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Note: The documents and forms provided in the annexes, with the exception of Annex 13 and Annex 14, were developed by NGO Clean World (Azerbaijan) and provided as examples only.

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INTRODUCTION

Trafficking in persons is a violation of human rights protected by international law. A global, holistic response to human trafficking requires both domestic and international law. Economic instability, military conflicts and other processes unfolding globally are the principal causes of not only migration but trafficking in persons. Key drivers of people to other countries include the search for employment, a safe place to live, and economic subsistence accelerate the lawful and irregular migration process.

Turkey has taken significant steps to combat all facets of trafficking in persons. The state’s efforts focus both on prosecuting human traffickers and on identifying and assisting victims of human trafficking. Turkey has an established an anti-trafficking framework governing the crime’s prevention, identification, assistance for trafficked persons, criminal prosecution, as well as a policy for effective cooperation between relevant state authorities and non-governmental organizations. Since its 2003 ratification of the United Nations Convention against Transnational Organised Crime and the supplementary Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children, Turkey has taken necessary measures to align its national legislation with the convention and other relevant international norms. Most recently, on 2 May 2016, Turkey ratified the Council of Europe Convention on Action against Trafficking in Human Beings, and subsequently adopted the convention in domestic law.

Key legislative and administrative measures are outlined below and, notably, include the development of Turkey’s National Referral Mechanism.¹

- Turkey criminalized trafficking in persons on 9 August 2002, with the commencement of Article 201/b of the Criminal Code (No. 765), and later with Article 80 of the new Criminal Code (No 5237), which entered into force on 1 June 2005. On 19 December 2006, forced prostitution was included in the scope of trafficking in persons with an amendment to the Criminal Code.²
- The National Task Force on Fight against Human Trafficking was established under the coordination of the Ministry of Foreign Affairs in 2002. The National Task Force adopted the first National Action Plan on Fight against Human Trafficking in March 2003.³
- The Law on Work Permit for Foreigners (No.4817), which has been in effect since 27 February 2003, regulates work permit procedures for foreigners, increasing penalties for unregistered employment and centralising the system under the Ministry of Labour and Social Security.⁴
- The Ministry of Interior adopted the following important circulars:
  - Circular (No. 46114) regulating the duties of institutions in charge of protecting victims of human trafficking (26 February 2004);
  - Circular (No. 165347) on the NGO Human Resource Development Foundation shelter in Istanbul for victims of human trafficking (10 September 2004);
  - Circular (No.96996) regulating the operation of emergency helpline 157 for victims of human trafficking (27 May 2005);

• Circular (No. 197559) on the NGO Women Solidarity Association shelter in Ankara for victims of human trafficking (21 November 2005).
• Circular (No. 74), compiling all relevant circulars regulating to Turkey’s anti-trafficking legislative and administrative system (27 October 2006).5
• Shelters for victims of human trafficking were opened in Istanbul (23 April 2004), Ankara (1 November 2005), and Antalya (1 November 2009). There are currently three shelters, which, combined, have capacity for 28 people (Human Resource Development Foundation, Ankara Metropolitan Municipality shelter and DGMM Kırıkkale shelter).6
• The Turkish Child Protection Law (No.5395) was enacted on 3 July 2005.7
• An amendment to the Law on Citizenship (No.403), on 3 June 2003, introduced a requirement for a three-year probation period before the acquisition of Turkish citizenship through marriage. This requirement has been maintained in the new Law on Turkish Citizenship (No. 5901), which commenced on 29 May 2009.8
• In June 2009, the second National Action Plan developed by the National Task Force was approved by the Prime Ministry. On February 2013, the coordination of the National Task Force was transferred from the Ministry of Foreign Affairs to the Directorate General of Migration Management (DGMM). The last meeting of the National Task Force was held in December 2014.9
• The Law on the Protection of Family and Prevention of Violence against Women (No. 6284) entered into force on 20 March 2012.10
• The Regulation on Opening and Operating Women’s Shelters, drafted by the Ministry of Family and Social Policies, entered into force on 5 January 2013.11
• The Law on Foreigners and International Protection (No. 6458) was enacted on 11 April 2013.12 It establishes the Department for the Protection of Victims of Human Trafficking under the DGMM.
• The Regulation on Combating Human Trafficking and the Protection of Victims (the Regulation) commenced on 17 March 2016.13
• The Law on International Labour Force (No.6735) was adopted on 28 July 2016, replacing the Law on Work Permit for Foreigners (No. 4817).14

Victims of human trafficking need support to effectively return to society with the skills necessary to build safe and secure lives. An effective support system requires a network of authorised state agencies and non-governmental organizations capable of providing quality and timely assistance that addresses victims’ individual needs and circumstances.

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Sahifa | 6
The majority of identified victims need temporary shelter and assistance. Shelters are places where persons exposed to different kinds of violence, threat, coercion, and exploitation are provided protection and immediate help is made available.

This manual is intended for institutions and organizations assisting victims of human trafficking, and may be used as a guideline by shelters. It was also developed for students and professors of post-secondary educational institutions that train social workers.

The purpose of this manual is to promote and protect the wellbeing of victims of human trafficking by assisting centres, shelters and support workers to provide comprehensive and responsive support services.

This manual has the following objectives:

- Increase the level of knowledge among service providers of the legislative and administrative structures relevant to adults and children presumed to be victims of human trafficking.
- Improve the provision of services by shelter staff and all entities and organizations assisting the victims of human trafficking and safeguarding their rights.
- Facilitate knowledge exchange among various state entities and non-governmental organizations working with persons affected by trafficking in persons, their families and people at risk.
- Provide a professional service standard to follow for all state entities and non-governmental organizations that are actively involved in the provision of shelter or temporary accommodation for the victims of human trafficking.

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**DEFINITIONS**

**Abuse of a vulnerable position** – “Abuse of power or of a position of vulnerability” is cited in the 2000 Trafficking in Persons Protocol as an additional means through which individuals can be recruited, transported, received, etc. into situations of exploitation. As a means, it is only applicable to adult trafficking cases. The travaux préparatoires to the Protocol include an interpretative note to the effect that reference to the abuse of a position of vulnerability“ is understood as referring to any situation in which the person involved has no real and acceptable alternative but to submit to the abuse involved. An example definition of vulnerability is provided by UNODC as: “Vulnerable people are defined as those who, due to reasons of age, gender, physical or mental state, or due to social, economic, ethnic and/or cultural circumstances, find it especially difficult to fully exercise their rights before the justice system as recognised to them by law. The following may constitute causes of vulnerability: age, disability, belonging to indigenous communities or minorities, victimisation, migration and internal displacement, poverty, gender and deprivation of liberty. The specific definition of vulnerable people in each country will depend on their specific characteristics, and even on their level of social or economic development.”

**Child** – Every human being below the age of 18 years, unless under the applicable law majority is attained earlier.

**Child exploitation** – Procuring a child for illicit or criminal activities (including begging, drug production and trade); 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 domestic legislation or authority; the employment or use in work of a child who has not reached the applicable minimum working age for the type of employment or work; other forms of exploitation; illegal adoption.

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

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

**Country of destination** – The country in which a person arrives or aims to arrive in as part of a migration attempt, either regular or irregular;

**Country of origin** – The country in which a person begins a migration attempt from, either regular or irregular;

**Debt bondage** – Enslaving a person by making it impossible for them to pay off actual or imagined debts.

**Exploitation** – Exploitation is central to the trafficking definition as the purpose. However, exploitation needs to be further defined. The forms of exploitation that the Palermo Protocol associates with trafficking are defined in a series of international treaties. The “exploitation of the prostitution of others” refers to cases in which an exploiter takes all or part of the money that a client

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15 UNODC, Issue Paper: Abuse of a position of vulnerability and other “means” within the definition of trafficking in persons, April 2013
16 UN Convention on the Rights of the Child (adopted by UN General Assembly resolution 44/25 on 20.11.1989)
17 UN Convention against Transnational Organized Crime and the Protocols Thereto
18 ILO Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour (No. 182 adopted on 17 June 1999)
20 Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery (entered into force on 30 April 1957)
pays to a forced prostitute for an act of sex. Sexual exploitation refers to commercial sexual exploitation, e.g. exploitation in prostitution and the production of pornography, but also other situations, which are not explicitly identified by the Protocol. “Slavery or practices similar to slavery” and “servitude” refer to similar situations in which people are coerced to work for others, without necessarily being “owned” by them, notably “debt bondage”, the practice of requiring someone to work to pay off a loan when the value of their work greatly exceeds the value of the loan. The “removal of organs” as a form of exploitation refers to cases of organ transplants that involve living donors who are paid money (or whose relatives take money on their behalf) in return for donating an organ, such as a kidney, or body fluids to another patient. The consent of a victim of human trafficking shall be irrelevant where any of the means set forth in Article 80 (1) of the Criminal Code of the Republic of Turkey have been used.

**Forced labour (servitude)** – All work or service which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily.

**Human trafficker** – An individual or legal entity practising any activity that facilitates or aids trafficking in persons;

**Identification of victims of human trafficking** – The process of obtaining information to determine whether the person is or is not a victim of human trafficking;

**Migrant smuggling** – Procurement, in order to obtain, directly or indirectly, a financial or other material benefit, of the illegal entry of a person into a state party of which the person is not a national or a permanent resident;

**National Referral Mechanism** – A cooperative framework through which state actors fulfil their obligations to protect and promote the human rights of victims of human trafficking, coordinating their efforts in a strategic partnership with non-governmental organizations;

**Post-traumatic stress disorder** – A mental health condition that can affect people who have experienced traumatic stress;

**Slavery** – The status or condition of a person over whom any or all of the powers attaching to the right of ownership are exercised;

**Trafficking in persons** – As per the UN Palermo Protocol: (a) “Trafficking in persons” shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs; (b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used; (c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this

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21 Exploitation of the prostitution of others is the subject of the UN’s Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others, 1949.

22 Debt bondage and others forms of “servile status” are defined and prohibited by the UN Supplementary Convention on the Abolition of Slavery, the Slave Trade and Institutions and Practices Similar to Slavery, 1956.

23 Article 80(2), Criminal Code of the Republic of Turkey (No. 5237)

24 Article 2, ILO Forced Labour Convention 1930 (No.29)

25 Article 3(a), Protocol against the Smuggling of Migrants by Land, Sea and Air, Supplementing the UN Convention against Transnational Organized Crime (adopted by UN General Assembly resolution 55/ 25 on 15.11.2000)


27 Article 1(1), Slavery Convention (entered into force on 09.03.1927). The amended convention entered into force on 7.7.1955
does not involve any of the means set forth in subparagraph (a) of this article; (d) “Child” shall mean any person under eighteen years of age.\textsuperscript{28}

Victims of human trafficking – Persons subjected to, or believed to be subjected to, trafficking in persons.

I. SHELTER AS AN INTEGRAL PART OF NATIONAL AND REGIONAL ASSISTANCE AND REFERRAL SYSTEMS FOR VICTIMS OF HUMAN TRAFFICKING

\textit{Trafficking in persons is one of the gravest violations of human rights and fundamental freedoms. Everyone has the right to safety, liberty, respect, personal integrity, social protection, labour, rest and freedom of movement. We all have the right not to be subjected to torture or cruel, inhuman, or degrading treatment.}

The main consideration when selecting a place for the first stage of a victim’s reintegration is the victim’s safety. For the victim to resume a normal life, it is essential to support and treat the victim with respect.

