ENHANCING THE SAFETY AND SUSTAINABILITY OF THE RETURN AND REINTEGRATION OF VICTIMS OF TRAFFICKING

Lessons learnt from the CARE and TACT projects

International Organization for Migration (IOM)
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This report was drafted by the CARE and TACT projects management team – Ms. Chloé Taillard Yévenes, Ms. Emma Proust – based in IOM office in Paris, with the support of the Regional Thematic Specialist – Ms. Irina Todorova – from the IOM Regional Office for the European Economic Area, the EU and NATO (RO Brussels). IOM Missions involved in the CARE and TACT projects (offices in Albania, Argentina, Austria, Belgium, Bosnia, China, Cyprus, Dominican Republic, Greece, Italy, Malaysia, Morocco, Nicaragua, Nigeria, Norway, Paraguay, Poland, South-Africa, Spain, Portugal, Ukraine, the United Kingdom, the United States of America, Uzbekistan, Vietnam) were invited to contribute to the drafting of this report by commenting on their case-management experience.

Graphic design and layout: Ms. Adeline Richet-Lartigue
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<th>Acronym</th>
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<tr>
<td>AMIF</td>
<td>Asylum, Migration and Integration Fund</td>
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<td>AOP</td>
<td>Action Oriented Paper</td>
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<td>AVR</td>
<td>Assisted Voluntary Return</td>
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<td>AVRR</td>
<td>Assisted Voluntary Return and Reintegration</td>
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<td>CARE</td>
<td>Coordinated Approach for the REintegration of victims of trafficking</td>
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<td>CoO</td>
<td>Country of Origin</td>
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<td>COSUDOW</td>
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<td>CRC</td>
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<td>EC</td>
<td>European Commission</td>
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<td>European Economic Area</td>
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<td>International Labour Organization</td>
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<td>IOM</td>
<td>International Organization for Migration</td>
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<td>MENA</td>
<td>Middle East and North Africa</td>
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<td>MOPC</td>
<td>Ministry of Public Health and Social Welfare (Paraguay)</td>
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<td>NAP</td>
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<td>NAPTIP</td>
<td>National Agency for The Prohibition of Trafficking in Persons (Nigeria)</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>NRM</td>
<td>National Referral Mechanism</td>
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<tr>
<td>ODIHR</td>
<td>Office for Democratic Institutions and Human Rights</td>
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<td>OFII</td>
<td>Office Français de l’Immigration et de l’Intégration</td>
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<td>OSCE</td>
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<td>TACT</td>
<td>Transnational ACtion – Safe and sustainable return and reintegration for Victims of Trafficking</td>
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<td>THB</td>
<td>Trafficking in Human Beings</td>
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<td>TRM</td>
<td>Transnational Referral Mechanism</td>
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<td>UK</td>
<td>United Kingdom</td>
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<td>UMC</td>
<td>Unaccompanied Migrant Children</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<td>VoT</td>
<td>Victim of Trafficking</td>
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INTRODUCTION
This report follows on from the implementation of two distinct but complementary projects implemented by IOM: Coordinated Approach for the REintegration of victims of trafficking returning voluntarily to any third country (CARE project) and Transnational ACtion – Safe and sustainable return and reintegration for victims of Trafficking returning voluntarily to priority countries: Albania, Morocco and Ukraine (TACT project).

The two projects involved a total of 9 European Union Member States (EU MS) – Austria, Cyprus, France, Greece, Italy, Poland, Portugal, Spain and the United Kingdom – committed to improving the return and reintegration programmes available for Victims of Trafficking (VoTs), in order to make the process safer and more sustainable, and to reduce the risks of re-trafficking. Bearing this objective in mind, IOM endeavored through the implementation of both projects to develop, implement, and fine-tune Standard Operating Procedures (SOPs) for the Return and Reintegration of Victims of Trafficking, ensuring a continuum of care.

This joint report aims to gather and share the lessons learnt through the implementation of both projects, suggesting a way forward for the establishment of transnational referral mechanisms between EU MS and third countries. The issue of transnational referral mechanisms is a key priority in the current EU anti-trafficking efforts, as mentioned in the EU Anti-trafficking Strategy for the period 2012-2016.

As part of the introduction, this report will start with an overview of the key concepts and legal framework relating to trafficking and voluntary return, analyzing their linkage, and a brief explanation of the content of the EU Anti-trafficking Strategy, in the framework of which both the CARE and TACT projects are implemented. The first section will present in detail the CARE and TACT projects objectives and activities. The second section will go through the lessons drawn from the implementation of the CARE project and propose recommendations to enhance the assistance and protection provided to returning VoTs. The third and final section will go a step further, presenting some reflections in turn on the concept of the Transnational Referral Mechanism (TRM) and its possible concrete implementation throughout the EU and third countries.

TRAFFICKING IN HUMAN BEINGS


According to Article 3 (a) of the Palermo Protocol, “Human trafficking” can be described as “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”.

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**Chart 1 – What is human trafficking?**

<table>
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<tr>
<th>ACTIONS</th>
<th>MEANS/METHODS</th>
<th>PURPOSES</th>
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<tr>
<td>• Recruitment</td>
<td>• Threat/use of force</td>
<td>• Sexual exploitation</td>
</tr>
<tr>
<td>• Transportation</td>
<td>• Forms of coercion</td>
<td>• Forced labour or services</td>
</tr>
<tr>
<td>• Transfer</td>
<td>• Abduction</td>
<td>• Slavery/practices similar to slavery</td>
</tr>
<tr>
<td>• Harboring/Receipt</td>
<td>• Fraud</td>
<td>• Domestic servitude</td>
</tr>
<tr>
<td>• Exploitation</td>
<td>• Deception</td>
<td>• Begging</td>
</tr>
<tr>
<td></td>
<td>• Abuse of power</td>
<td>• Organ/tissue removal</td>
</tr>
<tr>
<td></td>
<td>• Situation of vulnerability</td>
<td>• Armed conflicts</td>
</tr>
<tr>
<td></td>
<td>• Receiving of payments/benefits</td>
<td>• Organized crime</td>
</tr>
</tbody>
</table>

Article 3(b) of the Palermo Protocol further clarifies that the victim’s consent to the intended exploitation is irrelevant to the said victim’s status. Awareness and acknowledgement by the victim of the activities to be undertaken before being trafficked still makes the person a victim. The article reads as follows: “The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used“.

Wider and enhanced protection of child VoTs is provided under Article 3(c) of the Palermo Protocol: “The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in subparagraph (a) of this article”. The protection of child VoTs had already been established as a principle with the adoption of the United Nations Convention on the Rights of the Child (CRC)\(^5\), opened for signature, ratification and accession by General Assembly Resolution 44/25\(^6\) of November 1989, and which entered into force on 2 September 1990 and counts 196 parties to date.

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Its Article 35 is related to trafficking, declaring that “States Parties shall take all appropriate national, bilateral and multilateral measures to prevent the abduction of, the sale of or traffic in children for any purpose or in any form”. The same Convention introduces into international law the concept of the “Best Interest of the Child”, which is defined in Article 3 as the measures to be undertaken “to ensure the child such protection and care as is necessary for his or her well-being, taking into account the rights and duties of his or her parents, legal guardians, or other individuals legally responsible for him or her”.

These international tools are consolidated at the regional level by several Conventions, EU Council Decisions and Directives. Trafficking in Human Beings (THB) is specifically prohibited by Article 5 of the Charter of Fundamental Rights of the European Union. In addition, Directive 2011/36/EU of the European Parliament and the Council of 5 April 2011, replacing Council Framework Decision 2002/629/JHA of 19 July 2002, governs the prevention of and fight against THB and the protection of its victims. The Directive, which is the central pillar of the EU anti-trafficking strategy, allows for the adoption of a broader concept of what should be considered as trafficking in human beings, by including forced begging as a form of exploitation punishable on the grounds of THB, as well as forced marriage and illegal adoption. It also provides specific protective measures for any victim of trafficking and information of penalties applicable to offenders, as part of the recognition of THB as a violation of human rights. Matters of residency permits for VoTs are governed by Directive 2004/81/EC. Moreover, the 2005 Council of Europe Convention on Action against Trafficking in Human Beings – also known

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as the Warsaw Convention – was signed and ratified by 43 countries across the region.

At the global level, different institutions and organizations, both national and international, have tried and are still trying to assess the size and scale of the phenomenon of trafficking in human beings.

The International Labour Organization (ILO) estimated in a report published in 2012 the number of victims of forced labour as 20.9 million (at any given point in time over the period 2002-2011)\textsuperscript{12}. Out of these 20.9 million, 18.7 million (90%) were exploited in the private sector, by individuals or enterprises – the remaining 2.2 million being exploited by States or rebel armed forces. Forced labour exploitation was identified in the ILO report as the most common form of trafficking (68%), followed by forced sexual exploitation (22%). Among these victims, approximately 1.5 million were reported in developed economies and the European Union.

The United States Department of Security has been monitoring the number of victims identified globally since 2007, collecting data from trafficking investigations, prosecutions and convictions. According to its latest annual report published in July 2015\textsuperscript{13}, 44,462 victims of trafficking were identified in 2014.

IOM also manages its own database gathering statistics on the numbers of VoTs assisted. Over the past 20 years, more than 75,000 VoTs have been assisted by IOM worldwide. In 2014, 6,292 persons were assisted in the framework of different projects, and as of 30 July 2015, 4,250 persons had already been identified as assisted VoTs in the IOM Counter-trafficking Database.


Moreover, according to the 2015 Eurostat working paper on Trafficking in Human Beings\textsuperscript{14}, 30,146 victims were registered in the 28 EU Member States over the three-year period 2010-2012 and 80% of them were female (women and girls). In terms of statistics, 69% of the victims were trafficked for sexual exploitation purposes and 65% of the victims were EU citizens, meaning that 35% of the victims were third country nationals. 19% of the identified victims were children.

Over the three years, the recorded victims from third countries mainly came from Nigeria, Brazil, China, Vietnam, Russia, the Dominican Republic, Ukraine, as well as Morocco and, to a lesser extent, Albania.

This overview of the available data on human trafficking highlights the fact that the size and scope of trafficking in human beings is still a matter of estimation and that greater efforts should be made to establish a standardized global data collection system. Only coordinating efforts and fostering cooperation between States, governmental agencies, civil society organizations, and international organizations can achieve this objective.

VOLUNTARY RETURN

The *Universal Declaration on Human Rights*[^15], adopted by the General Assembly of the United Nations on 10 December 1948, established the return to one’s country of origin as a universal and fundamental right in Article 13, which states that “everyone has the right to leave any country, including his own, and to return to his country”[^16].

The concept of “voluntary return” can be defined as “the assisted or independent return to the country of origin, transit or another third country based on the free will of the returnee”[^17]. To go further, IOM also has a clear definition of assisted voluntary return which is explained in the following terms: “administrative, logistical, financial and reintegration support to rejected asylum-seekers, victims of trafficking in human beings, stranded migrants, qualified nationals and other migrants unable or unwilling to remain in the host country who volunteer to return to their countries of origin”[^18]. This support can be provided upon departure, during travel and after arrival in the country of origin for a safer and more sustainable return. It can also be complemented by reintegration support.

[^15]: United Nations General Assembly (1948), *Universal Declaration on Human Rights*, New York, UN
[^18]: Ibid.
At the European level, Directive 2008/115/CE\textsuperscript{19} encourages EU MS to favour voluntary return over forced return thanks to the support of the Return Fund – created in 2007 by Decision 575/2007/EC – and the Asylum, Migration and Integration Fund (AMIF), which replaced the Return Fund as per regulation n°516/2014\textsuperscript{20}. Both funds aim to allow for better management, coordination and implementation of return programmes in the EU. The increasing trend of EU MS developing Assisted Voluntary Return and Reintegration (AVRR) programmes is mainly supported by the Commission’s desire for MS to develop effective frameworks to enable irregular migrants to have easy access to voluntary return programmes. This dynamic and humane approach has been fruitful as the need for more general and tailored AVRR programmes has been identified and addressed, leading to the share of voluntary returns to account for 14% of returns in 2009 and 40% in 2013, with IOM having over 90 AVRR programmes implemented in the European Economic Area (EEA) region to date\textsuperscript{21}.

In 2014, 70 IOM offices in host countries and 170 countries of origin were involved in assisting 43,786 migrants globally through different AVRR programmes. Most of the returns originated from the EEA. Indeed of the overall total of returns worldwide, 85% returned from EEA countries, 6% from the Middle East and North Africa (MENA) region and 4% from Asia and the Pacific. Voluntary returns from the EEA region mostly took place in 2014 to Eastern and South-East Europe (55%), Asia and the Pacific (23%) and the MENA region (7%)\textsuperscript{22}.

In 2014, only one out of the top 10 host countries globally was a non-EEA country, namely Canada. The full list of top 10 host countries is: Germany, Greece, Belgium, Austria, the Netherlands, Norway, Poland, Canada, Spain and Italy.


The top 10 countries of origin for AVRR in 2014 were: Serbia, the Russian Federation, Pakistan, Macedonia, Georgia, Ethiopia, Kosovo, Bosnia and Herzegovina, Bangladesh and Afghanistan.

68% of 2014 AVRR beneficiaries were male while 32% were female. In 2014, 23% of all assisted returnees were children. Besides, 297 VoTs worldwide were assisted through IOM AVRR programmes in 2014, 211 of them having returned from EEA region.

