts’.

Clearly whatever procedure or format of counselling was used, the present strategy of reintegration of formerly abducted children through counselling according to the Christian ideals of repentance and forgiveness has had limited success. The discourse on innocence, trauma, repentance and forgiveness is neither shared with the community, nor with the children themselves. The communities’ difficulties in forgiving perpetrators of violence and their distrust of children whose
violent past they know, led to rejection and open discrimination. Children themselves acknowledge that they are not free from responsibility for war crimes in the past, either explicitly when they talk about it amongst themselves, with the researcher or during counselling. This is also true when exhibiting symptoms of an affliction, *cen*, which clearly points to a person’s responsibility in the killing of a human being and which may lead to rejoining the armed struggle. The Liu Institute for Global Issues & Gulu District NGO Forum (2005) after numerous consultations with important actors in Acholi society came to the conclusion that traditional approaches to justice and reintegration may make a significant contribution to restoring social relationships in Acholi lands.

Ex-combatant children are usually not asked about their own perception of their past and their wishes regarding reintegration. Their answers could also refer to the necessity of a complete redesigning of the ‘rehabilitation and reintegration project’, which thus far has mainly been implemented in a top-down manner. Surely key project planners and district officials would find it problematic if former child soldiers would tell then that they ‘do not feel traumatized’, and do not ‘see themselves as innocent victims’ but as perpetrators of war crimes.

Female former child soldiers in particular present a complex challenge. Their case makes the gap between the approach of the NGO and the needs of their clients appear even bigger. The most vulnerable were child mothers and those who were ‘rescued pregnant mothers’. They were retained at the centre till they gave birth. In practice, the act of re-integrating a child mother, some of them with as many as five children, back to their kin needs rethinking. It is inappropriate, because in patrilineal societies, females do not own land. Land is owned and controlled by male kin. Therefore, if the female ex-combatant with her children needs to settle in a community where she is ‘accepted’, she needs to go back to the father of her children. This could be what child mothers would tell NGOs if they were asked. They are instead regarded as former abducted girl children who need to be reunited with their parents. However, that often fails, as they are ‘viewed more as wives or rebels than a child who was abducted’. In cases where it fails, the child mothers are then required to rejoin or settle with the male kin of her children; rebel commanders or returnee commanders who are sheltered at key rehabilitation centres, or those still active in the armed struggle.

Another case that presents particular challenges are the ex-combatants who have been in the armed struggle for a long period of time. Some return as adults. However, they quickly find out that to register as a former child soldier is a ‘safe option’ since they will then automatically be presented to the community as an innocent victim who was forced to carry out horrendous acts. It is therefore likely that when the community feels an urgent need for justice, and not compromise, the ex-combatants will continue to face community hostility and not acceptance. Then there is still the option of re-joining armed struggle(s), an action that is justified as ‘being in quest of therapy for *cen*’.

Based on the field data presented the existing NGO attempts to cure ‘bad habits’ by counselling and talk therapy for the duration of 3 weeks needs to be revised. These attempts and the neglect of traditional cleansing ceremonies by the Christian NGO World Vision may even be the reason that a substantial proportion of rehabilitated ex-combatants end up as juvenile prisoners and not as a community member. Another reason for the latter, could also be that the community where the ex-combatants are
reintegrated live in dire misery and abject poverty. These communities often have survived in displaced person's camps for two decades now. They rely on intermittent and irregular distributions of aid from the numerous NGOs in the Gulu District. While some of the ex-combatants may thrive due to the armed conflict and the support they have received after being rescued, people in the camps rarely have significant skills needed for independent survival.

The NGO strategy of presenting an innocent victim to the community is effectively being challenged through gossip and slander about the supposedly innocent victims. This is another factor explaining the failure of reintegration processes. One of the recommendations that displaced children give as a way to effectively deal with *cen* and help the former child soldiers live with others in the community is to 'stop saying negative things about them'. People around them should also try to support them by telling them that it was not their fault that they were 'abducted and subsequently told to kill other people'. However, emotions running high can be recognized in group discussions when this issue is discussed.

For example, in one group a boy mentioned how one ex-combatant had disclosed in his narratives that he had killed people of 'his own initiative'. Sometimes he would order the newly abducted people to kill, or he would do it himself. How then can people then consistently tell him that his problem of *cen* exists because he was 'just ordered to do such crimes'? One 12-year-old discussed extensively how there was a 'clever' ex-combatant renting a hut in his neighbourhood in Cereleno – a suburb east of the Gulu municipality. He told them 'wise stories' about how he always just shot to miss, or in the air, and told all the people that he was told to kill, to escape. This boy has no problem of *cen* at all. In fact, on his return, there is a man who recognized him as the one ‘who helped him escape’. This boy wished all the combatants acted like this ‘clever boy’. This is because they could avoid the idea that the community keeps on talking about them and perhaps even more importantly, they would not have the problem of *cen*.

**Conclusion**

For the reintegration of former child soldiers a multifaceted approach is needed in which at least the following factors are taken into account:

1. The ex-combatants’ ideas concerning the entire process of rehabilitation and reintegration;
2. The problem of *cen*;
3. The idea that ‘a child is abducted, but a rebel returns’;
4. The limited community support of the ex-combatants; and
5. The poor general living conditions in the camps.

It is often argued that the most important factor is that the war be stopped. That may be so, but even then the challenges presented regarding an effective reintegration of former child soldiers as ‘victim/perpetrators’ remain.

