Stages of recovery and reintegration of trafficking victims
A reintegration guide for practitioners
This Reintegration Guide was prepared by the NEXUS Institute and Different and Equal (D&E) in the framework of the project: Providing comprehensive reintegration services and improving the protection framework for victims of trafficking in Albania. It is part of a series of reintegration guides designed to support the work of reintegration practitioners in Albania as well as practitioners from other countries and regions.

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Artwork: Trafficking victims assisted by Different and Equal


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Support

Sometimes the only thing you want is to have
someone standing there for you...

Artwork and quote from
trafficking victim assisted by
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# Table of contents

## About the reintegration guide
- What it is .................................................. 1
- Who it is for ............................................... 1
- How to use it ............................................... 2

## Understanding trafficking victim reintegration ........................................... 3
- Framing reintegration ........................................ 3
- The three stages of reintegration ........................... 9
- Reintegration set-backs and challenges .................. 11

## Stage 1. Crisis intervention (from 0 to 6 months) ...................................... 14
- About the crisis stage ........................................ 14
- Victim feelings and behaviours in the crisis stage .......... 15
- Assistance and support needed in the crisis stage ........... 17
  - Special issues and considerations in the assistance of trafficked children in the crisis stage ........... 20
  - Key issues and considerations in the crisis stage ........... 22

## Guidance for practitioners ........................................................................... 22

## Stage 2. The transition stage (from 7 to 12 months) .................................... 24
- About the transition stage ..................................... 24
- Assistance and support in the transition stage ............... 26
  - Special issues and considerations in the assistance of trafficked children in the transition stage ....... 31
  - Key issues and considerations in the transition stage ........... 32

## Guidance for practitioners ........................................................................... 32

## Stage #3. Reintegration and inclusion (from 13 to 36 months) ..................... 34
- About the reintegration and inclusion stage ................... 34
- Victim feelings and behaviours in the reintegration and inclusion stage ................... 35
- Assistance and support in the reintegration and inclusion stage ................... 36
  - Special issues and considerations in the assistance of trafficked children in the reintegration and inclusion stage ........... 39
  - Key issues and considerations in the reintegration and inclusion stage ........... 41

## Guidance for practitioners ........................................................................... 41

## Appendices ................................................................................................. 43
- Appendix #1. Glossary of terms .................................................. 44
- Appendix #2. Key milestones at different stages of reintegration ............. 46
- Appendix #3. Victims’ feelings and behaviours at different stages of reintegration ........... 47
- Appendix #4: Ethical principles and guidance in working with trafficking victims ........... 48
- Appendix #5. Research and resources on reintegration by D&E and NEXUS Institute ....... 49
About the reintegration guide

What it is
Reintegration is the process of recovery and inclusion following a trafficking experience. It generally takes place in three stages over a period of approximately three years – 1) the crisis stage, 2) the transition stage and 3) the reintegration and inclusion stage. This reintegration guide provides practitioners with information about these three stages and victims’ experiences and needs within these stages as well as how to support victims’ reintegration over time.

This reintegration guide describes the three stages of reintegration that trafficking victims move through including a description of the specific stage, trafficking victims’ feelings and behaviours in this stage, and assistance and support that is typically needed and provided in this stage. Each section then concludes with a checklist of suggestions for reintegration practitioners to implement at that specific stage of reintegration.

This reintegration guide is based on the experience of D&E and NEXUS in implementing reintegration programmes for trafficking victims over many years as well as our research and learning on this important topic. These guides also include the real-life experiences and reflections of trafficking victims as well as practitioners working with them.

Who it is for
This guide is for practitioners working on the recovery and reintegration of adult and child trafficking victims in Albania as well as further field. This includes social workers and social assistants, psychologists and counsellors, healthcare practitioners, lawyers and paralegals, educational staff (teachers, principals, school psychologists), child protection staff, public administrators and professionals working on economic empowerment and job placement.
How to use it
This reintegration guide for practitioners is a practical, stand-alone resource for reintegration practitioners to use in their day-to-day reintegration work. It can be used to prepare and train practitioners as well as be referred during on-going reintegration work.

It is part of a series of reintegration guides that explore different aspects of recovery and reintegration explain and offer guidance on how to address key issue and obstacles in the reintegration of trafficking victims. Reintegration practitioners should refer to relevant guides in conducting their work with trafficking victims. The series is comprised of three reintegration guides on different aspects of recovery and reintegration including:

- The stages of recovery and reintegration of trafficking victims
- Supporting the children of trafficking victims
- Mentoring of victims of trafficking

This series of reintegration guides for practitioners is drafted by Different and Equal (D&E) and NEXUS Institute.
Understanding trafficking victim reintegration

Framing reintegration
Trafficking has very serious impacts on the physical, psychological, economic and social well-being of trafficking victims. In addition, many trafficking victims faced problems in their lives before trafficking, which also persist after trafficking. Additional problems also generally emerge in their lives and relationships over the course of recovery and reintegration. For example, many victims migrated because of economic problems at home and their economic situation has generally deteriorated further due to trafficking. As such, reintegration is not only about addressing the impact of trafficking but also about addressing pre-trafficking vulnerabilities as well as challenges that emerge in life after trafficking exploitation ends.

Vulnerability and resilience before trafficking, because of trafficking and after trafficking

Reintegration is the process of recovery and economic and social inclusion following a trafficking experience. It may be best understood as a process that trafficked persons navigate as they recover and move on from trafficking exploitation. Successful reintegration includes:

- settlement in a stable and safe environment,
- access to a reasonable standard of living,

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1 This section is based on work undertaken by NEXUS Institute and 15 NGOs in the Balkans, including D&E, in the framework of the Trafficking Victims Reintegration Programme (TVRP), implemented from 2006 to 2015 and funded by the King Baudouin Foundation (KBF). For information about the TVRP, please see: [https://nexusinstitute.net/past-projects/trafficking-victims-reintegration-programme-tvrp/](https://nexusinstitute.net/past-projects/trafficking-victims-reintegration-programme-tvrp/)

This section is also based on NEXUS Institute’s work on other projects including: Regional Reintegration Initiative: Challenges in Reintegration in the Greater Mekong Sub-Region, with UNIAP and the COMMIT governments in the Greater Mekong Sub-region from 2010-2017 (please see: [https://nexusinstitute.net/past-projects/commit-ppc5-regional-reintegration-initiative/](https://nexusinstitute.net/past-projects/commit-ppc5-regional-reintegration-initiative/)) and Protecting the Unassisted and Underserved: Longitudinal Evidence-Based Research on Assistance and Reintegration, conducted in partnership with the Government of Indonesia and civil society partners in Indonesia from 2013-2019 (please see: [https://nexusinstitute.net/past-projects/reintegration-in-indonesia/](https://nexusinstitute.net/past-projects/reintegration-in-indonesia/)). For key resources and research, please see: [https://nexusinstitute.net/publications/assistance-and-reintegration-of-trafficking-victims/](https://nexusinstitute.net/publications/assistance-and-reintegration-of-trafficking-victims/)
mental and physical well-being, opportunities for personal, social and economic development and access to social and emotional support.²

Reintegration may involve returning to one’s family and/or community of origin. It may also involve integration in a new community and even in a new country.

A central aspect of successful reintegration is empowerment, supporting victims to develop skills toward independence and self-sufficiency and to be actively involved in their recovery and reintegration.

Different components of successful reintegration

² This definition was developed collaboratively by NEXUS Institute and 15 NGO partners in the framework of KBF’s TVRP programme. Please see: Surtees, R. (2008) Re/integration of trafficked persons: how can our work be more effective? Washington, D.C.: NEXUS Institute and Brussels: King Baudouin Foundation, p. 11.
Trafficking also impacts a victim’s family relationships and many victims face tensions and problems in their family environments as well as in wider social settings. As such, there are various levels at which reintegration occurs and which need to be considered and taken into account in how practitioners work with and support victims through the process of recovery and reintegration. Reintegration, then, requires overcoming problems and vulnerabilities across these different levels – individual, family, community and structural – and leveraging sources of resilience and support in victims’ lives and the wider environment.

Levels of reintegration – individual, family, community and structural

**Individual level.** Reintegration needs to address the impact of trafficking (physical, psychological, social and economic) on the individual victim. Some victims are also coping with complex and unresolved problems and even trauma from before trafficking. It is necessary to identify each victim’s needs as well as capacities, skills and resources to provide tailored and individualised assistance and to leverage their personal sources of strength and resilience.

**Family level.** Reintegration most often takes place in the victim’s family environment. The family environment is often a complex terrain with different layers of support and tensions. Different family members may be involved in the reintegration process, to varying degrees and at different stages of life after trafficking and may manifest various (and often contradictory) actions and reactions, attitudes and behaviours, especially over time and in response to external factors. Some family members are supportive and helpful; others are critical and unsupportive. These variations differentially influence reintegration outcomes for victims and their wider families – sometimes positively, sometimes negatively. Working with the family involves fostering a healthy and supportive environment for the victim to return to and also for the family life more generally. It often also involves the provision of some support to various

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family members – for example, educational assistance to the children of trafficking victims or job placement for parents of trafficking victims.

**Community level.** The community environment factors into a victims’ reintegration success or failure. The community includes those close to and intimately involved in the life of a trafficking victim as well as those within the victim’s wider (and more distant) social sphere (friends, acquaintances, neighbours, peers, work colleagues, community members and leaders). The community setting can be a complex and contradictory environment (both supportive and unsupportive) and entails different (even contradictory) reactions from friends, neighbours and others, including changes over time. At a community level it is important to assess and foster a healthy environment by building social networks, ensuring availability and access to services and opportunities and working with community members to fight stigma and discrimination.

**Structural level.** Reintegration into formal society and its institutions involves ensuring that trafficking victims have legal status, which, in turn entitles them to services. This also requires that services are available and accessible, particularly at the local level where trafficking victims reintegrate.

**Outcomes of successful reintegration**

Successful reintegration generally means that trafficking victims have realised the outcomes as outlined below.

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To realise these outcomes, trafficking victims require different services and support to recover and reintegrate after trafficking. They may require a single service (for example, transportation, emergency medical care, job placement) or multiple services (for example, a combination of housing, medical assistance, psychological care, legal support, education and vocational training). Services may be trafficking-specific (i.e., offered by anti-trafficking organisations and institutions) or they may be more general (e.g., offered by agencies/institutions working with vulnerable persons, returned migrants, community development, child protection). A comprehensive package of reintegration assistance includes services outlined below.