Reintegration is a fundamental though challenging aspect of return migration. Preserving migrants’ rights, ensuring their protection and well-being and contributing to local development while enhancing the reintegration perspectives of the individual, are vital facets of AVRR programmes. Enabling migrants to re-establish themselves in the society of their country of origin and empowering them to participate in social, cultural, economic and political life again should be the aim of reintegration assistance in order for the return to be successful. While there is a growing understanding among stakeholders that the reintegration process needs to be supported in order to be successful, the means of doing so differ widely.

ASSISTING VICTIMS OF TRAFFICKING WILLING TO RETURN VOLUNTARILY TO THEIR COUNTRY OF ORIGIN

As defined in the OSCE/ODIHR report *Guiding Principles on Human Rights in the Return of Trafficked Persons*[^23] “in the context of trafficking in human beings, the term [return] refers to the process of returning victims of trafficking from the country in which they were identified as trafficked persons to their country of origin. The process can be voluntary, forced and assisted or, alternatively, forced and not assisted”. In this report, “return” refers to voluntary return, as both projects were implemented in line with Assisted Voluntary Return (AVR) programmes.

When a VoT returns to his/her country of origin, specific support based on individual needs is necessary to make the transition period as smooth as possible and to reduce the risk of re-trafficking. The psychological and often physical trauma that VoTs could have experienced during the period they were trafficked leave them in a fragile and precarious situation. If each and every VoT may experience different types of pronounced trauma, the outcome itself is always the same: increased vulnerability. VoTs have specific needs before departure and upon return, which are notably rooted in security concerns and potential stigmatization in their country of origin. Therefore the support needed encompasses a very broad range of sectors, such as psychological assistance, medical assistance, housing, financial support, etc. From the point of the initial screening up to the moment where the VoT becomes independent, his/her specific needs must be scrutinized according to a list of criteria, and tailor-made measures taken to address these needs. At the same time, returning VoTs may face serious risks in their country of origin, meaning these risks must always be assessed, again through a series of questions and criteria for evaluation, and measures must be taken to tackle these risks and to ensure the safety and security of the VoT after his/her return.

Making sure VoTs are safe and in a stable situation significantly reduces the risk of re-trafficking and increases the chances of successful reinsertion. Safe and sustainable return forms an integral part of counter-trafficking policies, as it should be one of the lasting solutions for VoTs to recover and go back to a normal life. The document The EU rights of victims of trafficking in human beings, published by the European Commission (EC) in 2013, includes provisions on the return of victims of trafficking, thus considering return as a fundamental right, on the same level as the reflection period, the right to protection, the right to compensation, the right to integration and labour, etc. Safe and sustainable return should thus be promoted and safeguarded across EU Member States.

Child VoTs constitute a specific group, as children are extremely vulnerable to exploitation and re-victimization. The organization of the return of a child VoT is thus a delicate issue, that should always be foreseen and implemented according to a child-rights based approach, including obviously the child’s best interest assessment and determination. Increased attention is given to the


trafficking of minors, and adapted solutions and policies are progressively being developed and launched.\footnote{26}{European Union Agency for Fundamental Rights (2014), *Guardianship for children deprived of parental care – a handbook to reinforce guardianship systems to cater for the specific needs of child victims of trafficking*, Luxembourg, Publications Office of the European Union \url{http://fra.europa.eu/sites/default/files/fra-2014-guardianship-children_en_0.pdf}}. Return of children is still an option that is rarely considered by caseworkers and authorities in charge of the best-interest determination. Policies and procedures for the protection and care of children in general are still yet to be standardized and strengthened within the EU\footnote{27}{UNHCR and UNICEF (2014), *Safe and Sound: what States can do to ensure respect for the best interests of unaccompanied and separated children in Europe*, Brussels and New York, UNHCR, UNICEF \url{http://www.refworld.org/docid/5423da264.html}}. The EU launched in 2011 an Agenda for the Rights of the Child, which includes provisions on cross-border cooperation for better identification and assistance of children VoTs.\footnote{28}{See more on the EU Agenda for the Rights of the Child on \url{http://ec.europa.eu/justice/fundamental-rights/rights-child/eu-agenda/index_en.htm}}

### THE EU STRATEGY ON THB 2012-2016

The EU Strategy on Trafficking in Human Beings 2012-2016\footnote{29}{Ibid. Op.cit. p.7} was adopted by the European Commission on 19 June 2012, with the objective of supporting and guiding EU MS in the implementation of Directive 2011/36/EU.\footnote{30}{Ibid. Op.cit. p.10}

The Strategy is defined by the EC as a “practical instrument addressing the main needs and challenges in the EU for the next five years from a human rights and gender-specific perspective. The aim is to involve and ensure better coordination between all possible actors working towards the eradication of trafficking, such as police officers, border guards, immigration and asylum officials, public prosecutors, lawyers, housing, labour, health, social and safety inspectors, social and youth workers, consumer organizations, trade unions, employers organizations, temporary job agencies, recruitment agencies, etc. Concrete actions will include the funding of research studies and projects, the establishment of platforms, coalitions and partnerships, the development
of guidelines and best practices, awareness-raising campaigns and trainings, etc.” It is in line with the efforts undertaken by the EU to address the trafficking phenomenon by focusing on three principles: the prevention of trafficking activities, protection of and support for victims, and the prosecution of traffickers (3 “P”s).

The Strategy identifies five key priorities, and for each of them a series of initiatives to be put in place by EU MS. A total of 33 concrete actions to be undertaken have been defined. The five priorities are as follows:

1. **Identifying, protecting and assisting victims of trafficking** through the establishment of National and Transnational Referral Mechanisms. This first priority also emphasizes the need for coherent inclusion of Unaccompanied Migrant Children (UMC) VoTs in anti-trafficking policies.

2. **Stepping up the prevention of trafficking in human beings** by understanding and reducing demand. A key component is awareness-raising activities as well as the establishment of a Private Sector Platform providing information about THB.

3. **Increased prosecution of traffickers** should result from enhanced cooperation of law enforcement bodies at borders and beyond.

4. **Enhanced coordination and cooperation among key actors and policy coherence** by strengthening implemented activities and policies as well as by promoting the development of new networks among civil society, policy-makers, and other key actors in order to create an EU-wide cooperation dynamic.

5. **Increased knowledge of and effective response to emerging concerns related to all forms of trafficking in human beings** by developing an EU-wide data collection system and providing information about new THB operating methods.
THE CARE
AND TACT PROJECTS
COORDINATED APPROACH FOR THE REINTEGRATION OF VICTIMS OF TRAFFICKING (CARE PROJECT)

Implemented over a 28-month period, from September 2013 to December 2015, the CARE project objective was to provide flexible and tailored assistance helping returning Victims of Trafficking from Austria, France, Greece, Italy, Poland, Portugal, Spain and the UK\(^{31}\) to resettle in and to again become active members of their home communities. More specifically, the project implemented a coordinated and integrated approach for the delivery of pre-departure, post-arrival and reintegration assistance for VoTs, both adults and children. This included comprehensive support (including, among others, socio-economic reintegration assistance, psychosocial support, temporary housing, etc.) based on the VoTs’ individual needs allowing them to navigate the transition period as smoothly as possible, reducing the risk of being re-trafficked. The CARE project has facilitated assistance to any VoT, adult or child, returning voluntarily from the 8 participating EU MS to any third country (outside the European Union). Although the CARE project’s scope was broad, a list of 18 countries where returns were expected to happen was established during the project elaboration, also in line with the EU Action Oriented Paper (AOP) on strengthening the EU external dimension on action against trafficking in human beings\(^{32}\), and included: Albania, Bosnia, Moldova, Russia, Serbia, and Ukraine in Eastern and Southern Europe; Nigeria and Uganda in Africa, Brazil, Colombia, Guatemala, Honduras, Paraguay in Latin America, Bangladesh, China, India, Indonesia and Vietnam in Asia. The IOM Missions in these identified countries were involved in the project from its elaboration stage onwards, to facilitate the cooperation and speed of reaction after the project’s launch.

The coordinated approach was defined through the elaboration of streamlined practical tools in relation to return and reintegration of VoTs – adults and children – to be used within CARE participating countries, but also for further replication within the EU.

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\(^{31}\) The project initially involved 5 participating EU MS. As a consequence of the launch of the TACT project in May 2015, VoTs returning from Greece, Poland and Italy became eligible for CARE project assistance.

The project implementation revolved around three groups of activities.

The first group of activities was dedicated to the delivery of standardized information on the reintegration alternatives available through the project, using and/or strengthening the national counter-trafficking networks. It included:

> The organization of information meetings dedicated to service providers and Non-Governmental Organizations (NGOs) involved in assistance to VoTs as well as organizations in charge of operating Assisted Voluntary Return programmes. A total of 148 meetings have been organized or attended in the participating EU MS by IOM project focal points to present the assistance available through the CARE project to NGOs, service providers assisting VoTs, and also to Embassies and Consulates of countries of origin, local authorities, law enforcement agencies, etc.

> The dissemination of a leaflet dedicated to service providers working with VoTs. NGOs and service providers, who are on the front line in providing assistance to VoTs, acted as “multipliers” and ensured widespread dissemination of the information to VoTs. A flyer dedicated to potential beneficiaries was also developed with basic information on the assistance available and contact details. Approximately 4,500 leaflets and 3,500 flyers have been printed and disseminated among partners in the participating EU MS and beyond.

The second set of activities undertaken is linked to the provision of flexible and tailored assistance to returning VoTs. The project adopted a victim-centered approach whereby each beneficiary was entitled to receive individual assistance according to his/her specific condition and recovery needs. In coordination with actors involved in the NMRs of the participating EU MS, and based on the report *The Causes and Consequences of Re-Trafficking: Evidence from the IOM Human Trafficking Database* as well as on the United Nations Children’s Fund (UNICEF) *Guidelines on the protection of child victims of trafficking* IOM

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33. The CARE project information tools can be downloaded from [http://iomfrance.org/care](http://iomfrance.org/care)

34. The TACT project information leaflet can be downloaded from [http://iomfrance.org/tact](http://iomfrance.org/tact)


developed Standard Operating Procedures detailing principles to be respected and steps to be followed in each of the stages of the return process. It included:

> Before departure, an assessment of the personal situation of the victim through the Screening Interview Form (SIF). The SIF is a comprehensive document, which provides a clear picture of the victim profile and path (analyzing THB elements), but also helps to start evaluating the risk and needs arising from the return project. When a case was identified as a medium to high-risk case, a risk mitigation plan was elaborated. Moreover, a reintegration plan was drafted by IOM in close coordination with the service providers and the VoTs themselves. Attention has been paid to assessing the skills and motivations of the returnees before departure as well as to defining concrete and reliable opportunities through direct contacts with peers or IOM in the country of return.

> Provision of post arrival assistance, which notably included: reception at the airport, safe accommodation, medical/psychosocial check-up and secondary transportation to final destination. Tailored reintegration assistance has been provided on an individual needs basis and covered, for example, medical care, temporary housing, child care, psychosocial support, income-generating projects, etc. (please refer to the detailed statistics). The SOPs foresee that every reintegration project is monitored for 12 months after the return by IOM with the support of an individual monitoring plan agreed upon with the VoT. At the time of this report drafting, monitoring of beneficiaries assisted under the CARE project was still ongoing.

Specific attention was paid to child VoTs (for whom return was determined as the child’s best interest\(^{37}\)). The CARE SOPs state that, before departure and in close coordination with the guardian and with the child him/herself, IOM should proceed with family tracing, risks and needs assessment, counseling, and identification of reintegration options (such as education opportunities). As recommended by UNICEF, they indicate that return will be coordinated well in advance with all stakeholders involved both in the EU host country and in the country of return. Return should take place only when family reunification can be ensured or when an appropriate organization has been identified to provide

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\(^{37}\) UNHCR (2008), Guidelines on Determining the Best Interests of the Child, Geneva, UNHCR
immediate protection and care upon arrival. The guardian or, if not available, an IOM staff member should accompany the child throughout the travel phase. The SOPs for unaccompanied child VoTs were, however, not tested during the implementation of the project, as no unaccompanied child VoT returning to his/her home country was identified within the participating EU MS.

The most important forms developed and used within the CARE project (referred to as “tools” in the SOPs scheme below) can be found in the annexes of this report.

The last group of activities of the project implementation refers to the sharing of experience gathered, including both best practices and pitfalls to be avoided, to enhance the sustainability of the return of adult and minor VoTs. It notably includes:

> the organization of a kick-off meeting and steering committee meeting with gathered project partners to comment on and fine-tune the Standard Operating Procedures, and to strengthen exchanges between actors involved in NRMs of the participating EU Member States;

> the publication of the present report which aims to provide food for thought for further initiatives for the protection and assistance of returning VoTs;

> and the organization of a regional conference in November 2015 on the Safe and sustainable return of VoTs, bringing together CARE and TACT project partners, EU experts on counter trafficking, and representatives from civil society organizations and international organizations  

Upon return, depending on the beneficiary individual needs and local opportunities, assistance might include:

1. Provide immediate assistance upon arrival at the airport, if requested by the beneficiary and based on a risk assessment.
2. Conduct initial contact with returnees.
3. Screen beneficiaries’ needs upon their return.
4. Assist returnees with the definition of their individual reintegration needs and identify opportunities.
5. Refer beneficiaries to existing social services (health insurance, health care, special programmes for VoTs).
6. Match profiles of returnees with job placements, vocational training, education courses or business set up.
7. Guide beneficiary in setting up his/her business with information on how to obtain documents for a business, possible competitors, additional sources of funding, etc.
8. Provide reintegration assistance to each individual returnee (finalizing agreements between beneficiary and supplier of goods; ensuring prompt payments to suppliers or training organizations for the beneficiary... If a child VoT returns, in-kind support can be provided to the family in order to increase their means to support the reintegration of the child (for example: children furniture, clothes, school kit, school fees etc.).

