APPENDEXES

1. Interviews with child ex-combatants

Gender:
Age:
Marital status:
Family status (has 2 parents, has one parent, has no parents, parent(s) in prison)
Educational level:
Date at the recruitment
Reason for recruitment:
Armed group belonged to:
Date at demobilization:
What was your latest rank in your armed group?
What were your main activities in your armed group?
Were your main activities different from those of other children in your armed group?
Yes, what were their activities?
What were the main activities of female children in your armed group?
Did you get any training in your armed group?
If yes, specify
Was your training different from those given to other children in your armed group?
If yes, specify
Were female children given same trainings?
If no, specify
How were you used to getting your food in your armed group?
How were you used to getting health cares in your armed group?
Were you paid in your armed group?
If yes, what was your latest monthly pay?

Disarmament and demobilization

How did you decide to disarm?
Did you encounter problems while disarming?
If yes, which problems?
Were these problems particular for you or they were specific to all children?

Many respondents were child combatants at the time of demobilization but are not forcibly still children, because at the time of interview, they will be 18 or older. Information that they will provide with is not related to the experience as adults but, rather, to their experience as child combatants or child ex-combatants only.
How did you rich the demobilization center?

Was it easy for both male and female children to disarm and demobilize? Explain

Who were the demobilization actors?

How long did you stay in the demobilization center?

During the demobilization phase, were you separated from adult combatants or there was no distinction?

Explain

During the demobilization phase, were you given a demobilization package?

If yes, what was it comprised of and who gave you it?

What other services did you receive and from who in the demobilization center?

Did you have any training during the demobilization phase?

If yes, what were the main topics discussed?

How useful do think those topics are for your life in your community?

Have you ever been asked whether you had a health (physiological, psychological) problem during the demobilization phase?

If yes, what problem(s) did you report and how was/were it/them addressed and by who?

Have you ever been invited to pass voluntarily an HIV/AIDS tracking test and by who?

If yes, did you pass it?

Were asked whether you wanted to join your native community before being taken there during the demobilization phase?

Did you get any information about your family during the demobilization phase?

Did you have any particular concern which would have prevented you from joining your family or community?

If yes, what was it?

How did you reach your family or community?

**Social reintegration**

How were you received in your family? Explain

How were you received in your community? Explain

What is your relationship with your family? Explain

What is your relationship with your community? Explain

Do members of your community know that you were a combatant in the DRC?

If yes, how do they treat you? Explain

How does it affect? Explain

Do you find any change in the way your community treats you since you have returned from the DRC?

Explain

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2 Some items for this section were drawn from a questionnaire used by Cock, et al(2003)
Are you studying or an apprentice?
If yes, which class are you attending or what are you being apprenticed to?
Who pays apprenticeship or school fees for you?
What are the main problems you encounter in your schooling or apprenticeship?
How well do you handle those problems?
If you are not studying or an apprentice, say why?
Have you ever get any assistance from the following categories since you have returned to your community?
   - Your family
   - Your neighbors
   - NGO’s
   - Local government
   - National Commission for Demobilization and reintegration
If any, specify who assisted you, how often, and what did the assistance consist of?
Are you a member of a church?
If yes, which is it and how active are you in its activities? Explain
Do you benefit from such activities? Explain
Are you a member of any community organization?
If yes, which is it and how active are you in its activities? Explain
Do you benefit from such activities? Explain
Do you have any income generating activity?
If yes, which is it and how much money you earn monthly?

Thank you for your time and responses!
2. Interviews with actors

Name of the organization:
Title (post) of respondent:
Is your organization (or community) involved in the process of disarmament, demobilization and reintegration of combatants in Rwanda?
If yes:
Which stage/phase of the process are you involved in?
What does your organization (community) intervention consist of?
What are other actors of the same process?
How is each phase of the process implemented?
Are child combatants separated from adults during the demobilization process?
Give details?
What are the main needs or concerns of the child ex-combatants that you have met so far if any?
What are the main needs or concerns of the girl child ex-combatants that you have met so far if any?
What are the challenges that you still have to take up in addressing the phenomenon of child combatants in Rwanda?
Do Rwandan child ex-combatants have serious health issues (physiological, psychosocial) problems?
If yes, what are they and how does your organization (or community) address them?
What is your organization (or community) doing for a sustainable reintegration of ex-child combatants?
Please provide facts.
Does your organization or community have any specific program aimed at helping these formerly violent children to become peace builders in their communities? Please give details.
What are the main issues that your organization (or community) has experienced in the process of disarmament, demobilization and reintegration of child combatants and what are the strategies to address them? Please provide details.