**Assistance and services for the recovery and reintegration of trafficking victims**

- **Housing, accommodation and care options.** The provision of safe, satisfactory, and affordable accommodation and care options (for example, in a shelter, while living with family, rented apartment, foster family, alternative placement).

- **Medical assistance.** Appropriate, adequate and sensitive medical assistance and care in the short- and long-term, including dental care, specialised medical treatment when needed and treatment for chronic or on-going health issues.

- **Psychological support and counseling.** Appropriate, adequate, and sensitive psychological support and counselling in the short- and long-term (for example, individual and group counselling, art, music and dance therapy, family counselling).

- **Education, training, and life skills.** Formal and non-formal education opportunities including schooling, school reinsertion support, vocational training, professional training, life skills training, and tutoring, counselling and orientation on vocational/professional trainings.

- **Economic empowerment opportunities.** Economic empowerment opportunities including job placement, internships, income generation activities, business development, counselling and coaching on employment and business opportunities.

- **Administrative assistance and support.** Administrative assistance and support needed to address the impact of trafficking or to support reintegration (for example, obtaining identity and other official documents, birth registration, resident and work permits as trafficking victims).

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and the appointment of a legal guardian in the case of children, documents to access services, like rent controlled or subsidised housing, economic aid, social services, health insurance).

**Legal assistance and support.** Assistance and support to trafficking victims in legal proceedings including criminal justice, civil and labour proceedings. Legal assistance and support may be associated with their trafficking experience (for example, as a victim-witness in criminal proceedings, compensation claims) or with other legal issues faced during reintegration (for example, divorce, child custody or access, property ownership, child support payments).

**Safety and security measures.** Measures to ensure the safety and security of trafficking victims at different stages after trafficking including family and risk assessments, victim-witness protection.

**Assistance to the victim’s family members.** Fostering and supporting a healthy family environment through various forms of assistance to a victim’s family members (for example, a child, spouse, sibling, parent).

**Case management.** Designing and implementing an individual assistance and reintegration plan, in collaboration with the trafficking victim, including providing services or coordinating the referral of the victim to other organisations/institutions for services.

**Return assistance.** Support to voluntarily return trafficking victims to their country and place of origin or residence, including providing transportation and document processing. In some cases, assistance needs are a direct result of trafficking.
The three stages of reintegration

Reintegration after trafficking is a long-term process that takes place over many months and years. It may be broken down into three discrete stages over a period of approximately three years.

Three stages of reintegration

**Stage 1. Crisis intervention (from 0 to 6 months).** The crisis stage is generally about six months in duration. However, it may last for just a few months or longer than six months, depending on the nature and extent of the individual’s exploitation as well as pre- and post-trafficking challenges and vulnerabilities. For instance, children are typically in the crisis stage for a longer period of time as they have less developed coping skills and need more time to stabilise after trafficking. Victims with security risks (for example, because they have denounced their trafficker) are often in the crisis stage beyond six months. Victims who are pregnant or accompanied by their children typically stay for longer periods of time in this crisis stage as they need support and services in the prenatal and postnatal period, including parenting skills. They also need support in addressing their trauma and stabilising emotionally, not least to be able to care for their children. Many victims with mental health issues also need longer-term and more intensive support in the crisis stage and for a longer period of time.

**Stage 2. Transition (from 7 to 12 months).** The transition stage is most commonly about six months in length, from month 7 to 12. But the duration depends very much on the individual victim and their specific circumstance. The transition phase may be less in situations where victims have a profession or have previous employment experience or if they have a healthy family setting to return to. The transition phase may be longer when victims have a low level of education or do not have any professional training or employment experience. Children generally need more time in this transition stage as well, particularly those with poor or unhealthy relations with their parents or other family members.

**Stage 3. Reintegration and inclusion (from 13 to 36 months).** The reintegration and inclusion stage typically lasts for two years, from month 13-36, but varies from victim to victim and in line with their specific life experiences and reintegration conditions. Some victims move

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more quickly through the reintegration and inclusion stage (for example, when they have a sustainable job, support from their family, a place to live, a healthy social environment and access to community services).

The full process of recovery and reintegration (crisis, transition and reintegration and inclusion) generally takes around three years. While this time frame offers useful guidance, each victim requires a different amount of time to recover and reintegrate after a trafficking experience. Some victims reintegrate successfully within this three-year period. Other trafficking victims may need up to five years to recover from their exploitation and successfully reintegrate.

Reintegration practitioners need to be flexible in the design and implementation of each reintegration plan, including the time and resources needed. A longer timeframe for reintegration is especially common amongst “difficult” or “complex” cases – that is, victims with acute challenges or complex needs or who are less considered in the anti-trafficking framework. These may include, but are not limited to, trafficking victims with:

- Physical and/or mental disabilities
- Substance abuse problems
- Mental health issues
- Serious or chronic medical conditions
- Security problems
- A lack of documents or legal status
- No family support
- Experiences of being socially marginalised or discriminated against (including ethnic minorities, different nationalities, and individuals who identify as lesbian, gay, bisexual, transgender, queer or questioning and intersex (LGBTQ+)
- Experiences of abuse, violence or neglect (especially in the family setting)
- Dependent children or victims who are pregnant (especially single parents)
- Being unconsidered in the anti-trafficking framework (trafficked men and boys)

These “difficult” or “complex” cases often require access to multiple and on-going services, specialised care or intensive support over a longer than typical period as well as more intensive case management and/or longer-term reintegration support.

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Struggles in reintegration over time

“Besi” is a young man who was trafficked for committing criminal acts when he was 15 years old. He was forced to steal and distribute drugs. He now lives a hand-to-mouth existence with his mother and younger brother. His mother works as many hours as possible to pay the rent, food and other bills for the family. Besi also works but he suffers from depression and so he struggles to keep his job. He feels a great deal of pressure and stress in his day to day life. His case is complex because of his mental health issues and past experiences of abuse and neglect. His trafficking experience while still a child, interfered with healthy physical and psychological development as well as his ability to forge healthy and supportive relationships. Lack of services for trafficked men and boys further impacts his opportunities for sustainable reintegration. Besi has been assisted already for four years. He is still in regular contact with the reintegration organisation to ask for help and support. He struggles to move forward in his reintegration and requires on-going services and support.

Reintegration set-backs and challenges

Reintegration is often understood as a linear process, with victims moving steadily forward on the path to recovery and reintegration. However, the reality is far more complex. Many trafficking victims face crises and set-backs at various stages during their reintegration that may stall their progress or even cause them to regress to previous stages of reintegration. Common crises and set-backs in reintegration include, but are not limited to:

- Economic difficulties and financial crisis including lack of job opportunities or loss of a job
- Mental health problems that may be triggered at different stages
- Illness or injuries that interfere with well-being or the ability to work
- Conflict, tension and disagreement in the family
- Violence and abuse in the family (domestic violence, child abuse, incest)
- Tension and conflict with community members
- Security issues as a victim-witness (threats and intimidation, when the trafficker is acquitted or released)
- Long legal process and lack of effective access to justice
- Health problems affecting the victim or their family (including the impact of health care costs)
- Conclusion of regular assistance and reintegration support and follow-up
- Difficulties faced by some beneficiaries to become independent and self-reliant

“All names have been changed to protect the privacy of the individuals involved.”

I had one year working as a seamstress in a tailoring shop. When the shop was closed due to the COVID 19 pandemic, I found myself in a difficult situation as I had to feed my daughter and myself and I had to pay the rent of apartment. I needed again for help at least with food packages and financial support for payment of the rent in order not to find myself and my daughter in street situation without any place to stay. (Adult female trafficking victim, assisted by D&E)
External events and crises including natural disasters like earthquakes and global pandemics

**Set-backs and challenges over the course of reintegration**

In the case of children, set-backs may be also triggered by difficulties in enrolling or continuing school education and by the lack of child-specific or child-sensitive services and procedures at the local level. Generally, children, adolescents and young people may be more exposed to set-backs and crises, in light of their evolving capacities, their still developing identities and their heightened dependence on family and other adults caring for them. Children are also especially vulnerable to traffickers’ threats of reprisals and to physical and emotional violence more generally in different settings (home, school, community).

Whether these set-backs temporarily or permanently derail a beneficiary’s reintegration process is a function both of their personal circumstances (their individual, family or social coping mechanisms) and the support available through reintegration programs.

Being able to lean on someone in one’s family or social network is integral to navigating and overcoming problems and set-backs that arise. The option to return for reintegration support and services at any stage of one’s post trafficking life is important in mitigating set-backs. While some support may be trafficking-specific, it is also important to consider and leverage other forms of

> I think that trafficking experience is something that you will never forget. I find very helpful my husband’s help and support. If he hadn’t supported me, I might have gone mad. It is very important when you have a close person who can understand you and help. (Adult female trafficking victim)

> When I was at home with my parents, we did not have enough to eat and I used to look out on the street and think at the choices that I had. And the street looked like a way to make money. (Adult female trafficking victim)

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support at the community level – such as local government social services, local NGOs, religious organisations and community groups. \(^{13}\)

"The social worker\] told me that the door is open for me always… They told me that I can come back at any time. (Female trafficking victim)\(^{12}\)

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**Overcoming set-backs and crises in reintegration**

“Maja” is a trafficking victim who was assisted to set up a small business to earn money and support her family. Her business was going well and she was happy in her day-to-day life. However, after a short period of time her parents-in-law required medical care and she needed to use funds from the business for their treatment: “[The organisation] helped me to start my small business, which deals with selling second-hand clothes. That period in my life was an excellent one. The business was better and better the whole year. I am very grateful to them, but I didn’t keep my word to invest the money in my business. It happened so that my husband’s parents fell ill. I needed money for their treatment”. Maja contacted the assisting organisation which helped her with her emergency needs. It was then possible for Maja to get her business back on track.\(^{14}\)

While the reintegration process will differ for each individual, it is nonetheless useful for practitioners to keep in mind these generalised stages and timeframes as well as the specifics of what takes place in these stages. The following sections discuss each of the three stages of reintegration – crisis intervention, transition, reintegration and inclusion – describing the features of each stage; victims’ feelings and behaviours at the stage; assistance and support provided at the stage; and guidance for reintegration practitioners.

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**Stage 1. Crisis intervention (from 0 to 6 months)**

**About the crisis stage**

Victims generally emerge from trafficking in a state of crisis. They are physically, psychologically and emotionally unwell and face a raft of problems related to their economic situation, physical safety, legal status, lack of accommodation, family situation and so on.

This initial period of intervention after trafficking ends is focused on crisis intervention, to provide immediate support and protection to address victims’ immediate and urgent needs and stabilise the victim so that they can make decisions about their reintegration. A case manager (either a state social worker or social worker from an NGO) should be assigned to work with the victim at intake and over the course of reintegration.