A monitoring plan should be set-up with the beneficiary, and could include monitoring on months 1, 2, 3, 6, 9 and evaluation on month 12 after the initial assistance measures.

**Tool N°5 & 6: Monitoring and evaluation forms**

Allow for assessment of beneficiary needs and propose further reintegration assistance within the limit of the reintegration grant maximum.
The TACT project is being implemented in the framework of the EU Strategy towards the Eradication of Trafficking in Human Beings 2012-2016 (notably Priority A, Action 1: Establishment of National and Transnational Referral Mechanisms and Priority D, Action 2: Coordinating EU External Policy Activities) as it aims to address – within a common framework – knowledge gaps and training needs in targeted priority countries, and to strengthen transnational cooperation between EU MS and priority countries in order to better tackle trafficking.

The project will support capacity-development processes between EU MS and the priority countries to improve national and transnational cooperation and exchange of information between responsible authorities, in strategic partnership with civil society. This approach aims to ensure that identification, referral and assistance mechanisms are set up, including for returning VoTs, who need dedicated support upon return to their countries of origin. Following a training needs mapping, training courses will be organized in each of the three priority countries in 2016.

The TACT project builds upon previously acquired expertise, in particular by further developing the CARE approach. The implementation of the CARE project demonstrated that transnational cooperation between EU MS and CoOs is essential in order to ensure a proper reintegration of VoTs (as detailed below in the section on lessons learnt from the CARE project). Transnational cooperation is a key aspect of the TACT project, which was launched on 1 May 2015 for an 18-month period.

5 EU MS (France, Greece, Italy, Poland and Spain) are involved in this project that targets 3 priority countries, namely Albania, Morocco and Ukraine\textsuperscript{39}. The project will assist up to 15 victims of trafficking, either adult or minor, returning voluntarily from one of the participating EU MS to one of these priority countries. Monitoring of return of children and adult victims will be one of the

\textsuperscript{39} These three countries were identified as priority countries in the Action Oriented Paper on strengthening the EU external dimension against trafficking in human beings published by the Council of the European Union in 2009.
central elements of the assistance provided. The SOPs elaborated for the CARE project will be further developed and fine-tuned. While further developing the CARE approach, the TACT project should allow for the establishment of possible models for the development of Transnational Referral Mechanisms, based on the participating EU MS and Priority Countries contexts and experiences.

STATISTICAL OVERVIEW AND BENEFICIARIES PROFILES

As of 31 October 2015, 66 victims of Trafficking in Human Beings have been registered under the CARE project, 58 women and 8 men. 43 project beneficiaries have already returned to their countries of origin, 8 are in the risk and needs assessment phase, and 15 cases have been suspended (either because the beneficiary is still considering his/her decision to return, faces problems with return administrative procedures, or because the contact has been lost). 62 beneficiaries are adults and 4 are children. It should be noted that the project is still running at the time of this report drafting, the statistics detailed below should thus be seen as a snapshot of the project status 25 months after the project launch.

40. The first 4 months of project implementation were dedicated to the elaboration of project information tools and standard operating procedures, and the organization of information meetings. Effective referrals thus began in January 2014.
The main countries of origin of project beneficiaries are Nigeria (27), China (7), Brazil (6), followed by Albania (4) and Southeastern Asia countries (The Philippines – 3; Vietnam – 2; Malaysia – 2).

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The main countries of registration are France (29), Spain (18), followed by the UK (14), Austria (4) and Portugal (1).
Out of the 66 cases referred to IOM in the framework of the CARE project, 47 were referred by NGOs, 15 by return counselors and 2 by law enforcement agents.

Type of exploitation

Most of the beneficiaries were trafficked for sexual exploitation (37), domestic servitude (10) or forced labour (3).
Age of beneficiaries when registered

Most of the beneficiaries were aged between 18 and 25 when registered. Only 4 children were registered (three of them were accompanying minors). The average age of the beneficiaries varies depending on the nationality, for instance Nigerian beneficiaries tended to be young women (between 18 and 30 years old) while Chinese beneficiaries were middle-aged women (40 to 50 years old).

Time spent in Europe

The information on the time spent in Europe is only known for 34 beneficiaries. One clear trend that can be discerned is that a large majority of the beneficiaries assisted in the framework of the project spent 1 year or less in Europe.
Assistance upon arrival in country of origin

19 beneficiaries benefited from assistance upon arrival at the airport (representing 44% of the returnees) and 5 requested assistance for the journey to their final destination (around 12% of the returnees).

12 beneficiaries used part of their reintegration grant to cover temporary or long-term accommodation costs (29% of the beneficiaries who returned).

7 beneficiaries used part of their reintegration grant to cover expenses related to health care or psychosocial assistance.

4 beneficiaries used part of their reintegration grant to cover expenses related to family and/or childcare.

Business set up by sector

In the framework of the CARE project, 18 beneficiaries (50% of the beneficiaries who returned) decided to use part of their reintegration grant to set up an income-generating activity, as part of a comprehensive process to achieve socio-economic independence. The small businesses that were created cover several fields of activity:
The most important sector of activity is commerce, which covers the opening of small businesses such as groceries, hair shops, and clothes/baby clothes shops. The second area of activity mainly encompasses the opening of small snack restaurants and beverage selling shops.

## Monitoring and Evaluation

As of 31 October 2015, 45 monitoring sessions have been organized by IOM to 22 beneficiaries, including 35 on-site visits (representing almost 78% of the total) and 10 carried out by phone.

Out of the 45 monitoring sessions organized, 8 were not conclusive as beneficiaries were not reachable and could not thus be interviewed to give their feedback.

To date, 5 beneficiaries have been evaluated, 12 months after their return to their country of origin. 3 beneficiaries were stabilized, earning enough money to be independent, and returning step by step to a normal life. 2 of them were still in a very vulnerable situation and additional funds have exceptionally been granted to provide them with further support.
LESSONS LEARNT FROM THE CARE PROJECT: HOW TO ENHANCE THE CONTINUUM OF CARE FOR RETURNING VoTs?
As detailed above, 18 countries of origin across the world and 8 EU MS (Austria, France, Portugal, Spain and the United Kingdom during the first 20 months of project implementation, joined by Greece, Italy and Poland in the last implementation period) have been involved in the implementation of the CARE project. IOM conducted self-assessment through the completion of an evaluation questionnaire by all the involved missions in countries of origin, but also in participating EU MS, in order to identify best practices and ways for improving the SOPs. Recommendations have been formulated for each one of the three phases of the VoTs’ return and reintegration process: identification and referral, post arrival reintegration assistance, and the monitoring phase.

SCREENING INTERVIEW, REFERRAL AND RISK AND NEEDS ASSESSMENT

IOM officers working on the project, but also caseworkers in different partner NGOs and agencies have highlighted that the CARE SOPs, which define clear and practical milestones to accompany a victim in his/her return decision and process, have successfully filled an existing gap and increased the efficiency and responsiveness of the stakeholders involved.

Before the CARE project, there were no specific procedures for victims returning to their country of origin in the participating EU MS, which means that their level of vulnerability and particular needs were not assessed. The return process, managed in the destination country, and the reintegration phase, managed in the country of origin, were almost totally disconnected, and the protection of the rights of the victims was not placed at the heart of the process. The practical tools elaborated, such as the Screening Interview Form, which allows for an assessment of the victim’s initial needs, and the Individual Reintegration Plan, which helps to start preparing the reintegration phase while the victim is still in the host country, have proved to be effective in linking the two processes. In order to make the SOPs functional, and to ensure that cooperation between stakeholders involved is effective, formal and informal agreements
have been set up with authorities and NGOs. This is the case, for instance, in France and in the UK, where cooperation protocols have been established between IOM and the respective stakeholders in charge of the assisted voluntary return programmes, namely the French Office for Immigration and Integration (OFII) and the NGO Refugee Action. In Nigeria, an informal cooperation agreement has been put in place with the NGO “Committee for the Support and the Dignity of Women” (COSUDOW), which has a wide network in Edo State where most of the beneficiaries returned to; in Brazil, where IOM has no local office, informal cooperation agreements have been concluded with the NGO Projecto Resgate and with the national authority in charge of counter-trafficking, the Nucleo de Enfrentamento ao Trafico de Pessoas.

However, efforts are still needed in this vein, first to ensure that voluntary return is not excluded from the options that are offered to a victim (as some reluctance to present this option to victims can still be observed), and also to include voluntary return in the National Referral Mechanisms (NRM) implemented by EU MS. Relationships with the countries of origin Embassies and Consulates should be further strengthened, notably to ensure cooperation for the delivery of travel documents, but also to increase identification and referrals by Embassy and Consulate staff. Another very important point, as part of the inclusion of voluntary return into NRMs, is to ensure that victims of trafficking are excluded from the payment of tax for irregular stay policies.

Strengthening the links between the different actors involved in both the destination country and the country of origin is essential, as it should allow the referral mechanism to work both ways. Within the CARE project, and despite making efforts to inform stakeholders in countries of origin about the assistance available, referrals only came from actors in destination countries. This constitutes a gap in the transnational referral mechanism that should be filled in order to ensure comprehensive and more systematic assistance to third country national V oTs in the EU.
Recommendation

Make sure that safe and sustainable return is made a full part of all the National Referral Mechanisms and that it includes special provisions to accompany victims in the reintegration process, ensuring that their fundamental rights are protected during the whole process.

This should also reassure those NGOs that accompany victims of trafficking that might doubt that return is a sustainable option. CARE’s positive results have already helped to alter opinions in some of the EU MS participating in the project. As highlighted by the CARE statistics, NGOs are at the core of the identification and referral process (a great majority of the referrals registered were made by NGOs). This can be explained by the fact that when a victim is identified by another stakeholder at national level (such as law enforcement services, diplomatic and consular authorities, etc.), basic needs such as accommodation or health and psychosocial care must be urgently addressed. Victims are thus firstly referred to NGOs, which in most EU MS are responsible for delivering such assistance to VoTs, including through shelters running.

Moreover, two conditions need to be fulfilled in order to ensure that the return and reintegration SOPs are efficient. The first relates to identification; there are important needs regarding additional training on identification for a broad range of actors that could identify a person as a VoT at an early stage. This is particularly the case for the staff of law enforcement agencies and health care personnel, as they are very often on the front line in meeting with VoTs and potential VoTs. Within the CARE project, identification was sometimes made when the return process had already been initiated, by “chance” more than based on a formal and well-established identification process. Moreover, there is often still a lack of communication and coordination between actors specializing in assistance to VoTs and those in charge of return and reintegration assistance. It is likely that some victims returned but were not identified as such before their departure, preventing IOM and its partners from assisting them upon return.
Recommendation

Put in place awareness-raising campaigns at the national level and broad but actor-specific training programmes for more systematic identification of potential and established victims of trafficking. In order to achieve this, the importance of widely disseminated information/outreach material has been highlighted by the CARE project partners, including on-line resources and information campaigns.

National counter-trafficking networks should be strengthened at the national level, and involve a broader range of actors, including NGOs, AVR service providers, CoOs Consulates, law enforcement, health care services, etc. The CARE project showed that regular meetings between key stakeholders to share information and updates, and to discuss challenges encountered are essential to ensuring a multidimensional approach and assistance to VoTs. Initiatives aiming at reinforcing links and exchanges between stakeholders involved in counter-trafficking networks should thus be encouraged and further developed.

These efforts should not only help to avoid failures to identify victims (which, given their extreme vulnerability, should never happen), but also to identify them in a timely manner. All the actors involved in the CARE project agree that early identification is one of the most essential elements for a safe and sustainable return and reintegration process. Timeliness is thus the second condition for an effective use of the SOPs. The Screening Interview Form is a comprehensive form which goes into details of the trafficking process, the potential risk of the return, and the assessment of needs. This procedure, which is essential in preparing the return, takes a long time as several interviews might be needed with the victim to gather all of the relevant information. Stakeholders in the country of origin often ask for additional information on specific points to better prepare for the arrival of the victim, and there should be enough time for this back-and-forth information sharing to take place. This process is an integral part of case-management within a cross-border context, and, as such, a full part of transnational referral mechanism.


42. See for example the Joint Efforts ISEC project put in place by the Belgian NGO Payoke in 2011-2012, http://www.joint-efforts.org/
Recommendation

Ensure the earliest referral to the stakeholder in charge of the return and/or the reintegration, be it IOM or another stakeholder. Coordination should start as soon as the return is considered as a part of a durable solution, and with no consequence if another option is ultimately chosen. An absolute minimum of two weeks for the preparation of the return should be established (for minors, this minimum should be extended to two months).

Early referral allows stakeholders in the country of origin not only to settle on the scheme for arrival assistance (such as temporary accommodation, or the organization of the onward transportation to the final destination), but also to prepare the path for smooth long-term reintegration. In this regard, it was highlighted that family reunification plays a central role in the psychosocial well being of victims upon return. When a beneficiary expresses a strong desire to be reunited with his/her family (most of the time children and/or parents) and relatives, preliminary work should be carried out in the country of origin to evaluate the beneficiary’s environment and start rebuilding family and community links. Consent of the beneficiary and of his/her relatives should always be sought and confidentiality ensured in this delicate process but one which is crucial for safe and successful return. Again, time is a key element, as victims need to be in a trusting environment in order to explain their relationship with their families and allow officers from IOM or its partners to visit them.