Thank you for your time and responses!
3. Information sheet (if respondent is a minor)

My name is Interayamahanga Révérien, MA Sociology student at the University of the Witwatersrand, Johannesburg, South Africa.

I am conducting academic research regarding the process of disarmament, demobilisation and social reintegration of combatants in Rwanda. The purpose of my study is to investigate the process of disarmament, demobilization and social reintegration of Rwandan child combatants form the DRC.

……………………………………………….has been chosen at random from other child ex-combatants to participate in the study. Overall, 30 persons including child ex-combatants and actors involved in the same process are included in the study.

Participation is voluntary and requires answering questions that I will ask ……………………………if both you and he/she say yes.

The interview will take him/her approximately one hour.

His/her answers will be kept confidential and will not be linked to him/her personally; they will be reported as a group.

He/she can refuse to answer any question or to stop the interview at any time without any reason.

Withdrawing from the interview will not result in any negative consequences for him/her.

Essentially his/her participation poses no risks to him/her.

By participating in this study, …………………………… will be advocating in one way or another for awareness of and efficient interventions vis-à-vis issues encountered in the process of disarmament, demobilization and reintegration of child combatants, not only in Rwanda, but also worldwide.

Do you have any question?

Does…………………………………. have any question?

Do you wish …………………….to participate?

Does…………………………………. have any question?

Should you have any question related to this research after my departure, please contact Mr. Aggee Shyaka, the Dean of Social Sciences Faculty at Kigali Independent University (Tel: 502422) or Myself, Reverien Interayamahanga, Wits University, Johannesburg, South Africa, (Tel: 0027 731935356)
4. Information sheet (if respondent is not minor)

My name is Interayamahanga Révérien, MA Sociology student at the University of the Witwatersrand, Johannesburg, South Africa.

I am conducting academic research regarding the process of disarmament, demobilisation and social reintegration of combatants in Rwanda. The purpose of my study is to investigate the process of disarmament, demobilization and social reintegration of Rwandan child combatants form the DRC. You have been chosen at random from other child ex-combatants to participate in the study. Overall, 30 persons including child ex-combatants and actors involved in the same process are included in the study.

Participation is voluntary and requires answering questions that I am going to ask you. The interview will take you approximately one hour.
Your answers will be kept confidential and will not be linked to you personally; they will be reported as a group.
You can refuse to answer any question or to stop the interview at any time without any reason.
Withdrawal from the interview will not result in any negative consequences for you.
Essentially your participation poses no risks to you.

By participating in this study, you will be advocating in one way or another for awareness of and efficient interventions vis-à-vis issues encountered in the process of disarmament, demobilization and reintegration of child combatants, not only in Rwanda, but also worldwide.

Do you have any question?
Do you wish to participate?

Should you have any question related to this research after my departure, please contact Mr. Aggee Shyaka, the Dean of Social Sciences Faculty at Kigali Independent University (Tel: 502422) or Myself, Révérien Interayamahanga, Wits University, Johannesburg, South Africa, (Tel: 0027 731935356)
5. Informed consent form

I confirm that I have read (or I have been told) and understood the information sheet for the above study and have had the opportunity to ask questions.

I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, and that my participation in the study has no risks for me.

I understand that my responses will be kept confidential and will not be linked to me personally.

I understand that by signing this consent form, I voluntarily agree to participate in the above study.

**Respondent’s name and signature**…………………………

**Date**…………………………………………………………

**Interviewer’s name and signature**…………………………

**Date**…………………………………………………………
6. Assent form

I confirm that I have read (or I have been told) and understood the information sheet for the above study and have had the opportunity to ask questions.

I understand that ………………………………’s participation is voluntary and that s/he is free to withdraw at any time without giving any reason, and that his/her participation in the study has no risks for him/her.

I understand that ………………………………’s responses will be kept confidential and will not be linked to him/her personally.

I understand that by signing this assent form, I voluntarily agree with …………………………………………………. to participate in the above study.

A copy of this form will be given to you to keep

-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Parent/Guardian’s name and signature………………………………

Date……………………………………………………………..