Some victims trafficked abroad may be assisted through the crisis stage while still abroad. Others return home immediately and so are in the crisis stage when they return. Victims exploited in their home country will go through the crisis stage at home.

The crisis period commonly lasts for between three and six months, depending on the victim’s individual and family situation as well as their experience of trafficking.

Some victims recover more quickly in the immediate aftermath of trafficking and begin to transition to “normal life” after a couple of months. Others need more time to overcome and process what has happened.

Victims with more complex needs (for example, security issues, mental health problems, being pregnant or with dependent children) often require around six months of crisis intervention before they begin this transition. In this stage, assistance should be flexible, tailored to the immediate and specific needs of each trafficking victim.

“I did not know that I would ever be able to get out of this situation, my life was ruined, and everything was getting worse. My father will no longer look me in the eye. My mother was cried at the police station while listening to my story. I was alive but I wanted to die. Anyway I was very determined to go to the end and do the denunciation. Even after denunciation I was very scared and concerned for my family. (Girl trafficked internally for sexual exploitation, assisted by D&E)”

“When I first came here in the shelter, in my mind came different thoughts. I was very desperate with what had happened to me. I thought it would be even worse for me without my people, with rules and other people who I don’t know and should share living spaces. By the time I entered I had anxiety and a lot of fear within myself that I had been deceived, and that was not the right decision to come in the centre. (Girl trafficked for sexual exploitation, assisted by D&E)”

“Some of them have doubts, they are afraid of how it will be, if during this process they will be safe, they have thoughts, concerns, fears for family members. How this will affect them? What should them awaits, many questions, anxiety, pressure and thoughts on how events will unfold. (Social worker at D&E)”
In the crisis stage

“Eni” was trafficked abroad at the age of 17 for sexual exploitation. When she returned to Albania she was accommodated in a shelter. She was suffering from serious psychological problems and found it difficult to trust people and establish new relationships. She was withdrawn and suffered from nightmares and insomnia. She needed intensive emotional and psychological support to stabilise after her experience. She also felt a pressing need to regain a sense of control over her life – to return to her family, continue her education and get on with her life. But her situation was complicated by security issues as she had given a statement to the police about her trafficker, making it unsafe for her to return home. The need to stay in the shelter, far from her family, was a source of stress as was her inability to immediately resume her education.

Victim feelings and behaviours in the crisis stage

In the crisis stage, trafficking victims are generally still shocked and traumatised by what they have suffered and struggle to process all that has happened to them. They are often afraid and uncertain about what will happen next and what the future holds. They have many questions, concerns and fears. It is a period of high levels of stress, anxiety and trauma, instability, isolation and fear.

Victims are also physically impacted by trafficking, which compounds negative feelings and reactions. During this period victims often face obstacles that undermine recovery and their ability to make long-term plans or achieve important life goals.

Common feelings and behaviours in the crisis stage include:

- Anger, aggression and frustration, including outbursts, impulsive behaviour, aggression towards others and self-aggression (self-harm and attempted suicide)
- Flashbacks and nightmares about traumatic events
- Anxiety, fear, nervousness including difficulty in concentrating
- Suspicion and distrust of others
- Physical reactions (elevated heart rate, muscle tension, anxiety attacks)
- Denial (denying that trafficking happened or bad events while trafficked)
- Contradictory feelings (of love and hate against traffickers and abusers, especially when trafficked by a partner or spouse)
- Pessimism and limited hope for having a “normal life” (get married, have a family, have a career)
- Sense of relief (for the change expected on life)
- Sleeping problems and disorders (insomnia, sleep apnoea, parasomnias, nightmares)
- Low or high emotional state

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Not all emotions and reactions in the crisis stage are negative. Victims also express a sense of relief and hope in starting a new stage of their life. They are excited and hopeful as the return to “normal life”, resume their life and plans and have new opportunities for growth and personal development. They often demonstrate strength and an understanding of risk and how to manage these. Many are also grateful and relieved for the help and support they receive (for example, from an assisting organisation or institution or their family). This is especially important when victims do not feel able or do not want to contact their family and relative (at least in the initial stages of recovery and reintegration).

Victims’ emotions and reactions may also be conflicting and contradictory. It is not uncommon, for example, for a victim to swing between positive and negative emotions and reactions as they struggle to process their experience of exploitation. A victim may, for example, be deeply relieved and happy to be home with their family but, at the same time, struggle to manage their anger and frustration at what has happened to them, leading them to flare up in anger at the same family members they are so happy to be reunited with. Some victims may also be angry with their family members for having been encouraged or even forced to migrate, which led to being trafficked.

Some victims have contradictory feelings about their exploiters and traffickers, particularly when they are also their boyfriends, partners or spouses. They may be scared and angry but also still feel an emotional connection to them, which complicates exit and moving on from trafficking as well as their willingness to fully disclose what happened to them at their hands. Many victims justify disrespectful and aggressive behaviour from their traffickers who claim to love and care for them.
Victims’ feelings and behaviours the crisis stage

“Marija” was trafficked for sexual exploitation when she was 17 years old. When she was able to escape her trafficking situation and return to Albania, she faced a great number of difficulty and stress. She was physically and emotionally exhausted and felt the weight of her many life responsibilities. She lived alone with her 4-year-old daughter who was born from trafficking and was responsible for taking care of herself and her child in all aspects of life. Marija was also deeply troubled by what had happened to her as well as the many difficulties and traumas that she had faced in her life before trafficking. Immediately after trafficking Marija was withdrawn and emotional, often crying, feeling hopeless and unmotivated to move forward. She also felt guilt and stress about her inadequacies as a parent. Marija received psychological assistance for about six months, during which time her psychological and emotional state stabilised. Her feelings of sadness, hopelessness, guilt and anxiety gradually subsided and she felt increasingly calm and motivated. She also significantly improved her parenting skills and her relationship with her daughter.

Assistance and support needed in the crisis stage

A case manager (either a state social worker or social worker from an NGO) should be assigned to work with each victim at intake and over the course of reintegration. The case manager is supported by a multidisciplinary team (MDT), including:

- A social worker (as case manager)
- A psychologist
- A doctor
- A lawyer
- A teacher

Multidisciplinary team (MDT) for trafficking victim support and reintegration

The MDT conducts a comprehensive needs assessment in discussion with the victim, after which the case manager works with the victim to design and follow their individual reintegration plan. The needs assessment should be done by the MDT within two weeks of the
victims’ admission to the programme and an individual reintegration plan designed by the case manager and victim within a month.

This process involves not only identifying needs and challenges but also personal resources which trafficking victims can draw on to support reintegration. It also requires assigning tasks to specific agencies and staff as well as setting timelines for completion and identifying indicators of success to measure the implementation of the reintegration plan. The beneficiary and the case worker sign the plan to show that both parties are committed to its accomplishment. In the case of child victims (under the age of 18), it is also signed by the parent or legal guardian.\(^\text{16}\)

Based on the needs of the victim, MDT members collaborate with different institutions and organisations to access services. For example, the teacher makes an education assessment including options for reinsertion into formal education or equivalency programmes and collaborates with relevant institutions to leverage the appropriate support. This might include providing documents and past diplomas to relevant institutions, sensitizing school staff and coordination with child protection workers in the case of children.

Assistance during the crisis stage is most commonly provided in the framework of the residential centre for a period of between three to six months, based on a victim’s individual needs. Most trafficking victims are not able to immediately return to live with their family due to security problems as well as stigma and discriminations from the family and community. As such, the residential centre offers a safe and supportive setting for victims in this initial stage of crisis and recovery.

However, some victims may not need or wish to be accommodated in the residential programme. Instead, they may be assisted while living in other accommodation, including:

- at home with their family (for example, if they have healthy and supportive family relationships, do not face any security issues and the family is not involved in her/his trafficking);
- in independent housing (for example, if they are adults and do not have security problems);
- residential programmes specialised in assisting victims with specific needs (for example, when victims have mental or physical disabilities, have mental health issues).

In these cases, assistance is provided to victims in partnership with institutions and organisations in the area where they are accommodated and case managers monitor victims through regular home visits and telephone calls. State social services, including child

\(^{16}\) For guidance on conducting a needs assessment and designing a reintegration plan, please see: Different & Equal (2020) Case management manual for victims of trafficking in Albania. Tirane: Different & Equal.
protection units in the case of trafficked children, play an important role not only in the provision of services but also in conducting monitoring and follow-up.

Assistance provided in the crisis stage is focused on victims’ initial stabilisation and meeting their immediate needs – for example, housing and basic needs (clothes, food).

Many victims come from families who do not own a home or have stable accommodation or they cannot immediately return to live with family. Some victims have been living on the streets or in institutions which also mean that they have no place to live once trafficking ends. As a result, in the crisis period many victims are accommodated in a shelter for trafficking victims. Accessing housing options for male trafficking victims is more complicated as male shelters are not commonly available and some males may also be resistant to being assisted in a shelter setting. In this case, males are accommodated in rented apartments.

At the beginning the most helpful thing was the conversation about my personal history with the psychologist and my social worker. Talking with them was very helpful and pleasant for me, was helpful and it made me feel better. The environment created for me was very warm and helped me to live in peace. I participated in different activities that were organised inside and outside the center. I went to school and I learnt how to write and read. I attended then a training for employment that helped me to increase my skills. (Young woman trafficked for sexual exploitation, assisted by D&E)

Other immediate and prioritised needs include:

- ✔️ Medical care (to address illness and injuries sustained during trafficking as well as any pre-existing medical issues)
- ✔️ Psychological assistance (to help victims stabilise and begin to process their experience)
- ✔️ Protection and security (in the case of victims who face risks from traffickers)
- ✔️ Administrative assistance (to process documents and access services)
- ✔️ Legal assistance and support (for both trafficking and non-trafficking related legal needs)
- ✔️ Family mediation (to initiate communication between the victim and their family)

Some victims may also receive other support at this stage, such as professional training or educational reinsertion, but this depends on the individual situation. The crisis stage is characterised by some key milestones. While this differs from person to person, some common benchmarks include:

- ✔️ Accepting one’s life situation; finding meaning and purpose in one’s new life
- ✔️ Establishing a new routine and rhythm of life
- ✔️ Reduced trauma and emotional difficulties; success in processing trafficking experience
- ✔️ Improved physical and psychological well-being including self-confidence and personal autonomy
- ✔️ Ability to manage one’s immediate environment
Ability to show empathy, affection and intimacy
Improved family relationships and social relationships generally
Being safe and secure.