Nevertheless, the pre-departure assistance period should not be too long, as some CARE beneficiaries, eager to go back to their home countries and tired of waiting for the completion of administrative procedures, decided to return by their own means and with no assistance. This issue is one of the more serious concerns that arose from the CARE project implementation, and that should be considered as a priority in NRM's consolidation and elaboration of transnational referral mechanisms.
Recommendation

Include the family, relatives and communities more systematically in the return and reintegration projects as a way of fostering the sustainability of the process.

The building of trust in each step of the return process, but also between the different actors involved, is essential. Trust should be built step by step between the beneficiary and IOM, between NGOs and IOM, and between NGOs, IOM and State Agencies, to create a transparent environment that encourages the stakeholders involved to share information at national and transnational levels. A successful practice implemented in the framework of the CARE project has been the organization of videoconferences before the departure takes place, between IOM officers and beneficiaries, between IOM Officers in host countries and in countries of origin, and between NGOs in host countries and IOM Officers in countries of origin. These conversations have helped to share information and to reassure beneficiaries that were suspicious and/or felt unconfident about the reintegration process.

POST ARRIVAL ASSISTANCE

One of the key lessons learnt during the implementation of the CARE project is that contact with the returning victim should be initiated as soon as possible after the return as it is a crucial factor for a successful reintegration process. Meeting the person immediately upon his/her arrival at the airport establishes a first link, helps to build trust through face-to-face discussion. The organization of arrival assistance (when available in the country of origin) should thus always be proposed and suggested to the returning victim. Independently of arrival assistance, a first meeting to once again explain the assistance available and how it should be used – maintaining an effective balance between the different
needs according to their level of importance – should be organized shortly after the return (2 weeks seems a reasonable timeframe). It is essential, for continued trust building, to ensure that beneficiaries are provided with the same information upon arrival that they received before departure. This should also be seen as a key for the continuum of care.

**Recommendation**

Stakeholders in charge of reintegration assistance and case management should have a more **pro-active role in initiating initial contact** with the returning VoT. As IOM and/or its partners’ contact number must always be provided to the VoT prior the departure (which is mostly the case), the VoT should also be asked to provide a contact number before his/her departure in order to ensure better follow-up after arrival if the beneficiary does not contact IOM and/or other stakeholders in charge of reintegration assistance.

Returning VoTs often change their views and plans after the return takes place. The first interview allows officers from IOM or its partners to counsel the VoT based on concrete existing options and to review the Individual Reintegration Plan in order to make it more sustainable. Given the limits of the assistance available (reintegration grant amount, length of monitoring), the implementation of an income-generating project should be foreseen when the VoT is stable and skilled enough. Still, this should not be a fixed rule, considering the level of vulnerability of returning VoTs, who sometimes have more urgent needs to address, such as medical and psychosocial needs, or needs of support for child/family care. **Flexibility and adaptation to individual situations are two principles that should remain at the core of the elaboration of the reintegration project.** Within the CARE project, only half of the beneficiaries managed to start an income-generating project.
According to partner NGOs, the strength of the CARE project rests on its broad assistance scope: geographically, as it provides for assistance to victims returning to any third country in the world; but also in terms of profiles, as both men and women, boys and girls are eligible for project assistance. The global scope of the CARE project was an added value of the project, as 78% of the countries of origin involved had only one or two victims returning during the whole implementation project, which shows that THB is a global issue. The worldwide IOM network, with more than 480 field offices, generally allows IOM to meet and assist beneficiaries anywhere across the globe. However, the countries in which IOM is not present or where its presence is limited (such as Brazil, or China) serves to highlight the importance of building and/or extending the network of local partners that work in the field in countries of origin. Information about partners and potential partners should be constantly updated and links maintained. The network of partners in countries of origin should be multidisciplinary in order to cover the needs of the victims, which are manifold and complex. Given that the reintegration assistance provided by IOM is time limited, for the more vulnerable victims it is of the utmost importance that national social services or NGOs take over management of the case until the victim progressively becomes independent.

One of the greatest challenges of the CARE project has actually been to ensure long-term and multi-sector follow-up of the beneficiaries in order to take care of victims’ multiple needs. Victims of trafficking need time to recover from the traumatizing experience they have lived through, and a 12-month follow-up period is not always enough time to go through this process and to empower the victim so he/she can deal with his/her life on his/her own. This also depends on the local context of the country of origin. In some countries of origin, there is a clear lack of national social support services, but also a lack of economic opportunities that in many cases is one of the root causes of the trafficking process. Hence, in the main localities affected by the phenomenon, efforts should be made to improve general living conditions, a major factor in reducing vulnerability and in creating conditions for a smooth and long term reintegration of returning VoTs.
Recommendation

**Improve living conditions**, including economic and educational opportunities, access to basic services, and social support schemes, in regions affected by the trafficking phenomenon through the implementation of local development policies and programmes.

This is key to avoiding re-trafficking, as already highlighted in the IOM report *The Causes and Consequences of re-trafficking*, published in 2010. As long as no improvement in local economic opportunities has been achieved, efforts made for the reintegration of returning VoTs and in fighting criminal networks will have limited impact. Efforts to improve the socio-economic context in countries of origin must in addition be coupled with initiatives that aim to address demand in countries of destination\(^\text{43}\).

As part of the assistance continuum, further efforts should be made to foster law enforcement cooperation between destination countries and countries of origin. In the framework of the CARE project, 4 beneficiaries have faced serious threats by traffickers upon return. These threats were linked on the one hand to the payment of debts, and on the other hand to the complaints victims had made in destination countries (traffickers putting victims under pressure to withdraw the complaints). One beneficiary was attacked and seriously injured by the trafficking network despite IOM’s efforts to mitigate the risks. CARE project assistance was used to cover the medical fees. At the time of drafting of this report, two beneficiaries are still facing serious threats and IOM caseworkers are working in cooperation with local police and social services to adapt risk management plans.

Recommendation

Reinforce transnational cooperation among law enforcement services in order to be able to guarantee returning VoTs’ safety and ensure proper follow-up of the prosecution of traffickers from the victim’s perspective, allowing VoTs to have effective access to compensation, as part of the fundamental rights to be guaranteed to the victims. Access to compensation is key to both economic and psychosocial recovery. Additional security safeguards should be put in place, notably by enhancing collaboration with police services at the local level.

MONITORING

For the monitoring phase, the principle of flexibility should also apply. As developed in The IOM Handbook on Direct Assistance for Victims of Trafficking\textsuperscript{44}, the CARE SOPs state that with the consent of the returning VoT, a monthly monitoring report has to be drafted during the first 3 months after the return. Then, 2 follow-up reports should be drafted in the ensuing 6 months. A final report evaluating the reintegration of the beneficiary is then drafted 12 months after the beneficiary has returned. In practice, the monitoring visits and reports timeline (including on-site visits and phone calls monitoring) needs to be tailor-made, as it forms part of the assistance delivered. Some beneficiaries need closer assistance during the first month (with two to three visits within the month), while others may need closer follow-up or a boost a few months after they started implementing their individual recovery and reintegration project. It should be noted that maintaining contact with beneficiaries has been one of the greatest challenges faced during the implementation of the project. This was particularly the case in Nigeria, where beneficiaries often switch off their phones and/or refuse to be monitored. The organization of on-the-ground monitoring visits has proved to be a positive practice, making
the beneficiary feel that he/she is not alone and providing more time and means to properly assess the beneficiary’s situation. This kind of monitoring should definitively be prioritized with sufficient human and financial resources allocated to these visits.

As previously mentioned, for the most vulnerable cases, a 12-month follow-up period is not enough time for the beneficiary to be self-sufficient. Finally, in accordance with the diversity of retuning VoTs’ profiles, including country of origin, time spent in host country, psychological vulnerability, existence of a stabilizing environment in country of origin, etc., the reintegration grant should be flexible, based on individual needs, and take into account the local context in the country of origin.

**Recommendation**

Increase the reintegration grant amount (compared to the 2,000 euros available in the CARE project) and make it flexible depending on the living standards of the country of return and the level of vulnerability of the returning VoT.

In addition, synergies should be sought with regional, national and local projects to diversify the assistance provided to the victims, for example including VoTs beneficiaries from assisted voluntary return and reintegration programmes within projects offering training, or community development projects.
GOING A STEP FURTHER: THE DEVELOPMENT OF TRANSNATIONAL REFERRAL MECHANISMS
WHAT IS A TRANSNATIONAL REFERRAL MECHANISM AND WHY IS IT NEEDED?

Definition

The concept of a Transnational Referral Mechanism (TRM) can be defined as “the concept of a co-operative agreement for the cross-border comprehensive assistance and/or transfer of identified or potential trafficked persons, through which state actors of different countries fulfill their obligations to promote and protect the human rights of trafficked persons”\(^45\). Practically, a TRM should be an operational framework linking the different stakeholders from two or more countries involved in identification, referral, assistance, repatriation, and monitoring by defining clear roles for each stakeholder, along with procedures to follow, to ensure the protection of the victims’ human rights all along their reintegration path. The definition and implementation of a TRM imply that countries are strongly involved in the multi-stakeholder roles allocation and are willing to set up bilateral/multilateral formal agreements.

Rationale

Trafficking in Human Beings is a global and complex phenomenon that cannot simply be addressed at the national level, and no one organization or agency can tackle it alone. Cooperation, not only at national but also transnational level is crucial to simultaneously tackle the root causes of trafficking, and to assist victims in their reintegration process.

Transnational cooperation is the way to maximize the effectiveness and efficiency of measures put in place at the local and national level to tackle trafficking. The duplication of work can be avoided by having clear procedures and a defined distribution of roles within existing structures. By fostering transparency, transnational cooperation increases the speed of reaction of partners involved in the procedures, and thus reduces gaps in the assistance provided to VoTs.

The more the assistance scheme is comprehensive, and the assistance provided fast, the more victims will trust the institutions taking care of them and the more they will be prone to cooperate with law enforcement.

There is a broad range of tools that serve to reinforce international cooperation, such as the establishment of communication channels, key stakeholders meeting mechanisms, development of standard operating procedures, etc. Within the region, various transnational cooperation tools already exist in the counter trafficking domain, such as, for instance, the network of National Rapporteurs (or equivalent mechanisms), the informal networks of specialized NGOs, the establishment of the EU Anti-Trafficking Day, or the Group of Experts on Action against Trafficking in Human Being (GRETA) established by the Council of Europe. Although these existing tools should be taken into account when elaborating a TRM, most of them are political and policy-development level tools, while a TRM should focus on the operational level, shaping practical cooperation tools.

Moreover, two key principles, that should already be at the core of national counter-trafficking schemes, should also be born in mind when defining TRMs, namely the victim-centered approach and the multi-stakeholders approach. The promotion and protection of basic human rights (which includes, as a minimum: access to safe accommodation, access to medical assistance, access to interpretation services, access to legal assistance, access to a residence permit, access to education for children, a right to return to the country of origin, a right to compensation, but also a right not to testify against the traffickers, etc.) of the victims should indeed underpin all the procedures to be put in place. Stakeholders involved in the TRM should include governmental actors, law enforcement agencies and civil society actors to be able to cover the multidimensional aspects of the protection and assistance to be guaranteed to the victims according to the international legislative framework and standards. A TRM is thus de facto a bridge between the NRMs of countries of departures and countries of origin that ensures continuum of care by recognizing return and reintegration of VoTs as a key element of it.

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46. The EU civil society platform against Trafficking in Human Beings for example, which was launched on 31 May 2013, see more on https://ec.europa.eu/anti-trafficking/media-outreach-els/eu-civil-society-e-platform_en
47. The EU Anti-Trafficking Day has been instituted for 18 October in 2007. See more on https://ec.europa.eu/anti-trafficking/citizens-corner-eu-actions-explained/eu-actions-explained_en
The EU, notably through the *Action Plan on best practices, standards and procedures for combating and preventing trafficking in human beings* published in 2005, the *Directives 2004/81/EC* and *2011/36/EU on preventing and combating trafficking in human beings and protecting its victims* and since 2012 and the launch of the EU Anti-trafficking strategy, has continued to step up its efforts to strengthen transnational cooperation within EU MS and between EU MS and third countries in order to establish harmonized counter-trafficking policies and procedures.

Priority A of the 2012-2016 EU Anti-trafficking Strategy focuses, as described in the introduction of this report, on the identification and the protection of victims of trafficking. Within this priority, the first action foreseen is the establishment of National and Transnational Referral Mechanisms. The establishment of NRMs by all EU MS was a provision already included in Directive 2011/36/EU, that was to be transposed into national laws by 6 April 2013. In 2015, the Commission will publish a report on the state of the transposition of the directive across EU MS, as well as guidelines and recommendations to further improve existing NRMs. The objective of establishing a Transnational Referral Mechanism(s) goes a step further as it foresees linking the different NRMs, based on the observation that to date, when victims cross borders, EU MS collaborate on a case-by-case basis and outside a structured cooperation framework that would allow more efficiency and transparency.

