Fight against Trafficking in Human Beings and Organised Crime – Phase 2 (THB/I FS/2)

MANUAL FOR MANAGEMENT OF SHELTERS AND ASSISTANCE CENTRES FOR VICTIMS OF TRAFFICKING

May 2017
This publication has been elaborated in the framework of the project “Fight against Trafficking in Human Beings and Organised Crime – Phase 2” funded by the European Commission and implemented by ICMPD in cooperation with EF and FIIAPP.

This publication has been produced with the assistance of the European Union. The contents of this publication are the sole responsibility of the author and can in no way be taken to reflect the views of the European Union or ICMPD.

Author: Elvira Mruchkovska

All sample forms and documents used in this publication were provided by the NGO Clean World.

International Centre for Migration Policy Development (ICMPD)
Gonzagagasse 1, 1010 Vienna, Austria
www.fightagainsttrafficking.org
www.icmpd.org
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INTRODUCTION</strong></td>
<td>05</td>
</tr>
<tr>
<td><strong>DEFINITIONS</strong></td>
<td>07</td>
</tr>
<tr>
<td><strong>SHELTER AS AN INTEGRAL PART OF THE NATIONAL AND REGIONAL</strong></td>
<td>11</td>
</tr>
<tr>
<td><strong>SYSTEM OF REINTEGRATION SERVICES FOR VICTIMS OF TRAFFICKING</strong></td>
<td>17</td>
</tr>
<tr>
<td><strong>SHELTER STAFF</strong></td>
<td>37</td>
</tr>
</tbody>
</table>

**1** SHELTER AS AN INTEGRAL PART OF THE NATIONAL AND REGIONAL ASSISTANCE AND REFERRAL SYSTEM FOR VICTIMS OF TRAFFICKING

<table>
<thead>
<tr>
<th>Subsection Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Informing victims about “shelter” or “temporary accommodation” services</td>
<td>11</td>
</tr>
<tr>
<td>1.2 Main requirements for the provision of quality services for victims of trafficking</td>
<td>12</td>
</tr>
<tr>
<td>1.3 Shelter safety</td>
<td>14</td>
</tr>
<tr>
<td>1.4 Shelter premises</td>
<td>15</td>
</tr>
</tbody>
</table>

**2** SYSTEM OF REINTEGRATION SERVICES FOR VICTIMS OF TRAFFICKING IN HUMAN BEINGS

<table>
<thead>
<tr>
<th>Subsection Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Identification of victims of human trafficking</td>
<td>18</td>
</tr>
<tr>
<td>2.2 The first meeting</td>
<td>23</td>
</tr>
<tr>
<td>2.3 Needs assessment and assistance plan. Case management</td>
<td>29</td>
</tr>
<tr>
<td>2.4 Special needs of female victims of human trafficking</td>
<td>34</td>
</tr>
<tr>
<td>2.5 Special needs of male victims of human trafficking</td>
<td>34</td>
</tr>
<tr>
<td>2.6 Characteristics of support to child victims of human trafficking</td>
<td>35</td>
</tr>
<tr>
<td>2.7 Reintegration of foreign or stateless victims of human trafficking</td>
<td>36</td>
</tr>
</tbody>
</table>

**3** SHELTER STAFF

<table>
<thead>
<tr>
<th>Subsection Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Core staff and their functions</td>
<td>37</td>
</tr>
<tr>
<td>3.2 Supervision as a management tool</td>
<td>40</td>
</tr>
<tr>
<td>3.3 Professional burnout syndrome</td>
<td>43</td>
</tr>
</tbody>
</table>
4

REFERRAL AND JOINT ACTION MECHANISM IN THE SYSTEM OF ASSISTANCE FOR VICTIMS OF HUMAN TRAFFICKING

BIBLIOGRAPHY

ANNEXES
INTRODUCTION

Trafficking in Human Beings (THB) is regarded as a violation of human rights in the world we live in. In the global, holistic response to combat it both local and international laws in this realm are infringed. Economic instability, military conflicts and other processes unfolding globally have been the principal causes for the movement of people to other countries in search of employment, a safe place to live and subsistence; and have accelerated the migration process.

Significant steps have been taken in Azerbaijan to fight all the facets of human trafficking, such as its prevention and identification, assistance for trafficked persons, criminal prosecution, and establishment of a policy to attain the effective cooperation of the relevant authorities and organizations.

National legislation in this field builds upon the international norms, enabling the development of a National Referral Mechanism in the fight against human trafficking.

The following legal acts are of paramount importance in addressing the issue of trafficking in human beings:

- The Main Department on Combating Trafficking in Human Beings established at the Ministry of Internal Affairs and its approved regulation (04.06.2004);
- The Law of the Republic of Azerbaijan on Fight against Human Trafficking adopted (28.06.2005) and signed with the decree of the President (04.08.2005);
- The Law on Addendums to some Legal Acts in relation to application of the Law of the Republic of Azerbaijan on Fight against Human Trafficking adopted (30.12.2005) and its implementation endorsed with the relevant decree of the President of the Azerbaijan Republic (23.01.2006);
- The Rules on Establishing, Financing, Operating, and Supervision of Special Institutions for Victims of Human Trafficking approved by the relevant decision of the Cabinet of Ministers of Azerbaijan (09.11.2005);
- The Regulation on Assistance Fund for Victims of Trafficking in Human Beings approved by the decision of the Cabinet of Ministers of Azerbaijan (12.01.2006);
- The Charter of Temporary Shelter for Victims of Trafficking in Human Beings approved with the order of the Ministry of International Affairs of the Republic of Azerbaijan (17.02.2006);
- The Rules on Social Rehabilitation of Victims of Trafficking approved by the decision of the Cabinet of Ministers of Azerbaijan (06.03.2006).

The criminal code of the Republic of Azerbaijan prescribes provisions regulating the anti-trafficking response. Numerous normative-legal acts providing for protection of the rights and freedoms of children and women as potential victims of trafficking have been enacted; for instance: article 106 (servitude), article 137 (illegal purchase or sale of human organs and tissues), 144-1 (human trafficking), article 144-2 (forced labour), article 150-1 (transportation of passengers without travel
documents), article 171 (involving of minors in prostitution or the committing of immoral actions),
article 244 (maintenance of brothels), article 316-1 (disclosure of confidential information about
persons affected by human trafficking).

An effective system of assistance to victims of human trafficking involves setting up a network of
authorised state agencies and organisations capable of rendering quality and timely assistance
to victims within their competences. The main aim of this system is to enable the victim to return
to society and to rehabilitate their essential skills. Provision of social and other kinds of services
to victims of human trafficking is tailored according to individual needs.

Most victims need assistance in finding a temporary shelter. A shelter - is a place where the safety
of persons exposed to different kinds of violence, threats, coercion, or exploitation is ensured and
immediate help is made available.

This Manual on Management of Shelters and Assistance Centres for Victims of Trafficking
draws on the local experience of governmental and non-governmental organisations as well as
international best practices in the field of assistance to victims of trafficking within the scope of the
“Fight against Trafficking in Human Beings and Organised Crime – Phase 2 (THB/IFS/2)” project.
This publication is intended not only for institutions and organisations working in the sphere of
assistance to victims of human trafficking, but also for students and professors of post-secondary
institutions training social workers and accordingly may be used as a guideline by centres and
shelters rendering assistance to afflicted persons.

The overall aim of this publication is to maintain and enhance the well-being
of adults and children who are victims of human trafficking through a flexible
and comprehensive response.

The objectives of this manual are the following:

- Increase the level of knowledge of all the structures dealing with adults and children
  who are presumed or potential victims of human trafficking;
- Improve the provision of social services at the “shelter” or “temporary place of stay”
carried out by the staff, including all the entities and organisations assisting victims of
trafficking and safeguarding their rights;
- Facilitate exchange of knowledge among various entities and organisations working
with persons affected by human trafficking, their families and people at risk;
- Ensure a uniform approach in setting up the activities of all the entities and organisations
which receive alerts about human trafficking cases and are actively involved in provision
of “shelter” or “temporary stay” to victims of human trafficking.

We would like to thank the Ministry of Internal Affairs of the Azerbaijan Republic, the Ministry of Labour
and Social Protection of the Population of the Azerbaijan Republic and non-governmental organisations
as Clean World, Center for Women Initiative and Assistance in Solving Social Problems, Tamas and
Azerbaijan Children's Union for their contribution during the elaboration of this manual. This document
showcases another successful example of the joint efforts of state bodies and public and international
organisations in combating human trafficking and serving the best interests of humankind.
DEFINITIONS

Abuse of a vulnerable position

Having entered the country illegally or without proper documentation; pregnancy or any physical or mental disease or disability of the person, including addiction to the use of any substance; reduced capacity to form judgments by virtue of being a child; illness, infirmity or a physical or mental disability; promises or giving sums of money or other advantages to those having authority over a person; being in a precarious situation from the standpoint of social survival; or other relevant factors.¹

Child

A child means every human being below the age of 18 years, unless under the law applicable to the child majority is attained earlier.²

Child exploitation

Procuring a child for illicit or criminal activities (including drug production and trade or begging); using children in armed conflicts; engaging children in work that by its nature or by the circumstances in which it is carried out is likely to harm their health or safety, as determined by the national legislation or authority; the employment or use in work of a child who has not reached the applicable minimum working age for that type of employment or work; other forms of exploitation; illegal adoption

Child labour³

Paid or unpaid work and/or activity (including providing services) which by its nature or the circumstances in which it is carried out is likely to harm the child psychologically, physically, socially or morally.

Child prostitution⁴

The use of a child in sexual activities for remuneration; any other form of consideration or pledge regardless of whether such remuneration, consideration or pledge is offered to the child or a third person.

Country of destination

The country in which a person lives after emigration.

Country of origin

The place of stay of a person before s/he emigrates.

Debt bondage

Permanent enslavement by which a person is kept in bondage by making it impossible for him or her to pay off actual or imagined debts.⁵

 Forced labour (service)

Illicit coercion of a person into performing certain labour (service).

⁵ UN Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery (1956), Volume 266, No. 3822, http://www.refworld.org/docid/58c156dc4.html
<table>
<thead>
<tr>
<th><strong>Harbouring of a person</strong></th>
<th>Keeping a person in custody in closed confinement, transportation means, or other places; presenting false documents, alteration of appearance, etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Human exploitation</strong></td>
<td>Forced labour (servitude); sexual servitude; slavery, practices similar to slavery and related conditions of servitude; illicit removal of human organs or tissues; illicit conducting of bio-medical research on a person; use of a woman as a surrogate mother; recruitment for unlawful activities (including criminal activities); and other forms of human exploitation. (The consent of a victim of trafficking in persons shall be irrelevant where any of the means set forth in article 1.0.1, Law of the Azerbaijan Republic on Fight against Human Trafficking have been used.⁶</td>
</tr>
<tr>
<td><strong>Human trafficker</strong></td>
<td>Individual or legal entity practicing any activity related to human trafficking.</td>
</tr>
<tr>
<td><strong>Identification of victims of human trafficking</strong></td>
<td>The process of obtaining information determining whether a person is a victim of human trafficking.</td>
</tr>
<tr>
<td><strong>Migrant smuggling (illegal import)</strong></td>
<td>Procurement, in order to obtain, directly or indirectly, a financial or other material benefit, of the illegal entry of a person into a state of which the person is not a national or a permanent resident.</td>
</tr>
<tr>
<td><strong>National referral mechanism for victims of human trafficking</strong></td>
<td>A co-operative framework through which state actors fulfil their obligations to protect and promote the human rights of trafficked persons, co-ordinating their efforts in a strategic partnership with civil society.⁷</td>
</tr>
<tr>
<td><strong>Post-traumatic stress disorder</strong></td>
<td>A condition that develops in some people who have experienced traumatic stress.</td>
</tr>
<tr>
<td><strong>Practices similar to slavery</strong></td>
<td>Institutions and traditions indicated in article 1 of the 30 April 1956 Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery.</td>
</tr>
<tr>
<td><strong>Receipt (procurement) of a person</strong></td>
<td>The act of transferring control over a person from one person to another.</td>
</tr>
<tr>
<td><strong>Recruitment</strong></td>
<td>An agreement on employment through invitation or involvement in an activity.</td>
</tr>
<tr>
<td><strong>Risk group of human trafficking</strong></td>
<td>A group of people who have a high tendency to be subjected to human trafficking.</td>
</tr>
<tr>
<td><strong>Sexual exploitation</strong></td>
<td>Exploitation of a person for the purpose of sexual servitude, production of pornographic materials</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slavery</td>
<td>The full or partial appropriation of property rights with respect to an individual.</td>
</tr>
<tr>
<td>Stigmatisation</td>
<td>A type of social psychological behaviour towards people in vulnerable position whereby they are labelled by others.</td>
</tr>
<tr>
<td>Trafficking in persons</td>
<td>Recruiting, obtaining, keeping, harbouring, transporting, giving or receiving of a person by means of threat or use of force, intimidation or other means of coercion, abduction, fraud, deception, abuse of power (influence) or a position of vulnerability, or by giving or receiving payments or benefits, privileges or concessions to achieve the consent of a person having control over another person, for purposes of exploitation (recruiting, obtaining, keeping, harbouring, transporting, giving or receiving of a minor for purposes of exploitation shall be considered trafficking in persons even if the means set forth in this legal provision of the Republic of Azerbaijan are not used).</td>
</tr>
<tr>
<td>Transit country</td>
<td>The country or countries a trafficked person travels through to reach their final destination; transit countries are often used to obtain the documents, marriage certificate or visa required for entry and stay in the destination country.</td>
</tr>
<tr>
<td>Transport of a person</td>
<td>Displacement of people through transportation internally or across borders.</td>
</tr>
<tr>
<td>Victims of human trafficking</td>
<td>Persons injured, or believed to be have been injured, by trafficking in persons.</td>
</tr>
</tbody>
</table>

SHELTER AS AN INTEGRAL PART OF THE NATIONAL AND REGIONAL ASSISTANCE AND REFERRAL SYSTEM FOR VICTIMS OF TRAFFICKING

Trafficking in human beings constitutes one of most grave violations of human rights and fundamental freedoms as it violates an individual’s right to safety, liberty, personal integrity, social protection, the right not to be subjected to torture and/or cruel, inhuman, or degrading treatment, and to rest, labour, respect, and freedom of movement.

An individual submitted to slavery becomes the property of others. The main criterion in selecting a place for the first stage of the victim’s reintegration is to ensure his or her safety. In order for the victim to resume a normal life, it is essential to support and treat them with respect.

However, regrettfully, even those closest to the victim do not refrain from asking questions, or condemning them for the situation that transpired. Therefore, shelter is considered an indispensable part of the assistance system for victims of human trafficking.

Countries which initiate a national referral system of comprehensive assistance to victims of human trafficking establish the relevant legislation and necessary resources.

Shelter or temporary shelter services in each country are based on definite principles and standards in order to ensure the individual’s safety and basic needs.

Azerbaijan has attained some results in this area and provides for state-owned or non-governmental shelters and temporary accommodation services. The possibilities for cooperation between the Ministry of Internal Affairs as the National Coordinator of the Fight Against Human Trafficking and non-governmental organisations and funding opportunities for regional shelters under the auspices of non-governmental organisations are laid down in the legislation. Joint activities and collaboration among all shelters is one of the preconditions of the National Referral Mechanism.

1.1 Informing victims about “shelter” or “temporary accommodation” services

Informing victims about the provision of “shelter” or “temporary accommodation” services is one of the necessary links in the assistance chain. This process should incorporate not only the active involvement of
specialised non-governmental organisations and entities which afford social-protection measures, but also those state entities who carry out medical and educational services, and thus indirectly contribute to the fight against trafficking in human beings.

A victim of trafficking who returns back through a border checkpoints in Azerbaijan will typically not contact the shelter as he or she is unaware of what awaits them upon arrival. But if the person is informed (telephone number, service description, confidentiality rules) about their right to receive shelter, they would benefit from this opportunity as necessary. Therefore, distribution of booklets or placement of banners indicating hotline numbers at transportation hubs (airports, bus terminals, railways stations), in polyclinics and hospitals, and in employment centres and other administrative buildings offer the possibility to inform victims about their access to required assistance.

When the perpetrator has been imprisoned the affected person enjoys the right to choose whether to use the services or not. In case there is a risk that they may fall into a dangerous situation, the state is bound to provide safe housing or shelter with well-trained staff regardless of the place of the origin of the victim. Information about the address of the shelter must be kept confidential.

Information on the right to obtain “shelter” or “temporary housing” services should be made available at awareness raising events organised by experts who are adept at identifying the groups at risk of becoming THB victims or presumed victims. An entity or organisation is obliged to refer the victim to the shelter according to the initial agreement if such a service is deemed necessary.

1.2 Main requirements for the provision of quality services for victims of trafficking and the capacity of shelters

The main features of a shelter or temporary accommodation catering to the needs of victims of human trafficking

Despite the fact that shelters for victims of human trafficking do not take a standard form in international practice, the main principles of the service arrangement are similar. Specialised centres can arrange their activities in different ways in line with their current capacities to provide “shelter” services; the availability of well-trained personnel and accommodation resources, and the demand for services in the country are some factors which may influence the form which the service takes.

All shelters have a right to restrict the type of beneficiaries they serve due to their capacity (services exclusively for women, services for children, services for men or women with children). In some cases there also exist regional shelters which afford services to mixed groups in remote areas.

The shelter premises can be relatively small (for instance, apartments with a couple of rooms) or separate multi-floor buildings. There is a practice of establishing shelters on the ground floor of buildings belonging to hospitals or religious centres. In some cases shelters extend support to victims of domestic violence alongside victims of human trafficking. In this context additional measures should be undertaken in the shelter to safeguard the lives of other clients. Children
who are the victims of trafficking can be housed in shelters designated especially for children or rehabilitation centres with safe conditions.

All shelters should aim to adhere to the following overall principles:

- A safe and secure temporary living environment for all shelter residents;
- A safe and secure working environment for shelter staff;
- Well-trained staff working in a collaborative and interdisciplinary manner;
- A holistic approach to assisting the victims of trafficking based on needs assessment and an individually tailored rehabilitation plan;
- Promotion of assistance to the victims of human trafficking through cooperation among the key partners (organisations);
- Human-centredness as an underlying core value in the assistance process and rehabilitation of THB victims.

Referral of the victims of trafficking to the shelter

Individuals who have experienced human trafficking may need immediate housing during the initial identification by representatives of the state entity. It should be noted that the role of National Coordinator for Referral of Victims of Trafficking in Human Beings in Azerbaijan is carried out by the Ministry of Internal Affairs.

The competent authority determines in which accommodation the victim will be placed and based on the preliminary agreement officially refers the victim to the shelter. A specialist (as instructed by the head of the shelter) employed at the shelter shall guide the victim to the shelter accompanied by a security staff member if necessary.

In the case that the trafficking victim is a child, it is important to follow the norms on informing the legal representative of the child unless there is a presumption about them being involved in committing the crime of human trafficking.

The list below gives some examples of categories of victims who may be accommodated in a shelter:

- Female victims;
- Adult victims with children;
- Male victims;
- Child victims;
- Foreign victims (including those willing to be repatriated or seeking temporary residence).

One of the conditions for housing children is that they be housed with other children of their own age and gender.
1.3 Shelter safety

The safety and health of all shelter staff is of paramount importance. The anonymity of the location and the absence of distinguishing external signs make it unnoticeable to outsiders and anyone seeking to locate the facility. Ideally, the physical safety of the shelter should be ensured by a protection officer or police alert signal. However, the most important factor is that the residents abide by the safety rules. To this end, they should be notified in written form and agree with the rules.

The entry of visitors should be restricted in order to maintain the safety of shelter residents and personnel!

Other safety measures include fire safety standards, electrical supply, and the general safety of the building. If the shelter is run by a non-governmental organisation (or rented), it is necessary to secure the building from other hazards, and ensure fire evacuation signs in accessible areas.

There should be a temporary room where new arrivals can stay until their medical check-up is complete. This room must be furnished with a separate bathroom to prevent contact with other residents. He/she should be able to stay in this room for up to one week depending on the length of medical screening to determine if the person is a carrier of an infectious disease.

Safe behaviour of the personnel stands at the core of safety measures. This includes the following:

- Residents are familiar with the safety rules in the shelter and sign a written agreement with all staff members on compliance with these rules;
- Regular information exchange among the personnel on safety conditions in the shelter;
- Systematic risk assessment related to new residents in the shelter;
- Residents and staff comply with the rules on how to access the personal database;
- Staff members can use a nickname;
- Compliance with safety procedures for logging in and out of the service database;
- Following confidentiality rules during working hours and conformity with these rules.

See Annex 5. Shelter security rules.
1.4 Shelter premises

The 24-hour accommodation service at the shelter necessitates that certain standards be applied to the shelter premises.

The whole area of the shelter should be divided into two parts, namely a restricted area and an area for general use.

**The area for general use**: kitchen, cafeteria, bathrooms, laundry and toilets, residential area for recreation and entertainment, including game rooms, meeting rooms and areas for other kinds of group activities.

**The area with restricted entry**: bedrooms (for 2-6 people, including separate rooms for mother and child), rooms for consultation, medical check-ups, and treatment (if the shelter has medical staff), as well as administrative rooms for shelter staff. Medical rooms should be locked to keep medication out of the reach of residents when shelter personnel are not present.

Shelter for children **merits special consideration**. The shelter should afford playrooms furnished with special equipment and rooms for educational purposes, in addition to the bedrooms.

Taking into account the diverse nature of the entertainment and play needs of children, it is advisable to have a closed yard for sports activities and games.

Special protection measures within the shelter should be undertaken in relation to electricity grids, electrical appliances, food products, detergents, window openings, balconies and medicine.

Adults agree to the reception rules and sign an agreement upon reception at the shelter. Rules of behaviour can be put in game format for children and attached to the doors of the rooms.
“Shelter” or “temporary accommodation” is comprehensive in nature. The basic principles of working with victims of human trafficking should be determined in the best way possible prior to initiation of reintegration services.

Staff should have sufficient knowledge about the problem of human trafficking and its effect on human behaviour and physical and psychological health. Therefore, training for staff is an integral element of staff selection and its implementation is imperative.

Rules of behaviour for staff are indicated below:

- **Avoiding condemnation of the victim**

  It is impossible to fully understand all the causes and effects of what the victim has experienced during his/her journey. Staff should nurture and give care and attention free from an attitude of blame towards the victims. The creation of both a physically and emotionally-psychologically secure atmosphere helps victims to become rehabilitated in a short period of time.

- **Keeping a distance**

  Staff should acknowledge the implications of coercion, different forms of violence, fear induced by threats to one’s life and other traumatic occurrences. Staff should not identify too much with the clients or become too emotionally involved.

- **Focusing on positive changes**

  The victim’s willingness to speak about their explicit or implicit problems does not always charge them with positive energy. Shelter staff should adhere to “manageable” intervention rules. Lengthy talks aimed at a “therapeutic effect” should be carried out exclusively by well-trained, qualified staff. Conversation with and demeanour towards the client should focus on positive changes leading to the improvement of their well-being and enhancement of their social potential.
2.1 Identification of victims of human trafficking

General information about identification

Identification - implies the set of actions taken by the competent authority to ascertain whether a person is a victim of human trafficking through analysing the data that signals that an offence occurred, comparing it with the identifying features of victims of human trafficking and determining the likelihood that in this case an offence was committed.

Statistical data on the number of victims of trafficking in human beings provided by state agencies and non-governmental organisations (including international organisations) mostly differ. The main reasons for the gap are related to:

- Different criteria and approaches pertinent to identification;
- Level of cooperation and trust among public (especially law enforcement agencies) and non-public organisations;
- Varying levels of professional identification skills among different entities and organisations.

The first and second factor rely on the effectivity of national strategies, whereas the third determinant is based on the skills and knowledge the competent experts have obtained during their training or education process.

Consequently, it is completely impossible to identify a victim of human trafficking without proper knowledge on human trafficking issues, crime indicators, and good communication with the presumed victims. Therefore statistical data on the number of victims does not reflect the actual situation.

The uniqueness of the crime of human trafficking can be explained by a single fact: in order to prove that a person is a victim of human trafficking, a whole process with relevant conditions should be established. Victim self-identification (where the victim perceives that they have been subjected to this crime and seeks protection of their rights and freedoms) in human trafficking cases is very low. The number of self-identified children victims is insignificant even in international practice.

According to the estimates of international experts, a significant number of victims of human trafficking have still not been identified. The main reasons for this are:

- Fear that friends or relatives will find out about the “situation”;
- Fear of “strangers”;
- Fear of punishment for violation of the state laws (for instance, illegal border crossing or overstay);
- Fear of retaliation by perpetrators (most probably all or some of the perpetrators are still at large, and may take reprisals against the victim, or his/her family or other persons close to them);
• Fear of condemnation by family members, other persons close to the victim or members of their local community;
• Being incapable of understanding the situation;
• Lack of trust in state agencies.

The abovementioned points once more stress the importance of effective identification of victims of human trafficking crimes. Timely identification of victims makes possible:

• Prevention of crime against other persons or groups;
• Collection of information on human traffickers and methods of criminal activities;
• Rescue of persons under the control of perpetrators;
• Provision of the necessary support or affording protection for the person subjected to exploitation and physical and mental injuries.

The identification procedure for persons affected by human trafficking is regulated by the legislation of the Republic of Azerbaijan and has its own specificities. The concept of “identification of victims” is defined in the Rules on Identification of Victims of Human Trafficking (03.09.2009). The Rules imply clarification of any information which could give reasons for presuming that a person is a victim of trafficking.


• The Rules were elaborated according to the National Action Plan of the Republic of Azerbaijan on Struggle against Trafficking in Human Beings (2009-2013) based on Order of the President of the Azerbaijan Republic No. 133 dated 6 February 2009 and establish the mechanisms which enable identification of a person as a victim of human trafficking.
• Victim identification is an instrumental element of the measures to protect persons affected by trafficking, ensuring their right to access immediate support and assistance, including facilitation of reintegration into society, their return to normal life and elimination of the risk of re-victimisation.
• The objective of these rules is to facilitate detection of victims and implementation of urgent protection measures, and to ensure that the staff of the relevant agencies possess the knowledge deemed necessary for identification of victims.
• The Rules serve to improve the efficiency of the measures to combat human trafficking carried out by the Ministry of Internal Affairs, the Ministry of Security, the Prosecutor General’s Office, the Customs Committee, the Border and Migration Agencies, diplomatic representations in other countries, and other state and non-governmental organisations.

Identification and support to the victim can be implemented by any of the following entities of the National Referral Mechanism:

1. Representatives of law enforcement agencies;
2. Border guards;
3. Representatives of the migration service;
4. Health workers (practitioners, gynaecologists, venereologists, paediatricians, drug therapists, infectologists, etc.);
5. Pedagogues (psychologists, educators, administrative pedagogues, heads of class and teachers);
6. Social practitioners (experts from employment centres, experts on labour and social protection of the population, etc.);
7. Dedicated representatives of non-governmental organisations working with people in this category or other target groups.

Moreover, parents, acquaintances, neighbours, friends and other people close to the person are able to identify the victim. This is predominantly related to children (if the parents are not accomplices in the trafficking). Due to the fact that this crime is not widely known to the public, the attitude of people close to the victim and acquaintances - and society in general - is not always adequate, and often the victim is condemned in various different ways instead of receiving support.

Identification of victim by social workers of shelter or support centres

Identification of victims by social service providers of shelter/support centres based on the checklist of indicators constitutes the initial stage of assistance to victims. In most cases, when it comes to identification of victims, the vast experience of the organisations providing support services should be taken into account.

There are many difficulties in terms of specifying the detailed list of signs which are used to assess the victim through analysis of their personality. Every individual is unique and distinct from any other in many ways, such as in terms of communication style, living circumstances, beliefs, moral values, marital status, and their relationship with their family.

Above all, perception about norms differs for everyone. There are families that consider begging and use of a child for labour the norm; for instance, Roma families who send their children out begging or substance abusers who in the quest for drugs or alcohol force their children to beg. It is hard to imagine that any of these children would complain about having to drop out of school, or having never attended at all, or not having a chance to play with peers due to being compelled by a relative to beg in stations or cafes and return any money earned.

There are a number of indicators or signs which point to human trafficking, an understanding of which makes it easy to identify the person affected by trafficking. The features of these are described in the Annex 3 at the end of this manual. 12

12 See Annex 3 below.
Methods of influence and control over victims of human trafficking

Any shelter staff member holding an interview with a victim should have detailed information about the crime of human trafficking. These types of crimes are called latent or clandestine in international practice and are difficult to uncover. Therefore, it is essential to know the details involved in the exploitation of the victims and all the possible control measures over them.

The main aim of the perpetrators is to gain benefits from the long-term exploitation of persons. They try to exert full control over victims through:

- Debt bondage;
- Restriction of movement and communication;
- Seizure of personal documents;
- The use of violence;
- Intimidation, threats, creating fear of law enforcement agencies;
- Forced, coerced use of drugs, and alcohol/drug abuse, etc.

**Debt bondage** takes place during the recruitment phase, whereby human traffickers advance money to the victim in return for transportation and other expenses and ask the victim to repay this once they reach the place of destination. Later on, traffickers charge fines and as a consequence "debt" starts to build up.

A victim of trafficking kept in bondage can be offered to third persons and as a result is entrapped in a "bondage" situation. The victim may be abducted for the purpose of extortion of economic benefits and forced to pay back the ransom paid by the trafficker to the kidnapper for their rescue.

Traffickers often use isolation or restriction of movement as a means of control by keeping the victim locked up, not allowing him/her access to outside contact or to communicate with others in their native language. Victims prevented from moving freely are often under the control of pimps, traffickers, taskmasters and other parties executing control.

**Confiscation of the victim’s identity document** takes place during the initial stage of movement, or later, when the potential victim arrives in the destination country, with the objective being to deprive the victim of official status and prevent them from fleeing.

**Intimidation through threats of or actual physical violence** is one effective means of control. The victim is subjected to violence, physical assault, food or water deprivation or other forms of torture in order to coerce them into submission or to carry out the required acts.

One of most widely used forms of control is “demonstrative” punishment. One victim is chosen from amongst others and exposed to physical violence in front of the others. As a result the victim may receive grave physical and psychological injury, become disabled or face death. In some cases physical and sexual violence manifests itself as sexual perversions and sadism.

On top of enduring physical abuse, the exertion of **psychological pressure** can heighten feelings of shame, embarrassment, hopelessness or helplessness.
Another control mechanism is **fear of shame and stigmatisation**. Human traffickers threaten victims with telling their families or relatives that they were involved in prostitution during the sexual exploitation. In order to cultivate a submissive attitude, photos showing rape scenes are used as a means of blackmail. Human traffickers threaten the victim that they will forward the photos to their families if they show resistance.

In some cases, disclosure of prostitution results in risks and threats from the victim’s family. Fear of shame and stigmatisation can also be seen in other forms of human trafficking. It is commonplace for victims who have been deceived to feel fearful of their traffickers disclosing the facts of the deception. This is especially true for the men; they may avoid identifying themselves as a victim as they assume that have failed to fulfil their role as breadwinner.

Another effective way of intimidation is threatening the victim with violence against their immediate family members and people close to them living in the country of the origin. In a majority of cases, human traffickers attempt to elicit information about family members. This can be the names or addresses of those close to the victim.

In fact, traffickers often do not need to find out detailed information about the victim’s family, using any available information to threaten and having this threat recognised by the victim often suffices. Victims of trafficking do not want to risk the safety of those close to them in case of an escape attempt or violation of the requirements, knowing that traffickers are adept at spinning stories and that violence could be used against them.

Most victims originate from countries where law enforcement agencies are seen not as a source of assistance, but a tool for prosecution or force, which hence renders them unwilling to contact the relevant agencies. Traffickers create a **fear of government representatives**, specifically law enforcement agencies. Victims may be fearful of unpleasant consequences (arrest, deportation, fines) on account of their illegal status, and therefore may avoid contact with government representatives. A lack of foreign language skills may complicate this problem.

Human traffickers also employ another tactic, convincing their victims that relying on law-enforcement agencies won’t be of any use, as those agencies are corrupt and “bought” by the traffickers. It is no surprise that in this situation the affected persons rarely give the names of the traffickers or testify against them during court proceedings.

Traffickers may also develop a dependence on alcohol or drugs amongst their victims in order to have better control over them. They become the procurer of drugs for them. As many victims want to escape the dreadful experience and exploitative situation with the help of drugs, this creates an environment conducive to traffickers using this method.

Whilst these methods can be used separately, they are often used concurrently so as to keep victims under both actual physical and psychological imprisonment.

Such a non-exhaustive list of control methods illustrates the reason why victims generally do not attempt to escape and why law agencies should tackle human trafficking from a humanitarian point of view.
Social workers should have in-depth knowledge about the nature of “human trafficking” crimes and the indicators that constitute the signs of trafficking. The expert carrying out the interview with the victim fills in the form and decides whether the person is a victim of human trafficking and needs immediate assistance. This also involves accountability in terms of shaping the destiny of the person concerned.

2.2 The first meeting

It is essential to take gender aspects into account during the first meeting with the victim. The World Health Organisation has elaborated the ethical and safety recommendations for interviewing trafficked women and strongly recommends adherence to these principles.\textsuperscript{13} Exploitation, especially the situation the aggrieved persons face as a consequence of sexual abuse, is both destructive and intimate.

This also applies to male victims who are held captive, coerced into labour slavery, battered, and who often cannot express explicitly how dreadful their situation is due to prevalent cultural and national stereotypes. Men often hesitate to complain before a woman, after all, men should be strong. In addition, a lack of well-trained experts to conduct the interview, rehabilitation and other necessary measures limits the right of the victim to choose an expert of the same gender.

In most cases identification of the victim is carried out proactively, namely by the specialists. Adults in a trafficking situation rarely request assistance due to their psychological condition and children hardly ever ask for assistance due to a loss of trust in adults.

It is good practice to use the “Checklist for interviewing victims of human trafficking”\textsuperscript{14} during the initial meeting with the presumed victim. By doing this the social worker builds good rapport and collects preliminary information based on trust. The checklist covers the types of assistance necessary and enables a considerate approach towards the presumed victim, as well as provides an environment conducive to the victim communicating their situation non-verbally.

Responses given during meetings are rarely insufficient. If this is the case, then this is usually related to wrong formulation of questions or a lack of readiness to accept the answers.

\textsuperscript{13} See Annex 4; the ethical and safety recommendations of the WHO for interviewing trafficked women, http://www.refworld.org/docid/40360a984.html

\textsuperscript{14} See Annexes 1 and 2.
The work of a shelter social worker starts with an interview or conversation about the situation and filling in the special forms.\textsuperscript{15}

The interview consists of the following three stages:

- **Introduction**: get to know the individual, build up a relationship, and define the main rules of the interview, its timeframe, and the topics to be covered by the conversation;
- **Substantive**: discuss the human trafficking case;
- **Final**: outline possible changes expected and future activities.

Main points of the first interview

**Communication**

The person you would like to talk to in order to understand the existing situation may be frightened, sick, hungry, or shocked, and therefore may not comprehend where they are, or may not want to talk to anyone at all. Therefore, it is advisable for the meeting room to be located away from common areas in the shelter in order to minimise distractions and ascertain whether the person is psychologically and physically ready to cooperate with you. The social worker should initiate the conversation with an introduction about the objectives of the meeting. This will create an environment of trust.

**Active listening**

Active listening is listening attentively and responsively, thus giving an impetus to the person telling their story verbally or non-verbally:

Some of the main rules of active listening are:

1. Do not interrupt;
2. Control your emotions;
3. Stick to the topic;
4. React to the words not the person;
5. Use non-verbal communication (body language and gestures);
6. Use eye contact;
7. Demonstrate your active listening and understanding of what is said through expressions like “yes” and “I understand”;
8. If necessary, rephrase questions and clarify;

\textsuperscript{15} Ibid.
9. Express your ideas in different ways in order to be comprehensible and clear;
10. Respect the right to keep silence.

**Ability to ask questions**

Clearly formulated questions enable the expert to channel the conversation in the right direction. Examples of several types of questions are given below:

*Close-ended questions* - can be effectively used early on in conversations to encourage participation. For instance: “Do you live with your parents?”

*Open-ended questions* - usually start with “What?”; “Why?”; “How?”; or “Can?”.
For example: “How was your trip?”; “How did you meet this person?”.

You need to be careful with *Why* questions. These can push the person to justify their actions and feel worried, which can negatively influence the conversation.

*Private questions* - are also recommended, that is, direct questions. For example: “Were you satisfied with your living conditions?”.

*Reflective questions* - imply generalisation of the given information and making corrections. For instance: “Was I able to depict what happened?”.

**Attention!** Questions should go from simple to difficult and be rechecked with additional questions. It is not worth posing several questions at a time - it will not produce a concrete response.

If fatigue or anxiety is noticed, the interviewer should stop the conversation and ask some neutral, unobtrusive questions. It is unacceptable to stop the victim in the middle of their response, especially if this is done to interject one’s own opinions.

We should not forget that the discussion may be unpleasant for the victim. The person may be forced to recall difficult memories, events or periods they want to block out. Therefore, alongside a tolerant attitude it is necessary to have some general impressions about the psychology of male, female and child victims.

It is essential to know the characteristics of each particular situation when working with victims of trafficking. However, it is rather difficult to indicate the exact list of traits characterising victims, as it depends on several factors like age, level of maturity, gender, cultural origin, moral values, beliefs, family status, family relationships, the traumatic and negative experience of human trafficking, the severity of the psychological and physical harm received as a result of exploitation, how long the victim was subjected to the negative experience and other accompanying elements.
Work with victims has produced the following classification of reactions and external signs:

- **Emotional**: a sense of desperation, paralysis of feelings, rage, depression, anxiety, a sense of isolation, non-acknowledgement or appraisal by others, etc.;
- **Cognitive**: memory loss, inability to concentrate, difficulty making decisions;
- **Physical**: difficulty sleeping, eating disorders, nausea, specific somatic problems such as headaches, blood pressure problems, a racing heart, tremors, a lack of orientation, general aching in the body, etc.;
- **Behavioural**: a reluctance to communicate, aggression, grumpiness, dependence on alcohol, etc.

A victim's fear or sense of being under threat may develop into phobia of: being exposed to battering, violence, or even murder; detection by traffickers; being infected with AIDS; others learning of their involvement in prostitution; being forced to undertake unpaid labour and being subjected to degrading treatment; non-acceptance or rejection by people close to them.

Usually these people want to be alone, avoid communication with others and feel reluctant to go outside. The developing of opinions such as "somebody is always following or prosecuting me" lead to high levels of suspicion, and extreme anxiety which may manifest itself in the following physical conditions: commotion, a racing heart, insomnia, nightmares, inability to concentrate, difficulty sitting still or listening, etc. Such individuals tend to avoid areas where people are present, thereby avoiding conversation with others. Holding eye contact and staying focused tends to be difficult for them.

These emotions stem from real-life situations, hence there is no need to eliminate them. Instead the safety of the victims must be ensured and immediate assistance-related actions taken.

Negation of the gravity or existence of problems. Violence is not recognised by the victim, seems unreal or is not acknowledged to have taken place. These individuals deny the fact that violence or exploitation occurred or blame themselves for what happened and justify the actions of the trafficker or exploiter. Special consideration should be given to the victim’s need to receive psychological protection.

Shock due to a lack of solutions or acceptable ways out of the situation. Strong emotional agitation triggers confused behaviour. Such commotion tends to be exacerbated by the abrupt changes in the victim’s daily life (change of place of residence, searching for a job) or the cold or strange behaviour of people close to them or living around them. Employing the strength of the person in such a chaotic situation as well as the preparation of a specific and realistic action plan and choosing the priorities are the rational ways of proceeding.

Aggression or rage shown by the victim can be directed towards the individual themselves (on account of having experienced the traumatic situation) as well as other persons (due to their sense of a lack of protection) immediately or after some time.

Such individuals are usually characterised by behaviour and traits like hyperactivity, limited contact with others, communicating in a high pitch (being clamant), hyperexcitation, sulkiness,
obsession with the problem, grumpiness, dissatisfaction with life, seeing the future in grey tones, a discontented facial expression, frowning, stern or negligent acts, self-inflicted physical harm, refusal to cooperate. It is very crucial for the victim to express these emotions fully irrespective of the pain associated with them.

**Self-blame, shame and guilt.** Manifests as punishment for wrong behaviour and mistakes made by the victim. Feelings of shame and guilt manifest themselves in difficulties associated with maintaining eye contact, internal unrest, feelings related to the exploitative situation, physical strain and constant tenseness, reluctance to undergo physical examinations, avoidance of contact with people providing support or persons who have information about the case.

**Memory lapses, dissociation.** Inability to recall details or entire passages of the past, people’s appearance and names, and attributes of time and place. Victims in this condition may give conflicting accounts of past events or appear unwilling to respond to or answer questions. We should be careful not to judge or condemn the person, nor to pressure them.

**Isolation, loneliness.** The person creates their own picture of the world and beliefs, believing that no one can understand or is able to help. Typical characteristics are sadness, and disengagement from others and activities. Additional traits may include drowsiness, lethargy, aloofness, irritation, loss of orientation, weakening of the victim’s cognitive ability, negative emotions (and the blocking of these emotions due to the loss of the links to their sources), delusion and hallucination.

Supportive responses are the following: opportunities to participate in one-to-one or group activities; planned tasks or events; calling (or other contact with) family, friends, etc.

**Mistrust of others.** Wariness of the service provider or support persons. The victim thinks that shelter staff can pose a menace. The experts should channel all efforts into building trust-based relationships.

**Depression** may occur when a person feels helpless or unfit to face the world. Lethargy, seeming self-absorbed, negligence, a lack of aspirations, dismal mood, a loss of interest in and enjoyment of activities which would previously have been stimulating for the person, serious fatigue, pessimism, difficulty making decisions or concentrating, thoughts about death, suicide attempts, and uncooperative behaviour are characteristic of this state.

Self-control and participation in community life are supportive tools to eliminate depression.

**Dependence, subservience or defensiveness.** Inability or reluctance to make decisions; a desire to please or yield to orders and instructions.

As a rule, these persons do not have any initiative, cannot sit still, try to occupy themselves with activities, cannot assert their rights or interests, are fearful of turning people against them, and are easily influenced. This may also manifest itself in worry or signs of discomfort, frequent complaining, low self-esteem, a lack of self-determination, or a refusal or reluctance to accept assistance or advice.

Independence may be fostered through undertaking small tasks and setting limited goals. One of the essential aspects of working with trafficked persons is to reassure them of their abilities and capacity.
Self-blame is a common reaction to the trafficking experience where the victim accuses themselves of being gullible and foolish for not heeding the warnings and advice of those close to them and using illegal routes (border crossing, recruitment).

It is important to let trafficked persons know that what happened to them was not their fault. It is useful to point out that trafficking is a criminal act that happens to many others around the world. The importance of a creative and brave way out of the situation should also be emphasised.

Mistrust of self can be perceived in the victim by presence of low self-esteem, passivity, dwindling interest, difficulty planning for the future, difficulty making decisions or making changes (for example, to their appearance, living conditions, private life), hypersensitivity or hyper-responsiveness to others and outside influences, negative reaction to criticism, preference for wearing dark colours, a simple haircut, a wry look, slow movements, and indifference to appearance and untidiness.

In such cases it is important to reassure the person of their own abilities and capacity through validating their achievements and strengths.

Shock. A person is not capable of expressing their emotions, encounters difficulties associated with focusing, recounting the events, disorientation, an inability to think soundly or make decisions. A congenial atmosphere should be built in order to instil a sense of protection and allow the person to recover.

Betrayal. Trafficked persons may feel resentful towards the people who introduced them to the traffickers, the relatives who did not give a hand with problem solution or incited them to choose the path which led to victimisation, or the state which did not provide a decent and safe life, and god (if they are religious). These persons are characterised by limited interaction, hostility, nervousness, inclination towards criticism. The main solution is to restore trust in others, which is time-consuming (it may stay with the person for months, years, and sometimes is even lifelong).

Typical features of victims of domestic violence and human trafficking

The abovementioned emotional and behavioural reactions are also typical for victims of domestic violence. There are some common features in the rehabilitation of victims of human trafficking and those whom have suffered domestic violence. In both cases a traumatising event was committed, resulting in psychological disorders and degrading the honour and dignity of the individual; the severity of which will vary depending on duration, frequency, recurrence, the degree of the shock sustained and the psychological tenacity of the victim.

Although the structures of these two types of rehabilitation programme are not the same, they are similar in many ways. The nature of the two crimes is very different. Human trafficking is a breach of human rights through exploitation (perpetrators derive material benefits). Domestic violence is a consequence of violation of coexistence rules or ethical norms. In many countries, these crimes incur two different types of responsibility - criminal and administrative. The legal assistance context differs accordingly.

Often non-governmental organisations provide “shelter” or “temporary shelter” services to both women who are victims of trafficking in human beings and to victims of domestic violence. Observations show that often persons who have suffered the hardship of trafficking have also been previously exposed to domestic violence. This factor often results in repeatedly accepting risky proposals and the formation of a certain pattern of behaviour.
We have to remember that the risk posed by human traffickers exists for both groups and this violates the “safety” principle of shelter. On the other hand, victims of domestic violence fall into a high-risk group, susceptible to falling victim to trafficking. Therefore, it is very important to carry out preventive work with clients who fall under this category.

Rehabilitation of two different groups of victims depends upon the current legislation and capacity of the organisation. The quality of the services received by victims is directly proportional to the level of active policy on fighting human trafficking and domestic violence.

2.3 Needs assessment and assistance plan. Case management

One of the important elements of effective work with the victim is the quality and full assessment of his or her needs in order to help provide them with better services.

Needs assessment - is the process of collection, generalisation and analysis of information about the situation and living conditions of the client by the social worker in order to determine the types and quantity of the services necessary, and their impact on alleviating the hardship encountered by the person.

Data collection for situational and needs assessment can be carried out through the following methods:

- Conversation (communication with the client, including his/her family members and people close to the client);
- Survey (responses given by the client), filling out the questionnaire;
- Observation (assessing the behaviour of an individual directly through listening and observing);
- Social monitoring (a system of actions oriented towards exploring the victim's living conditions through analysis and control);
- Testing;
- Review and careful examination of the documents and official requests made by law enforcement agencies and executive bodies.

At the initial stage, when the victim applies directly to the social partners of the shelter, the preliminary needs assessment is carried out. Subsequently, the needs assessment is deepened through comprehensive situational analysis.
A detailed needs assessment is carried out by a social worker, more specifically the case manager assigned to the case during the staff meeting. Based on close examination of the situation and the needs of the victim, the social worker determines the necessity for and scale of involvement of specialists and agencies to provide specialised services and adds this information to the form.\(^\text{16}\)

The case manager (social worker) can refer back to the initial assessment several times during the interim stages of the reintegration process. It is important to remember that in some cases the victims may feel the easy and accessible way to getting assistance is to discontinue the initiative in order to resume life in their own right and receive social healing. They may discover that they have new problems and need further assistance from the shelter, which results in the delaying for an indefinite period the start of their independent life.

In social work these clients are described as “stuck”. They regularly require other kinds of services unrelated to human trafficking. Therefore, social workers should be able to distinguish between the actual needs of the client and cases where the victim is not willing to play an active part.

It should be emphasised that victims of human trafficking stand in need of all-encompassing assistance. The effectivity of such assistance builds upon a multidimensional approach.

**Assistance plan**

The reintegration service for the victims is specified following the needs assessment and established by the designated professional/social worker in an individual case plan. All services, from the first meeting to implementation of the rehabilitation plan, are reflected in the individual case plan in compliance with periodic monitoring and assessment. In social work this approach is called “case management”.

All aspects of work with the victim depend on their age, gender, type, condition and the period of exploitation which they suffered. However, some basic needs are common. The following essential needs can be listed:

- Provision of basic necessities (clothing, food, safe place of residence);
- Restoration of physical health;
- Development and formation of social skills, fostering a level of independence;
- Support for the victim’s psychological stability and their behaviour in daily life;
- Strengthening/restoring family relationships and other important ties;
- Analysis of welfare, determining the main problems and the solutions to these problems, elaborating the case plan to lift the victim out of hardship;
- Providing the victim with information on one’s rights and their enjoyment of those rights;
- Protection and restoration of one’s rights and interests;
- Preparation of documents, registration of place of residence/stay;

\(^{16}\) See Annexes 7 and 8, “Initial assessment” and “Individual action plan”.
• Provision of safe accommodation for temporary stay;
• Building for the future, general and vocational education for finding employment;
• Employment.

The following are included in the comprehensive assistance programme of the shelter:

- **Medical assistance** includes comprehensive medical examination, treatment and observation by specialists. The shelter arranges all medical services, from the medical examination to the full recovery of the victim.

Medical services are provided at medical facilities. Social collaboration and teamwork among shelter staff and medical staff at regional facilities play a key role. Medical staff should be aware of the human trafficking problem and follow ethical rules and confidentiality principles when working with trafficking victims. Only trust-based relationships and high-standard professionalism should stand at the core of a victim’s recovery.

When coordinating activities with specialists, shelter staff must before all else attach importance to the physical and psychological health of the victim. This is a basic need and a starting point for the recovery process.

- **Psychological assistance** includes psychological consultation and emotional support to the victim. If psychiatric disorders are identified, the psychologist plans the meetings and activities with the victim. Sometimes psychological assistance does not lead to improvement of the victim’s psycho-emotional state; in this case the psychologist refers the client to psychotherapeutic assistance. The decision on the referral is made at the next team meeting following identification of this by the psychologist.

Establishment of peer support groups among the trafficking victims at the shelter is a rather successful practice that can be effectively carried out by the psychologist. The psychologist provides the informational resources for the group and also takes control of and coordinates the emotional opening up of the victims.

The main goal of psychological assistance is to alleviate the moral tension and emotional shock caused by the traumatic experience of human trafficking, thereby supporting the recovery process. The psychologist designs the consultation and observation form enabling follow-up on the victim’s progress through compulsory services.17

- **Social-pedagogical assistance** covers the restoration of social ties (primarily connections with family, people close to the victim), the victim’s return to socialising in a safe environment, professional self-realisation, supporting the solution of problems related to children’s education, etc. Needs assessments also consider whether a safe social environment for the victim can be used as a tool for such rehabilitation.

It is not uncommon to fear shunning or rejection by one’s family, as the victim may blame themselves for what happened. The social worker’s task is to study the social

17 See Annex 9 “Provision of psychological assistance”
environment of the victim to assess the likelihood of further traumatisation, including elimination of misunderstandings and stereotypes, as well as carrying out informational-pedagogical work with both the victim and their social environment in order to lay the ground for normal relationships.

- **Work with the victim’s family** is an integral part of rehabilitation services as the pace and progress of the victim’s social rehabilitation is closely linked to social support. Family and people close to the victim have a considerable impact on the rehabilitation process.

In some cases the social worker can use cultural mediators in social work. Representatives of ethnic groups can be involved in the rehabilitation process, including foreigners and stateless persons. Cultural mediators should have sufficient knowledge and skills to facilitate the reestablishment of lost connections in respect to the cultural heritage and social environment of the victim. Working with clients who fall into this category requires additional effort from the experts working in the shelter. A detailed overview of this is given in a section 2.7 of this manual.

- **Legal assistance** includes protection by law enforcement agencies concerning criminal proceedings, representing the victim’s interests in all trafficking cases, retrieval of lost documents, verification of identity (where foreigners or stateless persons are concerned), legal consulting, filling in the claim form for compensation for material and moral harm suffered, restitution of property rights and registration, custody of children (or restitution of custody), representing the interests of the children in court, restitution of rights to property and education of minors.

These types of services can be provided jointly by the lawyer, the social worker-case manager within the shelter and representatives of law enforcement agencies (operations attorney and/or investigator), which requires the teamwork of the aforementioned parties. The shelter lawyer assists the victim in receiving social aid, assistance or other kinds of contributory social benefits (financial assistance associated with the status of the victim is provided independently) pursuant to the current legislation of the Azerbaijan Republic.

One of the complicated but instrumental parts of legal assistance is to facilitate the return of the trafficking victim to the country of origin through the issuing of a temporary residence permit (for foreigners and stateless persons) and rebuilding their connection with the relevant country. The legislation of the Azerbaijan Republic envisages an attorney for the foreigner free of charge. Nevertheless, attorneys need special training to carry out the work with the victim. Solely the shelter lawyer has the capacity to control the relevant activities and provide legal assistance for victims who fall under this category.

- **Finding the family of a child victim of trafficking** or putting those affected children up for adoption in accordance with legislation, other forms of childrearing and guidance are forms of synergy activities implemented jointly by social pedagogues with representatives of the executive committee. In the case that the parents (or guardians or custodians) are involved in the trafficking, the child is taken from the parents and at least one of the parents is deprived of parental rights.

The shelter lawyer records all the services deemed necessary as well as those services already provided in a special journal, which enables periodic monitoring of the quality of services and follow-up on progress made. The lawyer also prepares the forms of
agreement and obligations within their competences and establishes the house rules with the condition that these rules are not contrary to the national norms. The provision of legal assistance serves to protect the entitlements of those whom have had their rights violated and normalisation of their life in compliance with local and international normative acts.

- **Financial assistance** is foreseen in the legislation of the Azerbaijan Republic. It is meant to cover costs related to transportation, food, clothing, communication, etc.

  Assistance in receiving a lump sum allowance requires special sensitisation of the victim. In most cases victims presume they can use this assistance according to their own wishes. However the relevant assistance is made available to the victim in order to obtain necessary services (for instance, to procure warm clothes for a victim who has just returned from a hot climate, pay for medical services, or cover the cost of transferring the victim to a safer environment) and designation of the assistance should be communicated to the victim.

- **Assistance with changing occupation or raising qualifications.** Support in finding employment or setting up a new small business enables the professional self-realisation of the victim in society. Economic independence, especially for men, means searching for opportunities to earn money. In many cases a step in this realm is skilfully used by criminals. Any rehabilitation plan should include a series of activities aimed at professional self-realisation to prevent the victim from falling into the human trafficking network.

  It is possible to cooperate with social partners on job placement and the obtaining of new, job-related skills, as well as offer opportunities to the victim in the shelter to obtain professional skills and knowledge.

  There are successful examples of starting social enterprises. This could be a tailor’s shop, a souvenir shop, or a small bakery or farm. The profit gained from the sale of products can be channelled toward development of the services in the shelter. Professional skills received in the shelter enable the securing of employment at the next stage. Therefore, local labour market requirements should be taken into account and opportunities should be created which enable the victim to obtain professional skills.

- **Support with reinsertion into school or schooling** is a form of assistance for child victims in the shelter. Mostly this type of service is also applied to adults.

  Providing access to education is an effective way of meeting basic needs and of positive socialisation. Through being in contact with other children and during the education process a child develops a feeling of “being like other kids”. Employing training in the form of various games helps children to easily adapt to their new social environment. Educational facilities also have support resources, namely child psychologists who pave the way for this process. They can be involved in the rehabilitation process of children in need of special forms of support.

  Adult victims with children should be given special care during the support process. Types of necessary services for persons in this category are determined in view of the

---

18 See Annexes 10 and 11, “Shelter agreement”, “Obligations for admission to the shelter”. 
role of the father or mother, and the needs of the child in their custody. Persons kept away from family members and held captive in a trafficking situation may require the service of restoration of parental rights. Social pedagogues or the shelter expert should be well prepared to hold pedagogical trainings for victims who are parents, aimed at resuming contact with their children. In this regard, it would be advisable to employ joint creative laboratories with art therapy elements.

Given the different context of events experienced by women, men and children in trafficking situations, it is important to take their individual needs into account while working with them.

2.4 Special needs of female victims of human trafficking

Two of the most widely recognised forms of exploitation of women in a trafficking situation are labour and sexual exploitation. The negative effects of the events on the psychological and physical well-being of women victims should be taken into account while working with them.

Women who have suffered sexual exploitation may be subject to feelings of shame, embarrassment, profound guilt or desperation. One of the perpetuated stereotypes is that these women are prostitutes who get enjoyment and lots of money as a result of their activities. Therefore victims need support to wipe out such misunderstandings and conflicts in their relations with others, attain adequate self-assessment and regain control over their private life.

Adherence to the principles of a tolerant relationship and the confidentiality of support merits special consideration, otherwise this may lead to serious implications. Also, it should be noted that often a victim's health deteriorates over time (some will also be HIV/AIDS positive) and they may become addicted to drugs. Provision of professional medical care, including medical-social services (preventive measures intervention and treatment, advice on how to protect and improve their health, maintenance of health and a healthy lifestyle, elimination of harmful habits), is essential to caring for such persons.

2.5 Special needs of male victims of human trafficking

It should be noted that men subjected to human trafficking normally do not identify themselves as victims due to their gender, and tend to avoid asking for help as they believe this humiliates or degrades their personality. Practice has shown that hiding their psychical and psychological pain consciously and subconsciously over the journey and a tendency to forget the exploitative situation and insults are typical traits of men who have been trafficked.

Keeping in mind that these persons are often forced to undertake heavy physical jobs in parallel to being exposed to violations of workplace safety regulations and a lack of protection and subsistence, they need to undergo a medical examination and receive treatment. This is necessary also for many other reasons, as they know that deteriorated health may impede them from finding employment and fulfilling their role as breadwinner. They are aware of the fact that a worsening of their health may have real consequences for their family. Through having to deal with such thoughts, they may lose confidence in themselves and their personal capacity.
Most often male victims are shown a negligent attitude by their family or the people around them. Despite the need for professional psychological assistance, only a handful of them will perceive this reality. Male victims tend to isolate or ostracise themselves from society and not get in contact with people “similar” to them. Therefore, building mutual support groups is one of the key aspects of social assistance for men.

As one of the main push factors towards human trafficking is the lack of a family income, rehabilitation for men should therefore include acquiring qualifications and job placement. A majority of men who are trafficked are searching for opportunities to repay loans or support their family.

2.6 Characteristics of support to child victims of human trafficking

Depending on the form of exploitation, many child victims of human trafficking will have health problems that make emergency and psychological assistance (in some cases psychiatric assistance) inevitable. Provision of support activities to child victims is only possible in the stages which follow once these problems have been eliminated.

It should be noted that children who have been living on the street for a long time or have been kept locked up, or whom have been malnourished or have abused drugs may face physical disorders, mental retardation, problems related to dysfunction of cognitive skills (difficulty in decision making), speech disorder, deviant behaviour, etc.

Article 35 - Interviews with the child of the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse reads as follows:

1. Each Party shall take the necessary legislative or other measures to ensure that:
   a. interviews with the child take place without unjustified delay after the facts have been reported to the competent authorities;
   b. interviews with the child take place, where necessary, in premises designed or adapted for this purpose;
   c. interviews with the child are carried out by professionals trained for this purpose;
   d. the same persons, if possible and where appropriate, conduct all interviews with the child;
   e. the number of interviews is as limited as possible and in so far as strictly necessary for the purpose of criminal proceedings;
   f. the child may be accompanied by his or her legal representative or, where appropriate, an adult of his or her choice, unless a reasoned decision has been made to the contrary in respect of that person.

2. Each Party shall take the necessary legislative or other measures to ensure that all interviews with the victim or, where appropriate, those with a child witness, may be videotaped and that these videotaped interviews may be accepted as evidence during the court proceedings, according to the rules provided by its internal law.
3. When the age of the victim is uncertain and there are reasons to believe that the victim is a child, the measures established in paragraphs 1 and 2 shall be applied pending verification of his or her age.

Adoption of a child by a family (or people close to them or a guardian) or a child-friendly organisation is a crucial element of an effective rehabilitation programme.

The building of a positive family environment among young adults subjected to sexual exploitation is also of immense importance. The children need to learn to be confident in themselves as well as others, build positive relationships and avoid manipulation.

2.7 Reintegration of foreign or stateless victims of human trafficking

As mentioned in previous sections the number of stateless persons or foreigners using “shelter” or “temporary stay” services is not small. Working with these people requires special skills, especially knowledge of foreign languages. In addition, wherever available, it is useful to employ interpreters or experts as cultural mediators taking cultural, religious and other aspects into account. They will possess the necessary knowledge about a victim’s living environment which allows them to steer away from unprofessional behaviour. Anthropocentrism is viewed as a main principle as it implies that all the activities of the shelter are focused on attending to the individual needs of the client for the purpose of rehabilitation.

Rehabilitation of foreigners or stateless persons who are the victims of human trafficking is complex in nature, as it has elements of uncertainty. How long can the victim stay in the destination country? Who will decide his/her future? How will they decide this? These open questions occur quite often. Therefore, it is necessary to direct the focus towards the victim regaining lost strength with the help of “here and now” technique.

In parallel, similar organisations or shelters should be sought in the victim’s country of origin in order for him/her to continue the shelter type of rehabilitation programme. Arrangement of a meeting, discussion of the support necessary or that already provided, and the tracing of family members and relatives are the subjects of the communication activity centred on assistance to the victim.

The shelter lawyer should provide assistance in confirmation of the identity, retrieval of lost documents, and return of the victim to the country of origin. Safety and willingness to return to the country of origin should be taken into account. It is essential to defend the victim by acting in their best interests, which sometimes raises questions: for instance, with regard to illegal border crossing or engagement of the victim in the perpetration of the crime. In this case, the lawyer is bound to prove in accordance with local and international norms the innocence of the human trafficking victim, whose actions have been undertaken whilst being subjected to coercion, death threats, or other risks.

Transit shelters exist in the countries where vast movement of victims of transnational human trafficking takes place. These shelters accommodate foreigners and stateless persons for a certain period of time before they return to their countries of origin.

As is obvious from the above points, working with victims of human trafficking is a long and complex process which requires the expert to monitor the victim’s feelings and emotions. Having an understanding of possible psychological reactions and behaviours on the part of the victim helps to avoid difficulties, conflicts and prevent continuous dependence of the victims on the shelter’s rehabilitation services.
3

SHELTER STAFF

3.1 Core staff and their functions

The composition of the staff working in each shelter will vary according to the overall needs and resources of the particular shelter. In order to determine the most appropriate composition and number of shelter staff, the following should be taken into consideration:

- Maximum number of residents to be assisted;
- Range of services offered by the shelter;
- Maximum duration of stay at the shelter.

In the case that the shelter provides in-patient services along with day-care services, some other factors should also be taken into account.

The classic model of the shelter encompasses the following:

1. Shelter (accommodation and food);
2. Psychological assistance;
3. Legal assistance;
4. Social-pedagogical services (including escorting);
5. Short-term training courses on job-related skills.

All shelter staff should be given specialised trainings on human trafficking, victims of THB, and the characteristics of working with female, male, child victims in view of national and international approaches establishing the standards of reintegration services for victims of trafficking.

Each social worker can provide services to up to 8 adults or 6 minors at any given time. A lawyer can provide counselling to up to 10 persons and a psychologist can assist 8-10 adults or 4-6 children at the same time.

The shelter manager oversees all financial-administrative operations. Shelter staff should also include a supervisor to provide general supervision and play a leading role in professional support to staff. The manager assigns a supervisor to ensure the effectiveness of shelter activities. An experienced social worker can also work as a supervisor.
The job descriptions of shelter staff can be classified in four groups:

- Direct counselling and/or psychological assistance;
- Shelter management;
- Procurement and financial oversight;
- Supervision and general care of residents excluding counselling services.

The duties of the shelter manager are as follows:

1. Coordinate hiring of shelter staff, staff roster and staff performance;
2. Decide on client intake and departure;
3. Maintain internal and external safety and security systems;
4. Ensure that services and written records are kept confidential;
5. Monitor the administrative system, guide and direct staff and residents;
6. Participate in training and supporting staff;
7. Arrange and chair weekly staff meetings;
8. Do strategic planning, liaise with social partners and donors;
9. Ensure personal education and safety;
10. Supervise and be accountable for financial and material resources.

The social worker/counsellor should do the following:

1. Conduct first meeting with the client and start the case;
2. Carry out initial and post evaluation of the situation and the client's needs;
3. Develop an individual rehabilitation plan and present it for approval at the staff meeting;
4. Liaise with experts/counsellors according to the rehabilitation plan and needs assessment;
5. Provide necessary information;
6. Provide general supervision and emotional support;
7. Monitor the services according to individual plans;
8. Accompany residents to appointments with service providers and ensure safety;
9. Build rapport with the client in order to strengthen their social environment;
10. Provide appropriate follow-up after the resident's departure from the shelter;
11. Execute documentation and filing, ensure confidentiality of the case and written records and their maintenance;
12. Attend weekly staff meetings and participate actively in supervision;
13. Ensure personal safety and professional competence.
The social pedagogue as a key staff member fulfils the following functions alongside providing social-pedagogical services for children and teenagers:

1. Analytical-diagnostic;
2. Prognostic;
3. Organisational-communicative;
4. Corrective;
5. Coordinative-organisational;
6. Social-pedagogical assistance and support;
7. Protection;
8. Social-preventive;
9. Rehabilitation.

Psychologists working at the shelter should:

1. Assess the client’s psychological state;
2. Identify those clients who need psychotherapeutic assistance and in-patient treatment;
3. Ensure the client’s contact with a psychotherapist and oversee their recovery process;
4. Carry out all the necessary checks for situational analysis and planning of counselling;
5. Advise shelter staff on how to behave with residents;
6. Provide psychological assistance to clients;
7. Take part in discussion of individual plans;
8. Attend weekly staff meetings and case conferences;
9. Contribute to the professional enhancement of shelter staff through trainings;
10. Adhere to personal safety rules and those concerning clients.

Support personnel should:

1. Generally supervise and ensure that shelter residents comply with shelter rules and safety regulations;
2. Ensure compliance with sanitary-hygienic rules and norms in the shelter;
3. Supervise the daily schedule and use of the rooms and areas intended for all;
4. Manage financial resources to maintain sanitary rules in the shelter and provision of food to clients;
5. Notify the shelter manager of residents’ compliance with safety and behaviour rules;
6. Attend general staff meetings;
7. Ensure personal safety.
Staff meetings

The effectiveness of the work performed by shelter staff is highly dependent on compliance with established rules, and the sufficient supply of information related to each staff member even if this information contains details beyond the work context. Therefore staff meetings are crucial.

Meetings should be arranged in an order that defines the following:

- Purpose of the meeting;
- The frequency of organised meetings;
- How often staff members are to attend meetings;
- A moderator for the meeting (group leader or any other staff member).

Types of team meetings

1. Organisational-administrative team meetings. Presentation and discussion of current administrative issues; discussions on organisational issues;
2. Case conferences and discussion of work plan. Appointment of case managers;
3. Supportive team meetings. Discussion of current issues, especially difficult cases, providing feedback to case manager and showing emotional support.

3.2 Supervision as a management tool

Supervision is the general protection of the professional interests of client, staff, manager and organisation. The essence of supervision is compliance with standards.

The main focus of supervision is to help staff members to understand, analyse and comprehend their actions, their psychological standing and their working relationships.

Counselling through stating and explaining the problem and psychotherapy elements prevail in supervision. In this manner, concrete measures are taken to bring positive changes to staff performance. Supervision uses both methods in order to improve service provision.

Functions of supervision

1. Administrative. Maintenance of good standards of work according to the policy and practice of the organisation, setting priorities, division of workload, supervision of activities, defining of objectives and evaluation of the effectivity of completed activities.

Each employee is accountable to his or her manager. Each social worker reports to another social worker (to their supervisor, for instance), and each supervisor to the manager or another staff member accordingly. All employees are obliged to provide information on completed tasks, thus the managerial role implies overseeing the performance of other employees for the purposes of quality enhancement. The role of management is to ensure adherence to organisational policy and procedures, as well as best work practices.
A is a new employee. Their supervisor notes down the following during a conversation with A: “I know that you were very anxious in our initial orientation meeting on shelter policy and procedures. I would like to talk about how you can effectively carry out those tasks. In this session we will be specially dealing with notetaking. I would like to become familiar with how you develop a care plan and discuss with you the difficulties this may involve.”

2. Learning and development. Continued education and motivation of professional development in order to deal with activities more effectively and initiate new working opportunities in accordance with the changing needs of clients.

It is not possible to know all. Even when we are working with one subject for a very long time and believe that we are adept at it, we should keep in mind that there is always room for learning and improvement. Supervision can be useful for social workers to identify their training and educational needs.

Supervision should create for the social worker an environment conducive to identifying blind spots as well as discussing challenges encountered during the work process. The supervisor should assist the supervisee in finding out their strengths and weaknesses and thus identify their training needs. Additionally, a supervisor can directly share their knowledge with social workers during their sessions.

M is working with 14-year-old P who has been subjected to sexual exploitation. M tells his supervisor that he would like to improve the assistance given to P, however he lacks the necessary skills in working with victims who have suffered sexual exploitation. His supervisor contacts training centres to find a course for M. She also recommends to him useful books and internet links.

One of the functions of supervision is exchange of information and creating opportunities for training. This includes personal education and assistance centred on the professional development of the supervisee. The main priority of supervision is to identify needs for training. The role of supervisor here is to support the training through effective means.

3. Support is assistance given to staff to effectively cope with stress which emerges during the course of their work.

By offering practical and emotional support within the context of supervision supervisees should be given the opportunity to reflect on the impact of their work and the supervisor should provide practical tips on discussion and other training methods.

Emotional support is crucial, as each individual feels the need to talk about how she/he feels about a particular situation. Social work is not seen as an easy practice, it is a rather complex activity from the emotional and physical points of view. Social workers encounter problematic and difficult cases and situations, hence making it essential that they share their feelings with others.
B has been working at a support centre for victims of human trafficking for ten years. He seemed very angry during the supervision session today. When his supervisor asked him to explain why, he told him that he was both upset and resentful as one of his clients had many bruises and scars on her body. The client had been severely battered by her husband, yet still she was not willing to do anything about it. The supervisor decided that B should first talk about his feelings and that they should then discuss the protection procedure for the victim.

All functions of supervision are closely interlinked. It is impossible to effectively fulfil one function without using another. Supervision is a necessity!

Supervision procedures

Starting supervision

It is important to discuss the expectations of both the supervisor and supervisee during the initial meeting. A social worker in an entry position may not have any experience of supervision. Therefore, the supervisor should allot some time to explaining the expected results before supervision starts. Experienced employees may find it useful to analyse past experiences of supervision.

The supervision format

Each supervision session has a definite format; this feature distinguishes it from open conversations among staff members on professional topics. Supervision needs to conform to a specific structure, where use of consultation skills and observation of feedback principles are needed. Some people consider supervision a conversation among people, but it can also be conducted in different ways:

1. One-to-one: the manager or another experienced employee supervises one member of staff;
2. In pairs: the manager or another experienced employee supervises two members of staff at a time;
3. Peer-to-peer: two members of staff of equal status supervise each other;
4. Group: staff members of equal status receive supervision in a group.

Supervision takes place in group or individual format in order to achieve the intended targets. These meetings can be organised for a definite or indefinite period, on general or specific topics (planned supervision).

Supervision methods

Social practitioners should not feel anxious or fearful about supervision. This should serve as a motivation for the employee. Supervisors should always seek ways to improve their supervision style, and use different methods during supervision.
Modes of supervision

**Intervention**
The supervisor can directly or indirectly intervene in the conversation through the following methods:

- Instructive: provide advice and instructions;
- Informative: give information;
- Reaction: provide feedback.

**Mediator**
The supervisor during assessment of the supervisee's capacity should:

- Motivate them to express their feelings;
- Motivate reflection and decision-making;
- Give support to enhance their knowledge.

Detailed information on supervision tools, including the “preparation for supervision” form is given in Annex 13.

3.3 Professional burnout syndrome

Burnout is a state of physical, emotional and mental exhaustion (gradual loss of idealism, energy, experience, feelings) caused by involvement in professions involving the provision of assistance to others. A non-exhaustive list of influencing factors would include not having sufficient training to do the job, a heavy workload, low salary, red tape, unhappy clients, etc.

"Burnout" (emotional exhaustion) as a definition was coined by American psychiatrist Herbert Freudenberger in 1974. He described the psychological state of healthy individuals during the process of assisting clients in an emotionally demanding situation. According to Freudenberger, burnout in social practitioners is energy depletion as a result of excessive overloading with the problems of others.

**Emotional symptoms:**

- Aloofness;
- Emotional depletion;
- Feeling “empty” or “down” (cannot be get into gear as before);
- Dehumanisation (development of hostile behaviour towards colleagues or clients);
- Negative perception of their professional level (a sense of having insufficient professional skills).
Physical symptoms:

- Fatigue and feeling physically drained;
- Chronic exhaustion;
- Headaches;
- Oversensitivity to external factors;
- Swings in arterial pressure;
- Impotence, helplessness;
- Neck problems, back pain;
- Involuntary or reflexive movements - fist clenching, crossing one’s arms;
- Weight gain or loss;
- Shortness of breath;
- Insomnia;
- Sexual dysfunction.

Emotional symptoms:

- Lack of emotions;
- Pessimism and decreased involvement with others;
- Tiredness and detachment;
- Depressed mood, a sense of powerlessness, hopelessness;
- Anger, aggression;
- Anxiety, irrational increased excitement, loss of ability to concentrate;
- Depression, guilt;
- Nervous tics, hysteria, mental suffering;
- Loss of ideals, hopes or professional prospects;
- Increased depersonification (persons become faceless like mannequins);
- Isolation.

Behavioural symptoms:

- Working more than 45 hours a week;
- Tiredness during work, stopping work in the middle of a shift, a wish to go on holidays;
- Loss of appetite;
- Low level of activity;
- Justification of smoking, drug abuse;
- Accidents (for instance, injury, falls, incidents, etc.);
- Impulsive emotional behaviour.
Intellectual symptoms:

- Decreased interest in new theories or ideas at work;
- Lack of interest in alternative solutions to problems;
- Increased sadness, lack of enthusiasm, interest or determination;
- Preference for standard templates, old methods;
- Disinterest towards innovations;
- Low participation or refusal to attend capacity building trainings;
- Formal work execution.

Social symptoms:

- Lack of time or energy for social activities;
- Low interest in planning leisure time or hobbies;
- Restriction of social relationships during work;
- Limited relations with others both during their work and in the workplace generally;
- Isolation, inability to understand others or feeling that others are withdrawing from them;
- Feeling support offered by family, friends or colleagues to be insufficient.

**Burnout builds up over time:** The first stage continues for 3-5 years, the second stage lasts 5-15 years, and the third stage lasts for 10-20 years. It can escalate chronically and lead to new disorders.

**How to prevent “burnout in the workplace” syndrome:**

1. Love yourself;
2. Be attentive to yourself, this will help to spot the first symptoms of fatigue;
3. Recognise the problem;
4. Stop looking for happiness or salvation in the workplace;
5. Balance your lifestyle;
6. Stop living others’ life. Live your life. Do not live for others but together with them;
7. If you want to help others, first ask yourself: Do they need it right now, urgently?; Maybe they can cope by themselves?;
8. Plan your day;
9. Take time off. Using the time away to recharge your batteries is useful for psychological and physical health.
10. Learn how to handle your emotions;
11. Try to avoid a feeling of failure, increase your self-efficacy;
12. Smile, even if you do not feel like it;
13. Aim to exercise for 30 minutes or more per day;
14. Learn how to say “NO”;
15. Take vitamin E supplements or other healthy foodstuffs.

Regular supervision helps avoid burnout!
The Referral System or the National Referral Mechanism to Victims of Human Trafficking involves not only the agencies coordinating the anti-trafficking response, but also the competent state authorities and organisations that provide comprehensive assistance to victims of human trafficking on the national and regional levels.

The main objective of the National Referral Mechanism for victims of human trafficking is foremost to ensure the availability of an overarching assistance system to persons affected by human trafficking in accordance with national and international standards. The decision of the Cabinet of Ministers of Azerbaijan dated 23 September 2009 stipulates the interagency joint action mechanism among central executive authorities (or their structural units) for providing assistance to victims of human trafficking.

It is important to engage non-governmental organisations in activities envisaged by the National Referral Mechanism. The scale of cooperation among public and private organisations defines the level of efficiency in identification of victims of human trafficking and provision of quality services.

International and national practice shows that support given to non-governmental organisations by the state in the provision of comprehensive assistance to victims of human trafficking enables not only enhancement of the quality of the social assistance and services provided, but also the establishment on a new level among national actors of a joint cooperation policy on the fight against human trafficking.

Such joint activities are based on the following principles:

- A **multidisciplinary approach** in dealing with issues related to supporting victims of human trafficking;
- **Close cooperation** among state agencies, public and international organisations;
- **Mutual exchange of information** in adherence with the principle of confidentiality;
- **Detailed division** of responsibilities and tasks;
- **Consistency and coordination** of all activities;
- **Exchange** of information and experiences.
The assistance mechanism for victims of human trafficking is underpinned by the following principles:

- A commitment to protect the basic rights and freedoms of those who have fallen victim to trafficking, and to act in order to achieve respect for and protection of the human dignity and well-being of the victim, provision of legal assistance, compensation for material and moral loss as established by legislation;
- The victim’s best interests should always prevail;
- Ensuring the provision of the best possible assistance to victims of trafficking without discrimination on the basis of race, gender, colour, sexual orientation, religion, political beliefs, social class, place of residence, status of property or any other status;
- All information regarding the victim must be treated with due regard for the victim’s right to confidentiality and privacy;
- All services to trafficking victims are provided on the basis of the informed consent of the victim;
- Assistance should be accessible and free of charge.

With the aim of efficient assistance and protection of victims of human trafficking the service delivery organisations within the National Referral Mechanism should take into account the age, health status, gender and special needs of victims.

The unique role of non-governmental organisations makes their involvement important at each stage of providing assistance to victims of trafficking. A shelter arrangement is one of the important yet difficult models of assistance to victims of human trafficking. Establishment of shelters under non-governmental organisations and their activities enables full-scale support to victims of human trafficking. The next significant step of cooperation that can be made in this area is implementation of a social order from the government by experienced non-governmental organisations.

**Cooperation among shelters/assistance centres and law enforcement bodies**

The *National Action Plan Against Trafficking in Human Beings in the Republic of Azerbaijan* was adopted by Decree of the President of the Republic of Azerbaijan dated 6 May 2004 in accordance with the provisions of the UN Convention Against Transnational Organized Crime and its supplementary Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, signed by the Azerbaijan Republic on 12 December 2000 and ratified on 13 May 2003, as well as those of the Brussels Declaration on Preventing and Combating Trafficking in Human Beings adopted on 20 September 2002.

According to the Action Plan, the Deputy Minister of Internal Affairs of the Republic of Azerbaijan has been appointed as the **National Coordinator** by the order of the Ministry of Internal Affairs dated 19 May 2004 and the **Main Department on Combating Trafficking in Human Beings** has been established in the Ministry of Internal Affairs.

The Main Department on Combating Trafficking in Human Beings is a special task unit carrying out operative and investigative activities and the functions of investigative body in order to prevent and fight against trafficking in human beings, which degrades human dignity and honour, and protect the victims of trafficking, and defend their human and civil rights and freedoms from criminal interference in line with the Constitution and laws of the Azerbaijan Republic and the international agreements Azerbaijan is a party to.
As a coordinating body for a helpline, safe shelter and co-operation with non-governmental organisations, the unit carries out the following duties and functions:

- Exposure of trafficking in human beings and children, their illegal export from the country, involvement in forced labour, white slavery, and other crimes determined by the legislation;
- Taking measures for recovery of damages for criminal acts;
- Collection and storage of information about human trafficking crimes in a single database;
- Prevention and exposure of human trafficking, identification of the persons organising and committing such crimes, the protection of the life, health, rights and freedoms of victims or presumed victims of human trafficking;
- Taking measures for the protection of victims during the period before their repatriation and reintegration into society;
- Placement of victims or presumed victims in safe and secure shelters and ensuring the protection of both the shelters and their residents;
- Maintaining contact with victims or presumed victims of human trafficking, and providing professional aid to them;
- Initial investigation into the cases of victims or presumed victims in safe shelter (if necessary, in the presence of persons providing legal assistance);
- Taking corresponding measures for the purposes of enlightening the community to the dangers of human trafficking and illegal migration;
- Prevention and registration of transnational, interregional human trafficking based on international conventions and agreements and cooperation with international organisations and the police agencies of foreign countries on the exchange of information and experience.19

Cooperation with law enforcement bodies is an important line of activities of non-governmental organisations. A cohesive system of cooperation among institutions based on the directions stated below increases the efficiency of these activities.

- **Statistical data exchange on human trafficking cases**

Both service delivery organisations and law enforcement agencies conduct proactive work among various population groups which allows them to receive immediate information on trafficking cases. Crime can be exposed during the de facto preparation or implementation stages.

In either case, both law enforcement bodies and support/shelter centres should strive for information exchange on trends, areas, and the possible risks of crime for planning.

---

19 Regulation on the Main Department on Combating Trafficking in Human Beings at the Ministry of Internal Affairs, http://mia.gov.az/?en/content/153/
and elaboration of a new action plan within their competences. A memorandum of understanding on cooperation defining the frame of obligations for both parties guarantees a safe environment and transparency in mutual relations.

• Nothing matters more than safety

Considering the criminal nature of human trafficking cases and other concurrent criminal acts (rape, serious bodily injury, kidnapping, handling and use of arms or drugs), shelter staff should go to any length to ensure the safety of victims of trafficking and their fellow co-workers.

Notification of law enforcement bodies in cases of imminent danger and implementation of protection measures for victims and crime witnesses should be undertaken immediately. If the victim is a child, the relevant measures shall not be subject to discussion with the victim and should be at all times implemented in line with the best interests of the child.

It is practical to officially cooperate in the provision of security measures in the shelter. Although the external facade of the shelter doesn’t have any distinguishing signs, traffickers or other interested parties may opt to enter the area of the shelter in order to influence or oust the victims or persons testifying against them.

• Joint needs assessment and coordination of legal assistance to victims of human trafficking

The entitlement to legal assistance and redress is a vital part of the comprehensive assistance package. Therefore it is paramount for law enforcement entities to attend meetings where the needs and reintegration plan of victims of human trafficking are discussed. Both the social worker and the representative of the law-enforcement agency should regularly carry out information exchange on the implementation status of the reintegration measures and the “legal part” of the assistance plan.

In this case, shelter staff should act as a link between law-enforcement agencies and the victim in terms of social protection and the necessary investigation, including psychological preparation of the victim for appearing in court.

• Joint trainings and enhancement of qualifications

Effective cooperation develops among those partners who have been co-trained and acquired knowledge as a result. Speaking a common language, they easily interact. Both law-enforcement agencies and non-governmental organisations should be interested in information exchange in order to increase the efficiency of services. An interagency approach to organising joint trainings fosters cultivation of understanding about the job description of social partners and the development of new professional skills aimed at quality enhancement of the services for victims of human trafficking.
There are numerous positive examples of co-trainings and coordination meetings among non-governmental organisations and law-enforcement bodies in international practice.

For instance, a shelter staff member (e.g. a psychologist) may be involved in expert evaluation arranged by a court or investigative body on the post-traumatic psychological state of the victim exposed to exploitation or different forms of violence.

Where a child is concerned, the shelter pedagogue or psychologist can attend the interview or face-to-face meetings under an order stipulated in the Civil Procedure Code. Shelter staff are trained to a high level and they have the necessary expertise. This factor plays a pivotal role in disclosure of crimes and taking punitive action against perpetrators.

Given the importance and responsibility of quality assistance to victims of human trafficking, cooperation with law enforcement bodies is instrumental. A victim placed in safe shelter and provided with cohesive assistance feels more confident and tends to cooperate with operation staff or the investigating officer more openly and without overly disguising their words.

According to international practice and norms, the trafficking victim chooses the form of contact or cooperation with law enforcement bodies on a voluntary basis. In international practice victims are allowed a 30-day reflection period counted from the date of the victim’s identification before making a final decision on cooperation with law enforcement bodies.

Victims are entitled to legal redress for the crimes committed against them. In addition, they are granted material aid to meet their subsistence needs or the needs of their family during the reintegration period according to the legislation of the Azerbaijan Republic.

There are risks involved with the confidentiality of victims of THB (and witnesses) and the maintenance of trial secrets during crime prosecution. Therefore shelter staff should be knowledgeable about the competences of the shelter and law enforcement agencies.

Shelter staff (or other relevant partners) should inform trafficking victims and witnesses of their right to receive legal assistance in a comprehensible manner, as well as potential threats against the victims or their families by perpetrators or persons associated with them. The key issue in the decision-making process is an informed decision made by the trafficking victims on the subsequent steps or actions to be taken.


8. UN Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery, Volume 266, No. 3822, http://www.refworld.org/docid/58c156dc4.html


<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>18.</td>
<td>Regulation on the Main Department on Combating Trafficking in Human Beings at the Ministry of Internal Affairs, <a href="http://www.mia.gov.az/?/en/content/153/">http://www.mia.gov.az/?/en/content/153/</a></td>
</tr>
<tr>
<td>19.</td>
<td>Decision No. 131 of the Cabinet of Ministers of the Republic of Azerbaijan dated 3 September 2009 on Identification rules and indicators of victims of trafficking in human beings,</td>
</tr>
<tr>
<td>20.</td>
<td>Ethical and safety recommendations of the WHO for interviewing trafficked women <a href="http://www.refworld.org/docid/40360a984.html">http://www.refworld.org/docid/40360a984.html</a></td>
</tr>
</tbody>
</table>
INTRODUCTION

“Do you feel ready to respond to questions related to your situation? Our conversation is strictly confidential.”

Yes

1st step (1st side)

“If you have any doubts, I am ready to answer your questions.”

Yes

2nd step

“You have jotted down indicators of human trafficking. The State provides assistance to victims of trafficking.”

No

2nd step

“Are you refusing because of concerns over your safety?”

No

3rd step (2nd side)

“I can assist you in finding a safe place in the shelter.”

Yes

3rd step

Referral to a shelter

No

3rd step

“Feel free to contact me anytime. These are my contact details. Thank you for talking to me.”

Yes

No

(in the case that no notes are made)

“Thank you for consenting to this talk!”

No

Yes

Yes

Yes

Yes

Yes
Checklist for victims of human trafficking

1st side

(Please read carefully and mark the actions that took place in your case)

- Agreeing to work under particular labour conditions or perform particular services and later feeling cheated by having to work under different labour conditions and provide different services;
- Restriction of mobility;
- Contact with family members or relatives was not allowed;
- Force was used to receive the work or services;
- Violence was used or threats were made;
- Perpetrator(s) refused to pay a salary;
- Passport or other identification document was confiscated;
- Being forced to pay imagined debts;
- Being coerced into begging or engaging in other illegal activities.

If some of these indicators are relevant to you, you are most probably the victim of human trafficking.

THE STATE SAFEGUARDS YOUR RIGHTS TO PROTECTION AND ASSISTANCE

2nd side

YOU HAVE THE RIGHT TO RECEIVE:

- Medical assistance (medical examination and treatment);
- Shelter;
- Psychological assistance (consultation, emotional support);
- Social-pedagogical support (restoration of social contacts, assistance with social adaptation);
- Legal assistance (retrieval of documents, legal counselling, producing the procedural documents for receiving compensation for material and moral harm, advocacy during court proceedings);
- Lump sum financial assistance;
• Assistance for exercising rights to other social payments;
• Assistance with recognition of qualifications and improvement of professional skills;
• Assistance with job placement;
• Assistance in receiving education;
• Assistance with repatriation to the country of origin (for foreigners).

Additional notes
Main indicators of THB victims

Indicators used to identify child victims of THB

<table>
<thead>
<tr>
<th>Direct (objective) signs</th>
<th>Indirect (subjective) signs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Acts</strong> - recruitment, transfer, harbouring, offering or receiving of a child</td>
<td>Bruises, scars, twists, wounds, signs of pressing with fingers, marks from whipping with an item such as a belt or stick, marks from blows, burns (e.g. from a cigarette or lighter), fractures, signs of wrenching, injury to internal organs, sexually transmitted diseases, headaches, somatic illnesses, enuresis, incontinence, stuttering, insomnia, alcohol or drug addiction</td>
</tr>
<tr>
<td><strong>Trade in children</strong>, or other illegitimate agreements in relation to the child</td>
<td>Retardation of development, lethargy, aggression, apathy, lack of mental fitness, mental block, aloofness, fear, anxiety, rage, depression, extreme inactivity, low self-esteem, feelings of guilt or shame, nightmares, suicide attempts</td>
</tr>
<tr>
<td>(exchange, use, giving them to repay a debt or as a gift)</td>
<td><strong>Behavioural reactions</strong> - Refusing to talk, finger sucking, swinging, nail-biting, verbal abuse, desire to do self-harm or harm others, trying to escape, eccentric behaviour, changes in demeanour</td>
</tr>
<tr>
<td><strong>Situational history</strong></td>
<td><strong>Appearance</strong> - Unkemptness, unseasonal clothing, too much make-up</td>
</tr>
<tr>
<td>Physical condition</td>
<td></td>
</tr>
<tr>
<td>Psychological</td>
<td></td>
</tr>
<tr>
<td>Behavioural reactions</td>
<td></td>
</tr>
<tr>
<td>Appearance</td>
<td></td>
</tr>
</tbody>
</table>
General objective (direct) and subjective (indirect) indicators of victims of human trafficking

<table>
<thead>
<tr>
<th>Direct (objective) signs</th>
<th>Indirect (subjective) signs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Acts</strong> - recruitment, transfer, harbouring, offering or receiving of a child</td>
<td><strong>Physical condition</strong></td>
</tr>
<tr>
<td><strong>Means</strong> - fraud, deception, blackmailing, abuse of vulnerability, use or threat of violence or force, abuse of power, financial or other forms of enforced dependence on others, other coercion</td>
<td>Bruises, scars, wounds, burns (e.g. from a cigarette or lighter), fractures, twists, injury to internal organs, sexually transmitted diseases, headaches, sleeping disorders, alcohol or drug addiction</td>
</tr>
<tr>
<td><strong>Purpose</strong> - exploitation</td>
<td><strong>Psychological</strong></td>
</tr>
<tr>
<td><strong>Trade in persons</strong>, or other illegitimate agreements in relation to the person (exchange, use, giving them to repay a debt or as a gift)</td>
<td>Lack of control over emotions, lack of self-confidence, rage, hostility, aggression, fear, generalised anxiety, feeling helpless, shock, confusion, memory lapses, feeling guilty, depression, suicide attempts</td>
</tr>
</tbody>
</table>

**Appearance** | Crying, reserved demeanour, reluctance to talk, avoidance of eye contact, demonstrative behaviour, self-blame and blaming others for what happened |

**Appearance** | Unkemptness, unseasonal clothing, too much make-up |
Case example of direct and indirect signs of human trafficking

Story:

16-year-old Y is a first year student at a vocational college. She is a minor with no legal guardian or custodian and lives in a dormitory. Although other students leave for home during summer holidays, Y continues to live in the dormitory. One day, she gets a proposal from an acquaintance to work as a babysitter in another city for a good salary, and free board and accommodation. Y agrees to the proposal and departs to the city by train accompanied by her acquaintance. On the train she learns that she will provide sex services to truck drivers. She is forced to serve 7-10 customers a night, in return she is not given any payment but only “work” attire and some food. Unable to endure it, she tries to escape. She is found and brutally beaten. She fears that if she makes another attempt to escape, she will be killed, but one of her clients help her to flee.

The following can be considered indirect signs of Y’s case:

- Her age;
- Her gender;
- Her social status - being an orphan;
- Her psychological state after escape - “She fears that if she makes another attempt to escape, she will be killed”.

The following can be considered direct signs:

“One day, she gets a proposal from an acquaintance to work as a babysitter in another city” - recruitment;

“She agrees to the proposal and departs to the city by train accompanied by her acquaintance” - convoy (transportation);

“On the train she learns that she will provide sex services to truck drivers” - deception;

“Unable to endure it, she tries to escape. She is found and brutally beaten” - physical abuse;

“She is forced to serve 7-10 customers a night, in return she is not given any payment but only “work” attire and some food” - sexual exploitation.
Ethical and safety recommendations for interviewing trafficked women

1. **Do no harm.**
   Until there is evidence to the contrary, treat each woman and their situation as if the potential for harm is extreme. Do not undertake any interview that will make a woman’s situation worse in the short or long term;

2. **Know your subject and assess the risk.**
   Learn the risks associated with trafficking and the individual’s case before undertaking an interview;

3. **Prepare referral information.**
   Do not make promises that you cannot fulfil. Be prepared to provide information in both the woman’s native language and the local language (if different) about the appropriate legal, health, shelter, social support and security services, and help with referral if requested;

4. **Select and prepare the appropriate interpreters and co-workers.**
   Weigh up the risks and benefits associated with employing interpreters, co-workers or others and develop adequate methods for screening and training;

5. **Ensure anonymity and confidentiality.**
   Protect a respondent’s identity and confidentiality throughout the entire interview process - from the moment she is contacted to the time that the details of her case are made public;

6. **Get informed consent aimed at recognising the respondent’s rights.**
   Make certain that each respondent clearly understands the content and purpose of the interview, the intended use of the information, her right to not answer questions, her right to terminate the interview at any time and her right to put restrictions on how the information is used;

7. **Listen to and respect each woman’s assessment of her situation and the risk to her safety.**
   Recognise that each woman will have different concerns and that the way she views her concerns may be different from how others might assess them;

8. **Do not retraumatise the woman.**
   Do not ask questions intended to provoke an emotionally charged response. Be prepared to respond to the woman’s distress and highlight her strengths;

9. **Be prepared for emergency intervention.**
   Be prepared to respond if a woman says she is in imminent danger;

10. **Put information collected to good use.**
    Use information in a way that benefits the individual woman or which advances the development of good policies and interventions for trafficked women generally.
Agreement with the shelter resident

Shelter security rules

- No drugs, alcohol, weapons or other forms of contraband of any description are allowed in the shelter at any time;
- No mobile phones are allowed in the shelter at any time. Such items must be handed over to the shelter staff for safekeeping when entering the shelter, and will be returned on departure from the shelter based on written protocol;
- No unannounced or unchecked visitors are allowed in the shelter at any time;
- Calls may be made if authorised by the shelter manager. Shelter staff reserve the right to listen to phone conversations;
- The location of the shelter or any personal details of any resident or staff member of the shelter shall not be disclosed to anybody. The full name or other personal details of a victim shall not be disclosed to any other resident or staff. Only first names are to be used, unless expressly indicated otherwise;
- Shelter residents shall not give information about shelter guidelines to family members or persons close to them (friends, relatives, neighbours);
- When outside the shelter, the security instructions issued by shelter staff concerning any movements and contacts with persons outside the shelter are to be strictly adhered to. Shelter residents shall behave as advised by the psychologist and staff. It is a guarantee of safety;
- Any suspicious contact or activity must be immediately reported to the shelter staff.

Agreement:

I, _____________________________________, understand the above security rules and my accountability for adhering to them. I have been informed about my responsibility to ensure my own safety, and the safety of other residents and staff. I agree that incompliance with any safety procedure or rule may result in the termination of any assistance I receive.

I, on my behalf and on behalf of my dependent children if any, guarantee to fully comply with all the rules prescribed above during my stay at the shelter. In the event of any failure to follow the rules that results in any physical injury or accident, none of the parties will bear responsibility for the consequences.

Signature: ___________________________ Date: ___________________________

Social worker: _________________________
Service user registration card

1. Last name: ____________________________

2. First name: ____________________________

3. Middle name: ____________________________

4. Sex: ____________________________

5. Date of birth: ____________________________

6. Nationality: ____________________________

7. Place of birth: ____________________________

8. Current and legal addresses: ____________________________

9. Identification document

<table>
<thead>
<tr>
<th>Type of document</th>
<th>Number of document</th>
<th>Date of issue</th>
<th>Validity period</th>
<th>Place of issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identification card</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Passport</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9.1. Additional information: ____________________________

10. Education: ____________________________

11. Occupation: ____________________________
12. Information on immediate relatives

<table>
<thead>
<tr>
<th>№</th>
<th>Relationship</th>
<th>Full name</th>
<th>Date of birth</th>
<th>Registered address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Criminal record

<table>
<thead>
<tr>
<th>№</th>
<th>Criminal record item</th>
<th>Term of imprisonment</th>
<th>Date of release from prison</th>
<th>Place of imprisonment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. Infectious diseases (tuberculosis, hepatitis, etc.):

15. Health status:

16. Referral organisation:

17. Signature:

18. Date:

19. Full name and signature of expert filling out form:
## Initial assessment

### General information

<table>
<thead>
<tr>
<th>№</th>
<th>Direction</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Full name</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Sex</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Date of birth</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Any act related to police or court</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Participation in rehabilitation and period of rehabilitation</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Start and end date of reintegration process</td>
<td></td>
</tr>
</tbody>
</table>

### Living conditions

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Present living conditions</td>
<td></td>
</tr>
<tr>
<td>Past living conditions</td>
<td></td>
</tr>
<tr>
<td>In Baku (or Azerbaijan) since...</td>
<td></td>
</tr>
</tbody>
</table>
### High school education, specialisation, vocational education

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>High school education</td>
<td></td>
</tr>
<tr>
<td>Date of graduation</td>
<td></td>
</tr>
<tr>
<td>Vocational education</td>
<td></td>
</tr>
<tr>
<td>Additional specialisation</td>
<td></td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
</tr>
<tr>
<td>Work experience</td>
<td></td>
</tr>
<tr>
<td>Unemployed (since…)</td>
<td></td>
</tr>
<tr>
<td>Current job (on pro rata basis)</td>
<td></td>
</tr>
</tbody>
</table>

### Financial status

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
</tr>
<tr>
<td>Type</td>
<td></td>
</tr>
<tr>
<td>Amount</td>
<td></td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
</tr>
<tr>
<td>Type</td>
<td></td>
</tr>
<tr>
<td>Amount</td>
<td></td>
</tr>
<tr>
<td><strong>Debts</strong></td>
<td></td>
</tr>
<tr>
<td>Type</td>
<td></td>
</tr>
<tr>
<td>Amount</td>
<td></td>
</tr>
</tbody>
</table>
## Health status

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health status</strong></td>
<td></td>
</tr>
<tr>
<td>General health status</td>
<td></td>
</tr>
<tr>
<td>Infectious diseases</td>
<td></td>
</tr>
<tr>
<td>Pregnancy or gynecological issues</td>
<td></td>
</tr>
<tr>
<td>Tuberculosis</td>
<td></td>
</tr>
<tr>
<td><strong>Psychological</strong></td>
<td></td>
</tr>
<tr>
<td>Psychological state</td>
<td></td>
</tr>
<tr>
<td>Psychiatric diagnoses</td>
<td></td>
</tr>
<tr>
<td>Suicide attempt(s)</td>
<td></td>
</tr>
</tbody>
</table>

## Addictions

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Addictions</strong></td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td></td>
</tr>
<tr>
<td>Drugs</td>
<td></td>
</tr>
<tr>
<td>Illegal means of addiction (narcotics)</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

## Psychosocial state

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parents</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Siblings</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Important persons</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Personal information

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life history</td>
<td></td>
</tr>
<tr>
<td>Self-assessment</td>
<td></td>
</tr>
<tr>
<td>Future prospects</td>
<td></td>
</tr>
</tbody>
</table>

### Assessment by social worker

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial opinion</td>
<td></td>
</tr>
<tr>
<td>Determination of rehabilitation period</td>
<td></td>
</tr>
</tbody>
</table>
## 2 Rehabilitation period

### Service provision during rehabilitation period

<table>
<thead>
<tr>
<th>Services used during rehabilitation period and the changes incurred</th>
<th>Provided</th>
<th>Partially provided</th>
<th>Declined the use of service</th>
<th>Not suggested</th>
<th>Rating for the results of the service on a 10-point scale (from 1 to 10)</th>
<th>Service providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vocational courses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job placement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meeting the needs of children</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Results of court proceedings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adaptation to family</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Reintegration process

<table>
<thead>
<tr>
<th>Services used during rehabilitation period and the changes incurred</th>
<th>Provided</th>
<th>Partially provided</th>
<th>Declined the use of service</th>
<th>Not suggested</th>
<th>Rating for the results of the service on a 10-point scale (from 1 to 10)</th>
<th>Service providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary residence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplementary medical assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplementary legal assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adaptation to family achieved/not achieved</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finished vocational courses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continuing the work in a secured workplace</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living together with his/her children?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level of adaptation to society</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contacts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Change in economic status</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a source of income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Assessment by social worker

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Final opinion</td>
<td></td>
</tr>
</tbody>
</table>
# Individual action plan

**Day/month/year:**

**Name of organisation**                                           **(Full name and signature of the director)**

**Full name of service user:**

**Date of birth (day/month/year):**

**Date of admission to organisation:**

**Observation period from**

**until**

**Development and execution period of individual plan from**

**until**

---

## Service provision based on individual needs of beneficiary (types and scope of services)

<table>
<thead>
<tr>
<th>№</th>
<th>Type of services</th>
<th>Scope of services (separate list of services)</th>
<th>Full name, signature and position of service provider</th>
<th>Date of assigned service</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Social-domestic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Social-medical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Social-psychological</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social-pedagogical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>-------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Social-vocational</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social-employment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Social-cultural</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Social-economic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Social-legal</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Review of individual action plan "__" _______ 20__

Social worker: ______________               ______________
(Signature)        (Full name, date)
Provision of psychological assistance

(When admitted to the centre)

1. Full name:

2. Date of birth:

3. Place of birth:

4. General characteristics of behaviour:

5. What the victim has experienced (trauma, psychological distress):

6. Type of violence the victim has experienced as a result of exploitation (physical, psychological, sexual):

7. Violence experienced prior to exploitation (family, sexual):

8. Reason for their anxiety:

9. Complaints:

10. Emotional state (fearful, dismal, depressed, anxious, guilty, angry, moody, rage-filled, aggressive):

11. Cognitive (logic, consciousness, concentration, mental activity, memory lapses):

12. Motor skills (motions carried out by the brain, eye, and hand muscles working together):

13. Complications of psychological distress (sleeping disorders, racing heart, nightmares, etc.):
14. Alcohol, drug addictions:

15. Communication skills (isolation, adaptation to social environment, communication):

16. Marital status (children):

17. Education:

18. Type and term of employment:

19. Hobbies and skills:


21. Suicidal tendencies (attempts or thoughts):

22. Aggressive behaviour which could a pose risk to others (medium, high):

23. Psychiatric symptoms (hallucinations, actions, behaviour, difficulty with eye contact):

24. Referral to consultation with psychiatrist, addiction medicine specialist, therapist:

25. Rehabilitation period (1 month, 2 months, 3 months):

26. Result of the first session:

27. Result of the second session:

28. Result of the third session:

29. Final result:

Date:

Psychologist:
Shelter agreement

(Statement on leaving the shelter)

Full name:

Date of birth: Place of birth:

Current address:

Registered address:

Education:

Social status:

Marital status:

Number of children:

Belongs to the target group:

Contact details:

(Personal or family member’s contact details (phone, email, Facebook, Skype, etc.)

Date of arrival: Date of departure:

Please indicate your address:

Do you have any professional skills?

Which profession would you like to master?
Do you have a job?

If you were offered a job, where would you like to continue your professional activity?

Can you return to your family?

Do you need additional medical service? Please indicate which services are required, if any:

Please evaluate the following services you have received at the shelter.

<table>
<thead>
<tr>
<th>Services</th>
<th>Work Process</th>
<th>Final Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social assistance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological assistance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional assistance</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I, _________________________, would like to request your approval for my voluntary departure from the shelter as I have completed my period of rehabilitation.

Signature: _________________________________

Social worker: ______________________________

Date: _____________________________________
1. **General information**

A shelter is a facility for temporary accommodation and rehabilitation of victims subjected to physical and psychological violence by family members or crime perpetrators.

2. **Services and assistance provided by the shelter**

   - Food
   - Clothing
   - Medical service
   - Psychological assistance
   - Legal assistance
   - Vocational rehabilitation
   - Departure

Benefiting from services is dependent upon the active participation of shelter residents in the rehabilitation process. During your stay at the shelter you have to follow the rehabilitation scheme detailed below.

3. **Scheme of rehabilitation process**

**Phase 1.**

Rehabilitation period in the shelter lasts for **1-3 months**.

- Week 1 is a probation period. Service user undertakes physical health and psychological examination during this week.
- Week 2 is about needs assessment. A social worker meets with the client and analyses their needs. Based on the needs assessment the client is referred to the relevant specialist. An individual plan is developed.
- A lawyer and psychologist provide assistance to the client during weeks 3-6 based on the individual plan.
- Needs are reassessed in week 7.
- Week 8 - feedback is received from the experts, work with the victim’s family is carried out.
- Weeks 9-12 - preparation for reintegration. Finalising the work with the family, etc. - the final decision is made.
Services provided cover legal and psychological assistance, meeting with the victim’s family and catering to the needs of their children. All tasks assigned by experts are carried out in a precise manner by the resident giving his/her consent to participation in the rehabilitation process. During rehabilitation, the client makes decisions jointly with experts.

**Phase 2.**

Period of stay for pregnant women and women with new-borns ranges from **12 to 18 months**. During this period, identity documents are obtained for the child and other issues of concern are solved.

**Phase 3.**

Residents who have completed the rehabilitation period (1-3 months) receive access to the reintegration process through a new application. The reintegration process covers the following:

- Returning to family;
- Participation in vocational courses (for 2 months). Client attends vocational courses as chosen in the presence of a psychologist, based on legal requirements. Vocational courses are organised by the Ministry of Labour and Social Protection of Population. The client must attend these courses on a regular basis;
- A workplace is determined one week prior to completion of the vocational courses;
- Two-month labour activity as a fundraising period to provide for independent living. That is to say, the person receives his/her income and sets about living an independent life. Throughout this period a psychologist prepares the client for adapting to an independent life. The lawyer decides if the documents are complete.

Clients refusing to undertake rehabilitation sign a statement of refusal and immediately embark upon labour activity.

**Phase 4.**

Monitoring phase covers a period of **3 months**. The person departing from the shelter, gives his/her consent to monitoring. Monitoring is carried out in the following frequency: **four times** during the first month, **twice** and **once** during the second and **third months** respectively.

**4. Obligations of shelter residents**

Shelter residents have a duty to observe certain obligations towards themselves, shelter staff and other residents at the shelter.

You can obtain a copy of the Residents’ Rules and review them together with the person conducting the meeting. It is necessary to review each individual rule in detail. A social worker should make sure that you have a good understanding of the obligation to observe them.

If you agree with the above rules, please sign the agreement.

*We hope that you will have a pleasant and beneficial stay at the shelter.*
I, __________________________________, have been informed of the requirements of the rehabilitation and reintegration process. I am ready to abide by these requirements. I understand that wilful violation of the agreement rules may result in the termination of this agreement.

Signature: ________________________________

Date: ____________________________________

Social worker: _____________________________
Supervision tools

Start of a session
- What has happened since our last meeting?
- What would you like to discuss?
- Do you have any news?
- Has anything important happened since our last meeting?

Core issue
- In your opinion, what is the underlying problem?
- What is impeding you?
- What are your main difficulties?
- What concerns you most?
- What are your wishes?

Cause and effect relationship
- What was the cause?
- What brought it to this?

Gaining details
- Can you talk in detail....?
- Anything else?
- What else do you think is related to this matter?

Analysis
- How?
- Does it conform to your values/plans/lifestyle?
- In your opinion, what does it mean?
- What do you think? Is it possible?

Looking in from the outside
- Imagine that you are 95 years old. What would you tell about your past?
- How will you remember this after five years?
- How is it connected to your life goals?

Hypothetical situation
- If you could go back X days in time, what would you do differently?
- What would you do if you had permission to do anything you liked?

Results
- What do you want?
- What do you expect the result to be?
- What will it bring you?
- How did you know that you had achieved what you wished for?
- What is your aim?
Versions
What are the possible ways of development?
What will happen next if you make this decision?

Analysis
Let’s dwell on this subject a little more...
Do you want to do some brainstorming?
Are there any other aspects you don’t understand?
What alternatives do you have?

Implementation
What needs to be done?
What help do you need?
What will you do?
How will you act?
What is your action plan?

Training
What would you do if something similar happened again?
What would you do if you could start over?
What would you do if nothing had impacted your decision?

Assessment
How do you assess this?
What do you think?

Conclusion
What are your conclusions?
How would you characterise this situation?
In your opinion, what does all this mean?
Please shortly describe your activity.

Integration
What did you learn?
How can you maintain this knowledge?
How can you put all this in the bigger picture?

Personal preparation form for supervision
1. How do I feel myself today, right now? How did I spend the last week/month?
2. What would I like to learn from today’s session?
3. What have I done since the last supervision session?
4. What are my achievements?
5. What should I report? Why should I take responsibility?
6. What knowledge, achievements do I need to have today?
Referral letter

Ministry of Health
of the Republic of Azerbaijan
Infective hospital No. 5

REFERRAL

Decree of the President of the Republic of Azerbaijan dated 4 August 2005 on Implementation of the Law of the Republic of Azerbaijan on Fight against Human Trafficking has set certain tasks for the state agencies. The Ministry of Health inter alia should play a significant role in assisting the victims of human trafficking.

Article 15.1 of the Law on Fight against Human Trafficking stipulates measures on provision of medical services to victims of human trafficking to enable their social rehabilitation and return to normal life. In this regard:

Potential victim: _______________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

We would like to request you to assist him/her to undergo medical examination.

Shelter manager: _______________________________________________________________
(Full name)

Date: “_____” _________________ 20_____