**Assistance and support in the crisis stage**

“Lea” is 25 years old. She was trafficked abroad for sexual exploitation at the age of 19 by her boyfriend. She returned home pregnant from trafficking. She was supported and accommodated in the shelter because of the risk posed by her ex-boyfriend/trafficker as well as family problems (she was not accepted by her parents and brothers who blamed her for both her sexual exploitation and her pregnancy). She was assisted with healthcare, with particular attention to her pregnancy and prenatal care as well as the baby’s delivery and post-natal care. She was also supported in developing skills to care for and parent her child. She also received psychological counselling which helped her to process her trauma and stabilise psychologically and emotionally. It was also important in her ability to process postpartum stress. She also received on-going legal assistance as she had given a statement about her trafficker to the police and faced security concerns. Mediating and improving relations with her family was another important part of her assistance in the crisis stage. This assistance has helped to improve her relationship with her family especially her father and brothers. She communicates regularly with her family through phone calls and meets them when they come to visit her in the city.

**Special issues and considerations in the assistance of trafficked children in the crisis stage**

- **Feeling safe:** Meeting the child’s basic needs (clothing, food, shelter, hygiene) makes a child feel that they are not alone, that there are people that they can reply on.

- **Processing traumatic experiences:** Children find it more difficult than adults to process trafficking trauma because they are still developing. Children need to know that there is someone to listen and help them to process their traumatic event. When a child is ready to speak about what has happened, this should be a practitioner such as the psychologist or social worker and ideally someone trained in working with children.

- **Building trust and taking time:** During this stage, the child may be withdrawn and feel unsafe. It is important to help the child to connect with others and build trust. It is also important to give the child time to calm down and process their trauma including feelings of shame, guilt, confusion and abandonment.

- **Appointment of a legal guardian:** Some parents or relatives are complicit in the child’s exploitation, making it is necessary to remove parental custody and appoint a legal guardian for the child. Appointment of a legal guardian is also needed when children are orphans or without parental care (including when a parent has mental health problems). In the case of children deprived of parental care, a legal guardian should be appointed to act in the child’s best interest. Each step taken and service provided are made in close collaboration with the child’s legal guardian.
• **Longer duration of care:** In the case of trafficked children, the crisis stage is longer and requires more services. This is because of constant, severe and untreated traumas in childhood. Sometimes when returning home their situation become even worse and they need long-term support for themselves and their families. They also generally have low levels of education and other developmental gaps as a consequence of trafficking and exploitation which require time to address.

**Special considerations for child trafficking victims in the crisis stage**

“Ana” was trafficked when she was a child. She was unable to return home because of an unhealthy family environment; her mother suffers from mental health issues and she was abused by her brother and father. She was therefore temporarily assisted in a shelter in the crisis stage as she could not live on her own. Different options were investigated by the case worker and given that she was a child without parental care and support. Her uncle agreed to assume custody of Ana and she was able to live with her uncle and his family.
Key issues and considerations in the crisis stage
Guidance for practitioners

Reintegration practitioners play a critical, often lifesaving role in the lives of trafficking victims in this crisis stage. The following guidance for practitioners is intended to support them in their day-to-day work in the crisis stage.

- **Be aware that the crisis stage is a difficult period for trafficking victims.** They will manifest a wide range of positive and negative emotions and reactions. The intensity of a victim’s reactions and emotions will also vary a great deal from beneficiary to beneficiary. These reactions are normal as they process their traumatic life events.

- **Be calm, patient and understanding of beneficiary’s reactions and behaviours in this period of crisis.** These reactions and behaviours are not directed at you personally. Talk to your supervisor about your feelings when these reactions and behaviours are upsetting or confusing.

- **Be patient.** The time you may need during the crisis stage may vary a great deal from beneficiary to beneficiary.

- **Work with each beneficiary to conduct a needs assessment, identifying what needs they have and what support and services they will require to meet this need.** Take the time needed to conduct this needs assessment, allowing the beneficiary to think and reflect in this process. Identify new needs that arise over the course of the crisis stage. Discuss these with the beneficiary and integrate these needs and services into the reintegration plan.

- **Based on the needs assessment, work together with the beneficiary to design their reintegration plan, with a particular focus on the initial crisis stage.** Ensure that the reintegration plan is realistic and achievable, with identified goals at specific intervals of time.

- **Assistance and services should be tailored to each individual victim’s specific needs in the crisis stage.** Carefully consider what services will address the victim’s needs. Partner with different institutions and organisations to ensure that they have access to these services.

- **Obtain written informed consent from the victim about their reintegration plan and the various services they may receive.** Ensure that they understand that all assistance (at all stages of reintegration) is voluntary and that they may withdraw their consent at any time.
Be clear in your communication with beneficiaries, taking the time needed to ensure that they are fully informed about all aspects of their recovery and reintegration and with particular attention to what is happening at present in the crisis stage. Provide them with written information about assistance in a format that is understandable, accessible and age-appropriate. Encourage them to ask questions whenever they wish and about any aspect of assistance and reintegration. Regularly communicate with beneficiaries about the progress of their reintegration plan and work together to make adjustments, including in accessing additional services.

Engage the beneficiary in all decisions around assistance options and keep them informed about any adjustments or changes needed. Consider also alternative options in the event that the beneficiary wants to make changes to their plan.

Work closely with your MDT colleagues in identifying victims’ needs as well as opportunities for support and services. Be open to advice, guidance and reassurance from your MDT colleagues as we all learn from each other including when we have succeeded and also when we have failed.

Remember that you are part of a team and you are not facing this challenging work on your own. Rely on your colleagues for guidance, suggestions and support. Communicate with your supervisor about any problems and concerns you are facing and work with your supervisor to find solutions and options.

Ensure that your approach in working with victims is victim-centred, gender-sensitive, child-friendly, culturally appropriate and trauma-informed. Ask for guidance and support from supervisors and colleagues in ensuring that this is the case. Be open to suggestions on how to apply these approaches in practice.

Guard the beneficiary’s privacy and confidentiality and be clear about when case management may require discussing the case with other practitioners. Gain the beneficiary’s informed consent when case file information is shared with other practitioners and ensure that those practitioners are bound by confidentiality requirements.

Be aware that working with trafficked children in this stage can be intense and difficult. Work closely with child protection counterparts in this stage.

Ensure that all decisions taken in the case of a trafficked children are in the child’s best interest.

Engage the child in the needs assessment and development of a reintegration plan. Discuss any decisions with the child in advance. Ensure that all measures are taken with consent from the parent (or legal guardian) and ideally also with the assent of the child.
Stage 2. The transition stage (from 7 to 12 months)

About the transition stage

Following the crisis stage is a period of stabilisation and transition, when victims begin to make the transition to “normal life”. At this stage, victims have generally recovered physically from trafficking induced injuries or diseases and are physically well. They have also generally worked through (or at least begun to process) their traumatic experiences and have developed (or are developing) skills to manage these. They have developed a healthy daily routine and rhythm of life, improved life skills and better interpersonal relationships. They generally have concrete and realistic plans for their future and are working toward those goals.

Victims have also generally worked to improve family relationships and may be in a position to return home to live with their families or to maintain regular contact with them. Some may have returned to live with family while others may be supported in semi-independent living apartments or living independently. Beneficiaries are increasingly responsible for themselves, with service providers supporting them in this process.

Most victims will have passed through the crisis stage in Albania and this will be a continuation in the reintegration process. Some victims, however, are assisted in the crisis stage while abroad and return home during this transition stage. This is likely to involve revisiting some of the steps from the crisis stage. The transition stage is generally about six months in length (from month 7-12 of the reintegration process) but may run longer, depending on the individual’s personal, family and community situation. This stage normally begins after about six months of crisis intervention but for some victims may begin as early as a few months after escape/exit from trafficking.

I have been in the centre for about some months now, time is running out fast, I am taking professional courses, I am thinking about how to build a sustainable future for myself. Sometimes I feel anger and pain. I listen to my favourite music, I try to relax and work on my thoughts. I have learn to give my thoughts the right answer, the real one, which defined me for who I am and who I want to be. (Young female trafficking victim, assisted by D&E)

In the transition stage

“Aria” comes from a small city in Albania. She was trafficked abroad for sexual exploitation when she was 17 years old. After escaping her trafficking situation, she was assisted in the shelter to process her trauma, recover physically and develop a plan for reintegration. She has finished high school and is now working. She is also attending a hairdresser course so that she can become a professional hairdresser. She hopes to soon return to live with her family. She visited her family several times, especially on holidays where she has stayed one day or two. Even though family relations are greatly improved, she feels that neighbours and other people in town are talking about her. Her family also feels uncomfortable with the community reaction when she visits them. Aria realises that it is still too early to return to live with her family and try to re-establish her life there. People in her community are very judgemental and more time is needed before gossip about her trafficking is likely to end. While this upsets her she understands that she cannot change this situation and so will stay for now in the capital.
**Victim feelings and behaviours in the transition stage**

The transition stage is categorised by emotional and psychological stabilisation, with victims better able to process and manage their emotional reactions. Beneficiaries learn how to behave and interact in complex situations including coping with confrontation and tension, managing negative feelings and reactions and constructively focusing their energy. Beneficiaries should be encouraged and supported to come to terms with their trafficking experience and to create a better life according to their talent, skills and possibility. Overall beneficiaries generally feel well. They are happy, enthusiastic and excited to move on with their lives – to live independently, try new things and start their new life.

At the same time, they often feel scared and doubt their ability to manage on their own including being able to find and keep a job, have sufficiently developed life skills or being able to have positive and healthy relationships. They may feel uncertain about the future given problems they faced in their lives before and during trafficking. They often have doubts about whether they will be able to cope on their own and care for themselves. Some of this anxiety manifests in physical symptoms like headache, stomach pain and sleeping problems.

** Victims’ feelings and behaviours in the transition stage**

“Suzana” started a new job and recently received her first salary. She is doing well at work and gets along well with her colleagues and employer. She is liked and respected by them. Recently though she has begun to worry that she will not be able to afford living in her own apartment or manage living independently. She is increasingly nervous about the future and fearful that something bad can happen to her. Her fear and stress are also manifesting in physical symptoms like headaches and nausea.

Some victims express a mix of contradictory feelings and emotions that they must process and manage. Some victims, for example, look back on their time while trafficked as abusive but also a time when they felt loved. This is especially the case when they have had an emotional relationship with the trafficker.

In other cases, victims may feel successful and confident in some aspects of their lives (for example, having found a job and doing well in the work setting) but they may be nervous and uncertain about the future (for example, able to live independently). Some beneficiaries who have denounced their traffickers may feel conflicted about the decision and wish to withdraw from the legal process because they feel calmer or they fear that involvement in the legal process will prevent them from moving on with their lives.