**References**


---

1 The Coordinator of Save the Children, Gulu Uganda, provided this information.

2 This psychiatrist assesses all juvenile delinquents for mitigating factors, such as post-traumatic stress disorder. The psychiatrist often does not find concrete evidence for links between the crimes committed after reintegration and ‘play-backs of extraordinary events which happened to these ex-combatants while in the bush.’

3 This centre is popularly known as ‘trauma centre’ or simply ‘trauma’.

4 Interviews took place in the presence of her friend (also a former child soldier), at her primary school or at the World Vision food distribution centre for people with HIV/AIDS registered in World Vision’s anti retroviral treatment program in Laroo division (one of the four geographic divisions of the Gulu municipality). Other valuable data derive from interviews with the northern region coordinator of Save the Children in Uganda (SGiU). This NGO is a key donor to Gulu Support the Children Organization (GUSCO), primary school teachers of displaced schools, camp leaders in Unyama and Palenga displaced persons’ camps, healthcare providers (including the regional psychiatrist), nurses at the feeding unit of malnourished children at Lacor and Gulu hospitals, and displaced children in some displaced primary schools including St. Kizito Alero Cuku and St. Peters Bwobomanam primary schools hosted by Gulu Prison P7 primary school.

5 In the pilot study, the two key NGOs turned out to be stiff competitors over the numbers of rescued children they were allowed to accommodate, even more so since recently as these numbers were decreasing. After one radio announcement about ‘rescued child soldiers’ while the author was at the WVCFAC centre, the coordinator of GUSCO called to instruct the coordinator not to send anybody to that district office for ‘clients’, since GUSCO would take in all the returnee ‘children’. This was because ‘GUSCO was presently running out of business since very few child soldiers from Gulu were presently being rescued’ (female counsellor). Immediately following the phone call, there were discussions among counsellors, support staff and other workers at the WVCFAC concerning why GUSCO thinks it is the only NGO to carry out counselling and reintegration. Presently it had broadened its scope to take in former child soldiers _not_ from Gulu. Yet, its original mandate was to rehabilitate ex-combatants from Gulu district. This did not happen when there were more former child soldiers returning. The WVCFAC coordinator expressed his determination to go and ‘challenge’ GUSCO to adhere to its original objectives. Their constant shifting of goal posts and changing of their focus will eventually contribute to the WV trauma centre ‘not having any clients’.

6 Most information below comes from written records of the interactions with children. The first author participated in one individual counselling session.

7 The WVCFAC also took in adult rebel combatants ‘who surrendered to the state’ for rehabilitation. At the time of study, there was a separate centre for adults but special cases such as ‘a former rebel commander and his wives’ were hosted in a separate apartment within the main centre of WVCFAC described above. ‘He would stay there as long as he wanted. It was a political decision made by the officials at the hand over ceremony. After the ‘rescue’ the state and district officials forgave the former commander and his wives. He could not be reintegrated immediately since he feared the community would attack him’, disclosed the WVCFAC coordinator when
interviewed about the extraordinary scenario of the presence of a former rebel commander and his extended family. He was instructed to give him special treatment. Hence a separate apartment was given to him and his family. WV provided all the basic necessities.

8 Lists of items distributed to the children varied.

9 The specialists at Makerere University Botany Department could not identify the Olwedo tree. We therefore refer to it by its local name in this article.

10 We use ‘husbands’ and ‘wives’ cautiously because such relations involving ‘rewarding commanders’ with abducted girls is not what constitutes a marital union as between husbands and wives as adults consenting to the relationship.

11 In one focus group discussion with displaced children selected for extensive follow-up, one of the children whose brother was killed by rebels confronted Apiyo. This was because Apiyo had decided to discuss her experiences and actions in the bush. The girl accused Apiyo of having killed a boy called Odokorach (her brother) from Anaka. Apiyo defiantly answered that the Odokorach she had killed was from Kitgum, and not Anaka. There was subsequently an exchange of severe verbal insults. This focus group discussion was called off and it was decided to always meet with Apiyo individually, or with her friend.

12 “When a formerly abducted child-soldier has a problem of ‘lack of sleep’, when people are talking ‘negative things’ about him or her, and when he or she is constantly disturbed by cen, this child can use ‘medicines of sleep’ and ‘that plant atika’. If there is no improvement at all, then s/he should join the army, whether for the state army or the rebel armed group. That is the only solution. Cen fears anybody with a gun. Anybody who is armed cannot be attacked by cen. Sometimes, the government does not want to take in children below eighteen years of age for their army” (focus group discussion with 12–15 year olds in Gulu, Northern Uganda).

13 The shrubs belong to the class of Labiate and species commonly used include Ocimum basilicum L., Orthosiphon australis Vatka and another similar plant of class Chenopodiaceae and the species of Chenopodium procerum Moq were referred to as Atika.

14 An ajwaka is an indigenous healer. He or she evokes spirits in healing. These healers often have more knowledge about the appropriate use of herbal medicines than an average person does. They are also known to sometimes use their powers to hurt other people. For example an aggrieved person can ask an ajwaka to send cen to make his or her enemy insane.

Grace Akello is a PhD Student affiliated with the Amsterdam School for Social Research and Leiden University Medical Center. She lives in Uganda. E-mail: akellograce@hotmail.com.

Annemiek Richters is Professor of Culture, Health and Illness at Leiden University Medical Center, The Netherlands. E-mail: j.m.richters@lumc.nl

Ria Reis is Associate Professor at the University of Amsterdam, specialized in medical anthropology, focusing in particular on children. Email: r.reis@uva.nl