(Re) Building the Future

Terre des Hommes Projects and Programmes Working in Asia

Supporting the Recovery & Reintegration of Trafficked Children

A Handbook for Project Staff and Front-line Workers

Reviewers please note!

1. *There is a lot of other information that could be included in the handbook – however there is a need to balance including what is most important but at the same time not making the document so long that it will never be read or used. Do we need more information? And in which case what sections do you think it would be helpful to expand?*
2. *Any case studies to illustrate would be very useful. Some examples have been included but more would be helpful☺*

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Foreword

To be written by Tdh / Mirela ?

Acknowledgements

To be completed – to include:

Donors

Tdh members

Partner agencies – do we need to include the names of those attending workshops or is organisation sufficient?

Tdh other staff

Anyone else?

Definitions / Glossary

We have tried to keep this handbook as simple as possible, and to avoid jargon and technical terms. However, the field of child protection / child welfare is full of specialist words and concepts.

Unfortunately, often these words are used to mean different things in different places (within countries or even within organisations), or their meaning is not always clear. For this reason, to avoid any confusion, we use terms in the handbook in accordance with the working definitions below. Please note that many of these terms are discussed in greater detail in the relevant sections of the handbook.

Working Definitions:

Abuse - Any act or omission, which may be deliberate or accidental, which results in or is likely to result in significant harm to the child's well-being and development. There are four main categories of abuse; physical, sexual, emotional (sometimes called psychological) and neglect. Trafficking and exploitation are complex manifestations of these forms of abuse. **Violence** is also often used as a substitute word for abuse, however it is not used in the handbook since the way in which the term violence is used in everyday life can be misleading when applied to abuse (for example neglect may not be violent).

Assessment - The process of collecting information and making sense of this, in order to develop a plan to ensure that a child's needs are met.

Best Interests - The concept of ensuring that what happens / what plans are made places the most importance on the needs of the child and their welfare.

Care Plan - An action plan that is developed following an assessment which identifies key tasks and responsibilities in order to ensure that the needs of the child are met

Child - In line with international agreements and conventions, a child refers to anyone below the age of 18 years old, even if national law or policies or customary practices are different

Child Centred Care / Child Centred Approach - The concept of ensuring that services are provided in a way which places the greatest emphasis on the needs of the child rather than on the efficiency of the organisation or management / administration processes.

Child Friendly Approach / Child Friendly Procedures – A way of working which ensures that services are provided in a manner which is suitable for children, taking into account the age and development of the child.

Child Participation - Processes which take place to empower children by playing an active role in decisions that affect their lives. This can take two main forms: general consultation (for example on design of services) and specific individual involvement in relation to the child's own care plan and their life.

Child Protection - The protection of children either suffering or at risk of suffering from all forms of abuse. This does not mean the promotion of children's rights generally (as is sometimes understood), but specifically relates to protection.

Child Protection Mechanism - A protocol, procedure or way of working which may operate at local or national level which is designed to identify and provide services to children who are at risk of abuse / suffering abuse.

Child Protection System / National Child Protection System - The legal and policy framework together with services operating in a coordinated way to ensure that children are protected and their welfare is promoted. This involves various stakeholders including social services, health, education and police, together with NGOs and community groups (depending upon the specific country contexts).

Child Rights - Rights to which children are entitled under the United Nations Convention on the Rights of the Child, 1989, and which governments have given a commitment to upholding and fulfilling.

Counselling – An umbrella term that refers to the process of emotionally and psychologically supporting a child. There are many different understandings of counselling, ranging from giving advice through to helping a child to recover. Where a specific form of counselling is referred to this will be made clear, otherwise it is used in its broadest sense.

Exploitation - Abusing a child and for the benefit of a third party (another person) either in cash or in kind.

Investigation - In this handbook refers to the processes involved in undertaking a criminal investigation, for example prosecution of traffickers.

Rescue - The removal of a child from a situation of exploitation and abuse. This can be either through action by the police and / or child protection organisations or through the child seeking support (for example a street child who may have been trafficked attending a drop-in centre).

Recovery - The process of working through experience and healing hurts which have been caused through abuse, in order to move on.

Reintegration - The process of returning a child to their family or community or to a substitute family / alternative community. For older children this also includes the move to independent living as an adult. This process is sometimes referred to as **rehabilitation**, although this is not favoured because rehabilitation in some contexts is associated with reforming criminals and addicts.

Repatriation - In this context is used specifically to refer to the legal and administrative procedures which are associated with returning a child who has been trafficked across international borders to their home country.

Resilience - The characteristics and skills of a child which help to protect them from the worse effects of abuse, and which enable them to recover.

Social Welfare Department – A government department or ministry which is responsible for social care and child protection. Depending on the individual country, there may be one or more departments (or none!) that has this responsibility. They can have various names – such as Social Affairs, or Social Services.

Trafficking - The process of moving a child from one place to another for the purposes of exploitation[1].

Two other terms have been used in the handbook, and which are important to understand:

There is a lot of debate about the use of the word **'victim'** in order to describe children who may have been trafficked as it is felt that this label can trap children in situations of powerlessness. For this reason that term **'survivor'** is preferred by many. However both of these terms are problematic because they define and make judgement about children. In this handbook therefore the term **trafficked children / children who have been trafficked** is used because it is purely descriptive of what has happened to children.

The term **'worker'** is used to mean anyone who works in a project or service which provides support and assistance to trafficked children, either as a paid member of staff or a volunteer. Where a particular role, for example teacher or counsellor is referred to this is noted.

Acronyms:

TDH -   Terre des Hommes

UNCRC -   United Nations Convention on the Rights of the Child, 1989

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[1] A much more detailed definition can be found in…….

1. Introduction

Purpose of the Handbook

The primary purpose of this handbook is to support project workers in schemes supported by TDH which are focused on trafficked children, and increase their understanding. However it is hoped that the materials may be of use, at least in some part, to other organisations or programmes for abuse children more generally.

Clearly given the diversity between countries in Asia, and differences in the operation of various organisations, it is not possible to provide a complete guide. What is intended is that the handbook explores the principles underpinning work with trafficked children and examines the main processes involved. Consideration is also given to dilemmas and issues that workers should take into account.

How the Handbook was Developed

The handbook was developed within the framework of the programme (XXXXXXX). In addition to a review of existing literature, two sharing workshops (one in Asia and one in South Asia) were conducted with TDH and their partners in order to explore current practice. The outputs from these workshops together with information from the review of literature and supplementary information provided by the consultant were then compiled into a draft document. This document was then distributed for review to partners for feedback.

Inevitably when workers have had training from a variety of sources and have many years experience 'good ideas' are adopted and elaborated over time. While we have tried to ensure that all material is correctly referenced, in some cases it has not been possible to identify the original source. If you believe that we have not accurately acknowledged your work, please contact us and we will be happy to make any necessary amendments.

Format of the Handbook

The handbook has been divided into sections, with each section covering a different aspect relating to the reintegration of trafficked children. This has been done as a way of systematically organising the material. However, it is important to note that there is considerable overlapping between the sections, and that each aspect affects the others, and should not be considered in isolation.

Terre des Hommes' Experience in Asia

TDH has been working in Asia for many years, in particular focusing on programmes for trafficked children. TDH recognises that advocacy is a core element of their work in effecting change in children's lives. However TDH considers it important that advocacy messages are based upon concrete experience from the field and so for this reason support numerous partner agencies to implement direct child protection and child welfare programmes.

2. Typical Effects and Consequences of Trafficking

Rarely, if ever, is a child left unaffected by the experience of being trafficked. Some consequences can be acute (ie serious and immediate), while others may be longstanding with their effects lasting for years. Particularly with regards to the psychological consequences, these can impact on a child's life and follow them into adulthood.

For children who are trafficked an additional complication is the age at which the child is trafficked. We learn our ideas about ourselves and develop our identity partly as a result of the relationships that we have with others. Where children have not had the opportunity to grow up in a loving home or where they may have only experienced adults who are abusive, children may develop 'skewed thinking' and develop unhelpful attachments to inappropriate adults (such as the abuser), placed themselves in situations of danger / increased risk and

develop unhealthy and unhelpful ideas about themselves and the nature of relationships. This is particularly the case when children may have been lied to about the reasons why they are trafficked (for example being told that their family did not want then or that their parents are dead). This can result, among other things, in an inability to trust others and low self-esteem.