Common feelings and behaviours in the transition stage include:

- Joy and hope (moving towards dreams, goals)
- Fear of change (of changes to one’s routine facing new situations that may be difficult to manage)

“**It is a few months since I have started working. I like my job and I’m happy. But I still think ... what will happen to me when the people I have denounced are released from prison? And when I think about it, it gives me gives goosebumps...** (Female child trafficked for sexual exploitation, assisted by D&E)
Enthusiasm (for new things that will happen, new relationships and contacts)
- Impatience for good things to happen
- Increased self-confidence and self-esteem because of one’s new skills, capacities and life experiences
- Confusion and concern about the future, new life situations and the reintegration process
- Extremes in emotional reactions (sharing personal information, talking too much about one’s experience or situation, keeping everything private)
- Fear of failure, denial of personal abilities, not progressing in achieving goals.
- Impatience, leading to of reckless and thoughtless behaviour

Assistance and support in the transition stage

In this period, victims transition to more independence in their daily life, including in their living arrangements. They assume greater control and responsibility over their lives. Assistance in this period is focused on supporting their transition to independence and autonomy.

Adult victims, for example, should be supported toward economic independence and self-sufficiency. They are engaged in vocational training as well as job-market orientation activities and coached to find suitable employment (how to prepare a CV, preparation for job interview, effective communication with colleagues and employers and how to manage workplace challenges).

Some victims are engaged in internship programs in order to develop their professional skills or advance their vocational training skills before they look for formal employment. Some adults attend formal education to complete their schooling before pursuing training and economic opportunities. In some cases, beneficiaries have a profession and even quite substantial work experience but are unable to continue to work in that field due to injuries or illness caused by trafficking.

While living in the residential centre I attended a course for bartenders and pastry chefs. I had the opportunity to practice these professions in the social business set up by the organisation ... I love baking, brownie is my favourite cake and I’m good at preparing cappuccino. (Woman trafficked for sexual exploitation, assisted by D&E)

Assistance and support in the transition stage

“Amir” worked previously as a construction worker but can no longer do this type of work because of an injury sustained while trafficked for forced labour. Amir therefore needed vocational training for a new field of work and support in developing a new professional network through which he could find work. In addition, not being able to continue to work in his field made him feel badly about himself which impacted his emotional well-being. As such he benefitted from vocational training as well as on-going psychological and medical assistance. He also received worker disability assistance as he is unable to work due to his injuries. Assistance is provided for his daughter to attend kindergarten and for his wife to find work.

Child victims are supported to continue their formal education, either through school reinsertion or through equivalency programs. They may also take additional courses on topics
of interest such as computer and foreign languages. Depending on the child’s age, they may also receive vocational training toward finding a suitable job. Trafficked youth are typically behind in their formal education and may lack even the most basic literary and numeracy skills which requires educational “catch-up programs”. Professional training coupled with education and economic assistance can help them move on constructively with their lives.

Child trafficking victims also need social and recreational activities in this period to develop interests and hobbies and to be able to interact in healthy and positive ways with those around them. Developing other life skills, like interpersonal communication skills, time management, healthy social relationships, self-defence techniques, also takes place in this stage. These activities are often undertaken by mentors who offer the child a positive relationship and role model during their reintegration.

**Assistance and support in the transition stage**

“Davide” is 18 years old. He was trafficked as a boy for criminal activities including theft and drug distribution. He was trafficked from an early age and so did not graduate from high school. After escaping his trafficking situation he was assisted by a reintegration organisation. He attended a professional cooking course and then worked as an intern at a well-known restaurant in the city. He was then supported to find a job and now works as a cook in a family restaurant. Davide works hard and has shown himself to be professional, reliable and correct and has maintained his job for some time. He is now able to pay his bills and support himself. He lives a simple life but one without problems or difficulties.

During the transition stage, beneficiaries prepare for independent living including building self-confidence, improving family and interpersonal relationships and parenting skills for those with children. This also involves practical life skills like decision-making, time and resource management, household budgeting, education and health promotion, planning for the future and preparation for independent living. Some beneficiaries’ parents lack these practical skills and so they have not learned them at home. Some also have been living on the streets when they were trafficked and so have learned only how to live and survive in the moment, not thinking or planning for tomorrow.

After completing vocational training and maintaining a job for some time, beneficiaries will move out of the shelter and into protected and subsidised apartments for an interim period, until they are able to assume responsibility for living costs. Others live in shared living apartments with other friends or independent living. This generally occurs after the victim has completed some education or training and may have been working for some time. Victims with children often work irregular hours or shift work, which means that they require childcare services (for example, crèche, day-care programs, kindergarten) as well as after school programs and night-time alternatives while they are at work.

It can be very difficult to settle in a new place, where they do not know anyone and to also absorb their living costs. Some trafficking victims return to live with their families and are assisted to find work. Some beneficiaries return to their communities of origin in order to be close to their families, but do not live with them. In both cases, having family support makes it is easier to reintegrate and feel at home.
Family mediation is critical in this stage as decisions are made about whether and when it is safe and advisable for beneficiaries to return to live with their families or to resume contact with them. Some beneficiaries come from violent family settings (with child abuse, domestic violence) or live with family members with unhealthy behaviours (for example, abuse of drugs or alcohol, gambling). It is therefore necessary to assess whether this is a setting which can be repaired and, if so, at what stage it is safe for the beneficiary to return and reintegrate.

During this transition stage some children return to live with their families. This is done only after an assessment is conducted by the child protection worker and the home environment is determined to be safe and suitable for reintegration. This requires understanding the family dynamics at play and how best to support the child or youth (and their family).

For children who are unable to return home to live with their families, options are constrained. Some children may be placed in foster families, although this system remains underdeveloped in Albania with only limited placement options. Other children might be placed in alternative care settings (for example, family homes with a small number of children and youth) although these homes are also limited in number. Some children are also placed in kin-based care arrangements (for example, with supportive family members or relatives such as an uncle, aunt, sister, brother, etc.) who are willing to care for the child in their families.

During the transition stage, beneficiaries continue to receive on-going support to meet their assistance needs, but with adjustments to the specifics of this stage and the victim’s individual recovery. For example, while the crisis period is characterised by emergency medical needs to deal with injuries and disease from trafficking, medical assistance in the transition stage is focused on general health and well-being and regular health check-ups. Similarly, counselling in this stage is focused on developing practical skills (communication skills, decision making, time management, household budgeting), forging constructive interpersonal relationship (with family, employers, work colleagues) and developing skills to maintain employment. Counselling is also oriented to include family mediation, to help victims build or repair relations with their family or to develop other forms of support, from other relatives or friends. This is also important for family members to understand what has happened in the lives of the victim as well as their role in the reintegration process and the support that they can offer.

Assistance should also be provided to victims’ family members in this stage. When victims return to live with their family, family members need support to be able to, in turn, support the victims’ recovery and reintegration. This includes assisting the victim’s family members (parents, spouses, siblings) to find work, attend vocational training, address health issues,
receive psychological support and counselling, address legal issues (such as divorce, domestic violence issues), setting up and managing a small business, amongst others. Children of trafficking victims require assistance in attending school including support educational reinsertion, school materials and tutoring. They also often require birth registration and identify documents to access to various services.

It is also during this transition stage that victims are informed about services and support in their community (either their home community or the community where they are integrating), offered by NGOs and state institutions. They are provided with a map of community-level services to access, as needed. Case managers provide victims with information about the existing services in their community including how to approach these organisations and institutions for assistance. They may initially be accompanied by their case managers to learn how to approach and request these services later on. Victims are also supported and encouraged to maintain their commitment and motivation in the reintegration process.

In the transition stage, the case manager monitors beneficiaries at least once a week, either through direct visits or telephone calls. Systematic, long-term follow up is an important part of reintegration work as it allows staff to identify and address the needs of beneficiaries as they arise and to support beneficiaries in overcoming the difficulties faced during the reintegration process. It is also important in equipping beneficiaries with information to access services and support within the community where they live. Regular progress report and on-going assessments are conducted by the case manager, in consultation with the victim, to identify each victim’s accomplishments and strengths and current or new service priorities in need of support. This is also an opportunity for the beneficiary to note any complaints or issues they have with the reintegration plan or the provision of services.17

Support continues to be overseen by the case manager, with support from the MDTs. In the transition stage, other practitioners become involved to support the reintegration efforts. This may include:

Education staff (for example, school teachers, school psychologists, school directors and administrators) to support school reinsertion, access alternative education programs, provide school materials, access tutors and after school support

Medical staff (for example, family doctor, medical administrators, specialised doctors as paediatricians and psychiatrists) to access to health services including specialised services, mental health community centres in case of mental health problems.

Employment and economic empowerment practitioners (for example, employment office staff, administrators, staff of professional training centres) to access vocational training, job opportunities and employment programs.

Public administrators (for example, in municipalities, different government agencies or departments) for birth registration, to access identity documents and to access state services such as subsidised housing programs, childcare and registration to crèche and kindergarten, health services and economic aid.

Legal practitioners (for example, lawyers, legal assistants, paralegals) to provide support and representation for victim-witnesses in criminal justice proceedings, assist with civil proceedings (for example, divorce, child custody, property rights, alimony and child support), accessing residence permits for foreign victims, provide information on social benefits and entitlements (for example, subsidised housing, access to documents), to access physical protection as a trafficking victim.

Social worker (for example, state social workers, social assistants) to access social services and benefits as well as rights and entitlements as a victim of trafficking.

Staff of community and youth centres (for example, teachers, educators, social workers) to support on access to different social activities for them and their children.

The transition stage is characterised by some key milestones. While this differs from person to person, some common benchmarks include:

- Equipped with information about support and services available in one’s home community (trafficking specific assistance and social service generally, from state institutions and NGOs)
- Increased life skills (including building healthy relationships, communication skills, parenting skills, time and money management, cooking and cleaning)
- Access to stable and affordable housing
- Completed vocational training linked to job opportunities and aspirations
- Found and maintained a job including developing constructive work relationships and professional behaviours
- Attended and graduate from school
- Increased sense of autonomy
Motivated and committed to the reintegration process
Experienced personal growth including emotional growth and stability

Special issues and considerations in the assistance of trafficked children in the transition stage

- **Decisions about durable solutions**: In the transition stage, decisions will be made about whether children can return home to their family or whether alternative solutions need to be considered and pursued. Of chief concern is available options in the event that it is not safe for a child to return to live with their family.