Regrettably, a victim’s family, friends and former social group may not be suitable to provide the required safety for identified victims, either due to social beliefs leading them to condemn victims for the exploitation and degrading treatment they suffered and the acts they were forced to commit, or due to the possible complicity of the victim’s close social group in the original trafficking situation. \textbf{Therefore, shelter is an indispensable part of an assistance system for victims of human trafficking.}

To ensure victims’ safety and basic needs, shelter or temporary shelter services in must be based on defined principles and standards. In Turkey, as set out in the Regulation on Combating Human Trafficking and the Protection of Victims, the DGMM is responsible for establishing and operating shelters for victims of human trafficking, or outsourcing their operation through an agreement with a third party. Shelters are required to operate 24 hours a day, 7 days a week. Presumed and identified victims are accommodated in DGMM operated shelters. Where this is not possible, they are placed in designated shelters run by other public institutions, local administrations and non-governmental organizations. DGMM reception/removal centres may also provide temporary accommodation services for victims of human trafficking while their pre-identification, identification, referral to shelters, or voluntary and safe return procedures are processed. Separate spaces within the reception/ removal centres are allocated for foreign victims of human trafficking in cases where the above-mentioned institutions are unable to provide shelter services (see 2.7 \textit{Rehabilitation of victims of human trafficking who are foreigners or stateless persons}).\textsuperscript{29}

Victims of human trafficking may need immediate housing during the identification of victims of human trafficking process. The competent authority determines which shelter is right for the victim and, based on the preliminary agreement, officially refers the victim to the shelter. A shelter staff member (as instructed by the head of the shelter) shall take the victim to the shelter, accompanied by a security staff member if necessary.

The list below gives some examples of the types of victims that may need access to shelters:

- Female victims;

\textsuperscript{28} UN Convention against Transnational Organized Crime and the Protocols Thereto
\textsuperscript{29} Article 25 ‘Shelters’ and Article 26 ‘Referral to shelters’, Regulation on Combating Human Trafficking and Protection of Victims
• Adult victims with children;
• Male victims;
• Child victims;
• Foreign victims (including ones willing to be repatriated or who are seeking temporary residence).

1.1 Informing victims about shelter or temporary accommodation services

Informing victims about shelter or temporary accommodation services is one of the necessary steps in the assistance process. It should incorporate not only the active involvement of specialized non-governmental organizations and entities that afford social protection measures, but also the state entities that provide medical or educational services and, in doing so, indirectly contribute to the fight against trafficking in persons.

Once the DGMM completes the victim identification process, victims are informed about available assistance and support services. Victims must be given information about their right to shelter accommodation. Information is to be provided in the victim’s native language or any other language that the victim understands.30

Identified victims enjoy the right to choose whether to use shelter services. In case there is a risk they could be re-trafficked or otherwise be in danger, the state must provide safe housing or shelter with well-trained staff, regardless of the victim’s country of origin. Information about the address of the shelter must be kept confidential from the public (see 1.3 Shelter safety).

Information about the right to obtain shelter or temporary housing services should be available at awareness raising events held by organizations that identify and support presumed victims or at risk groups.

1.2 Service standards for shelters supporting victims of human trafficking

Shelters follow standardized service principles, but should tailor their services and service delivery processes according to their resources, the skills and experience of their staff and the needs of the victims they support.

All shelters should aim to meet the following objectives:

• Provide a safe and secure temporary living environment for all victims;
• Provide a safe and secure working environment for shelter staff;
• Employ well-trained staff who work collaboratively with other staff members and with service providers from other organizations that assist victims of human trafficking;
• Promote a holistic approach to assisting the victims of human trafficking based on needs assessment and individualized rehabilitation plans;
• Promote assistance for the victims of human trafficking through cooperation with key partners (organizations);

30 Article 26 (12), Regulation on Combatting Human Trafficking and Protection of Victims
Within the framework of the above-mentioned objectives, services, administrative arrangements and procedures may differ between shelters. Shelters are authorised to arrange their activities, and to limit the type of victims of human trafficking they serve, according to their current capacity to provide shelter services. For example, shelters may only offer services for women, services for children, or services for men or women with children. (This is less common in regional areas, where shelters offer services to mixed groups.) Factors that may influence service capacity include the availability and experience of personnel, accommodation resources, and the demand for services in the area.

Shelter premises can be relatively small (for example, apartments with a couple of rooms), or detached, multi-floor buildings. There is a practice of establishing shelters in partnership with hospitals and religious communities. In some cases, shelters also support victims of domestic violence. Where this is the case, additional measures should be undertaken to safeguard other types of clients (see Similarities between human trafficking and domestic violence). Children who are victims of human trafficking can be housed in designated shelters especially for children or in rehabilitation centres with increased security and safety procedures (see 2.6 Support for child victims of human trafficking).

1.3 Shelter safety

The safety and health of all shelter staff is especially important. Trafficking in persons is a serious form of organized crime that carries significant judicial penalties and involves large profits for perpetrators. It is thus a high-gain, high-risk crime and perpetrators may attempt to influence judicial proceedings through identified victims, to retaliate against victims and shelter staff, or to re-trafficking identified victims to protect their business. Therefore, shelters must be safe and secure not only for the victims of human trafficking but also for staff. A shelter’s location should be confidential. Buildings should be unmarked: There should be no signs advertising that the building is a shelter. A shelter’s addresses should not be published. Ideally, shelters should also have protection officers or a police alert signal. It is essential that shelter residents follow the safety rules (see Annex 5).

The victims’ behaviour while at a shelter is the most important factor affecting the safety of shelter staff. Each resident should be given a copy of the shelter’s safety rules in a language they can understand and asked to agree to adhere to these rules. 31 For children, the safety rules can be put in the form of a game, and displayed on doors.

To maintain the safety of victims and shelter staff, visitor access to the premises should be not be permitted.

Other safety measures include fire safety standards, electricity standards and general building maintenance laws. If the shelter is run by a non-governmental organization (or rented), it is necessary to safeguard the building against other hazards, mark the fire evacuation routes, and provide a fire evacuation plan to residents in a language they understand. Special care should be taken to ensure that any electricity grids, electrical tools, food products, household chemicals, window openings, balconies and medicines on the shelter premises do not endanger the welfare of shelter staff or residents.

There should be a temporary room (an isolator) where new arrivals can stay until the medical check-up is complete. To prevent contact with other residents, this room must have access to a separate

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31 See Annex 5.
bathroom. New arrivals can stay in this room up to one week, depending on the time needed for medical screening to determine if the person is a carrier of an infectious disease.

**The welfare of shelter staff is at the core of safety measures. Shelters should implement the following safety measures:**

- Residents are given a copy of the shelter’s safety rules and sign a written agreement to comply with these rules;
- Staff regularly discuss safety conditions and identify threats to safety;
- Systematic risk assessment of new residents is conducted;
- Residents and staff comply with the rules on how to access personal records stored at the shelter;
- Staff can use a pseudonym when working with residents;
- Staff comply with safety rules for logging in and out of service databases;
- Staff adhere to confidentiality rules.

1.4 Shelter premises

Shelters that provide 24-hour accommodation services should be divided into two parts: the restricted area and the general area.

**The general area:** kitchen, cafeteria, bathrooms, laundry, toilets, and communal areas for recreation and entertainment, including games rooms, meeting rooms and areas for other kind of group activities.

**The restricted area:** bedrooms (for two to six people including separate rooms for mothers and their children), consultation rooms, areas for medical appointments and procedures (if the shelter has medical staff), and administrative rooms for shelter staff. Medical rooms should be locked when not supervised by a member of staff.

Shelters for children require additional features. These shelters should include play rooms with toys, and rooms for educational purposes. Given the diverse nature of entertainment and the play and developmental needs of children, it is advisable to have an enclosed yard for sport activities and games.

II REHABILITATION SERVICES FOR THE VICTIMS OF HUMAN TRAFFICKING

Shelter or temporary accommodation services should be comprehensive, addressing a victim’s immediate and longer term individual needs. Each shelter should establish protocols for working with victims and helping them to safely and successfully rehabilitate.

Staff should understand trafficking in persons, its process, and its effect on human behaviour and physical and psychological health. Therefore, staff development and training is essential (see III Shelter staff). Staff must also adhere to the following behavioural rules.

- **Do not condemn or blame victims**

Each person’s story and experience are unique. No two victims of human trafficking are the same. Staff should respect victims’ individual needs and not presume to completely understand what victims have gone through and how their experience has affected them. Staff should not blame the victim. A physically and psychologically secure environment helps victims recover more quickly, and promotes rehabilitation.
Maintain professional distance

Staff should maintain professional boundaries. Staff should not identify too much with the victims they support or become too emotionally involved. Staff should not coerce, demean or harass victims but must respect victims’ rights.

Focus on encouraging positive change

It may be upsetting, even traumatic, for victims to discuss their trafficking experience. Shelter staff should adhere to “manageable” intervention rules. Counselling sessions should only be conducted by well-trained, qualified staff, and should encourage the victim to embrace positive change that will improve their well-being and enhance their social potential.

2.1 Identification of victims of human trafficking

General information about identification

“Identification” refers to the set of actions taken by the competent authority to determine if a person is a victim of human trafficking. Actions include analysing data about the nature of the offence that has occurred, comparing it with the identifying features of the victims of human trafficking, and determining the likelihood of the person being a victim of this offence.

Statistics on the number of victims of human trafficking provided by state agencies often differ from data provided by non-governmental domestic and international organizations. The main reasons for this are:

- different identification criteria and processes;
- the level of cooperation and trust among state (especially law enforcement) agencies and non-governmental organizations; and
- the skills and experience of state agency staff compared with non-governmental organizations.

The first two factors rely on the effectiveness of national strategies, whereas the third factor is based on the skills and knowledge staff have obtained through training and education. It is impossible to identify victims of human trafficking without properly understanding trafficking issues and indicators, and being able to effectively communicate with presumed victims. Therefore, statistics on the extent of trafficking in persons rarely reflects the actual situation.

The difficulties determining the number of victims of human trafficking is demonstrated by this fact: To prove that a person is a victim of human trafficking a whole process with relevant conditions must be undertaken. In the case of trafficking in persons, victim self-identification (where a victim perceives that they were trafficked and seeks protection) is very low. Few people identify as victims of human trafficking, making self-identification data, even at the international level, statistically insignificant.

Victims of human trafficking often do not seek help from state agencies or non-governmental organizations due to a number of reasons:

- Fear that family or friends will find out where they are and what they have been forced to do;
- Fear of “strangers”;
• Fear of being punished for breaking the law (for instance, illegal border crossing or overstay);
• Fear that the human traffickers will retaliate and punish not only them but their family and friends;
• Fear of stigmatization;
• Inability to understand their situation or perceive themselves as a victim;
• Lack of trust in state agencies or available assistance channels.

Therefore, it is essential that competent authorities have the skills and processes necessary to accurately and quickly identify victims of human trafficking. Timely identification of victims of human trafficking makes the following possible:

• Preventing the same perpetrators committing crimes against other persons or group of persons;
• Collecting information about human traffickers, their networks and methods;
• Rescuing additional victims of human trafficking, providing necessary support or affording protection to victims of human trafficking.

Identification of victims of human trafficking is regulated by the Regulation, which contains the following definition of identification: “identification of the persons who have been or who are strongly suspected to be subject to the crime of human trafficking as victim of human trafficking”.

Identification principles and indicators of victims of human trafficking are regulated by the 17 March 2016 Regulation on Combatting Human Trafficking and Protection of Victims.

• The regulation was drafted on the basis of Article 121 of the Law on Foreigners and International Protection (No. 6458), dated 4 April 2013, and the Council of Europe Convention on Action against Trafficking in Human Beings adopted by the Law (No. 6667), dated 30 January 2016.
• The principles of identification prescribed by the regulation establish the process that enables identification of victims of human trafficking.
• The identification of victims of human trafficking is a fundamental part of protecting victims and ensuring their right to access immediate support and assistance. It is only once a victim has been identified that support can be provided to facilitate their reintegration into society, help the victim return to normal life and eliminate the risk of re-victimisation. Victims of human trafficking, and individuals strongly suspected to be victims, are identified through an administrative process that can operate alongside, but is not dependent, on police investigations or criminal prosecutions.

The following entities can conduct identification processes and provide support to victims of human trafficking:

1. Representatives of law enforcement agencies;
2. Personnel of the Ministry of Family and Social Policies;
3. Personnel of the Ministry of Labour and Social Security;
4. Personnel of the Ministry of Health, and health workers (including gynaecologists and paediatricians);

32 Article 3(1), Regulation on Combatting Human Trafficking and Protection of Victims
33 Article 17 'Victim identification' and Article 18 'Principles of Victim identification', Regulation on Combatting Human Trafficking and Protection of Victims
34 Article 18 (1), Regulation on Combatting Human Trafficking and Protection of Victims
Additionally, a victim’s family, friends, and acquaintances may recognise that the person is a victim of human trafficking. However, friends, family and acquaintances may not always support victims. Trafficking in persons is not a well-known or understood crime by members of the general public, and victims are often condemned or face stigmatization.

There are factors that indicate a person may be a victim of human trafficking. However, every individual is unique. Everyone has their own communication style, life experiences, beliefs, moral values, marital status, and family relationships. Crucially, perceptions about norms differ. Therefore, a person may be a victim of human trafficking even if their experience doesn’t match every indicator.

**How victims of human trafficking are influenced or controlled**

Shelter staff interviewing victims should have a detailed understanding of trafficking in persons. Trafficking in persons is difficult to uncover. In international practice, it is called a “hidden crime”. Therefore, it is essential to understand how human traffickers exploit and control their victims.

*The goal of human traffickers is to benefit from the long-term exploitation of persons. Human traffickers use the following tactics to try to control their victims:*

- debt bondage;
- restriction of movement and communication;
- seizure of personal documents;
- use of violence;
- intimidation, threats, and creating fear of law enforcement agencies;
- forced or coerced use of drugs or alcohol.

**Debt bondage** starts in the recruitment phase, when human traffickers fund the victims’ transportation and related expenses. Victims agree to repay the human traffickers once they arrive at the job they have been recruited for. Upon arrival the perpetrator charges “fines”, such as for accommodation or food, often at extortionate prices deliberately set to prevent the victim paying them off within their set salary. Consequently, “debt” starts to mount and is used to maintain control over the victim.

Traffickers often use **isolation or restriction of movement** to control victims. Victims may not be allowed to contact or communicate with others in their native language, may have their movements closely monitored or limited by a curfew, or in extreme situations, be physically prevented from leaving the site of exploitation. The victims prevented from moving freely are under the control of supervisors, managers, taskmasters and other parties exerting control.

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35 For instance, see a sample of set of indicators in Annex 3.
**Removal of identity documents** may occur in the initial stage of movement or later when potential victims arrive in the country of destination. This deprives victims of official status and prevents them from leaving the country.

**Intimidation through physical violence** is a means of control. To force victims to submit, victims may be subjected to physical assault, deprivation of food or water, or other forms of abuse.

Additionally, **psychological pressure** can cause victims to feel shame or embarrassment, hopelessness and helplessness. The **fear of shame and stigmatization** is also used to control victims, as is the fear that family members may punish the victim for the acts they were forced to commit. Human traffickers exploit these fears by threatening to tell the victim’s family that they are involved in, for example, prostitution. Photos of the victim being sexually assaulted may be used to coerce the victim. Fear of shame and stigmatization is particularly relevant for men, who are reluctant to identify as victims as they believe they have failed to fulfil the role of “breadwinner”.

(see 2.5 Special needs of men who are victims of human trafficking).

Another effective form of intimidation is **threatening** the victim with **violence** against the victim’s family and friends who live in the victim’s country of origin. In the majority of cases, human traffickers tell the victim that they have detailed information about the victim’s family and friends, including names and addresses, which may or may not be true.

Human traffickers encourage **fear of government representatives**, especially law enforcement agencies. They tell victims that law enforcement agencies won’t help them, suggesting the agencies are corrupt and have been “bought” by the traffickers. Victims may also fear they will be punished for being in country of destination irregularly (arrest, deportation, fines), and therefore avoid contact with government representatives. A victim’s inability to speak the language of the country of destination may increase their fear of government representatives. Unsurprisingly, victims rarely provide the names of the traffickers or testify against them in court.

To increase their control over their victims, human traffickers may procure drugs or alcohol and encourage their victims to become addicted.

These methods can be used separately, however, they are often used concurrently to keep the victims under factual and psychological imprisonment. These non-exhaustive control methods are illustrative of the reason why the victims do not attempt to escape and why authorities should approach human trafficking from a humanitarian viewpoint.

*Shelter staff and other social workers should have an in-depth understanding of trafficking in persons and the indicators of human trafficking. The expert carrying out the interview with the presumed victim fills in a shelter specific identification form, and decides if the person is a victim of human trafficking and needs immediate assistance. This assessment will affect the presumed victim’s life, and is a significant responsibility that should be handled with care and respect.*

2.2 The first meeting

It is essential to take the victim’s **gender** into account during the first meeting with the victim. The World Health Organization recommends 10 guiding principles for ethically and safely interviewing trafficked women. Shelter staff and others providing support for the victims of human trafficking are strongly encouraged to follow these principles. (For more detailed information on support

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services for trafficked women, see 2.4 Special needs of women who are victims of human trafficking.)

Shelter staff should also be sensitive to the cultural gender norms of male victims who may struggle to freely talk about their experience due to cultural and national stereotypes. (For more detailed information on support services for trafficked men, see 2.5 Special needs of men who are victims of human trafficking.)

It is good practice to use a checklist during the initial meeting with the presumed victim.  

By doing this, the social worker will build good rapport with the victim and collect preliminary information based on trust. The checklist covers necessary types of assistance and enables a considerate approach towards the presumed victim. Using the checklist will also encourage the victim to communicate non-verbally about their situation. To support victims of human trafficking, shelter staff must first interview a presumed victim and fill in required forms.

Responses given during the meetings are rarely insufficient. If a victim is not providing sufficient information it is generally because questions have been phrased incorrectly, the wrong questions have been asked, or the staff member is unwilling to accept the victim’s answers.

An interview has three stages:

1. **Introduction**: Get to know, and build a relationship with, the victim; define the topic of conversation and the main rules and timeframe for the interview;
2. **Substantive**: Discuss the potential human trafficking case;
3. **Final**: Provide details of the expected possible changes and future activities

**Main points of the first interview**

**Communication**

The presumed victim may be frightened, sick, hungry, or in shock. They may not understand where they are or want to talk to anyone. Therefore, it is advisable for the meeting room to be located away from the shelter’s general area. This will minimise distractions for the presumed victim and help the interviewer ascertain whether the person is psychologically and physically ready to be interviewed. Social workers should initiate the conversation with an introduction about the meeting’s objectives. This will help promote trust.

**Active listening**

Active listening encourages a person to narrate their story verbally or non-verbally.

The main rules of active listening include the following:

1. Do not interrupt;
2. Control your emotions;
3. Stick to the topic;
4. React to the words not to the person;
5. Use non-verbal communication (body language and gestures);
6. Use eye contact;

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37 See Annexes 1 and 2.
38 See Annex 1.
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;
9. Express your ideas in different ways to ensure you are understood;
10. Stop talking; let the other person speak.

**Ability to ask questions**

Clearly formulated questions enable the expert to steer the conversation in the right direction. Several types of questions are given below:

*Closed questions* are questions that can only elicit an answer of “yes”, “no” or “I don’t know”. They can be effectively used early in conversations to encourage participation, and are useful for confirming details within an account. The do not however provide the interviewer with much information.

For example, “Do you live with your parents?” Answer: “Yes” or “No”.

*Open-ended questions* usually start with “What?”, “Why?”, “How?”, “Can?” and elicit a formulated response from the interviewee. Answers to open-ended questions provide far more information and allow the speaker to express themselves in their preferred way. They are useful for gathering a broad overview of a situation and gathering information quickly.

For example, “Where do you live?” Answer: “I live with my parents/ in city X/ on my own”

You need to be careful with “Why” questions. These can cause the person to feel that they need to justify their actions, which can negatively influence the conversation.

*Direct* – It is also recommended to ask direct questions. For example, “Were you satisfied with your living conditions?”

*Reflective* – They provide the opportunity for the person to clarify their statements and correct misinformation.

For instance: “Can you recall what happened?”

**Attention! Ask simple questions first before moving to more difficult ones. Recheck questions by asking additional questions. Do not ask several questions at once, as people find it difficult to properly respond to multiple questions at a time.**

Interviewers must remain sensitive to the behaviour of interviewees during interviews, as an interview is likely to force actual victims to relive traumatic experiences and perhaps acknowledge their situation for the first time. If an interviewee appears fatigued or anxious during the interview, stop the conversation and ask some neutral, unobtrusive questions. It is not acceptable to interrupt the presumed victim, particularly if the interviewer interrupts to state their opinion.

It is essential to understand and respect each victim’s response to their experience of trafficking in persons. No two victims will have the same experience or response to trauma. The consequences for a victim’s physical and psychological health will also depend on how long they were trafficked, the kinds of acts they were forced to perform, the conditions in which they lived, and the severity of the psychological and physical abuse they suffered.

**While each victim’s experience of and reaction to trafficking in persons is unique, tracking in persons commonly affects victims emotionally, cognitively, physically and behaviourally:**

- **Emotional:** A victim’s emotional response to trafficking in persons may include rage, depression, and anxiety. Victims may feel isolated, emotionally numb or detached, or be unable or unwilling to talk about their experience.
**Cognitive:** Victims may experience, for example, memory loss, an inability to concentrate, and difficulty making decisions;

**Physical:** Physical affects can include insomnia, eating disorders, nausea, neurological symptoms, blood pressure problems, heart conditions, tremors, disorientation, and malaise;

**Behavioural:** Behavioural responses can include drug or alcohol dependency, aggression, grumpiness, and reluctance to talk with shelter staff and other specialists.

**Fear and sense of threat** may lead to ongoing anxiety. Victims may continue to fear their traffickers. They may fear being found, punished, re-trafficked or even killed by the human traffickers.

Victims’ fears may be well-founded and reasonable. Do not dismiss a victim’s concerns for their safety and the safety of their family and friends. Take all reasonable steps to ensure the victim’s health and safety and to provide immediate assistance.

**Denying the seriousness or the existence of the abuse:** Victims may disassociate from the abuse they suffered. Their experience may seem unreal, or they may not recognise or acknowledge the violence and exploitation. Victims may blame themselves for what happened and try to justify the human traffickers’ actions. Shelter staff and other specialists must carefully consider whether the victim needs psychological support and counselling.

**Aggression or rage:** Victims may react to their experience of human trafficking with rage or aggressive behaviour. They may be angry with themselves and blame themselves for being a victim of human trafficking. They may be angry at others for failing to protect them. Their anger may be immediate or may develop over time.

Feelings of rage and anger may cause the victim to be hyperactive or easily agitated. They may be hostile and aggressive towards others, and may refuse to cooperate with shelter staff. Victims may even try to harm themselves. It is vital that victims are supported to express their feelings and provided with adequate psychological support and counselling. Shelter staff and other specialists should not blame the victim for their behaviour but should treat the victim with respect.

**Self-blame, shame and guilt:** It is common for victims of human trafficking to blame themselves. They may feel foolish, gullible or chastise themselves for not considering warning signs or the advice of family or friends. They may also feel responsible for any crimes they were forced to commit (such as recruitment or illegal border crossings).

Victims who blame themselves or who feel ashamed may try to punish or harm themselves. Their lack of self-respect may be evident in a lack of self-care: They may be indifferent to their appearance, untidy, or prefer dark, unobtrusive clothing. They may feel agitated, fatigued, or constantly tense. They may have difficulties maintaining eye contact, be reluctant to undergo physical examinations, or avoid contact with shelter staff or other specialists.

It is important to let victims of human trafficking know that what happened to them was not their fault. It is useful to point out that trafficking is a criminal act that occurs to many others around the world. Shelter staff should highlight the victim’s bravery and resourcefulness in finding a way out of their situation. It is important to assure the victims of their abilities and capacity, through validating their achievements and strengths.

**Memory lapses and dissociation:** Victims may be unable to recall details of their experience, such as times, places, or a person’s appearance or name. They may not remember entire events (a coping mechanism known as “dissociation”). Memory loss may result in altered accounts or discrepancies.
in their story. Victims may seem unwilling to answer questions. Shelter staff should be careful not to judge, condemn, or pressure victims.

**Isolation, loneliness:** Victims may withdraw from others and isolate themselves. They may believe that no one can understand or help them. Such victims may feel fatigued, disorientated, or emotionally numb. They may experience hallucinations or delusions. They may appear to be hostile or irrational. Steps that can be taken to support these victims include providing opportunities to contact family and friends (if assessed safe to do so) or to participate in one-to-one or group activities or planned tasks.

**Mistrust of others:** Victims may be wary of shelter staff or other support persons, and feel unsafe in the shelter. Specialists, including shelter staff, should make every effort to build rapport with the victim and establish a relationship based on trust.

**Depression:** Depression occurs when a person feels helpless or worthless. Victims may be lethargic, emotionally numb, despondent, seemingly self-absorbed, irritable, fatigued or pessimistic. They may express feelings of hopelessness or be unable to enjoy activities or plan for the future. They may have difficulty making decisions or concentrating, or be uncooperative. Victims may also self-harm or be suicidal. Shelter staff should seek the assistance of professionals specially trained in counselling for depression to assist the victim.

**Dependence, subservience or defensiveness:** Victims may be unable or reluctant to make decisions. They may desire to please people and unquestionably follow instructions. Typically, such victims lack initiative, cannot sit still, cannot assert their rights and interests, are fearful of angering someone, and are easily influenced. Victims may also be anxious, regularly complain, have low self-esteem, lack self-determination, and refuse or be reluctant to accept assistance and advice.

Independence may be fostered through undertaking small tasks and setting limited goals. One of the essential aspects of working with victims of human trafficking is helping victims to recognise their abilities and capacity.

### 2.3 Needs assessment, assistance planning and case management

To work effectively with a victim of trafficking, it is important to determine which support services are appropriate by fully assessing a victim’s needs. Understanding the possible psychological reactions and behaviours of victims of human trafficking will help improve the quality of service delivery and prevent victims becoming continuously dependent on shelter services.

*Needs assessment: The process by which shelter staff and other specialists collect and analyse information about the victim’s experience, including their situation and living conditions, to determine the types and quantity of support services that will best assist the victim.*

Information can be collected in the following ways:

- Conversation (communication with the victim, including their friends and family);
- Questionnaire (responses given by the victim);
- Observation (ascertaining the behaviour of the victim directly through hearing and seeing);
- Reviewing and carefully examining documents, as well as official requests made by law enforcement agencies and other government agencies.
A preliminary needs assessment is conducted during the victim’s first contact with shelter staff. A preliminary assessment should be followed by a detailed needs assessment.

A detailed needs assessment is carried out by the case manager who is assigned to the case at a staff meeting. Case managers must be social workers. Based on a close examination of the situation and the victim’s needs, the case manager determines which specialists and agencies should support the victim and the extent of support required. The case manager must also assess the victim’s social environment to determine the likelihood of repeated traumatisation. This information should be added to the victim’s Initial assessment form and their Individual action plan.39

Case managers can refer to the initial assessment throughout the support process. It is important to remember that victims may discontinue support services at any time. It should be emphasized that victims of human trafficking need holistic support. Case managers may need to coordinate with other service providers, such as medical personnel and law enforcement officers.

**Individual action plans**

Once a detailed needs assessment is completed, case managers are to create an Individual action plan for the victim. These plans document the range and extent of services that the victim needs. Individual action plans must be monitored periodically. In social work, this is called “case management”.

Shelter services and support programmes must address a victim’s individual needs. Shelter staff and other specialists must be sensitive to the victim’s age, gender, physical and psychological needs, and the length of time they were exploited. However, it is common for all victims to have essential needs, including a need for:

- basic necessities (clothing, food, safe place to live);
- physical health;
- social skills to increase independence;
- psychological support;
- strengthened or restored family relationships and supportive social networks;
- case management and a plan to help the victim recover;
- information about their human rights;
- protection and restoration of their civil and human rights;
- regularised legal status (if appropriate) and associated official documentation;
- safe accommodation for temporary stay;
- general and vocational education to help the victim find employment and to create future opportunities;
- employment.

The following services should be included in the comprehensive assistance programmes shelters provide:

- **Medical assistance**: This service includes a comprehensive medical examination, treatment and observation by general medical staff. Case managers are to arrange for all medical services that the victim needs to fully recover.

39See Annexes 7 and 8.
Medical services are provided at medical facilities. Collaboration and teamwork among shelter staff and medical personnel is essential. Medical personnel should be aware of the nature of trafficking in persons and its effects on the victims of human trafficking. Medical personnel must follow ethical rules and confidentiality principles when working with trafficking victims. To recover, victims of human trafficking need highly professional and trustworthy medical support.

Above all, when coordinating with medical personnel, shelter staff must prioritise the victim’s physical and psychological health. Physical and psychological support is a basic need and the starting point in the recovery process.

- **Psychological assistance:** Psychological support can include counselling and related mental health services. If mental health conditions are identified, victims are entitled to psychological support. Psychologist must complete the Provision of psychological assistance form and record the victim’s progress after each session.  

- **Social pedagogical assistance:** Victims are supported to re-establish social ties (primarily connections with family and friends). A victim’s broad social needs are considered, including the need for self-awareness and, particularly for children, education. Case managers and other support workers must consider whether there are any barriers to fulfilling the victim’s social needs. In particular, it must be determined whether it is safe for the victim to have contact with their family and friends.

- **Working with the victims’ families** is an essential part of rehabilitation services. It is not uncommon for victims to fear stigmatization, particularly if victims blame themselves for what happened. Support staff may need to work with the victim’s family and friends, and others with ongoing contact with the victim, to eliminate misunderstandings and stereotypes, and to promote respectful relationships.

**Working with cultural mediators:** In some cases, shelter staff and other support workers can use cultural mediators in situations where a cultural gap exists between the victim and shelter staff and/or host country. Representatives of ethnic groups can be involved in the rehabilitation process of the victims of human trafficking, and may particularly benefit victims from other countries of origin or those who are stateless. Working with stateless or foreign victims of human trafficking requires additional effort and sensitivity (see 2.7: Rehabilitation of victims of human trafficking who are foreigners or stateless persons).

- **Legal assistance** includes the provision of legal advice and representation of the victims’ interests in all trafficking cases. Shelter staff may also need to assist the victim to retrieve lost documents and to obtain legal status in the host country (particularly for foreign or stateless victims). Victims may also need assistance to apply for compensation as a victim of crime, restitution and enforcement of property rights.

Victims may also need support to obtain custody of their children, including representation in child custody proceedings. Legal assistance for child victims of human trafficking may include legal representation to advocate for their rights and the child’s best interests, including their right to education.

Legal assistance services can be provided by a lawyer, the case manager (if adequately qualified) and in consultation with law enforcement officers following the case.

In accordance with the Law on the Encouragement of Social Solidarity and Assistance (No. 3294), enacted 29 May 1986, victims must be given information about the availability of financial support to meet basic needs.

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40 See Annex 9.

41 Article 28, Convention on the Rights of the Child, [http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx](http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx)

42 Article 28 (1g) Regulation on Combatting Human Trafficking and Protection of Victims
One of the more complex, but fundamental, aspects of legal assistance is facilitating the return of the victim of human trafficking to the country of origin through the issue of a temporary residence permit (for foreigners and stateless persons) and rebuilding the connections with the country of origin. In accordance with Article 234 of the Turkish Criminal Procedure Law (No. 5271), enacted 4 December 2004, the Bar Association will assign presumed victims an attorney. Nevertheless, attorneys need special training to successfully work with victim of human trafficking.

• Shelter staff may need to find the family of the child victims of human trafficking or, where the family cannot be found, arrange for the children to be adopted in accordance with state law. If the child’s parents (or guardians) were involved in the trafficking, the child should not be returned to their parents, and one or both of the parents should be stripped of their parental rights, in accordance with child protection laws.

• Financial assistance is authorised by the Regulation. Transportation and other expenses are covered either by the DGMM or by related institutions or organizations. Upon request by the DGMM, in accordance with Law No. 3294, the Social Solidarity and Assistance Foundation in the province where the victim resides must provide the victim financial assistance to meet their basic needs.

• Assistance to obtain employment or qualifications: Securing lawful employment or establishing a small business enables a victim to re-enter society as a respected professional. Shelter staff should be aware that economic pressures may put the victim at risk of re-trafficking or other exploitation. Therefore, it is essential for rehabilitation plans to include measures to support the victim to re-enter the legal job market.

Shelter staff should develop partnerships with government agencies and private employers to obtain job placement opportunities for the victims of human trafficking, and opportunities for victims to undertake professional development and training courses while at the shelter. There are examples of victims of human trafficking starting successful businesses, including tailors, souvenir shops, farms, and small bakeries, provided with a robust support framework and access to vocational training opportunities. There are also examples such as in the Netherlands of shelters developing links with businesses such as cafes and restaurants where recovered victims have the option of seeking employment.

In working with the victims to develop a plan for their professional future, victims should be given business and employment advice that takes account of local labour market conditions.

• Supporting re-entry into school or schooling is an essential part of supporting child victims of human trafficking. Adult victims may also benefit from further education. As stipulated in the Regulation, the Ministry of National Education is responsible for taking all necessary steps to ensure that child victims, and the children accompanying adult victims, have access to education.

Access to education is an effective way to meet a child victim’s basic needs and their need for socialisation. Through being with other children, child victims learn to play and “to be like other kids.” Play-based learning, that is, learning through games, helps children to adapt to new social environments. Shelter staff should coordinate with the child victim’s school to ensure that the school can provide the necessary support. For example, where needed, the school psychologist can be involved in the child’s rehabilitation.

43 Article 17(3), Regulation on Combatting Human Trafficking and Protection of Victims
44 Article 30(5), Regulation on Combatting Human Trafficking and Protection of Victims
45 Article 31(1), Regulation on Combatting Human Trafficking and Protection of Victims
46 See “Not for Sale” in Amsterdam. Not for Sale is a foundation that supports the operation of a shelter and a number of drop-in centres for workers in the Red Light District. The foundation also runs a café and a restaurant, where former victims of trafficking can work if they wish to. The profits of the café and restaurant are returned to the foundation, which finances the shelter and drop-in centres.
47 Article 24(4), Regulation on Combatting Human Trafficking and Protection of Victims
Adult victims with children should be given support to restore or strengthen their relationship with their children. The kind of support services required will depend on the nature of the victim’s relationship with their children, and their children’s needs. Victims who were forced to leave their families may require legal assistance to enforce their parental rights (see legal assistance). To help these victims reconnect with their children, shelters should ensure they have staff, or access to specialists, who are trained to provide social pedagogical support.

2.6 Support for child victims of human trafficking

Child victims of human trafficking may have health problems that require immediate, and possibly longer term, physical and psychological assistance (and, in some cases, psychiatric support). Shelter staff and other support workers should address the children’s physical and psychological needs before addressing other issues. Child victims who have been homeless or kept locked up for a long time may be malnourished or addicted to drugs. The victims may have ongoing physical disorders, mental development challenges, cognitive problems (for example, impaired decision-making abilities), or speech disorders. The trauma they experience may have also affected their emotions and behaviour (see 2.2 The first meeting).

During the identification phase, where the victim of human trafficking is a child, it is important to inform the child’s legal guardian unless there are grounds to believe that the guardian is involved in trafficking in persons. Children should be housed with other children of their own age and gender, appropriate for their maturity.

The Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse recommends the following process for interviewing children (Article 35):

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.

Returning the child to their family, provided the family was not involved in trafficking in persons, or arranging for the child to be placed into state care, in accordance with child protection laws, is a crucial part of an effective rehabilitation programme for child victims of human trafficking (see Turkey ratified the Convention on 07.12.2011, which entered into force on 1 April 2012.
Promoting a positive family environment for young adults who have been subjected to sexual exploitation is also immensely important. They need support to learn to rebuild trust, develop positive relationships and to avoid further manipulation and exploitation.

2.7 Rehabilitation of victims of human trafficking who are foreigners or stateless persons

A significant number of stateless persons or persons who are neither Turkish citizens or residents are victims of human trafficking and need access to shelter services. Working with these victims requires special skills, especially knowledge of foreign languages. Where available, it is useful to employ interpreters, or cultural mediators who can take cultural, religious and other issues relevant to the victim’s cultural heritage into account and guide shelter staff to provide culturally sensitive support. As noted, shelter services must respect and be responsive to the needs of each victim.

Under the Law on Foreigners and International Protection (No. 6458) and the Regulation, Turkey’s human trafficking laws apply to victims or suspected victims with, or who have applied for, international protection status or temporary protection status, and other foreigners. As provided for in the Regulation, foreign victims of human trafficking are able to obtain a residence permit initially for 30 days, and, in accordance with Article 88 of the Law on Charges (No. 492), dated 2 July 1964, they are exempt from paying fees. Residence permits may be extended for six months to three years.

The rehabilitation needs of foreigners or stateless persons are complex, as there is much that is uncertain. How long can the victim stay in the country of destination and who will decide where they will live? These issues will take time to resolve. Therefore, it is necessary to encourage victims to focus on healing and to be positive about the aspects of their rehabilitation that are in their control.

To enable victims to access shelter-based rehabilitation programmes outside Turkey, shelter staff should contact similar organizations or shelters in the victim’s country of origin. Matters to arrange include an initial meeting, a support service programme and efforts to locate family members.

Shelter lawyers should attempt to confirm the victim’s identity, recover or replace lost documents, and return the victim to their country of origin. The victim’s safety and willingness to return to their country of origin should be considered. Lawyers should defend the victim’s best interests and legal rights. This may raise significant questions. For example, law enforcement officers may question whether the victim was complicit in any illegal activities they committed, such as illegal border crossings or unlawful recruitment. In accordance with local and international norms, lawyers are required to defend the innocence, and advocate for the rights of victims, who were coerced.

III. SHELTER STAFF

3.1 Core staff and their functions

The composition of staff working in each shelter will vary according to the overall needs and resources of each shelter. To determine the most appropriate composition and number of shelter staff, the following should be considered:

- the maximum number of victims to be assisted at one time;
- the range of services offered;

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Article 22(1), Regulation on Combatting Human Trafficking and Protection of Victims
Article 20 ‘Residence permit’ and Article 21 ‘Extension and cancellation of residence permit’, Regulation on Combatting Human Trafficking and Protection of Victims
• the maximum duration of each victim’s stay.

Shelters that provide in-patient services and day care services must consider additional factors.

The standard shelter model incorporates the following:

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<tbody>
<tr>
<td>1.</td>
<td>Shelter (accommodation and food);</td>
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<td>2.</td>
<td>Psychological assistance;</td>
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<td>3.</td>
<td>Legal assistance;</td>
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<td>4.</td>
<td>Social-pedagogical services (including security escorts);</td>
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<tr>
<td>5.</td>
<td>Short-term job training courses.</td>
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</tbody>
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All shelter staff should receive specialized training about trafficking in persons, the needs, experiences and cultural and socio-economic backgrounds of victims of human trafficking, and how the needs of female, male, and child victims may differ. Shelter staff should also be educated about national and international approaches to and standards of support services.

Each social worker may provide services (as clients) for up to eight adults or six children at a given time. A lawyer may provide legal advice for up to 10 persons and a psychologist may assist 8–10 adults or 4–6 children at the same time.

A shelter manager oversees the shelter’s finances, resources and staff. Shelters should also employ a staff supervisor to supervise and support staff. The staff supervisor must be appointed by the shelter manager and may be a social worker.

A staff member may be hired to undertake one of the following categories of work:

• Direct counselling and/or psychological assistance;
• Shelter management;
• Procurement and financial oversight;
• Supervision and general care of residents apart from counselling services

Shelter managers are required to:

1. Coordinate the staff hiring process, the work schedule and the staff performance management process;
2. Determine victim intake and departure;
3. Maintain internal and external safety and security systems;
4. Ensure that services and written records are kept confidential;
5. Oversee the administrative system, and guide and direct staff and residents;
6. Coordinate staff training and development;
7. Arrange and chair weekly staff meetings;
8. Undertake strategic planning, and liaise with social partners and donors;
9. Ensure personal education and safety;
10. Supervise, and be accountable for, the shelter’s financial, human and material resources.

Social workers and counsellors are required to:

1. Conduct the initial meeting with the presumed victim and start the case;
2. Assess the victim’s needs and circumstances and fill out an Initial assessment form;
3. Develop the Individual action plan and present the plan for approval at a staff meeting;
4. Liaise with counsellors and other specialists according to the victim’s Individual action plan and Initial assessment form;
5. Provide the victim necessary information;
6. Provide general supervision and emotional support for the victim;
7. Monitor services to ensure the victim’s *Individual action plan* is followed;
8. Accompany victims to appointments with service providers and ensure the victim’s safety;
9. Build rapport with the victim;
10. Provide appropriate follow-up after the victim has left the shelter;
11. Complete all necessary paperwork and filing, and maintain confidentiality of records;
12. Attend weekly staff meetings and participate actively in the staff performance management process;
13. Ensure personal safety and professional competence.

**Social pedagogues provide the following social-pedagogical services for children and teenagers:**

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

**The role of the shelter psychologist is to:**

1. Assess the victim’s psychological state;
2. Identify the victims who need psychotherapeutic assistance and in-patient treatment;
3. Ensure the victims’ contact with psychotherapist and oversee their recovery;
4. Conduct all the necessary checks for assess victims’ needs and to arrange counselling;
5. Advise shelter staff about how to interact with and support the victims;
6. Provide psychological assistance to the victims;
7. Take part in discussions of *Individual action plans*;
8. Attend weekly staff meetings and case conferences;
9. Contribute to the professional development of shelter staff through providing training;
10. Adhere to shelter safety rules.

**Shelter staff are required to:**

1. Supervise victims and ensure that victims comply with shelter rules and safety regulations;
2. Ensure that staff and victims comply with sanitary rules and standards;
3. Supervise the use of the general area and adherence to the daily schedule;
4. Manage financial resources to ensure that victims’ basic necessities, such as sanitary products and food, are met;
5. Inform shelter manager of victims’ compliance with shelter rules;
6. Attend general staff meetings;
7. Ensure personal safety.

**Staff meetings**

To be effective, shelter staff must comply with performance standards and be aware of the priorities of shelter management and the roles and operational needs of all staff members. Therefore, staff meetings are essential. Managers must remain alert to staff work load and the additional burden created by attending meetings. Ideally, meetings should last 45 minutes, and no longer than an hour.

When organising staff meetings, the shelter manager should tell staff:

- the purpose of staff meetings;
• the dates the meetings will occur;
• whether all staff are expected to attend;
• who will chair the meeting (any staff member may chair the meeting).

Types of staff meetings

There are three types of staff meetings:

1. Organizational and administrative – these meetings allow staff to discuss administrative and organizational issues,
2. Case management – these meetings provide the opportunity for case conferences and discussion of work plans and the appointment of case managers;
3. Supportive – these meetings are for staff to discuss current issues, especially difficult cases, give feedback to the case manager and provide emotional support.

A single meeting may contain elements of all of the above, however meeting topics should be clearly distinguished in the meeting agenda, and topics kept distinct in discussions.

3.2 Supervision as a management tool

Supervision allows managers to protect the professional interests of victims, staff, management and the shelter. It’s core purpose is to promote compliance with professional standards.

The main purpose of supervision is to help staff understand and analyse their actions, their psychological health and their relationship with the shelter as a place of work. Supervisors must protect the psychological and physical well-being of their staff. Through setting clear performance expectations and respectfully working with staff, supervisors take concrete measures to support and strengthen staff performance and, in turn, service delivery for victims.

The purpose of supervision

1. Staff accountability: Supervisors evaluate staff performance according to shelter policies and defined performance standards and targets. Supervisors also set individual staff priorities and allocate work.

Each employee is accountable to their supervisor. Social workers are managed by supervising social workers. Supervisors report to the shelter manager or another staff supervisor. All employees are obliged to keep their supervisor informed of their cases and workload. Supervisors are obliged to support staff development and compliance with shelter policy and procedures. Supervisors must promote a best practice working environment.

A is a new employee. Supervisor notes down the following during a conversation with A: “I know that you were very anxious in our initial orientation meeting about shelter policy and procedures. I would like to talk about how you can effectively carry out your tasks. In this meeting we will discuss the maintenance of case files. I would like you to become familiar with how you develop care plans and discuss possible difficulties.”

2. Learning and development: Supervisors must facilitate professional development and training, so that staff are equipped to work more effectively and to proactively respond to victims’ needs as they change.
It is not possible to know everything; there is always room for learning and development. The performance management process should allow staff to identify their training and educational needs.

Supervisors should encourage and assist staff to identify their development areas and any challenges they encounter. Additionally, a supervisor can directly share their thoughts about staff development needs.

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 his support for P, however, he lacks the necessary skills to work with victims who have suffered sexual exploitation. Supervisor contacts training centres to find out about a course for M. She also recommends useful books and internet sites.

Supervisors are to provide information and identify professional development opportunities. Facilitating staff development is one of a supervisor’s key functions.

3. Support: Supervisors are responsible for creating a workplace that protects psychological and physical health. Supervisors must assist staff to effectively cope with workplace stress.

Staff must be given the opportunity to discuss the impact of their work on their health. Supervisors should also provide practical tips and identify other methods, such as training courses and working practices, that could help promote staff well-being.

Social work is not as an easy practice. It is a complex activity, emotionally and physically. Shelter staff will encounter problematic and difficult cases or situations. Emotional and psychological support is crucial. Open and honest communication between staff and supervisors about staff well-being is an essential part of emotional and psychological support.

B has been working at a support centre for victims of human trafficking for 10 years. He seemed very angry during the supervision session today. When his supervisor asked him to discuss how he felt, he said that he was upset and angry because a client had many bruises and scars on her body. The client was severely battered by her husband. The supervisor decided that B should talk about his feelings. Afterwards, they discussed the protection procedure for the client.

All purposes of supervision are closely interlinked. It is impossible to effectively supervise without providing support, promoting learning and development opportunities and encouraging staff accountability. Supervision is a necessity!

Staff management process

Clarify expectations at the outset

During the first staff management meeting, it is important to discuss the supervisor’s and the staff member’s expectations. Supervisors should not assume that the staff member understands their performance goals or their supervisor’s expectations. These should be stated clearly before supervision starts. Longer term employees may also like to discuss past experiences of supervision.

Supervision format

Staff management is more than open conversations among staff members on professional topics. Supervisors have management responsibilities for the staff they supervise. Accordingly, shelters should adopt the following management framework:

1. One-to-one: Manager or other experienced staff member supervises one member of staff.
2. **In pairs**: Manager or other experienced staff member supervises two members of staff.
3. **Peer-to-peer**: Two staff members at the same employment level supervise each other.
4. **Group**: Staff members at the same employment level receive supervision in a group from a manager or senior staff member.

**Supervision methods**

Staff members should not feel anxious or fearful about supervision but should be motivated to learn and develop. Supervisors should always seek to improve their supervisory skills, and adapt their methods to suit the needs and personalities of their staff.

**Intervention**

Supervision should be:
- Instructive - Provide advice and instructions;
- Informative - Give information;
- Reactive - Provide feedback.

**Mediation**

When assessing their staff member’s performance, a supervisor should:
- Encourage their staff to express their feelings;
- Invite staff to self-assess their performance;
- Support staff to pursue professional learning and development to enhance their knowledge.

Detailed information about supervision tools, including sample questions, is given in Annex 12.

**3.3 Professional burnout syndrome**

Burnout is a state of physical, emotional and mental exhaustion (a gradual loss of idealism, energy, motivation and care for clients and self.) Burnout is common in caring professions. Circumstances that can lead to burnout include insufficient training, heavy workload, low salary, administrative “red tape”, and unhappy clients.

The term “burnout” was coined by German-American psychiatrist Herbert Freudenberger in 1974 to describe the experience of staff in caring professions. According to Freudenberger, burnout is a state of exhaustion due to excessive demands on a person’s emotional, mental and physical energy and resources.

**Emotional symptoms:**

1. Aloofness;
2. Apathy;
3. Lacking motivation
4. Aggression (development of hostile behaviour towards colleagues or clients);
5. Feeling ineffective at work or doubting your professional skills.

**Physical symptoms:**

1. Fatigue;
2. Chronic exhaustion;
3. Headaches;
4. Easily startled
5. Blood pressure problems;
6. Feeling helpless;
7. Neck problems, back pain;
8. Tremors (clenching fists, crossing arms);
9. Weight gain or loss;
10. Shortness of breath;
11. Insomnia;
12. Sexual dysfunction.

**Emotional and cognitive symptoms:**
1. Feeling emotionally numb;
2. Pessimism;
3. Feeling detached;
4. Depression, or a sense of powerlessness or hopelessness;
5. Anger, aggression;
6. Anxiety, agitation, loss of ability to concentrate;
7. Self-blame, guilt;
8. Feeling hysterical;
9. Loss of ideals or professional perspective;

**Behavioural symptoms:**
1. Working for more than 45 hours a week;
2. Tiredness during work, failure to complete work tasks, a desire to “escape” work;
3. Loss of appetite;
4. Low levels of activity;
5. Self-harming, including developing a drug addiction;

**Workplace performance symptoms**
1. Decreased interest in new theories or ideas at work;
2. Lack of interest in alternative solutions to problems;
3. Preference for standard templates, old methods;
4. Lack of interest in innovation;
5. Low participation in, or refusal to attend, training or professional development courses;

**How to prevent burnout at the workplace:**
1. Be attentive to yourself, this will help you spot the first symptoms of fatigue;
2. Recognise the problem;
3. Stop looking for happiness or fulfilment at the workplace;
4. Balance your personal and professional life;
5. Stop living others’ lives. Live your life. Live with not for others;
6. If you want to help others, ask yourself first: Do they need urgent help? Can they cope without my help?;
7. Plan your day;
8. Take time off. Using the time away to rest and recharge promotes psychological and physical health;
9. Be aware of your own emotions;
10. Smile, even if you do not feel like smiling.
11. Aim to exercise for 30 minutes or more each day;
12. Learn how to say no;

*Regular supervision helps prevent burnout!*
IV. REFERRALS AND JOINT ACTIONS TO SUPPORT THE VICTIMS OF HUMAN TRAFFICKING

The National Referral Mechanism for victims of human trafficking involves not only the agencies coordinating Turkey’s anti-trafficking response but also the competent state agencies and non-governmental organizations that provide comprehensive assistance to victims of human trafficking at a national or regional level.

The National Referral Mechanism for victims of human trafficking promotes a holistic and need-based support system that complies with national and international standards.

The Regulation on Combatting Human Trafficking and Protection of Victims, dated 17 March 2016, outlines a framework for cooperation between central and provincial authorities for the identification, protection and support of victims of human trafficking. It is important to engage non-governmental organizations in the National Referral Mechanism. Cooperation among public and private organizations creates a more efficient and effective identification and support process. International and national best practice shows that state support for non-governmental organizations enhances the quality of service delivery and national efforts to counter trafficking in persons.

Joint activities should incorporate the following:

- A multidisciplinary approach to supporting the victims of human trafficking;
- Close cooperation among state agencies, non-governmental organizations and international organizations;
- Mutual exchange of information while maintaining necessary confidentiality;
- Detailed division of responsibilities and tasks;
- Consistency and coordination of all activities;

Support services for victims of human trafficking must be underpinned by the following principles:

- A commitment to protect the basic rights and freedoms of those who have become the victims of human trafficking and promote respect for, and the protection of, victims’ dignity and well-being. Victims are entitled to legal assistance, and legislation should allow for victims of human trafficking to claim compensation as victims of crime.
- A victim’s best interests are paramount.
- Ensure the provision of best possible assistance for victims of human trafficking without discrimination on the basis of race, gender, ethnicity, sexual orientation, religion, political beliefs, social class, place of residence, wealth, or other personal circumstances.
- All information regarding the victim must be treated with due regard for the victim’s right to confidentiality and privacy.
- All support services for victims are provided on the basis of the victim’s informed consent.
- Support services should be accessible, and free of charge.

The unique role of non-governmental organizations makes their involvement important at each stage of service delivery. Accommodation at a shelter is an essential yet complex form of assistance to administer. Non-governmental organizations are a key part of providing shelter accommodation for
victims of human trafficking. Governments can build necessary partnerships by outsourcing social services for victims of human trafficking to experienced non-governmental organizations.

**Cooperation among shelters, assistance centres and law enforcement agencies**

The Law on Foreigners and International Protection (No.6458), enacted on 4 April 2013, outlines the institutional and legal framework for Turkey’s anti-trafficking initiatives. The law establishes the Department of the Protection of Victims of Human Trafficking. Under the direction of the DGMM, the department oversees Turkey’s anti-trafficking programmes.

The Regulation on Combatting Human Trafficking and Protection of Victims, which entered into force on 17 March 2016, sets out the administrative and procedural arrangements under the Law (No.6458). The Regulation also attempts to align national legislation with the Council of Europe Convention on Action against Trafficking in Human Beings, which Turkey ratified on 2 May 2016. The aim and scope of the Regulation is to identify the rules and procedures concerning identification of trafficking victims, victim support programmes (including accommodation of victims), voluntary and safe return programmes, and residency permits for foreign victims. The protection framework established by the Regulation covers both foreign and Turkish victims of human trafficking.

As the coordinator of Turkey’s anti-trafficking services, the DGMM and its provincial directorates have the following duties and functions:

- Establishing, operating or outsourcing an emergency helpline;
- Informing the Chief Public Prosecutor’s Office and law enforcement agencies of notifications and complaints forwarded to the DGMM, its provincial directorates and the emergency helpline;
- Conduct the victim identification process without waiting for results of investigations or prosecutions;
- Interviewing victims and presumed victims of human trafficking and drafting a report outlining the result of the identification process;
- Based on the approval of the identification report, drafting the Human Trafficking identification form and carrying out registration procedures of the individual as a victim of human trafficking;
- Informing the victim about support services, undertaking procedures for referral to a shelter, and initiating residency permit procedures if the victim is a foreigner;
- Establishing, operating or partially operating shelters for victims of human trafficking; ensuring victims have access to a shelter or similar service organizations;
- Developing with the Ministry of Family and Social Policies procedures and principles for the delivery of support services for Turkish citizens identified as victim of human trafficking;
- Covering the travel or other expenses of victims during referral to shelters;
- Providing victim support programmes in full compliance with the victim’s informed consent during the reflection period and throughout the stages of investigation and/or prosecution;
- Requesting temporary financial support from the Social Solidarity and Assistance Foundation to meet victims’ basic needs;

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51 Article 108(1c), The Law on Foreigners and International Protection (No.6458)
• Operating and coordinating the voluntary and safe return of victims to their country of origin; covering transportation and other expenses (which could also be covered by a related institution or organization);

• Requesting that members of the National Referral Mechanism provide data, information and statistics about victims, human traffickers, the process of human trafficking, and judicial proceedings, noting that confidentiality is the primary consideration;

• Preparing an annual report on the nation-wide status of human trafficking, analysing the information, statistics and data that members of the National Referral Mechanism provided;

• Organising training and awareness-raising activities in collaboration with other relevant state, international and non-governmental organizations;

• Cooperating with line ministries, local authorities, non-governmental organizations, higher education institutions, academics, local and foreign experts and, in view of the transnational nature of the crime, with relevant countries, international and intergovernmental organizations;

• Providing secretarial and support services to the Commission; determining the Commission’s operating procedures and principles (see below).

As set out in the Regulation, the Commission is the national coordination unit for the fight against human trafficking. The Commission develops anti-trafficking policies, prepares action plans, and coordinates activities among state agencies, international organizations and non-governmental organizations. It is chaired by an appointed undersecretary from the Ministry of Interior (the National Coordinator). The Commission consists of representatives from the Supreme Court of Appeals, the Ministry of Justice, the Ministry of Family and Social Policies, the Ministry of EU Affairs, the Ministry of Labour and Social Security, the Ministry of National Education, the Ministry of Culture and Tourism, the Ministry of Foreign Affairs, the Ministry of Customs and Trade, the Ministry of Health, the National Human Rights Institution, the General Directorate of Turkish Employment Agency, the General Directorate of Health for Border and Coasts, the National Intelligence Organization, the Turkish Bar Association, the General Directorate of Security, the General Command of Gendarmerie, the Turkish Coast Guard Command, the DGMM, and the General Directorate of Local Administrations. As the DGMM directs, provincial commissions should be established to monitor the implementation of anti-trafficking initiatives.

The Commission has the following duties:

• Developing anti-trafficking strategies;
• Providing advice to key stakeholders about national action plans;
• Providing advice about the operation of the National Referral Mechanism;
• Instructing members of the National Referral Mechanism to deliver anti-trafficking programs;
• Developing policies that will enhance protection, accommodation and support for victims of human trafficking;
• Coordinating the collection and analysis of national and international data;
• Reviewing the annual report prepared by the DGMM;
• Proposing necessary amendments to Turkey’s anti-trafficking legislation;
• Contributing to Turkey’s efforts to combat trafficking in persons and to protect victims.

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52 Regulation on Combatting Human Trafficking and Protection of Victims.
53 Article 7(1), Regulation on Combatting Human Trafficking and Protection of Victims. For the Provincial Commission, see Article (9), Regulation
To increase cooperation between law enforcement agencies and non-governmental organizations, members of the National Referral Mechanism should undertake the following:

1. **Exchange data about human trafficking cases**

   Law enforcement agencies and support centres, including shelters, should strive to exchange information about trends, victim types and risk factors. The data should be used to refine service delivery and anti-trafficking strategies. Memoranda of understanding defining the scope of data sharing obligations will foster effective collaboration.

2. **Work together to protect victims**

   It is practical for law enforcement agencies and shelter staff to work together to implement shelter security measures. Shelter staff must notify law enforcement agencies of any threats to victims’ safety and immediately implement protection measures. Law enforcement agencies must proactively respond to identified threats.

3. **Jointly assess victims’ needs, and coordinate legal assistance**

   Legal assistance and redress is a vital part of comprehensive assistance for victims of human trafficking. Therefore, law enforcement officers must attend shelter meetings where victims’ needs and rehabilitation plans are discussed. Social workers and law enforcement officers should actively keep each other informed of the progress of the rehabilitation plan, including the provision of legal assistance.

   Shelter staff should act as a link between law enforcement agencies and victims. Shelter staff should support victims with any investigation, and help victims prepare for court appearances.

4. **Attend joint training courses**

   Joint training programs are an effectively way to promote cooperation and partnerships. Through interagency training programs, shelter staff and law enforcement officers develop mutual respect, and an understanding of the contribution each entity makes to the rehabilitation and protection of victims of human trafficking. Joint training courses also fulfil professional development needs and enhance the quality of services for the victims of human trafficking.

   For child victims, a shelter pedagogue or psychologist can attend an interview or ordered under the Regulation. Given the training and expertise of shelter staff, their participation creates an environment where children feel better supported to provide evidence against human traffickers.

   Providing cohesive, united assistance creates a more secure environment for victims and helps victims have confidence in the rehabilitation process. Collaboration encourages victims to work with shelter staff and law enforcement officers.

   According to international practice and norms, victims of human traffickers are not required to give evidence or testify against their traffickers. Cooperation with law enforcement must be voluntary. In international practice, victims are given a 30-day reflection period, counted from the date of the victim’s identification, in which to consider whether to cooperate with law enforcement.
BIBLIOGRAPHY


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Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery. Available at:


Annex 1. Algorithm of first interview

INTRODUCTION
«Do you feel ready to respond to questions related to your situation? Our conversation is strictly confidential»

1st step
(1st side)
«Please, read carefully and note down the actions committed against you»

Yes
No

1st step
(1st side)
«If you have suspicions about smth, I am ready to answer your questions.»

Yes
No

2nd step
«You have jotted down the indicator of human trafficking. State provides assistance to victims of trafficking»

Yes
No

2nd step
«Do you refuse because of concerns over your safety?»

Yes
No

3rd step
(2nd side)
«I can assist you in finding a safe place in the shelter»

Yes
No

Referral to a shelter

3rd step
(2nd side)
«Please indicate the types of assistance you need. What additional support do you need which is not indicated here? Are you willing to receive support in your residential area or do you consider moving to shelter? Can I take your contact details to reach you again?»

3rd step
(2nd side)
«Feel free to contact me any time. These are my contact details. Thank you for a talk»
Annex 2. Checklist for interviewing victims of human trafficking

1st side

(Please read carefully and mark the relevant indicators)

- Agreeing to work in a particular labour condition or perform particular services and later feeling cheated by different labour conditions and 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 refused to pay salary;
- Passport or other identification document was retained;
- Being forced to pay imagined debts;
- Being coerced to begging or engage in other illegal activities.

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

STATE SAFEGUARDS YOUR RIGHTS TO PROTECTION AND ASSISTANCE

2nd side

YOU HAVE THE RIGHT TO RECEIVE:

- medical assistance (medical examination and treatment);
- interpretation services;
- shelter or safe locations;
- psychosocial assistance (consultation, emotional support);
- social-pedagogical (restoration of social contracts, assistance with social adaptation);
- legal assistance (legal counselling and information about your legal rights);
- guidance on financial assistance to meet the basic needs;
- assistance for exercise of rights to other social payments;
- assistance with vocational education and supporting access to labour market;
- assistance with job placement;
- assistance to receive education and training services;
- access to counselling services provided by non-governmental organisations, international organisations, and intergovernmental organisations;
- assistance to meet the officials of your affiliated embassy or consulate;
- assistance with repatriation to the country of origin (for foreigners)

Additional notes
# Annex 3. Main indictors of a child-victim of THB

<table>
<thead>
<tr>
<th>Direct (objective) signs</th>
<th>Indirect (subjective) signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>- acts: recruitment, transfer, harbouring, offer or receipt of a child</td>
<td>Situational history</td>
</tr>
<tr>
<td>- trade in child, or other illegitimate agreements in relation with the child</td>
<td></td>
</tr>
<tr>
<td>(exchange, use, giving as a debt or gift)</td>
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</tbody>
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| Physical condition | Bruises, scars, twists, wounds, signs of pressing with fingers, traces of whopping with items such as belts or stick, traces of blow, burns (e.g. cigarette or lighter), fractures, wrench, injury to internal organs, sexually transmitted diseases, headaches, somatic diseases, enuresis, incontinence, stuttering, insomnia, alcohol or drug addiction |
| Psychological      | Retardation of development, lethargy, aggression, apathy, fit, mental block, aloofness, fear, anxiety, rage, depression, extreme inactivity, low self-esteem, feeling of guilt, shame, nightmares, suicidal attempts. |
| Behavioural reactions | Refuse to talk, finger sucking, swinging, nail-biting, verbal abuse, desire to do self-harm or harm others, trying to escape, eccentric attitude, changes in demeanour |
| Appearance         | Unkemptness, unseasonal clothing, too much make-up |

**Warning objective (direct) or subjective (indirect) signs (indicators) of victims of human trafficking**

<table>
<thead>
<tr>
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<th>Indirect (subjective) signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>- acts: recruitment, transfer, harbouring, offer or receipt of a child</td>
<td>Victim’s history</td>
</tr>
</tbody>
</table>
- **means**: fraud, deception, blackmailing, abuse of vulnerability, use or threat of violence or force, abuse of power, financial or other forms of dependence from others or coercion
- **purpose**: exploitation
- **trade in person**, or other **illegitimate agreements** in relation with the person (exchange, use, giving as a debt or gift)

### Indirect (subjective) signs

| Physical state                        | - Bruises  
|---------------------------------------|------------
|                                       | - Scars    
|                                       | - Wounds   
|                                       | - Burns (e.g. cigarette or lighter),  
|                                       | - Fractures, twists  
|                                       | - Injury to internal organs,  
|                                       | - Sexually transmitted diseases  
|                                       | - Headaches  
|                                       | - Sleeping disorder  
|                                       | - Alcohol or drug addiction.  

| Psychological                        | - Lack of control over the emotions;  
|---------------------------------------|------------
|                                       | - Lack of self-confidence;  
|                                       | - Rage, hostility;  
|                                       | - Aggression;  
|                                       | - Fear;  
|                                       | - Motiveless anxiety;  
|                                       | - Feeling of helplessness;  
|                                       | - Shock;  
|                                       | - Confusion;  
|                                       | - Memory lapses;  
|                                       | - Feeling of guilt;  
|                                       | - Depression;  
|                                       | - Suicidal attempts.  

| Behavioural reaction                 | - Crying;  
|---------------------------------------|------------
|                                       | - Reserved demeanour;  
|                                       | - Reluctance to talk  

- Trying to avoid the looks of others;
- Demonstrative behaviour;
- Self-blame and blaming others for what happened

<table>
<thead>
<tr>
<th>Appearance</th>
<th>Unkemptness, unseasonal clothing, too much make-up</th>
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Case examples of direct and indirect signs of human trafficking

Date:
16 year old Y is a first year student in vocational college. She is a minor with no legal guardian or custodian and lives in dormitory. Although other students leave for home, Y continues to live in dormitory during summer holidays. One day, she gets a proposal from one acquaintance to work as a babysitter in another city for good salary, free food and place for accommodation. Y agrees with the proposal and departs to another city in train accompanied by her acquaintance. She learns in train that she will provide sex service to truck drivers. She was forced to serve 7-10 customers a night, in return she was not given any payment but "work" attire and some food. Not enduring all this, she tries to escape. She is found and brutally beaten. Since then, she fears that if again attempts to elope, she will be killed. But one of the clients help her to flee.

Following can be considered indirect signs:
- Y’s age,
- gender
- social status - being an orphan,
- psychological state after escape - «Y feared that if she tries to run second time, she will be found and killed».

Following can be considered direct signs:
« …One day, she gets a proposal from one acquaintance to work as a babysitter in another city. » - recruitment,
« Y agrees with the proposal and departs to another city in train accompanied by her acquaintance.»- convey (transportation),
« She learns in train that she will provide sex service to truck drivers. » - deception,
- «Not enduring all this, Y tries to escape. She is found and brutally beaten. » - physical abuse,
- «She was forced to serve 7-10 customers a night, in return she was not given any payment but "work" attire and some food.» - sexual exploitation.
Annex 4. Ethical and safety recommendations for interviewing trafficked women

1. **DO NO HARM.** Treat each woman and the situation as if the potential for harm is extreme until there is evidence to the contrary. Do not undertake any interview that will make a woman’s situation worse in the short term or longer term;

2. **KNOW YOUR SUBJECT AND ASSESS THE RISK.** Learn the risks associated with trafficking and each woman’s case before undertaking an interview;

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

4. **ADEQUATELY SELECT AND PREPARE INTERPRETERS AND CO-WORKERS.** Weigh 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 details of her case are made public;

6. **GET INFORMED CONSENT AIMED AT RECOGNIZING 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 not to 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 RISK TO HER SAFETY.** Recognize 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 RE-TRAUMATIZE A WOMAN.** Do not ask questions intended to provoke an emotionally charged response. Be prepared to respond to a 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 an individual woman or that advances the development of good policies and interventions for trafficked women generally.
Annex 5. 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 safe-keeping when entering the shelter, and will be returned on departure from the shelter based on written protocol;

- No unannounced and unchecked visitors are allowed in the shelter at any time;

- Calls may be made if authorized by 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 close persons to them (friends, relatives, neighbours);

- Whenever 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 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 security rules mentioned above and the accountability. I was informed about my responsibility to ensure my own safety, safety of other residents and staff. I agree that incompliance with any safety procedure or rule may entail termination of assistance.

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

Signature....................                               Date.........................

Social worker______________
Annex 6: Registration card of service user

1. Last name ________________________________________________________________

2. First name ______________________________________________________________

3. Middle name ____________________________________________________________

4. Sex ______________________________________________________________________

5. Date of birth ____________________________________________________________

6. Nationality ______________________________________________________________

7. Place of birth ____________________________________________________________

8. Physical and legal address ________________________________________________

9. Identification card

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

9-1. Additional information _________________________________________________

10. Education ______________________________________________________________

11. Occupation _____________________________________________________________

Information about immediate relatives

<table>
<thead>
<tr>
<th>№</th>
<th>Relationship</th>
<th>Full name</th>
<th>Date of birth</th>
<th>Registered address</th>
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<tbody>
<tr>
<td>1</td>
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</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>1</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Infectious diseases (tuberculosis, hepatitis and etc.)

15. Health status __________________________________________________________

16. Referral organisation _________________________________________________

17. Signature _____________________________________________________________

18. Date ____________________

19. Full name and signature of expert filling the form ________________________
Annex 7. 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>Starting and ending 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 ……[name of city]…… (in Turkey since....)</td>
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High school education-specialization-vocational education

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

Financial status

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<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
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<tr>
<td>Type</td>
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<tr>
<td>amount</td>
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<tr>
<td>Expenses</td>
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<tr>
<td>Type</td>
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<tr>
<td>Amount</td>
<td></td>
</tr>
<tr>
<td>Debts</td>
<td></td>
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<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>General health status</td>
</tr>
<tr>
<td></td>
<td>Infectious diseases</td>
</tr>
<tr>
<td></td>
<td>Pregnancy or gynaecological</td>
</tr>
<tr>
<td></td>
<td>Tuberculosis</td>
</tr>
<tr>
<td><strong>Psychological</strong></td>
<td>Psychic state</td>
</tr>
<tr>
<td></td>
<td>Psychiatric diagnoses</td>
</tr>
<tr>
<td></td>
<td>Suicidal attempt</td>
</tr>
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</table>

### Addictions

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

### Psychosocial state

<table>
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<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>
<tr>
<td><strong>Spouse</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Children</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Social contacts</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Leisure time</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Marital status (religious or official marriage, early marriage)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Marital history</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Social assessment</strong></td>
<td></td>
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</table>

### Personal

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

### Assessment by social worker

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Initial opinion</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Determination of rehabilitation period</strong></td>
<td></td>
</tr>
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</table>
## II. REHABILITATION PERIOD

### SERVICE PROVISION DURING REHABILITATION PERIOD

<table>
<thead>
<tr>
<th>Services used during rehabilitation period and the changes the services brought</th>
<th>Was provided</th>
<th>Was partially provided</th>
<th>Declined the use of services</th>
<th>Wasn’t suggested</th>
<th>Rating the result of services on a 10-point scale (1 to 10)</th>
<th>Service providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Psychological assistance</td>
<td></td>
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<tr>
<td>Medical service</td>
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<td>Legal assistance</td>
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<tr>
<td>Education</td>
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<tr>
<td>Vocational courses</td>
<td></td>
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<tr>
<td>Job placement</td>
<td></td>
<td></td>
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<tr>
<td>Meeting the needs of children</td>
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<tr>
<td>Clothing</td>
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<tr>
<td>Food</td>
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<tr>
<td>Financial assistance</td>
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<td>Results of court proceedings</td>
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<tr>
<td>Adaptation to family</td>
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</table>

## 3. REINTEGRATION PROCESS

<table>
<thead>
<tr>
<th>Services used during rehabilitation period and the changes the services brought</th>
<th>Was provided</th>
<th>Was partially provided</th>
<th>Declined the use of services</th>
<th>Wasn’t suggested</th>
<th>Rating the result of services on a 10-point scale (1 to 10)</th>
<th>Service providers</th>
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<tr>
<td>Temporary residence</td>
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<tr>
<td>Psychological assistance</td>
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<tr>
<td>Supplementary</td>
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<tr>
<td>medical assistance</td>
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<td>Supplementary legal assistance</td>
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<tr>
<td>Adaption to family is achieved/not achieved</td>
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<tr>
<td>Finished vocational courses</td>
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<tr>
<td>Continues the work in secured workplace</td>
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<tr>
<td>Is living together with his/her children?</td>
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</tr>
<tr>
<td>Adaptation level to society</td>
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<tr>
<td>Contacts</td>
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<td></td>
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<tr>
<td>Change in economic status</td>
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<tr>
<td>Has a source of income</td>
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</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>
Annex 8. Individual action plan

Day/month/year ____________________________
(Full name and signature of the director)

_______________________________________________________________________
(title of organisation)

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>
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<td></td>
</tr>
<tr>
<td>2</td>
<td>Social-medical</td>
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<tr>
<td>3</td>
<td>Social-psychological</td>
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</tr>
<tr>
<td>4</td>
<td>Social-pedagogical</td>
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<tr>
<td>5</td>
<td>Social-vocational</td>
<td></td>
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<tr>
<td></td>
<td>Social-employment</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6</td>
<td>Social-cultural</td>
<td></td>
<td></td>
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<tr>
<td>7</td>
<td>Social-economic</td>
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<tr>
<td>8</td>
<td>Social-legal</td>
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</tr>
</tbody>
</table>

Review of individual action plan "__" ______20__

Social worker ____________________________

(signature) (Full name. date)
Annex 9. Provision of psychological assistance

(When admitted to the centre)

- Full name:_____________________________________________________
- Date of birth:  _______________
- Place of birth:   ___________________________________________
- General characteristics of behaviour:______________________________

- What has the victim experienced (trauma, psychological distress): Trauma. Psychological distress.______________________________________________________________

- Type of violence the victim has experienced as a result of exploitation (physical, psychological, sexual): ________________________________
- Violence experienced prior to exploitation (family, sexual):____________________________
- What is the reason for anxiety: ________________________________
- Complaints:_____________________________________________________
- Emotional state (fear, dismals, depression, anxiety, guilt, anger, moody, rage, aggression):____________________________
- Cognitive (logics, consciousness, concentration, mental activity, memory lapses):____________________________
- Motor skills (motions carried out when brain, eye, hand muscles work together)____________________________
- Complications of psychological distress (sleeping disorder, heart racing, nightmare and etc.):____________________________
- Alcohol, drug addiction:__________________________________________
- Communication skills (isolation, adaptation to social environment, communication):____________________________
- Marital status (children):__________________________________________
- Education:_______________________________________________________
- Employment and term of employment:______________________________
- Hobbies and skills ____________________________________________
- Self-management (impulsive, unexpected movement, inability to self-manage)____________________________
- Tendency to suicide (attempts or thoughts):

- Aggression in behaviour which can pose risk to others (mediocre, high):

- Psychiatric symptoms (hallucination, actions, behaviour, eye contact disorder)

- Referral to consultation with psychiatrist, addiction medicine specialist, therapist: ______________________________

- Rehabilitation period ( 1 month, 2 month, 3 month):____________________________
• Result of the first session:
• Result of the second session:
• Result of the third session:
• Final result:

Date:
Psychologist:
Annex 10. Shelter agreement

(Statement on leaving the shelter)

Full name______________________________________________________________

Date of birth_________________________Place of birth________________________

Physical address_________________________________________________________

Registered address_______________________________________________________

Education_______________________________________________________________

Social status____________________________________________________________

Marital status___________________________________________________________

Number of children_______________________________________________________

Target group a person belongs to __________________________________________

Contact details___________________________________________________________

Personal or family member's contact details (phone, email, FB, skype and 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 workplace? _________________________________________________

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

Can you return back to your family? _________________________________________

Do you need additional medical service? Please, indicate if any._______________

Please, evaluate the following services you have received in 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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 already completed rehabilitation period.

Social worker: ____________________________

Date ________________________________

PROFESSIONAL ASSISTANCE
Annex 11. Obligation for admission to shelter

1. General information

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

Benefit of services is dependent upon the active participation of shelter residents in rehabilitation process. You have to follow the below rehabilitation scheme during your stay in the shelter.

3. Scheme of rehabilitation process

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

1st week is a probation period. Service user undertakes health and psychological examination during this week.

2nd week is about needs assessment. Social worker works with the client and analyses the needs. Based on needs assessment client is referred to a relevant specialist. Individual plan is developed.

Lawyer and psychologist provides assistance to the client during 3-6 weeks based on individual plan.

Needs are reassessed in 7th week.

8th week - feedback is received from the experts, work with family is carried out.

9-12 weeks - preparation to reintegration. Finalising the work with the family and etc. - final decision is made.

Services cover legal, psychological assistance, appointment with the family and cater to the needs of the children. All the tasks assigned by the expert are precisely carried out by the resident giving his/her consent to participation in rehabilitation process. During rehabilitation, client makes decision jointly with the expert.

Phase 2. Period of stay for pregnant women and women with new-born child ranges from 12 months up 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 rehabilitation period (1-3 months) step in to reintegration process repeatedly with a new application. Reintegration process covers the following:

- Return to a family;
- Participation in vocational courses (for 2 months). Client attends vocational courses as chosen in presence of psychologist, based on legal requirements. Vocational courses are organized by the Ministry of Labour and Social Protection of Population. Client needs to attend these courses on regular basis.
- Workplace is determined one week prior to completion of vocational courses.
- 2-month labour activity is fund raising period providing for independent living. That is to say, person collects his/her income and sets about an independent life. Psychologist prepares the client to adapt to an independent life throughout this period. Lawyer decides if the documents are complete.

Clients refusing to undertake rehabilitation sign a statement of refusal and immediately embark on labour activity.
Phase 4. Monitoring phase covers **3 months period.** Person departing from the shelter gives his/her consent to monitoring. Monitoring is carried out in following frequency: **4 times during the 1st month, twice and once during the 2nd and 3rd** months accordingly.

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

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

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

**We hope that you will have a pleasant and beneficial stay in the shelter.**

I..........................................................was informed on requirements of rehabilitation and reintegration process. I am ready to abide by those requirements. I understand that a wilful violation of the agreement rules can entail termination of this agreement.

Signature: ______________

Date: ______________

Social worker__________________
Annex 12. Supervision tools

**Start of a session**
What has happened since our last meeting?
What would you like to discuss?
What are the news?
Has anything important happened since our last meeting?

**Core issue**
To your opinion, what is the underlying problem?
What impedes you?
What are your main difficulties?
What concerns you most?
What do you wish?

**Cause and effect relationship**
What was the cause?
What brought up to this situation?

**Detailing**
Can you talk in detail....?
Anything else?
What else do you think related to this matter?

**Analysis**
How?
Does it conform to your values/plans/life style?
To your opinion, what does it mean?
What do you think - is it possible?

**A look from outside**
Imagine that you are 95 years old. What would you narrate about your past?
How will you remember this after 5 years?
How is it connected to your life goals?

**Hypothetical situation**
If you could go back for x days in time, what would you do differently?
What would you do, if you had all the permissions?

**Results**
What do you want?
What do you expect as a result?
What will it bring to you?
How did you know that you have your achieved your wish?
What is your aim?

**Versions**
What are the possible ways for 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 a 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 anything similar happened?
What would you do, if you could start everything all over again?
What would you do if nothing had impacted your decision?

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

**Conclusion**
What did you conclude?
How would you characterise this situation?
To 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 this all in one picture?

**Personal preparation form for supervision**

- How do I feel myself today, right now? How did one week/month pass?
- What would I like to learn from today's session?
- What have I done since the last supervision?
- What are my achievements?
- What should I report? Why should I take responsibility?
- What knowledge, achievements do I need to have today?
Annex 13. Referral form

<table>
<thead>
<tr>
<th>İNSAN TİCARETİ MAĞDURLARI İÇİN MUAYENE İSTEĞİ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sevk eden kurum</td>
</tr>
<tr>
<td>Soyadi, adı</td>
</tr>
<tr>
<td>Doğum tarihi</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>İkamet adresi</td>
</tr>
<tr>
<td>Müllki idare amirinin soyadı, adı, unvanı imzası</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Sağlık Kurumunun adı</td>
</tr>
<tr>
<td>Sağlık Kurumu kayıt tarihi ve no</td>
</tr>
<tr>
<td>Teşhis</td>
</tr>
<tr>
<td>Tedavi</td>
</tr>
<tr>
<td>Tahakkuk eden fatura bedeli (toplam, TL.) (muayene, tahil, tedavi)</td>
</tr>
<tr>
<td>Muayene edinin soyadı, adı, unvanı, imzası, tarih</td>
</tr>
<tr>
<td>Onaylayanın unvanı, imzası, tarih, müühr</td>
</tr>
</tbody>
</table>

02/01/2004 tarih ve 25334 sayılı Resmi Gazete’de yayımlanan 05/12/2004 tarihli ve 2003/6565 sayılı Bakanlar Kurulu Kararı gereğince “Türk Ceza Kanunu’nun 201/b maddesine göre insan ticareti mağduru olduğu tespit edilen ve sağlık hizmetleri giderlerini karşılayacak durumda olmayan yabancı uyruklu hastalar, resmi sağlık kurum ve kuruluşlarıca sunulan sağlık hizmetlerinden yararlanmada 8/1/2002 tarihli ve 4736 sayılı Kanunun 1 inci maddesinin birincı fıkrası hükümden muafdır.”
* Bu Form doldurulduktan sonra sağlık kurum/kuruşu tarafından Sağlık Müdürlüğüne gönderilir.
Annex 14. Victim identification form

**TANIMLAMA BELGESİ**

<table>
<thead>
<tr>
<th>İnsan Ticareti Mağduru'nun</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adı Soyadı</td>
<td></td>
</tr>
<tr>
<td>Uyruğu</td>
<td></td>
</tr>
<tr>
<td>Baba Adı</td>
<td></td>
</tr>
<tr>
<td>Ana Adı</td>
<td></td>
</tr>
<tr>
<td>Doğum Tarihi</td>
<td></td>
</tr>
<tr>
<td>Doğum Yeri</td>
<td></td>
</tr>
<tr>
<td>Pasaport No</td>
<td></td>
</tr>
<tr>
<td>Türkiye'ye Gelme Amacı</td>
<td></td>
</tr>
<tr>
<td>Öğrenim Durumu</td>
<td></td>
</tr>
<tr>
<td>Medeni Durumu</td>
<td></td>
</tr>
<tr>
<td>Çocuk Sayısı</td>
<td></td>
</tr>
<tr>
<td>Ülkesindeki Adresi</td>
<td></td>
</tr>
<tr>
<td>Vatandaşlık Numarası</td>
<td></td>
</tr>
<tr>
<td>Düzenlendiği Tarih</td>
<td></td>
</tr>
</tbody>
</table>

Bu belge, sahibine;
1. 05/12/2003 tarihli ve 2003/6565 sayılı Bakanlar Kurulu Kararı uyarınca sağlık kuruluşlarından ücretsiz faydalanma hakkı,
2. İnsan ticareti mağdurlarının desteklenmesine yönelik faaliyet gösteren sigınmaevlerinde geçici süre barınma ve rehabilitasyon desteği, destek programına erişim hakkını,
3. Türkiye Cumhuriyeti Devletince bir sivil toplum kuruluşu ya da hükümetler arası kuruluş ile işbirliği halinde sağlanacak güvenli ve gönülü dönüş programına erişim hakkını verir.

(Bu belge; Mağdura 6458 sayılı Kanunun 48 inci maddesi uyarınca düzenlenecek İnsan Ticareti Mağduru İkamet İzni teslim edilene kadar geçerlidir.)
Bu belgede belirtilen hususları okuyarak anladım.
Türkiye Cumhuriyeti Devletinin bana sağlayacağı yukarıda da belirtilen geçici süre barınmayı içeren destek programına alınmayı kabul ediyorum.

Türkiye Cumhuriyeti Devletinin bana sağlayacağı yukarıda da belirtilen güvenli ve gönülü dönüş programına alınmayı kabul ediyorum.

Mağdurun Adı Soyadı
İmzası
Yukarıda açık kimliği yazılı olan şahsın İnsan Ticareti Mağduru Mülakat Raporundaki bilgi ve beyanlara dayanarak insan ticareti mağduru olarak tanımlanması hususunu olurlarınıza arz ederim. …/……/……

Tanımlama yapan personelin
Adı Soyadı
İmzası

OLUR
……/……/……
Adı Soyadı
İmzası
(İl Göç İdaresi Müdürü)