Interviewer’s name and signature………………………………

Date……………………………………………………………..
## 7. Documentation form for demobilised child

### A: Child’s Biographical Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Surname</th>
<th>Other names</th>
<th>Sex</th>
<th>Nationality</th>
<th>Date of birth/Age</th>
<th>Place of birth</th>
<th>Birthmarks</th>
</tr>
</thead>
</table>

Father’s name

Mother’s name

Date of child’s arrival at the centre

Address in Rwanda before recruitment into armed groups:

- **Province**
- **District**
- **Secteur**
- **Cellule**

Date and place of recruitment into armed groups

Last grade level at school

Place of school

Armed group he/she served: FDLR, Mai Mai, RCD, Mongoli, FDD, other

Army number

Date of separation with armed group

Did you attend the rehabilitation course(ingando)? Yes / No

If yes where

Name of foster parent/Relative to receive the child

Relation to the child

Occupation

Illness or major disability (explain)

Child’s aspirations

---

Name of child

Ref
Health Declaration.

The aim of declaration is to give the medical examiner a general history to determine the need for treatment or for other medical investigation to ensure the best health status of the younger people before returning to their families or caretakers. After medical examination you will get this form back to be kept for further references.

General

Name________________________________________ Date of birth__________________ Age_______

Name of father________________________________ Name of Mother_________________________

Family medical history

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Health condition</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sisters</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Medical History of child

<table>
<thead>
<tr>
<th>Past medical Problems</th>
<th>Yes</th>
<th>No</th>
<th>If known, what kind of condition, which treatment, which response, where.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you have any skin problem? (allergies, fistulas, wounds)</td>
<td></td>
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<tr>
<td>Are you often tired?</td>
<td></td>
<td></td>
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<tr>
<td>Are you often nervous</td>
<td></td>
<td></td>
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<tr>
<td>Do you often have headaches?</td>
<td></td>
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<tr>
<td>Do you have any eyes, ears, and throat and/or nose problem?</td>
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<tr>
<td>Have you ever experienced long period of coughing?</td>
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<td></td>
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<tr>
<td>Have you ever suffered from TB?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever had breathing problems?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever had chest pain?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Have you ever had stomach pain?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever had back pain?</td>
<td></td>
<td></td>
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<tr>
<td>Have you ever fainted?</td>
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<td></td>
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<tr>
<td>Do you have any problem regarding physical exercise?</td>
<td></td>
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<tr>
<td>Have you visited a doctor, health facility in the last 6 months?</td>
<td></td>
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<tr>
<td>Did you receive immunization?</td>
<td></td>
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<tr>
<td>Have you ever had X-Ray?</td>
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<tr>
<td>Do you smoke? If yes, how often?</td>
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<tr>
<td>Do you drink? If yes, how often?</td>
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<tr>
<td>Do you take any other medicines or drugs? Which one? How much?</td>
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<tr>
<td>Did you ever have health problem not mentioned above?</td>
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</tbody>
</table>

Are there any other problems you think the doctor should know before (s) he examines you?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Date of the interview_________________________ Place of interview________________________

Name of the interviewer______________________________________ Organisation_____________________________
C: Check List Regarding Resources and Health Check between child and doctor/nurse

Confidential

Name: ____________________________________________________ Registration Number: __________

<table>
<thead>
<tr>
<th>Resources/ Health check Details</th>
<th>Place</th>
<th>Date</th>
<th>By whom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child’s health / anamnesis form filled out</td>
<td></td>
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<tr>
<td>Medical examination by a medical doctor</td>
<td></td>
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<tr>
<td>Medical examination by a nurse</td>
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<tr>
<td>Blood pressure/pulse take</td>
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<tr>
<td>Weight and height taken</td>
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<tr>
<td>Voluntary HIV testing and counseling</td>
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</table>

**Blood test:**

- Hemoglobin
- Haematocrit/Leukocytes
- VDRL
- HIV

**Urine:**

- Blood
- Protein
- Pregnancy test

**Stool:**

- Blood
- Ova and parasites

Pre test counseling
Post test counseling
Follow up counseling and support
Sensitive issues discussed
Vermifuge (Deworming medicines)
Vitamin A supplement given

**Health education sessions**

1. General hygiene
2. HIV/AIDS Stepping-stones, Module
   2.1 Introduction and communication
   2.2 Perception and what is love
   2.3 Our prejudices/HIV/Condoms
   2.4 Our options/look deeper
   2.5 Support/assert ourselves
   2.6 Change ourselves/work together
   2.7 Prepare for the future
   2.8 Condoms available/issued
3. Reproductive health issues
   3.1 Safe motherhood
   3.2 Sexual and gender based violence
   3.3 Sexual transmitted diseases(HIV)
   3.4 Family planning
   3.5 Other reproductive health concerns
   3.6 Reproductive health of young people
4. Malaria prevention
   Symptom awareness education
   Mosquito nets /other kits issued
Date of the interview_______________________ Place of interview______________________________

Name of the interviewer______________________________ Name of the organization________________
Details of people the child lived with.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Relation</th>
<th>Profession</th>
<th>Address</th>
<th>Place of last contact</th>
<th>Date of last contact</th>
<th>Comment</th>
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Other members of the family

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<tr>
<th>Name</th>
<th>Age</th>
<th>Relation</th>
<th>Profession</th>
<th>Address</th>
<th>Place of last contact</th>
<th>Date of last contact</th>
<th>Comment</th>
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Other people child knows in the neighborhood

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<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Relation</th>
<th>Profession</th>
<th>Address</th>
<th>Place of last contact</th>
<th>Date of last contact</th>
<th>Comment</th>
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</tbody>
</table>
E: History of Recruitment
Confidential

1. How did the child enter into the military group?

_________________________________________________________________________________

_________________________________________________________________________________

2. How old was the child when it happened? _____________ 3. Where did it happen?___________

4. Why did the child join the military group? (Hunger, poverty, position, vengeance)

_________________________________________________________________________________

_________________________________________________________________________________

5. How did the child leave the military group?

_________________________________________________________________________________

6. Why did the child leave the military group?

_________________________________________________________________________________

7. What was your role in military group?

_________________________________________________________________________________

8. Details of other events the child remembers from experience in military group. Allow the child to speak and take note.

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

9. Is there a particular person the child would like to have traced?_______

10. Give the names and address.

_________________________________________________________________________________

_________________________________________________________________________________

Date of the interview______________ Place of interview_____________________________

Name of the interviewer___________________________ Name of the organization_________


G: Family/Home/Evaluation of the family

Check/Answers if applicable

1. Child’s mother is ___ deceased ___ Single ___ divorced ___ remarried ___ remarried with children ___
2. Child’s father is ___ deceased ___ Single ___ divorced ___ remarried ___ remarried with children ___
3. If mother is remarried with children, No. of children ___ 4. If father is remarried with children, No. of children ___
5. Will the mother be able to accommodate the child? ___ If not, why?
   ____________________________________________
6. Will the father be able to accommodate the child? ___ If not why?
   ____________________________________________
7. Other family members willing and able to accommodate the child if parents are unable.
   Relation_________________
8. How many people are earning an income in the household? _________ 9. Monthly household income__________
10. Who are the income earners and what are their professions? _______________
    11. Dependants supported by the monthly household income, relation/age
        ____________________________________________
    12. Dependants currently enrolled in school. List names, age and level at school.
        ____________________________________________
        ____________________________________________
    13. Will the child have access to medical care? _____________________________
    14. Will the child have access to education? _____________________________
    15. Are there family conflicts that may disrupt child’s reintegration? If so, explain _______________
        ____________________________________________
    16. Are there any other problems that might hinder child’s reintegration process? _______________
        ____________________________________________
        ____________________________________________
        Comments: __________________________________________________________________________
        __________________________________________________________________________________
        __________________________________________________________________________________
        __________________________________________________________________________________
        __________________________________________________________________________________
        __________________________________________________________________________________
        __________________________________________________________________________________

Date of the interview ______________  Place of the interview ______________________________

Name of the interviewer ___________________________ Name of the organisation __________________
1. Date of arrival at the centre

2. Name of mother

3. Name of Father

4. Does the child want his/her family traced? ______, If no why? ____________________  

5. If yes, person(s) to be traced_________________________________________________

6. Address:
   Province___________________________ District__________________________
   Sector____________________________ Cellule___________________________

7. Relationship to the child______________________________________________________

8. The child accompanied by any siblings? Yes_____ No_____ (write name and age) ________  

9. Was tracing successfully? Yes____ No_____ Date of verification___________________

   Reaction of the family:

   ________________________________________________________________

8. If the family trace nominated by the child resulted in a failure, are there any other family members  
   Available? Is there a suitable replacement for the child? ____________________________  
   ________________________________________________________________
   ____________________________

   Date of the interview _________________________  Place of interview _________________________

   Name of interviewer ____________________________ Name of the organisation

   ____________________________

   xxvii
H: Report of child’ welfare

Confidential

1. Describe your everyday life at the centre
__________________________________________________________________________________
__________________________________________________________________________________

2. How has the child adjusted to his/her present situation and how has he/she integrated into it?
__________________________________________________________________________________

3. Has the child experienced any difficulties? Describe the changes in behavior and participation in
activities _________________________________________________________________________
__________________________________________________________________________________

4. To what extent are the child’s need being met and how? ________________________________
_______________________________________________________________________________

5. Has any one informed you about your file progression and plans after leaving the transit
centre?____

6. What do you hope to do once you’ve returned to you family/primary
carer/community?______________
_______________________________________________________________________________

7. Are there any particular circumstances we should know about before preparing your
return?________
____________________________________________________________________________________
____________________________________________________________________________________

8. What kind of support services will you need for your return
home?______________________________
_______________________________________________________________________________
_______________________________________________________________________________

9. What are your likes and dislikes?
__________________________________________________________________________________
__________________________________________________________________________________

10. What are your future aspirations or fear for the future?______________________________
_______________________________________________________________________________

Name of the child.................................
Ref: ...........................................

xxviii
11. Do you have any problem concerning your experience in the military group? ________________

12. Is there anyone you can confide in with your problem? What did the person do to help you? What were your thoughts afterwards?

13. Do you want to join military groups? If yes, why?

14. When was the last time you were depressed? Do you feel depressed often? How many times per week? ___

Allow the child to speak about any other concerns. Write down his/her account.

Comments:
<table>
<thead>
<tr>
<th>I: Follow up Evaluation</th>
<th>Confidential</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name of the child:</td>
<td>2. Date of birth/age:</td>
</tr>
<tr>
<td>3. Current address in Rwanda:</td>
<td></td>
</tr>
<tr>
<td>Province: District:</td>
<td>Sector: Cellule:</td>
</tr>
<tr>
<td>4. Name of principle carer: Relationship:</td>
<td></td>
</tr>
<tr>
<td>5. Is the child still living with carer? If not why? Where has the child gone?</td>
<td></td>
</tr>
<tr>
<td>CHILD’S REINTEGRATION- interview with child</td>
<td></td>
</tr>
<tr>
<td>6. Is the child treated differently from other children in the household? Yes/no</td>
<td></td>
</tr>
<tr>
<td>7. Child enrolled in school/vocational training/neither. If neither explain.</td>
<td></td>
</tr>
<tr>
<td>8. Are you working? Yes/no Profession:</td>
<td></td>
</tr>
<tr>
<td>9. Does the child engage in any group activities or sports within community? Yes/no</td>
<td></td>
</tr>
<tr>
<td>10. Does the child have any friend? Yes/no</td>
<td></td>
</tr>
<tr>
<td>11. Is the child in any special relationship? Yes/no</td>
<td></td>
</tr>
<tr>
<td>12. Does the child plan to be married? Yes/no</td>
<td></td>
</tr>
<tr>
<td>13. Has the child been sick since leaving the transit centre and how often? Yes/no. Explain</td>
<td></td>
</tr>
<tr>
<td>14. Did the carer provide the child with medical care? Yes/no. Explain</td>
<td></td>
</tr>
<tr>
<td>15. Describe everyday life since your return</td>
<td></td>
</tr>
<tr>
<td>16. How do you see your future? What would you like to do?</td>
<td></td>
</tr>
</tbody>
</table>

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Name of child: 
Ref: 

xxxi
FAMILY RELATIONSHIP - interview with care taker

17. Are there any special concerns that you have since the child’s return? Explain

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

18. Describe your everyday life with the child

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

19. Describe the child’s relationship with other members in the household

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

20. Has the child ever confided any concerns with you? Yes / no If yes explain

____________________________________________________________________________________
____________________________________________________________________________________

21. Has the child expressed any anger? Yes / no why?

____________________________________________________________________________________

22. Does the people in the community treat the child differently? Yes / no how

____________________________________________________________________________________

23. Has the child developed any special relationship with members in the household? Yes / no which one?

____________________________________________________________________________________

24. Describe the child’s behaviors around the house

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Comments:
8. HANDOVER FORM FOR CHILD EX-COMBATANT/CERTIFICANT DE REMISE

REUNIFICATION

Child’s name: __________________________________________ Age: ______
Nom de l’enfant. __________________________________________
Mother’s name:

Father’s name: __________________________________________
Place of origin: Province________________ District:_________________
Sector: ____________________ Cellule:____________________
Who was staying at/qui se trouvait à _______________________

Has been handed over by: ______________________________________( organization)
A été remis par:

Full name: __________________________________________
Nom complet:

Relationship to child: _________________________________
Lien avec l’enfant:

Present address       Province:________________ District:_________________
Adresse actuelle
Sector:________________________ Cellule:___________________
Occupation_____________________
Witnessing authority: Name________________ Function_________________
Signature______________________
9. Screening form for child ex-combatant

UKWEMERA UMWANA MU MURYANGO – IBYUMVIKANYWEHO


Itariki n’aho bikorewe___________________________________________

Umukono w’uhawe umwana______________________________________

Umukono w’umwana____________________________________________

Umukono w’umusosiyari__________________________________________

Umukono na kasha by’ubuyobozi bw’Akare__________________________

10. Child-combatant Identification Form

RWANDA DEMOBILISATION AND REINTEGRATION COMMISSION
RUHENGERI CHILD EX-COMBATANT REHABILITATION CENTER
CHILD EX-COMBATANT SCREENING

1. IKAZE

Nitwa………………………………………………………………………………..nkaba ndi umwe mu bashinzwe kwakira no kwita ku bana bahozu mu gisirikare, by’umwiheriko abitantukanyuye n’imitwe yitwaza imbunda iba muri Congo.

Urakaza neza iwny wa Rwanda, urisanga, shyitsa umutima hamwe tukwakiranye urukundo, tukaba rero tugise kugirana ikiganiro kigufi mu bwisanzure n’umutuzo, kugira ngo njye nawe turebere hamwe uko wasanga bagenzi bawe aho bari mu kigo cyabo kiba mu Mujyi wa Ruhengeri.

2. UMWIRONDORO

a. Amazina…………………………………………………………

b. Imyaka ……………………………………………………………

c. Igitsina ……………………………………………………………

d. Aho akomoka

Intara………………………………..Akare……………………………………

Umurenge…………………………..Akagaari……………………………..

e. Ise……………………………………..Aracyariho, Yego….Oya……

f. Nyina……………………………………..Aracyariho, Yego….Oya……

3. ICYO YAKORAGA

a. Aho yabaga………………………………………..

b. Umumwe yabagamo………………………………………..

c. Ighe yari ahamaze………………………………………..

d. Icyo yakoraga………………………………………..

e. Icyo yifuza………………………………………..

4. Hari icyo wumwa by’umwihariko twakwitaho mbere y’uko usanga abandi bana aho bari mu kigo?

xxxv
5. Ngaho nguhaye urubuga ngo nawe ugire icyo wavuga mu byifuzo byawe dushobora kuba tutakomojeho muri iki kiganiro cyacu.

6. **GUSOZA**

Nongeye kugushimira iki kiganiro tugiranye nkwiseza ko ibyo umaze kungezaho ari ingirakamaro, bizadufasha nyje nawe; nongeye kuguha ikaze iwacu I Rwanda ni amahoro.

7. **UMWANZURO**

Nshingiye ku masezerano mpuzamahanga y’uburenganzira bw’umwana, amasezerano nyafurika ku burenganzira n’imibereho myiza by’umwana ndetse n’itegeko ry’u Rwanda No.27/2001 ryo kuwa 28 Mata 2001 ryerekeye uburenganzira bw’umwana n’uburyo bwo kumurinda ihohoterwa mu ngingo ya 1 n’iya 19 y’iryo tegeko, na none nshingiye ku myanzuro y’ikiswe Cape town principle and prevention of child recruitment, nkanashingira ku kiganiro maze kugirana n’umwana, ndetse n’ububasha mpabwa na Komisiyo Ishinzwe Gusezerera no Gusubiza mu Buzima Busa nzwe Ingabo zavure ku rugerero(RDRC), ndemeza nta shiti ko uyu mwana yashyirwa mu rwego rw’abana bitandukaniye n’abacengezi akanemererwa gusanga abandi bana mu kigo cyabagenewe kiri mu Mujyi wa Ruhengeri.

Byemejwe na :

<table>
<thead>
<tr>
<th>Umusosiyari w’abana</th>
<th>Uhagarariye igitsina gore</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amazina.........................</td>
<td>Amazina..........................</td>
</tr>
<tr>
<td>Akazi akora.......................</td>
<td>Akazi..............................</td>
</tr>
<tr>
<td>Umukono.........................</td>
<td>Umukono..........................</td>
</tr>
<tr>
<td>Itariki y’ikiganiro...............</td>
<td>Itariki............................</td>
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</tbody>
</table>