- **Participation in decision-making**: Directly involving victims in initiatives that directly affect their lives or their peers is very important in order to understand their needs, to find out new alternatives and to share ideas.

- **Increased independence and autonomy**: Working with children in this stage should foster increased independence and autonomy as a key skill in reintegration and social inclusion. Children forge their sense of self in this stage and develop a sense of responsibility. They can be supported to access social services by themselves and also take on other tasks that they were not previously able to complete independently.

- **Recuperation and rebuilding of healthy social ties and social support**: Establishing interpersonal relationships with others is key for children. This includes with family as well as peers and those in the wider social environment.

Special considerations for child trafficking victims in the transition stage

“Dea” was trafficked within Albania for sexual exploitation when she was 14 years old. When she escaped her trafficking situation she was accommodated in a shelter for six months to help her process her trauma and recover physically. As a child she required a great deal of support and assistance for her recovery and reintegration, particularly as her schooling was interrupted by trafficking. She needed to continue and finish formal school and attend other educational programs (computer and English language courses) to meet school requirements. Her experience of trafficking also interfered with her ability to develop health relationships, create a safe social network and develop interpersonal communication skills. Support was provided to re-establish the relationship with her family and during this time, her relationship with her parents improved substantially. Dea decided to return home to live with her family in this transition stage and her family was happy to receive her. She continued with her reintegration programme at home and assistance was provided to Dea and the entire family.
Key issues and considerations in the transition stage
Guidance for practitioners

The transition stage is a fundamental building block for a beneficiary’s longer-term reintegration. Practitioners play a critical role in supporting victims in this stage while also creating space and opportunities for them to take initiative in their reintegration. The following guidance for practitioners is intended to support them in their day-to-day work in the transition stage:

- Be supportive and patient in all interactions with the beneficiary, recognizing that negative feelings and reactions are a natural part of their recovery and are not a reflection of you or your work. The transition stage involves both successes and frustrations and beneficiaries will express these emotions and reactions at various stages of this stage.

- Encourage the beneficiary to follow their reintegration plan, to keep moving forward, to take small but steady steps toward reintegration success. Work will victims to review and revise the plan as needed and in response to life events. Ensure that the reintegration plan is realistic and achievable, with identified goals at specific intervals of time. Ensure that assistance and services are tailored to the beneficiary’s specific needs.

- Ensure that the beneficiary is involved in and at the centre of all decisions about their reintegration. This includes children who also need to be kept informed and engaged in deciding what best meets their needs and interests.

- Work closely with MDT colleagues in the transition stage and in identifying assistance and support. Research the different organisations and institutions that provide services needed by the beneficiary in the transition stage. Partner with different institutions and organisations to ensure that the beneficiary has access to all of the services and support they need in the transition stage.

- Provide the beneficiary with written and verbal information about assistance in a format that is understandable, accessible and age-appropriate. Ensure that the beneficiary has information about comprehensive, long-term services to support their reintegration. This may be trafficking-specific support or more general services, from the state or NGOs.

- Keep open lines of communication with the beneficiary at all times so that they feel comfortable to contact you at any time and to ask questions about their needs and how these can be met. Regularly communicate with the victim about the progress of their reintegration plan and work together to make adjustments, including in accessing additional services.
Look for and accept support and guidance when needed. Communicate and work with your supervisor about any problems and concerns you are facing. Look also to your colleagues for advice, guidance and support.

Pay close attention to meeting the victim’s needs that are specific to the transition stage. For example, the development of life skills, fostering a health psycho-social habits for independent living, access to basic education alongside professional/vocational training and economic empowerment programmes.

Tailor services and support to the underlying environment of the transition stage. For example, those in semi-independent living, those who have returned home and those reintegrating in a new community.

Recognise and take into account the key role played by the beneficiary’s social network in their recovery and eventual reintegration including as a safety net in cases of crisis. Work with the beneficiary to develop and enhance their social network in the transition stage.

Regularly monitor the beneficiary’s progress and be reflexive and flexible in reviewing their progress. Make this assessment in close coordination and communication with the beneficiary and take their views into account on next steps.

Recognise and take into account that this stage will be especially taxing for some victims and more care and attention may be needed in their case. Be flexible and open to the need for greater attention and support.

Be aware that working with trafficked children in the transition stage poses specific challenges and barriers that may be taxing for you as a practitioner. Work closely with child protection counterparts in this stage.

Ensure that all decisions in the case of a trafficked children are in the child’s best interest. Engage the child in this assessment of options and measures and discuss any decisions with the child in advance. Ensure that all measures are taken with consent from the parent (or legal guardian) and with the assent of the child.

Ensure that your approach in working with victims is victim-centred, gender sensitive, child friendly, culturally appropriate and trauma informed. Ask for guidance and support from supervisors and colleagues in ensuring that this is the case. Be open to suggestions on how to apply these approaches in practice.
Stage #3. Reintegration and inclusion (from 13 to 36 months)

About the reintegration and inclusion stage
This stage begins when the victim is ready to live an independent life. The focus is on galvanizing victims’ empowerment and self-confidence and supporting their transition to full independence including the ability to support themselves to maintain a decent standard of living, and function optimally in society. They have concrete and realistic plans for their future and work toward these goals.

At this stage, beneficiaries have begun to live a “normal life” and become increasingly independent, autonomous and self-confident. They are, in most cases, physically and psychologically well and have access to services needed to maintain their well-being. They live in rented apartments or they go home to live with families. In some cases, beneficiaries develop a healthy and sustainable personal relationship, get married and have children.

They generally do not have security problems linked with trafficking situation and those that do know what to do and where to go if needed (list of emergency contacts and knowledge of how communicate with relevant authorities). They know about available services in their community and how to access these services. As issues and needs arise, they are able to find ways to address them including reaching out for services and assistance, as needed.

Nonetheless, while they are living independently and generally able to cope on their own, they do face issues from time to time, including safety and legal issues, psycho-social problems, health problems.

In the reintegration and inclusion stage

“Vera” has always had low self-esteem. When she was assisted in the shelter she attended a tailoring course and her case manager also worked with her on her self-confidence and empowerment. Once trained she worked in various tailoring companies to gain work experience. Over time she has become more and more competent in her skills and more confident in herself. She is now running a small business which allows her to earn money to support herself and her daughter. She has changed a great deal over the course of her reintegration. Having a successful business has also given her a lot of confidence as well as joy in her job as a tailor.

In this period beneficiaries also find work, open a business or initiate some form of income generation activity. They may initially struggle to maintain a job and even change jobs a few times in this period. But over the course of this stage they generally find work that they keep in the longer-term. In this period they gain an increasing degree of financial independence and are able to assume full responsibility for living costs. Even if they have a sustainable job, they often aim to increase their professional skills through professional courses to have improved opportunities in the labour market. In the case of children, this stage generally involves continuing and often completing their formal education.

During this stage, victims develop and maintain healthy social interactions and interpersonal relationships, particularly family relationships. Many victims come from complicated and even dysfunctional family environments and have faced issues ranging from poor communication
and weak parenting skills to neglect and violence. Other victims come from families that struggle to cope with the impact of trafficking on their loved one and also on their family life and relationships. In this case families are included in reintegration process and become more supportive and collaborative. Much work is done to support and foster healthy and safe family settings. Most victims return home to live with their family in this stage or are in regular contact with them.

This stage is generally from one to three years in length but may be for longer, depending on the individual’s personal, family and community situation. Some beneficiaries need to be assisted in the program for a longer period compared with the others, including:

- trafficked children and youth,
- victims who have denounced their traffickers and face security risks,
- victims who have entered in the program accompanied with their children,
- victims with physical disabilities,
- victims with mental health problems.

This stage normally begins after about one year of crisis intervention and transition but some victims may be in a position to begin working to reintegrate earlier.

**Victim feelings and behaviours in the reintegration and inclusion stage**

The reintegration and inclusion stage is categorised by feelings of continued development, growth and well-being. Victims develop and improve life skills overall. Beneficiaries begin to realise their potential and improve their behaviour and reactions over time. They find purpose, set new goals and achieve their objectives. Victims generally experience physical and psychological well-being as well as increased self-confidence and self-esteem.

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**Victims’ feelings and behaviours in the reintegration and inclusion stage**

“Altin” says that she is very excited to move and live alone. Being part of the program gives her feelings of comfort and support. She sometimes doubts herself (how she is going to handle cooking, taking care of the home alone, paying bills and other responsibilities) but she also knows that she has a good job with a good salary that can cover her living expenses and afford a comfortable life. She has good friendships as well.

“Illir” is happily married, with children. He migrated to support his family but he ended up being trafficked for forced labour. He was happy to return home to live with his family but was deeply saddened that the injuries he suffered while trafficked means that he cannot hold and carry his young daughter.

“Albana” is 22 years old and lives with her family. She works as an assistant in a finance office and also studies finance at the university. She says that she gets very tired during the day but feels satisfied and happy that she manages to earn an income that supports her and helps the family with expenses. This has increased her self-confidence and motivates her every day.

Beneficiaries also learn about available public services and how they can benefit from the state system. This involves building confidence to communicate with service providers in seeking
out these services and support. Beneficiaries generally work in this period and gain valuable work experience. They are professionally trained and have work experience. They have knowledge of how to find a new job if they need it. They also have a social network and gain confidence in their social relationships.

At the same time, victims may also be feeling a certain level of fatigue and even frustration as they increasingly face life’s challenges on their own, including different set-backs and crises over time. Some may experience stigma and discrimination from neighbours and community when they return home. Those who have denounced their traffickers sometimes feel unsecure when they think about their traffickers being released from prison and knowing where they and their families live. Victims also must face the daily life challenges (for example, of low incomes or unsatisfying work) as well life crises such as children or parents who are will and need extra care and resources.

Common feelings and behaviours in the reintegration and inclusion stage include:

- Feelings of wellbeing (to be living independently and making one’s own decisions)
- Pleasure in exploring and discovering and learning new things
- Satisfaction at being able to meet one’s own needs
- Able to empathise with others in similar situations
- Excitement (about starting a new life, relying on oneself)
- Gratitude (for individuals who support them in difficult times)
- Confusion, frustration and doubt about how to manage the future and changes ahead
- Confidence in the improving and using one’s own skills
- Trust (believing in oneself, in others, in society and state structures)
- Proud of one’s success and feel able to serve as role models for those in early stages of reintegration

**Assistance and support in the reintegration and inclusion stage**

Assistance and support in this stage of the reintegration process is focused on establishing and maintaining victims’ self-sufficiency, independence and overall well-being. Assistance in this period is focused on galvanising successes in terms of independence and autonomy. This may involve the victim returning to live in their family and community of origin or integration into a new community, or even a new country.