**HOW TO ESTABLISH TRMs?**

A VoT’s decision to return to his or her country of origin comprises a situation in which a cross-border movement occurs and in which the protection of human rights should be ensured in every stage of the process: in the host country, country(ies) of transit, and the country of origin. The CARE and TACT projects were developed based on the observation that no standard operating procedures exist at the regional level for the return and reintegration of victims of trafficking. Both projects aim to pave the way for the establishment of a harmonized and coordinated framework in this domain, and thus to provide a basis for the
definition of an EU TRM model. In light of the experience gained by IOM in implementing these two projects, but also national AVRR programmes in which special provisions have been included for vulnerable persons, including VoTs, the definition of an EU TRM model should take into account existing challenges and find ways to tackle them.

Challenges identified

The issue of trafficking is becoming increasingly important and complex. As immigration policies in most of the host countries are becoming more restrictive, the possibilities to migrate through legal channels are reduced, while the number of criminal networks trafficking human beings and smuggling migrants is swelling.

New profiles of victims continue to appear and change. Although women and girls still seem to be the most vulnerable to trafficking, trafficking in men and boys has been recognized as an increasing global trend in the identification of VoTs. This could be seen as a result of the efforts made to implement more comprehensive and general VoTs identification policies, but in any case requires an adaptation of the assistance schemes. The same reflection can be applied to labour exploitation – including domestic work – which continues to increase in the statistics. The main countries of origin and average age of identified VoTs are also changing. The reports established by national authorities in charge of counter-trafficking, international organizations, and civil society, agree on the fact that the level of identification of VoTs nevertheless remains low. Given the fact that traffickers keep adapting to counter-trafficking policies and strategies, national and regional authorities should always be a step ahead of the traffickers when defining new strategies.

At the same time, trafficking networks are themselves being adapted to the anti-trafficking measures put in place, developing new strategies and methods. The use of psychological abuse and manipulation have increased and exploitation patterns have become more subtle, making it difficult to identify victims of trafficking. The generalized use of new communication and information technologies, for example, has allowed smugglers and traffickers to engage

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in easier and more anonymous exchanges of information and money, but also to modify exploitation patterns\textsuperscript{51}.

New trafficking routes are constantly being established by criminal networks. At the same time, the routes of migration in general are evolving on a daily basis in the current context of migration flows and migration policies in the EU. This has led to the emergence of a new challenge, namely the identification and protection of VoTs and potential VoTs within the mixed flows of migrants created by the political and security crises in different regions across the world. In June 2015, IOM launched a study on the *Human Trafficking and Exploitation of Mobile Populations in Times of Crisis*, at the conclusion of which a report containing conclusions and recommendations will be published by the end of 2015\textsuperscript{52}.

The definition of an EU TRM model, as foreseen in the EU Anti-trafficking strategy, is based on an essential prerequisite: the existence in EU MS of functioning National Referral Mechanisms and National Action Plans (NAP). The transposition of Directive 2011/36/EU into EU MS’ national laws, which includes the elaboration and implementation of both NRM and NAP was supposed to be fully achieved by 6 April 2013. As indicated by the EC in a press release dated 15 April 2013\textsuperscript{53}, only 6 EU MS had fully transposed the directive at the time of the deadline, while 3 had partially transposed it. As indicated in the EC’s *Mid-term report on the implementation of the EU strategy towards the eradication of trafficking in human beings*\textsuperscript{54}, published on 17 October 2014, EU MS are progressively catching up, with 25 EU MS having fully transposed the directive at this date. On 20 October 2015, EU Commissioner Avramopoulos stated that “26 Member States out of the 27 MS bound by the legislation have officially notified the European Commission


of full transposition at national level. Only Germany remains”. Nevertheless, the procedures elaborated through the newly launched NRM s had not been tested for a long time and should be further improved and fine-tuned to ensure their efficiency (the mid-term report indicated that only half of EU MS had formalized NRM s in late 2014). This step forward, which should start with the publication of the EC guidelines for the further development of NRM s, should pave the way for the definition of an EU TRM model. IOM hopes that the experience gained through the implementation of the CARE project will contribute to this essential process.

Transnational multi-stakeholders coordination process: how to link different NRM s?

The experience acquired through the CARE project, and to a lesser extent through the TACT project (which is still in its first phase of implementation) has provided concrete examples of how different stakeholders can coordinate and cooperate to assist a victim going through a transnational rehabilitation and reintegration process. The following stories of return\(^5^5\) illustrate different situations and coordination mechanisms that have been put in place throughout the 2-year implementation phase.

María from Paraguay

María is twenty-four years old. She was trafficked to Spain and was sexually exploited for five months before she was identified as a trafficked person by the police, who referred her to an NGO that provided her support and counseling. María eventually decided to return home.

After her arrival, María was reunited with her husband and children. She received psychological support from the Specialized Unit Against Human Trafficking of the Ministry of Public Health and Social Welfare (MOPC). In order to reduce her risk of being re-trafficked, the CARE

\(^{55}\) All names have been changed, in compliance with IOM Personal Data Protection policy.
project rented a house in a new neighborhood where Maria and her family could live. However, the house didn’t have a bathroom.

María wanted to earn income for her family and decided to operate a small food shop out of her house selling sandwiches, hamburgers, empanadas, cakes, jellies, juices, sodas and candies. The CARE project covered the fees to buy cooking items such as a refrigerator, an oven, a table with chairs, a mixer, a hamburger grill, dishes and cooking materials. The project also paid for the construction of a bathroom. After some months, María informed IOM that she was very happy with the assistance she received and has been able to start selling food.

During the evaluation implemented in the 13th month after her return, Maria was still progressively reintegrating into her home society. She was still being cared for by a psychologist from the Specialized Unit Against Human Trafficking, and had applied for social housing with the support of the MOPC. She had stopped selling food and used the material purchased as part of her reintegration grant for her family daily life, as she found employment as a housekeeper.
The case of Maria shows how different actors, namely a specialized NGO in the host country, governmental stakeholders in the country of return, and IOM in both countries have successfully coordinated during the whole return and reintegration process, based on the Standard Operating Procedures.

Joy from Nigeria

Joy was trafficked to Europe but escaped when she understood that she would be forced to prostitute herself. She was accommodated in a shelter and expressed her wish to return to Nigeria as soon as possible to be reunited with her children. In the meantime, she cooperated with the police and provided very useful information about her traffickers. The pressures of the trafficking network on her family were high but she was worried about her children and confirmed her desire to return to Nigeria. One of her family members was probably in touch with the traffickers.

Upon arrival, Joy was accommodated in the National Agency for the Prohibition of Trafficking in Persons (NAPTIP) shelter in Lagos and received assistance from the NAPTIP to be reunited with her children and moved to a relative’s house. During that time she was in contact with the IOM office in Nigeria to start thinking about a reintegration project.

A few days after her return, Joy was beaten by a group of 5 men and had to go to the hospital. Her children were hidden at a friend’s house. Shortly after the attack, IOM undertook a monitoring trip to better assess Joy’s situation and needs. An IOM officer helped Joy to open a bank account, met with the school director and helped Joy to define her personal reintegration plan. Joy also asked IOM to refer her to the local NAPTIP office as she continued to receive threats from the criminal network.

Her reintegration grant covered schooling fees for her children, a year’s rent for an apartment, medical fees, and the costs for the launch of a small baby clothes shop.
Joy's case illustrates the variety of needs that can arise when a VoT returns to his/her home country, and highlights just how essential the comprehensive and multi-sector response is regarding these needs. It also demonstrates, as previously highlighted in this report, the importance of having up to date risk assessment and management, as well as the importance of keeping close contact with beneficiaries and maintaining the trust that has been created.

During the second on-site monitoring meeting, an IOM officer helped Joy to get an ID card. This was necessary so that her legal claim in Europe could be continued. The threats of the criminal network have stopped after she had been referred to the police. This is also explained by the fact that part of the network had been arrested in Europe. However her shop has closed as the government launched construction work on the site. Considering her vulnerability, IOM has been assisting in partnership with a local NGO, the COSUDOW, beyond the foreseen 12 months of monitoring. School fees for her children have been covered for an additional year, and counseling sessions have been organized to help her stabilize her situation.

Joy has now set up a small fruit stand in front of her house, but remains in a precarious situation as the income generated is barely enough to cover the costs of daily life for herself and her children.

Joy’s case illustrates the variety of needs that can arise when a VoT returns to his/her home country, and highlights just how essential the comprehensive and multi-sector response is regarding these needs. It also demonstrates, as previously highlighted in this report, the importance of having up to date risk assessment and management, as well as the importance of keeping close contact with beneficiaries and maintaining the trust that has been created.

Pamela from Brazil

Pamela was taken to Spain by her aunt when she was 15 years old. After her arrival, her aunt and her uncle stated that if she wanted to stay in Spain, she had no other alternative than prostitution to earn money. She was put in a brothel by her aunt, and spent 10 years working as a prostitute while giving the money earned to her aunt, before being rescued by her mother who managed to come to Spain. During this period, Pamela gave birth to two children.
Pamela's story highlights the importance of having a broad range of partners working in the field in the countries of origin.

Pamela decided in July 2015 to return to Brazil to start a new life with the assistance of the CARE project. Accompanied by her 4-year old daughter and her 1-year old son, she went back to Brazil in August 2015.

Given that IOM does not have an office in Brazil, the Argentina office has managed the return and reintegration assistance through a network of partners, which includes both governmental agencies and NGOs. With her consent, details of Pamela's case have been shared with the Núcleo de Enfrentamento ao Tráfico de Pessoas, a governmental body supervised by the Ministry of Justice. A representative of the Núcleo met Pamela and her children upon arrival in the airport to assess her situation and make sure that she was returning to a safe environment.

After several counseling sessions with the Núcleo’s caseworker, a reintegration plan was established and included vocational training fees (nurse school) for Pamela and furniture for her house; and for her children school and nursery fees, furniture (children's beds), and sport fees (dance and baby swimming classes). Pamela’s situation is closely monitored by the Núcleo’s caseworker, who has liaised with her every week since her return to Brazil.

Pamela’s story highlights the importance of having a broad range of partners working in the field in the countries of origin.

Uktam from Uzbekistan

While living in Russia, Uktam used to work for his recruiters who also owned a house in France and wanted Uktam to go and work in this house, making him false promises of a better wage. Being married, a father of 3 children and trusting his employers, Uktam decided
to go to France to earn more money and support his family who stayed with his parents.

As a sign of good faith, his employers paid for Uktam's ticket to France. Initially, the situation seemed acceptable for Uktam, aside from the excessive working hours (12 per day) and poor living conditions. But the situation got worse and Uktam was denied food, access to health care, and his salary was not paid. Once his visa expired, Uktam was on French territory illegally, and his exploiters used this fact to pressure him into not reporting the exploitation to the authorities.

Eventually, Uktam received help from neighbours who called the police to rescue him from this situation; at the police station he was able to lodge a complaint against his exploiters.
Uktam then went to the Uzbek Consulate to ask for help. The Consulate contacted IOM Paris so Uktam could benefit from the CARE project, and both institutions worked together, with the help of IOM Tashkent, to ensure that Uktam could return in safe conditions and smoothly reintegrate into his home community.

Uktam was reunited with his family in Uzbekistan in May 2015. During the first monitoring visit, Uktam told IOM Tashkent that he was happily employed in a welding shop, he could fully support his family and was building his own house, including the rooftop, which he was able to make using his reintegration grant. He was planning to open his own welding shop.

Uktam’s story demonstrates the importance of outreach activities targeting Embassies and Consulates in host countries. Further awareness raising should be implemented across the EU, as Embassies and Consulates can often be the first port of call for someone escaping from a situation of exploitation.

Jonila from Albania

Jonila was 19 years old when she was caught up in the trafficking process. She lived in Albania where her boyfriend promised her a better life in the United Kingdom. Before arriving in the UK, they stopped in a transit country (Jonila does not remember which). They finally arrived in the UK where her boyfriend forced her into prostitution. For 4 months Jonila was sexually exploited.

When she got pregnant, her boyfriend told her to leave. She sought asylum while being supported by the Eaves charity “Poppy Project”, but her application was denied so she decided to return home. Jonila
Albania is currently reviewing the national SOPs for the Identification and Referral of Victims of Trafficking and Potential victims of trafficking, and wishes to strengthen the mechanisms in place for the reintegration of returning VoTs. Successful reintegration cases such as Jonila’s will help identify best practices and caveats at the local level, as IOM will support the review of SOPs in the framework of the TACT Project.

Jonila received assistance from the CARE project upon arrival in Albania. Her CARE reintegration grant enabled her to engage in farming activities, the purchase of a cow and related equipment as well as to cover her daughter’s education expenses. IOM Albania’s latest visit to Jonila took place in September 2015, during which she told IOM of her satisfactory situation: the farming business was going well and she could afford the family’s basic needs. She was pleased to see her daughter attending kindergarten activities.

was referred to IOM UK. She benefited from the UK national voluntary return programme run by Refugee Action and went home to Albania in November 2014, having spent 3 years in the UK.
CONCLUSIONS
This joint report was drafted with the objective of sharing the lessons learnt from the implementation of both the CARE and TACT projects, with a greater focus on the CARE project in order to replicate successful interventions. The CARE project has indeed proved to be a successful initiative, as it responded to a concrete need to put in place specific and coordinated measures to protect and assist VoTs wishing to return to their home countries from participating EU Member States. With the launch of the TACT project in May 2015, IOM is going a step further, as the processes and procedures elaborated within the CARE project will be streamlined based on the experience gathered, paving the way for the establishment of models for an EU Transnational Referral Mechanism.

These IOM initiatives form an integral part of the efforts made by the EU to comprehensively tackle the trafficking phenomenon at the regional and global levels. The projects were both primarily funded by the EU, and elaborated following the EC’s willingness to foster initiatives serving to better identify, protect and assist vulnerable migrants, including migrant children and victims of trafficking. Increased attention is paid to child victims of trafficking, as they constitute a target group in counter-trafficking policies. In 2012, the EC started highlighting that returning VoTs, “[…] especially unaccompanied child victims require very specific assistance and support prior to and after return. Specific measures implemented, targeting the returnees who are victims of trafficking, to ensure the sustainability of return and prevent the re-trafficking through the provision of reliable reintegration assistance”56.

The main lesson learnt from the implementation of the CARE project is that transnational operational procedures for the referral of VoTs are still lacking, which jeopardizes the effective provision of cross-border protection and assistance to VoTs. While procedures are being established and/or improved at national level, efforts should be made at EU level to create a regional scheme linking the different NRMIs, avoiding overlaps and increasing the promptness and quality of the response.

While the TACT project will attempt to explore ways to articulate the different NRM, the CARE project has already identified key issues to be addressed in order to move forward, namely:

> Low-level of identification, including self-identification, which should be dealt with through the implementation of awareness-raising campaigns and training of frontline actors.

> Existence of functioning National Referral Mechanisms in the 27 EU MS which are bound to implement Directive 2011/36/EU, to be evaluated by the EC before March 2016.

> Low implementation in EU MS of both country-specific programmes and global-scale programmes for the safe return of VoTs, in order to take into account the global scope of the trafficking phenomenon, while focusing on countries or regions that are more affected by it.

> Limited procedures for the follow-up on trafficker prosecution and conviction, thus limited access to protection of victims’ rights through the judicial system, including access to compensation.

> Necessity of implementing local development policies and programmes in regions affected by trafficking in countries of origin in order to tackle the root causes of VoT vulnerability to trafficking.

> Need to enhance and increase initiatives to reduce the demand in destination countries.

The variety and complexity of the issues that need to be urgently addressed once again demonstrate that a broad range of stakeholders, including national authorities, EU institutions, civil society organizations, and international organizations must pool their efforts in order to effectively improve counter-trafficking policies and better guarantee the fundamental rights of the victims, including women, men, boys and girls, who return to their countries of origin.
ENHANCING THE SAFETY AND SUSTAINABILITY OF THE RETURN AND REINTEGRATION OF VICTIMS OF TRAFFICKING
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Victim of Trafficking: Screening Interview Form

Confidential

IOM Mission in: PARIS
CARE Project ref. number: CARE_XX_XXX

Informed Consent

Has the individual been informed that IOM and/or (name of partnering organization) reserves the right to share her/his individual case data for assistance purposes and only with IOM missions and partnering organizations involved in direct assistance? (Yes/No)

Has the individual further been informed that IOM reserves the right to make a limited disclosure of non-personal data based on the information collected at the interview to law enforcement for the purpose of rescuing other victims that remain under the control of traffickers or preventing other potential victims from being trafficked? (Yes/No)

Has the individual further been informed that IOM reserves the right to use (only anonymous, aggregate) data for research purposes? (Yes/No)

Has the individual’s full and informed consent been obtained to conduct the screening interview based on information given regarding the role of the organization, the voluntary nature of the interview and the use of the information provided by the individual as outlined above?

Note: Informed consent is necessary for all services, such as medical examination and procedure, health assessments, assisted voluntary returns and reintegration assistance. (Yes/No)

If the individual is a minor, has the consent of the parent(s)/guardian(s) been obtained? (Yes/No)

Signature of interviewer: ____________________________ Date: ______________
Registration Data

First name(s): Country of birth:
Family name(s): Place of birth:
Sex: (M/ F) Last place of residence in country of origin:
Date of birth: Identity document (Type, country, number and expiry date):
Is date of birth an estimate? (Yes/ No)
Age:
Citizenship:
Ethnicity:
Current legal status:

Additional Data - If the individual is an unaccompanied minor (UAM)

Contact details of the guardian:

Contact details of the centre hosting the UAM:

Contact details of the parents / family in the country of origin:

Are the parents / the family aware of the minor current situation? (Yes/ No – Please explain)

Circumstances of arrival in the EU host country (when, how, why, with whom the UAM arrived):

Case and Interview Data

Type of referring organization/individual: (NGO/ International organization/ Law enforcement/ Immigration/ Government/ Embassy/ IOM Mission/ Hotline/ Self-referral-walk-in/ Family/ Friend/ Client/ Other/ Not applicable (NA)/ Not Known (NK)

Specify - Name:
   - Location:

Screening date: (dd-mm-yyyy)

Screening location:

First name and family name of Interviewer:
Name of Organization/ Institution:
Contact Details of interviewer:

Address and telephone number of referring organization:

Interviewee’s language:
Interpreter? (Yes/ No)
First name and surname of interpreter:
## PROCESS: ENTRY INTO TRAFFICKING

1. How did the individual enter the process (indicate multiple options if necessary)?

- [ ] Kidnapping
- [ ] Sold by member of family
- [ ] Sold by non-family member
- [ ] Adoption
- [ ] Educational opportunity
- [ ] Other/NA/NK

Please specify:

2. Did entry into the process involve recruitment? ☐ YES ☐ NO

2.1 If YES, how was contact initiated between the individual and her/his recruiter?

- [ ] Personal contact
- [ ] Radio advertisement
- [ ] Employment agency
- [ ] Internet advertisement
- [ ] Travel agency
- [ ] Television advertisement
- [ ] Newspaper advertisement
- [ ] Other/NA/NK

Please specify:

3. What activity did the individual believe s/he was going to be engaged in following arrival at the final destination (indicate multiple options if necessary)?

- [ ] Agricultural work
- [ ] Prostitution
- [ ] Restaurants and hotel work
- [ ] Study
- [ ] Domestic work
- [ ] Small street commerce
- [ ] Trade
- [ ] Factory work (please specify)
- [ ] Transport sector
- [ ] Other/NA/NK

Please specify:

4. What was the individual told would be their benefits following arrival at final destination?

4.1 Salary (Equivalent in EUR per month)

4.2 Other benefits:

5. In which month/year did the individual enter into the process?

6. Minor at time of entry into the process?

7. From which place/country did the individual enter into the process?
8. What place/country is the last (or intended) destination?

9. Did the individual travel alone?

9.1. If NO, who did the individual travel with (indicate multiple options if necessary)?

- Husband/ Wife
- Partner
- Relative
- Friend
- Recruiter
- Transporter
- Unknown persons
- Other/ NA/ NK

Please specify:

10. Did the individual spend any time in transit place(s)/ country(ies)?

10.1. If YES, please specify in chronological order:

10.2. Did s/he engage in any activity in this place(s) country(ies)?

10.3. If YES, which activity in transit place/ country:

- Agricultural work
- Prostitution
- Restaurants and hotel work
- Study
- Small street commerce
- Trade
- Transport sector
- Factory work (please specify)
- Other/ NA/ NK

Please specify:
11. Were any of the following means used to control the individual?

- Physical abuse  
  - YES
  - NO
  - NK
- Psychological abuse
  - YES
  - NO
  - NK
- Sexual abuse
  - YES
  - NO
  - NK
- Threats to individual
  - YES
  - NO
  - NK
- Threat of action by law enforcement
  - YES
  - NO
  - NK
- Threats to family
  - YES
  - NO
  - NK
- False promises/deception
  - YES
  - NO
  - NK
- Denied freedom of movement
  - YES
  - NO
  - NK
- Giving of drugs
  - YES
  - NO
  - NK
- Giving of alcohol
  - YES
  - NO
  - NK
- Denied medical treatment
  - YES
  - NO
  - NK
- Denied food/drink
  - YES
  - NO
  - NK
- Withholding of wages
  - YES
  - NO
  - NK
- Withholding of identity documents
  - YES
  - NO
  - NK
- Withholding of travel documents
  - YES
  - NO
  - NK
- Debt bondage
  - YES
  - NO
  - NK
- Excessive working hours
  - YES
  - NO
  - NK

If OTHER means of control, specify:

**THE EXPLOITATION PHASE**

12. What activity has the individual undertaken since her/his arrival in the last destination (Indicate multiple answers if necessary)?

- Agricultural work
- Prostitution
- Begging
- Restaurants and hotel work
- Child care
- Study
- Domestic work
- Small street commerce
- Construction
- Trade
## ANNEX 1 – SCREENING INTERVIEW FORM (SIF)

**Enhancing the Safety and Sustainability of the Return and Reintegration of Victims of Trafficking**

### Factory work (please specify)  | Transport sector  
---|---

### Low-level criminal activities  | Other/ NA/ NK  
---|---

### Mining  | Please specify:

13. How old was the individual when the activity began? (Age)

13.1 How long did the only/ most significant activity occur? (Years/ Months/ Weeks/ Days and/or hours)

14. Were any of the following means used to control the individual during the activity?

<table>
<thead>
<tr>
<th>Physical abuse</th>
<th>YES</th>
<th>NO</th>
<th>NK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological abuse</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Threats to individual</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Threat of action by law enforcement</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Threats to family</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>False promises/deception</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Denied freedom of movement</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Giving of drugs</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Giving of alcohol</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Denied medical treatment</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Denied food/drink</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Withholding of wages</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Withholding of identity documents</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Withholding of travel documents</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Debt bondage</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
<tr>
<td>Excessive working hours</td>
<td>YES</td>
<td>NO</td>
<td>NK</td>
</tr>
</tbody>
</table>

**If exploited for prostitution (sexual exploitation):**

| Denial of freedom to refuse client | YES | NO | NK |
| Denial of freedom to refuse certain acts | YES | NO | NK |
| Denial of freedom to use a condom | YES | NO | NK |
If OTHER means of control, specify:

15. Did the individual experience exploitation? [YES NO NK]

16. If NO exploitation took place, was there any indication of a real and substantial threat of exploitation? [YES NO NK]

16.1. If YES, what were the reasons that exploitation never took place?
- Rescue [YES NO NK]
- Escape [YES NO NK]
- Other [YES NO NK] Please specify

CORROBORATIVE MATERIALS

17. Additional corroborative materials [YES NO NK]
- Police or other official reports
- Identity documents
- Travel documents
- Medical reports
- Copies of employment contract or recruitment offer
- Personal writings by the individual
- Hotline reports
- Other [YES NO NK] Please specify

If OTHER, please specify:

DECISION

18. Is this individual a VICTIM of TRAFFICKING? [YES NO]

18.1. If yes, decision made by whom?
- IOM [YES]
- Service provider [YES]
- Police [YES]
- Other [YES] Please specify
19. Please justify why this individual is a Victim of Trafficking:

20. Additional Remarks:
SPECIAL NEEDS AND SECURITY RISK ASSESSMENT OF THE VICTIM OF TRAFFICKING

Special needs of the victim during travel and reception

21. Does the individual have any psychological condition that would create risks during her/his travel, initial reception or possible admission into a rehabilitation center?

21.1 If YES, please specify all that are appropriate:
- Alcoholism
- Violent tendencies or episodes
- Drug addiction
- Other
- Inability or refusal to understand the need for security measures

22. Does the individual have any physical condition that would create special needs during her/his travel, initial reception or possible admission into a rehabilitation center?

22.1. If YES, please specify:
22.2. May the physical and/or psychological condition of the individual compromise the effectiveness of the direct assistance to be provided?

23. Has the individual specific needs: (medicine/ psychological follow-up/ Other)

23.1. If other, please specify:

24. Does the individual want to benefit from:

25. Is the family expected to be at the arrival point?

26. Please detail as much as possible the specific needs of the individual upon arrival:
Risks associated with persons implicated in the trafficking process

**Step 1: Assessing general risk**

- Trafficking has a high impact in the country or community in which the beneficiary has been identified, and/or in the beneficiary’s country or community of habitual residence.
- Trafficking is controlled by organized criminal groups, traffickers, and perpetrators who form part of trafficking networks, high-ranking/community officials.
- Organized criminal groups have the capacity to retaliate against the beneficiary who has escaped or been freed, his/her family members, relatives or friends, and/or IOM staff members or the staff members of partner organizations.
- The level of government commitment and support to combat trafficking in persons in the country of destination or community of origin is low.
- The capacity and commitment of law enforcement agencies to address trafficking and protect the beneficiary is low.
- The capacity and commitment of service providers to provide comprehensive protection and assistance (medical, psychosocial, legal, witness protection, etc.) is low.
- Corruption in the country of destination or community is endemic and adds significantly to the level of risk.
- Trafficking is related to a common cultural or traditional practice, such as forced marriage; and the beneficiary who has been freed from these situations may attract social stigma or inspire other anti-social reactions.
- Family members, relatives and/or friends of the beneficiary were involved in the trafficking process (specifically for minors).
- The beneficiary is a minor.

**Step 2: Assessing specific risk**

- The beneficiary believes him or herself, family members or other loved ones, to be in imminent danger.
- The beneficiary shows signs of physical or psychological abuse.
- Has there been any contact between the trafficker(s) and the beneficiary since the time of her/his rescue/escape in the place/country of destination?
- Are there any indications of on-going contact between the beneficiary and the trafficker(s) in the place/country of origin that would increase the risk factors associated with her/his return and reintegration?
- The trafficker/perpetrator is in a position to know the beneficiary’s current location, his or her home/residence address, or intended movements or location or home addresses of the beneficiary’s family members, relatives or friends.
- The trafficker/perpetrator is known to have the capacity (i.e. human or financial resources, contacts, political or social influence) to physically harm or intimidate the beneficiary, and/or family members or loved ones, or otherwise compromise the beneficiary’s efforts towards rehabilitation.
- Has there been any contact with the beneficiary’s family or other closely related persons since the time of her/his rescue or escape?
- The trafficker/perpetrator is in a position to have detailed knowledge of IOM’s operational protocols, or those of IOM’s partners that work to provide direct assistance to victims of trafficking.
- There is a reason to believe that the beneficiary’s family, relatives or friends may have been implicated in either the process of trafficking or his or her exploitation.
- The beneficiary has any specific physical or psychological need or issue that may compromise the effectiveness of the direct assistance to be provided.
## Risks associated with contact with law enforcement agencies

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has there been contact with any law enforcement agency in the (last) place/country of destination?</td>
<td>✣</td>
</tr>
<tr>
<td>Has the individual co-operated with any of these law enforcement agencies?</td>
<td>✣</td>
</tr>
<tr>
<td>If YES, are the trafficker(s) aware of this fact?</td>
<td>✣</td>
</tr>
<tr>
<td>If YES, is there witness/victim protection in place?</td>
<td>✣</td>
</tr>
<tr>
<td>Have the police taken or do they plan to take any action against the trafficker(s) in the destination place/country, based upon the intelligence or evidence provided by the individual?</td>
<td>✣</td>
</tr>
<tr>
<td>Have the police taken or do they plan to take any action against the traffickers in the receiving place/country based upon the intelligence or evidence provided by the individual?</td>
<td>✣</td>
</tr>
<tr>
<td>Has a criminal case been opened or disclosure made to any suspect of the existence of the complaint and the investigation (either in source or destination country)</td>
<td>✣</td>
</tr>
<tr>
<td>Have any suspects been arrested to date?</td>
<td>✣</td>
</tr>
<tr>
<td>If so, are they in custody?</td>
<td>✣</td>
</tr>
<tr>
<td>If ON BAIL, are their current whereabouts known?</td>
<td>✣</td>
</tr>
<tr>
<td>Are any of the known suspects still at liberty?</td>
<td>✣</td>
</tr>
<tr>
<td>Are any of the suspects based in the receiving place/country?</td>
<td>✣</td>
</tr>
</tbody>
</table>

### Final decision based on the above Risk Assessment:

- ☐ No risks or low/minor risks have been identified
- ☐ Medium/Extreme risks have been identified – Need to carry out the IOM Risk Management Plan
## Risk Management

<table>
<thead>
<tr>
<th>Identified specific risks</th>
<th>Timeline</th>
<th>Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please include risk(s) identified in step 2 of the Risk Assessment Checklist as well as any other risks identified in accordance with the IOM Handbook on Direct Assistance.</td>
<td>Please indicate when the risks are likely to happen and when the mitigation action(s) should be conducted.</td>
<td>Please refer level of risks</td>
</tr>
<tr>
<td><strong>Beneficiary</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Beneficiary’s family and friends</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Associated Victim(s)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Partners/ Service Providers</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>IOM Personnel/ Property/ Programmes</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Plan Template

<table>
<thead>
<tr>
<th>level</th>
<th>Mitigation Action</th>
<th>Resources required</th>
<th>Responsible Actor</th>
</tr>
</thead>
<tbody>
<tr>
<td>to Step 2.2. table</td>
<td>Please include follow-up actions required to mitigate risk(s) identified.</td>
<td>Please detail resources required in order to carry out identified actions such as human, financial, etc.)</td>
<td>Please list the actor(s) responsible to implement the identified actions, such as IOM (which Mission(s)?), credible specialized service providers, governmental or non-governmental actors, etc.)</td>
</tr>
</tbody>
</table>
Before initiating the assessment of the family, IOM office in the country of origin will decide on the approach to create the conditions of trust and consent, based on its knowledge of local social structures, cultural sensitiveness and security-related risks. The family assessment will under no circumstances be conducted in a forceful manner.

Before starting the assessment, which will be done through participatory interviews with the family, please explain the purpose of the assessment. The purpose is to recollect information on the socio-economic situation of the family in order to be able to evaluate what could be the best options for the child in the short and middle-term.

**General information on the UAM**

<table>
<thead>
<tr>
<th>Name and surname</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth</td>
<td>(DDMMYYYY)</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>Place of Birth</td>
<td>(city, country)</td>
</tr>
<tr>
<td>Citizenship</td>
<td></td>
</tr>
<tr>
<td>EU host country</td>
<td></td>
</tr>
<tr>
<td>Information of the father</td>
<td></td>
</tr>
<tr>
<td>Information of the mother</td>
<td></td>
</tr>
<tr>
<td>Additional family members</td>
<td></td>
</tr>
<tr>
<td>Information regarding the applicants upbringing</td>
<td></td>
</tr>
</tbody>
</table>
General information on the UAM in the EU country

While keeping in mind the confidentiality principle, it has been decided to at least share some general information on the UAM situation in Europe so that the family knows in what general conditions the UAM founds him- or herself in. Also, by sharing this information the desire is to contribute to the process of creating conditions of trust and consent and in this way facilitate the sub-sequent assessment of the family’s socio-economic conditions.

General information on the respondents

Please, list down all non IOM-staff participating in the interview

(*) Relation with the minor:
1) Grandfather;
2) Grandmother;
3) Mother;
4) Father;
5) Brother;
6) Sister;
7) Uncle;
8) Aunt;
9) Male cousin;
10) Female cousin;
11) Other relative;
12) Local authority;
13) Community leader;
14) Religious leader;
15) Other, specify

Composition of the household¹

1) Please, list down all the members of the household (even if not present at the interview)

<table>
<thead>
<tr>
<th>Year of birth</th>
<th>Relation²</th>
<th>Guardian (Yes/No)</th>
<th>Education³</th>
<th>Activity⁴</th>
<th>Health problems⁵</th>
<th>First and family Name</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

¹ The household is defined as the persons who live under the same roof and share at least one meal per day together.
² Relation with the minor: 1) Grandfather; 2) Grandmother; 3) Mother; 4) Father; 5) Brother; 6) Sister; 7) Uncle; 8) Aunt; 9) Male cousin; 10) Female cousin; 11) Other relative; 12) Local authority; 13) Community leader; 14) Religious leader; 15) Other, specify
³ Education: 1) No education; 2) Primary education (1-8 years of school); 3) Secondary education (9-13 years of school); 4) Vocational education; 5) University education; 6) Other, specify
⁴ Activity: 1) unemployed; 2) student; 3) peasant/fisher; 4) employee 5) self-employed 6) occasional worker; 7) housewife; 8) other, specify
⁵ Health problems: 1) physical disability; 2) illness; 3) none; 4) other, specify
2) Do the parents live together in the same household? (please cross)  
[ ] Yes; [ ] No

2a) If not, why?  
[ ] separated / divorced  
[ ] deceased  
[ ] emigrated  
[ ] other, specify:

3) How many members of the household have migrated in the last 10 years (including the minor)?

4) Do they have any relative living in the EU?  
[ ] yes  
[ ] no  
[ ] doesn’t know/doesn’t answer

If yes, in which EU country(ies)?

Please specify degree of kinship:

Living and socio-economic conditions of the household

3) Please indicate who, among the above-listed persons, is or are the “bread winner/s”:

4) The family income:  
[ ] is enough to also meet the secondary needs of the family  
[ ] meets just the basic needs  
[ ] is not sufficient to meet the family’s basic needs  
[ ] there is no family income

5) Location of the family dwelling:  
[ ] village  
[ ] city  
[ ] rural context  
[ ] slums  
[ ] other, specify:

6) Type of family dwelling:  
[ ] single-family unit house  
[ ] apartment  
[ ] slump  
[ ] other, specify:

6a) Physical conditions of the place:  
[ ] good  
[ ] average  
[ ] poor

6b) Hygienic conditions:  
[ ] good  
[ ] average  
[ ] poor
6c) Relations among family members:
[ ] good
[ ] average
[ ] poor
[ ] no relations

7) How many years has the family lived in this dwelling?

8) Is the dwelling equipped with:
[ ] inside toilet
[ ] outside toilet
[ ] running drinking water
[ ] water heating
[ ] sewages system
[ ] heating
[ ] electricity from network
[ ] electricity from local generator
[ ] radio
[ ] TV
[ ] telephone (landline)
[ ] telephone (cell phone)
[ ] telephone (satellite phone)
[ ] bedrooms / sleeping quarter
[ ] computer
[ ] internet connection
[ ] cooking facilities
[ ] other, specify:

9) How many family members use/have the access to: (specify the number)

___ private car
___ bicycle
___ motorbike
___ public transports
___ horses or donkeys
___ no mean of transportation
___ other means of transportation, specify:

9a) With the mean of transportation used by the family (as specified above), how long does it take to get to the following from the family dwelling (in minutes):

- main road:
- high school:
- university:
- doctor:
- nurse:
- health facilities:
- food shops:
- other shops:
- police station:
- government service providers:
- banks:
- community centre:
- train station:
- bus station:
10) Physical conditions of the neighborhood:
[ ] good
[ ] average
[ ] poor

11) Problems of the neighborhood

<table>
<thead>
<tr>
<th>Problem</th>
<th>High</th>
<th>Medium</th>
<th>Absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Unemployment</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>2. Lack of future perspectives</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>3. Poverty</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>4. Lack of services</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>5. Isolation</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>6. Crime, illegal activities and violence</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>7. Trafficking</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>8. Political instability</td>
<td>[    ]</td>
<td>[      ]</td>
<td>[      ]</td>
</tr>
<tr>
<td>[ ] Other, specify:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Information about the UAM migration process

12) Why did the minor(s) leave the household? (multiple cross are possible)
[ ] for economic reasons
[ ] the family could not follow/raise the minor
[ ] the family/the minor had relatives in the EU. Please specify EU country(ies):
[ ] because his/her family encouraged him/her to do so
[ ] because of conflicts/problems between the minor and the family
[ ] because the family sold the minor to a trafficking network
[ ] other, specify:

13) The family (multiple cross are possible)
[ ] was aware of the migration project of the minor
[ ] agreed on the project
[ ] conceived the minor’s migration project
[ ] was unaware of the migration project of the minor
[ ] disagreed on the project
[ ] initially disagreed but got convinced later
[ ] other, specify:

13a) Is the family aware of the trafficking situation of the minor?
[ ] Yes; [ ] No

13b) If yes, is the family actively involved in the trafficking of the minor? Has the family participated to the recruitment of the minor by the trafficking network and/or received some money from the traffickers?
Please explain:

13) How often does the family hear the minor on the phone?
[ ] daily
[ ] weekly
[ ] monthly
[ ] few times a year
[ ] never
14) Is there anything in particular, regarding the minor’s situation in the EU, which worries the family?
[ ] yes
[ ] no
Please specify:

15) Does the family miss him/her?
[ ] a lot
[ ] some
[ ] no
[ ] other, specify:

16) If the minor wanted to come back home, would the family accept him/her back the minor into the family unit?
[ ] yes
[ ] do not know
[ ] no
[ ] other, specify:

16a) If not, why?
[ ] because of economic reasons
[ ] because family/parents have split
[ ] the family cannot raise him/her
[ ] the family has invested a lot of money in his/her journey
[ ] the family needs his/her money (remittances)
[ ] because of conflicts/problems between the minor and the family
[ ] because the family received threats from the traffickers
[ ] other, specify:

Additional comments, if any

Please invite the respondents to add on the above listed questions, if they so desire.

Interviewer assessment

This section of the form is meant to report the interviewer’s own assessment, and can be filled also in a later stage, after that the interview with the family has been carried out.

1. Return
[ ] is possible in the family
[ ] is possible in a foster care
[ ] is not possible
[ ] other, specify:

2. If the return in the family is possible, assistance is suggested in terms of:
[ ] job opportunities
[ ] economical/financial support
[ ] support to education
[ ] apprenticeship
[ ] other, specify:
3. In the area where the family is residing, which are the available possibilities accessible to the minor?

[ ] Professional start-up support
[ ] High school
[ ] Primary school
[ ] University
[ ] Apprenticeship
  [ ] industry
  [ ] constructions
  [ ] handcraft
  [ ] agriculture
  [ ] services
[ ] Support to micro-enterprises
[ ] Placement in existing cooperatives
[ ] Other:

4. If return is not possible, the reasons are:

[ ] impossibility to realize a sustainable reintegration project and a sustainable social reintegration
[ ] family problems
[ ] health reasons, please specify relevant information:
[ ] other, specify:

5. Comments of the interviewer:

Please note down your remarks and any other information that could not be recorded elsewhere in the questionnaire, but which can be useful to assess the conditions of the minor’s family, the relations within it and anything else you deem to be relevant. Please also explain the evaluation given on the feasibility of family reunification and return for the minor. Please develop relevant recommendations in terms of reintegration assistance.
**Consent to assessment of family**

On behalf of the respondent:

- I have been informed that the information recollected during the interview will be used to determine what alternatives are the best in the interest of *(please include the name of the child)* _________________.

- I have been informed that the information gathered during the interview will remain strictly internally within IOM and used only for the purpose stated above.

- I certify that the information shared during the interview is correct to the best of my knowledge.

By signing this form, I am attesting that I freely assent to participate in the interview:

__________________________

**Signature**

__________________________

**Name**

__________________________

**Place and date**

On behalf of the interviewer:

- I confirm that the participant was given an opportunity to ask questions about the project, and all the questions asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

__________________________

**Signature**

__________________________

**Name**

__________________________

**Place and date**
### Individual Reintegration Plan (IRP)

**CARE Project - RT.0845**

This form is to be completed by individuals or heads of families applying to return.

For applicants with dependents, each family member requesting reintegration assistance should fill in the relevant IRP.

<table>
<thead>
<tr>
<th>IOM Mission in:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARE Project ref. number:</td>
</tr>
</tbody>
</table>

1. **IRP Applicant**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of birth</th>
<th>Place of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

2. **Contact details in country of return**

<table>
<thead>
<tr>
<th>Address</th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>City</th>
<th>Post Code</th>
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<table>
<thead>
<tr>
<th>Telephones</th>
<th>E-mail</th>
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<table>
<thead>
<tr>
<th>Comments</th>
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<tbody>
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</table>
### 3. Dependents returning with the Main Applicant – Please tick reintegration needs

<table>
<thead>
<tr>
<th>Case No:</th>
<th>D1</th>
<th>D2</th>
<th>D3</th>
<th>D4</th>
<th>D5</th>
<th>D6</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐</td>
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<td>☐ ☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐ ☐</td>
</tr>
</tbody>
</table>

B: Business Set Up  JP: Job Placement  E: Education  O: Other
T: Training  NR: Not Requested Assistance  DNK: Do Not Know

### 4. Return information

<table>
<thead>
<tr>
<th>Country of departure:</th>
<th>Date of return:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5. General reintegration needs assessment

<table>
<thead>
<tr>
<th>Options</th>
<th>Assistance</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Temporary accommodation</td>
<td>Type of accommodation:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Place:</td>
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<td></td>
<td></td>
<td>Period:</td>
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<tr>
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<td>Amount (EUR):</td>
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<tr>
<td></td>
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<td>Justification:</td>
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<td></td>
<td>Secondary transportation to final destination</td>
<td>Type of transportation:</td>
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<td></td>
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<td>Destination:</td>
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<td></td>
<td></td>
<td>Amount (EUR):</td>
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<tr>
<td></td>
<td>Health care</td>
<td>Please specify details p. 4 to 5</td>
</tr>
<tr>
<td></td>
<td>Business set up</td>
<td>Please specify details p. 6 to 10</td>
</tr>
<tr>
<td></td>
<td>Education</td>
<td>Please specify details p. 11 to 12</td>
</tr>
<tr>
<td></td>
<td>Vocational Training</td>
<td>Please specify details p. 13 to 14</td>
</tr>
<tr>
<td></td>
<td>Job Placement</td>
<td>Please specify details p. 15 to 16</td>
</tr>
<tr>
<td></td>
<td>Family support / Child care</td>
<td>Type of support /care:</td>
</tr>
<tr>
<td></td>
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<td>Dependant concerned:</td>
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<td>Place:</td>
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<td></td>
<td>Period:</td>
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<td></td>
<td></td>
<td>Amount (EUR):</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Justification:</td>
</tr>
<tr>
<td></td>
<td>Other support (Please specify: airport assistance, medical check-up, social support, equipment, clothes, etc.)</td>
<td></td>
</tr>
</tbody>
</table>


6. Level of formal education

| No formal education | Primary school | Secondary school | College/University | Specific training / Skills
|---------------------|----------------|------------------|--------------------|--------------------------|

Tick highest level obtained

Language skills (Mother tongue first)

<table>
<thead>
<tr>
<th>Level</th>
<th>Very Good</th>
<th>Good</th>
<th>Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>[]</td>
<td>[]</td>
<td>[]</td>
</tr>
<tr>
<td>2</td>
<td>[]</td>
<td>[]</td>
<td>[]</td>
</tr>
<tr>
<td>3</td>
<td>[]</td>
<td>[]</td>
<td>[]</td>
</tr>
<tr>
<td>4</td>
<td>[]</td>
<td>[]</td>
<td>[]</td>
</tr>
</tbody>
</table>

7. Professional skills

<table>
<thead>
<tr>
<th>General skills</th>
<th>Additional training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please detail any professional skills or training (i.e. IT, languages, hairdressing, etc.)</td>
<td>Yes</td>
</tr>
</tbody>
</table>

If yes, what training would you need:

- Business planning and management
- Languages (specify)
- IT (specify)
- Other (specify)
8. **Professional experience**

*Please attach CV if available*

<table>
<thead>
<tr>
<th><strong>General</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe your professional experience both in your home country and salary. Please list your employment history by date (most recent first).</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Relevant to your business idea or professional plan</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you previously managed/owned or worked in a similar business or sector?</td>
<td></td>
</tr>
</tbody>
</table>
H

Health care

H1. General information

What is your general health/psychological condition?

H2. Health care requested:

Details below to be completed by IOM Mission in country of return or by IOM in EU country if known pre-departure

<table>
<thead>
<tr>
<th>Type of care</th>
<th>Details / costs</th>
<th>Hospital/medical centre</th>
<th>Location</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Medical check-up</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Medicine</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Specific care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Admission to a hospital /</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rehabilitation centre</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
H3 Other assistance requested:

<table>
<thead>
<tr>
<th>Other assistance requested</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Equipment</td>
<td></td>
</tr>
<tr>
<td>☐ Transportation</td>
<td></td>
</tr>
<tr>
<td>☐ Other (Subsistence Allowance)</td>
<td></td>
</tr>
</tbody>
</table>

H4. Documentation

IOM will request you to provide the following in order to be assisted:

<table>
<thead>
<tr>
<th>Documents</th>
<th>Required</th>
<th>Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical assessment</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Medical care fees</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other:</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

H5. Actions to be taken by the Applicant

<table>
<thead>
<tr>
<th>Action</th>
<th>Place of Action</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
H6. Notes / Remarks

Date: 

Name of IOM Officer: 

Signed: 
# Business set-up

## B1. Business summary

<table>
<thead>
<tr>
<th>Type of business</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Address (if known)</td>
</tr>
</tbody>
</table>

## B2. Business: General information

<table>
<thead>
<tr>
<th>Development stage</th>
<th>☐ New</th>
<th>☐ Restarting</th>
<th>☐ Expanding</th>
</tr>
</thead>
</table>

You business is:  

<table>
<thead>
<tr>
<th>Partnership</th>
<th>☐ Independently</th>
<th>☐ In partnership</th>
</tr>
</thead>
</table>

Are you planning to work:

<table>
<thead>
<tr>
<th>Products and materials needed for the business</th>
<th></th>
</tr>
</thead>
</table>

## B3. Business plan

Details below to be completed by IOM Mission in country of return or by the IOM mission in EU country if known pre-departure

<table>
<thead>
<tr>
<th>If in partnership please complete:</th>
<th>Name of business partner:</th>
</tr>
</thead>
</table>

- Nature of the relationship:  
  - ☐ Member of family  
  - ☐ Friend  
  - ☐ Other…………………

Have you got a written partnership agreement?  

- ☐ Yes  
- ☐ No
| **Business licence** |  |
|----------------------|----------------
| Do you need to obtain a business licence? | ☐ Yes ☐ No |
| If no need please indicate reason: | |

| **Market analysis** |  |
|---------------------|----------------
| Have you carried out any market research? | ☐ Yes ☐ No |
| If yes need please describe: | |

<table>
<thead>
<tr>
<th><strong>Who are your main competitors in your business?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Are you planning to offer customers different products/services to your competitors? Will your business have an advantage over your competitors?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

| **Risks** |  |
|------------|----------------
| State the main risks you will face while setting up/developing your business? | |

<table>
<thead>
<tr>
<th><strong>How are you planning to tackle them?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### Marketing plan

How are you planning to attract customers?

### Long term plans

What are your middle/long term objectives?

State when you think you can realistically achieve these objectives.

### B4. Resources

#### Staff needed

Are you planning to employ staff, how many, in what capacity and with what skills?

Will you employ any family members in the business? Who and in what capacity?
<table>
<thead>
<tr>
<th>Equipment needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which tools/stocks/supplies are required for the business?</td>
</tr>
</tbody>
</table>
### B5. Budget calculation

*Provide the cost and description of the resources necessary for the business. Indicate who is expected to contribute.*

<table>
<thead>
<tr>
<th>All costs should be in EUR</th>
<th>YOU</th>
<th>IOM</th>
<th>OTHER (Business partner, relative, friend, micro-credit, etc.)</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Materials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business registration</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent of premises</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### B6. Other sources of income

**Micro credit / Loan**

IOM is not in a position to provide a loan. However, if the facility is available in your country, do you think you would need to take a loan / micro-credit?

[ ] Yes  [ ] No

Comments:
### B7. Anticipated profit calculation

State all expected monthly income/expenses once the business is up and running.

<table>
<thead>
<tr>
<th>All costs should be in EUR</th>
<th>Income</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income from sale of goods/services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other source of income. List:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stock supply</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent of premises</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Replacement of equipment / Maintenance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insurances</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communication costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transport</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loan repayments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff salary</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
ENHANCING THE SAFETY AND SUSTAINABILITY OF THE RETURN AND REINTEGRATION OF VICTIMS OF TRAFFICKING

Your salary

Taxes

Other expenses. List:
- 
- 
- 

TOTAL

PROFIT

B8. Documentation

IOM will request you to provide the following in order to be assisted:

<table>
<thead>
<tr>
<th>Documents</th>
<th>Required</th>
<th>Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business licence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment quotes/invoice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partnership agreement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Project funded by the EU Return Fund
B9. Actions to be taken by the Applicant

<table>
<thead>
<tr>
<th>Action</th>
<th>Place of Action</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B10. Notes / Remarks

Date:

Name of IOM Officer:

Signed:
### E. Education

#### E1. Academic background

List of academic institutions attended

<table>
<thead>
<tr>
<th>Level</th>
<th>Name of School/Location</th>
<th>Degree/Diploma Obtained</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Primary</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Secondary</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ University</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### E2. Assistance requested

Details below to be completed by IOM Mission in country of return or by IOM in EU country if known pre-departure

<table>
<thead>
<tr>
<th>Level</th>
<th>Name of School</th>
<th>Address</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Primary School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Secondary School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ University</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ College</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### E3. Additional

<table>
<thead>
<tr>
<th>Other Assistance Requested</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Books/equipment</td>
<td></td>
</tr>
<tr>
<td>☐ Transportation</td>
<td></td>
</tr>
<tr>
<td>☐ Housing (University halls)</td>
<td></td>
</tr>
</tbody>
</table>
### E4. Documentation

IOM will request you to provide the following in order to be assisted:

<table>
<thead>
<tr>
<th>Documents</th>
<th>Required</th>
<th>Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/University registration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School/University tuition fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### E5. Actions to be taken by the Applicant

<table>
<thead>
<tr>
<th>Action</th>
<th>Place of Action</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### E6. Notes / Remarks
ANNEX 4 – INDIVIDUAL REINTEGRATION PLAN (IRP) TEMPLATE

Date:

Name of IOM Officer:

Signed:
VT1. Training experience

| Have you received any professional training? | Yes ☐
<p>| If yes, please list in table below (from most recent) |</p>
<table>
<thead>
<tr>
<th>Type of training</th>
<th>Vocational centre/business/workshop</th>
<th>Location</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VT2. Training assistance requested:

Details below to be completed by IOM Mission in country of return or by IOM in EU country if known pre-departure

<table>
<thead>
<tr>
<th>Type of training</th>
<th>Vocational centre/business/workshop</th>
<th>Location</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VT3. Other assistance requested:

<table>
<thead>
<tr>
<th>Other assistance requested</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Equipment</td>
<td></td>
</tr>
<tr>
<td>☐ Transportation</td>
<td></td>
</tr>
<tr>
<td>☐ Other (Subsistence Allowance)</td>
<td></td>
</tr>
</tbody>
</table>
VT4. Documentation

IOM will request you to provide the following in order to be assisted:

<table>
<thead>
<tr>
<th>Documents</th>
<th>Required</th>
<th>Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/University registration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School/University tuition fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VT5. Actions to be taken by the Applicant

<table>
<thead>
<tr>
<th>Action</th>
<th>Place of Action</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

VT6. Notes / Remarks
Date:

Name of IOM Officer:

Signed:
**JP1. Job Placement Summary**

Details below to be completed by IOM Mission in country of return or by IOM in EU country if known pre-departure

<table>
<thead>
<tr>
<th>Job title</th>
<th>Job sector</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of company</th>
<th>Location of the placement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contact details of employer</th>
<th>Contact person</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**JP2. Placement details**

<table>
<thead>
<tr>
<th>How long is your job placement contract for?</th>
<th>Starting date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What will be your monthly salary?
### Additional training
Do you require any training for this job placement?
- [ ] Yes
- [ ] No

If yes, what training would you need:

### Subsistence Allowance
- [ ] Yes
- [ ] No

If yes, for how long?

### Transportation Allowance
- [ ] Yes
- [ ] No

If yes, for how long?

---

**JP3. Professional objectives**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>What are your professional goals?</td>
<td></td>
</tr>
<tr>
<td>How does this placement fit into your career plan?</td>
<td></td>
</tr>
<tr>
<td>What skills will you gain during this placement?</td>
<td></td>
</tr>
</tbody>
</table>
JP4. Documentation

IOM will request you to provide the following in order to be assisted:

<table>
<thead>
<tr>
<th>Documents</th>
<th>Required</th>
<th>Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Placement contract/agreement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Letter from Employer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

JP5. Actions to be taken by the Applicant

<table>
<thead>
<tr>
<th>Action</th>
<th>Place of Action</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Date: 

Name of IOM Officer: 

Signed: 

---

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