In terms of psychological wellbeing, the trafficking in children has three main dynamics Firstly the impact of separation from family and the effects of abuse on the child's psychological, social and emotional development, and secondly the impact of the abuse itself on the child. These two effects are, of course, intimately linked. In addition the child may suffer further emotional, mental and psychological problems because of the way in which the effects of the trafficking impacts on their lives, and how this affects the nature of the relationship between the child and their community and society more generally. For example, if one of the effects of the abuse for a child is low self worth, this may affect future relationships that the child has and their ideas about their future. This could then lead to a compounding, or multiplication, of the feelings of low self worth and other unhelpful negative feelings and create additional problems for the child, even once they have been removed from the situation of trafficking.

Feelings of loneliness, sadness and loss are common emotions. Anxiety and fear can remain for a long time even when the danger has passed, and children may continue to feel vulnerable, threatened and fear for their own and / or family members' safety. Hostility is also typical – as is a sometimes overwhelming need to control situations. Pseudo-maturity, that is appearing to be more mature than is developmentally appropriate, is also a feature because children have often had to learn that they need to take care of themselves and adults are not a source of support and protection.

In addition to physical and psychological consequences of trafficking the effects of trafficking can also be felt in other areas of children's lives. Stigmatisation and marginalisation can further compounds children's emotional and psychological states and impact on their lives. For example not being able to access education may result in reduced opportunities for viable employment and income generation in the future. This means that a child may have to, by necessity, return to situations of exploitation as an adult as a means for survival.

> **!∎** Children and adults may see the impact and consequences of trafficking very differently. Some children may see their behaviour, which we might understand as being a symptom of the abuse they have experienced, as being 'OK' or acceptable.
>
> If this is the case, then it may be especially challenging for workers to be able to help the child to be able to access the support offered.

Table 1 below, summarises some of the typical consequences of trafficking. However it is important to remember that the impact of trafficking on a child is very individual and is influenced by three main factors:

1. **the individual character skills and attributes of the child**

2. **the age the child was first trafficked and their previous experience of care**

3. **the nature and duration of trafficking and exploitation**

A fourth factor which has consequences for the child is the help and support that is offered to the child once they have become identified as a trafficked child. This is because sometimes services, which are designed to support and protect children actually do more harm if they are not carefully considered and based on the child's needs. For example, making children undergo intimate medical procedures when they have been sexually exploited can be just as distressing as the original abuse if not carried out carefully and using child friendly approaches.

Additionally the effects of trafficking may almost certainly result in behaviour patterns developing. If these are not addressed in a sensitive and suitable way, then it is possible that these behaviours may continue or get worse, and impact negatively on the child and their future life. One example of this would be where a child believes that they need to look after

themselves, otherwise nobody will. This might lead to them rejecting help and support of workers, which may result in the worker becoming frustrated with the child and thus rejecting them, increasing feelings of being alone. Another common example is where children self harm, which can sometimes be seen as a way of 'seeking attention', and can be difficult to deal with, but which may be very dangerous for the child if the workers do not know how to respond.

Table 1: Summary of Typical Effects & Consequences of Trafficking	
FACTOR	**POTENTIAL CONSEQUENCES include**
MAIN FORMS OF ABUSE	
Physical abuse & Neglect	Physical health problems, including death, contusions, cuts, burns, broken bones, failure to meet developmental milestones, emotional and psychological distress
Emotional Abuse & Psychological Harm	Lack of interest, hopelessness about the future, feeling worthless / low self esteem, depression & suicidal thoughts (including self harm), inability to trust others, fear, panic spells, restlessness, nervousness, rage and violent outbursts, need to be in control and post traumatic stress disorder
Sexual abuse	Sexually transmitted infections (including HIV), pelvic inflammatory disease, infertility, vaginal fistula, unwanted, pregnancy, unsafe abortion, poor reproductive health, physical injury and emotional / psychological distress
Secondary Effects	
Development of poor social skills and coping mechanism	Inability to develop and maintain appropriate relationships, placing self in harmful situations, violence, misuse of substances such as drugs and alcohol (leading to overdose, drug or alcohol addiction, mental health problems and physical health problems as a result of effects of substance on body)

Table 1: Summary of Typical Effects & Consequences of Trafficking	
FACTOR	POTENTIAL CONSEQUENCES include
Economic exploitation - including debt bondage, deceptive accounting	Malnutrition / developmental milestones not met as basic needs not met, risk-taking, (to repay debts), insufficient funds to pay for care (where required), lack of educational opportunities
Legal insecurity - eg forced illegal activities, confiscation of documents	Restriction from or hesitancy to access services and protection
Marginalisation – such as from structural and social barriers (isolation, discrimination, linguistic and cultural barriers, difficult logistics and administrative procedures) and stigma and rejection from society)	Unmet needs, lack of opportunities to access services and secure protection, difficulties in reintegration and acceptance by families and communities, lack of opportunities for viable income generation and independence as adults

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However much we try, can we every really assess the effect and consequences of trafficking on the lives of individual children?

Even after working with a child for a long time, there will still be areas of their lives and their experience that they may not choose to share.

It should be remembered that as a coping mechanism children can 'block out' painful experiences, or seek to minimise these (either consciously or unconsciously). We need to be very careful when working with children who have been trafficked not to 'destroy' their way of coping with life in our efforts to try and understand in order to help.

3. Conceptualising Recovery and Reintegration

In thinking about the support to be provided to trafficked children, three main stages are important to understand:

RESCUE: The point at which a child is removed from a trafficking situation. We often think of this as being as a result of adult intervention (for example because a brothel has been raided by the police) but sometimes trafficked children do refer themselves to services. For example street children who may have been trafficked sometimes use drop-in centres.

RECOVERY: The stage following rescue, during which a child comes to terms with their experiences, works through their experiences and heals, and begins to learn new skills for life and ways of relating to others.

This is often a very difficult time of adjustment for the child, and sometimes there is a temptation to return to situations of exploitation (which may place a child in very risky situations) as this is what feels 'safe' and known.

REINTEGRATION: The point at which children are returned to their families / communities or (if that is not possible) placed in a substitute family / community. For older children, this also includes the move to independent living as an adult.

While reintegration can be considered the 'final step' this can be the most challenging because there is a tendency to be very optimistic (especially if the child is returned home) but without careful consideration about the situation that the child is being reintegrated into, and if there is no or little

follow up support, there is a high risk that the placement will breakdown and the child will end up either being re-trafficked or exploited.

The process of recovery and reintegration is often seen as being linear – in that one stage follows the other. However this is partly a distinction which is convenient for services and organisations to make, because in fact, the process is more circular, as shown in Figure 1 below:

REINTEGRATION

Reconnecting with society and developing skills for the future

RESCUE

Establishing safety – both physical and emotional

Children who self refer or who are not formally rescued by police / child protection agencies, may repeatedly seek support and then reject / distance themselves from more intensive help

RECOVERY

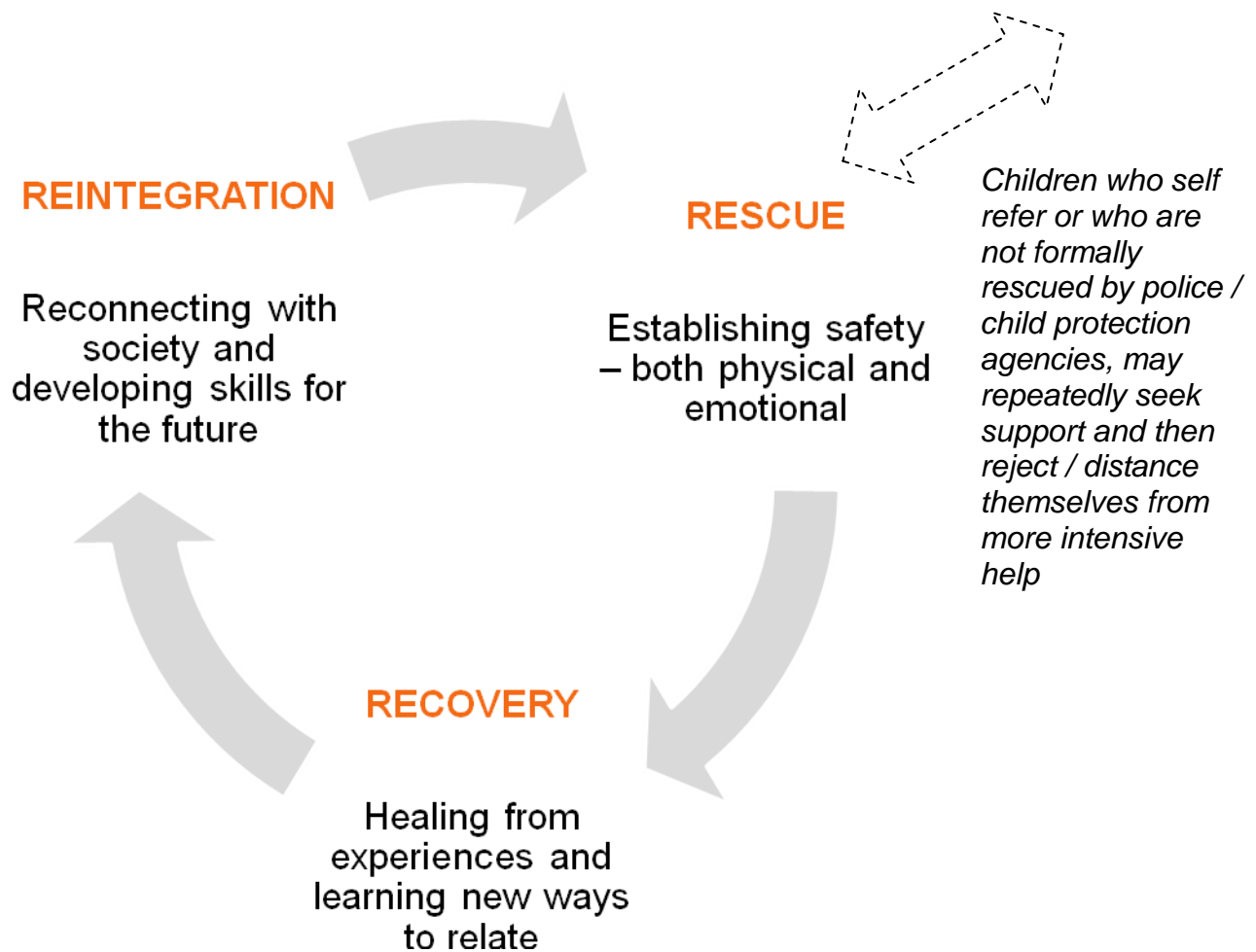Healing from experiences and learning new ways to relate

Figure 1: **Interlinked Process of Recovery & Reintegration**

The reason why the process is circular is that lives are complex!   Unless a child feels safe they will not be able to work through their experiences (as all their mental and emotional resources are preoccupied with being unsafe) and it will be difficult to reintegrate into society. However, once reintegrated into society, what happens to the child (for example if they are accepted) has a knock on effect to the child's feeling of safety – either reminding them of past situations or reinforcing new ideas that they may have about themselves. This means that the cycle of recovery and reintegration can either be helpful or unhelpful depending upon what happens during each stage, and the support that is given to overcome any difficulties.

!■ In providing services workers must be concerned with not only what they are doing at that time in relation to what has happened in the past to the child, but also with consideration of the future life of the child, through to adulthood.

4. Supporting Physical, Emotional and Social Well Being

The goal of any reintegration project should be to support the physical, emotional and social well being of the child. While it takes resources, supporting the physical well being of a child (by providing food, clothes, health care etc) can often be most easily anticipated, and provided.

More difficult to do, particularly as it is sometimes difficult to assess and not so readily apparent, is to promote the emotional and social wellbeing of a child. However, this is of great importance, since we know that emotional world of a child has a strong impact on their lives. In fact, research shows[2] that in the longer term, an emotionally warm environment,

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[2] Insert reference…………….

where children feel accepted, valued and cared for, is more important than the physical conditions that they live in and experience. Although of course children must have their basic physical needs met otherwise they will not survive.

The emotional environment of a project is critical, and this needs to be set from the moment that the child first comes into contact with workers. Workers who are consistently caring and available, even if they do not always agree with a child or let them do what they want, can play a huge role in the successful reintegration of a child, as they help children to develop new ideas about themselves (for example increasing their self esteem and confidence) and give a chance to experience different kinds of relationships with adults which are non-abusive. The good news about creating a warm emotional environment is that, while it can be difficult to do, it is cheap and requires no special resources. All that is needed is for workers to adopt behaviours and attitudes which demonstrate, through constant reinforcement, that the child is important.

The stress of moving into a project / being rescued can also be difficult for children to cope with, so having someone that helps them settle in, such as another child, and nominating someone to be the key worker who the child can develop a close relationship with, helps set the tone that the project is a place where children are valued.

Control & Behaviour Management

It must be remembered that all children who have been trafficked have experienced a loss of control in their lives. This can have a profound effect on the way that the child sees them self (as worthless) and can also led to behaviour problems (which can create additional problems for the child) particularly as the child struggles to regain control.

Many behaviour problems in projects (and after the child is reintegrated) are as a direct consequence of the child's need for control and / or are a symptom of other consequences of trafficking. For this reason, workers who are able to appropriately manage behaviour in a way that does not cause further harm can contribute to the recovery and reintegration of the child.

Since unhelpful behaviour patterns have been set overtime, it should not surprise workers if their initial tactics for managing behaviour does not work, and that they need to continue to persevere with the strategies. We need to also remember that the behaviour always makes sense for the child, even if they cannot explain it, and it does not seem helpful. We need to help children learn new ways of relating and behaving.

General strategies for encouraging good behaviour and managing difficult / challenging behaviour include:

- **Wherever possible *ignore bad behaviour and concentrate on good behaviour*** –
  Children want attention, by noticing the good things that they do we can encourage children to do this more often. Often a reward for good behaviour is praise.

- **Criticise the behaviour and not the person** – ie 'that was a stupid thing to do'…..not 'you are stupid'' –
  Trafficked children typically already have poor self-esteem and low sense value (even if they sometimes give the opposite impression and seem very confident); externalising the behaviour allows the child to see themselves as separate, and hence able to decide to do things differently in the future.

- **Be consistent** –
  Children need to feel secure – part of this comes from knowing the 'rules'. This includes how workers will react.

- **Give 'good' and positive messages** –
  Noticing and commenting on the things that children are good and skilled at helps build self esteem.

- **Create opportunities for learning** – eg 'As you spilled your drink this time, remember next time not to fill the glass so full'

Enable the child to see that mistakes can be made, and that this is not a threat to the relationship with them, which will continue despite the incident.

- **Use positive phrasing** (wherever possible) – eg Not *"don't make a mess'* but *"please remember to clean up after you have finished" –*
  This enables the child to have interactions where everything is not negative and thus increasing self-esteem.

- **Use distraction before the situation escalates** –
  It is better to avoid a conflict than to have to deal with it. Humour can often be a good way of defusing a situation but we need to use this with care, so that the child does not feel like we are laughing at them (and which may negatively impact on self esteem)

- **Be clear about what is expected, and about what will happen if not** –
  Don't assume that the child knows what you want, and instead be explicit about 'what' you want them to do. This is particularly important when children are new to the project and do not know the 'rules' and what is expected of them.

- **Increase the child's sense of control** - by giving choices and including them in decisions, even if it may not be appropriate for them to have the final say.
  This increases the child's perception of being in charge of their life and reduces feelings of powerlessness and vulnerability. By doing this the child will learn that they can get what they want without having to 'act out' (e.g. by having temper tantrums).

- **Be seen to be fair and give opportunity to tell their story** –
  Trafficked children often feel victimised and powerless; they need to see that it is possible to have relationships with people where they are not exploited. This includes making sure that any punishments are not punitive and overly harsh.

- **Allow child to take responsibility for a task / well being of others** –

This will help the child have a sense of achievement and importance and raise self-esteem (being careful not to place other children at risk or place the child in a situation where they may feel overwhelmed with responsibility.

- **Listen and empathise with the feelings / views that are being expressed, (or which you think are there) even if you don't agree** -
  This helps children to appreciate that their thoughts and feelings are important and will be listened to, and helps to reduce the need to 'act out' to be heard, or to get their own way

- **Apologise if you are wrong, giving an explanation (if appropriate) for your action** –
  If we do this we can show children that everyone makes mistakes but that lessons need to be learned from them. This will also help build trust and respect between workers and children.

- **Remove onlookers or the child from the situation** -
  Particularly when a child's behaviour is distressing to other children (for example if they are harming themselves and becoming violent) it is important to remove other children from the situation.

  Although 'time out' for cooling off can be useful, one of the problems of using this technique is that it can reinforce a child's sense of isolation and rejection. A more helpful tactic is to bring the child closer to us, rather than push them away, but at the same time remove them from the situation. For example if there is a fight, one idea could be to send the child to another room alone, but it would be better to suggest that the child went somewhere with a worker.

Developing Social Skills

As has been already mentioned, children who have been trafficked have not always had the opportunity to learn appropriate ways to interact with others. This is something they need to learn to do if they are to be successfully reintegrated into their own / another community, and to have a fulfilling and productive life as an adult.

A high self esteem and self worth, and confidence are the foundations for positive social skills. People who are secure about themselves are more able to have mature and balanced relationships with others. There are many things that workers can do to help increase self esteem of children, and increase their sense of importance and value. As with many issues concerned with emotional well being, it is not just the case of what a worker says, but how they behave.

Simple ways of helping a child to increase their confidence and self esteem include:

- Giving positive messages and praise
- Providing positive role models
- Encouraging pride in appearance
- Giving responsibility where appropriate and encourage helpfulness
- Listening and responding to what the child says
- Creating culture of 'belonging' and encourage participation

Social skills can be improved and developed in a number of ways as shown in Table 2[3]:

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[3] Note this table is a modified version of one that originally appeared in…….

Table 2: Developing & Improving Social Skills	
Activities – such as craft and music / drama plus day to day activities such as cooking and light chores such as cleaning (if seen as helping out and not a duty)	*Can help develop:* • Ability to share • Communication skills • Experience of success / failure & winning/losing & ways to cope with this • Ability to participate • Reduce impulsiveness & learn patience (taking turns) • Self esteem
Games - ball games, cards, board games	
Group work	Can be used to explore specific issues & develop particular skills, for example, keeping safe, assertiveness and anger management
One-to-One Support – including explanations & mentoring from staff	
Modelling by staff	'Shows' children ways of being that they can imitate, and alternative ways of handling situations
Outside Activities & Groups	Provide different forums for children to explore, acquire and practice their social skills and have different experiences

Coping Skills

Everyone needs to find ways to cope. For some trafficked children however, the strategies that they have developed to cope with their life and their experiences, may negatively impact upon their future life.

Working with children to help them develop their coping skills can be useful, but at the same time workers must ensure that they do not remove the coping skills that a child has – even if they are seen as undesirable – but instead offer alternative ways of coping for the child to

adopt.   Just trying to replace the existing coping mechanism may leave children in a dangerous position of having no way to manage their feelings.

Specific techniques, such as meditation or listening to music to relax and calm down, as well as breathing exercises, writing and drawing thoughts and feelings can all be helpful techniques for children to learn. As is the ability to be able to seek out appropriate support when necessary.

> **!** Every activity and every social interaction can be an opportunity for self development and growth and can, **_in itself,_** be helpful for a child in terms of increasing their emotional and social wellbeing.

Empowerment of Children through the Process

Much emphasis is rightly placed on the importance of child participation and empowering children to be involved in decisions that affect their lives, helping them to take control. While child participation is often seen as a separate activity, and can be (for example taking part in consultations) the best way to empower children is through the processes in the project and by incorporating their involvement at every stage.

Peer support, peer education and peer advocacy schemes (in which children play the leading role in the activities) can be effective ways of engaging children and helping them to both develop confidence and feel that they are making a difference and to learn new skills. Additionally since children often turn to other children first for help, or often are more likely to listen to what children say rather than the advice of adults, children can also play a key role in the protection of other children, and support them in their recovery and reintegration. Children can also be involved in community-level prevention & advocacy efforts to address stigma and discrimination.

The establishment of peer support / education / advocacy schemes must always be undertaken with careful consideration for the safety of the children involved. It is also necessary to ensure that schemes are inclusive, and that they are carefully supported.

Helping Children Move through Traumatic Experiences

Hopefully through supporting the emotional and social wellbeing of children, workers will have gone a considerable way to helping a child move through their traumatic experiences (and assisting them with their recovery). Some children may need additional support, perhaps with some need specialist professional care for some, for example from trained and experienced psychologist if they have post traumatic stress disorder.

We need to bare in mind that the reactions that children may experience (such as sadness, shame, isolation and anger) are perfectly natural responses to the situations that children have experienced. In fact, to some degree, a child who seems to not be affected is more concerning. Overtime, as the child begins to feel safe, learns to trust and begins to develop new ways of relating to others, we should expect to see a decrease in the negative feelings and behaviours, although these may resurface at times of stress, such as when the plans for a child change or they know that they are going to move (even if they are happy with the move).

Children need the opportunity to come to terms with what has happened to them, and to build a new life. Sometimes we can think of this of 'getting over' what has happened to them, but it is debatable if children can ever get over being trafficked. It is perhaps more true to say that it is a case of learning to incorporate and deal with what has happened, and to plan for a future that is positive and hopeful.

Time and space is needed for children to work through their experience at their own pace and in their own way. A typical solution offered to children is counselling, but this may not always be what the child wants or needs. Some children find the process of talking difficult and

would rather not revisit what has happened to them, while others may find sharing their experiences very helpful.

Unfortunately there is a great deal of variance in the quality of counselling offered to children who are trafficked (not specifically in projects supported by TDH but more generally). Counselling, or talking about problems, is a Western concept and may not make sense or fit with some children, perhaps even causing more distress if the child feels they have to participate. Indeed it has been argued that in some situations counselling is inappropriate and can be actually harmful[4]. Other kinds of support, such as spiritual guidance and rituals may have much more meaning to the child and be more helpful.

Given the available resources, a range of opportunities for children to explore their emotions, if they wish, can be beneficial. This can include options for expression through art, music, drama and storytelling, writing and creative activities. Such activities do need resources and so may not be feasible especially in contexts where there are limitations on training and capacity building / professional skills and finances. However, listening and providing emotional support, if that is what the child wishes, can still be readily provided by workers with a limited amount of training.

Even the 'best counsellor' or therapist, is only working with the child for a limited amount of time. What happens during the rest of the day, and the way in which this contributes to children's recovery and healing is just as important. Workers, who are responsive and caring, can play an important part in helping children in their recovery.

5. Determining Best Interests

In order to determine what is in the best interests of the child we need a careful assessment of the child and their situation. The basis of this should be a clear understanding of the needs of the child.

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[4] Insert reference – Western Psyhcology paper critique

It is important to understand that when we talk about the needs of the child, we are not moving away from a rights based approach to work. It is possible to consider needs, within a rights based approach. Indeed Article 3 of the UNCRC specifically directs that the best interests of the child should be of utmost importance, and this can only be done in relation to a child's needs. A child's needs are closely associated with the age and development of the child – for example, how we might interpret and fulfil the right to education will be very different for a six year old, compared with a child of 15 years old.

[REVIEWERS PLEASE NOTE – at the moment the handbook does not address child development specifically – would it be useful to include in the appendix a summary of child development milestones? I am conscious of the fact that this has been replicated in many publications……..]

Understanding Children's Needs

One model that workers often find useful in thinking about the needs of children (and adults too!) is Maslow's Hierarchy of Needs[5], as shown in Figure 2.

[INSERT DIAGRAM – size to depend on space]

Figure 2: **Maslow's Hierarchy of Needs**

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[5] Insert reference for Maslow – if possible from one of the resources cited in the reference section with page number…..

Although this was model was developed many years ago, it still holds true, and shows that it is important for certain needs to be fulfilled before other needs can be met. This strongly ties in with the process of recovery and reintegration (Figure 1) which also proposes that a child needs to feel safe and have their basic needs[6] met before they can give any energy to their recovery. An important aspect of meeting basic needs is that, by providing something tangible and real for a child, this can lay the foundations for beginning to develop a relationship of trust with the child, showing them that workers are adults on whom the child can rely.

Undertaking Assessments

To identify what a child needs, and from that to work out what is in their best interests, it is important that a thorough assessment is undertaken. There are various kinds of assessment (which are explored later in this section) however, they all follow the same steps:
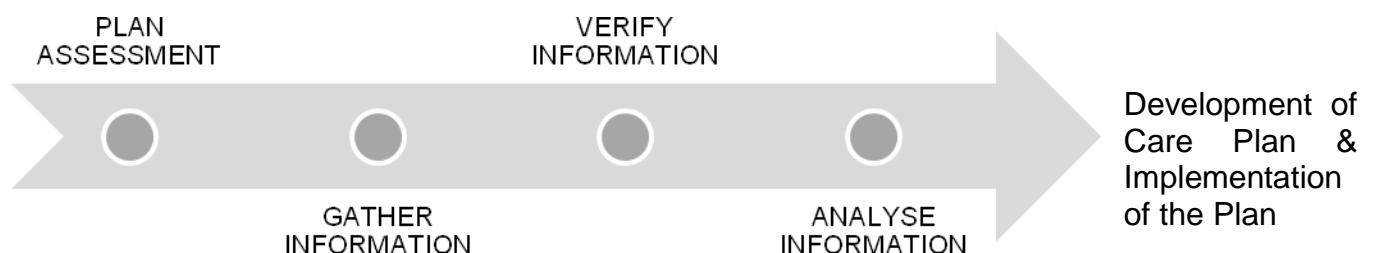

Figure 3: **Steps in the Assessment Process**

STEP 1   -   Plan Assessment

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[6] By basic needs we mean factors such as food, shelter, health care – the things that are essential for survival

This important stage is often missed out, sometimes as workers have carried out so many assessments that they 'know' what they need to do. Nevertheless it is important to spend some time planning the assessment in order to ensure that all the correct information is collected. The purpose of the planning stage is to identify who needs to be involved in the assessment, how it will be conducted and what elements it will consider and to establish timescales. Much of the basis of the plan may come from the information that has already been provided via the referral or from the child.

STEPS 2 & 3-   Gather Information & Verify Information

This step requires information to be gathered and then checked for accuracy. For example a child may say that they have no family, or that their family does not want them, but this needs to be checked out by visiting the family and seeking their views. Gathering and verifying information can be done by using a variety of tools and techniques – such as geneograms, ecomaps, interviews, observations, data from existing files and other service providers, questionnaires.

Step 4 -   Analyse Information

This is perhaps the most difficult part of the assessment process as the worker needs to be able to look at all the information that they have gathered and then make sense of it in relation to the child and their situation.

In undertaking assessments a number of principles should apply, including:

- Working in partnership with children / the active participation of children, using child friendly approaches
- Working with other agencies (where possible) – including social welfare and police and other NGOs and service providers
- Considering strengths and opportunities, not only problems
- Be rooted in child development, and be child centred
- Observe confidentiality, and share information on a need to know basis

Often projects have their own form for collating information gathered during the assessment, but a sample assessment form is included as an appendix.

It should be remembered that an assessment is a snap shot in time: it says what the situation has been in the past, and what is the current situation. Information can, and does, change. Assessments need to periodically be revised and updated, especially since they form the basis of decision making and care planning.

Types of Assessment

There are several different types of assessment. One overall comprehensive assessment is necessary, but within that assessment there may be a number of more specialist assessments that are also carried out (for example a child may need additional medical assessments) and which should contribute to the overall assessment.

The timing of assessment and how long it takes to complete is also a key consideration. Rushing assessment can mean that not enough information is gathered to be able to make a proper analyse of what would be in the child's best interests, but conversely spending too much time undertaking an assessment may mean that a child is left to 'drift for a long time.

While the assessment is an important process on which the care plan should be developed if, during the process of the assessment, it becomes apparent that any immediate needs exist, these should be put in place as a priority.

INITIAL ASSEMENT
Basic Needs, Safety & Immediate Care

FOCUSSED ASSESSMENT
On a specific issue – for example education

COMPREHENSIVE / INDEPTH ASSESSMENT
A holistic view of the child and their situation, considering risks and strengths

SPECIALIST FURTHER ASSESSMENT
On a particular issue that was not covered in the Comprehensive Assessment or where the outcome of the Comprehensive Assessment is that more information is needed (for example in relation to mental health)
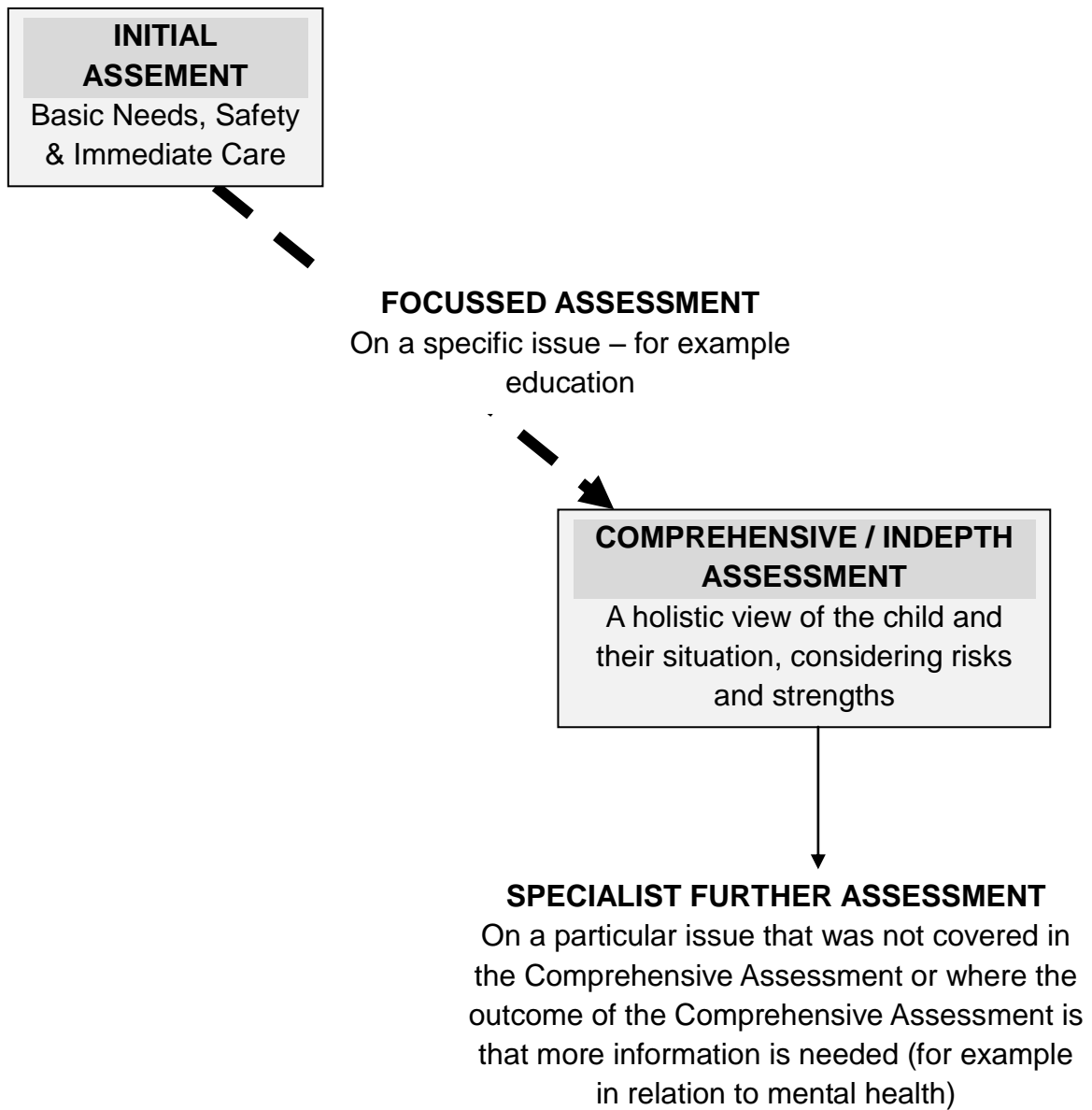
Figure 4: **Hierarchy of Assessments**

> **!** When undertaking assessment and identifying needs it is helpful if the issues can be identified as needs, rather than services. For example not 'the child needs to go be in a shelter' but 'the child needs somewhere safe to stay'.
>
> This can be useful, because especially where there are few services, expressing needs, rather than the service that should be provided, can be helpful in exploring other ways of meeting the need. To use the example of education, there are many ways that children can have somewhere safe to stay, one of which is a shelter. But there are other ways, such as staying with foster carers, living with relatives and staying with friends.

Dimensions to Be Assessed

The overall, in depth assessment should be **holistic** in that it should consider every aspect of the child's life.

Many projects use the 'Triangle of Assessment' originally developed for use in the UK, which considers the child's developmental needs, parenting capacities and the wider family and environment issues. While this is a useful model, it is worth remembering that this was developed for a specific social context in which there is a relatively well developed child protection system and with comprehensive support (including economic assistance) generally available[7] . However this is not the situation in Asia, and it was felt that what was perhaps not adequately addressed related to some of the push and pull factors, in particular due to economic pressure. For this reason, the triangle model has been expanded to create five main dimensions that need to be assessed in order to determine the best interests of the child:

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[7] This is not to say that the system is perfect, or cannot be improved, or that workers do not want more services and support for children

Child's Development Needs – Also taking into account issues relating to the effects of their abuse, their skils and capacity to protect themselves

Care Givers / Parenting Capacity – taking itno account the ability of the parents / care givers to protect the child and to meet their needs, and the way in which the family functions

Social & Cultural Context – including the degree to which the child will be accepted in the community, situation concerning trafficking and attitudes towards children who have been trafficked

Wider Community & Family Influences – such as the presence of other supportive adults, the availability of support for the family and the child, and other protective mechanisms in the community

Economic Factors – such as poverty levels of the family and living conditions, options and opportunities for the child in terms of deduction, vocational training and income generation to create viable employment options in the longer term
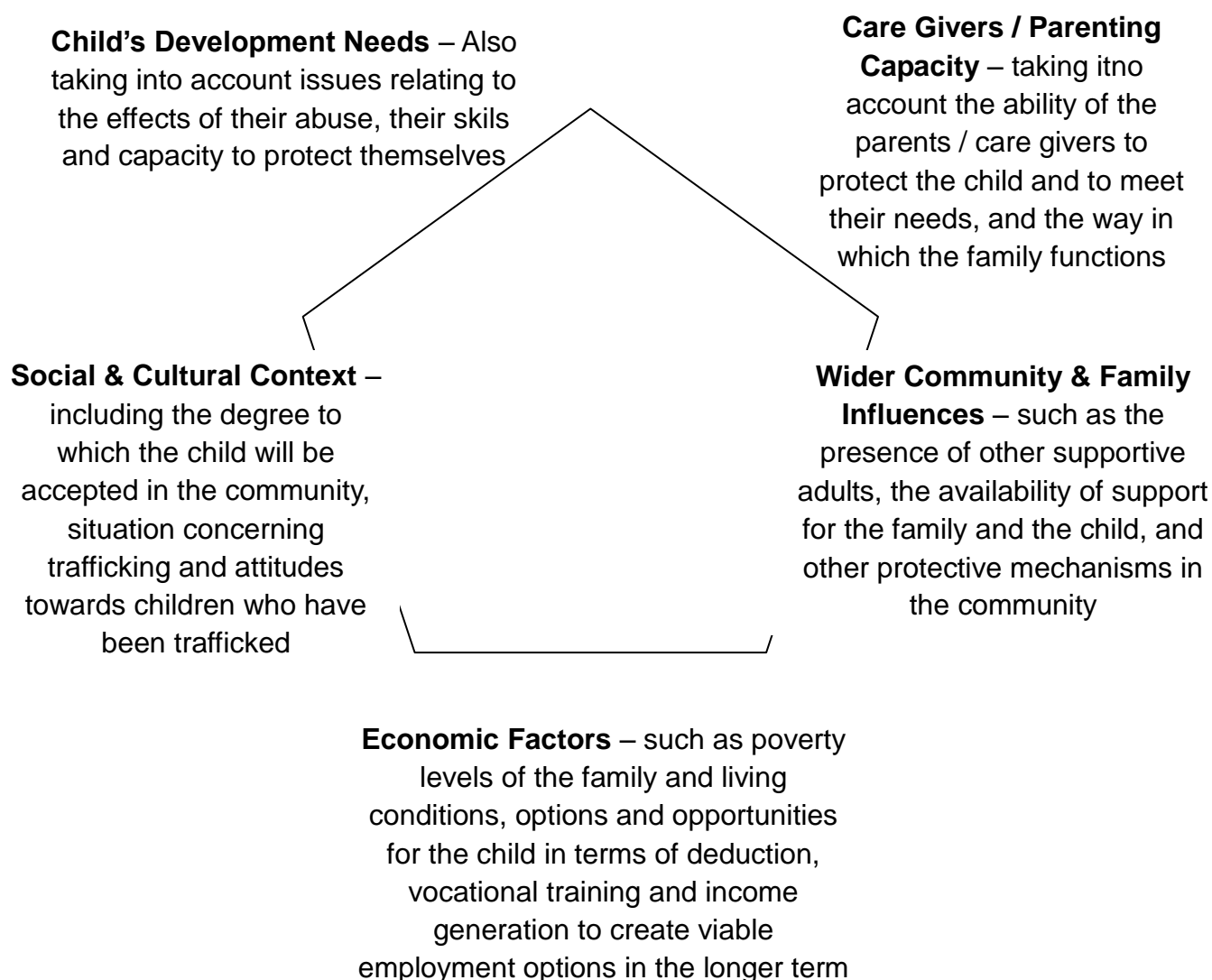
Figure 5: Dimensions of Assessment

Balancing Protection with Participation

Child have a right to participate in decisions that affect their lives (Article 3 of the UNCRC). However more than just a right, children have a *need* to participate in decisions. Involving the child in their care can be critical in terms of helping them acquire and develop their resilience.

For children who have been trafficked it can be an important stage in the recovery process as it can help restore the sense of control that children will have been robbed of as a consequence of being trafficked.

In order to ensure that children can actively participate, workers need to develop their own skills in working with children, particularly their skills of communicating with children.

However, while the participation of children is important, it is critical to recognise that the responsibility of protecting children remains with adults. Sometimes as a result of their experiences, or because of their age and developmental capacity, children are not always able to make decisions which are in their own best interests. Additionally children can sometimes be very optimistic about possibilities, expressing their wishes and desires, rather than what is a reality. This does not mean that their opinions and preferences should not be taken into account, but that these become part of the information on which the analysis on what is in the child's best interests is based.

A key point in the participation of children, and whether it has been successful, is often judged by workers rather than by children themselves. This points to the need to insure that the reasons why the child participation is sought is clearly explained to children, so that they do not get the impression that whatever they say they want will happen. If they believe this, and they do not get what they want, this may reinforce any feelings the child may have about adults not being able to be trusted.

Multi Disciplinary Working

Good practice shows that multidisciplinary working, that is when all sectors / services are involved in the assessment, planning and delivery of services as it enables services to be delivered in a holistic manner. Multidisciplinary working necessitates a shared vision of what is to be achieved. Often service providers can become preoccupied with their own function, and this may not always be compatible with the best interests of the child. For example, the desire to ensure medical treatment, or secure a conviction against an alleged trafficker can

mean that plans are put in place which are not helpful for the child in terms of their recovery and reintegration. Workers in projects need to ensure that they always advocate for the best interests of the child.

Another problem that can sometimes occur with multidisciplinary work is that there are differences of opinion in terms of the involvement of the child. It can also be difficult to engage partners or can seem a waste of time if there is little input that the partners are able to input.

 As well as between agencies, multidisciplinary working can, and should, also take place between teams / workers within the same project or organisation. In this case it is especially important to ensure that someone is nominated to act as the **key worker** so that there is a clear line of responsibility for ensuring that actions take place and work is coordinated.

Developing Care Plans

Determining what is in the best interest for a child is a careful balancing act between their needs of the child, and the available resources and possible solutions. Frequently, although workers might wish for there to be a 'perfect solution', this can be a choice of the 'best' or 'least bad' option.

In developing care plans it is important to consider, ad plan for four timescales:

1. Immediate (ie one month)
2. Short term (up to three months)
3. Medium term (3 months – 9 months / 1 year)
4. Long term (one year plus)

Objectives should be set that are realistic and achievable, with steps to achieving the desired goals clearly identified. In addition, responsibility for action should be identified.

In developing any care plan, it is always useful to ensure that a **contingency plan** is included. This means what will happen if the plan cannot be carried out. Sometimes the contingency plan can be very simple, and just be that another care plan will be developed – in other cases it may be appropriate to have alternative courses of action already identified within the plan.

Another aspect of care planning is that of 'twin track planning'. This means working on two or more plans of action simultaneously, with a date given for when a decision should be made. For example, two options for a child might be to see if the child can be reintegrated into their own family or if that is not possible to try and find a substitute family for the child to live with. If workers wait until there is no realistic possibility of returning the child home until they have begin looking for alternative living solutions for the child (assuming any are available) this will only delay the length of time that a child spends living in a shelter / institution.

All plans should be closely monitored by the key worker and reviewed, preferably by a manager or another worker, on a regular basis to ensure that the plan still meets the child's needs. If necessary the plan should be adjusted accordingly or a new plan developed.

Role of Case Management

Many projects have their own case management system. A case management system is a protocol or procedure that is introduce to ensure that there is consistency in the way in which a case is handled, and that action takes place in a timely manner. The aim of a case management system is to ensure that the best needs of a child are met, and to provide a tool for the effective management of the service.

Typically case management plans outline the order in which activities should be carried out, who is responsible and the timeframe for actions (for example how long to conduct the assessment and the periods for reviewing plans). They can also contain standardised forms and tools for the collection of information. Case management systems typically make reference to standards of practice and to the way in which information and records are kept.

Irrespective of the particular details of case management systems, all case management systems contain the same important elements, namely:

1. Receiving referrals
2. Assessment
3. Development and review of care plans
4. Procedures for follow up and case closure

6. Resilience Building & Protection from Further Harm

Resilience is an important concept to understand. Resilience means that the child has the capacity to survive and develop, even when faced with situations of great adversity. The key point here is not that the child is not affected, but that they have the ability to 'bounce back'.

The idea of resilience, and the understanding of what contributes towards helping a child develop resilience, is a relatively new field, although there has been some significant research into the issue[8].

Understanding Resilience

When considering children who are resilient a number of characteristics can be seen:

1. High self esteem
2. Belief in their capacity to make a difference / have some control over their lives
3. A range of problem solving skills and interpersonal skills

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[8] For more information see The Resilience Project, which has a lot of information on the latest international research, and suggestions for programmes of ways to promote resilience. Further information can be found at www.resilienceproject.org

Although resilience is closely associated with vulnerability it is not the same thing. A child can be very vulnerable to being trafficked, but very resilient to the affect of trafficking.

Resilience is highly individual (it can differ between children in the same family) and can change over time. A number of factors have been identified which seem to increase the chances of a child developing resilience, because they help the child develop the characteristics of resilient children. These include:

- Competent parenting / care giving
- A close relationship with at least one adult, which lasts overtime
- Good relationships with peers
- Increased educational opportunities
- Involvement in regular activities / groups
- Positive ideas and dreams for the future
- Availability of formal and informal support

Another factor that has been identified is attendance / membership of a religious group. The reasons why this contributes to resilience are not so clearly understood and it is thought that this might be because it increases the availability of support and / or because it gives a framework for the child to make sense of their experiences.

Helping a child to increase their resilience can be an important step in the reintegration process because it can mean that if a child does face a situation of abuse or trafficking in the future, then their recovery may be made easier.

? Thinking about the attributes of resilient children, and what helps a child to develop resilience, workers should consider to what extent is the support and assistance being offered contributing to the development of resilience?

Developing Self Protective Behaviours

While we must always be clear that adults are responsible for protecting children, there are many things that children can do that can help keep themselves safer. Teaching children these skills is something that normally happens naturally within the context of a loving and supportive family, although where this has not happened or where there are additional risks, it may be useful to help the child develop self protective behaviours.

These can be taught in a number of ways, through discussion and exploration with others in a group at a project, to informal conversations and using situations as they occur as an opportunity for new learning.

Issues that can be explored with children include:

- How to identify / recognise people who are safe / people who are not safe to be around
- How to identify situations and behaviours which are unsafe or risky
- Recognising our bodies as our own (and understanding boundaries and privacy)
- Assertiveness training, so that children can feel more confident in speaking out / asserting their own needs
- Understanding that children have a right to protection – and knowing what they can expect to be protected from – together with developing self esteem so that children can feel that the right to protection applies to them as individuals
- Indentifying sources of support and what to do / who to go to if something happens
- Knowing how to look after ourselves and our bodies, to promote a health

Some projects also teach self-defence techniques to children. These should be treated with care as although such techniques can help children defend themselves, it can also lead to a sense of over confidence which might encourage children to under estimate the risks they face and the level of dangers.

Since children learn through experience and by example, it is important that workers model the behaviour that is desired. For example, it is difficult to reinforce the idea that children have a right to privacy, if workers do not respect children's privacy (for example by walking into bathrooms without asking when children are washing).

Linking with Local Protection Mechanisms and Systems

Even in the most difficult circumstances there is normally some form of protection, even at a very low level that exists. Communities often have their own informal practices for solving problems, including those relating to the protection of children.

Having an understanding of the local protection mechanisms and informal systems of protection *before* the child is reintegrated can help workers in preparing the child for reintegration by supporting the child in accessing the protection machismos that exist and by preparing the mechanism the protect the child (for example by raising awareness of the situation in relation to children and trafficking in the local area). Local protection mechanisms can also be useful in terms of ensuring acceptance in the community of the trafficked child. Workers must be mindful, of course, in discussions with communities, so that they do not break the child's confidentiality.

7. Finding Durable and Alternative Living Situations

In terms of reintegration, one of the central elements to any successful reintegration plan is finding a durable living situation for the child. Obviously, in an ideal situation the optimum plan for the child would be the return of the child to their family or at least to their community. In many cases this is unlikely to be possible, or feasible as a long term solution.

There are a number of reasons why this may be so. Firstly, if the family themselves contributed or participated in the trafficking, there may be a risk to the child of being re-trafficked if the child was to return home. If the reason why the child was trafficked originally

was because the parents lacked the skills to protect the child, then a careful assessment would be necessary of the situation to evaluate what, if any changes had occurred (or how the family could be supported) to ensure that the child would be safe this time. An additional complication in returning children to their families is that, depending on the time apart from the family and the effects of trafficking on thie child, the parents may not be able to adjust their parenting style to adequately care for the child.

Another main reason why it may not be feasible for a child to return to their community / family is that the child may not be accepted and ultimately rejected because of the stigmatisation around children who have been trafficked (especially if children have been trafficked for sexual purposes and / or if they return home with a child). This could be real (as in the family ad the community may reject the child) or perceived in that the child may believe that this would be the case and so would refuse to return.

It is important to find a long term and durable solution to the living situation for children because, if the placement were to breakdown, it could caused further damage to the child's emotional wellbeing. In practice this means that finding a placement, even if it is not ideal, that will last, may be better for a child than a better living situation that will eventually fail.

Sometimes, movement to an alternative living situation can be a step towards eventual return home.

For children who are unable to live with their parents or their communities, for either all or part of the time, there may be a number of options. Not all options exist in all locations, depending on the country and local context and so in practice the possible alternatives may be limited.

Terms used often vary, so if workers are negotiating placements with other agencies, it is a good idea to check what the features are of the living situation, rather than rely on what it is called.

TABLE 3: Alternative Living / Care Options[9]	
Institution / Orphanage / Shelter	An institution that cares for often a large number of children, frequently on a long term basis. The main disadvantage of institutions is that it is difficult to provide high personalised care and children can get 'lost' and be just a number rather than an individual. Institutions can also be expensive to run, because of overhead, although they are able to accommodate large numbers of children and so can be helpful when there are limited resources. Because of the difficulties of enabling children to establish close relationships with a significant carer / carers – and the effect of this on the child in terms of their social and emotional development – institutions should only be considered as a last resort for younger children.
Emergency Shelter / Specialist Shelter	An institution which cares for children either in the short term (ie when the child is first rescued and until a more suitable placement can be found) or where the child may live for an extended period of time to receive specialist support. As with other institutions, depending upon the number of children accommodated, it can be difficult to provide personal care and for children to have the opportunity to develop significant relationships with important adults. It can also be disruptive to children if children are constantly arriving / leaving.
Small Group Home	A form of institutional care, which tries to overcome some of the limitations of institutions in terms of children being able to develop closer relationships, by only housing a small number of children (normally 6 – 12).
Core and Cluster	A variation on the small group home, where children live in small family type units, with a carer. These units then use central services (such as school). While the living arrangement does promote a family – like lifestyle, one of the criticisms of core and cluster units is that they can be isolated from the local community.

[9] For further information on alternative care, see UN Guidelines……..

TABLE 3: Alternative Living / Care Options[9]	
Secure Unit	An institution where children are detained, normally because they are a danger to themselves, or to others. Because children are locked in, a placement in a secure unit should only be made with a court order, otherwise children are being deprived of their freedom.
Move On Unit	An institution which has additional support included in order to prepare children for independent living – sometimes known as a 'halfway house'.
Supported / Independent Living & Paying Guest Schemes	Instead of living in an institution, children live independently, either with a worker that visits them regularly to ensure that they are coping, or with a working living onsite. The main advantage of independent living schemes is that children are given some support, although they are basically unsupervised. This means that they are often suitable for older children, especially where the child has been autonomous (such as with a street child) and where they may be resistant to the care provided in one of the other alternative living solutions. A variation of this type of care is the 'paying guest', where 'sympathetic' and accepting families rent out a spare room to a child. Often providing a low level of informal support.
Foster Care	A scheme where children are placed with families (either permanently or for a defined period of time) and so have the opportunity to be cared for in a family setting. Foster carers are normally paid some sort of stipend / allowance. Foster schemes take a lot of support to establish and maintain,
Kinship Care	Children are placed with extended family members or members of tribe / community who they already have a relationship with.
Adoption	The child is placed with a family, who take over legal responsibility for the child, as if they has been born into the family. Normally after adoption is concluded there is no long term support or payment of allowances. Given this, although older children can be adopted the preference is for younger children to be adopted as there is a reduced chance that there will be ongoing problems.

TABLE 3: Alternative Living / Care Options[9]	
Kafala / Guardianship	Similar to adoption, in that the child goes to live with the family on a permanent basis, however the carers are seen as custodians of the child, rather than substitute parents. This form of care is typically used where there are religious prohibitions to the use of adoption – for example in Islam.

Settlement & Adjustments to New Living Situations

When children are placed in new (alternative) living situations, or return home to their communities, they typically pass through a period of adjustment. During this period, it is important that workers are able to support parents / caregivers, or ensure that they have the support in place necessary, otherwise there is a risk that the placement may breakdown.

- **Initial 'Settling In' Phase** (may last 24 hours to 2-3 weeks or longer)

During this period the child may be very compliant, and feel grateful and present few behavioural problems. It is important not to withdraw support / follow up at this time.

- **Adjustment Phase** (typically from 3- 9 weeks, following the settling in phase)

Having left the 'safety' of the life that they knew before, the child begins to adjust to their new circumstances. This process of adjustment can often bring about conflicting emotions and memories, and the child may repeat past patterns of behaviour. During this phase the child may test boundaries (to check if carers / workers are really committed, resent the authority of adults, resist discipline, become angry and rebel. They may also steal food, threaten to leave and run away,

In this phase the attitude and the response of the worker / carer is crucial. It is important to be able to deal sensitively with the child, and remember that it is phase that will pass (even though it may take many weeks to subside) and not to become too punitive, otherwise the situation (and behaviour) will increase.

- **Settling Phase**

In this phase the child begins to feel more secure, and behavioural problems gradually diminish - although it may take months / years for this to happen and there may still be occasional times when the child's behaviour reverts as they 'test' the safety of their new world.

When identifying alternative living / care solutions, it is important to also consider the longer term situation for children, as they move into adulthood and beyond. Unfortunately many institutions and schemes require children to move when they reach as certain age (sometimes as young as 15 years old) and frequently when they are 18 years old. This is not normal, as most children remain in their family home well into adulthood / until they have established a home elsewhere. Where possible, it is normally desirable for the child to remain in the scheme until they are ready to move to independence, and / or at least retain contact with the workers for support.

This means that trafficked children, will have to be independent at relatively young age compared to other children in the community. The process of moving on to independence itself may be difficult for a child (who may have feelings of loss and feel anxious about the future holds) but in addition, without economic assistance through government social protection schemes, children will have to be self sufficient and provide for themselves.

Securing Economic Futures

In order to live independently as an adult, plans needs to be made during their childhood for children to become financially independent – otherwise they may find themselves back in situations of exploitation as a way to survive.

There are a number of ways in which children can be supported to be economically independent, including:

- Education – especially functional literacy and numeracy – as a pathway to employment
- Vocational Training – where the child learns a skill or trade, as an alternative / compliment to general education
- Income Generation Schemes – where children are giving training, guidance and sometime financial assistance to be able set up their own business
- Enrolment on government social protection / economic assistance programmes

The areas of vocational training and income generation schemes is highly specialised and it is unlikely that workers will need an in depth knowledge of how they operate. It is important that we ensure that children are able to access such schemes / education in order to ensure their future.

Critically, vocational training and income generation schemes must provide realistic and viable employment opportunities, otherwise while they may be of interest and use to the child in terms of learning something new and the development of self esteem, they will be of limited use in terms of the economic benefits for the child.

8. Increasing the Chances of Successful Reintegration

> ?
>
> Most workers want to know how to measure success in terms of outcomes for individual children. This is no easy thing to do, particularly as one of the difficulties is deciding on what basis to measure success.
>
> *For example, is it the point when the child is returned home / reintegrated into the community? Is success is if a child is not being exploited or abused, or has not been re-trafficked after a specific period of time? Or can we only say that we have been truly successful in our interventions if children grow into healthy adults who go on to lead successful, independent lives?*

It is natural, and important that workers remain optimistic about the futures for the children that they work with, otherwise they would become burnt out, and negative about their work – which would only adversely affect children. However, it is critical that the hopefulness of workers does not blind them to the real situation and the realities for the child. Failure to do this will almost certainly result in the reintegration breaking down, causing further distress to the child.

While everyone would like an easy way to measure success, there is not one. However if we want to increase the likelihood of success, however we define it, there are a number of factors which can increase the chances of successful reintegration, as shown in Table 4:

TABLE 4: Factors Increasing the Likelihood of Successful Reintegration

Factors include:

- Limited / short duration of involvement of trafficking situation

- Clear and comprehensive assessment of the child's needs, their situation and their best interests – upon which decisions regarding reintegration have been based

- Child has had opportunity to work through experiences and learn new ways of relating to others

- Increase in the child's self protective skills, life skills, coping mechanisms and resilience

- Child has positive and realistic dreams and hopes for their future, and a viable plan for how to reach their goals

- Access to education / vocational training and income generation schemes to ensure the child has viable economic prospects for the future

- Supportive family / community who accept the child, and are willing to work through any problems with adjusting to the child's reintegration

- Contact, where possible if the child is separated from their family, with family and other important people in the child's life (if this can be done safely)

- Presence of other sources of support for the child and their family – such as community groups, NGOs etc

- Risk of trafficking removed from / not present in the area (eg through more effective

investigation and policing, or proactive protection services in place) or there is a comprehensive plan in place to prevent the child from being trafficked

- Availability of long term follow up to ensure that problems which occur are addressed quickly, and not left until they become serious

References and Bibliography

To be completed once document reviewed and finalised

Suggestions for any particular resources to be included?

Appendices

To be determined, according to the contexts, but likely to include intake forms etc