Support in this stage consists of reintegration assistance to meet any on-going needs as well as to the family and community where the beneficiary has decided to reintegrate. Assistance to the victim focuses on self-sufficiency which generally means:

- Economic empowerment opportunities (support in finding and maintaining a job or opening and managing a small business that ensures an independent life. Generally vocational training will have been completed in the transition stage but in some cases beneficiaries may require on-going or further training in this period).
- Psychological support (support in preparing for living independently and overcoming any difficulties faced during this stage of the reintegration process and increasing their personal motivation in day-to-day life).
- Education support (support for those who have not attained a satisfactory level of education which will limit options to secure and maintain a decent job).
Information about services (increased knowledge of different resources and services available in the community where they will reintegrate including contact information and a map of services, guidance in contacting and building relationships with support institutions in the community in which they reintegrate).

Legal support (support during civil proceedings on the right for compensation as well as with any non-trafficking legal issues such as divorce, custody, inheritance, property ownership).

Mentoring and peer support (socializing activities that, through role modelling and working with peers, allows beneficiary to forge social connections in their lives, build healthy relationships, feel less isolated and stigmatised, build trust and self-esteem and increase skills to avoid exploitation or harmful personal relationships).

Assistance to beneficiary’s family members to support the family to maintain a satisfied economic level (helping parents or spouses to find work or set up a business, counselling and psychological support for the entire family, health care for family members, specialised treatments that can contribute to a healthy family environment, such as substance abuse treatment).

Reintegration staff monitors beneficiaries in various locations – at home with their families, living independently, in family houses and foster families and so on. Staff monitors the beneficiaries during reintegration at least once a month, either through direct visits or telephone calls. Systematic, long-term follow up is an important part of reintegration work as it allows staff to identify and address the needs of beneficiaries as they arise and to support beneficiaries in overcoming the difficulties faced during the reintegration process. It is also important in equipping beneficiaries with information to access services and support within the community where they live.

Reintegration staff also provide regular psycho-social assistance to beneficiaries in this time. Long-term monitoring is conducted even beyond the period of intervention, up to five years after initial crisis intervention and beyond the period of assistance and support. Beneficiaries are monitored and followed up on regular basis to ensure that they do not face any crises or set-backs and to ensure that their reintegration process is progressing well.

The support that I have received helped me very much to think and to decide about my future. I had a good practice in tailoring, and now I have a job and share apartment with other girls. Now I am clearer for the future and I know what to do and how to achieve my goals. I feel free and ready to face everything. (Young female trafficked for sexual exploitation, assisted by D&E).

In addition, it is important to work with communities to foster and healthy and supportive environment for returning trafficking victims – to increase community knowledge of trafficking and to encourage community members to accept, support and not discriminate against trafficking victims.
**Assistance in the reintegration and inclusion stage**

“Klea” was trafficked five years ago for sexual exploitation. She has been assisted over a period of more than three years in which she has received various forms of assistance to support her recovery and reintegration. She is now doing well and living independently. She has a stable job working as a graphic designer in a private business company in the city and is able to support herself with her salary. She has good relationship with her parents even though she has decided to live independently in the capital. She visits them often, spending weekends with them. She has friends who she made after leaving the shelter and with whom she feels very good. She stays in touch with staff from the assistance organisation and from time to time requests information about services offered by the municipality and state institutions.

Support and monitoring during this stage is conducted by the case manager, who may access the support of others like MDT members or service providers in the victim’s home community. Case managers are available to answer questions and also offer information about other services and support available to them in their community. Other practitioners may also become involved to support the reintegration efforts, particularly those in the local community and often not specialised in anti-trafficking services. This may include:

- **Education staff** (for example, school teachers, school psychologists, school directors and administrators) to support school reinsertion, access alternative education programs, provide school materials, access tutors and after school support.

- **Medical staff** (for example, family doctor, medical administrators, specialised doctors as paediatricians and psychiatrists) to access health services including specialised services, mental health community centres in case of mental health problems.

- **Employment and economic empowerment practitioners** (for example, employment office staff, administrators, staff of professional training centres) to access vocational training, job opportunities and employment programs.

- **Public administrators** (for example, in municipalities, different government agencies or departments) to access identity documents and state services like housing schemes programs, childcare, health services and economic aid.

- **Social worker** (for example, state social workers, social assistants) to access social services and benefits as well as rights and entitlements as a victim of trafficking.
**Child protection worker**, to provide children with social services and to follow up and monitor their progress.

The reintegration and inclusion stage is characterised by some key milestones. While this differs from person to person, some common benchmarks include:

- Long-term housing solution
- Long-term employment; maintaining consistent employment over time
- Enhanced life skills that are used successful in daily life.
- Sustainable and improved relationship with family
- Emotional stability and well-being
- Ability to meet one’s needs and cope with problems
- Participating in social life and social interactions
- Experiencing a reasonable standard of living

Through follow-up, case managers assess the long-term impact of the assistance provided in terms of the various reintegration outcomes outlined above. When a victim is assessed to be successfully reintegrated their case file can be closed. Case closure is most effective when it occurs as part of a mutually agreed, planned process when case plan goals have been achieved. Where progress has been regularly monitored and reviewed, it is likely that the decision to close will be mutual.

**Special issues and considerations in the assistance of trafficked children in the reintegration and inclusion stage**

- **Duration of the reintegration process**: The reintegration process for children tends to last longer than adults. This is because the impact of trafficking on children is often greater than adults and they require more time to recover. It is also because the services they need – like formal education – are longer in duration. In addition to educational support they also generally need professional training in order to prepare them for the future life and employment opportunities.

- **Impact of trafficking on children**: Children have less developed coping skills than adults and so the impact of trafficking on children is likely to be greater. Trafficked children are exposed to various forms or abuse and trauma they require treatment and monitoring for a longer-term period. The nature, duration and intensity of trafficking informs how a child is impacted. The longer a child is trafficked, the longer the reintegration time and consequently the more attention and support is needed.
• **Finding durable solutions:** When children are not able to return to their family, this further complicates reintegration and inclusion as there are limited options for long-term care and residential accommodation is not suitable for longer-term reintegration of children. If children do not live together with family, other accommodation options are needed.

• **Getting involved in youth community activities:** It is important for children to be actively engaged in their day-to-day life. Getting involved in community activities can boost their confidence and self-esteem and help them build social and interpersonal skills as well as grow or strengthen their social network.

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**Special considerations for child trafficking victims in the reintegration and inclusion stage**

“Meri” will turn 18 in a few months. She entered in the reintegration program when she was 14 years old, having been trafficked internally for sexual exploitation and drug distribution. She has faced many challenges over these years including overcoming the very serious impacts of trafficking for sexual exploitation at such a young age. She also had problems with her family who did not accept her and blamed her for her trafficking. Meri has received much assistance in working through the problems with her family and over time she has managed to forge a stable relationship with her mother and one of her brothers, although she continues to have problems with one brother. Due to these severe traumas in childhood, she struggled to manage her emotions and sometimes would become aggressive. After a few years of support she has learned to recognise her reactions and ask for help when she needs to manage her feelings. She is a strong young woman, with many talents. She is currently finishing a degree in music at the professional high school and hopes to study at the Academy of Arts at the University. Nevertheless, and even after so many years, she still needs support to realise her plans and dreams to have a career as a singer and musician.
Key issues and considerations in the reintegration and inclusion stage

Guidance for practitioners

The following guidance for practitioners is intended to support them in their day-to-day work in this period of reintegration and inclusion.

- Recognise that reintegration and inclusion will involve some important successes to be celebrated as well as some failures and set-backs when victims will need support.

- Encourage the beneficiary to keep moving forward with their reintegration plan. Review and revise the reintegration plan as needed and in response to life events, ensuring that it is realistic and achievable. Support them to trust their instincts and the skills that they have learned. Let them know that life is full of surprises and that things won’t always work out as they have planned but that they have the skills to adapt and adjust.

- Ensure that the beneficiary is involved in and at the centre of all decisions about their reintegration. This includes children who also need to be kept informed and engaged in deciding on what best meets their needs and interests.

- Conduct regular on-going monitoring and follow up over the duration of reintegration. Be available and responsive to beneficiaries when needs arise. Ensure that the beneficiary is engaged in on-going monitoring.

- Anticipate any potential safety or security issues which may be caused by monitoring work and develop a plan which avoids these risks (for example, interviewing beneficiaries in their communities, discussing with family members). Avoid any monitoring activities that may cause harm. Consult with victims to ensure an accurate and realistic assessment of safety and security issues.

- Be supportive and patient in all interactions with the beneficiary.

- Offer advice and support when needed but also support the beneficiary to articulate their own solutions to problems as they arise. Encourage them to find these solutions.
Focus on the beneficiary’s strength and resilience and encourage them to access these. Remind them that they managed to cope with this whole process and how they can cope with other challenges they face.

Maintain open lines of communication with the beneficiary at all times so that they feel comfortable to contact you at any time and to ask questions about their needs and how these can be met.

Offer possibilities for the beneficiary to engage and participate in peer support groups or with peers or other alternatives for their social engagement and participation.

Ensure that your approach in working with victims is victim-centred, gender-sensitive, child-friendly, culturally appropriate and trauma-informed. Ask for guidance and support from supervisors and colleagues in ensuring that this is the case. Be open to suggestions on how to apply these approaches in practice.

Look for and accept support and guidance when needed. Communicate and work with your supervisor about any problems and concerns you are facing. Look also to your colleagues for advice, guidance and support.

Be aware that working with trafficked children in the reintegration and inclusion stage poses specific challenges and barriers that you may need help in resolving. Work closely with child protection counterparts in this stage as well as other practitioners in the community where the victim is reintegrating.

Ensure that all decisions in the case of a trafficked children are in the child’s best interest. Engage the child in this assessment of options and measures and discuss any decisions with the child in advance. Ensure that all measures are taken with consent from the parent (or legal guardian) and ideally also with the assent of the child.

Give special attention and consideration to beneficiaries with more complex or difficult cases. While this will vary, this may include trafficked children (especially those without parental care); victims without family support; trafficking victims with dependents, especially children; victims who are marginalised; those with mental health issues; victims with disabilities, under-considered victims (like men and boys); victims with substance abuse problems; victims with serious or chronic medical conditions; those without documents or legal status; victims with security problems; amongst others.
Appendices

Appendix #1. Glossary of terms
Appendix #2. Key milestones at the different stages of reintegration
Appendix #3. Victims’ feelings and behaviours at the different stages of reintegration
Appendix #4: Ethical principles and guidance in working with trafficking victims
Appendix #5: Research and resources on reintegration by D&E and NEXUS Institute
# Appendix #1. Glossary of terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Assistance</td>
<td>Voluntary measures, programs, and services aimed at the recovery of trafficked persons, provided by the state, non-governmental organisations (NGOs), and international organisations (IOs), in countries of destination, transit, and origin. Assistance may be trafficking-specific or more general forms of assistance offered as part of general state services, such as child protection systems or services for the socially vulnerable. Assistance might include, but is not limited to: accommodation/housing, medical care, psychological assistance, education, vocational training, life skills, employment and economic empowerment, legal assistance, transportation, and family mediation/counselling.</td>
</tr>
<tr>
<td>Child-friendly approach</td>
<td>Design and implement measures with the needs, interests, safety and best interests of the child in mind.</td>
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<tr>
<td>Culturally appropriate approach</td>
<td>Take into account and respect the victim’s cultural and religious beliefs, values, norms, practices and language.</td>
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<tr>
<td>Gender-sensitive approach</td>
<td>Treat all victims with equal respect regardless of their gender identity, refraining from stereotypes or assumptions on the basis of gender.</td>
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<tr>
<td>Identification</td>
<td>Identification is the process by which an individual is identified as a trafficking victim or a presumed trafficking victim. Formal identification is the process or decision that results in an official state determination that a person is a victim of trafficking in persons, while informal identification is the process or decision that results in a person being considered to be a victim of trafficking outside the formal identification process of a state.</td>
</tr>
<tr>
<td>Presumed (or potential) victim of trafficking</td>
<td>Person who has been screened and positively identified as a victim of trafficking but not formally identified as such.</td>
</tr>
<tr>
<td>Protection</td>
<td>One of the three Ps of the anti-trafficking response, aimed at protecting victims of trafficking. It is generally comprised of the process of identification, referral, and assistance, including reintegration. It also refers to each government’s role in taking affirmative steps to assess risks and ensure the safety of each victim.</td>
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</table>
| **Reintegration** | The process of recovery and social and economic inclusion following a trafficking experience. It includes: settlement in a safe and secure environment; access to a reasonable standard of living; mental and physical well-being; opportunities for personal, social, and economic development; and access to social and emotional support. Reintegration may involve return to the victim’s family and/or community of origin, integration in a new community, or integration in a new country depending on the individual’s specific needs and interests. Reintegration takes place at different levels: at an individual level, in the family environment, within the wider community, and within formal society.  
| **Trauma-informed approach** | Recognising the impact of trauma and promoting environments of healing and recovery. |
| **Victim-centred approach** | Prioritising the victim's wishes, safety and well-being in all matters and procedures. |
| **Trafficking in persons (TIP)** | 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.  
| **Victim of trafficking (VoT)** | Person who has experienced and/or is experiencing conduct set out in Article 3 of United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (Trafficking Protocol) or relevant domestic legislation. |
## Appendix #2. Key milestones at different stages of reintegration

<table>
<thead>
<tr>
<th>Crisis stage</th>
<th>Transition stage</th>
<th>Reintegration and inclusion stage</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Accepting one’s life situation; finding meaning and purpose in one’s new life</td>
<td>- Equipped with information about support and services available in one’s home community (TIP specific and social service generally, from state institutions and NGOs)</td>
<td>- Long-term housing solution</td>
</tr>
<tr>
<td>- Establishing a new routine and rhythm of life</td>
<td>- Increased life skills (including building healthy relationships, communication skills, parenting skills, time and money management, cooking, cleaning)</td>
<td>- Long-term employment; maintaining consistent employment over time</td>
</tr>
<tr>
<td>- Reduced trauma and emotional difficulties; success in processing trafficking experience</td>
<td>- Finding sable housing</td>
<td>- Enhanced life skills that are used successful in daily life.</td>
</tr>
<tr>
<td>- Improved physical and psychological well-being including self-confidence and personal autonomy</td>
<td>- Completing vocational training that is linked to job opportunities and aspirations</td>
<td>- Sustainable and improved relationship with family</td>
</tr>
<tr>
<td>- Able to manage one’s immediate environment</td>
<td>- Finding and keeping a job and building constructive work relationships and professional behaviours</td>
<td>- Emotional stability and well-being</td>
</tr>
<tr>
<td>- Ability to show empathy, affection and intimacy</td>
<td>- School attendance and graduation</td>
<td>- Ability to meet one’s needs and cope with problems</td>
</tr>
<tr>
<td>- Improved family relationships and social relationships generally</td>
<td>- Increased sense of autonomy</td>
<td>- Participating in social life and social interactions</td>
</tr>
<tr>
<td>- Being safe and secure</td>
<td>- Motivation and commitment to the reintegration process</td>
<td>- Experiencing a reasonable standard of living</td>
</tr>
<tr>
<td></td>
<td>- Personal growth including emotional growth and stability</td>
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</table>
### Appendix #3. Victims’ feelings and behaviours at different stages of reintegration

<table>
<thead>
<tr>
<th><strong>Crisis stage</strong></th>
<th><strong>Transition stage</strong></th>
<th><strong>Reintegration and inclusion stage</strong></th>
</tr>
</thead>
</table>
| - Anger, aggression and frustration, including outbursts, impulsive behaviour, aggression towards others and self-aggression (self-harm and attempted suicide) | - Joy and hope (moving towards dreams, goals)  
- Fear of change (of changes to one’s routine facing new situations that may be difficult to manage) | - Feelings of wellbeing (to be living independently and making one’s own decisions)  
- Pleasure in exploring and discovering and learning new things  
- Satisfaction at being able to meet one’s own needs  
- Able to empathise with others in similar situations  
- Excitement (about starting a new life, relying on oneself)  
- Gratitude (for individuals who support them in difficult times) |
| - Flashbacks and nightmares about the traumatic event  
- Anxiety, fear, nervousness including difficulty in concentrating  
- Suspicion and distrust of others  
- Physical reactions (elevated heart rate, muscle tension, anxiety attacks)  
- Denial (denying that trafficking happened or bad events while trafficked)  
- Contradictory feelings (of love and hate against traffickers and abusers, especially when trafficked by a partner or spouse)  
- Pessimism and limited hope for having a “normal life” (get married, have a family, have a career)  
- Sense of relief (for the change expected on life)  
- Sleeping problems and disorders (insomnia, sleep apnoea, parasomnias, nightmares)  
- Low or high emotional state  
- Feeling hopeless including low motivation to recover and reintegration and loss of interest in daily activities and life in general  
- Feelings of guilt and shame (for being trafficked, failed at migration, acts committed while trafficked)  | - Enthusiasm (for new things that will happen, new relationships and contacts)  
- Impatience for good things to happen  
- Increased self-confidence and self-esteem because of one’s new skills, capacities and life experiences  
- Confusion and concern about the future, new life situations and the reintegration process.  
- Extremes in emotional reactions (sharing personal information, talking too much about one’s experience or situation, keeping everything private)  
- Fear of failure, denial of personal abilities, not progressing in achieving goals.  
- Impatience, leading to of reckless and thoughtless behaviour | - Confusion, frustration and doubt about how to manage the future and changes ahead  
- Confidence in the improving and using one’s own skills  
- Trust (believing in oneself, in others, in society and state structures)  
- Proud of success and feel able to serve as role models for those in early stages of reintegration |
| - Physical reactions (elevated heart rate, muscle tension, anxiety attacks)  
- Denial (denying that trafficking happened or bad events while trafficked)  
- Contradictory feelings (of love and hate against traffickers and abusers, especially when trafficked by a partner or spouse)  
- Pessimism and limited hope for having a “normal life” (get married, have a family, have a career)  
- Sense of relief (for the change expected on life)  
- Sleeping problems and disorders (insomnia, sleep apnoea, parasomnias, nightmares)  
- Low or high emotional state  
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- Sleeping problems and disorders (insomnia, sleep apnoea, parasomnias, nightmares)  
- Low or high emotional state  
- Feeling hopeless including low motivation to recover and reintegration and loss of interest in daily activities and life in general  
- Feelings of guilt and shame (for being trafficked, failed at migration, acts committed while trafficked)  | - Joy and hope (moving towards dreams, goals)  
- Fear of change (of changes to one’s routine facing new situations that may be difficult to manage)  
- Enthusiasm (for new things that will happen, new relationships and contacts)  
- Impatience for good things to happen  
- Increased self-confidence and self-esteem because of one’s new skills, capacities and life experiences  
- Confusion and concern about the future, new life situations and the reintegration process.  
- Extremes in emotional reactions (sharing personal information, talking too much about one’s experience or situation, keeping everything private)  
- Fear of failure, denial of personal abilities, not progressing in achieving goals.  
- Impatience, leading to of reckless and thoughtless behaviour |
Appendix #4: Ethical principles and guidance in working with trafficking victims

The following guidance comes from Different and Equal’s case management manual, developed to guide the work of the organisation, its practitioners and those agencies and practitioners with whom it works. This guidance applies to the provision of assistance and support in any stage of recovery and reintegration:

- Use a trauma informed approach in all of your work.
- The victim is the centre of all processes and discussions.
- The participation of the victims is very important.
- The victim should have continuity of care through a single point of contact regardless of how his/her care is provided.
- The victim has the right to receive full, accurate, unbiased information about his/her options and the likely outcomes of his/her decisions. The victim has a right to make informed decisions on all aspects of her care, including the right to decline care, and to decline referral for specialist consultation or transfer of case management responsibility.
- Communication between the parties involving the victim will include the victim, and will be open, clear, timely and appropriately documented.
- The referral to available specialised assistance will be treated as a right of the victim. All the efforts will be made to identify sources of affordable specialised assistance, non-discriminative procedures.
- The approach to referral will be consistent through all settings, with some allowance for special cases and conditions.
- The victims will never be referred to service providers that are unauthorised and practice beyond their capacity and scope.
- The victim will not be referred for needs that the organisation responsible for managing the case has the duty to fulfil.
- Staff should never practice beyond their competence to avoid making the necessary referral.
- The practitioners involved in the referral are responsible for appropriately documenting their decisions, including any variation from this manual and the circumstances of any such variation.
- The referral should be based on skill-based competence and not based on the staff beliefs and values.
- Victims should never be forced to accept services they are referred to.
- Referrals that interrupt the treatment of the victim and are therefore detrimental should be avoided.

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Appendix #5. Research and resources on reintegration by D&E and NEXUS Institute


Different & Equal (2009) *Study on the social economic reintegration of victims of trafficking in Albania.* Tiranë: Different & Equal. Available at:


