

# TRAINING MANUAL ON **HOME MANAGEMENT**

*For Homes Meant for Sex Trafficked Victims*

**SUNITHA KRISHNAN**



## **ACKNOWLEDGEMENTS**

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Prajwala is grateful to Sunitha Krishnan, Padmashree Awardee for developing this comprehensive training manual on home management.

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*For Homes Meant for Sex Trafficked Victims*

**SUNITHA KRISHNAN**



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***Disclaimer***

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देबश्री चौधरी  
DEBASREE CHAUDHURI



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## **FOREWORD**

Individuals that access shelter homes require a social security net that identifies and caters to all their needs. However, those that have been victims of trafficking have unique vulnerabilities owing to the circumstances they have battled. The stakeholders and service providers in shelter homes play a crucial role in the rehabilitation and reintegration of these women and, as such, it is the staff and support services' care and sensitivity that will create a new lease of life for them.

We will all agree that it is necessary to create a safe and secure environment for victims in institutional shelters that aim to rehabilitate them. It is in this spirit that the Home Management Training Manual by Prajwala has been created. It is hoped that this training Manual will help managers and care-providers who manage homes meant for trafficked victims to provide for the unique needs of these victims.

The Government of India is committed to providing holistic care of women in this country. The Ministry of Women and Child Development caters for the needs of women in difficult circumstances and victims of trafficking through the Swadhar Greh and Ujjawala Homes respectively. These schemes provide shelter and other necessary services for the holistic care of the residents, and are committed to rehabilitating them to ensure their reintegration in society. It is thus of utmost importance that the standards of care by service providers are nothing short of exceptional.

The aim of intervention for women victims of trafficking is not only management and healing, but also prevention and reintegration of such victims in society. It is thus vital to ensure a systemic change in the way we address this issue. I am happy that this manual looks at the issue in a holistic manner from the legal instruments governing the issue to the needs of those that access them. This training manual will help the functioning of Ujjawala and Swadhar Homes across the country in enhancing their capabilities to provide protection and care services by keeping victims as the main focus of all activities.

I hope that this Manual will better the lives of the victims and facilitate care for those that have the greatest need for it.

*Debasree Chaudhuri*  
**(Debasree Chaudhuri)**



**M. JAGADEESHWAR, I.A.S.,**  
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## FOREWORD

Trafficking in human beings, especially in women and children, has been a matter for grave concern in India. Traffickers use false promises of employment of 'boyfriend' relationship, or a arrange sham marriage and lure women and girls into sex trafficking. In addition to traditional red-light districts, women and children are increasingly being pushed into force prostitution in small hotels, vehicles, massage parlours, beauty parlours etc. Rehabilitation of rescued victims is a different set of challenge. This requires extraordinary levels of skill, expertise and commitment. Often these victims suffer from many disadvantages including psychological medical and emotional disorders.

In this context and aiming at providing holistic services for the victims, a comprehensive training manual has been developed for the caregivers for effective management of protective homes. This manual titled *Training Manual on Home Management for Homes Meant for Sex Trafficked Victims* has been developed by Dr. Sunitha Krishnan, *Padmashree Awardee* and General Secretary, Prajwala with the view of imparting experiential learning through the mode of training. The training is focused on all the protective home towards better delivery of services.

This Manual which is been written in a practical user friendly style drawing on Prajwala's personal experiences and wisdom from managing many homes also provides for protocols to be followed in difficult situations such as suicide or death.

It is hoped that this Manual will have a cascading effect to transfer the knowledge, skills and training received to the caregivers of protective homes and eventually benefit the end-users – the survivors of this heinous crime and pave the way for their holistic recovery and rehabilitation.

The Department of Women & Child Welfare, Government of Telangana has successfully used this training manual to improve the conditions of the homes in the state and hopes that this training manual is used across the country to ensure better access to service to all the victims.

  
(M. JAGADEESHWAR) 6.7.2019





## FOREWORD

Prajwala is a pioneering anti- trafficking organization working on the issue of sex trafficking and sex crime since 1996. The organization actively works in the areas of prevention, rescue, rehabilitation, reintegration and advocacy to combat trafficking in every dimension and restore dignity to victims of commercial sexual exploitation. In the last 25 years Prajwala established three large safe homes as emergency center, child home and an adult home and expedited in establishing 25 safe homes across the country.

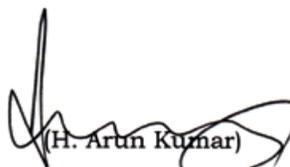
Trafficking of women and children is an organized crime that violates basic human rights. After being rescued from such stressful situations, the women are often transferred to shelter homes for psycho social rehabilitation to help them return to their meaningful life. However, transition in to shelter homes is not easy as they face numerous physical, psychological and social problems due to stigma, rejection by family members, low self-esteem, and lack of opportunity after their release from these homes.

The provision of psychosocial rehabilitation of women in these institutions to rebuild a meaningful life has become a major challenge for home managers and care givers as they are not equipped with the required knowledge and capacity to thoroughly understand and address their psycho-social needs which adds distress and emotional agony among women in homes that will affect their overall development.

In response to this important concern, Prajwala foundation in collaboration with Department of Women Development and Child Welfare, Government of AP designed a training module for the home managers and care providers with an objective to educate them about the importance of care and support for women residing in homes and sensitize them to recognize the residents as people requiring help and not as 'problem cases'.

I believe that this manual will be a very useful resource book for all the organizations that provide institutional care for women in difficult circumstances especially those freed from trafficking and other crimes. I hope this training manual will go a long way in helping home managers and caregivers to understand the issues and intricacies of women's experiences and needs and undertake proactive steps for initiating programs that would help the victims to re-integrate better in to the society.

I deeply acknowledge the efforts of Prajwala and their every team member for developing such a comprehensive manual that comes into handy for several home managers and care givers who are striving hard to face the challenges in shelter home management.



(H. Arun Kumar)



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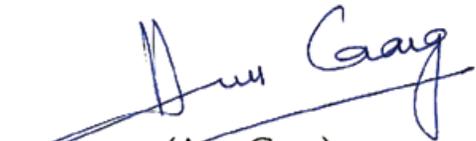
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## FOREWORD

Trafficking in human beings, especially women and children, has been a matter of grave concern in India. In this context and aiming at providing holistic services for the victims, a comprehensive training manual has been developed for the caregivers for effective management of protective homes. This Manual titled *Training Manual on Home Management for Homes Meant for Sex Trafficked Victims* has been developed by Dr. Sunitha Krishnan, *Padmashree Awardee* and General Secretary, Prajwala with the view of imparting experiential learning through the mode of training. The training is focused on all the protective homes towards better delivery of services.

It is hoped that this Manual will be useful for caregivers of protective homes and benefit the survivors of trafficking.

The Department of Women & Child Welfare, Government of Odisha has used this training manual to train the caregivers and hopes all others will also find it useful.

  
(Anu Garg)



## FROM THE AUTHOR'S DESK

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What is the best way to run a home meant for victims of sex trafficking?

The right person to give you that information is somebody who has actually run such a home. While there are several International and National minimum standards that is commonly agreed upon, the actual management of the home with its multitude of challenges is best known to a person who is balancing the complex layers of challenges faced due to providing safe custody to prime witnesses in a case related to a organized crime and at the same time facilitating safe healing environment for highly traumatized persons without compromising on the prescribed standards.

In my last 25 years of fighting the organized crime of sex trafficking, I have established three large safe homes (an emergency shelter, a children's home and an adult home) and facilitated in establishing over 25 safe homes across the country. One of the major lessons learnt in this period is that 'it is not rocket science' to manage such a home.

It is no doubt very challenging, requiring specific skill-sets and the ability to withstand all forms of attacks, but if one has the commitment and passion for a mission of this nature and is prepared to face any adversity then the skills for management of a home meant for sex trafficked victims can be easily acquired.

This training manual is essentially the collective wisdom of 20 years of work done by us. We did not start with this 'wisdom' and most of it was acquired through trial and error. Over the period of time, we learnt step by step how to manage such safe homes within the parameters of the legal framework.

I would categorize this training manual as 'work in progress' as it is very difficult to predict the complicated challenges in running homes of this nature. Still this is a significant first step made for an Indian context.

I hope and wish that this manual will be a useful tool for all home-managers and that there is no need to reinvent the wheel.

Sunitha Krishnan



## ACKNOWLEDGEMENTS

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This training manual is the collective wisdom of extraordinary home-mangers and care-givers who have set up and managed various Prajwala Safe Homes. I acknowledge with gratitude all their services and also their practical wisdom which has enriched this training manual.

The initial process of giving a framework to the manual was started by well known development consultant Joyatri Ray. I wish to acknowledge with deep appreciation her efforts which made it easier for the rest of us to build on.

If not for the timely support of Purna Bhattachrya I would have left this manual half way. Purna with her rich experience ensured that the essence of the experiential pedagogy was not ignored at any level.

It will be a gross injustice on my part if I do not mention with appreciation the role of Rekha Abel, Lalita Iyer and Jomey Joseph in editing the manual.

I also place it on record my deep gratitude to all the members of the Technical Advisory Group in particular Mahesh Muralidhar Bhagwat, IPS and Supreme Court Advocate Aparna Bhat who gave their insightful inputs to enrich the manual.

The training manual was tested through pilot training programs with atleast 25 homes meant for sex trafficked victims. Unknown to the participants, the manual was being tested and validated. I place on record my heartfelt thanks to all the home managers who actively participated in the training programs and gave their inputs which helped us improve the manual and increase the scale of impact.

This training manual would not have seen the light of the day if not for the project “Combating Trafficking In Persons Through Victim Centered Approaches in India” of Catholic Relief Services which is funded in part by a grant from the United States Department of State. I offer my humble salutations to this vital support which is perhaps going to revolutionize the way the homes meant for sex trafficked victims is managed in India.



## INTRODUCTION TO THE TRAINING MANUAL

Human trafficking is perhaps the worst form of human rights violation, which destroys the body, mind, and soul of the person who is a victim. While the impact of the crime depends on the purpose for which the person is trafficked, it has been generally observed that those who are victims of sex trafficking suffer from severe damages both to their bodies and also to their psyche. Most often than not the multiple complex layers of trauma projects itself in ways that is not easily understood by all. A significant number of victims start normalizing the experience of being exploited and there are also a good number who suffer from Stockholm's syndrome. It is in these conditions that many victims are rescued. Safe homes meant for care and protection face serious challenges in creating an enabling environment for holistic rehabilitation for victims coming from such severely abusive conditions.

This Training Manual is an attempt to strengthen the efforts of Home-Managers and care-providers who manage homes meant for sex trafficked victim. The Manual is written bearing in mind the end-user, which are the Home Managers and the Care-givers.

The Manual seeks to build knowledge and skills, tackling the unique psychological conditions of a sex trafficked victim and building an understanding on the legally acceptable ways of home management.

The starting premise in drafting the Manual is done believing that the Home Managers and Care-providers have basic understanding in dealing with victims of sex trafficking. This Manual therefore, exclusively seeks to focus on everything that the Home Managers and Care-givers do, with the emphasis of it being a Protection Service, and with a legally acceptable ways of dealing with several challenging situations that one may face while managing such a home. The victim has been kept as a pivot around which the entire Manual has been drafted. All actions of the Home-Manager & Caregivers in this Manual are focused on the victim, not treating her merely as a victim but also as a witness of a crime, taking all actions to protect and nurture her – towards their effective social reintegration as the end-goal.

### **Guidelines for using the Manual**

This Manual has 5 Modules, each written chronologically to develop understanding and skills on dealing with various facets of home management. The first Module strives to build a better understanding about trafficking and the sex trafficked victim/person; the second module develops a better understanding on the needs of the victims and the role

of Protection Services; the third module dwells on victim friendly home management; the fourth module builds a better understanding about victim witness assistance and preparation for reintegration and the fifth module enhances the preparedness of the participants on the challenges in home management.

Each Module is divided into three sections – the first provides the **‘Training Methodology’**, outlining a set of Activities for the trainer on how to convey the content and the second section contains the **‘Worksheets’** to support the activities and the third section provides the **‘Supplementary Reading Material’** which is resource material for that particular Module. The Activities are drafted keeping in view adult-learning methodologies, of working on case studies, presentations by the participants, group and open discussions, power point presentations, using audio-visual mediums, exercises, and questions and answer sessions between the trainer and the participants. The trainees will be required to be active participants in the training, rather than being passive recipients of information being imparted by the trainer.

Each Module is a stand-alone source of resource material, but linkages and cross-references are drawn at relevant places, as and when required.

### **Guidelines for the Training Agency**

Some important pointers for the Training Agency as the training is being planned on the basis of this Manual –

**1. Training Environment and Facilities** – should be chosen with care keeping in view the creation of a conducive environment for learning and experience sharing. The training venue should make available adequate space for case-study solving by participants in different groups, and creating practical demonstrations on certain subjects. Ensure that all training material and equipment is available for projecting power point presentations, showing films, etc. during the training.

### **2. Selection of Trainers**

The Training Agency may consider the following pre-requisites in choosing appropriate Trainers -

- In depth knowledge of substantive and procedural aspects of the Modules assigned to them.
- Previous practical experience in dealing with trafficking cases of any kind.
- Understands the specific requirements of adult learning and training.
- Effective communicator.
- Flexible in using different training methodologies.

- ☑ Committed to devoting the required time for training.
- ☑ Prior experience of training on human trafficking.

A multi-disciplinary, victim-focused approach is the key principle of this training. To be effective, the Training Agency should involve trainers who have prior experience working with homes.

It is essential that all trainers are informed in advance the respective Modules that they are expected to cover. Give the full Manual with all Modules, so that –

- The trainer is well acquainted with the resource material and the training methodology to deliver the Module.
- The trainer knows of the other Modules and what the other trainers would cover, which prevents overlap of the same information being conveyed.

### 3. Selection of Trainees

The most important criteria for selecting trainees should be –

- Home Managers
- Care-givers
- Counsellors
- Life-skill/Livelihood Trainers
- Legal Counsellors

### Guidelines for the Trainers

It is sometimes correctly said, “a training is as good as the trainer”. The trainer should not only be someone who can convey information, but a multi-dimensional personality, who can make the session interesting, participative, motivational and create a sense of empowerment in the trainees.

To conduct training on a difficult and complex subject of human trafficking, it is essential for the trainer to allow participants to raise questions, voice concerns, discuss challenges, and provide solutions. Value all opinions, be open to discuss all viewpoints logically and cogently, avoid being judgmental of the questions raised by participants or the views held by them, encourage mutual respect during discussions so that all views are heard, howsoever, controversial they may be.

Some guiding principles that a trainer should follow:

- **Emphasis on empowerment of the trainee:**

Throughout the training there must be an emphasis on posing questions and seeking solutions to these by trainees, by application of their creative energies and critical

thinking. This will empower to apply their knowledge to situations, not necessarily dealt with during training. It will make them more committed /convinced of desirable changes, when they arrive at it through their own reasoning and understanding.

- **Participation of trainees:**

The trainers must strive to create the necessary climate for adequate trainee participation. The methods proposed provide for this to a great extent. In every group, all members must be encouraged to participate. So a trainer must be observant and encourage silent members. In a mixed group if either sex is in the minority the trainer will have to put in special efforts to draw their active participation. The trainer must further ensure that all discussion during training is kept in confidence by the group.

- **Trainer's Preparation:**

The trainers are expected to go through the manual specially the sessions to be conducted by them and the supplementary reading material provided. They must supplement this by their own knowledge, experience and additional reading. They must strive to create an informal and comfortable atmosphere so that the trainees are at ease to interact. They must be observant and tolerant to various reactions of trainees. The key trainer will help the group establish ground rules in the beginning of the training programme. Ask the group to agree on rules to be followed at all times. Issues to be discussed may include:

- ✓ Confidentiality-people will perhaps share very personal things about themselves. How can we protect their confidentiality?
- ✓ Cell phones: will it be allowed?
- ✓ Breaks for tea/lunch- duration?
- ✓ How can we ensure that everybody gets a chance to speak?

The rules agreed upon may be noted and put up in a clearly visible place.

- **Evaluation**

Every training program should be evaluated from the trainee's point of view and its ability to serve training objectives. Necessary modifications should be made for the future. If major gaps are evidenced in evaluation, supplementary training should be given midway to provide for corrective action.

Some of the steps in planning an effective training are –

1. WHY - Know the aims and objectives of the training; and what is sought to be achieved through it. What are the learning needs of this group of participants?
2. WHO – Be well informed on who are the recipients, the beneficiaries, the participants, and why have they been selected for the training. What is the profile of the trainees, which will decide what are their requirements from this training.

3. WHAT – Be informed of the available content, and the time frame within which it is to be delivered. Avoid overlaps of content from other Modules, to prevent repetition.
4. HOW – Training methods that are most suitable for this group of participants, should be chosen, which are aligned with adult learning and training. Try and use a mix-and-match methods of training, such as, lectures, group discussions, Q&A, role play, games, energizers, case studies, practical demonstrations, etc., to break the monotony of power point presentations and lectures.

## Training Schedule

The schedule proposed for training seeks to help realise the manual objectives effectively, by fullest understanding and involvement of trainees. The potential trainers may go through the following points before studying the training schedule.

- The proposed schedule is a five-day residential training programme. Residential training is recommended in order to get a full time involvement and commitment of trainees to the programme. Residential programmes conveniently provide for late evening activities that could help in community building in the trainee group as well as provide opportunities for learning. The trainer may reschedule these according to the needs of the group.
- The programme begins with preliminaries. This session should be seen as crucial investment to build the environment for the training programme. The objectives of the session are:
  - To know the knowledge and attitude of the trainees and their expectations from the training programme
  - To break the ice in the group
  - To provide the context of training to the group.
- The training co-ordinator must ensure that the pre-training response sheet is administered in the beginning of the programme. It must be studied to know the knowledge/attitude of the group and the expectations from training. This must be shared with the core training team. At the end of the training the post training sheet must be administered. Its analysis and comparison with the findings of the pre-training response sheet will help to know the changes in knowledge and attitude of the trainees i.e. it will indicate the impact of the training programme.
- The training schedule will be easier to follow, if some standard training arrangements are made in advance for example-
  - A well ventilated room with adequate lighting arrangements.
  - The room should allow for easy shifting of furniture to permit arrangements as may be required for different exercises in training.
  - Circular seating arrangements-single or double rows depending on the size of the room/size of the group.

- Black board and chinks, or white boards and markers or chart papers and thick markers.
- Display board
- Cello tape, scissors, chart papers, felt pens, stapler, paper and other such stationary must be kept handy.
- Slide Projector, LCD and over-head projector
- Projection screen
- Colour television and video cassette player.
- Drinking water for trainees and trainer
- A question box, where trainees could put their questions, which they do not feel free enough to ask or have no time to ask.

Besides the above, the trainer must ensure that training materials like slides, video cassettes, response sheets, cards etc are available in advance.

Though the training schedule is flexible to some extent, care must be taken not to disturb the sequence or the content of the programme.

## TRAINING SCHEDULE

DAY 1		
TIME	MODULE AND ACTIVITY	TRAINER
0900 - 1000	Inauguration of the Training Programme	Training Coordinator
1000 - 1045	Introduction of Participants Ice-Breaking Exercise Brief Review of the Training Programme and Resource Material	Training Coordinator
1045 - 1100	<b>Tea Break</b>	
1100 - 1330	<b>Module 1</b> – Understanding the Context of Trafficking & Sex Trafficked Victim/Person (Total time – 5 Hours 30 Minutes)	Name of Trainer
1330 - 1430	<b>Lunch Break</b>	
1430 - 1530	<b>Module 1</b> – Understanding the Context of Trafficking & Sex Trafficked Victim/Person	Name of Trainer
1530 - 1545	<b>Tea Break</b>	
1545 - 1725	<b>Module 1</b> – Understanding the Context of Trafficking & Sex Trafficked Victim/Person	Name of Trainer
1725 - 1900	Debrief of Activities of Day 1 and Information on Day 2	Training Coordinator
DAY 2		
TIME	MODULE AND ACTIVITY	TRAINER
0900 - 0905	Recap of Day 1 and Overview of the Schedule of Day 2	Training Coordinator
0905 - 1100	<b>Module 2</b> – Needs of Victim & Protection Services	Name of Trainer

1100 - 1115	<b>Tea Break</b>	
1115 - 1300	<b>Module 2</b> –Needs of Victim & Protection Services	Name of Trainer
1300 - 1400	<b>Lunch Break</b>	
1400 - 1530	<b>Module 2</b> –Needs of Victim & Protection Services	Name of Trainer
1530 - 1545	<b>Tea Break</b>	
1545 - 1725	<b>Module 2</b> – Needs of Victim & Protection Services	Name of Trainer
1725 - 1900	Debrief of Activities of Day 2 and Information on Day 3	Training Coordinator
<b>DAY 3</b>		
<b>TIME</b>	<b>MODULE AND ACTIVITY</b>	<b>TRAINER</b>
0900 - 0905	Recap of Day 2 and Overview of the Schedule of Day 3	Training Coordinator
0905 - 1100	<b>Module 3</b> - Victim Friendly Home Management	Name of Trainer
1100 - 1115	<b>Tea Break</b>	
1115 - 1330	<b>Module 3</b> - Victim Friendly Home Management	Name of Trainer
1330 - 1430	<b>Lunch Break</b>	
1430 - 1530	<b>Module 3</b> - Victim Friendly Home Management	Name of Trainer
1530 - 1545	<b>Tea Break</b>	

1545 - 1725	<b>Module 3</b> - Victim Friendly Home Management	Name of Trainer
1725 - 1900	Debrief of Day 3 and Information on Day 4	Training Coordinator
<b>DAY 4</b>		
<b>TIME</b>	<b>MODULE AND ACTIVITY</b>	<b>TRAINER</b>
0900 - 0905	Recap of Day 3 and Overview of the Schedule of Day 4	Training Coordinator
0905 - 1100	<b>Module 4</b> – Victim Witness Assistance and Preparation for Reintegration	Name of Trainer
1100 - 1115	<b>Tea Break</b>	
1115 - 1330	<b>Module 4</b> – Victim Witness Assistance and Preparation for Reintegration	Name of Trainer
1330 - 1430	<b>Lunch Break</b>	
1430 - 1530	<b>Module 4</b> – Victim Witness Assistance and Preparation for Reintegration	Name of Trainer
1530 - 1545	<b>Tea Break</b>	
1545 - 1720	<b>Module 4</b> – Victim Witness Assistance and Preparation for Reintegration	Name of Trainer
1720 - 1900	Brief Review of Activities of Day 4 and Information on Day 5	Training Coordinator
<b>DAY 5</b>		
<b>TIME</b>	<b>MODULE AND ACTIVITY</b>	<b>TRAINER</b>
0900 - 0905	Recap of Day 4 and Overview of the Schedule of Day 5	Training Coordinator
0905 - 1100	<b>Module 5</b> – Challenges in Home Management	Name of Trainer

1100 - 1115	<b>Tea Break</b>	
1115 - 1330	<b>Module 5</b> - Challenges in Home Management	Name of Trainer
1330 - 1430	<b>Lunch Break</b>	
1430 - 1530	<b>Module 5</b> – Challenges in Home Management	Name of Trainer
1530 - 1545	<b>Tea Break</b>	
1545 - 1630	<b>Module 5</b> – Challenges in Home Management	Name of Trainer
1630 - 1730	Closing Ceremony	Training Coordinator

**MODULE**

**1**

UNDERSTANDING THE  
CONTEXT OF TRAFFICKING  
AND SEX TRAFFICKED  
PERSON/VICTIM



## MODULE 1 - UNDERSTANDING THE CONTEXT OF TRAFFICKING AND SEX TRAFFICKED PERSON/VICTIM

<b>Objectives</b>	<ul style="list-style-type: none"> <li>• To foster teamwork, mutual appreciation, cooperation and a sense of ownership among participants</li> <li>• To understand expectations and apprehensions of the participants and set up ground rules.</li> <li>• To gather conceptual understanding and clarity on the definitions and concepts of sex trafficking and organised crime</li> <li>• To identify victims of sex trafficking and deconstruct their unique and diverse characteristic traits</li> <li>• To explore and understand the various situations of exploitation for the victims of sex trafficking and understand the impact of the same on the victims</li> <li>• To identify the trafficker/offender of sex trafficking and draw a profiling of the trafficker/Offender</li> </ul>
<b>Content</b>	<p>Session 1: Introduction and Context Setting</p> <p>Session 2: Who is a Sex Trafficked Victim?</p> <p>Session 3: Trafficking as an Organised Crime</p> <p>Session 4: Organised Crime and its Impact on the Victim</p> <p>Session 5: Profile of a Trafficker</p>
<b>Expected Outcome</b>	<p><b>The participants would:</b></p> <ul style="list-style-type: none"> <li>• Ease into the workshop mode and get to know each other better</li> <li>• Be able to articulate and express their expectations from the workshop, and understand the key objectives of the workshop connecting the same with their expectations</li> <li>• Gather Conceptual understanding of trafficking as an organised crime</li> <li>• Be able to identify the sex-trafficked victim and the trafficker, and draw their profiling</li> </ul> <p><b>The Trainer would:</b></p> <ul style="list-style-type: none"> <li>• Be able to gather an understanding of the level of understanding among participants on the issues covered in the module through the pre-training assessment forms.</li> </ul>

## **Session 1: Introduction and Context Setting**

**Estimated time** : 30 mins

**Material required** : Chart Papers/Flip Chart/White Board, Markers/Sketch pens. Post-its, Copies of the Training Agenda and Copies of the Pre-Training Assessment Form

**Methodology** : Ice-breaking exercise, active audience participation, brain storming, presentation and discussion

### **Activity 1.1: Introduction and Icebreaker**

- Ask the participants to stand in a circle
- Instruct the first participant to introduce him/herself to the rest of the group and share the following information:
  - Name
  - What would they like to be called during the 5 days training
  - Favourite food
- Continue until the last participant has introduced all the participants
- Make sure that co-facilitators are also part of the circle.

#### **Facilitator's Note:**

Any ice-breaking exercise can be used in this activity. Care should be taken to ensure that the participants become familiar with each other and are comfortable.

### **Activity 1.2: Setting Training Expectation and Ground Rules**

- Ask the participants to share one expectation that they have from the training
- Write down each of the shared expectations on a chart paper/flip chart/white board for display
- After all the participants have contributed, group the common expectations if required
- Keep the list of expectations on display for future reference
- Now ask the participants to say a few key ground rules that will enable a smooth execution of the training. (The trainer can add to this list if some key and basic ground rules have been missed out)

- Get a buy-in from the participants on the list of ground rules set for the training and ask them to take ownership in helping to enforce these during the sessions.
- Write down each of the shared ground rules on a chart paper and display it in a place that will be visible to all during the entire course of the training

#### **Facilitator's Note:**

- ✓ Refer to **Module 01 Resource Guide for Activity 1.1** for the list of Ground Rules that could be used by the facilitator to spell out those that are of importance/ have been missed out by the participants.

### **Activity 1.3: Introducing the Training Agenda**

- Ask the participants to refer to the Training Agenda that has already been shared with them
- Introduce the overall objectives of the training and explain the methodology that will be used during the course of training
- Link the Training Objectives with the Expectations that have been shared by the participants

#### **Facilitator's Note:**

- ✓ Make sure that you have a copy of the Training Agenda in the Training Kit that is shared with the participants
- ✓ Each objective should be clearly communicated to the participants.
- ✓ Establish a co-relation and link between the objectives and expectations of the participants
- ✓ If as a facilitator you feel that some of the issues/expectations are beyond the scope of the training program, you should inform them at the very outset that you will not be able to cover/address them.
- ✓ If one or two participants are interested in knowing more about some specific issues on topics that are under the purview of the training program but can't be addressed due to time constraints, you can suggest to them to ask these questions at tea or lunch time, so that the pace of the training doesn't get hampered.

### **Activity 1.4: Pre-Assessment of Participants**

- Distribute the pre-training assessment form to each participant.
- Instruct them to fill up the same independently without consulting any other

participant

### Facilitator's Note:

- ✓ A Pre-training Assessment template is attached in **Module 01 Resource Guide for Activity 1.4**. You could refer to the same to develop the Training Assessment questionnaire for your participants OR use it as it is.
- ✓ The Assessment form should be prepared or translated in the local state language
- ✓ The Assessment form must be photocopied and distributed to each participant
- ✓ The facilitator needs to ensure that each participant fills up the entire form before submission.
- ✓ The pre-training Assessment form would serve as the baseline for the impact Assessment for the Training that would be conducted

### Session 2: Who is a Sex Trafficked Victim

**Estimated time :** 120 mins

**Material required :** Projector, Screen, Laptop/DVD Player, Copy of the film 'Anamika, Chart Papers, Markers/Sketch pens

**Methodology :** Film screening, active audience participation, brain storming, group work, Role Play, presentation and discussion

## 2.1: Conceptual Understanding of Sex Trafficking

### Activity 2.1.1: Screening of the Film Anamika:

- Briefly introduce the film "**Anamika**" to the participants (*Refer to Module 01 Resource Guide for Activity 2.1.1* ), followed by the film screening

### Activity 2.1.2: Group Discussion on the Definition of Sex Trafficking

- After the film has been screened, divide the participants in groups, based on the number of trainees (group not to exceed more than 8 trainees), and request them to reflect on the following questions:
  - What did you feel after seeing the film?
  - Can you imagine somebody near and dear to you in that situation?
  - What was the impact of the exploitation on the victim shown in the film?
  - Who all had wronged/exploited her?
  - What is the modus-operandi that is shown in the film? (explain the chain

of events that the victim had to go through, highlighting the various characters that came in interface with the victim or got involved with the victim. Make note of the kind of interaction/transaction each character has with the victim)

- Have you heard of sex trafficking? According to you what is sex trafficking?
- Ask the group to write down the discussion points under each question, mentioned above, in a chart paper, with the purpose of presenting it to the larger audience.
- Ask each group to nominate one rapporteur for their respective group to make the presentation.
- Make sure that you keep a tab on the time for this group activity.

### **Activity 2.1.3: Group Presentation**

- After the stipulated time given for the above group activity, request the nominated rapporteur from each group to present the group's reflections/key findings to the larger audience
- Encourage the audience to actively listen to each group's presentation
- After all the groups have made their presentations, encourage the participants to articulate any other key points that they may like to add.
- Deconstruct the discussion and help the audience categorize the key discussion points under the purview of identifying:
  - What is sex trafficking,
  - Who is the victims,
  - Who is the perpetrator,
  - What is the impact of sex trafficking on the victim

### **Activity 2.1.4: Presentation by the Trainer on the Definition of Sex Trafficking:**

- Summarise the above discussion by using a PowerPoint presentation (or any other preferred method) in defining Sex Trafficking (*refer to Module 01 Resource Guide for Activity 2.1.4*)

## **2.2 Understanding the Victim**

### **Activity 2.2.1: Group Discussion based on Case Studies on Understanding the Victim**

- Divide the participants in groups based on the number of trainees (group not to

exceed more than 8 trainees)

- Distribute a Case Study to each group and give them 5 mins to read the same. (*Case Studies are provide in Module 01 Resource Guide for Activity 2.2.1*)
- Request each group to nominate one rapporteur for their respective group
- Ask the participants to reflect on the following questions by analysing the given case studies and by drawing observation from the film Anamika:
  - Describe the victim's family situation? Identify the family crisis.
  - Did the situation at home/in the family contribute to the victim feeling vulnerable? Identify the feelings and emotions that the victim may have gone through.
  - Did the victim feel vulnerable? What were the Vulnerabilities that the victim faced or experienced (emotionally and psychologically)?
  - What was the victim's social status and did that contribute to the victim's social vulnerability? How?
  - How these situations create an impact on the victim? How did the victim react to these situations?
- Encourage the participants to read the case studies minutely and carefully. Ask them to recollect what they saw in film screening.
- Ask them to make nuanced observation in identifying, step by step, the chain of events, the situation at home, the action of the family members/neighbours and the impact on the victim.
- Encourage the participants to delve into the case study from the victim's point of view and what compelled her to react in a particular way.
- Suggest the participants to map out the family situation in terms of their economic conditions, social status and the institutional stereo-typical gender construct. Impress upon the participants that they must consider all these factors in assessing how the case study situations may have resulted in the victim's vulnerability, especially in terms of her emotional and psychological wellbeing.
- Help prepare the participants to present their findings/assessment through a role play.

**Facilitator's Note:**

- ✓ There are five Case Studies provided in Module 01 Resource Guide for Activity 2.2.1. Divide the participants in at least 4-5 groups so that you are able to touch upon diverse contexts and situations elucidated in the Case Studies.

### Activity 2.2.2: Role Play Presentation and Discussion on Understanding the Victim

- Request each group to present their role play to the larger team.
- Encourage the audience to actively watch each group's presentation and make keen observations.
- Provide 5-10 minutes for large group discussion after each team's presentation and facilitate the discussion in such a way that the participants are encouraged and compelled to draw an analysis from the victim's point of view, highlighting her vulnerability in terms of its causes and effects.

### Activity 2.2.3: Presentation by the Trainer on Victim's Vulnerability

- Use a power point presentation to define a Victim and help the group relate their assessment and empathy from the earlier group with what a Victim actually experiences/feels. (*Refer to Module 01 Resource Guide for Activity 2.2.3 to create the power-point presentation*)
- Open the floor to any query or clarification from the participants before summarising the discussion on this topic of victim and vulnerability

#### Facilitator's Note:

- ✓ Refer to Resource Guide for Activity 2.2.3 for the Definition of Vulnerability and the profile of the Victim

### Session 3: Trafficking as an organized crime

**Estimated time** : 60 mins

**Material required** : Projector, Screen, Laptop

**Methodology** : Case Studies, group work, active audience participation, brain storming, presentation and discussion

### Activity 3.1: Group Work based on Case Studies

- Request the participants to continue to work in the same groups (as formed in the previous session).
- Ask each group to nominate a new one rapporteur for their respective group.
- Hand over a different, yet common, case study to each group (*find the Case Study in Module 01 Resource Guide for activity 3.1*)

- Ask the participants to read the case studies carefully and reflect on the concept and definition of sex trafficking that was earlier defined in Session 2.1.
- Ask the participants to identify each person who are involved in trafficking the victim.
- Encourage the participants to reflect on whether trafficking is a one time event/ phenomenon of crime/abuse on a victim inflicted by an individual or it involves a chain of events involving many abusers who manipulate the vulnerability of the victim and exploit her.
- Help the participants identify each abuser as a part of a larger network at every stage of trafficking.
- Help the participants visualise the network of trafficking and encourage them to represent the phenomenon of trafficking pictorially, representing the abuser at every state, so that the participants are able to visualise the synchronised network of traffickers and gather clarity on how trafficking works as an organised crime.
- You could also encourage the participants to use creative ways to present their understanding preferable a pictorial/flow chart representation.

### Activity 3.2: Group Presentation and Discussion

- In continuum with the previous group work, ask each group to present their discussion points through the pictorial representation.
- Request the participants to offer their active hearing.
- Seek clarification or query from the larger audience on what has been discussed so far in this session

### Activity 3.3: Presentation by the Trainer on Trafficking as an Organised Crime

Use a PowerPoint presentation to summarise the discussion by highlighting the global and national trends on human trafficking, its extent and modus operandi that makes it an organised crime. *(refer to Module 01 Resource Guide for Activity 3.3)*

#### **Session 4 : Organised crime and its impact on the Victim**

**Estimated time :** 120 mins

**Material required :** Projector, Screen, Laptop

**Methodology :** Role-play, active audience participation, brain storming, presentation and discussion

## Activity 4.1: Understanding the Impact of Organised Crime on the Victim through Role Play

- Divide the participants in two groups, each provided with two different situations, as follows:
  - Group A: Rural deprived family
  - Group B: Urban middle class family
- Provide the following instructions to the groups:
  - Each group must further divide themselves in two sub-groups.
  - **Sub Group A** will represent The victim and her family and **Sub Group B** will represent the people who are conspiring to traffic the victim
  - Encourage the participants to revisit each stage of trafficking and try to portray the impact on the victim at each stage of trafficking - Pre-recruitment, recruitment, transit and destination
  - Inform the groups that they need to identify people who are involved in each stage of trafficking– at source, in transit and at destination
- Reiterate that the participants must assess the situation from the victim’s point of view, empathise with her/his feelings of the victim.
- After having assessed the given situations, the participants are then required to depict the same through a Role Play.
- After each group makes their presentation, conduct a debriefing with the audience highlighting the key takeaways and observations, thereby, validating the fact that Trafficking is a form of organised crime.

### Facilitator’s Note

- ✓ Refer to Resource Guide for Activity 4.1 for points that the participants can be asked to reflect on during the Role Play Exercise

## Activity 4.2: Plenary Discussion

- To probe further into the characteristics of Trafficking as an organised crime and to delve further into the impact of the crime on the victims, encourage the participants to reflect on the following points:
  - What emotions/feelings did the victim go through at every stage of her

being trafficked– pre-recruitment, recruitment, transit and destination (refer questions in the worksheet)

- What are the ways in which the perpetrators/traffickers/organised criminals keep the victim under their control
  - If the victim continues to go through this ordeal for a long period of time, eg. six months, what could be the extent of impact on the victim. What could be the impact if the victim is forced to be in this situation for years.
- Note down the points in a chart paper that are shared by the audience in response to the above questions. Display the same on the wall for easy reference.

### **Activity 4.3: Presentation by the Trainer on the impact of Organised Crime on the Victim**

- Use a PowerPoint presentation to summarise the above discussion on Trafficking as an organised crime and its impact on victim (*refer to Module 01 Resource Guide for Activity 4.3*)

## **Session 5: Profile of a Trafficker**

**Estimated time :** 90 mins

**Material required :** Projector, Screen, Laptop

**Methodology :** Role Play, Group Discussion, Presentation

### **Activity 5.1: Role play-profile of a trafficker**

- Divide the group into smaller groups with no more than 5-8 member depending on the participant size.
- Give each group one of the following scenario
  - Village
  - High School
  - College
  - Slum
  - Disaster (flood/earthquake etc)
  - Railway station/Bus Station
- Ask each group to discuss the specific vulnerable situation of the scenario provided
- Ask them to prepare a role play on how a trafficker will take advantage of the vulnerable situation, whom will he/she target and what could be the modus

operandi for the same.

- Give the groups 30 mins time to prepare the role play, each play should not exceed 5-6 mins

### **Activity 5.2: Role play presentation and plenary**

- Ask each group to present their role plays.
- After the role plays are presented, open the floor for a plenary discussion on the following lines:
  - Who are the traffickers? Do they have a age or gender profile?
  - How do traffickers spot potential victims?
  - What are the indicators of a trafficker?

### **Activity 5.3: Presentation by Trainer on Profile of a Trafficker**

- Mention to the participants that while it is important to identify the trafficked victim and be aware of the indicators that may potentially lead to identifying the victim, it is equally important to be alert of the indicators leading to the trafficker.
- Reinststate that Trafficking is an organised crime, and identification and conviction of the criminals (who are traffickers) are the ways to dismantle the synchronised network, fight the crime and provide protection and justice to the victim.
- Use a PowerPoint presentation to draw a profiling of the Trafficker (refer to *Module 01 Resource Guide for Activity 5.3* )



# **WORKSHEETS**

## Activity 1.2 -Some Important Ground Rules

- **Punctuality:** Arrive on time to each workshop session. Arriving late is a sign of disrespect to the trainer and to your fellow participants.
- **No Disturbances:** Cell phones should be turned off at the beginning of the training and should remain off until the end except during breaks.
- **Avoid side conversations** – if you are unclear about the topic being discussed or the instructions, please ask the facilitator to clarify.
- **Respect Others:** Respect each other, yourselves, and the trainer. Do not speak when someone else is speaking.
- **Listen actively:** The trainer will be facilitating the discussions with your assistance.
- **Confidentiality:** Confidential issues will remain in the room. During the training, if any trainee shares any information that is confidential in nature, the information should remain within the trainees and not to be discussed with any other person without the consent of the particular trainee and the trainer.
- **Participation:** You are your own best resource. Much of the content of the training will be coming from you. Each one of you brings a wealth of experience to the program. The training can only be successful if it is a two-way process and if everyone participates fully. Give everyone a chance to contribute and encourage others to do so.
- **Agree to Disagree:** During this training everyone must feel free to express opinions and concerns. Everyone should contribute to a safe/non-judgemental environment.
- **Ask Questions:** Please do not think any question you have is unimportant. If you do have a question you don't want to ask in front of others, ask it privately during a break.
- **Learning:** Take complete ownership of sharing your own learning with the group and learning from other group members.

## Activity 1.4: Pre-Training/Post Training Assessment Form

### PRE-TRAINING/POST- TRAINING ASSESSMENT FORM

DATE OF TRAINING:

LOCATION OF TRAINING:

NAME:

SEX:

AGE:

OCCUPATION:

DESIGNATION:

TOTAL YEARS OF EXPERIENCE ON THE JOB:

No.	ISSUES	Pre-Training		Post-Training	
		Yes	No	Yes	No
1	Trafficking involve victims from only rural areas				
2	Trafficking take place only for commercial sexual exploitation?				
3	Young girls and women themselves are responsible for them being trafficked?				
4	Trafficking is a crime that involves many people who exploit the victim				
5	Suggest whether you agree or not: 1.1 Human trafficking is a human rights violation. 1.2 Only young girls can be trafficked for sex trafficking and not boys or women 1.3 Sex trafficking only takes place in red-light areas 1.4 The traffickers/recruiters are never known to the victim. They are usually strangers.				
6	Psycho-social intervention with the victim is equally important as medical intervention				
7	The purpose of the shelter home is to confine the victims				
8	There should be a common Rehabilitation Plan for all rescued victim in the Shelter Home				

No.	ISSUES	Pre-Training		Post-Training	
		Yes	No	Yes	No
9	The service providers usually know what it best for the victim (police, care provider, social workers, etc.). Hence the victim's point of view need not be considered.				
10	Rescued victims need not participate in the Judicial Processes in Convicting the Perpetrator/Trafficker because of the risks involved				
11	A rescued victim from Trafficking must immediately sent back to her home by the police				
12	Trafficking must be seen from the perspective of a crime and its prevention, and not from the perspective of the victim and her/his protection				

### **POST TRAINING EVALUATION**

**(This should be used on the last day after all the sessions are completed )**

12. Did the training workshop meet your expectations?

Yes

No

13. On a scale of 1 to 5 (1 being the lowest and 5 being the highest, please state your experience of the training workshop

1

2

3

4

5

14. On a scale of 1 to 5 (1 being the lowest and 5 being the highest), how do you rank your knowledge on the issue of sex trafficking?

1

2

3

4

5

15. Please state which part/session of the training you liked the most and why

16. Please state which part/session of the training you disliked the most and why.

17. What are your recommendations for future training workshops?

18. Do you think that the resources and training materials made available during the course of the training workshop is adequate? If not, what more do you think should be added?

19. How likely are you to use the knowledge and skills learned in this training in your field of work?

Highly Likely       Somewhat Likely       Not Likely       Not sure yet

20. Comments (If Any) regarding the Training Workshop Logistics:

21. What are the roles and responsibilities of a Protection Home staff? (answer as per your own role)

21. Mention three things that you would undertake to address the issue of Sex Trafficking

1.

2.

3.

**Thank you for completing this form!**

### **Activity 2.1.1: Introduction to the film Anamika - The Nameless, Director-Rajesh Touchriver**

Anamika - The Nameless is a documentary depicting the dehumanized situation of sex trafficking in India. This film through the testimonies of victims from Andhra Pradesh and Telangana who were trafficked to various parts of the country throws light on the dark and murky world of sex trafficking. These stories are no different to the plight of victims from across the country who face similar situations. It describes the situation of victims in brothels, dance bars, massage parlors and other places that are used for commercial sexual exploitation. At one end the documentary highlights the vulnerability of victims and their painful journey on the other end it raises questions regarding 'demand' that fuels sex trafficking and the need for collection action.

The documentary made by Rajesh Touchriver and produced by Prajwala was shot in various places of sexual exploitation with great risk to life. The documentary has won several International Awards and is commonly used in Police Academies and Judicial Academies as a part of training curriculum. The film has been screened over 11,000 times(till 2019) and has sensitized over 3 million people during community campaigns.

## Activity 2.1.4: Defining Trafficking And Sex Trafficking

### UNITED NATION DEFINITION

- Trafficking in persons shall mean the recruitment, transportation, transfer, harbouring or receipt of persons by means of 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.

### UN DEFINITION

- Exploitation shall include at a minimum, the prostitution of others, or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or removal of organs.
- Consent to the exploitation is irrelevant where any of the means set forth have been used.
- Recruitment, transportation, transfer, harbouring or receipt of a child (under 18) for the purpose of exploitation are considered “trafficking” even if it does not involve any of the means set forth

## UN DEFINITION SIMPLIFIED

ACT	MEANS	PURPOSE
<ul style="list-style-type: none"> <li>• RECRUITMENT</li> <li>• TRANSPORTATION</li> <li>• TRANSFER</li> <li>• HARBOURING</li> <li>• RECEIPT</li> </ul>	<ul style="list-style-type: none"> <li>• THREAT</li> <li>• FORCE</li> <li>• COERCION</li> <li>• FRAUD</li> <li>• DECEPTION</li> <li>• ABUSE OF POWER</li> <li>• POSITION OF VULNERABILITY</li> </ul>	<ul style="list-style-type: none"> <li>• PROSTITUTION</li> <li>• AND OTHER FORMS OF SEXUAL EXPLOITATION</li> <li>• FORCED LABOUR</li> <li>• SERVICES</li> <li>• SLAVERY</li> <li>• SERVITUDE</li> <li>• REMOVAL OF ORGANS</li> </ul>

## CHILD TRAFFICKING

- SEX WITH A CHILD (ANYONE BELOW 18YRS) IS RAPE
- PROTECTION OF CHILDREN FROM SEXUAL OFFENCES, 2012 (POCSO) MAKES ALL SEXUAL OFFENCES AGAINST CHILDREN PUNISHABLE INCLUDING
  - PENETRATIVE SEXUAL ASSAULT
  - SEXUAL ASSAULT
  - SEXUAL HARASSMENT
  - PORNOGRAPHY
- THERE IS NO QUESTION OF CONSENT WHEN IT COMES TO CHILDREN

In India, sections of Immoral Traffic Prevention Act (ITPA 1956) explain the various activities involved in trafficking.

As per Sec 5 ITPA, trafficking for sexual exploitation is:

- Procuring a person for prostitution or
- Inducing a person to go from any place to become an inmate of a brothel for prostitution, or
- Inducing a person to go from any place to frequent a brothel, or
- Taking a person from one place to another for prostitution, or
- Causing a person to be taken for prostitution , or
- Causing or inducing a person to carry on prostitution, or
- Attempting to produce or induce or take a person for prostitution

**The Criminal Law (Amendment) Act 2013** defines Trafficking of Persons for Exploitation under new sections, 370 and 370A . If a person(a) recruits,(b) transports, (c) harbours,(d) transfers, or (e) receives a persons, by using **threats**, or force, or **coercion**, or **abduction**, or **fraud**, or **deception**, or by abuse of power, or **inducement** for exploitation including prostitution, slavery, forced organ removal, etc. will be punished with imprisonment ranging from at least 7 years to imprisonment for the remainder of that person's natural life depending on the number or category of persons trafficked. Employment of a trafficked person will attract penal provision as well.

## Activity 2.2.1: Case Studies for Understanding the 'Victim'

### Case Study 1

Radhika aged 16 years, used to live with her parents and two sisters in a place called Tandur. Her mother was an ayah while her father owned a coconut shop. They had a small farm land and lived in their own house. Radhika and her sisters used to study in an English medium school. Though they had a decent life, but the family situation was not very conducive for these three sisters.

The mother had an extra-marital relationship with another man which resulted in frequent fights at home. One day her mother got gravely injured in a stove blast. Father had to sell off their property for mother's treatment and in due course of time he became an alcoholic. One by one the family lost everything. Radhika's mother had to borrow money from her cousin to pay for her medicines.

The family became debt trapped and all the three girls could not continue to go to school. So they dropped out. Radhika was forced to work as daily wagger, working to help out in weddings and party events, to take care of the family. To provide for the ailing mother and bearing with the father's alcoholism, Radhika was compelled to take on the responsibility of running the family and taking care of her sisters.

### Case Study 2

Lata belonged to a conservative upper middle class family. She was an athlete and excelled in sports in college. The family affluence gave her all the materialistic luxuries that she could ask for, but she was kept under strict rules and discipline. She was not allowed to make any friends or socialize with neighbours. To meet the standards of affluent social status, her parents gave her a smartphone which kept her occupied and extend her social engagement. One day she received a call from an unidentified number. She picked up the call to realise that it was a wrong number from a man, who sounded young and attractive. Lata continued the conversation and slowly this man started calling her periodically.

Since Lata was deprived of any social intermingling, she had no friends as such. She could never communicate the same with her family, So she indulged in talking with this man on the phone. Slowly the content of the phone conversation became personal and Lata spent most of her time in the night sharing intimate details.

When Lata's parents started talking about her getting her married off, she felt pressurized, and in panic she shared the information with her 'phone friend'. He immediately shared that he loved her and asked her to run away from home, promising that he will take care of her forever. Lata ran away from home stealing Rs 25,000/ and all her mother's jewelleryes.

### Case Study 3

Padma belonged to a lower middle-class family where both her parents worked as fisher folk. She did not have a good relationship with her father, as her father tried to kill her when she was born. She used to live in a city hostel to pursue her school education and chose to spend her holidays with her grandmother. Padma also had two brothers. When Padma was studying in grade 9, her mother asked her to discontinue her schooling and return to the village so that she can help her take care of her brothers. Her parents used to go to the sea for fishing and would return only after three days. Padma was left with no choice and returned to her parents' to help out her mother. Padma not only took care of her brothers and managed home, she also worked as a daily wage labour to contribute to the family income. Her father would often beat her up severely if she came home late from her work.

Once Padma got eczema and her mother did not take her to the doctor. Rather, she was kept in isolation, away from the other family members. Padma was given to eat in a separate plate and her belongings were kept separately. She was treated as an 'untouchable'. Upset with how her family treated her, Padma went away to her uncle's place . The younger brother saw her one-day and immediately reported to the father that he saw Padma cosily roaming around with the cousin brother. He insinuated that it could be the reason why Padma chose to go to that uncle's place.

Padma's father, infuriated, got Padma back home and beat her up severely. The father turned down any marriage proposal for Padma, kept her home, made her work even harder and continued torturing her. In desperation to escape the ongoing torture at home, one day, Padma stole some money from her mother and boarded a train to Secunderabad.

### Case study 4

Vasundhara belonged to a middle-class family and lived in Secunderabad. Her mother was into food catering services. She used to cook in other people's houses and also travelled to other places to prepare and cater food in events. Vasundhara would often

accompany her mother to these events as a help. Vasundhara's mother also worked as a model in photo studios to earn some additional money for the family. The mother has two husbands – one was a sales manager and the other worked as a carpenter. Vasundhara did not keep too well so her father took her to another place for her treatment.

When she was in Grade 9, a young man started following her to school. But she never paid much attention to it and completed her 9<sup>th</sup> grade exam with flying colours. She told her mother about this young man and her mother promptly shifted her to a relative's place. But this young man continued to follow her and try to make conversation with her. He persistently wooed Vasundhara saying that he loves her, wants to marry her and that they can build a beautiful life together.

Vasundhara's mother, sensing trouble, took her to another relative's house. Here Vasundhara's cousin expressed that he wanted to marry her. While Vasundhara refused blatantly on the cousin's face, she had to really fight her mother who was in support of this marriage. In utter desperation, Vasundhara left her relative's house alone and went to her other house. But she did not have the keys. She was spotted and approached by a young man (the man who was stalking her) who offered to help her. He gave her a new set of clothes and asked her to accompany her to a neighbour's house. Vasundhara thought that her mother must have arranged for all this and happily accompanied the young man to the neighbour's house. She remembers being hungry and being fed with curd rice. Vasundhara does not remember what happened next, but when she regained her consciousness, she was bleeding profusely.

### Case Study 5

Nazia was 12 when she left her sister's home in Jessore, Bangladesh with a neighbour who took her to Kolkata, India. She lost her father when she was very young and her mother went away with someone else.

Nazia earlier lived with her aunt where she was very happy. They had enough to eat and she enjoyed her days with her cousin brother, aunt and uncle. But, the neighbours used to tell her nasty things that she was not the daughter of this family and was an unnecessary burden on them. She felt bad about this and started to miss her sister. One day she left her aunt's home and went to live with her sister. She was happy there as well. But one day her sister and her brother-in-law were fighting over something, and Nazia happened to have interfered. Her brother-in-law beat her up for having come in between the fight. Nazia confronted her sister on this and in anger left home with a neighbour.

## Suggested questions for group work:

### Social Vulnerability

- Did they have any support system in the family
- How were they treated by their parents/neighbours/relatives
- Did they have any information on any support services to cope with the family situation
- Did the family belong to any particularly marginalised caste/special communities that practice prostitution

### Economic vulnerability

- What is the family's economic situation
- Did they have enough money to survive
- Did they have debt and how did they try to repay the debt
- Did the family economic situation lead to distress migration.
- What was the level of unemployment in the community

### Physical vulnerability

- What changes happened to their own lives and how did it affected the family
- Were they living in secured and functional families situations
- Is the place, where the family is located, prone to or affected by any disaster (natural/man made)

### Psychological Vulnerability

- Did the victim feel any emotional or materialistic deficit or depravation.
- In what ways was the victim affected by the effects of consumerism and the lures of the materialistic world.
- Is there any correlation between victim's needs and her self-worth/self-esteem.

### Activity 2.2.3: DEFINING VULNERABILITY

#### WHAT DOES VULNERABILITY MEAN ?

- Vulnerability is a social, economic, physical and emotional state that makes a person weak. It is caused by cultural, political, social or emotional situations that could be exploited by other people for their own benefit/profit.
- Vulnerability is of four types: Social, Economic, Physical and Psychological.

##### **Social Vulnerability**

- Lack of social acceptance by the neighbours / Community
- Weak family structures
- Disturbed family environment
- Conservative family / no social interaction

##### **Economic Vulnerability**

- Poor economic background
- Status of employment/income generation possibilities
- Financial situations
- Family debt

##### **Psychological vulnerability**

- Lack of family care
- Lack of attention by parents
- Feeling lonely
- No friends to speak to
- High dependency on virtual/online friends
- Low self-esteem/self confidence

##### **Physical Vulnerability**

- Homeless/no safe home
- Natural disaster – drought, earthquake, flood.
- Living in politically disturbed areas
- Lack of access to basic amenities – water, health facilities, road etc.

#### WHO IS A VICTIM ?

Here are some legal definitions:

- Children who have not completed the age of 18 years and are engaged in hazardous processes or occupations and/ or for less than minimum wages, which are mandatory under. The Minimum Wages Act, 1948.
- Any child likely to be trafficked is a “child in need of care and protection” under S. 2 (d) of JJ Act and therefore, is a victim who should be rescued.

- Anybody who has been recruited, harboured, transported, detained, obtained or procured for Sexual exploitation forced labour is a Victim (under the UN Protocol for Trafficking in Persons).
- A person whose fundamental rights are being violated. (Constitution of India)

NOTE: The above list is illustrative and not exhaustive. There may be other similar situations in which (as mentioned under the above-mentioned vulnerability contexts) a person becomes a victim of her/his circumstance.

## Legal Definition of Victim (Cont.)

It must also be noted that the definition of a Victim here has been derived in connection to a person who is a "Victim" of a Crime (human trafficking, commercial sexual exploitation and any other forms of violence or abuse or exploitation) / whose human rights have been violated. However, it must be noted that the Indian Legislation has not defined a "Victim".

### Section 370A of Indian Penal Code.

1. Whoever, despite knowing, or having reason to believe that a child has been trafficked, employs such child in any form of labour, shall be punished with rigorous imprisonment for a term which shall not be less than five years but which may extend to seven years, and with fine.
2. Whoever, despite knowing or having reason to believe that an adult has been trafficked, employs such adult for labour, shall be punished with rigorous imprisonment for a term which shall not be less than three years but which may extend to five years, and shall also be liable to fine.

**Additionally Section 370 A** further adds strength to trafficking related law by criminalizing employment of a trafficked (major/minor) person. A person who has even reason to believe or apprehension that the minor/major person employed by them has been trafficked will make them criminally liable. This places a huge responsibility on the employers who were till now, let off easily under the not so strict provisions of the child labour laws and juvenile related laws.

## Indicators to identify a Victim:

Victims are hard to identify because it requires nuanced understanding of their relationship with institutional power dynamics and how she is able to negotiate the power abuse within the existing socio-economic-cultural and political contexts. Most victims are invisible and cannot be reached out to. The areas of exploitation are very diverse and the demand for trafficked persons affects women and children from all possible kinds of backgrounds. Therefore, in presence of generic indicators, it is necessary to look beneath the surface carefully and try to discover if enough signs are present to suspect that the person is a victim. As generic clues the following may be helpful. They are to be taken as starting points, potentially relevant in certain circumstances and in combination with other more specific indicators (see in the following slides)

## Generic Indicators:

### Injuries and abuse:

- Be subjected to violence or threats of violence against themselves or against their family members and loved ones
- Suffer injuries that appear to be the result of an assault
- Suffer injuries or impairments typical of certain jobs or control measures
- Suffer injuries that appear to be the result of the application of control measures

### Immigration Status and Documents:

- Be afraid of revealing their immigration status
- Have false identity or travel documents
- Not know their home or work address
- Not be in possession of their passports or other travel or identity documents, as those documents are being held by someone else

### Working conditions:

- Believe that they must work against their will
- Be forced to work under certain conditions
- Be disciplined through punishment
- Be unable to negotiate working conditions
- Receive little or no payment
- Have no access to their earnings
- Work excessively long hours over long periods

### Living Condition:

- Be found in or connected to a type of location likely to be used for exploiting people
- Live in poor or substandard accommodations
- Have no access to medical care
- Have limited or no social interaction
- Have limited contact with their families or with people outside of their immediate environment

- Not have any days off
- Be unable to leave their work environment
- Show signs that their movements are being controlled
- Be threatened with being handed over to the authorities

**Behavioural traits:**

- Show fear or anxiety
- Be distrustful of the authorities
- Allow others to speak for them when addressed directly
- Act as if they were instructed by someone else
- Provide multiple narratives of the chain of events that have taken place in the course of the victim being trafficked
- Be unable to communicate freely with others
- Be under the perception that they are bonded by debt

**Background:**

- Be unfamiliar with the local language
- Be in a situation of dependence
- Come from a place known to be a source of human trafficking
- Have had the fees for their transport to the country of destination paid for by facilitators, whom they must pay back by working or providing services in the destination
- Have acted on the basis of false promises

## Activity 3.1: Analysis of Trafficking as an Organised Crime through Case Study

### Case Study

Radhika's family was on huge debt. Her mother kept unwell and had borrowed money from her nephew for her treatment. During one summer holiday, Radhika and her mother went to visit the nephew. The nephew wanted his money back and suggested Radhika's mother could easily give the money back if Radhika was put into prostitution. He explained that she will earn enough money to repay the loan and also lead a decent life. Radhika's mother was rather uncomfortable with this suggestion, thus left the house.

After two days, Radhika's mother left for Tandur, leaving Radhika with an aunt and asking her to abide by what the aunt says. Though this aunty was married and had a decent life, she engaged in affairs with many men. These men would come to her house when the husband was away at work. Radhika was privy to all this but didn't have any other option, but to stay on at the aunt's place. Radhika's aunt would also encourage men to see and interact with Radhika. She introduced Radhika as 'Chinna ammai' or little girl', dress her in scanty clothes and made her serve water/tea to these men. Though many men came to see her, none had agreed to sleep with her stating that she was very young. Meanwhile, the aunt didn't stop grooming her to attract the men. She would show her pornographic materials and obscene pictures. Soon, Radhika was sexually abused by aunt's husband. This was followed by an event when, one fine day, an unknown man came to see Radhika and took her away to a hotel and kept her there for a week.

### Suggested questions for group work:

- How did the girl in the case study get trafficked – what was the modus operandi
- Who had trafficked her?
- Who were the first contact for her?
- How was the consent of the mother manipulated?
- Can you list out all people who have played a role in trafficking the girl?
- Can you find out how this network was formed from their hometown to the place of exploitation?

### Activity 3.3: Trafficking – An Organised Crime

#### GLOBAL SITUATION

- 132 Countries are affected by human trafficking
- 24.9 million Victims worldwide
- Out of this 79% victims are trafficking for sexual exploitation.
- The victims of sexual exploitation are predominantly women and girls.
- It is a USD 99 billion business worldwide.

(Source: A Global Report on Trafficking in Persons, UNODC)

#### HUMAN TRAFFICKING

- IT IS AN ORGANIZED CRIME
- THIRD LARGEST AFTER DRUGS AND ARMS
- NETWORKS OF TRAFFICKERS IDENTIFY VULNERABLE PERSONS AND TRAP THEM BY FRAUDULENT MEANS
- LOW INVESTMENT, HIGH PROFIT INDUSTRY
- FASTEST GROWING CRIMINAL ENTERPRISE

## INDIAN SITUATION

- 18 million women and children are in slavery in India (Global Slavery Index)
- Government of India estimates 2-3 million in sex slavery
- 90% of trafficking in India is internal (within the country)
- 45% of children
- Estimated every 10 minutes a person is sex trafficked
- India is a source, transit & destination

## Activity for 4.1: Suggested Points for Reflection and Brain Storming during Role Play Exercise

- Identify the psychological journey of the victim
- What happened to the victim during the recruitment phase? What was her psychological state: her thoughts, dreams, hope, etc?
- In what ways did the victim's feelings get affected during the transit phase: What happened during transit: did people change, did she experience violence, did she feel insecure, isolated, helpless, etc.
- What happened at the Destination point: reflect on the film and the details provided on the case study to identify how the victim slowly starts to normalise the exploitation that she goes through
  - What is her psychological and physical state when she reaches the destination?
  - What chain of events take place at destination involving the victim?
  - How is she impacted? Why does she decide to accept this exploitation (destination)
  - What does she hope by accepting this new reality?
  - What does actually happen when she accepts this new reality (having a boyfriend- Pimp, married to a pimp, control over her life...)
  - How does this change in her, impact her behaviour (friendly with other traffickers, high chance of becoming a trafficker herself, emotional attachment to the trafficker, believes that she is responsible for what has happened to her.....)

### Activity for 4.3: Impact of Organised Crime on the Victim

#### PROFILE OF VICTIM

A sex trafficked victim could be any individual – male or female, adult or child, a foreign national or an Indian citizen

The sex trafficked victim could be from any economic strata

- Lower middle class family
- Upper middle class family
- Poverty stricken family
- They can be educated or uneducated
- They or their family have debts to repay and they want to help their family.

- They can be from urban, semi-urban or rural background
- They can be from disturbed families – either alcoholic parents or domestic violence
- They are easily swayed by looks and flattered when someone pays attention to them.
- They do not have mentors or friends who can advise them on the choices that they make.

*The primary characteristic of a trafficked victim is that she is vulnerable. She is desperate to escape her current situation and in a state of mind that can be easily manipulated by any person for their own benefit.*

## MODUS OPERANDI

- The victims could be tricked or lured into prostitution through the promise of love or marriage
- They could be tricked or lured through the promise of jobs
- They could be lured by the promise of a luxurious life
- Though most of the victims are tricked or lured into prostitution, traffickers also use kidnapping and threat as a method to procure a victim.

- Traffickers also use social media platforms to trick young girls into sex trafficking
- As technology has progressed, traffickers are using online platforms such as Facebook, Instagram, WhatsApp to spot vulnerable women and girls for sex trafficking
- With advent of technology, the modus operandi has become more clandestine – though the victim could be identified, identifying trafficker as well as clients is becoming difficult.

## PLACES OF EXPLOITATION

- A brothel in a red light area.
- An apartment in an upmarket/posh residential locality.
- In her own home but keep herself available for business.
- In massage parlors
- In dance bars
- Hotel rooms
- In the social media sites such as Facebook, Instagram, WhatsApp

## THE NETWORK

The network is spread across three main points:

a) Source/place of recruitment:

- The spotter/agent, who is often someone known to the victim or the victim's family, initiates contact, gains the victim's trust and persuades her to go away with him/her. Alternatively, the agent may persuade the family to "sell" their daughter to him/her.
- He/she may be a neighbour, an uncle or aunt, a boyfriend or lover, a Facebook friend, a whatsapp friend, or even her own parents.

#### b) Transit:

- The agent may hand over the victim to a transporter or may be the transporter himself/herself. Typically, during this phase the victim may be raped, brutalised, blackmailed and threatened to agree to do prostitution.
- The transit phase may not involve moving from one geographic location to another – it is more significantly the breaking in phase – where the victim is prepared for a life of exploitation.
- In this phase, the victim meets with either unknown people or known people but completely different personality and behaviour.

#### c) Destination / place of exploitation:

- The already battered victim is forced to begin servicing clients. Here she is thrown into a completely new environment – new people, clients, brothel madam, pimps, other sex trafficked victims.
- This entire journey from a safe place to an unsafe, intimidating and exploitative place is well planned with clear roles of each player at every phase of the journey.
- The network of traffickers has now expanded to include money transaction platforms, social media sites ( dating and escort services) and also website promoters.

## IMPACT OF ORGANIZED CRIME ON THE VICTIM

- She feels a sense of rejection and betrayal
- She is closely monitored and her movement is restricted.
- She comes to accept her new reality
- She loses her identity – she gets a new name, new family and new place of origin.
- She is controlled by a whole group of people – pimp, brothel keeper, local goons, and mafia and so on.

- She loses all control over her body and mind. The traffickers decide everything including how many clients she would take in any given day
- There are some perverts (clients) who physically harm victims by beating, burning them with cigars and so on.
- She starts contracting all kinds of diseases and has no access to medical treatment.

- She starts to normalize the daily exploitation and starts believing that this is her new reality and that it is better to accept it.
- She starts to cooperate with the traffickers, make friends with other girls so that she can live with less physical torture.
- She realizes that resisting is not an option now and realizes the need for protection
  - She takes on a pimp as a “keep”
  - This ensures some sense of security that other traffickers would not physically torture her unnecessarily.

- This arrangement also becomes an emotional back up for the victim
- She starts to emotionally lean on to this trafficker.
- She begins to feel she is regaining control over her life
- Begins to feel that she is loved and cared for
- She begins to get emotionally attached to her keep and others in the brothel
- Feels grateful to the traffickers for looking after her original family

- She believes that she alone is responsible for her current life and she stops blaming others.
- She believes that the only skill that she has to survive is to sell her body.
- There are evidences where the victim has slowly become an exploiter herself

### Activity for 5.3: Profiling of the Trafficker

#### PROFILING TRAFFICKER

A trafficker / offender in sex trafficking crimes includes all persons, agencies or institutions:

- Involved in any act in the process of trafficking
- Who gains/makes profit/exploits:
- As the trafficked person passes through a chain,
- From the starting point of source area through the transit area to the point of final destination, and
- From any act involved in the process of exploitation of the trafficked person(s)

Ultimately, a person is guilty of sex trafficking offence if he/she is knowingly involved in any act of commission and/or wilful omission in the process of human trafficking (this can include parents/guardians who knowingly sell/cause to sell/traffic their children). Due to the clandestine nature of sex trafficking, one must look into the entire process of trafficking and be aware of the multiple and various offenders that can be involved in the crime.

Traffickers can be, but are not limited to, the following persons:

- Recruiter / Agent of Recruiter
- Seller of trafficked person
- Buyer of trafficked person
- Transporter
- Conspirator
- 'Customer'/Clientele, who create / perpetuate demand
- Pimp
- Brothel madam
- Brothel managers
- Financier
- Parent(s)/guardian(s) who knowingly sell/cause to sell/traffic their children / ward

## GENERIC PROFILING

The perpetrators of this (the traffickers, pimps, etc.) don't fit a single stereotype. They represent every social, ethnic, and racial group. Some perpetrators are involved with local gangs, others are members of larger nation wide gangs and criminal organizations, and some have no affiliation with any one group.

- A trafficker can be male or female
- Traffickers, who act as recruiters, usually are persons who are known to the victim
- Traffickers, who act as recruiters, often form strong bond with the victim and uses psychological manipulation to gain control of her/ his vulnerability

The trafficker may use the following 'disguises' to gain trust and control of the victim:

- **Pretender** – Someone who pretends to be something s/he is not, such as a boyfriend, a big sister, a father, distant relative, etc.
- **Provider** – Someone who offers to take care of an individual's needs. Such as for clothes, food, a place to live, etc or their wants, like cool cell phones, purses, parties, etc.
- **Promiser** – Someone who promises access to great things, like an amazing job, a glamorous lifestyle, travel, etc.
- **Protector** – Someone who uses physical power or intimidation to protect (but also to control) an individual.
- **Punisher** – Someone who uses violence and threats to control an individual. When the previous disguises have been exhausted, an exploitative person often becomes a Punisher to maintain control

## **SUPPLEMENTARY READING MATERIAL**

## DEFINITION OF TRAFFICKING

According to Indian law, specifically Section 370 of the Indian Penal Code, trafficking of persons occurs when a person or persons is (a) recruited, (b) transported, (c) harboured, (d) transferred, or (e) received for purposes of exploitation through any of the following means:

- using threats, or
- using force, or any other form of coercion, or
- by abduction, or
- by practising fraud, or deception, or
- by abuse of power, or
- by inducement, including the giving or receiving of payments or benefits, in order to achieve the consent of any person having control over the person recruited, transported, harboured, transferred or received.

Exploitation includes any act of physical exploitation or any form of sexual exploitation, slavery or practices similar to slavery, servitude, or the forced removal of organs. Further, the consent of the victim is immaterial in determining the offence of trafficking.

Sexual exploitation is where a trafficked person is made to do the following - the list is only indicative and new forms are constantly being added:

- Prostitution in brothels - which could be located in designated red light areas or in any private property
- Soliciting on the street
- Pornography
- Provide sexual services under the guise of massage parlours or spas
- Provide sexual services to buyers in private residences, vehicles, bars, theatres, etc.
- Provide sexual services to buyers contacted through online dating services, escort services, social media websites

Sex trafficking happens when a person is trafficked - i.e. (a) recruited, (b) transported, (c) harboured, (d) transferred, or (e) received for purposes of any form of sexual exploitation through using threats, or using force, or any other form of coercion, or by abduction, or by practising fraud, or deception, or by abuse of power, or by inducement, including the giving or receiving of payments or benefits, in order to achieve the consent of any person having control over the person recruited, transported, harboured, transferred or received.

## UNDERSTANDING THE VICTIM

**A victim of sex trafficking is any individual who has been trafficked and is being sexually exploited in any one or more of the ways given above.**

A sex trafficked victim could be any individual - male or female, adult or child, a foreign national or an Indian citizen. While men and boys can also be trafficked, the vast majority of sex trafficked victims are female. It is estimated that India has 16 million sex trafficked female victims - 40% of these are adolescents and children, some as young as nine years or even younger. The manual will focus on female victims of sex trafficking.

### Profile of a sex trafficked victim:

While sex trafficked victims come from all social and economic groups, the victims, whether Indian citizens or foreign nationals, have certain typical traits. They may have one or more of the characteristics listed below.

- Sex trafficked victims are typically young girls/women from the rural, semi-urban or the slum areas.
- They come from deprived backgrounds - lower or lower middle class - which offer them few or no options for a “good life” as characterized by possession of job, gadgets, good clothes, good food, etc. They are looking for a change in their lives.
- They live in poverty and are forced to contribute to the family income.
- They are suddenly pushed into poverty because of the death of a family member and are forced to contribute to the family income.
- They are from unhappy homes where domestic violence, abuse and neglect by parents are part of their everyday life.
- They or their family have debts to repay and they want to help their family.
- They want a well-paying job, good clothes and fancy gadgets.
- They want the glamorous lifestyle of a movie star.
- They want romance as seen in the movies or on television.
- They do not have mentors or friends who can advise them on the choices they make.
- They have run away from home after a quarrel with their family.
- They are living away from their family for education or job purposes and want extra spending money.
- They are easily swayed by looks and flattered when someone pays attention to them.

- They lack education and easily trust people.

The above listed characteristics make them particularly vulnerable to being trafficked. While some of the victims might have been kidnapped or sold by their families, most of them have been tricked or lured into prostitution through promise of love, marriage, jobs, access to luxury goods, or a better life. A significant number of victims are also forced into continuing prostitution to pay off “debts”- the supposed costs incurred by the trafficker in bringing the victim to the place of exploitation. This holds true for both Indian and foreign victims. Rescued foreign nationals have stated that it was the prospect of additional income that induced them to come to India for prostitution.

While factors such as poverty, dwindling employment opportunities, family crises, unhappy home situation, etc. continue to be a major contributor to a person’s vulnerability to trafficking, growing consumerism and the technological changes evident today such as the internet, social media and increasingly smart phones have made it easier for traffickers to identify and target potential victims.

### **Some indicators of a sex trafficked victim**

- A sex trafficked victim is one who is in a sexual exploitation situation.
- She could be living in any one of the following locations:
  - A brothel in a red light area.
  - An apartment in an upmarket/posh residential locality.
  - In her own home, but keep herself available for business.
  - In a College or Working Women’s hostel.
- She might have a new name and identity that have been assigned to her at the time of induction.
- She will have no government documents for proof of identity or address.
- She might be living with other women/girls, or she might be living by herself.
- She is owned by another person who bought her.
- She is not free to make friends outside of the sex industry.
- She is not allowed to choose her clients or rates until she has proven herself to be part of the sex industry.
- She has to turn over the money she has earned to her pimp/agent.
- She has been introduced to different addictions - cigarettes, gutka, alcohol, drugs.
- She might have spent a significant number of years in the sex trade and forgotten her victimhood.

## UNDERSTANDING TRAFFICKING AS AN ORGANIZED CRIME

### What is Organised Crime?

It is a well organized conspiratorial enterprise involving several players at different points. It freely employs violence and bribery to maintain its operations and control. Several players from small time anti-social elements (local goons) to mafia bosses are part of this enterprise. Some key characteristics of organized crime are:

- It is illicit
- It is a business with a high profit margin
- Violence and threats are used with impunity
- A group of people work together efficiently to exploit a larger group
- The revenue is from the exploitation of other human beings

### Human Trafficking as Organized Crime

Human trafficking, and especially sex trafficking, exhibits all the characteristics of an organised crime.

- It is a crime where the selling of human bodies yields high profits and has low risks. It has been estimated that the net profit margin in the sex trafficking industry in India is over 70%.
- There is a group of people - each with their own clearly defined roles and responsibilities
  - conspiring to exploit another human being.
- Violence, threats and intimidation of different kinds are used to “break” the victim
- It involves multiple crimes - kidnap, extortion, rape, grievous bodily harm, etc.
- It is highly secretive and continuously evolving
- It is spread over multiple locations with multiple actors making detection of the crime very difficult.
- There is multiple abuse by multiple abusers at different points of time.

As with all organized crime, the human trafficking operation is a well-planned one. It begins with the identification of the victim. As mentioned earlier, the victim is desperate to escape from her home situation which could be marked with poverty, domestic violence, parental neglect and abuse, or a mere dream of a glamorous life style. So when the trafficker, who is on the lookout for such vulnerable and desperate young girls, spots her and poses as a sympathetic well-wisher who can offer her a better life, she is all too willing to go with him/her in pursuit of her dream. The trafficker is well organized and

appropriately networked. He/she identifies families that display signs of vulnerability, and uses the victim's desperation to escape her current situation to gain her trust and willingness to go with him/her. This psychological manipulation makes the transporting process much smoother for the trafficker.

The modus operandi of sex trafficking is spread across three main points: a) Source/place of recruitment b) Transit and c) Destination/place of exploitation - with different players at the different points. All the different players are co-conspirators to one crime. Alternatively, there could be one player who brings the victim into prostitution and sets up an individual business.

- At the source or place of recruitment, the spotter/agent, who is often someone known to the victim or the victim's family, initiates contact, gains the victim's trust and persuades her to go away with him/her. Alternatively, the agent may persuade the family to "sell" their daughter to him/her.
- During transit, the agent may hand over the victim to a transporter, or may be the transporter himself/herself. Typically, during this phase the breaking in ritual happens. The victim may be raped, brutalized, blackmailed and threatened into submission. The transit phase may not involve moving from one geographic location to another - it is more significantly the breaking in phase - where the victim is prepared for a life of exploitation.
- At the destination/place of exploitation, the already battered victim is forced to begin servicing clients. The destination could be a brothel in a red-light area, a hotel, houses, apartments, lodges, resorts where women and children are traded for sexual services. Sex trafficking also happens in massage parlours, Spas, beauty parlours, friendship clubs and other establishments meant for entertainment. The buying and selling of sex could happen in these establishments or through the internet or social media sites.

With the advent of new technologies and features such as the Dark Net, the nature of the crime has become even more clandestine and difficult to detect. In traditional brothels, such as the ones in Kamatipura in Mumbai, GB Road in Delhi, Bowbazaar, Amtala and Sonagachi in Kolkata, the different players - Financier, Bouncers, Brothel Madam, Pimp, Client - are clearly visible.

But there is a growing trend of buying and selling sex online using Money Transaction Platforms (online bank transfers); Social media sites (Facebook, Youtube, Whatsapp...);

and website promoters (dating and escort services websites). All of these players are traffickers.

Victims are no longer taken to brothels only, often apartments in middle class and upper middle class neighborhoods are rented and the victims are housed there and business conducted. There is no Brothel Madam or Dalal, the process of breaking in has been so thorough that the victims do not try to escape. The traffickers use all kinds psychological manipulation methods to establish their control over the victim - they beat and reap her repeatedly, they threaten to harm her family or loved ones, they threaten to post her nude pictures on the internet or send them to her family, they drug her and rape her - they use all tactics to force her into prostitution.

### **IMPACT OF ORGANIZED CRIME ON THE VICTIM**

Since trafficking is an organized crime and operates on the same principles of intimidation, violence, blackmail and threats, by the time the victim arrives at the place of exploitation, she is completely broken and alternates between feelings of fear, betrayal, confusion, and guilt.

She is incapable of trusting anyone and has no hope of escape. The sheer brutality and exertion of power over her, crushes any dream that she might have had. The feeling of isolation and being cut off from all that is familiar is complete - this feeling could persist even if she is in her own hometown or in her own home. She rapidly transforms from a bright young girl full of hope into a machine providing sex for countless men in order to keep herself free from violence.

This network also operates in the post rescue scenario:

- The traffickers pose as parents or close relatives and give petitions in the court for the release of the girls.
- These traffickers also intimidate the girl when she appears in court.
- The victim fears loss of her near and dear ones – parents, siblings or close relatives. She often becomes hostile and decides not to testify in the court.
- When she is in the protective home, the fear of this network of traffickers makes her protect the traffickers.

Thus the impact of this network creates a deep fear and insecurity in the victim's mind which controls each and every action of the victim. The control over victim's mind is so deep that the victim becomes completely dependent on the trafficker and feels part of

the crime rather than a victim.

This network of traffickers also pose a huge security threat to the victim in the post rescue scenario.

**The organized nature of this crime can be determined from the fact that:**

- **Someone locates and recruits the victim.**
- **Someone accompanies the victim.**
- **Someone 'neutralizes' the official machinery.**
- **Someone who knows and makes arrangements in local places.**
- **Someone keeps the victims safely**
- **Someone provides logistic support to the movement of victims – food, housing, etc.**
- **Someone collects the payment for providing the victims.**
- **Someone is responsible for moving the victim from one place to another**
- **Someone makes 'investment' in the whole activity, especially when they are sent outside the country.**
- **Someone watches the movement/activity of police and immigration authorities.**
- **Someone collects the fees in the country of destination.**
- **Someone makes the earnings legitimate/ white**
- **Someone enforces order and discipline in the entire activity.**

### **The journey of a victim – from resistance to acceptance**

In order to understand the journey of a victim from resistance to acceptance of sexual exploitation, it is necessary to understand clearly the entire process of trafficking and bring together the different elements presented in Sections 1.1. and 1.2. Traffickers procure victims in three steps:

**Step 1:** The traffickers find the victim through different means - in their own neighborhood, railway stations or bus stands, through the internet, on social networks, in school/college, in clubs/bars, through mutual contacts, in their own family.

**Step 2:** The traffickers gain the trust and lure the victim with promises of protection, love, adventure, a better life, job, marriage and home, film career, etc. and persuade her to go away with them. Note that there could also be cases of abduction or the complicity of the family in the act.

**Step 3:** The traffickers use **violence, fear, intimidation, threats** to force the victim to comply with their demands.

During the first two steps - the victim is unaware of the danger she is in. The trafficker is quite often someone she knows and has come to trust. He/she may be a neighbour, an uncle or aunt, a boyfriend or lover, a Facebook friend, a whatsapp friend, or even her own parents. The victim trusts this person completely and has told him/her all her dreams and aspirations - this could be an online friend too. The trafficker uses her own (the victim's) dreams and aspirations to trick her and paints a beautiful picture of a safe, secure and prosperous future. So when he/she asks the victim to go with him/her, the victim goes willingly. In other instances, the victim may be in love with the trafficker and when he offers marriage she is overjoyed and goes with him happily. In other instances, the trafficker offers the victim's family a way out of their financial difficulties by offering to place the daughter in a good job and the family is happy to agree. So, depending on the victim's profile, the trafficker presents a solution, which the victim happily accepts.

It is during Step 3 that the victim becomes aware of the full horror of her situation. The friend/lover/loving aunt or uncle suddenly turns into a monster. She is subjected to all kinds of violence. She is asked to have sex with strange men. Naturally, she refuses and resists. She is raped brutally, starved, beaten, locked up, not allowed to talk to anyone, is tortured on a regular basis. She is told she is worthless, dirty, sinful. This kind of treatment goes on till she can bear it no more, and gives in.

**A 13 year old girl** lured to G B Road from Ranchi, refused to have sex. She was dragged into the basement and locked in a narrow, windowless room without water and food. On the fourth day when she still refused to work, one of Madam's Thugs beat her up until she fainted. When she woke up, she was naked; a cane smeared with red chillies had been shoved up her vagina. They tortured her until she said "yes".

**Another girl 15 years old**, thought she would be a film actress – but when the uncle came and started touching her in all wrong places, she was scared and she ran away. The aunty caught her as she ran through the corridor and slapped hard on the face, two other men also did the same and then they dragged her into a room and bolted her from outside. For 10 days they starved her and everyday aunty would come with

#### **Common feelings of self-shame and guilt**

I am responsible for this

I have asked for this fate of mine

I don't have right to live

I am a waste

I have brought shame to me family

two men and ask her whether she would do it – if she says “no” the men will beat her up. On 11<sup>th</sup> day she gave up and agreed.

Victims of sex trafficking share that this process of “breaking in” involves psychological abuse, threats, intimidation which includes severe beating, gang rape, denial of food to burning with cigarettes etc.

They are often blackmailed with pictures of their first rape or intimate moments with their first trafficker. What happens to the victim during this phase?

- She feels a sense of rejection and betrayal.
- She is closely monitored and her movement is restricted.
- She comes to accept her new reality.
- She loses her identity - she gets a new name, new family and new place of origin.
- She is controlled by a whole group of people – pimp, brothel keeper, local goons, and mafia and so on.
- She loses all control over her body and mind. The traffickers decide everything including how many clients she would take in any given day.
- She is forced to take clients even when unwell. For eg: A victim from Bowbazar area in Kolkata spoke of how she had to take clients up to one day before her child’s birth.
- Each victim is supposed to take at least 10 – 15 clients everyday.
- There are some sexual perverts (clients) who physically harm victims by beating, burning them with cigars and so on.
- She starts contracting all kinds of diseases and has no access to medical treatment.
- She starts to normalize the daily exploitation and starts believing that this is her new reality and that it is better to accept it.
- She starts to cooperate with the traffickers, make friends with other girls so that she can live with less physical torture.
- She realizes that resisting is not an option now and recognizes the need for protection, so she takes on a pimp as a “keep” – this ensures some sense of security that other traffickers would not physically torture her unnecessarily. This arrangement also becomes an emotional back up for the victim and she can emotionally lean on to this trafficker.
- She begins to feel she is regaining control over her life and begins to feel loved and cared for.
- She begins to get emotionally attached to her keep and others in the brothel and feels grateful to the traffickers for looking after her original family.
- She believes that she alone is responsible for her current life and she stops blaming others.

- She has lost all her earlier skills and the only skill she has now is to sell herself.
- She slowly becomes an exploiter herself.

### **Loss of Identity**

Name is our first identity and we take pride in our name, in the process of trafficking, the victim is forced to change her name several times. The first thing that she loses is her Identity – her name. This results in losing one’s self esteem and self-worth.

### **Self-blame and Guilt**

The victim of trafficking has experienced multiple traumas and these lead them to have permanent negative thoughts. They look at all their experiences and relationships through these traumatic experiences. They remember some key traumatic incidents in details, but what remains with them is the loss of dignity, a sense of shame and excessive guilt for somehow being responsible for what has happened to them. They don’t believe that they are victims – they believe that they are part of the crime.

### **Mistrust**

The victims have very confusing feeling about trust: a) one leads to difficulty in trusting and the other leads to trusting too easily. The usual feelings are:

If I trust, I will be hurt.

If I do not trust then I will not be liked.

### **Helplessness and Hopelessness**

The victims have been traumatized and they may believe that their situation is too difficult and nothing can help them. The victim of sex trafficking is made to believe that she is a worthless person with no skills to survive. Only worth that she has is in selling her body so that she is live. She starts feeling helpless and starts believing that her body and selling it for sexual services is the only way to earn a livelihood – she is a commodity – a product.

### **Risk taking**

Victims may start believing that nothing or nobody can harm them anymore as they have been harmed enough. They may not recognize the risks they may face or have fear of any consequences e.g., using harmful and addictive substances or practicing unsafe sex, without any precautions.

### **Anger**

The victims may have thoughts which make them angry:

- Why me?
- Nobody helped me. I will not help anyone.
- I must have done something wrong to be hurt and punished like this.

### Identification with the exploiters

To live in the abusive environment and to cope with the exploitative situation, the victim often starts thinking like the exploiters/traffickers. They start believing that whatever the trafficker is doing is to help them and fulfill their interest. Their thoughts may include:

- Even though he/she hurts me, they protects me from the police.
- He/she is the only one who is concerned about my welfare. He/she has a right to be angry with me some times.
- There is a reason for his/her anger.
- The madam protects me from abusive clients and is attentive to my needs so that the client is not physically hurting me.
- The exploiters sends money to my family

The victims have lots of experiences of being abused and treated unfairly and they start believing that they don't have rights.

Confused identity, low self-esteem and lack of self-worth and learnt helplessness coupled with the belief that she is one of the accomplices in crime makes a victim think like an "accused" and not a victim. She believes there is no hope at all than to sell her body.

Victims developed these negative thoughts because they were abused, exploited and traumatized.

**Accomplice than a victim:** The physical abuse is no match to the psychological manipulation that traffickers exercise to control the mind of victims. As most recent cases show the trend that traffickers use psychological manipulation to convince victims to accompany him/her, the victim is convinced that the misery that she is going through is because of her and she is the one who is responsible for this and thus nothing to complain or how can I seek help when I have been the cause for this misery. Her misery, pain, isolation all starts to make sense for her and she starts believing this is the reality of her and she needs to adjust to this.

## Traffickers play with the mind of these girls and her psyche of dependency on the trafficker.

The impact of exploitation deepens with the length of their stay in the place of exploitation. If she victim is rescued as soon as the person have been initiated in commercial sexual exploitation, the impact on her mind is less – she is still physically abused, tortured, raped, but her mind may not be still controlled by the exploiters – she may not yet develop the dependency on the trafficker/exploiters.

But they start to normalize their exploitation and believing that this is now their reality which is almost irreversible – the impact on their mind is high. Dependency on the trafficker, feeling of gratitude that they are helping their families, a relationship of trust and distrust between the trafficker and the victim starts to play out. The traffickers start to control their mind completely sometime by fake love, sweet talks and more often by threat, fear and torture.

Finally, the person does not believe that anyone can help her. She believes that selling her body is her destiny.

## Health/Physical

Fractures	Cuts, bruises, injuries	Chronic illness from poor hygiene
TB / Respiratory infections	STDs, HIV	Repeated abortions
Malnourishment	Unwanted pregnancy	Aches and Pains
Chronic fatigue	Head injury and traumatic brain injury	Facial trauma including broken teeth
Malaria	Hepatitis B, Hepatitis C	Pelvic Inflammatory Disease
Cervical cancer	Untreated illness	Over Treatment with antibiotics leading to drug resistant infections

<p><b>Sexual</b></p> <p>Sexual misconceptions Sexual aversion Hypersexual behaviour - Promiscuity, seductive behaviour Sexual manipulation Confusing love and sex</p> <p><b>Social</b></p> <p>Isolation Difficulty in forming relationships Difficulty to conform to societal norms Anti social behaviour Loss of earlier achievements</p>	<p><b>Behavioural</b></p> <p>Numbness, shock Disoriented/confused Low concentration Helplessness Aggressiveness, violent, abusive Risky behaviour, impulsiveness Self harm (Suicidal attempts, slashing, cutting) Rebellious, defiant Interpersonal difficulty Truancy, Stealing, Lying Suspiciousness</p>
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<p><b>Psychiatric</b></p> <p>Depression / Suicide Phobia Anxiety Nightmares Flashbacks Sensitivity to trauma triggers, Numbing Irritability Hyper vigilance Hyper vigilance Poor concentration Loss of sense of future Eating disorders Sleep disorder Substance Abuse</p>	<p><b>Emotional / Psychological</b></p> <p>Guilt and shame Fear Low self esteem Lack of confidence - overconfidence Unworthiness / Self disgust Feeling degraded Hopelessness, powerless / vulnerable Sad / depressed Lack of trust / betrayal Hostile Sexual Trauma / Shame Fear / Loss of safety Moody Intrusive memories Suicidal Dissociation Stockholm Syndrome (identifying with the abuser) Normalisation of exploitation Substance abuse: Alcohol, gukta, pan masala, drugs</p>
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With multiple psychological disorders and addictions, the victim becomes more and more inaccessible to care and support. When these girls are rescued and admitted in a home, the care-givers has to deal with a person:

- who has completely given up on life
- has made adjustments to her new reality (place of exploitation)
- Developed dependency on traffickers/ exploiters,
- Developed a relationship of gratitude
- is averse to police actions as well as Shelter Homes as she was told that these processes are not to be believed in. And rightfully so, she may have her own experience where she was raped by policemen or sought their help but have been denied .

The person who is completely devastated and shattered mentally, physically and emotionally.

She is angry, aggressive, disoriented and in complete distrust – her biggest question is why was I rescued – what is the motive behind this, where are my belongings and what would now happen to me – the new people and environment intimidates her and in other hand her dependency/belief on traffickers/exploiters pulls her to return to the trafficker.

### **Things to remember**

- **Traffickers have already played with the mind of the girl. The girl has already developed a dependency on the traffickers – She trusts the trafficker and is also emotionally attached.**
- **She has a sense of gratitude as well – traffickers have told her that her family is being supported well; They are being take care off, they send them money regularly and if she continues to do what he trafficker says – her family will be looked after well.**
- **Traffickers have already told the girl that police will beat them up and put them in jail. They will extort money from them and will torture them brutally.**
- **Traffickers also told the girl that these NGOs will come and rescue you – they are no good – they will take all your belongings and you will be in their shelter home for good. They will also torture you and not allow you to even meet with your family. You will not be able to take care of them, if you are rescued and kept in a home.**

- **Traffickers use their network to scare the girl with threats to harm her family.**
- **Traffickers try to become the benevolent well-wishers of the girl**
- **Traffickers threatens the NGO who has rescued the girls – they often uses the media to shame the organisation and brand them as traffickers**
- **Traffickers act as close relatives, parents to seek court orders to meet the girl in shelter homes so that they can motivate the girl to remain silent by using the same method of psychological manipulation**
- **Parents are often part of this network**

**MODULE**

**2**

NEEDS OF THE VICTIM AND  
PROTECTION SERVICES



## MODULE 2 - NEEDS OF VICTIM AND PROTECTION SERVICES

<b>Objectives</b>	<ul style="list-style-type: none"> <li>• To understand and empathise with a victim after she has been rescued</li> <li>• To experience, explore, identify and articulate the various needs of the rescued victim</li> <li>• To understand the importance of protection services and the role of the duty bearers in providing the necessary individualised care and services to the victims of sex trafficking</li> <li>• To gather knowledge on the existence of various protection homes as legal entities, and gather understanding on their objectives and minimum standards</li> </ul>
<b>Content</b>	<p><b>Session 1:</b> The victim’s context and understanding her needs.</p> <p><b>Session 2:</b> The importance of protection services in victim care and the role of duty bearers</p> <p><b>Session 3:</b> Legal compliances of protection homes and the corresponding types of protection services offered</p> <p><b>Session 4:</b> Different types of protection services for victims - their objectives and minimum standards</p>
<b>Expected Outcome</b>	<p><b>The participants would:</b></p> <ul style="list-style-type: none"> <li>• Be able to delve deeper into the needs of the rescued sex trafficked victim, from the perspectives of the victim and the service delivery agency (Protection Home)</li> <li>• Will be able to identify and articulate their own roles and responsibilities as service providers in Protection Homes</li> <li>• Will be able to better understand the purpose, role and functioning of Protection Services with the gathering of knowledge and information on Compliances and Standards of Protection Services for victims of Trafficking</li> </ul> <p><b>The Trainer would:</b></p> <ul style="list-style-type: none"> <li>• Be able to acquire in depth knowledge on the current functioning of the concerned Protection Homes</li> <li>• Be able to gather insights into the current challenges of the Protection Home staff and make a note of the same</li> </ul>

## **Session 1: Victim's Context and her needs.**

**Estimated time :** 60 mins

**Material required :** Semi-ripe banana, Chart Papers/Flip Chart, Markers, Case Study, Projector, Screen and Laptop.

**Methodology :** Game, Game Analysis, Active audience participation, Brain Storming and Discussion, Power Point Presentation

### **Activity 1.1: The Banana Game: Understanding the State of a Victim**

- Ask for four volunteers from amongst the participants.
- Set the context in a humorous manner by saying all 4 of them are hungry monkeys and hence, lighten up the mood.
- Give one of them a ripe banana and give her / him instructions, whispering in her / his ear, to protect the banana by hook or crook because this is the only food that she / he may have found in a long time.
- Now bring the other three volunteers to a huddle and tell them that each one of their objective is to snatch away the banana because they're all very hungry.
- Explain that they may have to use any means to get the banana out.
- Start the game and automatically you will notice that there's a fierce scuffle to grab the banana.
- Notice that people are using all kinds of techniques to get hold of the banana (from brutal force, to tickling, etc.).
- Resultantly the banana is smashed and shredded into pieces and nobody can eat it any more.
- Give the participants time to settle down and wipe their hands off the dilapidated banana.
- Ask participants what they learnt from the experience?
- Write their perceptions on a flip chart.
- Allow laughter in the conversations making the atmosphere light and make sure everyone's engaged.
- Now ask the participants, if the banana represented a trafficked victim, the one holding it represented the trafficker / exploiter and the other volunteers are members of the judiciary, police force and protection home how would they interpret the exercise?
- Write these perceptions as well that the participants share.
- Ensure the atmosphere gets sombre and the participants get into the psyche of the victim and start to think from her shoes.
- Process and close the game by saying that post-rescue initiatives can become violent and difficult and cause a lot of secondary victimization but the human interest and

the human rights of the victim must always be protected.

- End by suggesting, that no victim should have the fate of the banana.
- Explain the victim's experiences of pain, trauma, emotional upheaval, fear, etc.
- End the exercise on this serious note and ensure that the participants remain with the experiences that the banana / victim goes through.

### Activity 1.2: Role Play: Experiencing the Need of the Victim

- Ask four participants to volunteer for the role play activity
- Instruct one of them to play the role of a victim just rescued from trafficking, while the second volunteer would play the role of a Police officer, the third volunteer would play the role of a Social Worker/NGO representative, and the last volunteer would play the role of a Medical Practitioner.
- To establish the context of the victim's background, share a Case Study with the volunteers. (*Refer to Module 02 Resource Guide for Activity 1.2, Case Study*)
- Ask the last three volunteers to conduct a formal interview (as would be conducted in a real situation) with the victim.
- As a facilitator and an observer, follow closely on proceedings of the interview being role-played, and write down the points that need to be taken up for a constructive feedback.
- If time permits, repeat the same role-play with four new set of volunteers. This would give a better clarity on the analysis of the process of Interview with the survivor.
- After the role-play is done ask each performer what s/he felt/experienced during the role play.
- Ask the interviewer the challenges that they faced during their interaction with the victim.
- Ask the victim about her feelings.
- Get a general feedback from the audience about the role-play.
- Write down their inputs on a flip chart/chart paper.

#### Facilitator's Note:

- ✓ It is of utmost importance that the participants acting as observers are completely quiet in order to allow the role players to fully identify with their roles without disturbance.
- ✓ After acting out the scenario, give an opportunity to the "victim" first to express how she felt about the situation, the questions being asked, the treatment, etc. After the victim, the rest of the performers are given the opportunity to relate

their individual experience. Only thereafter, the observers have the opportunity to comment, react, and pose questions. The attitude for the feedback must be fair and constructive.

- ✓ Look out for the following in the role play:
  - participants' communication skills with a potential victim of sex trafficking
  - participants' sensitivity and attitude towards a victim of trafficking and gender issues
  - participants' knowledge of protocols, law and procedures with regard to powers of arrest in cases of suspected or possible human trafficking
  - participants' ability to deal with conflict
- ✓ Comments should relate to the role-play content, not the quality of acting it out.
- ✓ It is also important to "de-role", i.e. to explicitly finish the roles acted out by the volunteers. End of the role play, they will introduce themselves as person x and y.

Point out to the participants that the following needs to be noted during interaction with the Victim:

- Victim must be informed immediately as to what is happening/ why the police and others have come and why s/he is being rescued.
- Victims come from different social, cultural and ethnic backgrounds, which may be different from that of the people interacting with them; so one should be trained and sensitive to handle the situation and seek the information gently, without being intimidating, rough or in a state of urgency.
- There may be a language barrier between the victim and the persons interacting with her. As far as possible, have a suitable translator to better understand what the victim has to say.
- Victims may be completely unaware of their rights or may have been intentionally misinformed about their rights. A briefing with the victims ought to be done to inform them about what is happening with them, what their rights are, and what the next steps are towards her protection.
- Reinststate that all procedures undertaken with the victim, will respect victim participation, her consent, her right to information and in her best interest.
- The victims may fear not only for their own safety but also for that of their families. All such fears must be listened to and addressed with utmost care and compassion. If the suspicions are found valid, necessary actions must also be taken.

### **Activity 1.3: Group Discussion: Understanding the need of the Sex Trafficked Victim**

- Divide the trainees into groups based on the number of trainees (group not to exceed more than 8 trainees)
- Hand out the same case study to each group and give them 5 minutes to read it. (*Refer to Module 02 for Activity 1.3, Case Study*)
- Give one of the following topics to each group and mention that each group is required to focus on the given topic while analysing the given case study.
  - Group 1: Immediate/Basic Needs
  - Group 2: Physical Health Needs
  - Group 3: Psychological Need
  - Group 4: Economic or financial Need
  - Group 5: Legal Need
- Give 10 mins to the participants for the group work to discuss the given Case Study and analyse the same from the perspective of the given topic.
- Request each group to nominate one rapporteur from their respective groups.

### **Activity 1.4: Group Presentation and Discussion on Understanding the Need of the Victim**

- After the stipulated time for the group work, ask each group (the nominated rapporteur) to present their analysis to the larger audience
- Encourage the audience to actively listen to each group's presentation
- After all the groups have made their presentations, encourage the participants to articulate any other key points that they may like to add or seek clarification on any point or issue related to the session content.

### **Activity 1.5: Understanding Needs of the Victim**

- Summarise the above discussion by using a PowerPoint presentation (or any other preferred method) in articulating the various needs of a victim. (*Refer to Module 02 Resource Guide for Activity 1.5*)

## **Session 2: Importance of Protection Services in Victim Care and the Role of Duty Bearers**

**Estimated time :** 90 mins

**Material required :** Chart Papers/Flip Chart/White Board, Markers/Sketch pens.  
Post-Its

**Methodology :** Ice-breaking exercise, Game, Game Analysis, active audience participation, brain storming, presentation and discussion

### **Activity 2.1: Game of Safety Net: Experiential Understanding of the Importance of Protection Services for the Victim**

- Ask all the participants to stand in a circle.
- Request two of them to volunteer.
- Ask one of the volunteers to stand in the middle of the circle and the other outside of the circle.
- Take the volunteer standing outside the circle a little away from the rest of the group and whisper to her / him that the other volunteer is her / his target and she/ he has to enter the circle through any means, to drag the person in the circle and come out.
- Don't tell anything else to anyone and just say start.
- Notice that very easily the one outside the circle enters the circle, touches the volunteer in the centre of the circle and comes out.
- Now set the tone by clearly saying that the person in the centre of the circle is a trafficked victim; the person outside the circle is the trafficker /exploiter; and the other people in the circle are from a Protective Home responsible towards protecting the victim inside.
- Now instruct the large group, that come what may, they will have to protect the girl from being taken out (which is equivalent to getting re-trafficked).
- Start the game again.
- Notice that this time despite several valiant attempts the person outside the circle is unable to touch the girl.
- Notice that the group is strategizing and working in congruence to ensure that the person in the centre is not allowed to be touched.
- Let this go on for a while and notice that the group is holding their hands creating a protective circle around the victim and also strongly protecting her with all their might unlike last time when they were caught completely unaware.
- Stop the game and ask everyone to settle down in their respective seats.
- Ask them what they have learnt from this game.

- Write down each person's feedback on the flip chart.
- Especially ask the individuals playing the role of the trafficker and the victim on what were the feelings they went through in both cycles of the game.
- Finally, process it all in the plenary and communicate that the first time around, since the Protection Home Team was completely unaware of their role and the possible risk, it was very easy for the trafficker to take control of the victim and push her back to the same situation of exploitation.
- Explain that once the duty bearers in a Protection Home understood their roles to protect the victim from potential threats, they automatically stepped into their roles to protect the victim, strategized and put all their might in protecting the victim and succeeded in the effort.
- Close by suggesting that if the duty bearers worked as an informed team with a clear purpose and channelized intent - they can form an impenetrable safety net and protect all victims from external threat and harm and also successfully rehabilitate them. The need to understand the roles and responsibilities of a Home Manager and caregivers is thus paramount.

### **Activity 2.2 : Brainstorming: Establishing the Roles and Responsibility of Duty Bearers of Protection Services for Victims of Trafficking**

- Divide the participants in four groups (or as deemed fit)
- Give each group some markers and chart papers.
- Ask each group to brainstorm and articulate the various roles that there are for staff/duty bearers in a Protection Home in order to protect the victim from potential threat and harm and also for holistic rehabilitation.
- Ask the participants to write down the responsibilities for each of the above articulated roles.
- Ask the participants to also mention other stakeholder/agencies that the Protection Agencies need to collaborate with to offer specialised (referral) services to the victims. Encourage them to articulate the other stakeholder's roles.
- Ask one volunteers from each of the group to make a presentation of the outcome to the larger audience
- After all the groups have made their presentations, encourage the audience to add any point that may have been missed out.

### **Activity 2.3: Presentation by the trainer on the role of protection services**

- Summarise the discussion to reiterate an exhaustive list of the roles and the responsibilities of duty bearers/staff of Protection Services for victims of trafficking

(Refer to Module 02 Resource Guide for Activity 2.3 for the Role of Protection Services for Victims of Sex Trafficking)

### **Session 3: Legal Compliances related to Protection Homes and the corresponding types of Protection Services offered**

**Estimated time** : 60 mins

**Material required** : Chart Papers/Flip Chart/White Board, Markers/Sketch pens, Projector, Screen and Laptop

**Methodology** : Brainstorming, Group Discussion, Presentation and Open Forum Discussion

#### **Activity 3.1: Brainstorming on legal compliances in protection homes**

- Ask the following questions to all the participants and encourage maximum participation from the audience to respond. Do you know the process of setting up a Protection home?
  - Does it require any registration or licensing process?
  - If yes, can you tell us under which legal provision, Children Homes and Protection homes are set up?
  - Do you know how the victim reaches these Protection Homes – can the police or the NGO who conducts rescue operation, bring them to the Protection Home directly or do they have to follow a legal process?
  - If yes, can you share the process with us?
- Make note of the answers shared by the participants at the outset of this session on a chart paper/white board/flip chart.
- Revisit the same questions at the end of the session to assess the level of understanding/knowledge gained on the topics covered here.

#### **Activity 3.2: Presentation by the trainer on Legal Compliances in Protection Homes**

- Use a PowerPoint presentation to outline the various Legal Compliances of a Protection Home. (Refer to Module 02 Resource Guide for Activity 3.2 (a) for information on these various legal provisions/compliances)
- Use another presentation to share with the audience the various Types of Protection Services offered within Protection Homes (refer to Module 02 Resource Guide for Activity 3.2 (b) for the same)

## **Session 4: Different types of Protection Services for victims - their objectives and minimum standards**

**Estimated time** : 90 mins

**Material required** : Chart Papers/Flip Chart/White Board, Markers/Sketch pens.

**Methodology** : Brain storming, presentation and discussion

### **Activity 4.1: Brainstorming on Different Types of Protection Services**

- Divide the participants in five groups.
- Referring to the presentation of the Role of Protection Services for victims of trafficking give each group one of the following themes:
  1. The role of Protection Services is to ensures safety and security of the primary witness of sex trafficking
  2. The role of Protection Services is to ensures an enabling environment for the victim to heal
  3. The role of Protection Services is to facilitate the process of forming safe and therapeutic relationship between the victims and the care giver that supports victim's journey towards being a survivor.
  4. The role of Protection Services is to facilitate the process of supporting the victim to recognize her ability and skills to start a new life
  5. The role of Protection Services is to facilitate a process that enables the victim to use her skills to make informed choices, decisions to lead a dignified life
- Instruct each group of participants to brainstorm on the given theme and articulate how they have executed/enabled/facilitated each of the above set of protection services for the victims within the premise of the Protection Home that the participants are engaged with.
- Ask each group of participants to simultaneously point out the challenges in executing/facilitating the articulated protection services
- Encourage the participants to use their real-life experiences to elaborate and articulate instances and cases while elucidating on the given topics.
- Give the participants 10 mins for the group discussion and then ask each group to make a presentation of their group work.

### **Activity 4.2: Presentation by the Trainer on Standards of Protection Services**

- Cull out and summarise the relevant points shared in the above group work and discussion, and then with the help of a Power Point presentation share the various

Standard of Protection Services for victims of trafficking (*refer to Module 02 Resource Guide for Activity 4.2 for the presentation content*)

**Facilitator's Note:**

Open the forum for participants to place their comments or questions on the various standards of protection services mentioned in the presentation. This will allow the duty bearers (protection home staff) to freely share some of their real life challenges in providing protection service to victims. Make note of the salient points shared by the participants and document the same as a part of learning from the training.

# **WORKSHEETS**

## Activity 1.2: Case Study to Establish the Victim's Background

### Case Study

Shilpi Topno, aged 7 years, belonged to Lohardaga in Jharkhand. Her parents worked as labourers in the mines and who in spite of all their hard work found it difficult to provide well for their 8 children. Shilpi wanted to study and her parents struggled to pay the school fees for all their children. So when one of Shilpi's aunts, Gayatri Devi, offered to place Shilpi with her employer family in New Delhi, who would take care of Shilpi's education and other needs, in return of Shilpi's services to look after their 2 year old son, her parents welcomed the opportunity. Shilpi at the prospect of receiving education and also not being able to deny the wishes of her parents went to Delhi with Gayatri.

Shortly after she arrived in Delhi, the employer she was living with began to physically and sexually abuse the little girl, creating a constant environment of fear for Shilpi. Shilpi was locked up and abused each time she made a mistake. When Shilpi tried to share her predicament with her aunt, Gayatri told Shilpi that she had no option but to stay here since her parents had sold her off to her new employers.

For the next 2 years, she was made to clean the house, wash clothes, help with the cooking and care for their son. She was never allowed to enrol in school as her parents were told, and nor was she allowed to go outside. One day after she was severely beaten, Shilpi managed to escape from the house in the night while her employers were sleeping. She spent the night in a park and was found sleeping on a bench by the morning joggers. They seeing the bruises on the young girl handed her over to the police. She was then taken to a local hospital for medical care. Her employers were arrested and she was later placed in a shelter home after the completion of her treatment. Her aunt is still absconding.

## Activity 1.3: Case Study for Group Work

### Case Study

Priya, a girl of 14 years, always wanted to go to the city and experience the charm. She hailed from a rural district of Andhra Pradesh, where she went to school and helped her mother in household chores. Everyone in the village knew of Priya's love for the city. To fulfil her dream of going to the city of Hyderabad, Priya ran away from home to go to the city for a week with Laxmi, a village aunt (who claimed to work in a leather factory in the city) who proposed to take her along and show her around the city.

When Priya reached the city, Laxmi left her in a house promising that she will come back in a few hours. The house had a few women. With a lot of excitement, Priya waited for Laxmi to come back. After a few hours when Laxmi did not come back, Priya was worried. The women in the house told her that Laxmi had asked them to shift her to another house.

The other house was located in the outskirts of the city. By this time Priya was getting anxious but still had hopes that Laxmi will come back and show her the city. After two days in the house, one of the women gave her some clothes and asked her to dress up as some guests were coming.

Priya was confused but since she was a guest in their house she changed. Uncomfortable with modern clothes, Priya was asked to entertain the male guests. After a while, one of the men asked her to come with him to the bedroom. Reluctantly Priya went inside. It was a nightmare for her when the man forced her to have sex with him. Priya tried to escape from the house three times, but every time she was caught and beaten up. She later came to know that Laxmi had sold her. Scared to go back home as she had 'run away' and she feared what her mother and the villagers would say Priya was forced to live in a situation of commercial sexual exploitation. Slowly she reconciled with her situation and started adjusting with her keepers and customers. In the 4 years of sexual exploitation Priya underwent 6 abortions. When she was rescued, she was suffering from multiple sexually transmitted infections.

## Activity 1.5: Need of Victims rescued from Sex Trafficking

### The Various Needs of the Victim of Sex Trafficking

#### Immediate need:

- Safe and secured shelter
- Food
- Clothes
- Toiletries- tooth paste, tooth brush, hair oil, soap, detergent powder, towel, comb
- Immediate attention to health problems
- Immediate attention to trauma care
- Immediate recovery of her belongings from the place of exploitation
- If she is accompanied by an infant/ or the child, then immediate care of the infant/the child

#### Physical Need:

- Complete medical check-up to assess her health condition and to diagnose any particular ailment
- Addressing malnourishment, respiratory infections, skin diseases
- Addressing torture and violence related health injuries such as cuts, bruises, fractures, burns, broken teeth, head injuries
- Addressing Gynaecological problems stemming from repeated abortions -cervical cancer, pelvic inflammatory disease
- Addressing malaria, Hepatitis B, Hepatitis C, Tuberculosis
- Addressing STDs/HIV; victims requiring palliative care
- Addressing special needs of victims those are pregnant, lactating or
- differently abled

#### Psychological Needs:

- Trauma counselling
- Life skill training
- Space for therapeutic healing
- Individual and group counselling that them to cope with trauma

**Economic or Financial Needs:** This is an important need that needs addressed for the victims to live a dignified, independent life.

- Need to become employable: learning basic numeracy, literacy, communication skills, familiarisation with workplace culture ethics
- Need to strengthen her existing skills or to learn a new skill income generation - it could be for accessing a job or to start own enterprise

## The Various Needs of the Victim of Sex Trafficking (Cont.)

Legal Needs: Every victim has unique legal needs. these legal needs can be divided into two parts:

### **Individual need:**

- Legal aid to recover belongings
- Legal aid for claiming compensation
- Support for civic entitlements
  - Birth certificate
  - Compensation for sexual assault
  - Immediate relief fund for sex trafficked victims
  - Bank account
  - Education certificate
  - Identity card-Voter's ID, AADHAR
  - Community certificate
  - Family income certificate
  - Resident certificate based on the referral order
  - Accessing Housing schemes
  - Health cards
  - Ration cards

### **Need that arises as the primary witness of the crime:**

- Preparing for appearing in court
- Registering 164 statement
- Preparing as victim witness

## Activity 2.3: Role of Protection Services for Victims of Sex Trafficking

### Role of Protection Service

The role of the safe place/protective homes is to provide safe, unthreatening and inclusive space that minimizes risk of re-traumatization, abuse, neglect and maltreatment to help the victim to rebuild their lives and restore dignity.

- It is a temporary arrangement that enables a victim to recover from the trauma and reinvent herself as a dignified individual with well-formed identity and adequate skills to lead an independent life.
- The protection services, thus:
  - Ensures safety and security of the primary witness of sex trafficking
  - Ensures an enabling environment for the victim to heal
  - Facilitates a process of forming safe and therapeutic relationship between the victims and the care giver that supports victim's journey towards being a survivor (rehabilitated individual)
  - Facilitates a process of supporting the victim to recognize her ability skills to start a new life
  - Facilitates a process that enables the victim to use her skills to make informed choices, decisions to lead a dignified life

## Activity 3.2(a): Legal Provision and Compliances in Protection Homes

### Protection Homes - Legal Provisions

#### 1. Establishment and running of Safe Shelter / Protective Homes:

##### For children:

- Set up through a licensing process or a registration process under the specific legal provisions under Juvenile Justice (Care and Protection of Children) Act, 2000 (which was amended in the year 2012 and then again on 2015)
- Children's Home (Section 50, JJ Act 2015) Meant for care, treatment, education, training and rehabilitation of children in need of care and protection
- It clearly states that these facilities are being run by a Governmental organization or a voluntary or non-governmental organization registered under any law for the time being in force to be fit to temporarily take the responsibility of a child for a specific purpose

##### For Adults:

- Protective homes for women are set up under The Immoral Traffic (Prevention) Act, 1956 (TPA) (which was amended in the year 1986).
- ITPA, 1856 (amended in 1986): "protective home" means an institution, established or licensed as such under section 21), in which persons, who are in need of care and protection, may be kept under this Act and where appropriate technically qualified persons, equipment and other facilities have been provided.
- ITPA, 1856 (amended in 1986) Sec 21 (sub-section 2) states that No person or no authority other than the State Government shall, after the commencement of this Act, establish or maintain any [protective home or corrective institution] except under and in accordance with the conditions of a licence issued under this section by the State Government. Non-registration of Homes is considered as illegal and a criminal offence
- Failing to register a care institution can lead to legal action, penalisation of the Home management and closure of the institution by the legally competent authority
- The Safe Shelter/ Protective Homes is thus a space that is legally bound and need to have a clear authority to provide care services to the victims.

## Protection Homes - Legal Provisions (Cont.)

### 2. Victims admission into the Safe Shelters / Protective Homes:

- Victims' admission to a Safe Shelter/Protective Home is through the order legally competent body (Child Welfare Committee in case of Children and in case of adult victims).
- The Safe Shelter/Protective Home holds the victim witness - she is the primary witness in sex trafficking case
- Thus, the activities and components of protection services are also mandated Law.

## Protection Homes - Legal Provisions (Cont.)

### 3. Victims release from the Safe Shelters / Protective Homes:

- Victims' release from the Safe Shelter/Protective Home is through legally competent body (Child Welfare Committee in case of Children in case of adult victims).
- The Safe Shelter/Protective Home has to follow a series of procedures Home verification report, preparing the survivor for best possible and also prepare an after-care plan to support the survivor in the reintegration period.

## Activity 3.2 (b): Types of Protection Services Offered to Victims of Sex Trafficking

### Types of Protection Services Offered to Victims of Sex Trafficking

#### Emergency Shelter

- Emergency Shelter is where the victim is brought in immediately from the police station.
- A victim is kept in the ES for any duration for 1 day to 30 days depending on the individual case.
- The purpose is to provide immediate emotional support through counselling and earn trust of the victim as a place she can feel safe.
- Most legal formalities for evidence recording u/s 164 of IPC are conducted from this shelter
- Victims are also taken to medical emergencies and any conditions of HIV, pregnancy etc are detected from this shelter
- Once the victim is comfortable with living in the shelter, she is transferred to Adult or Children's shelter depending on her age

#### Transit/ Temporary Shelter:

##### For Children

- The objective of this shelter is to provide holistic healing and long term rehabilitation of victims through physical, emotional and psychological healing and life skill support.
- Child victims (below 18 years) are brought from Emergency shelter for rehabilitation and healing.
- Mostly victims stay at children's shelters for any duration upto the age of 18, or until their release orders from Child Welfare Committee.
- Shelter home follows a daily routine, which includes dorm management, school and study hours for 8 hours, cleanliness and maintenance of premises all managed and monitored by the young girls

##### For adults

- The objective of this shelter is to provide holistic healing and long term rehabilitation of victims through physical, emotional and psychological healing and life skill support.
- Adult victims (above 18 years) are brought from Emergency shelter for rehabilitation and healing.
- Mostly victims stay at adult shelters for any duration between 3 months to 3 years, depending on court release orders
- Shelter home follows a daily routine, which includes dorm management, skill development, cleanliness and maintenance of premises

## Transit/ Temporary Shelter:

### For Children

- Individuals requiring medical and psychological attention are taken care of on an on-demand basis besides regular sessions for the said purposes. Some mental health patients and pregnant and lactating girls are given special attention.
- Parent/Guardian visits are facilitated based on permissions given by Child Welfare Committee on a Sunday.
- Here children are encouraged to take up education seriously. Children are sent to learning center within the center to prepare them for normal school thereafter admitted in government and private schools outside the shelter as well as colleges outside the shelter depending on their educational qualifications.
- Victims/ survivors are released on a CWC order. The court scrutinizes the home investigation Report and gives the final direction regarding each case.

### For adults

- Individuals requiring medical and psychological attention are taken care of on an on-demand basis besides regular sessions for the said purposes
- Special care is taken for over-all personality development and grooming through exposure trips, leadership training, student management committees.
- Victims/survivors are released on a court order. The court scrutinizes the Home Investigation Report and gives the final direction regarding each case.

## After Care Home

- The objective of this Protective Home is the final preparation for Reintegration of survivors and indicates that the victim possesses the tools necessary to live a safe, sustainable life free from exploitation.
- These are primarily Group Homes where 5 to 6 survivors stay together in an independent house.
- Usually, these survivors have a source of income either employed or have started their own initiative to be economically independent.
- In this Home, survivors manage their group homes with little support from care givers
- Psychological counselling and medical support continues to be provided during this phase as well by the care givers

## Activity 4.2: Standard of Protection Services that needs to be met at Protection Homes

### Standard of Protection Service that needs to be met at Protection Homes

#### 1. Physical Infrastructure:

- The look and feel of the shelter and its location should make the victim feel safe and secure, on her arrival at the Home.
- Location of the shelter needs to be away from any transit location such as station, train station, auto stand.
- The location of the shelter should not be a dingy place that is crowded with people and shops all around (market place).
- Therapeutic structure that gives a feeling of calmness and safety

#### 2. Physical care:

- Fulfilling basic needs of the victim such as food, clothing, cosmetics, hygiene and sanitary material comprises of physical care

### Standard of Protection Service that needs to be met at Protection Homes (Cont.)

#### 3. Health care:

- Medical check up
- Attending to special medical needs- victims with HIV, pregnancy, mentally challenged or any other identified special need.
- On demand medical assistance for victims
- Regular medical check-up for early detection and attending to medical issues
- De-addiction/Detoxification

#### 4. Legal support:

- Legal aid for court appearance
- Legal aid for preparing the victim witness
- Legal aid for registering statements such as 164
- Legal aid for recovering her belongings from the place of exploitation
- Legal aid for civic entitlements

<p><b>5. Psychological care and support:</b></p> <ul style="list-style-type: none"> <li>• Trauma counselling - individual and group counselling</li> <li>• Life skill support</li> </ul>	<p><b>6. Educational and Vocational support</b></p> <ul style="list-style-type: none"> <li>• Age and aptitude appropriate education options</li> </ul>
<p><b>7. Livelihood support:</b></p> <ul style="list-style-type: none"> <li>• To provide employability training including basic numeracy, literacy, communication skills, personality development and familiarity with workspace culture and ethics</li> <li>• Provide viable and sustainable livelihood skills based on the existing job market (Suitable in the present job market)</li> <li>• Ensure job market based on the aptitude on trained survivors</li> </ul>	<p><b>8. Reintegration:</b></p> <ul style="list-style-type: none"> <li>• Preparing the survivor for reintegration</li> <li>• Exploring options along with the survivor for reintegration</li> <li>• Conducting home verification reports</li> <li>• Preparing the family and the community for reintegrating the survivor in the family/original community</li> <li>• Supporting the court procedures to obtain release orders</li> </ul>

## **SUPPLEMENTARY READING MATERIAL**

## **NEEDS OF THE VICTIM-PHYSICAL & PSYCHOLOGICAL**

When the victim arrives at the protective home, she comes with a complex basket of needs that need to be addressed. The needs can broadly be classified into 5 areas:

- Immediate/Basic Needs
- Physical Health Needs
- Psychological Health Needs
- Economic or Financial Needs
- Legal Needs

### **Immediate Basic Needs**

The basic needs of any human being is food, clothing and shelter. For a victim who has come from a severely abusive condition with damages on her physical self, this basic need also has to be mindfully planned to ensure special diet for victims with medical conditions or a victim who is a lactating mother. The home authorities, while ensuring cultural sensitivities should also respect the faith beliefs of the victim and provide for the clothing. The shelter for any a victim whether child or adult should provide for adequate privacy and adequate space.

### **Physical Health Needs**

In the place of exploitation, the victim has been subjected to all kinds of physical abuse - repeated rapes, beatings, neglect of health issues, unprotected sex, etc. She will be in need of medical attention for different health problems. It is important to do a complete medical examination to determine the state of her physical health and initiate appropriate treatment. Following is an illustrative list for which medical treatment might be necessary.

- STDs/HIV
- Tuberculosis/Respiratory Infections
- Fractures
- Cuts, bruises, injuries
- Chronic illness from poor hygiene
- Gynecological problems stemming from repeated abortions
- Malnourishment
- Aches and pains
- Chronic Fatigue
- Head injury and TBI
- Facial trauma including broken teeth

- Malaria
- Hepatitis B, Hepatitis C
- Pelvic Inflammatory Disease
- Cervical Cancer
- Untreated illness
- Over treatment with antibiotics leading to drug resistant infections

Note: If she has a child, the child too would require a medical examination.

### **Psychological Needs**

The victim has been subjected to prolonged trauma, which would have affected her mental health. She might be suffering from Post Traumatic Stress Disorder which will require professional intervention. Depending on her psychological state, she will require counseling, or de-addiction treatment, or psychiatric treatment. It is important to do a psychological evaluation so that the issues can be addressed. Some indicators that point to the need for psychological health interventions:

- Depression/being suicidal
- Tendency to self-harm
- Exhibits Phobia
- Post-Traumatic Stress Disorder (Anxiety, Nightmares, Flashbacks, Sensitivity to trauma triggers, Numbing, Irritability, Hyper vigilance, Startle reaction, Poor concentration, Loss of sense of future)
- Anxiety and Panic
- Eating Disorders
- Sleep Disorder
- Addiction and substance abuse
- Exhibiting feelings of Guilt and shame, Fear, Low Self-Esteem, Lack of confidence – over-confidence, Lack of trust, betrayal, Fear/Loss of safety,
- Being Moody
- Being Hostile
- Stockholm’s Syndrome (identifying with the abuser)
- Normalization of exploitation

### **Economic or Financial Needs**

The victim might have no financial resources, or even if she does, she might not have access to them. With prolonged years of trauma, she might have lost whatever skills/

education she might have had in her pre-trafficked life. So, she is not equipped for any alternative livelihood. So, she needs a rebuilding of skills or learn new skills so that she can have other livelihood options. Without this, there is a higher likelihood of her being re-trafficked when she leaves the shelter.

## Legal Needs

Since the victim is the primary witness and her testimony in court will be crucial in ensuring that the offenders are convicted, she will require legal support. Further, she may have lost all her civic documents, and with that her identity, she will need to rebuild her original identity.

## ROLE OF PROTECTION SERVICES IN VICTIM CARE

Victims of sex trafficking, subjected to sexual violence, go through irreversible psychological damage and are vulnerable to be infected by a range of sexually transmitted infections. Most often the issue of reintegration with the family becomes a distant reality as families are reluctant to accept responsibility for the victim's upbringing fearing negative societal impact or many a times it is difficult to reunite the victim with the family as they might be traffickers themselves. This aspect combined with HIV/AIDS completes the cycle of rejection.

Although institutional care ideally is the last option, there is absolutely no doubt that temporary/transit institutionalization is inevitable to facilitate holistic rehabilitation that includes psychological healing, economic empowerment and a restoration of civic identity. All this leads to the successful integration of a survivor in the society.

The victim, in the post rescue phase needs a space that facilities an unthreatening, safe and secured space to heal. Protective Home plays this very important role of creating an enabling environment for her healing.

The law also recognizes that post rescue, the victims need a basket of services as the long years of sexual exploitation have left multiple impacts on her. To list a few:

- She might be suffering from several infections and diseases, including HIV.
- She might be suffering from addiction and substance abuse.
- She might be emotionally and psychologically fragile.
- She might be aggressive and angry with the rescuers.

- She identifies with the offenders and believes they are her people and she has been removed from them.
- She has no place to go to.
- She has no skills for an alternative livelihood.
- She has no independent financial resources.
- She trusts no one.
- She could be suicidal.

Given all of the above, the law recognizes that the primary need of a victim is to feel safe and protected, so that the healing process could begin. Her primary needs that are to be met are food, clothes, shelter, health, and psychosocial support. Also, it is necessary to protect the victims from the offenders and their influence. It is in this context that protective homes become a necessity. The best interest of the victim is now the primary consideration.

For a person who has faced years of sexual slavery and was forced to be in the exploitative situation that she believed was normal, a protective home is a therapeutic healing space that offers the victim the much-needed care and support on several fronts - physical, psychosocial, economic, legal and civic.

Thus, the Protective Homes acts as a temporary place for victims to cope with their trauma, regain their selfhood and rediscover their strength and skills to live a dignified, independent life free of violence. These protective homes are the space where a victim starts her journey to become a survivor. These spaces provide a safe, secure, non-discriminatory, non-intimidated space where the victim of sex trafficking understands her ability and skills as an individual. These protective homes are space for restoring her dignity and to facilitate a process to help her to get integrated to the society. The defining factor of whether the victim would attain survivor-hood or she would be re-trafficked depends on the process of healing and care experienced in the Safe Shelter/ Protective Homes.

The protective homes also plays a very important role in supporting the legally competent authority to do their jobs effectively by ensuring that the victim is

- a) in good health
- b) mentally stable
- c) provided legal information
- d) motivated to become a witness in the case

These safe shelters/ protective homes play an important role in housing and in taking care of the prime witness of the crime. In the sex trafficking scenario, the primary witness is the victim herself. Unlike other forms of trafficking, such as labour exploitation where the witness could be many people who have seen the child working, parents of the child, or other onlookers. But in cases of sex trafficking, the primary witness is the victim and thus the care institutions/Protective Home is actually holding the key evidence in the form of victim in their care.

Following are the important features of protective home:

- The protective homes are the space where the primary witness of the trafficking crime resides
- The protective homes create an enabling environment for its residents to heal – physically and psychologically
- It provides a sense of safety and security to the residents which then enables a resident to speak openly with the care givers
- Through its enabling, non-intimidating processes, it ensures that the resident is able to take informed decision on their lives
- It also prepares residents for their legal battle against the trafficker
- This is the space where the residents rediscover themselves as a worthy individual who have skills that can help her in leading a dignified life.

## **LEGAL COMPLIANCES IN PROTECTION HOMES**

Institutional care refers to the care, protection, rehabilitation and social reintegration of persons in difficult and vulnerable circumstances in an institutional setting. These institutions operate under the guidance and supervision of care giving professionals whose actions are governed by the standards as prescribed by the law of the land. Actions of care institutions are designed to address physical, psychological, emotional, social, educational, cultural and economic needs of victims in an age appropriate manner.

### **Registration/License**

The registration of homes/shelters is absolutely mandatory. Holding the license authorizes setting up and running a safe shelter. Failing to register a care institution can lead to legal action, penal action against Home Managers and closure of the institution by the legally competent authority.

## **Legal and Policy Instruments of India Governing Institutional Care**

- Juvenile Justice (Care and Protection of Children) Act, 2015
- Juvenile Justice (Care and Protection of Children) Model Rules, 2016
- Immoral Traffic Person's Prevention Act, 1986

### **The Institutional Care and Protection of Children who are rescued from trafficking**

Child Care Institution (hereinafter referred to as CCI) is defined to mean Children Home, Open Shelter, Observation Home, Special Home, place of safety, Specialized Adoption Agency and a fit facility recognized under the JJ Act, 2015 for providing care and protection to children, who are in need of such services [Section 2 (21)].

The JJ Act, 2015 prescribes for mandatory registration of all institutions, whether run by State Government or by NGOs, which are meant, either wholly or partially, for housing children in need of care and protection, under the Act, within a period of six months from the date of commencement of the Act, regardless of whether they receive grants from the Central Government, State Government or private funding. CCIs having valid registration under the earlier JJ Act, 2000; shall be deemed to be registered under the new law of 2015 (Section 41). Non-registration of a CCI is considered an offence. A person or persons in charge of a CCI shall be punished with imprisonment of upto 1 year or a fine of not less than Rupees One lakh or both.

### **The Institutional Care and Protection of Women who are rescued from trafficking**

The Immoral Traffic Prevention Act, 1956 (ITPA) which was amended in 1986 is the main law for preventing and combating trafficking in human beings in India for the purposes of prostitution. The Law clearly defines the description and the compliance protocols of the provisions of institutional care and protection mechanism of victims of sex trafficking. Sec 21 of ITPA mandates the establishment of Protective Home either by the government or by a licensed non-government organization. As per Sec 17(4) of ITPA the court specifies the duration of the stay of a victim in a Protective Home which can be not less than 1 year and not more than 3 years.

### **Safe Space/Protective Homes hosts the victim witness**

In most cases of sex trafficking, the primary witness is the victim herself. Unlike in the case of other forms of trafficking, such as labour trafficking, the witness could be other people who have seen the child working, parents of the child, or other onlookers. But in

the sex trafficking cases, the primary witness is the victim and thus the care institutions actually are providing safe stay to victim witness.

The victims are in **Safe Space/Protective Homes** through the order of legally competent body. These safe shelters/ protective homes play an important role in housing and taking care of the prime witness of the crime. The establishment of the shelter is thus a space that is legally bound and need to have a clear authority to provide care services to the victims.

Caregivers need to be equipped with legal knowledge to perform their duties effectively and also address crisis situations in a right manner, following the prescribed legal provision, failing to do so may result in legal consequences.

### TYPOLOGY OF PROTECTION HOME

According to law there are the following types of safe shelters/ protective homes

TYPE	NATURE
<b>FOR CHILDREN</b>	
<b>Children’s Home (Section 50, JJ Act 2015)</b>	Meant for care, treatment, education, training and rehabilitation of children in need of care and protection.
<b>Open shelter (Section 43, JJ Act 2015 and ICPS)</b>	Meant for vulnerable children (homeless, street children, drug addicts, beggars etc.) in urban/semi-urban areas.  It is a short-term community-based facility for children in need of residential support that protects them from abuse. Open shelter is established by the State Government either by itself or through voluntary or non-governmental organizations.
<b>Observation Home (Section 47, JJ Act 2015)</b>	Meant for temporary reception, care and rehabilitation of children in conflict with law during pendency of any inquiry. Observation home is established by State Government in every district or group of districts either by itself or through voluntary or non-governmental organizations.

<b>Special Home (Section 48, JJ Act 2015)</b>	<p>Meant for reception and rehabilitation of juvenile in conflict with law.</p>
<b>Place of Safety (Section 49, JJ Act 2015)</b>	<p>Any place or institution, other than a police lock-up or jail that can temporarily receive and take care of children alleged or found to be in conflict with law.</p> <p>The institution is meant for a person above the age of 18 years or a child between 16 to 18 years of age who is accused of or convicted for committing a heinous crime.</p>
<b>Home for Special Needs Children (ICPS and Sections 50 (2), 53 (ii) &amp; (iii), JJ Act 2015)</b>	<p>For children with special needs (infected/affected by HIV/AIDS, drug addicts and mentally/physically challenged), either in the form of a specialized unit within an existing home or a specialized shelter home for the purpose.</p>
<b>Fit Facility (Section 51 (1), JJ Act 2015, and Rules 23 (13) &amp; 27, JJ Rules 2016)</b>	<p>Refers to facility being run by a Governmental organisation or a voluntary or non-governmental organisation registered under any law for the time being in force to be fit to temporarily take the responsibility of the child for the specific purpose.</p>
<b>Specialised Adoption Agency (Section 65, JJ Act 2015)</b>	<p>An institution established by the State Government or by a voluntary/ nongovernmental organisation for housing orphans, abandoned and surrendered children, placed there by order of the CWC, for the purpose of adoption.</p>
<b>FOR ADULTS</b>	
<b>Protective Homes (Section 21(1) in The Immoral Traffic (Prevention) Act, 1956)</b>	<p>“protective home” means an institution, by whatever name called (being an institution established or licensed as such under section 21), in which 3 [persons], who are in need of care and protection, may be kept under this Act 4 [and where appropriate technically qualified persons, equipment and other facilities have been provided,] but does not include- (i) a shelter where 5 [under trials] may be kept in pursuance of this Act, or (ii) a corrective institution;]</p>

<p><b>Corrective Homes (Section 21(1) in The Immoral Traffic (Prevention) Act, 1956)</b></p>	<p>An institution, established or licensed as such under section 21), in which [persons], who are in need of correction, may be detained under this Act, and includes a shelter where [under trials] may be kept in pursuance of this Act;]</p>
<p><b>Protective Homes and Corrective Homes- ITPA, 1856 (amended in 1986) sec 21 states that Protective homes</b></p>	<p>Section 21, sub-section 2 of ITPA clearly states that No person or no authority other than the State Government shall, after the commencement of this Act, establish or maintain any [protective home or corrective institution] except under and in accordance with the conditions of a licence issued under this section by the State Government.</p> <p>Section 21, subsection 10 of ITPA, clearly states that Whoever establishes or maintains a [protective home or corrective institution] except in accordance with the provisions of this section, shall be punishable in the case of a first offence with fine which may extend to one thousand rupees and in the case of second or subsequent offence with imprisonment for a term which may extend to one year or with fine which may extend to two thousand rupees, or with both.</p>

Apart from the above typology of safe shelters/ protective homes, the types of safe shelters/ protective homes could be divided into three types based on the stages of care and services needed by the victims:

<p><b>Emergency Shelter</b></p>
<ul style="list-style-type: none"> <li>• Emergency Shelter(ES) is where the victim is brought in immediately from the police station.</li> <li>• A victim is kept in the ES for any duration for 1 day to 30 days depending on the individual case.</li> <li>• The purpose is to provide immediate emotional support through counselling and earn trust of the victim as a place she can feel safe</li> <li>• Most legal formalities for evidence recording u/s 164 of IPC are conducted from this shelter</li> <li>• Victims are also taken for medical emergencies and any conditions of HIV, pregnancy etc are detected from this shelter</li> </ul>

- Once the victim is comfortable with living in the shelter, she is transferred to Adult or Children's shelter depending on her age

### **Transit/Temporary Shelter**

#### **FOR CHILDREN**

- The objective of this shelter is to provide holistic healing and rehabilitation of victims through physical, emotional and psychological healing and life skill support.
- Child victims (below 18 years) are brought from Emergency shelter for rehabilitation and healing.
- Mostly victims stay at children's shelters for any duration upto the age of 18, or until their release orders from Child Welfare Committee
- Shelter home follows a daily routine, which includes dormitory management, school and study hours for 8 hours, cleanliness and maintenance of premises all managed and monitored by the young girls
- Individuals requiring medical and psychological attention are taken care on a case to case basis. Some mental health conditions, pregnant and lactating girls are given special attention.
- Parent/Gaurdian visits are facilitated based on permissions given by Child Welfare Committee on a sunday.
- Here children are encouraged to take up education seriously. Children are sent to learning center within the center to prepare them for normal school. Thereafter admitted in government and private schools outside the shelter as well as colleges outside the shelter depending on their educational qualifications.
- Victims/survivors are released on a CWC order. The court scrutinizes the Home Investigation Report and gives the final direction regarding each case.

#### **FOR ADULTS**

- The objective of this shelter is to provide holistic healing and rehabilitation of victims through physical, emotional and psychological healing and life skill support.
- Adult victims (above 18 years) are brought from Emergency shelter for rehabilitation and healing.
- Mostly victims stay at adult shelters for any duration between 3 months to 3 years, depending on court release orders
- Shelter home follows a daily routine, which includes dormitory management, skill development, cleanliness and maintenance of premises
- Individuals requiring medical and psychological attention are taken care on a case to case basis and provided specialized care

- The individuals who require specialized attention such as opportunistic infections, lactating mothers are provided special care.
- Special care is taken for over-all personality development and grooming through exposure trips, leadership training, student management committees.
- Victims/survivors are released on a court order. The court scrutinizes the Home Investigation Report and gives the final direction regarding each case.

### After Care Homes

- The objective of this Protective Home is the final preparation for **Reintegration** of survivors and indicates that the victim possesses the tools necessary to live a safe, sustainable life free from exploitation.
- These are primarily group Homes where 5 to 6 survivors stay together in an independent house. Usually, these survivors have a source of income either employed or have started their own initiative to be economically independent.
- In this Home, survivors manage their group homes with little support from care givers
- Psychological counselling and medical support continues to be provided during this phase as well by the care givers

## STANDARDS OF PROTECTION SERVICES

### Therapeutic structure:

This is an important aspect of the Home. The location of shelter, the infrastructure, the look and feel of the space is an important aspect for a victim not only to feel safe and secure but also to embark on a journey to heal. Although a Protective Home is a custodial care institution, the structures that make it 'home like' without compromising on the security aspect constitute the therapeutic structure. Therapeutic structures are designed considering the light and ventilation in a given space.

### Therapeutic community:

The therapeutic community is a sum total of the structures and processes that contribute to the over-all healing of a victim. In this approach every staff in the Protective Home has a role to play including the security staff. The responsibility of creating a healing environment does not rest only on the psycho-social counselor but also in each of the care-giving staff. The healing journey is triggered right from the time a victim is admitted in the shelter. The protocol followed in receiving a

new victim, frisking her belongings, documenting the case-sheet, orienting towards shelter; all of it and more contributes to the therapeutic community.

A very important component of building a therapeutic community is the involvement of survivors in the over-all management of the home. This accelerates healing and also ensures:

- Survivors participation in running the home and its programs
- Survivors closely monitoring the standards of care and ensuring remedial measures.
- Peer support in mutual healing.
- Preempting and taking care of any perception of risk or threat to the life of the victim.

### **Physical care:**

Physical care ensures that the basic needs of a victim such as food, clothing, cosmetics, hygiene and sanitary materials, are taken care.

### **Health care:**

While preliminary health diagnostics should be done for all victims the health needs of a victim varies person to person from medical care for sexually transmitted infections to de-addiction/detoxification. Care also should be taken for victims in special conditions such opportunistic infections in case of a HIV positive person or the pre-natal care for pregnant victim.

### **Psychological care and support:**

Facilitating healing care through various means such as individual counseling, group therapy and specialized psychiatric care constitutes psychological care and support. The overall ambience in a Protective Home plays a major role in supporting the psychological support component.

### **Educational and Vocational support:**

The most visible face of dignity for any person is the confidence one gains with education or vocational trade. This is an important need of the victims as she gets prepared for her new life of independent, dignified living. The caregiver needs to evolve age-appropriate educational program for victims – both formal and informal options to be explored. Similarly the vocational trade selected should be viable in the job market and provide sustainable income.

**Legal support:**

Informing the victim regarding her legal rights and the legal statutes that govern her stay in the Protective Homes becomes a big part of the legal support. For victim who are willing to testify preparing them for 164 statement, accused identification and trail is a specialized area of legal aid which requires networking and support from other stakeholders such as police and public prosecutor.

**Support for social reintegration:**

The ultimate goal of any care process is to reintegrate a victim to the mainstream world with dignity. This is a process that also involves other significant people in victim's life which may include her parent, children, husband, relatives etc.

MODULE

3

VICTIM FRIENDLY HOME  
MANAGEMENT



## MODULE 3 - VICTIM FRIENDLY HOME MANAGEMENT

<b>Objectives</b>	<p><b>The participants will be able:</b></p> <ul style="list-style-type: none"> <li>• To understand the importance of the first interaction of the victim and receiving them into the Protection Home</li> <li>• To identify their role through the process of reception and reintegration of the victim</li> <li>• To gain clarity and understanding of the importance of the First Response/Immediate Care of the Victims</li> <li>• To gain confidence and have appropriate tools to manage the process of induction and rehabilitation of the victim in the Protection Home</li> <li>• To understand the concept and context of rehabilitation for victims of trafficking, and the different components of rehabilitation</li> <li>• To better understand the context of Victim's trauma and the psychological needs</li> <li>• To identify the purpose and response mechanism of psychological assistance to the victim</li> <li>• To understand the victim's education/livelihood needs and gather clarity in the role of the Service provider in offering educational/vocational support</li> <li>• To understand the importance of victim's civic needs towards her Holistic Rehabilitation</li> </ul>
<b>Content</b>	<p>Session 1: Receiving New Victim in Protection Home            Session 2: First Response/Immediate Care for New Victims            Session 3: Rehabilitation of Victims of Trafficking            Session 4: Mental Health Support for the Victims (Psychological Care)            Session 5: Educational/Vocational Support            Session 6: Civic Rehabilitation</p>
<b>Expected Outcome</b>	<p><b>The participants would:</b></p> <ul style="list-style-type: none"> <li>• Understand the specific processes that needs to be in place from the stage of first interaction with the victim to the time of exit which will make the home more victim friendly</li> <li>• Be able to gather better understanding on each of the steps involved in responding to a victim in a home setting and the specific goals served by that step</li> </ul>

- Able to practically learn the different components of a trauma responsive intervention
- Understand the specific methods of conducting life-skills, employability training, livelihood training and educational opportunities
- Understand the role of a service provider in forming active government linkages to ensure that the victim gets access to civic entitlements

**The Trainer would:**

- Be able to gather an understanding of the level of on-ground skills the service provider has in holistic care of a victim
- Be able to understand the overall impact of the shelter homes/ protective homes in the preparedness of a survivor to successfully reintegrate back to the society

### **Session 1: Receiving New Victim in Protection Home**

Estimated time : 60 mins

Material required : Chart Paper/White Board, Markers, Projector and Screen

Methodology : Role Play and Active audience participation, Brainstorming, Group Work and Group Discussion, Presentation

### **Activity 1.1: Role Play- Receiving a New Victim of Sex Trafficking in Protection Home**

- Ask four participants to volunteer for a role play
- Nominate one volunteer to play the role of a new victim, and the others to take on the role of
  1. Protection Home Manager
  2. Counselor, and
  3. An Older survivor of trafficking currently being rehabilitated in the Protection Home (peer counselor)
- Explain the scenario of the role-play, where a new victim has just been admitted at the Protection Home, and the three nominated representatives of the Home will have to act within the scope of their respective roles and responsibilities on their first interface with the new victim.
- Give the participant volunteers five minutes to prepare before they act out the

given scenario.

- Ask the rest of the audience to minutely observe the role play and make note of the proceedings elucidated in the Role Play
- Give the participant volunteers 10 mins to act out the scenario

### **Facilitator's Note:**

Make sure you take notes on the protocols that were followed and those that have been missed. This will allow you to plug in important information and comments that may have been overlooked or missed out, and emphasise on the protocols that needs to be followed. While giving feedback make sure you first reiterate the positive aspects.

## **Activity 1.2: Group Presentation and Group Discussion**

- After the Role Play has been completed, encourage the audience to place their comments and thoughts on what they observed
- Also ask the volunteer participants to express their thoughts, feelings and comments on what they felt about the proceedings that they enacted. Start with the participant who enacted the victim and then allow other acts to share.
- Request the participants who were in the role play to de-brief by introducing themselves with their real name.
- Facilitate the discussion, through active audience participation, by placing the following questions with the audience:
  - Which part/s of the proceedings enacted do you agree with? Why?
  - Which part/s of the proceedings do you think need to be changed? Why?
  - What would you like to add to what has been elucidated in the role play?
  - Is there anything that you are confused about and would like to clarify?
- Encourage a couple of participants from the audience to act out the given scenario with the changes/additions that they have given feedback on. This will help achieve a comparative lens for the audience.
- Write down the salient points that have been shared and discussed on a chart paper/white board.

## **Activity 1.3: Presentation by the Facilitator**

- Categorise the proceedings of the enacted role play as follows:
  - Receiving the new victim
  - Screening of the new victim

- Orientation of the new victim
- Documenting the Case History of the new Victim

Summarise the discussion points of the role play with the help of a PowerPoint presentation. The presentation must clearly articulate the protocols that need to be followed when a fresh victim is received at the Protection Home. *(refer to Module 03 Resource Guide for Activity 1.3 – for information on the above-mentioned categories above)*

### **Session 2: First Response/Immediate Care for New Victims**

Estimated time: 60 mins

Material required: Chart Papers/Flip Chart/White Board, Markers/Sketch pens.

Methodology: Group Work, Group Discussion, Brain storming, Presentation and discussion

The purpose of this section is to provide service delivery organizations with a step-by-step guide on how to best assist from the point of first screening and status determination as a victim of trafficking, through to the referral and reintegration process, whether in the victim's country of origin, the country of destination or a transit country

#### **Activity 2.1: Group Work on First Response/Immediate Care of new Victim in Protection Home**

- Divide the participants in four groups.
- Provide one of the following topics to each group for group work:
  1. **Health Care:** Basic Diagnostics, De-addiction/Detoxification, Palliative care, anti-natal care
  2. **Food/Nutrition:** Care for special needs, right based food serving (regional/cultural respect), resident ownership in food/menu
  3. **Stay/Accommodation:** Diffusing aggression, special health needs, group dynamics
  4. **Preparing for Exit during admission:** Importance of planning for reintegration right at the admission itself
- Ask the groups of participants to brainstorm on the given topics with the aim to answer the following questions:
- Do Health/Food and Nutrition/Accommodation/Reintegration Plan form an integral part of Immediate Care/First Response in a Protective Services? Why?

- What are the various aspects of the specific needs of a victim that can be addressed through these services?
  - What aspects of victim's rights are addressed through these services?
  - What care needs to be taken in providing these services?
  - Do you think that a peer educator could play an important role in assisting the victim in accessing these first response/immediate care services? How?
  - Can you think of any other immediate need that must be responded to when a new victim is inducted in the Protective Home?
- Give at least 15 mins for this group work

### **Activity 2.2: Group Presentation and Presentation by the Facilitator**

- Nominate one rapporteur from each group to make a presentation of their respective group work.
- Write down the salient points shared by each group on a chart paper/write board
- Encourage the larger group of participants to place their comments, feedback or queries on the presentations made.
- Summarise the group discussion with the help of a PowerPoint presentation (*refer to Module 03 Resource Guide for Activity 2.2*)

### **Session 3: Rehabilitation of Victims of Trafficking**

Estimated time : 30 mins

Material required : Projector, Screen and Laptop

Methodology : Group Discussion, Role Play and Presentation

### **Activity 3.1: Presentation by the Facilitator- What is Rehabilitation for Victims of Trafficking?**

- Open the session with asking the participants on what is their perception of rehabilitation and what do they think constitutes holistic rehabilitation of a trafficked person.
- Ensure most of participants have given their inputs.
- Present a summary of all the inputs with additional remarks on the points not covered with the help of a PowerPoint Presentation. (Refer to Module 03 Resource Guide for Activity 31.)

### Activity 3.2: Brain Storming on the Various Components of Rehabilitation

After setting the context with the help of the presentation, divide the participants in three groups

- Give the following topics to the respective groups:
  - Group 1: Psychological Rehabilitation
  - Group 2: Economic Rehabilitation
  - Group 3: Civic Rehabilitation
- Instruct the participants to engage in individual group wise discussion responding to the following questions:
  - List out the various given rehabilitation needs of the victim (as per the topics provided)
  - What are the various services that the Protective Home should provide in order to address these needs?
  - How would these services eventually benefit the victim?
- Instruct each group to present their deliberations as a role-play

### Activity 3.3: Role Play Presentation

- Instruct each group to make a presentation of their respective role-play.
- Allow comments, queries and inputs for the larger audience.
- Wrap up the session by mentioning that the upcoming sessions would further elaborate on the components of Rehabilitation.

#### **Session 4: Psychological Rehabilitation and Support to the Victims**

Estimated time : 60 mins

Material required : Chart Papers/Flip Chart/White Board, Markers/Sketch pens, Projector, Screen and Laptop

Methodology : Game and Game Analysis, Brainstorming, Group Discussion, Presentation and Open Forum Discussion

### Activity 4.1: Blind Fold Game

- Create open space in the training room. Make sure there are no immediate obstacles within the open space created.
- Pair off the participants, and designate one partner in each couple as the navigator (guide) and the other to be the blindfolded. The guide then slowly spins the

blindfolded partner around so that they lose their sense of direction.

- The guide then proceeds to give the partner verbal clues to guide them, without ever touching their partner (e.g. “About five steps ahead, there is a chair. By-pass it slowly.”) The guide alone is responsible for his/her partner’s safety and should therefore act as his/her partners’ ‘eyes’, navigating to avoid all obstacles.
- It is imperative that the guide takes his/her role seriously; as solely s/he is responsible for his or her partner’s safety and must therefore navigate his/her partner to avoid all obstacles. Repeat the same game switching partner roles.
- At the end of the icebreaker, you can ask the participants to reflect upon their experiences and share with one another how it felt to guide, or be guided (see sample questions in Facilitator’s Note).

### **Facilitator’s Note:**

#### **Sample Questions:**

- How did it feel to be in charge of someone’s safety and well-being?
- As the guide, did you experience some frustration when your partner misinterpreted your cues? Did you have trouble restraining yourself from physically guiding your partner?
- As the person being guided, did you have any difficulty in trusting your partner while blindfolded? Why or why not? Did you ever doubt their capability of navigating you safely?
- Did you ever feel afraid or in danger?

To sum up the session and the purpose of the game, process the same along the following guideline:

Share with the audience that this game can be linked to the relationship developed in Care Provider-Victim interactions, whereby the Care Provider are supposed to represent support and protection, and, ideally, the victim is able to place their trust in the Protection Home staff. Another parallel that can be drawn from this icebreaker is that, upon being blindfolded, the participants lose their sense of security, orientation, and even confidence. These feelings of insecurities are common to the trafficked person, albeit on a much deeper level, since they faced multiple traumas, both physically and psychologically. Furthermore, the blindfolded person will naturally experience some hesitation in ‘blindly following’ their guide’s directions – on a small scale, this reluctance is indicative of the strong sense of mistrust and doubt that has become engrained in the victim after a long string of deceptions, betrayals and lies.

## Activity 4.2: Presentation by the Facilitator on Trauma Care and its Components

- With the help of a PowerPoint Presentation (*refer to Module 03 Resource Guide for Activity 4.2*) take the audience through a discussion on understanding trauma of victims of sex trafficking and the appropriate response mechanism.
- Explain to the audience that: A psychological approach has been described as the most appropriate way of comprehending and dealing with mental well being of the victims of trafficking. Taking a mental health approach implies a link between social and cultural factors and the functioning of the 'psyche' or, more generally, mental well being, that will help build resilience in the victims in overcoming the trauma from being in situation of trafficking and exploitation.

## Activity 4.3: Brainstorming on the Role of the Peer Supporter (senior resident survivor)

- Request the group of participants to divide themselves in pairs.
- Provide the participants with the following questions:
  - Do you think it is appropriate to involve the senior resident survivors of Protection Home as peer supporter of victims of trafficking?
  - What role can the Peer Supporter (senior resident survivor of the Protection Home) play in victim care?
  - Do you think engaging peer supporter will allow the victim to cope better with their trauma? How?
  - What are the various ways one can engage the survivor in helping the victim?
- Ask one of the participant in the pair to assume the role of a senior resident survivor of the Protection Home and the other participant in the pair to assume the role of the new victim.
- Encourage the participants to have one to one discussion in respective pairs and find answers to the given questions.
- Ask the participants to share their responses in the larger plenary.
- Make note and write down the points shared by the participants on a chart paper/ white board, while engaging the participants in a discussion.
- Close the session ensuring the following is reiterated:
  - When a new victim comes into the Protective Home she feels alienated and therefore, acts defensive. Someone closer to her age and who also

shares similar experiences will make the new victim feel relaxed and being empathised with.

- An older resident survivor (peer supporter) will always remember the feeling of anxiousness that she had experienced when she was a new entrant to the Protective Home. Hence, she will be able to proactively offer support and counsel the new victim.
- All Protective homes have norms and guidelines – the senior resident should ideally be able to orient the new victim with relevant information on the rules, time, routine, etc.
- The peer educator should be distinct and be clearly identified in the Home (with a *May I Help You* badge) as the go to person for all kinds of first level questions and queries.
- In situations where the new victim is physically and emotionally reacting in a manner that may be self-harming or harmful to other residents, the peer educators, along with counsellor/staff members, will have a role in protecting the new victim and other resident from potential harm.
- The peer supporter should also be trained on the ground rules and practices of confidentiality.

### **Session 5: Educational/Vocational Rehabilitation and Support to the Victim**

Estimated time: 60 mins

Material required: Projector and Screen

Methodology: Presentation and discussion

#### **Activity 5.1: Presentation by the Facilitator on Educational/Vocational Support**

- With the help of a PowerPoint Presentation (*refer to Module 03 Resource Guide for Activity 3.1*) take the audience through a discussion on understanding importance of Educational/Vocational Support for victims of trafficking and the appropriate response mechanism of the Protective Service.
- Encourage the audience to place their queries, clarifications and comments on the content of the presentation.

## **Session 6: Civic Rehabilitation**

Estimated time : 60 mins

Material required : Chart Papers/Flip Chart/White Board, Markers/Sketch pens, projector and screen

Methodology : Group Work and Group Discussion, Presentation and active audience participation

### **Activity 6.1: Presentation by the Facilitator on Civic Rehabilitation**

- With the help of a PowerPoint Presentation (*refer to Module 03 Resource Guide for Activity 3.1*) take the audience through a discussion on the concept of civic rehabilitation and the importance of the same as a key component of rehabilitation for victims of trafficking.
- Encourage the audience to place their queries, clarifications and comments on the content of the presentation.

# **WORKSHEETS**

## Activity 1.3: Content for Facilitators PowerPoint Presentation on ‘Receiving the New Victim in Protection Home’

### Topics Covered in the Presentation:

- Receiving the New Victim
- Screening of the New Victim
- Orientation of the New Victim
- The Template for Documenting Case History of the Victim (Case Management)

### RECEIVING THE NEW VICTIM

- LETTER FROM THE LEGALLY COMPETANT BODY-COURT/CWC
- ALL LEGAL DOCUMENTS-FIR, MEDICAL REPORT TO BE CHECKED
- ESCORTED BY POLICE AND IN CASE OF CHILDREN BY SOCIAL WORKERS
- RECEPTION TO BE CULTURALLY SENSITIVE
- ENSURE THE PRIVACY OF VICTIM WHEN SECURITY PROTOCOLS ARE APPLIED-FRISKING ETC
- TAKE CARE OF IMMEDIATE NEEDS OF THE PERSON-WATER/FOOD, WELCOME KIT
- ENSURE NO COMMUNICATION GAPS DUE TO LANGUAGE

## **SCREENING OF VICTIMS**

### **INFORMATION FROM GENERAL QUESTIONS AND OBSERVATION**

- Age of the new victim
- Sex of the Victim
- Nationality
- Documents related to the identity of the victim
- The background/context of the victim
- Signs of Abuse
- Assessment of referring agency (eg. law enforcement agency)

## **SCREENING OF VICTIMS**

- ONLY TRAINED STAFF SHOULD DO THE INTERVIEW
- ENSURE AN OPEN/INFORMAL ENVIRONMENT
- DO NOT INTERROGATE OR CROSS-QUESTION
- ALLOW THE VICTIM TO OPEN UP AT HER OWN PACE/DO NOT PUSH
- OBSERVE SIGNS OF PAIN/DEPRESSION, NORMALIZATION OF EXPLOITATION, ANXIETY, RESISTANCE, WITHDRAWAL SYMPTOMS
- EXPLAIN THE PURPOSE OF THE SAFE HOME, THE SUPPORT SHE CAN EXPECT AND AN ASSURANCE OF CONFIDENTIALITY.

## **ORIENTATION OF THE NEW VICTIM**

- RULES AND REGULATIONS OF THE HOME
- TIME-TABLE AND EXPECTATIONS FROM RESIDENTS
- PHONE CALL TO THE FAMILY
- PHYSICAL TOUR OF THE HOME BY THE PEER COUNSELOR
- ROOM ALLOCATION AND DUTIES
- NECESSARY CONTACTS IN CASE OF ANY CONCERNS

## The Template for Documenting Case History of the Victim (Case Management)

### CASE HISTORY

Case/Profile No/VID No.....

Date & Time.....

FIR number .....

Legally Competent Body who admitted (CWC/Court)-

#### A. PERSONAL DATA

**Name**.....

**Age at the time of admission**.....

**Religion**

- Hindu (OC/BC/SC/ST)
- Muslim/Christian/Other (pl. specify)

**State/Country & Native District:**

#### **Background before trafficked**

**Category (tick as applicable):**

- Separated from family
- Abandoned/deserted
- Victim of exploitation and violence (give detail)
- Run-away
- Any other

**Reasons for leaving the family**

- Abuse by parent(s)/guardian(s)/step parents(s)
- In search of employment

- Peer group influence
- Incapacitation of Parents
- Criminal behaviour of Parents
- Separation of Parents
- Demise of Parents
- Poverty
- Domestic violence
- Others (please specify)

### **Types of abuse met by the victim**

- Verbal abuse – parents/siblings/ employers/others (pl. specify)
- Physical abuse
- Sexual abuse parents/siblings/ Employers/others (pl. specify)
- Others – parents/siblings/ employers/others (pl. Specify)

### **After being trafficked**

#### **Types of ill-treatment met by the victim**

- Denial of food
- Beaten mercilessly
- Causing injury
- Blackmail
- Threats & Intimidation
- Detention
- Other (please Specify)

#### **Exploitation faced by the victim**

- Extracted work without payment
- Little (low) wages with longer duration of work
- Sexual exploitation
- Physical torture
- Others (pl. specify)

#### **Health status of the victim before admission.**

- Respiratory disorders - present / not known / absent

- Hearing impairment - present / not known / absent
- Eye diseases - present / not known / absent
- Dental disease - present / not known / absent
- Cardiac diseases - present / not known / absent
- Skin disease - present / not known / absent
- Sexually transmitted diseases - present / not known / absent
- Neurological disorders - present / not known / absent
- Mental retardation - present / not known / absent
- Physical handicap - present / not known / absent
- Urinary tract infections - present / not known / absent
- Others (pl. specify)- present / not known / absent

**With whom the victim was staying prior to admission**

**Contact with parents/guardian/friends/spouse**

**Details of disability, if any**

**Habits**

- Smoking
- Alcohol consumption
- Drug use (specify)
- Gambling
- Substance Abuse
- Any other

**Educational status**

**Details of Livelihood Skills**

- Any Skill known
- Any employment before being trafficked
- Income status

## Activity 2.2, Immediate Care of New Victims

### HEALTH CARE

- FACILITIES FOR PRILIMINARY HEALTH ASSESSMENT
- PROVISION FOR DAILY HEALTH CHECK UP
- SPECIAL MEDICAL FILE/FOLDER OF EACH RESIDENT
- TREATMENT FOR DE-ADDICTION, DETOXIFICATION, SUBSTANCE ABUSE
- CARE AND SUPPORT FOR HIV POSITIVE PERSONS
- REFERRAL MEDICAL SUPPORT-ART DRUGS, PSYCHIATRIC CARE,ANTI-NATAL CARE, SPECIAL MEDICAL CONDITIONS, PALIATIVE CARE AND STI/RTI
- SPECIAL DIET FOR LACTATING MOTHERS AND FOR SPECIAL MEDICAL CONDITIONS

### FOOD AND NUTRITION

- FOOD SHOULD BE NUTRITIOUS AND PREPARED IN HYGIENIC CONDITIONS.
- MENU SHOULD BE PREPARED BY THE HOME COMMITTEE KEEPING IN MIND AVAILABLE BUDGET
- SPECIAL DIET FOR SICK AND INFIRM
- INTEGRATE AS MUCH AS POSSIBLE CULTURALLY SENSITIVE COMPONENTS
- DINING HALL TO BE MAINTAINED IN A WAY THAT ENSURES THE DIGNITY OF THE PERSON (NO CUSTODIAL ELEMENT IN FOOD DISTRIBUTION)

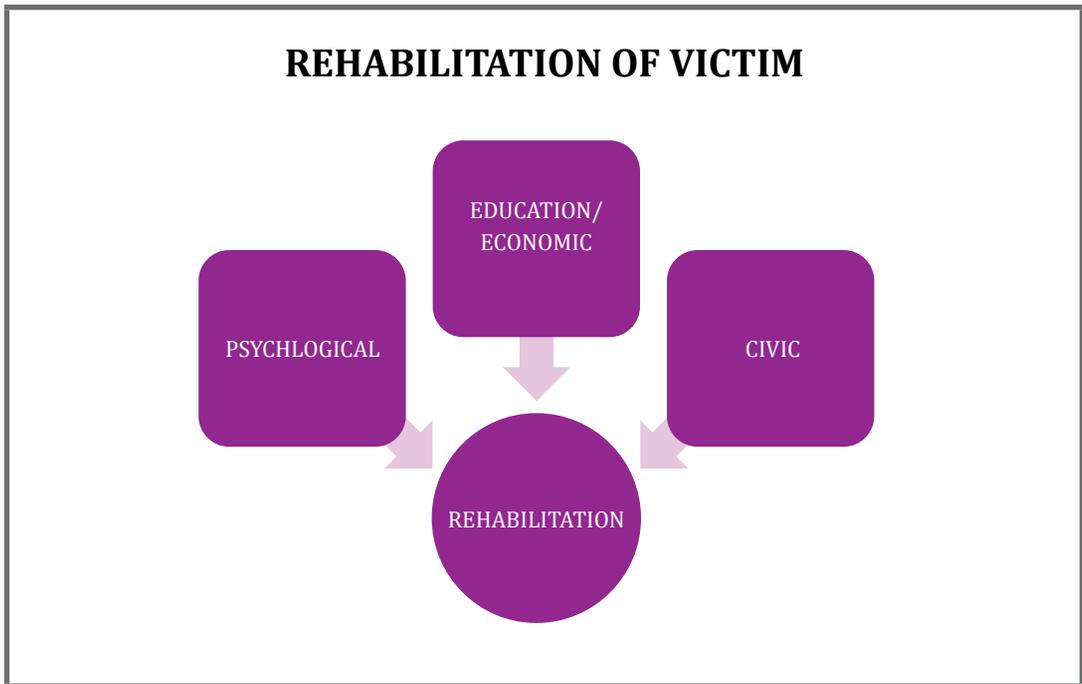
## **STAY AND ACCOMMODATION**

- ALLOCATE ROOM TAKING INTO CONSIDERATION HEALTH CONDITIONS, AGE AND REGIONAL PREFERENCE
- ENSURE PARTICIPATION IN THE HOME COMMITTEE FACILITATING OWNERSHIP
- A HOLISTIC TIME-TABLE THAT ENSURES TIME FOR PERSONAL CARE AND RECREATION
- DISCIPLINARY CHECKS AND BALANCE

## **PREPARATION FOR EXIT**

- THE VICTIM SHOULD BE TOLD DURING THE ORIENTATION ITSELF THAT THE SAFE HOME IS TEMPORARY AND THE LARGER GOAL IS REINTEGRATION
- GETTING REAL NAME AND ADDRESS FOR HOME INVESTIGATION REPORT-IMPORTANT OF HIR IN RELEASE
- NO SURVIVOR WILL BE REUNITED WITH HER FAMILY AGAINST HER WISH

### Activity 3.1, Rehabilitation of the Victims



**REHABILITATION**

PSYCHOLOGICAL	EDUCATION/ECONOMIC	CIVIC
TRAUMA CARE	NUMERACY/LITERACY ASSESSMENT	BANK ACCOUNT
GROUP THERAPY	OPEN SCHOOL/BRIDGE SCHOOL	AADHAR CARD
INDIVIDUAL THERAPY	MAINSTREAM SCHOOL/ COLLEGE	RATION CARD
REFERRAL PSYCHIATRIC CARE	EMPLOYABILITY TRAINING	HOUSING
LIFE-SKILL	LIVELIHOOD TRAINING	
	LIVELIHOOD PLACEMENT	

## Activity 4.2, Trauma Care

### **TRAUMA CARE**

(BASIC RIGHTS A COUNSELOR SHOULD ENSURE)

- Right to dignity
- Right to not to be re-traumatized
- Right to confidentiality
- Right to judicial redress
- Right to access to trained care and protection professionals who can facilitate healing

- Right to self-determination and participation
- Right to make informed choices
- Right to information
- Right to education, shelter, health and livelihood



## **SUPPLEMENTARY READING MATERIAL**

## HOW TO RECEIVE A VICTIM?

When a victim arrives at the shelter, she will be tired, confused, angry, hungry, thirsty, fearful and full of apprehensions of what the future holds. She might think she has been arrested and is being punished for a crime. Having been betrayed and abused repeatedly over the years, she is incapable of trusting another human being. In this context, it is important to understand her state of mind and begin the process of building trust from the first moment.

- Begin with **welcoming** her to the shelter in the same manner as an honoured guest is welcomed into your home or your organization. *For example, in Prajwala Home, all victims are welcomed in a traditional way by using the Hindu custom of lighting the lamp and Vermillion on forehead.*
- Make sure the basic needs are met first - Offer water and food to the victims on their arrival at the emergency shelter.
- Once the process of welcome and meeting basic needs is done, the formalities of admission, induction and orientation are done.

### Admission

- Sign the handover document that will be given to you by the police office
- Check the handover case file
  - for a copy of the order from the legally competent body (either child welfare committee or from the court),
  - the FIR copy and
  - the Medical report (if available)
- Enter details of all victims in the register and ask them to sign the same. Details to be entered are the following:
  - Name, Age, time of admission, signature
- Open a case file for each victim
- Take photograph of each victim.
  - One photograph shall be kept in the case file of the victim
  - Another photograph shall be fixed on the index card with the particulars of the victim
  - A copy of the photograph shall be kept in an album serially numbered
  - A copy of the photograph shall be sent to the legally competent authority
- Inform the victim or the group of victims on the purpose of their admission in the

Home.

- That the admission is done by the order of the legally competent body
  - That they are in a safe place where they will be provided with care and services (Refer the section on components of Home for details)
  - That there are other residents who live here and have been rescued and brought to the Home following the same process
  - That they don't have to be scared and can access any of the caregivers as may be necessary
- The care giver will assign rooms to each of the new victims for their stay
    - If there are children, they will be assigned to a room where children live
    - Adult victims will be assigned rooms where adults are living
    - Care needs to take to keep siblings together
    - Care needs to be taken to identify victim with infants/and accordingly rooms to be assigned
  - The care giver also assigns a barefoot counsellor (a survivor who is engaged as a caregiver in the home management process) to the group of victims.

## Induction

Once the admission process is completed, a barefoot counsellor (survivor) along with the care giver starts the induction process for the new victims (will be referred as residents as they will now be living in a safe place that is free from exploitation).

- Provide the welcome kit to each new resident
  - The welcome kit should have at least two pairs of clothes, cosmetics, tooth brush, tooth paste, coconut oil, bathing soap and towels.
  - The welcome kit is provided to the new resident for primarily two reasons:
    - As soon as she gets admitted to the Home/Shelter, all her belongings are listed down and kept in the locker with proper packaging. Thus, she would need a fresh pack of clothing and toiletries;
    - to have a sense of equality, all residents are provided with similar quality clothing and toiletries.

Victims, rescued from different places of exploitation may bring different types and quality of dresses with them. Some may have expensive clothing and others may have clothes not so good. Providing them with similar quality clothes and toiletries ensures that all residents of the Home/Shelter feel equal and a sense of comfort in this new place.

- The welcome kit needs to be customised based on special needs of particular victims, such as specific allergies or victims from foreign origin.
- Introduce the new resident to other residents and specifically to the room mates
- Show the new resident, where the bathrooms, dining hall, place to wash hands are located.
- Accompany the new resident to her room
- Explain her the rules of the home
- The barefoot counselor in consultation with the care giver will help the new resident to access the home telephone to inform her family on her present location. This is typically done within a week of the resident's admission to the Home.
  - Ask the new resident who she wants to speak
  - Note down the name and the number of the person, the new resident wants to speak
  - Check whether the name given by the new resident is truly of her relative/guardian/parents
    - Make a call
    - Collect information through the community network
  - Once it is confirmed that the name given by the new resident is of her relative/parent/guardian/husband, allow her to call the person.
    - Phone call needs to be made under the supervision of the caregiver/barefoot counsellor
    - The phone will be on speaker
    - The new resident can speak anything on the phone. But typically, the phone call focuses on the following:
      - The location where they are
      - The process of admission that is followed in the Home
      - How are they being treated in the Home
      - The process that needs to be followed to get a release order
      - The new resident asks the relative/parent/guardian/husband to file a petition for their release to the legally competent authority.

## Orientation

Care giver/ barefoot counsellor needs to speak to each of the new residents to inform the following:

- The reason why they have been brought to the home

- The care and services that are offered in this home
- The procedure of release

The barefoot counsellor along with the care giver should ensure that the resident is

- Aware of the procedures, rules and facilities in the shelter/Home
  - Share the Home schedule
  - Explain to her that she can access any caregiver and/or barefoot counsellor to share her worries, concerns, if required
  - Explain to her that for any medical need, she can contact the care giver/barefoot counsellor/the in-house nurse
- Legal rights (Refer section on legal compliance for details)
- Civic entitlements (Refer section on Civic entitlements for details)
- And government benefits that she is entitled to.

This should be explained to the resident in a simple manner.

***The caregiver needs to inform them that they have been brought to the home with a court order. Similarly their release also depends on the court order. Their release is not dependent on the home personnel.***

## Screening

### Frisking/ screening

This frisking in the protective homes/safe shelter is a limited intrusion aimed at ensuring the safety of the new resident and others, residing in the protective home.

While frisking a new resident, the following should be followed:

- **Search Preparation** – Prior to starting a search, the person should be given an opportunity to assist with the process by emptying the content of their pockets and any bags.
- **Gender Specific Searches** – To help make the person being searched more comfortable, search should be conducted by the same sex- for male it is male and for female it should be female.
- **Don't Search Alone** – When possible, you should always have a co-worker or supervisor with you during a search process. This is important as a colleague can serve as a witness throughout the search should the person accuse you of any type of misconduct. If not possible, clearly gain consent to perform the

search and inform the person what you plan on doing as part of the search and if they are uncomfortable with any portion.

- **Clear communication:** Communication difficulties may be the result of an inability to speak a common language, disability or other misunderstanding. Preparations should be made to overcome foreseeable communication difficulties (e.g. use of pictorial representation to avoid language restrictions).
- **Remain Sensitive to victim** – To ensure respect is given at all times, consideration should be given to the following:
  - Precautions about additional needs (e.g. medical conditions)
  - Advising victims about the search – answering questions
  - Confirmation that the victim understands the search process
  - Respect for privacy and confidentiality
    - If the person has religious issues with the search, or is not comfortable being searched in a crowded room, do what you can to accommodate their needs.
    - Consideration should be given to the use and location of CCTV cameras to record search procedures or ensuring that witnesses (other care givers) are present.
    - When searches are conducted at fixed place, consideration should be given to the provision of adjacent facilities to conduct searches in private or within a secure location.

#### **Searching of children (additional caution)**

- Speak to the child on the need to be searched
- Do a pat-down search and don't be intrusive
- Speak to her while you search her body
- Gently take out forbidden items

**Confiscate Illegal/Forbidden Items** – If any illegal or forbidden items are found during the search, it is important to immediately take it away from the victim. Do not simply place the forbidden items in your pocket or at your desk and move forward. Doing so could result in serious legal issues for you. Make a list of items those were confiscated from the victim and then dispose it. If the confiscated item is a weapon, then immediately contact your supervisor and the security officer and also report it to the concerned as well as nearby police station.

Forbidden items include:

- Gutkha
- Pan masala
- Any kind of addictive substance such as cough syrup, fevicol
- Knife / Blade /any sharp object
- Alcohol

## Documenting belongings of the victim

- Each victim's belongings need to be accounted for. This has to be done in the presence of the new resident and at the time of admission to the safe shelter/protective home.
  - While taking stock of their belongings, each and every item of their belongings needs to be listed, starting from her clothes, cosmetics, money and jewellery.
  - Prepare two copies of this list. This list needs to be signed by the caregiver, the new resident and another person either from the rescue and repatriation department or from the accounts department. One list to be handed over to the new resident and the other one should be kept along with her belongings in the safe locker.
  - If the new resident has any jewellery, a goldsmith needs to be called in for verifying the jewellery.
    - The goldsmith should weigh each piece of the jewellery and confirm whether these are made of gold/ silver or these jewelleries are imitations.
    - This process has to be done in-front of the new resident and the care giver.
    - If the jewellery's of any valuable metal, the goldsmith will have to specify its weight.
    - The care giver should make two lists of all such jewellery. This list will have to be signed by the caregiver, the new resident and the goldsmith.
    - Post signing, one list will be handed over to the new resident for her record and the other one should be kept along with her belongings in the safe locker.
  - If the new resident has money with her, initially it will be kept in the safe locker along with her other belongings, but open a bank account in her name as soon as possible to keep her money in the bank.

## Case Documentation

Open a case file for the new resident with all details

- Court referral letter

- FIR copy
- Medical report
- Primary information document collected in the police station by the WPC

If the victim gets admitted to the Home, during the day and is physically and mentally fit to speak, her case history is taken on the same day.

But if the victim has arrived at the home at night or the victim is unable to speak due to her physical and mental health condition, then the case history should be taken on the next day.

She should be allowed to take adequate rest and the procedures should be conducted after she has received adequate rest on the next day. This process of documenting the case history needs to be completed within 48 hours of the admission of the victim to the Home.

- Care giver needs to prepare the preliminary assessment report in the prescribed format within 48 hours of the resident's admission to the Home. The preliminary assessment report will include:
  - Personal profile of the victim
  - Date of her admission to the Home
  - FIR number
  - Order details form the legally competent authority
  - Education status
  - Medical/Health status/psychological state
  - Skills that she has (vocational)
  - Extra-curricular activities (for children)
- The care giver to gather information on the new victim over a period of time. The care giver should ensure that the new resident is not unnecessarily harassed with repeated interviews. An important need in the initial days is to establish the true identity of the residents such as her real name, whereabouts of the family members, community members, relatives and address. These information should be gathered as part of the counselling process in a non-intrusive manner.
- If the new resident does not speak the same language that is known by the care givers, an interpreter needs to be arranged to facilitate the process.
  - Care givers need to ensure that they are able to get the true identity of the new resident – her real name, name of parents, address, relatives, how

does her parents do, siblings. This might take a few sessions of interaction with the victim.

- Care givers need to be careful that the information is collected in a non-threatening, non-intimidating manner during the counselling sessions.

### Differentiating Victim & Trafficker

Interaction with caregivers across the country highlights that the task of differentiating between victim and trafficker comes with experience and immense observation of behavior by the caregivers including barefoot counselors. Few indicators that could differentiate between the victim and the traffickers are as follows:

- Not listening to caregivers after several counselling session
- Not following the Home schedule and engaging in arguments with caregivers for no obvious issue/problem
- Creating big issues with trivial problems
- Sudden increase in quarrel between a group of residents
- Sudden increase in physical fights between a group of residents
- Self-harm by a resident as due to fights between her and a particular group of residents
- Sudden formation of groups among residents
- Old residents informing the care giver on the group/individual who is continuously engaged in fights/quarrel and identifying them as people who had trafficked them

These are few indicators that could differentiate between the victim and the traffickers but the primary skill that a caregiver needs to identify traffickers who has entered the Home as victims is by sharp observation of their behavior and attitudes with the residents and caregivers.

### Identifying Special Needs:

**This assessment will be derived from the Medical assessment and also from the Psychological assessment. The care giver should consult both the reports to identify special needs of a victim.**

**During this process of physical and psychological assessment, the care giver would also need to identify special needs of the survivor.**

**a) Pregnant:**

- If the survivor is pregnant, additional care needs to be taken to ensure that she is provided with proper diet and medical support that a pregnant lady would require during her pre-natal period
- Pregnant victim's needs to be provided with ante-natal care
- Lactating victims need to be provided with adequate post-natal care

**b) Health Conditions:**

- Victims who are HIV positive, CD4 status needs to be assessed and they need to be enrolled in the Anti-Retroviral Therapy (ART) immediately

**c) Psychological Conditions:**

- Victims diagnosed with acute withdrawal symptoms, need to be referred for de-addiction or detoxification immediately.
- Victims, diagnosed with psychological disorder needs to be referred to psychiatrist immediately
- If the survivor is facing acute trauma and need immediate psychiatric care, the caregiver needs to put the survivor under specialized care.

**d) Differently abled Victims:**

- If the survivor is differently abled or have a physical disability, this needs to be identified and special care such as providing mobility aid or seeking support from a specialized professional need to be sought. It may also be so that the survivor needs to be shifted to a shelter that has specialized services to take care of differently abled survivors.
- Victims diagnosed with mental retardation or any other special needs to be referred to the specialised institutions for the medical support.

**Individual care plan**

An important part of the induction is evolving an individualized care plan. Individual care plan" is a comprehensive development plan for a person based on age and gender specific needs and case history of the person, prepared in consultation with the new resident.

The individual care plan addresses specific needs of each resident and plans intervention

based on her specific situation. Individual care plan is a tool to guide the care of the resident.

The individual care plan needs to be developed as early as possible, depending on the physical and mental health situation of the resident. Efforts should be made to prepare this individualized plan within 7 days of the victim's admission to the Home.

### **Components of Individual care plan:**

#### **Health and nutrition needs, including any special needs**

Based on the physical assessment, the caregiver needs to identify the following needs of the victim and corresponding actions to be taken in the prescribed Individual care plan format:

- Dietary needs
- Any special dietary needs
- Medical health issues – general and specific, if any

#### **Emotional and psychological needs**

Based on the assessment, the caregiver needs to identify the psychological status of the resident and suggest potential actions to be undertaken to help the resident to achieve a sound mental health state. *(Refer the section on Psychological assessment for details on indicators)*

#### **Educational and training needs**

Based on the assessment, the caregiver needs to identify the education needs of the resident and suggest potential actions to be undertaken to help realize their educational aspirations. In suggesting actions to be undertaken, it will be important to specify various options available and the rationale for opting for a particular option to continue with education for the new resident. For eg: A 15 year old child wants to continue with her studies, but is unable to attend mainstream school due to her health situation. The caregiver in consultation with the counsellor, physician and most importantly the child, decides that she will be opting for home schooling and only appear for examination, when required. This should be clearly mentioned in the Individual care plan, so that if the child's health condition improves, the child can join the mainstream school, if intended to do so.

## **Leisure, creativity and play**

This section should highlight the recreation facilities that include both indoor and outdoor games. Based on the assessment of the physical and psychological need and then interest of the resident, the caregiver needs to highlight the proposed interventions ranging from yoga and meditation, sports activities, music, television, picnic and outings, cultural programs. This assessment should also highlight various events and education fair that children usually attend as per of their recreational activities.

## **Attachments and Inter-personal relationships**

Based on the assessment, the caregiver needs to identify the issues related to inter-personal behaviors of the resident and suggest potential actions to be undertaken to improve her interpersonal relationship

## **Religious beliefs**

Based on the resident's case history, mention the religious belief of the resident and also highlight potential interventions to ensure that her religious belief is respected in the Shelter/Protective home.

## **Self-care and life skill training for Protection from all kinds of abuse, neglect and maltreatment**

Based on the resident's psychological and life-skill assessment, the caregiver needs to identify the areas of concern and then suggest potential actions to be undertaken to help the resident to learn life-skills that would protect her from all kinds of abuse, neglect and maltreatment.

## **Independent living skills**

Based on the resident's physical, psychological and life-skill assessment, the caregiver needs to identify the gap in ability of the resident to live an independent life. The caregiver needs to suggest potential actions to be undertaken to develop skills that would help the resident to live independently in post restoration phase.

This individual care plan is an evolving master plan for all care process of the victim. It is also important to involve the victim completely in preparing this plan. Her consent and ownership will be the deciding factor for the level of healing the victim will experience in future.

**The Individual care plan needs to be monitored on a fortnightly basis for the first three months and thereafter to be prepared once a month.**

## Trauma Care

The foundation principle of psychosocial intervention is that the victim is viewed as a person who has rights. The objective of psychosocial intervention is to help the victim to claim her following rights:

- Right to dignity
- Right to not to be re-traumatised
- Right to confidentiality
- Right to judicial redress
- Right to access to trained care and protection professionals who can facilitate healing
- Right to self-determination and participation
- Right to make informed choices
- Right to information
- Right to education, shelter, health and livelihood

*The counsellor facilitates a process that enables the victim to rediscover herself, understand the events of past where a violation of her rights and to make informed decision for her future through a process of healing. Thus developing life skills become an important part of psychological care process.*

## Life skills

Life skills are defines as “abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life (WHO)”. In the sex trafficking scenario, the damage is not only limited to the victim’s body, but also to her mind and soul. This damage is manifested in varied ways in the personality of the victim: she loses her identity, self-esteem, poor interpersonal skills and lack of conflict management capabilities. Therefore, the victims need to unlearn these behavioral patterns and re-learn those skills that would enable to cope with life in the mainstream society.

The care giver identifies these individual needs and then explores innovative methods to train the victim on various life skills. Assessment for life-skills is done by the counsellor, during the counselling sessions. The assessment indicator:

- Personal hygiene and grooming

- Cleanliness
- Listening skills
- Self-care
- Understanding about Relationship
- Communication
- Problem solving skills

The life skills programming can range from using performing art such as singing, theatre, dancing, music, painting/drawing, from learning crafts, stitching, embroidery, pottery – any form that helps the victim to gain confidence in herself and to identify her skills and capacities.

Along with this, the life skill program should also focus on building social relations, learning conflict management and resolution, inter-personal behaviours so that the victim is slowly acquiring skills for social reintegration.

It is important to introduce the victim into life-skills when the victim understands herself and is able to accept that she requires support.

But, it is also important to expose the victim into various life skills programs as soon as she is admitted to the safe shelter so that she slowly gets comfortable with various activities in the safe shelter that other residents are involved in.

Typically, a resident is introduced to the life-skill programs on the third day of her stay in the emergency shelter. After the assessment of the resident and her need for life skill development, the caregiver introduces her to various life-skill sessions in the Home.

The life-skill program should be linked to the life outside the environment of the care Home. The Home should be considered as a space to get prepared for the life after leaving the Home. Thus, each activity should be planned in such a way that it helps the survivor to develop a skill to deal with problems outside the care home.

Thus the life-skill should include independent travel, ability to make informed choices, ability to take informed decisions, managing their own finances, taking control of their lives.

The life skill training should also include role modelling – speaking to other survivors, the barefoot counsellors or through daily activities rather than classroom sessions.

## Individual/Group Counselling

The individual therapy focuses on the following process:

- Forming a therapeutic relationship: A therapeutic relationship is a relationship of trust that heals a victim and give them a sense of being safe. Some indicators of this relationship is
  - It ensures that the victim is treated with dignity and respect
  - This is a relationship of equality and not hierarchical
  - The control is in the hands of the victim and not with the caregiver
  - There is no expectation in this relationship between the victim and the caregiver
  - It provides complete information to the victim and enables her to exercise her rights

Steps to form therapeutic relationship

- Introduce yourself
- Seek permission to begin the therapy.
- Assuring the victim about confidentiality
- Sharing the process of counselling and clarifying the doubts, if any. It is important to explain the process of therapy to the victim
  - They should know what to expect
  - They should know the purpose of what is being done
  - They should be able to set goals for themselves and determine the pace of therapy
- Understanding and assessing the person, problem and the context
  - The goal is to understand the person – gather information, make sense of the information and to help the victim to make sense of the information. This exploration is conducted at three levels a) The person, b) The Problem and c) The context.
  - Understanding the person
    - Name/age/education/when she was rescued/present status of the case
    - Patterns of thoughts, feelings and actions in the past (about herself, about her future and about the way people perceive her)
    - Needs including health, nutrition, relationship, emotional support, education, livelihood)
    - Key influences from childhood
    - Key limitation as expressed by her
    - Key strengths as expressed by her
    - Significant memories

- Habits, relationship and plan for future
- The Problem
  - They may have multiple problems
  - They may be very anxious while expressing the problems
  - They may be silent or angry
  - They may want to share only their problems
- The context
  - Personal context
    - Present/immediate context
    - Pre-trafficking context
    - Her possible future context
- Analysing the information that you receive in the first phase of therapy
  - After the first three or four sessions you have formed a safe and trustworthy relationship with the victim.
  - The victim now wants to find solutions and not just talk about her problems
  - At this point the counsellor needs to analyse the information that she/he already has about the victim by using the following table:

<b>The Person</b>			
	Past	Present	Future
<b>Needs</b>			
<b>Thoughts</b>			
<b>Feelings</b>			
<b>Actions</b>			
<b>The Problem</b>			
	Past	Present	Future
<b>Biological</b>			
<b>Psychological</b>			
<b>Social</b>			

This analysis will then be shared with the victim so that she can participate in setting goals for psychological intervention.

- Outgrowing the pain
  - Setting goals
    - The victim usually thinks short-term

- They usually do not see any future for themselves
    - Even if they see a future, it is usually not in touch with the reality and the context of the victim
  - The steps of setting goal for a victim includes the following:
    - Helping the victim to have a view of life – a dream that she wants to achieve irrespective of her present context
    - Helping the victim to decide which needs she wants to fulfil in a short period of time (few weeks or a month)
    - Help her to meet other victims who have set goals for themselves and achieved them (part of group therapy)
    - Help the victim to decide on her work goal
    - Help the victim to identify what support she would need to achieve her goals
    - Help her set a measure of how she would come to know whether she has achieved her goals
    - Simultaneously, help the victim to prepare a plan B for every step that she has identified to achieve her goal
- Closure
  - It is important to close a therapy properly. The closure process should be discussed with the victim so that she is prepared for the same.
  - It is important to follow a process of closure:
    - It helps the victim cope with the issues of dependence and termination of therapy
    - It helps the counsellor to underline the skills that the victim has learnt from the process of therapy
    - It highlights the ability of the victim to cope with her life
    - It helps the victim to attribute the changes to herself i.e she has achieved these changes through her own efforts.
  - Process for planned closure of therapy
    - Review the progress of therapy on a quarterly basis
      - It helps the victim to do any course correction of her goals
      - It helps to recognise that she is moving towards her goal
    - Mid-therapy review on a half-yearly basis
      - The goals of therapy to be reviewed,
      - the progress of therapy to be reviewed
      - New goals are set for next six months

- A tentative closure time should be decided at this point of time
- Discussion with the victim on the closure time should also be discussed during the mid-therapy review. This is the most trusted relationship that the victim has and thus it is natural for the victim to not want to end this relationship. But the information that she can close this relationship is itself very empowering for the victim.
- Help the victim to plan possible stressful situation in future and then brainstorm on her response by using the skills that she has acquired during the therapy session.

### Role of Survivors

The role of survivors in home management is of immense importance. The role of survivors in home management is as follows (not an exhaustive list but an indicative one):

- The survivors could play an important role as role models for the new victims who have just got admitted to the Home.
  - It is important for the victims to have accessible role models who they can relate to. The role models/ barefoot counsellors should share their journey on how they went about preparing their roles, difficulties faced; challenges overcame to achieve their goals. The role models/barefoot counsellors should be able to share information about their present life.
- Survivors play an important role in making the new residents feel comfortable in Home by accompanying them in the process of welcoming them to the home, inducting and orienting them on the rules and processes of Home
- During the process of induction the peers who have befriended the new residents can help in explaining the benefits of living in the Home and how it has helped her in achieving her goals.
- Survivors can also play a role in ensuring safety and security in Home by gathering information in an informal manner from the other victims.

*For example: Prajwala has developed a program in the shelter home called “Sakhi” (meaning friend), in which adult survivors are selected through an assessment process to be responsible for the supervision of 25-30 of their fellow residents as part of a peer-based support system. The Sakhis are employed as Prajwala staff and help the home coordinators care for the needs and well-being of newly rescued victims, including barefoot counseling*

*and case management. The result has been an astounding 100% participation of all victims in the home activities and immediate crisis response regarding any issues within the therapeutic community.*

## **Home Schedule**

Preparation of home schedule should always be done with the victims residing in the home. This is a process that helps victims to believe that they are in control of their lives. This process of inclusion in the planning and management of home schedule is an important activity to build a sense of ownership among the victims. The following principles should be followed to prepare a home schedule:

- Caregiver should establish a home committee of residents who will decide on the diet plan, recreational activities, training and duty allocation to residents.
- A general body of the resident should also be formed to provide inputs to the home committee on the management of the shelter.
- The role of the caregiver is of the facilitator.
- The home schedule should focus on a disciplined life, personal hygiene and cleanliness, physical exercise, yoga, educational classes, vocational training, organised recreation and games, moral education, group activities, prayer and community singing and special programmes for Sundays and holidays and national holidays, festive days, birthdays.
- The planning process should be inclusive. Views and opinions of the residents should be taken into consideration while preparing the home schedule.
- Special needs of residents such as residents who is pregnant, or suffering from acute health issues should also be taken into consideration.
- During the planning process, a consultative process should be followed to arrive at consensus to adhere to the home schedule
- The home schedule should have a balance between learning activities, recreational activities and also free time for residents.
- The suggestions of the residents in every matter concerning the management of shelter must be implemented if it is not a threat to the security of the residents.

## **Educational/Vocational Support**

### **Aptitude Assessment**

Aptitude assessment is the process of determining an individual's interest, abilities and skills to identify strength, needs and potential. Aptitude assessment can be used for varied purposes.

## Education

Education is an important component of care when it comes to preparedness for social integration. Any person feels empowered and their sense of confidence increases with education. This is also true for the victims – it helps their healing process and enables them to look for options to start a life of dignity. To conduct educational assessment following should be followed:

<b>CONDUCTING EDUCATION ASSESSMENT</b>	
<b>Children below 14 years</b>	<b>Assessment criteria</b>
	Personal details (Name, age, sex)
	Literacy level: till which standard she has studied
	Reasons for leaving school
	Her interest in studying
	Does she have any concern in joining a mainstream school
	Simple test on learning abilities - reading, writing ability test, mathematics, familiarity with alphabets
	Preferred language for continuing education
	Her ambition or aspiration in continuing education
<b>Adolescents (14 to 18 years) additional pointer</b>	Whether she wants to go to a mainstream school, or would prefer open school system
<b>Adults (additional pointers)</b>	Literacy level
	Reasons for not continuing education
	Her interest in studying
	Does she have any concern in joining a mainstream school
	Simple test on learning abilities - reading, writing ability test, mathematics, familiarity with alphabets
	Preferred language for continuing education
	Her ambition or aspiration in continuing education
	Do they prefer to join formal education or they would like to join informal education where they can be trained on functional literacy (reading, writings, calculation)

This assessment will help prepare a plan for each resident to pursue their education.

### Vocational Support

Vocational assessment is used to determine a person's ability, interest and potential to identify skills that could be strengthened to provide vocational support. It can be used to determine and person's ability, the content of the vocational training program, her employability or ability to adapt to a different work environment. Depending on the assessment, the person can be supported to make realistic job training and career choices based on their interest, aptitudes and abilities and also the realities of job market. Following steps could be followed to conduct vocational assessment:

- An interview with the vocational guidance person
- Assessment of records of education
- Medical examination of the victim to guide the vocational trainer to assess the physical ability of the victim
- Assessment of interest and motivation to learn a skill
- Exposure to various vocational skills to identify her interest area
- Analysis of physical capacity in relation to occupational requirements and the possibility of improving that capacity

Following are to be assessed as part of the comprehensive vocational assessment:

- History, education, background
- Psychological strength
- Independent living skills
- Literacy
- Knowledge of work
- Abilities/aptitudes
- Technical skills
- Generic work behavior (communication skills, work ethics, conflict resolution skills)
- Job seeking skills
- Job readiness
- Any special needs

Vocational assessment can include the following techniques:

- Background assessment based on the reports from caregivers and counsellors
- Interviews with victims

- Checklist assessment
- Vocational exploration and counselling to clarify goals and help direct the victim to make an informed choice
- Paper and pencil test
- Vocational skill tryouts

### Identifying options to continue education

Things to keep in mind while preparing a plan for education:

- The care givers need to be aware of this strength of literacy as a positive experience for each victim that could be used in their growth and development.
- The role of the care giver is to figure out age-appropriate educational opportunities for victims to be enrolled in.
- It is important to ensure that the victim's self-esteem is not challenged. Thus the educational opportunity for a young adult has to be different from a child.
- The easy and participatory methods of teaching may be more useful for a young adult to become literate. The shift in educational status from illiterate to literate gives an immense high in the lives of victims and a marked difference could be seen in their personality and self-confidence.
- The care giver needs to perform all related responsibilities of a guardian, including visiting schools for functions and parent-teacher meetings.
- The Home schedule should include specific timings for study and also allocated space where survivors can concentrate on studies.
- Care givers should also identify survivors who may have learning difficulties. The effort should be to support the survivor in every way to achieve her learning goals.
- Special survivors who are living with disabilities, such as visually, hearing or speech impaired or have mobility related disabilities should be provided with adequate care to achieve their education plans.
- There needs to be a facility for bridge school in shelter/protective homes. This can help residents (children) to bridge the learning gap and get into the mainstream school for continuing their education.
- Similarly, an informal education set up needs to be there in the shelter/protective homes. This can help the adult residents to bridge their learning gaps before they decide to join formal education system in one hand and on the other provide training on functional education such as reading, writing and basic mathematics (calculations) to the residents who either do not want to continue formal education or they have no interest in pursuing education due to their age/learning abilities.

## Vocational Support

Vocational training is an extension of this strength that enables victims to become employable. She needs to be confident of her potential employability. The confidence of being employable reduces the risk of being re-trafficked.

### Vocational exposure

The victims need to be introduced to different set of vocational opportunities to recognize their own interest and aptitude to learn and continue with this skill or trade. The primary determinant in any livelihood training is the intent, interest and aptitude of the victim.

Exploring trade those are male dominated may be a good option – driving, security guard, masonry, plumbing, carpentry are on high demand and could be taken up by the victims quite effectively. Care givers should also encourage victims to explore entrepreneurship as an option, depending on their interest and aptitude.

### Vocational training

Once the victim is confident in learning a particular skill based on her aptitude and interest, the process of training begins. This is also a process of facilitating economic empowerment for victims to regain their self-esteem, confidence and self-worth. This is also the most effective manner in which a victim could be accepted by the society. The care giver needs to facilitate this process with utmost care and sensitivity so that she is not reminded of her trauma. Following needs to be undertaken as part of providing vocational support to victims:

- Caregivers need to conduct market study of demand for particular skill and understanding of market viability of the trade prior to imparting livelihood training to victims.
- Once the viability checks of required skills and trade is done, the victims have to be introduced to these skills and trades to recognize their own interest and aptitude to learn and continue with this skill or trade. The primary determinant in any livelihood training is the intent, interest and aptitude of the victim.
- Exploring trade those are male dominated may be a good option – driving, security guard, masonry, plumbing, carpentry are on high demand and could be taken up by the victims quite effectively.

- Care givers should also encourage victims to explore entrepreneurship as an option, depending on their interest and aptitude.
- This is also a process of facilitating economic empowerment for victims to regain their self-esteem, confidence and self-worth. This is also the most effective manner in which a victim could be accepted by the society. The care giver needs to facilitate this process with utmost care and sensitivity so that she is not reminded of her trauma.
- The care giver also reviews the counselling and life-skill session reports, discusses with the counsellor on the progress made by the resident based on the indicators and then decides to introduce the survivor to the employability training program.
- The survivor should be introduced to as many livelihood options as possible so that she can make an informed choice on what livelihood skills, she wants to pursue for her future. This experimentation with different livelihood skills can be explored by the resident for a month at least.

### **Resident Feedback Mechanism**

An important mechanism to constantly review the efficacy of the standards of care implemented is to put in place strong and robust system that will provide a non-threatening space for resident to provide their feedback. This mechanism should be confidential and should safeguard the resident from any repercussions.

Complaint Box/Feedback Box placed at a location that is not captured by CCTV is one of the most common methods adopted to facilitate safe feedback from residents. Other methods such as letters in sealed cover, which only the management is authorized to open has also been used widely in some Homes.

Open resident led forums such as 'survivors meeting' also are commonly used to address common grievances or concerns that effect a large number of residents. Care must be taken to understand and empathize the concerns raised and facilitate an environment for the resolution of the same. Constant efforts should be mindfully taken to reassure the residents that any feedback given would be positively taken to evolve proactive action.

**MODULE**

**4**

VICTIM WITNESS ASSISTANCE  
AND PREPARATION FOR  
REINTEGRATION



## Module 4 : VICTIM WITNESS PROTECTION AND PREPARATION FOR REINTEGRATION

<b>Objectives</b>	<ul style="list-style-type: none"> <li>• To experience, explore, identify and articulate the various aspects of victim witness protection.</li> <li>• To understand the importance of protection services and the role of the duty bearers in providing assistance to the victim that will support the criminal justice system.</li> <li>• To gather knowledge on the legally appropriate mechanism of restoration and repatriation.</li> </ul>
<b>Content</b>	<p><b>Session 1:</b> Preparing Victim Witness- 164 Statement, Accused Identification &amp; Trial</p> <p><b>Session 2:</b> Preparing the Victim for Reintegration</p> <p><b>Session 3:</b> Specific Needs of Foreign National in Protection Homes</p>
<b>Expected Outcome</b>	<p><b>The participants would:</b></p> <ul style="list-style-type: none"> <li>• Be able to delve deeper into the preparation of a victim as a potential ‘witness’ to assist the criminal justice system</li> <li>• Will be able to identify and articulate their own roles and responsibilities as service providers in facilitating restoration and repatriation</li> <li>• Will be able to better understand the purpose, role and functioning of Protection Services in the repatriation of foreign nationals</li> </ul> <p><b>The Trainer would:</b></p> <ul style="list-style-type: none"> <li>• Be able to acquire in depth knowledge on the role of a victim as a ‘victim witness’ and the assistance required.</li> <li>• Be able to gather insights into the current challenges of restoration and repatriation.</li> </ul>

### **Session 1: Preparing the Victim for Justice Redressal**

Estimated time : 120 mins

Material required : Chart Papers/Flip Chart/White Board, Markers/Sketch pens, projector and screen

Methodology : Group Work and Group Discussion, Presentation and active audience participation

### **Activity 1.1: Role Play: Exploring the Victim's perception of the judicial system.**

- Divide the group into smaller groups no larger than 8 in a group.
- Ask each group to prepare a role-play on victim's perception about the judicial system based on any of the case studies of the earlier modules.
- Give them some broad ideas such as influence of the traffickers, family and the negative experience with police.
- Give each group 10 minutes to prepare and then present it for 6 minutes.
- Note down the points raised by the groups on a white board.
- Conclude the session with a power-point (refer to Module 04 Resource Guide for Activity 1.1) on the blocks faced by a victim to testify in the court.

### **Activity 1.2: Small Group Discussion- Preparing for 164 Statement and Accused Identification**

- Continue the exercise with the same groups
- Ask each group to think in the context of the earlier role-play, the preparation that is required for Victim Witness in giving 164 Statement and for identification of the accused.
- The smaller groups should focus on the following questions:
  - How to prepare a victim for 164 Statement without re-victimizing?
  - Precautions to be taken before a victim is taken for 164 Statement
  - Preparation and Precautions to be taken for accused identification for child victim and adult victims
- Allow the groups to discuss for 15 minutes.
- Let each group nominate a rapporteur to present their discussion.
- Write down the salient points that have been shared and discussed on a chart paper/white board.
- Conclude the session with a brief power-point on the salient features of victim witness protection. (refer to Module 04 Resource Guide for Activity 1.2)

### **Activity 1.3: Preparation for trial**

- Request for volunteers in the group to enact victim, judge, public prosecutor, defence lawyer, alleged accused, court constable, court peon and counsellors
- Take the volunteers outside the room and brief them about a 'mock trial' and provide them a case of child victim. (refer to Module 04 Resource Guide for

### Activity 1.3)

- Allow the volunteer group to prepare for the mock trial for 15 mins.
- Request the volunteer group to enact the mock-trial.
- Others in the group should be instructed to watch the proceedings carefully.
- Let the court proceedings be played for 7 mins and then stop it.
- Ask the volunteers to remain where they are and de-brief(let them introduce themselves by their real name) and then put forth the following questions to the open forum:
  - How can such plays help a victim?
  - What are the necessary elements that should be done in a mock trial?
  - How important it is to prepare the victim without indulging in tutoring?
  - Should there be any changes if it is an adult victim?
- Write down all the inputs on a white board and broadly summarizing the discussion.

## **Session 2: Preparing the Victim for Reintegration**

Estimated time : 120 mins

Material required : Chart Papers/Flip Chart/White Board, Markers/Sketch pens, projector and screen

Methodology : Group Work and Group Discussion, Presentation and active audience participation

### **Activity 2.1: Group Discussion on Exit preparation, Entitlement and Family follow - ups**

- Divide the participants in three groups.
- Ask the group of participants to engage in a group discussion based on the following given topics:

#### **Exit Preparation (GROUP 1):**

- How to prepare a survivor for her exit from the Protection Home including employability and employment options?
- What processes/compliances need to be followed as a part of the responsible service delivery organisation?
- How to prepare a home assessment report based on the format given.

### **Facilitator's Note:**

The facilitator to hand out the Home Assessment Report Template to this group of participants. This template can be found in Module 03 Resource Guide for Activity 5.1.

### **Entitlement (GROUP 2):**

- What are the civic entitlements that a survivor must have when she is being reintegrated
  - Entitlements for identity restoration (bank account, aadhar card etc)
  - Entitlement for safe housing
  - Entitlement to have equal access to all schemes/government benefits

### **Family Follow-up (GROUP 3):**

- What is the process to conduct family follow-up
  - How do ensure survivor's need for privacy and dignity is respected?
  - How frequently one needs to conduct family visit and follow-up
- Provide markers and chart papers to the groups so that the participants are able to note down their key discussion points.

### **Activity 2.2: Group presentation and Discussion**

- Nominate one rapporteur from each group to make a presentation on key points that have been discussed in their respective groups.
- Encourage the larger audience to engage in discussion on the presentations made by each group. Allow comments, queries, inputs from the audience.

### **Activity 2.3: Presentation by the Facilitator**

- Summarize the discussion with the help of a presentation. (*Refer to Module 04 Resource Guide for Activity 2.3*)

### **Session 3: Specific Needs of Foreign National in Protection Homes**

Estimated time : 60 mins

Material required : Projector and Screen

Methodology : Brain storming, presentation and discussion

### Activity 3.1: Brainstorming on the Specific Need of Victims of Foreign Nationality

- Provide paper and pens to all the participants.
- Ask the participant whether they receive victims who are only Indians or victims of other foreign nationalities as well. Ask the participants to mention these foreign countries from where these victims are originally trafficked from (source country)
- Ask whether the participants feel that these foreign victims have specific needs that are different from that of local victims
- Ask the participants to write down the steps involved for sending back a victim who is originally of a foreign nationality.
- Ask the participants to articulate the challenges that they face to rehabilitate and repatriate a foreign victim.

### Activity 3.2: Presentation by the Facilitator

Summarise the previous activity with the help of a Presentation, highlighting the key points in relation to the specific need of foreign victims. (*Refer to Module 04 Resource Guide for Activity 3.2*)

#### **Facilitator's Note:**

The Presentation will aim to summarise the reintegration processes that need to be followed for:

1. Victims from SAARC Countries
2. Victims from non SAARC countries



# **WORKSHEETS**

## Session1

### Activity 1.1, Victim's Perception about Judicial Process

#### **BARRIERS FOR A VICTIM TO PARTICIPATE IN JUDICIAL PROCESS**

- Threat to Victim's security
- Pressure from Community
- Socialised into acceptance
- Pressure from Families and Fear of Social Stigma
- Fear of Police
- Indoctrination of the traffickers

- The Invasive Nature of Raid and Rescue Operations
- The experience at the Police Station
- Fear of Institutionalisation
- Delayed Disclosure of the Abuse
- The lengthy Judicial Processes

## Activity 1.2, Victim Witness Protection

### **VICTIM WITNESS PROTECTION**

- IN CASES OF HUMAN TRAFFICKING, THE VICTIM CAN BECOME THE MOST POWERFUL WITNESS IN THE CASE
- CONVEY TO VICTIM ON HER ROLE IN PROSECUTION
- EXPLAIN THE SOCIAL IMPACT OF HER TESTIMONY
- PRESENT OTHER VICTIMS/SURVIVORS WHO HAVE TESTIFIED
- EXPLAIN THE CO-RELATION OF PREVENTION AND CONVICTION

### **PREPARATION FOR 164**

- HELP THE VICTIM RELIEVE HER EXPERIENCE
- ALLOW HER TO SHARE AT HER PACE
- GENTLY ENSURE THAT SHE IS ABLE TO CLEARLY POINT THE VARIOUS PEOPLE WHO WERE RESPONSIBLE FOR HER PLIGHT
- ENSURE THAT THE VICTIM FOCUSES ONLY ON THE CRIME AND DOES NOT DIGRESS TO OTHER ISSUES
- MAKE SURE THAT THE VICTIM IS ACCOMPANIED BY A STAFF WHOM SHE IS COMFORTABLE
- PREPARE HER MIND REGARDING THE COURT ROOM AND APPRAISE HER THAT A MAGISTRATE AND A WRITER WILL BE SITTING WHEN SHE GIVES HER STATEMENT

## **ACCUSED IDENTIFICATION**

- PREPARE THE VICTIM ABOUT THE PROCEDURE REGARDING ACCUSED IDENTIFICATION
  - SIMILAR LOOKING PERSONS MIGHT BE ON DISPLAY
- IF IT IS A CHILD VICTIM, GIVE WRITTEN REQUEST TO COURT REGARDING VIDEO CONFERENCING OR IDENTIFICATION FROM BEHIND A SCREEN

## Activity 1.3, Preparing victim for a trial

### Mock Trial

Mock trial is a role-play method to prepare the victim for the actual court experience. This has been commonly used in several Protective Homes to prepare the victim for the final trial.

The main points that a facilitator has to keep in mind:

-Prepare each of the stakeholder other than the victim clearly for their role ensuring that they get a understanding about the actual court functioning.

For example:

Judge- Is the overall head of the court and controls the entire court environment. The position of the judge is on an elevated seat.

Public Prosecutor- Will be speaking on behalf of the victim and supporting the victim's testimony

Defence Lawyer- Will find fault with the testimony and might even throw aspersions on the victim's statement. The defence may also confuse the victim

-It is important that the court scene is enacted as close to the reality so that the victim understands the environment and is mentally prepared to deal with the most challenging situations in the court.

-Reassure the victim that she should remain consistent in her version and not get confused.

## Session 2

### Activity 2.3: Preparing the Exit Evaluation for victim Reintegration

#### PRE-RELEASE REPORT (to be prepared 15 days prior to release)

1. Details of place of transfer and authority concerned responsible in the place of transfer/release
2. Details of placement of the victim in different institutions/family
3. Training undergone and skills acquired
4. Last progress report of the victim (to be attached)
5. Rehabilitation and restoration plan of the victim to be prepared with reference to progress reports of the victims.

Category	Areas of concern	Proposed Interventions
a. Victim's expectation from care and protection		
b. Health and nutrition needs		
c. Emotional and psychological support needs		
d. Educational and Training needs		
e. Leisure, creativity and play		
f. Attachments and Inter-personal relationships		
g. Religious beliefs		
h. Self-care and life skill training for Protection from all kinds of abuse, neglect and maltreatment		
i. Independent living skills		

j. Any other such as significant experiences which may have impacted the development of the victim like trafficking, domestic violence, parental neglect, bullying in school, etc. (Please specify)		
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6. Date of release/transfer/repatriation .....

7. Requisition for escort, if required: .....

8. Identification Proof of the escort (eg. Driving licence, Aadhar Card, etc.)

.....

9. Recommended rehabilitation Plan including possible placements/sponsorship:

.....

10. Details of Probation Officer/Non-Governmental Organisation for post-release follow up:

.....

**Exit Preparation (Group 1)**

- Informed consent of the survivor
- Preparation of Home assessment report prior to deciding on the nature of reintegration
- Home Assessment report to be submitted to the legally competent authority to obtain release order
- Once the nature of reintegration is determined with the informed consent of the survivor, care giver needs to plan for the reintegration process.
- If the survivor is to be reintegrated with the family or in the community of her origin, a detailed discussion needs to be held between the resident and the reintegration team on the explanation that will be provided to her village/slum/ community. The version of the resident will be taken as the final one.
- A care plan needs to be prepared for each resident so that they receive care and support post their reintegration as well.

- The name of the contact person who the survivors can contact has to be provided so that the reintegrated survivors can contact them at any point of time.
- The caregiver also needs to assess the physical and mental health status of the resident, prior to reintegrating her to the mainstream society.
- The care giver also needs to prepare the family for taking her back into the family.

### Release Protocol

- Release of any resident of the Home is done through the release order by the legally competent authority.
- The legally competent body would take decision on the release of the resident from Protective Home based on the Home Assessment report.
- The home assessment report should include a risk assessment of the family and community environment. This assessment would determine the order for release by the legally competent authority.
- Once this order is obtained from the COURT/CWC, the caregiver needs to develop a care plan in consultation with the mental health professional, life-skill trainer, livelihood support person and reintegration team. This plan needs to be shared with the survivor prior to her reintegration.
- All her documents starting from birth certificates, proof of identity, birth certificate of her children (if any), Aadhar card, any other civic identity related documents, should be handed over to her.
- The handover document needs to be signed by the Home Manager, the chief functionary, the survivor and a representative from the legal authority.
- The Person-in-charge of the care institution maintains a roster of the cases of residents to be released.
- Information about the release including exact date of release is given to the parent or guardian of the child. The parent or guardian is called to the care institution on that date to take charge of the child.
- Expenses for travel of the survivor from the care institution and, if necessary, for parent's or guardian's or spouse's both ways journey are paid to the parent or guardian.

- If the date of release falls on a Sunday or a public holiday, the survivor may be discharged on the preceding day.
- If parent or guardian or the spouse fails to take charge of the survivor, an escort of the care institution (in case of girl, female escort) takes the survivor to parent or guardian or the spouse for handing over the custody.
- The survivor is provided with a set of suitable clothing and essential toiletries.
- In suitable cases, the Person-in-charge may order payment of subsistence money and railway/road fares.
- If a survivor has no place to go and requests for stay in the care institution after completion of her period of stay, a limited period of stay, till suitable arrangement is made, is allowed subject to approval of the legally competent body

**Entitlements (Group 2)**

- Birth certificate
- Compensation for sexual assault
- Immediate relief fund for sex trafficked victims
- Bank account
- Education certificate
- Identity card – Voter’s ID, AADHAR
- Community certificate
- Family income certificate
- Resident certificate based on the referral order
- Accessing Housing schemes
- Health cards
- Ration cards

**Format for Home Assessment (Family Follow Up)- Group 3**

Name of the Social Worker.....

Date of Home Visit .....

## **A. Information about the family and their family background**

Full Name

Age

Complete Address (Present & Permanent Address)

Identity Proof

Religion

Languages

Present Educational Qualification

Employment/Occupation

Annual Income

Health Status

## **B. Financial Situation:**

## **C. Description of Home and Neighbourhood:**

- How many rooms do you have in your home.....
- Please describe the neighbourhood in which the family reside, including any aspect that makes it child-friendly/ risky for the survivor.
- Whether the home environment is conducive for the survivor?
- Are the prospective family well prepared to accept the survivor?
- Did the parents have any doubt about accepting the survivor?
- Have you cleared their doubts?
- Have you interacted with other family members?
- What is their opinion about the proposed reintegration?
- Are they positive about the reintegration arrangement?
- Have you noticed any adverse remarks from the family members? If so, how far those remarks may have an impact on the reintegration process?
- What is your opinion about the financial status of the family?

- Are they financially stable to welcome another member into their family?
- Would you recommend any financial assistance to them?
- Are the parents in a good physical and emotional state to take care of the survivor?
- Have you observed any physical or psychological issues with the parents or any other family members that is going to adversely affect the life of the survivor? If so, give details.
- Have you noticed any situation that can re-traumatise the survivor or can increase the risk of being re-trafficked?
- Recommendation for reintegrating the survivor to the family - Put your views and rationale for your recommendation

## Session 3

### Activity 3.2: Specific Need of Foreign National Victims in Protection Homes

#### **FOREIGN NATIONAL-SAARC NATIONS (FOR NEPAL NOT REQUIRED)**

- AS SOON AS A FOREIGN NATIONAL IS IDENTIFIED, THE COURT SHOULD BE IMMEDIATELY INFORMED
- INFORMATION ON A PROPER FORMAT (COMPLETE ADDRESS ETC) TO BE SENT TO CONCERNED HIGH COMMISSION/EMBASSY
- TIE-UP WITH A CREDIBLE NGO/CIVIL SOCIETY ORGANIZATION FOR HOME SAFETY ASSESSMENT OF THE VICTIM

- SUBMIT THE HOME SAFETY ASSESSMENT REPORT TO THE COURT AND REQUEST FOR A REPATRIATION ORDER
- REQUEST TO EXPEDITE THE STATEMENT RECORDING OF THE VICTIM
- ON RECEIPT OF THE REPATRIATION ORDERS SUBMIT THE SAME TO THE CONCERNED EMBASSY FOR TEMPORARY TRAVEL PERMIT, IF THE VICTIMS DO NOT HAVE PASSPORT

- SUBMIT ALL DOCUMENTS TO THE FOREIGNER REGIONAL REGISTRATION OFFICE (FRRO) FOR EXIT PERMIT
- COMPLETE THE ONLINE REGISTRATION FOR THE VICTIM
- IN CLOSE COORDINATION WITH THE CONCERNED POLICE AND FRRO COMPLETE REPATRIATION PROCESS.

### **FOREIGN NATIONAL NON SAARC NATION**

- AS SOON AS A FOREIGN NATIONAL IS IDENTIFIED, THE COURT SHOULD BE IMMEDIATELY INFORMED
- INFORMATION ON A PROPER FORMAT (COMPLETE ADDRESS ETC) TO BE SENT TO CONCERNED HIGH COMMISSION/EMBASSY IDEALLY THROUGH THE POLICE OR CAN BE ALSO SENT BY HOME AUTHORITIES
- WAIT TILL EMBASSY/HIGH COMMISSION CONFIRMS CITIZENSHIP STATUS

- REQUEST THE COURT TO EXPEDITE THE STATEMENT RECORDING OF THE VICTIM
- REQUEST THE COURT VIA THE POLICE OR THE PUBLIC PROSECUTOR TO PASS DEPORTATION ORDERS
- ON RECEIPT OF THE DEPORTATION ORDERS SUBMIT THE SAME TO THE CONCERNED EMBASSY FOR TEMPORARY TRAVEL PERMIT, IF THE VICTIMS DO NOT HAVE PASSPORT

- SUBMIT ALL DOCUMENTS TO THE FOREIGNER REGIONAL REGISTRATION OFFICE (FRRO) FOR EXIT PERMIT
- COMPLETE THE ONLINE REGISTRATION FOR THE VICTIM
- IN CLOSE COORDINATION WITH THE CONCERNED POLICE AND FRRO COMPLETE DEPORTATION

## **SUPPLEMENTARY READING MATERIAL**

## VICTIM'S PERCEPTION REGARDING JUDICIAL PROCESS

A victim of sex trafficking is entitled to seek and obtain a remedy for any violation under national and international law. One way that victims of sex trafficking can obtain remedies or redress is by reporting the crimes against them to the police and participating in a criminal case against their exploiter. If the offender is convicted, the criminal court may order to pay restitution to the victim to compensate for the harms the offender caused.

### Some Barriers for Victims to Participate in the Judicial Process

#### Threat to Victim's security

Despite the good intentions and expertise of the first responder, victims are likely to be preoccupied with basic matters of self-protection and survival, and thus may seem reluctant or non-responsive. A law enforcement action, for instance, does not automatically signal to a victim that all is well. Victims need to feel safe and know that their traffickers are not nearby. Victims are usually fearful about facing their traffickers and testifying against them, and they will require a great deal of support through the process.

- Most of the sex trafficked victims are known to be exploited by family members or personal acquaintances.
- In many cases the exploiter either shares the residence with the survivor, or lives nearby.
- Many victims have mentioned that they did not feel safe, or that they and their families were at risk of being attacked if they complained to the police. Often families themselves intimidate victims and threaten them into not making complaints.

#### Pressure from Community

In cases where families and communities are involved in the victim being sex-trafficked, there is often immense pressure to not prosecute, as victims are forced to go against the family and community institutions that they have grown up in.

#### Socialised into acceptance

In addition to pressure from families and communities, victims themselves are often socialized into accepting their exploitation.

When a child is forced into sex trafficking, she does not have a clear idea of what she has gotten into, and eventually socialised into accepting 'prostitution' as a way of life.

As a result of such socialization, victims may not report cases of sexual exploitation, as they do not know that what is happening to them is illegal.

### **Pressure from Families and Fear of Social Stigma**

Most cases of child sexual abuse are not reported out of fear of social stigma. The victim may fear that if people in the community got to know that she had been sex-trafficked, no one will marry her and she will be branded as a 'fallen' person.

In cases where family members themselves are implicated in the trafficking case, the pressure to not to file complaints is immense.

### **Fear of Police**

Victims of sex trafficking are often told by their traffickers (brothel women, pimps, customers, etc.) that they must never cooperate with the police, else they will harm them. Hence, the victims are always under pressure not to complain to the police. One must note here that this fear of police violence is unfortunately not without basis, as many victims have also spoken of being harassed, abused and treated badly during rescue operations.

It is important to also note that for victims who are rescued, the police is their first point of contact with the legal justice mechanism. Their experience with the police has a tremendous impact on their subsequent participation in the justice mechanism, as the constant feeling of guilt and stigma often persists throughout the trial process.

### **The Invasive Nature of Raid and Rescue Operations**

Most of the survivors interviewed were either rescued by the police, often as part of "raid and rescue" operations. The experience of the rescue operation often leave the victims traumatised.

Victims have mentioned feeling like criminals themselves during a rescue operation. They feel immense guilt and stigma, for what they have been subjected to.

### **The experience at the Police Station**

Most children have expressed feeling intimidated, scared and threatened in police stations.

Victims are often not informed about their rights or the procedures that they are being involved in.

Victims are often asked to narrate their personal experiences in front of everyone. This makes them feel embarrassed and ashamed, and feel that they are being judged.

### **Fear of Institutionalisation**

Many victims are afraid that if they spoke up about their abuse and exploitation, then they would be separated from their families and put away in shelter homes for a long time.

Victims are often convinced by traffickers and brothel owners that shelter homes detain children indefinitely. Victims are advised to not reveal their real age, as doing so will increase the period of detention.

One must note here that in order to ensure victim's cooperation in the judicial process, victim's stay in the Protective Homes are often prolonged. This can be very traumatising for the victim.

### **Delayed Disclosure of the Abuse**

Victims who are rescued from situations of exploitation and abuse would have experienced a wide range of abusive and exploitative behaviour. In many cases, such victims find it difficult to speak of sexual abuse, and are only able to disclose it after sustained counselling.

### **The lengthy Judicial Processes**

It is not uncommon for human trafficking investigations and prosecutions to take 1 to 2 years or more. Many victims, wanting to move on with their lives, become frustrated by the criminal justice system process. Maintaining contact and providing updates to the victim throughout the process can help to alleviate this frustration.

## Trauma-Informed Approach

Trauma-Informed Approach begins with understanding the physical, social, and emotional impact of trauma on the victim, as well as on the professionals who help them.

Using a trauma-informed approach helps produce better case results for all stakeholders who are responsible for assisting the victim through the judicial proceedings.

- it leads to more effective interviews of victims, as witnesses;
- it maximizes the chances of victim cooperation during legal and judicial proceedings;
- it helps structure the evidence to present a trauma-informed story in court to the fact-finder (judge/jury) and for the purposes of pre-trial litigation.

It is helpful to consider the effect of trauma when a victim exhibits behaviour that may seem unusual, inconsistent, or even aggressive to assist the victim in feeling more in control, less shamed, or less frightened. In the end, the jury will need to understand the effects of trauma to properly evaluate testimony and credibility in reaching a just verdict.

## Victim's participation in Judicial Redress

Individuals who have been trafficked or otherwise subject to the exploitative practices associated with trafficking have the right to seek and access remedies for the harms committed against them.

States are under an international legal obligation to provide remedies to victims of trafficking and related exploitation when they are legally responsible, directly or indirectly, for the harm caused.

Victim identification is an essential pre-requisite for the realization of the right to a remedy. Once a victim has been identified, the State is under an legal obligation to immediately assist the victim through the legal and judicial processes.

The existing laws, mechanisms and procedures can enable the victims of trafficking to:

- Sue their exploiters for civil damages including unpaid wages;
- Secure awards or orders from criminal courts for compensation or restitution from persons convicted of trafficking related offences;

- Access compensation from the State for injuries and damages through a dedicated fund.

In order to avail Judicial redress, the victim has the right to:

- Access remedies, irrespective of their immigration status;
- Information of their legal rights, including their rights to access remedies through judicial and administrative proceedings, promptly and in a language and form they understand;
- Protection against unlawful interference with victim's privacy and confidentiality, ensuring their safety from intimidation and retaliation before, during and after judicial proceedings that affect their interests;
- Be provided with necessary assistance in pursuing civil and criminal claims against their exploiters;
- Be permitted and encouraged to participate in legal proceedings (criminal and civil) against their exploiters including through the recognition of a right to remain for the duration of any such proceedings;
- Victim compensation where laws and procedures support the seizure of proceeds of trafficking-related exploitation and the use of confiscated assets
- Effective measures for the enforcement of reparation judgments including foreign judgments.

A victim is a key witness to the crimes that have been committed against her as a result of her being trafficked. She can identify each perpetrator within the nexus of trafficking as an organised crime and share the information with the concerned stakeholders.

## How to prepare the Victim for Judicial Redress

### Preparation for Statement 164

Under Section 164 of Code of Criminal Procedure the **Statement** of the witness (victim of trafficking in this case) and the **Confession** of the accused (trafficker in this case) are both recorded.

As per section 164(1) of the Code, Judicial Magistrate or Metropolitan Magistrate, whether or not having jurisdiction in the case, can record any statement or confession made to her/him in the course of investigation of the crime of trafficking.

The Statement by the witness can either be written by the victim herself/himself or be written by someone else.

The victim has the right to confidentiality when her 'Statement' is being recorded.

The victim must be informed that the accused may also be present at the office of the Magistrate, but she must be assured that all necessary precautions will be taken by the escorts to ensure safety and security to the victim.

The victim must also be informed the Investigating Officer, IO, (police who is in charge of the particular case) has to be present during the process. This will help the victim be prepared for the interface and the interaction with the IO. However, the victim must be informed that she recording of the 'Statement' with the Magistrate by the victim is a voluntary process. It is not out of any fear or favour, and the IO will not be present while the Statement is being recorded.

The victim must be informed why her statement needs to be recorded under section 164 of the Code:

- to deter witness (who can also be the victim) from changing her versions subsequently,
- to get over the immunity from the prosecution in regard to information given by the witnesses.
- to minimize the chances of changing the versions by the witnesses at the trial under the fear of being involved in perjury.
- To initiate the judicial proceedings to prosecute criminals for the crime of trafficking committed against the victim.

The victim must be informed of the following procedures during the recording of her Statement under 164 of the Code:

- The Magistrate, recording the statement of the victim, can administer oath to her and obtain signature over the statement.
- By signing over the statement, the victim commits not to disown the statement and support the case of prosecution as a witness.
- Once the Statement is recorded by the Magistrate under section 164 of the Code, the charge sheet against the accused is filed and the case is committed to the Sessions Court for trial.
- It is important to inform the victim that the statement made by her can be used for the purpose of corroboration, and used to cross examine the persons who show that the evidence/statement by the victim is false.

Under the provisions of Section 164 of Code of Criminal Procedure, along with section 145 of Evidence Act, a specific duty is cast upon the Magistrate to record

'Statement' of child witnesses and other witnesses under Protection of Children From Sexual Offences Act, 2012 for ensuring child friendly atmosphere. So also at the time of recording of evidence of child witness presence of parents of the child or any support person in whom child has trust or confidence is permitted.

The victim is entitled to seek the assistance of translator, interpreter or any person in whom the victim (especially a child victim) has trust and confidence. The person is also permitted when the victim's statement is being recorded.

### **Preparation for Accused Identification**

Victim who are witnesses are generally the most vulnerable witnesses in trafficking cases. Assessing the risks and need for protection of victim-witnesses is a continuous and dynamic process that starts from the moment the potential victim-witness comes in contact with the criminal justice process and may extend for some time even after a trial has concluded.

As Victims of crimes (and sometimes as alleged perpetrators in case of adult victims), many trafficked victims come in contact with the criminal justice system. They may also require legal support in civil proceedings, such as filing compensation claims against trafficker or regarding their immigration status if they remain in the destination country.

Provision must be made to give victims of trafficking access to free and professional legal assistance and legal counselling, in a language that the victim (especially a child victim) understands.

Because victims of trafficking are vulnerable, it is important to prepare them and inform them about the risks involved.

Only the victim can explain how the actions of the trafficker affected her or him. One must remember that victims were once dependent on traffickers, and they may have a familial, personal, or romantic relationship. This is a difficult bond to break.

A situation where a victim of a trafficking case is a witness in a case against her trafficker has significantly increased the already high level of risk she might face. Protection should be as comprehensive as to assuage the victim's fear and concerns. It should not be limited to physical protection alone.

The trafficker may continue to have a significant control advantage over the victim, even when the victim is now in a place of safety. This leads to the victim being confused, distraught and still under psychological control of the trafficker or afraid of the consequences of her action.

Preparing the victim for accused identification involves supporting and appreciating the victim's decision to be a witness in the case, reiterating and reaffirming the courage of the person to seek justice and highlighting the larger good it will have on preventing the crime and breaking the cycle of impunity and giving assurance on the safety and protection that the victim will receive.

### **Some protection and victim-witness preparation measures:**

A cooperating victim in a trafficking case is always at risk. The better the care and counselling of the victim, the better the quality of their evidence will be.

Provision for Legal counselling must be made that will inform victims of the facility of receiving a verbal and written briefing from all concerned stakeholders (police, judicial and protection homes).

It is important to speak to the victim, at the very outset of the judicial process, to establish if the victims are aware of threats to themselves or others. The conversation must be open ended to explore and discuss all potential threats and risks involved in the event of the victim participating in the judicial process.

Whenever the victim is requested for an interview (by different stakeholders), it is important to select a location that makes the victims feel most comfortable and safe. This is important because this environment is more likely to result in a productive interview.

The victim must be offered staff support (physical) and counselling support at all times.

The victim and the suspects must be kept separate at all times.

Where there is little indication of risk, victim-witnesses should be allowed to make contact with their loved ones but be told to be careful what they talk about. With or without the knowledge of the victim-witnesses, family members or loved ones may be involved in the trafficking crime or associated in some way with the traffickers.

Communications with the family etc. may disclose the location victim-witnesses.

It is only in those cases of high risk that the victim should be advised against communicating at all. As a compromise welfare matter in such cases, messages can be passed through or under the control of the institution that has the legal custody of the victim.

In all cases, whichever course of action is deemed the most appropriate from the welfare and security perspectives, the views of the victim should be sought and taken into account before any decision or action is taken.

If procedures need to be conducted for victim-witnesses to identify potential suspects, it must be done in a way that protects the identity of the victim-witness.

The accused identification by the victim must be undertaken in compliance with the legislation.

It is important to collaborate with the prosecutors or court officials to establish if it is going to be possible to protect a victim-witness's identity in any court hearings, especially when the victim is identifying the accused.

### **Preparation for Trial**

The Indian legal system is highly complex. In most cases, building a strong trafficking case means relying on victim testimony, which can be challenging because of victims' trauma, fear and mistrust of institutions, and feeling of intimidation and re-victimisation. As victims and witnesses to the crime of trafficking, they may face concurrent cases in the federal criminal court, local criminal court, immigration court, and local civil court, all related to the trafficking crime, all at the same time (or stretched out over the course of several years), and the victim will likely have a different attorney for each case. Victims may be frustrated by the slow pace of the legal system.

Holding mock trial session, with the victim's participation, will help in preparing the victim for the actual trial. It is also important to familiarise the victim with the various legal and judicial representatives that the victim may come in contact with during the course of the trial and judicial proceedings.

It might help to engage law students to "talk and play" with the child victim, prepare

them for the courtroom, inform them of their rights and support them throughout proceedings.

- Walk the victim through the trial process. If possible take the victim to the court room and explain who will be there and where they will sit.
- Explain in detail to the victim how to enter the courtroom, where to sit, and the oath process.
- Explain what and how objections are made, that an objection does not mean the victim did anything wrong, and that the victim should wait for guidance from the judge.
- Review in advance how documents or physical evidence will be identified and introduced through the victim.

Stress that the victim's only job at trial is to tell the truth no matter who asks the questions. Time invested pre-trial in explaining the process and reviewing testimony always pays off at trial. A victim who at least understands what will happen at the trial will be more prepared to focus on telling the story.

It is also important to engage legal aid officers and legal counsellors to discuss with the victim what they are entitled to, what a trial involves and why testimony is important.

A sequencing of the incidents and recapitulation of the chain of events pertaining to the particular case of the trafficked victim would add to better preparedness of the victim for the trial.

Once the victim is involved in legal and the judicial proceedings, she comes in interface with various stakeholders. As the primary custodian of the trafficked victims, it becomes pertinent for the protective home and its representatives to facilitate communication and coordination between the victim and the various stakeholders and provide assurance of her safety, security, privacy and confidentiality.

It is important to keep the victim informed of the status of any and all legal proceedings, and equally important for the care providers working with the victim to understand the complexities of the legal process.

Under the constitutional, federal and state laws, the public prosecutor will represent all victims of trafficking. The Protective Home representatives must inform the victim of the same and assist the victim to have access to her due legal representation.

Child-victim's special needs and best interests should be given primary consideration. In particular, children's ability to give evidence needs to be assessed. Special protection measures, such as video-conferencing should be considered and advocated for, to avoid making the child repeat statements.

In the best interest of the child victim of trafficking, all decisions related to the trial must be explained to her in a manner that the child can understand and in a child friendly environment.

Have a safety plan for the victim during the trial. Prosecutors, investigators, attorneys, and care providers should work collaboratively on this plan. Under no circumstances should a victim be unescorted while at court.

The protection of witnesses and victims of trafficking in general calls for tailor made solutions that are implemented in the closest possible cooperation between all stakeholders and non-governmental organizations that provide victim support and protection services. The aim is to empower the victim and to enable her to overcome victimization.

The victim should be given continued and trauma-informed legal and psychological counselling during the entire trial period, and offered support to confront the trafficker and the defence lawyer.

Although a conviction is the best-case scenario, ensure that the victim has support if there is an undesirable outcome in the case. In addition, the victim should be aware that following a conviction by the jury, the judge either can order a defendant who has been out on bail to proceed to jail or can allow the defendant to remain on bail pending sentencing.

At all times during and post-trial, it is important to ensure victim's right to privacy and confidentiality. In order to protect the identity of the victim, she must be assured that no photographs and publicity will be allowed during the trials.

The victim of trafficking has the right to in-camera trials. This will protect the victim from any publicity and possible intimidation from the trafficker, thereby protecting her right to privacy.

The victim must be encouraged to fully participate in the legal and judicial proceedings and make her statement before the Court. This will help mitigate the possibility of

her recall to the court after she has been restored to the community.

If, however, her recall is necessitated, the victim must be prepared for the same, and also made aware of the method of video-conferencing, as a way of recording evidence by the judiciary for the trial.

## EXIT PREPARATION

An important part of exit preparation is providing livelihood support. This is a very important component to prepare the survivor for social reintegration. Ensuring that the survivor is employable needs to be looked at from two aspects a) skills sets and b) state of mental health. Developing employable skills is what we have discussed in above. But the care-giver also has a role to play in preparing the survivor mentally to take up employment. The readiness of the resident to be employed or to engage in an entrepreneurship would be measured by assessing the following indicators:

- Skills sets:
  - Whether she has mastered the skill that is required for the particular job
  - Whether she is confident enough to take up the job independently
  - Whether she knows the measures that would ensure her safety and security at the workplace
- State of her mental health
  - Is she in control of her emotions such as anger
  - Whether she is able to relate to her peers appropriately
  - Does she demonstrate team work spirit and able to work in teams/groups
  - Listening to constructive criticism without making inappropriate gestures or comments
  - Seeks help when needed by:
    - identifying when help is needed.
    - asking for assistance when help is needed.
    - using requested information to solve problem.

## Pre-reintegration planning

The process of leaving the home needs to start at an early stage. The knowledge that one day they will leave the Home needs to be stressed at the early stage itself so that it becomes a motivating factor for them.

The following needs to be followed prior to reintegrating a survivor:

- The reintegration process needs to consider the informed consent of the resident. This means that the care giver needs to explain the pros and cons of this process and help the resident to form her understanding and then express her consent to be reintegrated to the family/community of origin/marriage/independent living.
- Care giver needs to prepare a Home assessment report prior to deciding on the nature of reintegration. This home assessment report will determine whether the survivor will be reintegrated to her family or to the community of her origin or marriage or she would start living independently.
- Once this is determined with the informed consent of the survivor, care giver needs to plan for the reintegration process.
- If the survivor is to be reintegrated with the family or in the community of her origin, a detailed discussion needs to be held between the resident and the reintegration team on the explanation that will be provided to her village/slum/community. The version of the resident will be taken as the final one.
- A care plan needs to be prepared for each resident so that they receive care and support post their reintegration as well.
- The name of the contact person who the survivors can contact has to be provided so that the reintegrated survivors can contact them at any point of time.
- The caregiver also needs to assess the physical and mental health status of the resident, prior to reintegrating her to the mainstream society.
- The care giver also needs to prepare the family for taking her back into the family.
- In many cases, families are not suitable options where the residents can go back to or the families do not want to take back the survivor.
- The role of caregiver in this situation is of immense importance and almost acts like a backbone to this whole process.
- Care giver, in this situation needs to empower the resident to become self-reliant and start living independently. In this process, the resident may face stigma, discrimination, may encounter situations that reinstate her trauma, may experience threats.
- The care giver has to hold the resident in this situation and help her in building skills to cope with the outer world and also facilitate a process that makes her believe on her inner strength to fight out the adversities to sustain her new life.
- This is a huge struggle in the life of the resident and the care giver needs to be supportive and understanding facilitator of this process.
- The care giver needs to discuss with the resident on the various options of being self-reliant – it could be marriage, group homes, living in working women’s hostel and so on. The informed choice and her comfort will be final in this regard.

## Release Protocol

- Release of any resident of the Home is done through the release order by the legally competent authority.
- The legally competent body would take decision on the release of the resident from Home based on the Home Assessment report. The home assessment report should include a risk assessment of the family and community environment, whether the family and community is willing to accept the resident and very importantly whether there is any evidence of family being involved in trafficking. This assessment would determine the order for release by the legally competent authority.
- Once this order is obtained from the court/CWC, the caregiver needs to develop a care plan in consultation with the mental health professional, life-skill trainer, livelihood support person and reintegration team. This plan needs to be shared with the survivor prior to her reintegration.
- All her documents starting from birth certificates, proof of identity, birth certificate of her children (if any), Adhaar card, any other civic identity related documents, should be handed over to her. The handover document needs to be signed by the Home Manager, the chief functionary, the survivor and a representative from the legal authority.
- The Person-in-charge of the care institution maintains a roster of the cases of residents to be released.
- Information about the release including exact date of release is given to the parent or guardian of the child. The parent or guardian is called to the care institution on that date to take charge of the child.
- Expenses for travel of the survivor from the care institution and, if necessary, for parent's or guardian's both ways journey are paid to the parent or guardian.
- If the date of release falls on a Sunday or a public holiday, the survivor may be discharged on the preceding day.
- If parent or guardian fails to take charge of the survivor, an escort of the care institution (in case of girl, female escort) takes the survivor to parent or guardian for handing over the custody.
- The survivor is provided with a set of suitable clothing and essential toiletries.
- In suitable cases, the Person-in-charge may order payment of subsistence money and railway/road fares.

- If a survivor has no place to go and requests for stay in the care institution after completion of her period of stay, a limited period of stay, till suitable arrangement is made, is allowed subject to approval of the legally competent body.

### **Continuum of care**

There is often a discussion on what would be the ideal period of support to be extended to the survivors of sex trafficking. In reality, this question or confusion is irrelevant. The need to be supported depends on the person and her present context. For eg: often a survivor who is now married and have children, does not want to receive continuum care but it is important to develop a survivor- friendly mechanism that may help her to seek support, if required. This is also important as continuum of care can prevent incidents that may put a survivor in an exploitative situation. The focus of the care process is to facilitate an enabling process that would restore the dignity of the victim. The process of care needs to be rooted in the understanding, realising and acknowledging the trauma and pain that the survivor has experienced and what can make her feel better in this healing process of rediscovering herself.

### **Entitlements**

Another important role of the care giver is to ensure that all victims residing in the safe shelter has access to civic benefits. This means that the care givers need to be aware of government schemes and benefits for the welfare of sex trafficked victims and also create channels for the victims to access the same. Care givers may also submit applications on behalf of the victim to the government for allocation of these benefits. Following are few of the civic benefits that care givers need to work on to help victim's access to these benefits:

- Birth certificate
- Compensation for sexual assault
- Immediate relief fund for sex trafficked victims
- Bank account
- Education certificate
- Identity card – voter's ID, AADHAR
- Community certificate
- Family income certificate
- Resident certificate based on the referral order
- Accessing Housing schemes
- Health cards
- Ration cards

## Some common protocols for Reintegration for both Local and Foreign Victims

The process of re-integration is a multi-pronged approach. The aim of the reintegration process is to provide for a victim's safe, dignified and sustainable reinsertion/restoration into society. Accordingly, the reintegration assistance to victims of trafficking must include a full range of services. Some assistance is provided directly by the receiving organization (Protection Homes) – or the primary organization facilitating the victim's reintegration. However, many services are likely to be carried out, continued and administered in the victim's place of restoration through linkages with Community Based Organizations (CBOs), local government, family and the community in general.

In some communities, however, it is culturally, socially and legally acceptable for family members to shun and even kill a girl child for having brought disgrace on her family. In some cases the parents, or own family members, play a pivotal role in the girl being trafficked. If the survivor suspects (or there are other reasons to suspect) that there will be potential acts of violence against her returning, or there are chances of her being re-trafficked, alternative arrangements should be discussed with the survivor and actively pursued by taking her due consent. A holistic assessment should be conducted for each individual prior to her voluntary return process. It must be kept in mind that restoration/repatriation of a survivor to her family/community is not the final, or only, aim of the service delivery organisation towards a successful reintegration process.

It is important to mention here that henceforth the “victims” of Trafficking and Commercial Sexual Exploitation shall be addressed as “survivors”. After a child has undergone the reintegration programme under the umbrella of institutional care and protection (rehabilitation), she overcomes the status of a “victim, dependent and marginalized” and portrays an attitude of resilience. She has now survived her past trauma and challenges and is now equipped to lead a life with dignity in the mainstream

No rescued survivor shall be sent back to the family without adequate assessment and without ensuring social acceptance and family support. Service delivery organisation will ensure that repatriation is carried out depending on how safe and nurturing the family environment is for the survivor. If and when the survivor chooses to return to an abusive family situation, the organisation would need to intervene and take necessary steps.

States shall work out the details of the repatriation procedures and structure and mainstream them in order to facilitate the smooth and efficient repatriation of the survivors and their dependent minors (Reference to the SOP developed by the Core Committee under the Ministry of Women and Child Welfare under the leadership of UNICEF).

The members of the professional and (preferably) voluntary sector organizations who have had some helping interaction with the survivor shall be represented in the process of repatriation.

It is important to partner with local organizations (community based organizations-CBOs) to ensure a successful restoration and a follow-up procedure of the survivors of trafficking.

No survivor shall be sent back to the family without fully ensuring that she shall not be re-trafficked.

The survivor being repatriated/restored should be counselled and prepared to return to the place of origin after providing her with adequate medical and psycho-social care as well as after empowering her through basic life-skills so that she is able to be reintegrated in mainstream life.

Adequate financial assistance should be provided for meeting the needs of survivors during travel while repatriating them to their families or institutions in source areas.

Adequate provision should be made for dearness allowance for police escort or any other authorized escort during such travel.

Emergency expenses incurred by the police or other authorized escorts should be reimbursed by the concerned authority.

Repatriation should be done only with the consent of the survivor. While making the decision about repatriation of the survivor, her informed consent shall be sought by the appropriate authority.

In order to ensure security, it is best for information to be kept confidential and for as few people as possible to have access to the information. Even a well-meaning and trusted person can accidentally provide information to someone who seeks to harm the survivor or assistance personnel. Therefore, when communication with anyone, including embassy or diplomatic personnel, caution should be taken to provide only the minimum amount of information; required to obtain the necessary documents or assistance. Services of embassies or diplomatic missions should not be sought for survivors who have expressed a wish to apply for asylum based on a fear of returning home.

## **In order to assist the survivors to their homes, the following must be ensured:**

The best interest of the survivor has to be the paramount consideration for all parties during the whole process.

It is of the utmost importance to give the survivor a realistic picture of the options available in the receiving country/place, as a false picture given by the staff of the referring mission will be detrimental to the effective reintegration of the survivor.

It is important to give the survivors their right to Participation and the right to express their views freely.

The consent of the parent or legal guardian.

Tracing of the family (so long as family tracing does not jeopardize the best interests of the child or the rights of the family members being traced).

Sufficient information and counselling of the child and/or the guardian.

Family assessment to determine the availability of family support (consent and ability of the family to care for the child) or an appropriate care provider as well as reintegration mechanisms in the receiving country/place.

Where there is suspicion of family- related trafficking, it is important that all due consideration be given to such an eventuality, and that a family assessment is made to clarify if family involvement was a factor in the trafficking process.

The service delivery organization should try to ensure that the following conditions are met prior to a survivor's departure:

That her physical and mental condition allows for a safe and voluntary departure from the temporary and current accommodation.

Each survivor who leaves the Home including those who complete the process of rehabilitation shall be equipped with knowledge, instruments and mechanisms, confidence, art and skills of reverting to the Home or any other source of professional care and support when in need of the same.

That the survivor has indicated understanding and consent regarding all departure procedures.

That in cooperation with the survivor, a safe and appropriate place to stay on arrival, at least on a temporary basis, has been determined.

That all necessary legal, administrative, identity and travel documents of the survivor have been secured prior to her departure.

That all relevant service referrals and suggestions for follow-up care have been explained and provided to the survivor.

That when referring a survivor to a service delivery organization in the receiving place all necessary documentation and available security information have been forwarded to the receiving organization.

That when referring a survivor to a partner NGO or other service provider in a transit country or the receiving country, all travel and service arrangements have been secured and confirmed in advance and recommendations have been sent to, and received by, the partner NGO or other service provider.

That the survivor has been given a copy of all relevant personal documentation, including documentation of medical care, case progress, educational records and other means of such savings and personal belongings.

That the survivor has been fully informed of all the steps regarding departure, transportation and follow-up assistance.

### **Follow Up Assistance**

Re-integration process shall be facilitated by the country of residence by inducting the survivor in a structured follow-up program which ensures:

- Protection against re-trafficking and against commercial sexual exploitation
- Protection against Stigma and Discrimination
- Protection against any other exploitation Optional link with a variety of professional support systems
- Confidentiality
- Reorientation
- Restoration of full citizenship rights
- Livelihood option

- Restoration of rights over parental, ancestral and community property and entitlements.

Follow-up of the reintegration process is indispensable to be able to provide verifiable indicators related to the success of the reintegration programme.

After their return, regular contact should be maintained with survivors for both security and monitoring purposes to ensure their effective reintegration.

The reaction by beneficiaries to the reintegration assistance provided can be a useful indication of the strengths and weaknesses of the processes undertaken to achieve the same, and whether all the medical, psychological, financial, social and legal needs are actually met or whether any additional needs should be taken into consideration in future.

Trained partner organizations (CBOs) working near the victim's residence may be able to provide not only direct assistance to survivors, but also to prepare and implement the reintegration plan and to conduct the reintegration assessment.

Follow-up reports should be completed for each survivor assisted on a monthly basis during the first three months of the reintegration-follow up process. This should be followed by at least two additional three-month reports during the remaining follow-up period. In addition to the continuing review of the victim's reintegration progress, the follow-up procedure should also seek to verify whether the victim or her family have been threatened and/or harassed.

The follow-up of survivors for a period exceeding one year should be avoided (with the exception of minors), as this could add to the stigmatisation and be counter-productive to the normalization of the situation and the effective reintegration process. For minors, UNICEF recommends monitoring until the age of majority.

Survivor-support-groups can be a very effective tool to support successful long-term reintegration. Not only do the members of the support group assist and support one another, they may also contact the service delivery organization when additional assistance is needed or problems are encountered.

Every survivor shall be gradually, systematically and professionally linked to a variety of support systems and given the skill and confidence to avail of these systems. Considering the fact that ups and downs are inevitable in any person's life, provision shall

be made to offer support services for use by the survivor even after social reintegration. These services shall not create any obstacle in the reintegration process by revealing the identity of the survivor. This will be achieved by setting up Drop-in Centers and follow-up activities as well as by building up confidence among the survivors to make use of those support services when required.

Positive intervention of the State/Service delivery organisation may end with social reintegration. Thereafter the trafficked and rehabilitated person should be able, in case of need, to fall back on a support system established jointly by the government and voluntary sector organizations for that purpose.

The service delivery organization should continuously review, evaluate and, where necessary, adjust its reintegration assistance and related procedures.

### Assistance for Victims of Foreign Nationality

***A Memorandum of Understanding (MoU)*** between India and Bangladesh on Bi-lateral Cooperation for Prevention of Human Trafficking in Women and Children, Rescue, Recovery, Repatriation and Re-integration of Victims of Trafficking was signed in June, 2015. Ministry of Home Affairs (Foreigners Division) had issued a Memorandum on 1st May 2012 that detailed out the procedures to be followed while dealing with foreign nationals by the care institutions:

- Immediately after a foreign national is rescued/ detained on charges of human trafficking, the concerned Embassy, Ministry of External Affairs, the Special Branch of Police (CID) and High Commission of that country need to be informed.
- During the interim period, pending repatriation, the victim may be taken care of in an appropriate children's home, or appropriate shelter home either of the State Government concerned or of any NGO aided by the Government of India / State Government.
- Immediately after a foreign national is rescued/ detained on charges of human trafficking, a detailed interrogation/investigation should be carried out to ascertain whether the person concerned is a victim or a trafficker. (Criminal Antecedent Check). This is important to determine the way the foreign national will be treated. The victims and the persons actually involved in human trafficking are treated differently by the police authorities. This is in line with the SAARC Convention which advocates a victim-centric approach.

- Home investigation has to be carried out in the country of origin to ascertain establish victim's nationality. This is a process that needs to be coordinated by the care institution where the victim is temporarily housed
- Usually, the foreign victims of human trafficking are found without valid passport or visa. If, after investigation, the woman or child is found to be a victim, she should not be prosecuted under the Foreigners Act. This investigation report will be then submitted to the concerned FRRO through the embassy to get the legal travel documents to repatriate in their country of origin.
- If the investigation reveals that she did not come to India or did not indulge in crime out of her own free will, the State Government / UT Administration may not file a charge sheet against the victim.
- If the Charge Sheet has already been filed under the Foreigners Act and other relevant laws of the land, steps may be taken to withdraw the case from prosecution so far as the victim is concerned.
- If the investigation reveals that the person is actually a trafficker, he/she may be charge-sheeted under the Immoral Trafficking Prevention Act and the Foreigners Act and due process of law should be followed in such cases.

This process is applicable to all foreign nationals associated with human trafficking, whether they are women or children (children means both boys and girls upto 18 years of age).

Once the travel documents are ready and the victim needs to travel to her own country of origin, the Protective Home Staff has to escort her to the airport, hand over to the Foreign Regional Registration Office (FRRO) officials and support in the completion of all formalities with the immigration officials. The process is based on the exit document that is provided by the High Commission or the Embassy of the concerned country.



MODULE

5

CHALLENGES IN HOME  
MANAGEMENT



## Module 5: CHALLENGES IN HOME MANAGEMENT

<b>Objectives</b>	<p><b>The participants will be able:</b></p> <ul style="list-style-type: none"> <li>• To gather clarity in the processes involved in internal and external security, crises mitigation, documentation and referral services</li> <li>• To understand the legally accepted role of Home Managers in times of crises situations such as suicide/death, escape and internal or external attacks</li> <li>• To articulate the impact of home management for the care-givers and evolve methods for personal care.</li> </ul>
<b>Content</b>	<p><b>Session 1:</b> Understanding internal and external security protocols.  <b>Session 2:</b> Preparing the Home Managers for crises situations.  <b>Session 3:</b> Understanding the importance of documentation as a legal protection.  <b>Session 4:</b> Understanding various aspects of referral services  <b>Session 5:</b> Understanding the psychological impact of working with persons coming from traumatic conditions and evolving self-care protocols.</p>
<b>Expected Outcome</b>	<p><b>The participants would:</b></p> <ul style="list-style-type: none"> <li>• Be able to delve deeper into the internal and external security concerns of a Protective Home.</li> <li>• Will be able to understand their own legally appropriate roles and responsibilities as service providers in a crises situation</li> <li>• Will be able to better understand the purpose, role and functioning of comprehensive documentation as a legal protection.</li> <li>• Will be able to evaluate situations that require referral services</li> <li>• Will be able to find customized and unique ways of self-care.</li> </ul> <p><b>The Trainer would:</b></p> <ul style="list-style-type: none"> <li>• Be able to acquire in depth knowledge on the crises situations that care-givers face on a day today basis and the various protocols to deal with the same.</li> <li>• Be able to gather insights into the personal strengths of care-givers in dealing with extremely traumatic conditions.</li> </ul>

### **Session 1: Understanding internal and external security protocols.**

Estimated time: 120 minutes

Material required: Chart Papers/Flip Chart/White Board, Markers/Sketch pens, projector and screen

Methodology: Role Play, Group Work and Group Discussion, Presentation and active audience participation

#### **Activity 1.1: Role Play: Understanding the security concerns of a trafficked victim**

- Divide the group into smaller groups no larger than 8 in a group.
- Ask each group to read the case study (Refer Module 5, Activity 1.1)
- Ask each of the group to list out what are the internal and external security concerns around the person
- Give the groups broad hints related to self-harm, tendency to escape, attacks by traffickers etc.
- Ask each group to prepare a role-play based on the case study highlighting the security concerns.
- Give each group 10 minutes to prepare and then present it for 5 minutes.
- Note down the points/concerns raised by the groups on a white board.

#### **Activity 1.2: Group Work-Evolving Security Protocols**

- Without erasing the whiteboard from previous activity invite volunteers to mark the concerns on the board as 'I'(internal) or 'E'(external).
- Ask the group to discuss for 10 mins on what are the measures/security protocol they will take to avert any harm to the victim. Direct them to discuss it under the heading of internal and external
- Give each group 5 minutes to present their security protocol.
- Conclude the session with a power-point (refer to Module 5, Resource Guide for Activity 1.2) on the various components of security protocol in a home

### **Session 2: Preparing the Home Managers for Crises Situations**

Estimated time: 120 mins

Material required: Chart Papers/Flip Chart/White Board, Markers/Sketch pens, projector and screen

Methodology: Group Work and Group Discussion, Presentation and active audience participation

## Activity 2.1: Group Discussion on different Crises Situations in a home

- Divide the participants in three groups.
- Ask the group of participants to engage in a group discussion based on the following given topics:

### **Suicide/Death/Terminal Illness (GROUP 1):**

- What are the measures the home manager should take as soon as a terminal illness is known?
- What processes/compliances need to be followed when a resident dies a natural death?
- What are the legal compliances necessary when there is an unnatural death such as suicide? Complete the check-list.

### **Facilitator's Note:**

The facilitator to hand out the Checklist Template to this group of participants. This template can be found in Module 05 Resource Guide for Activity 2.1.

### **Escape/Physical Attack/ Large Group Admissions (GROUP 2):**

- What are the immediate measures to be taken if a resident escapes the home
- The do's and don't when there is an internal or external attack
- The planning and precautions to be taken when there is a large group admission in the home

### **Transfer of victim/ re-trafficking/ Infiltration(GROUP 3):**

- What is the process to be followed for the transfer of a victim to another home
  - What is the process to be followed while dealing with a re-trafficked victim
  - How do you identify an infiltrator/trafficker posing as a victim and what should be done in such cases
- Provide markers and chart papers to the groups so that the participants are able to note down their key discussion points.

## Activity 2.2: Group presentation and Discussion

- Nominate one rapporteur from each group to make a presentation on key points that

- have been discussed in their respective groups.
- Encourage the larger audience to engage in discussion on the presentations made by each group. Allow comments, queries, inputs from the audience.

### **Activity 2.3: Presentation by the Facilitator**

- Summarize the discussion with the help of a presentation. (*Refer to Module 05 Resource Guide for Activity 2.3*)

#### **Session 3: Understanding documentation as a legal protection**

Estimated time: 60 mins

Material required: Projector and Screen

Methodology: Brain storming, presentation and discussion

### **Activity 3.1: Brainstorming on documentation as legal protection**

- Provide paper and pens to all the participants.
- Ask the participant to note down the various registers that is required to validate the presence of a victim and the services provided to her.
- Ask the participants the role of these documents/registers in home management and in external evaluation.
- Ask the participants to write down the situations when these registers could be the only protection to authenticate a home.
- Ask the participants to articulate the challenges if documentation is not complied.

### **Activity 3.2: Presentation by the Facilitator**

Summarise the previous activity with the help of a Presentation, highlighting the key points in relation to documentation as a legal protection providing a check list for participants to evaluate their answers (*Refer to Module 05 Resource Guide for Activity 3.2*)

**Facilitator's Note:**

The Presentation will aim to summarise documentation from the perspective of legal compliance

1. Victim Related Documents
2. Home Related Documents

**Activity 3.3: Group work on documentation during special situations.**

- Divide the participants in three groups
- Ask the participants to have group discussion for the following topics

**Group 1 (Suicide or Death)**

- What are the first steps to be taken if there is a natural or unnatural death in the home
- Do's and Don'ts for the staff to strictly follow
- Documents that needs to readily available for the police to check

**Group 2 (Escape, Internal or External Attack)**

- What are the first steps to be taken if a resident is found missing, documents that is required to report
- What are the first steps to be taken if there is an external or an internal attack, role of visual documentation
- Precautions to be taken and confidentiality protocol to be followed by staff

**Group 3 (Transfer to another home, repatriation)**

- What are the documents that needs to be enclosed when a resident/victim is transferred to another home
- What are the documents needed when a victim is repatriated back to her country of origin
- Precautions to be taken while compiling the documents for transfer

**Activity 3.4: Group presentation on documentation in special situation**

- Ask each group to present their group deliberations for 5 minutes each
- Allow an open forum for 2 minutes after each group presentation to seek any more inputs from the larger group.
- Appreciate each group's inputs before moving to the next group.

### Activity 3.4: Presentation by the Facilitator

Summarise the previous activity with the help of a Presentation, highlighting the key points in documentation in special situations (*Refer to Module 05 Resource Guide for Activity 3.4*)

#### **Facilitator's Note:**

The Presentation will aim to summarise documentation from the perspective of special situations and its unique requirements

1. Natural & Unnatural deaths
2. Escape & Attack
3. Transfer & Repatriation

#### **Session 4: Importance of Referral Services**

Estimated time: 60 mins

Material required: Projector and Screen

Methodology: Brain storming, presentation and discussion

### Activity 4.1: Brainstorming on situations when referral is necessary

- Ask the participants two situations when they felt they require support from another agency/institution or when they felt their own skills do not match the situation
- Ask the participants to describe the importance of timely referral in terms of victim support.
- Brainstorm the possible disadvantages when referral is not done on time.
- Note down all the points on a white board for ready reckoner.

### Activity 4.2: Presentation by the Facilitator

Summarise the previous activity with the help of a Presentation, highlighting the key points in referral services (*Refer to Module 05 Resource Guide for Activity 4.2*)

**Facilitator's Note:**

The Presentation will aim to summarise referral services from the following perspectives

1. Special Health Conditions
2. Specialized Care
3. Regional/Cultural requirements

**Session 5: Care For Care-Givers**

Estimated time: 120 mins

Material required: Projector and Screen, pen and paper, soft music

Methodology: Brainstorming, Group-work, and Meditation Exercise

**Activity 5.1: Brainstorming on impact of working with victims on care-givers**

- Ask the participants how they feel when they repeatedly hear the experiences of the victims and how it effects their mind, body and their inter-personal relations
- Give a pen and paper to the participants; ask them to write the state of their mind and body after a difficult day in the Protective Home.
- Ask the participants the points they are comfortable to share
- Note down all the points on a white board.

**Activity 5.2: Presentation by the Facilitator**

Summarise the previous activity with the help of a Presentation, highlighting the key points in stress and burn (*Refer to Module 05 Resource Guide for Activity 5.2*)

**Facilitator's Note:**

The Presentation will aim to summarise what is stress and burnout among caregivers

1. Impact of working with traumatized persons on the minds of caregivers
2. Compassion fatigue
3. Burnout

### Activity 5.3: Group work on prevention of burn out

- Divide the participants in three groups
- Ask the participants to discuss on the following topics

#### Group 1 (Reducing stress during work)

- What are the measures that can be taken to de-stress during a working day
- What mechanisms should be in place in the home to facilitate care-givers to share their day-today challenges
- What are the activities that can be integrated in the home time-table which will also de-stress the care-givers

#### Group 2 (Professional ways for closure)

- What are ways to daily report cases and inform the various challenges
- What are the ways to draw boundaries in difficult cases
- What are measures to be taken to support care-givers after a difficult situation (escape, death, attack etc.)

#### Group 3 (Appreciation and Incentives)

- What are the ways to appreciate the care-givers during the course of work
- What kinds of breaks and vacations can be given to de-stress care-givers
- What are the measures to be taken so the work does not become monotonous

### Activity 5.4: Meditation/Breathing Exercise for de-stressing

- Clear all the furniture in the training hall
- Ask the participants to lie down comfortably in a circle. Those who cannot lie down can sit on a chair outside the circle.
- Explain to the participants that they will be doing simple breathing exercise to de-stress their bodies and their minds.
- Play a soft music preferably a meditative tune
- Lead the participants in a meditative exercise which will help them de-stress each part of their body.

#### **Facilitator's Note:**

Refer the Module 5, Resource Guide, Activity 5.4 on how to lead the meditative exercise

# **WORKSHEETS**

## Session 1 - Activity 1.1

### Case Study

When Sonali (aged 19years) was rescued. She was found to be very hostile and aggressive. She resisted speaking to the counsellors and preferred to be left alone. For the first few days, it was even difficult to convince her to have food. Outside the shelter there were constantly many people coming to claim her custody. Most of them came in luxury cars and threatened the security staff with dire consequences. The care-takers felt that they were being following when they went to hospital. When Sonali was taken to the hospital, even while they were waiting for their turn, some people tried to speak to her. Every visit outside became more and more difficult for the Shelter Team as Sonali started self-harming herself. She would insert safety-pins in her hand. Once she was found throwing a scarf on the ceiling fan.

## Activity 1.2

### SECURITY PROTOCOL

- Security protocol encompasses all safety measures both internal and external
- It is not just about physical safety and high walls, it is about how the home is managed
- Threats to the shelter and the residents can happen anywhere, while inside the home, in the court, travelling to hospital etc.
- Residents/victims in a state of trauma are prone to self-harm behaviour
- A Protective Home is a custodial care institution, the security protocols should not make it 'like a jail' and strive towards safe home like environment.
- An important measure is to follow the legally accepted norms

### VISITOR'S PROTOCOL

- Visitors including parents are only allowed to meet the resident through an order passed by the legally competent authority.
- A visitor register should be maintained in the safe space/protective home.
- Every person desiring to meet the resident shall disclose his name and address with proof, which shall be noted in the visitors register and signed by the visitor.
- Copy of the photo identity card containing the address and a photograph of the visitor to be taken before the meeting, shall be retained by the institution. If the visitor refuses to disclose his particulars, he shall be denied the meeting.
- The visitor needs to be searched at the main gate. Female visitors shall be searched by female staff only.
- Every meeting shall take place in the presence of the care giver/counsellor, who shall be responsible for any irregularity that occurs and who shall be so placed that he is able to see and to prevent any objectionable or prohibited article being passed between the parties.
- Every resident shall be carefully searched before and after the meeting in the presence of visitor. The resident should not be having anything with her

- before she goes for the meeting.
- If any objectionable or prohibited article is found in the search conducted before the meeting:
  - the said article shall be seized;
  - the Person-in-charge shall conduct an inquiry to know the identity of the person(s) responsible for the article reaching the resident;
  - if the person(s) responsible are from the staff of the Care Institution, appropriate action will be initiated against them; and
  - A detailed report of the inquiry and its result shall be forwarded to the Department and the Board or court of competent criminal jurisdiction.
- If any objectionable or prohibited article is found in the search conducted after the meeting:
  - the article shall be seized;
  - In case of any illegal article being found warranting legal action, the article and the visitor shall be detained and the police informed. The visitor and such article shall be handed over to the police;
  - a report of such visitor shall be prepared and placed in the case file of the resident;
  - a report of the incident shall be forwarded to the Child Welfare Committee or court of competent criminal jurisdiction; and
  - Copy of the report shall be placed in the case file of the resident.

## KITCHEN PROTOCOLS

- No inflammatory or hazardous substances such as kerosene, petrol, pesticides, phenol, medicines, acid, bleaching powder, soap, rat killers should be kept in open, within reach of the residents.
- The caregiver needs to diligently maintain the stock register of all the hazardous substances. Any variation in stock should be taken seriously and immediate actions need to be taken.
- Gas cylinder should be kept carefully and out of reach from the survivors
- Kitchen key should be kept with the Kitchen manger and no access to the key to be given to any survivor.

## MOVEMENT/ ACCESS TO OUTSIDE WORLD

- Each and every movement of the victim is dependent on the court orders.
- It is mandatory that any movement in and out of the shelter needs to be done under proper supervision. To perform this role the caregiver should conduct a detailed risk assessment of each victim and have a security plan for her. The risk assessment should include:
  - What are the external threats from the traffickers
  - How is the victim perceiving her stay in the safe shelter
  - What is the influence of other victims
  - What is the mental health situation of the victim at this point of time

This assessment will be the basic document that would help in forming a team to escort the victim to go to court or any other place outside of the shelter.

## PHYSICAL SAFETY

- The care institution needs to ensure that there is 24/7 security arrangements in the shelter homes.
- The selection of security personnel is very important, as the security arrangement should not have a feeling of living in jail.
- The selected security personnel should not have any addiction to substance or alcohol and s/ he should be physically fit to take up this job.
- Installing CCTV camera in strategic locations of the safe shelter is important. Care givers need to monitor these CCTV cameras to avoid any untoward incidents in the safe shelter. Having CCTV cameras in the visitor's room is an effective security measure.
- Caregivers should also ensure that the residents have no access to phone. The phone calls to be made under the supervision of the caregivers.

- The Home must obtain fire safety certification from the statutory authority.
- Caregiver needs to draw a field security plan by marking safe spaces and exit during a fire emergency and put it up in a visible area for all residents' reference. Caregiver should be trained to perform fire drills in regular intervals.
- Medicines must be stored in a safe place under lock and key which is out of reach for the survivors. Administration of any medication should be done under the supervision of the medical person and recorded properly in the medical register

## CLAIMANT PROTOCOL

- Anyone who submits a petition to the court for the release of the resident, should be verified
- The claimant (including parents) can also visit the resident through the order of the legally competent authority
- The claimant shall disclose his name and address with proof, which shall be noted in the visitors register and signed by the visitor.
- Copy of the photo identity card containing the address and a photograph of the visitor to be taken before the meeting, shall be retained by the institution. If the visitor refuses to disclose his/her particulars, s/he shall be denied the meeting.
- The visitor needs to be searched at the main gate. Female visitors shall be searched by female staff only.
- Every meeting shall take place in the presence of the caregiver, who shall be responsible for any irregularity that occurs and who shall be so placed that he is able to see and to prevent any objectionable or prohibited article being passed between the parties.

## HOSPITAL PROTOCOL

- The court needs to be informed on the need for hospitalization of a resident with proper documentation and her medical file
- The legally competent authority will then have to pass an order for her hospitalization.
- The legally competent authority will then instruct the concerned police station for providing security to the victim/survivor at the hospital.
- While taking her to the hospital, the caregiver needs to be extremely careful and protect her from any physical or mental harm.
- The caregiver needs to plan for the journey, based on the counselling records and risk assessment plan and form a team to shift the resident to the hospital.

## CRISIS MANAGEMENT PROTOCOL

- The caregivers to be trained on managing security risks within and outside the Protective Homes
- It is advisable that the caregivers are trained on the skills and knowledge to manage attacks on the Protective Homes.
- The Protection Homes should have the following teams to manage the crisis situation:
  - Legal team to immediately call police and lodge FIR
  - Team that would manage other residents and take them to the safe place
  - A team that would attend to the residents who have got injured during the attack
  - A team that would immediately document the crime scene
  - The security team that would heightened the security and monitor the CCTV footage thoroughly
  - A team that would get hold of the attackers and keep them in custody till police arrives
- Regular training of these teams are absolutely necessary to effectively respond to any crisis situation
- Caution needs to be taken to ensure that no media coverage is provided on the attack

## Session 2 - Activity 2.1

### CHECKLIST IN CRISES SITUATION

#### Suicide/Death/ Terminal Illness

- Medical Records
- Case Diary/  
Counselling Session
- Health Status  
Reports
- Medical Certificate

#### Escape/Physical Attack/Mass admission

- Latest Photograph
- Court Order
- First Information  
Report
- Counselling reports
- Back-up Security

#### Transfer/Re- trafficking/Infiltration

- Court Order
- Details of the  
referral Agency
- Details of previous  
case
- Written  
Information to  
Court/Police
- Statements from  
other victims
- Counselling records

## Activity 2.3

### DEATH OF A VICTIM

- In case of death by natural reasons the Protective homes/Shelter Home In-charge should collect the death certificate from the hospital and prepare a file of all medical records.
- The Person-in-charge immediately informs the nearest police station and legally competent body (CWC-Child and Concerned Court-Adult)
- The In-charge/Designate should inform the parents/guardians/relatives of the deceased victim.
- The Person-in-charge and the Medical Officer of the care institution shall record the circumstances of the death of the victim and send a report to the legally competent body (CWC-Child and Concerned Court – Adult).
- The Person-in-charge and the Medical Officer at the Care Institution shall make themselves available for any inquiry initiated by the police or the Magistrate regarding the cause of death and other details regarding such deceased victim.
- As soon as the legal formalities are completed, the body of the deceased victim shall be handed over to the parent or guardian or relatives.
- In the absence of any claimant, the last rites shall be performed under the supervision of the Person-in-charge of the Protection Home in accordance with the known religion of the deceased victim after retaining a photograph of the deceased victim for future reference.

### IF A RESIDENT COMMITS SUICIDE

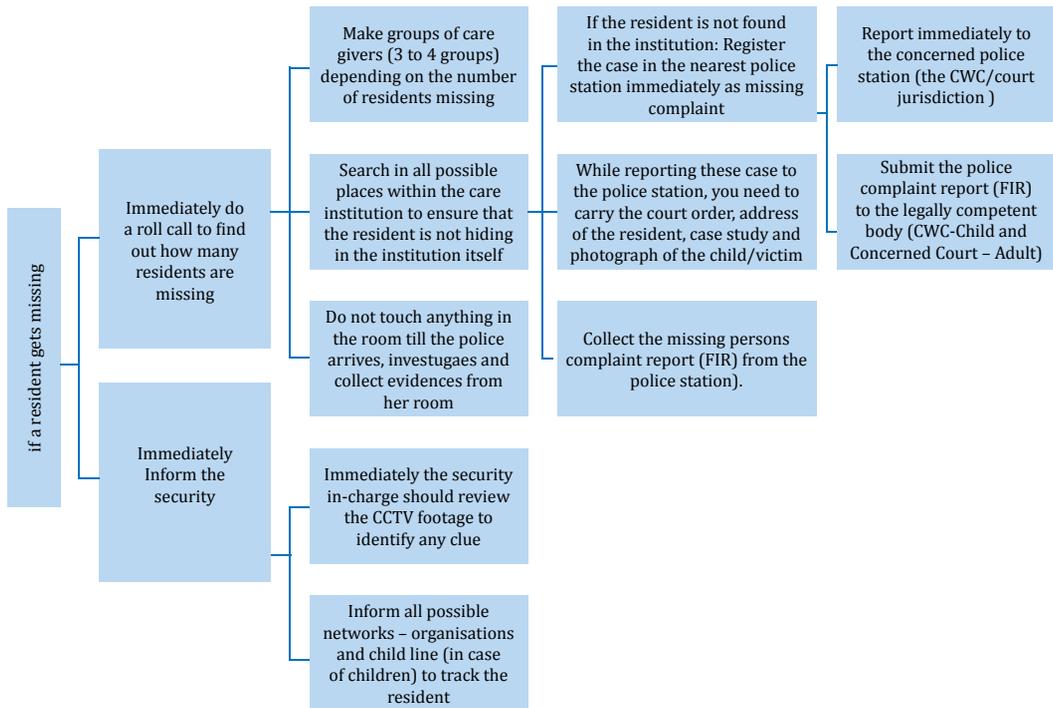
- In case of suicide, Protective homes/Shelters should inform the local police at the earliest.
- The In-charge and other staff should ensure that nobody touches or handles the body until the police arrive on the scene.
- Extra care should be taken not to check any belongings or any other material around the body belonging to the deceased.
- The In-charge should ensure that all necessary information is given to the Mandal Revenue Officer to initiate the inquest.

- A copy of all case-records pertaining to the deceased should be handed over to the Police.
- In-charge should designate a senior staff to assist the police in the post-mortem of the body.
- The In-charge should inform the concerned police station where the deceased was rescued and the concerned legally competent body immediately in writing with the FIR lodged.
- The Person-in-charge and the Counsellor at the Protective Home/Shelter shall make themselves available for any inquiry initiated by the police or the Magistrate regarding the cause of death and other details regarding such deceased victim.
- As soon as the post-mortem is over and the legal formalities are completed, the body of the deceased victim shall be handed over to the parent or guardian or relatives.
- In the absence of any claimant, the last rites shall be performed under the supervision of the Person-in-charge of the Home in accordance with the known religion of the deceased victim after retaining a photograph of the deceased victim for future reference.

### **DEATH OF STILL BORN INFANT OF A VICTIM/RESIDENT**

- The home in-charge/manager should immediately inform the concerned Police Station where the crime was registered regarding the death of a stillborn infant.
- Home In-charge should prepare a detailed report and attach relevant medical reports etc. stating the cause of death etc.
- The concerned Mandal Revenue Officer (MRO) should be informed for starting the process of inquest
- The concerned legally competent bodies (Court/Child Welfare Committee) should be immediately notified.
- The funeral should be done in an authorized burial place/cremation ground which will provide complete documentation and also cooperate if the body has to be exhumed for any reason.
- Submit all the reports including death certificate, medical records etc. to legally competent bodies.

## If a resident escapes from the care institution



If you find the resident, immediately report to the concerned police station and to the CWC (Child) and to the Concerned Court (Adult)

### Remember:

- You need to be calm in such situations
- You should not inform all residents that some residents are missing as that may create a disturbance in the shelter/protective home.
- Remember that first 2 hours is very important to find the missing resident as in these 2 hours she may not be able to travel far distances.

## AGGRESSION

- The resident could be aggressive for many reasons – maybe she is anxious about her return to home, she may not have information on her court case, she may be having a withdrawal syndrome or she feels that she is not able to reach out to her caregiver. All these are justifiable reasons for her aggression.
- The first thing to do in this situation is to acknowledge that she is aggressive because of some incident or a feeling. You may not agree to the reason for her to be aggressive, but at that point of time, you should not show any sign of distrust.
- After acknowledging, the care giver needs to go back to identify what has triggered it – the context, incident, any conversation

Don't raise your voice, or be aggressive in dealing with the resident

- If a complaint procedure exists in the home, ask the resident to use the procedure to raise her complaint so that she feels that she is in control of the situation
- In this situation, a barefoot counselor can help immensely by speaking to the resident and helping her to calm down.
- If this aggression is due to a personal issue between the caregiver and the resident, a group process would help to sort this out.
- The next step is to get more information about her aggression by asking the following:
  - What makes you feel the way you do?
  - Did it happen earlier?
  - What triggered it?
  - How did you respond to it then?
  - How do you respond to such feelings generally?
  - Are there other things that made you feel so?
  - Who are the people who provoke such responses from you?
  - What is different this time?
  - What are the effects of this problem?

- Who do you think can support you when you have such feelings?
- After you receive some clarity on these questions, ask her whether there are other problems, which she is worried about.

Prioritize the problem that is making her react aggressively. Help her to consider all the problems and decide which one is bothering her most and which one she would like to address first.

- Break the problem down into smaller parts.
- Address each component of the problem separately
- Brainstorm the solutions
  - Talking to a counselor about her worries/fear/concerns that is making her to behave aggressively
  - Getting more information about the problem that is bothering her
  - Learning techniques to manage emotions and control anger
  - Learning techniques to relax

## SELF-HARM

- Any statement by the survivor on self-harm should be taken seriously.
- In most cases, the resident would share with the counselor or any other resident or caregiver on her plans to harm herself.
- It is important to orient all residents on the importance of sharing any information that they get to hear on self-harm plans of a resident to the caregiver.
- On hearing such issues, the caregiver needs to inform the Home manager, counselor and the room in-charge to be vigilant and to keep a sharp observation on the resident to identify any change in her behavior.
- The caregiver should very sensitively explore whether she is thinking of any such plans. If this exploration hints that there is a chance of her hurting herself, then immediately a support team needs to be formed to help her to come out of this feeling.

- The caregiver needs to further explore, whether this resident has suicidal thoughts, has she planned this in details, has she attempted a similar act in past as well, has she been feeling a sense of helplessness – then the care giver should identify her as a high risk person and plan a 24/7 observation in the form of counseling and life-skill support.
- The caregiver needs to speak to her and help her to focus on her long term goals and also positive relationship, cheerful memories so that she can come out of this suicidal thought.
- For all residents, who have suicidal risk, it is important to involve a psychiatrist at the earliest possible. The caregiver also has to ensure that there is always a barefoot counselor or a caregiver with the resident throughout the time till this risk is minimized.

## SEXUALIZED BEHAVIOUR

Sexualized behaviours are very often reflected in the form of lesbian tendencies among women and children rescued from sex slavery and can become serious concern when it becomes the reason for inter-personal fights. It can become abusive also when residents

- Use coercion, intimidation or force (e.g. a 14 year-old forcing another to engage in mutual fondling of the genitals or an imitation of intercourse);
- Are associated with emotional distress (e.g. eating or sleeping disturbances, aggressive or withdrawn behaviours); and

The care giver needs to do the following to address this:

- Individual counselling session
- Group counselling without taking anyone's name or a particular incident
- Motivational talks that can help her to divert her mind from sexualised behaviours
- Explaining her on the disadvantage of overtly sexual behaviours
- Engaging her on additional activities that can keep her busy and divert her attention

**Session 3**  
**Activity 3.2**

<b>Victim related documentation</b>	<b>Home related documentation</b>
<ul style="list-style-type: none"><li>• <b>Intake Register</b></li><li>• <b>Case Study</b></li><li>• <b>Belonging</b></li><li>• <b>Medical</b></li><li>• <b>Court Records</b></li><li>• <b>Counselling Registers</b></li><li>• <b>Personal Letters</b></li><li>• <b>Follow Up Reports</b></li></ul>	<ul style="list-style-type: none"><li>• <b>Victim Identification Register</b></li><li>• <b>Family Reintegration</b></li><li>• <b>Court Movement Register</b></li><li>• <b>Hospital Movement Register</b></li><li>• <b>Group Therapy Sessions</b></li><li>• <b>Attendance Register</b></li><li>• <b>Livelihood Training Register</b></li><li>• <b>Employment Register</b></li><li>• <b>Life-skills Register</b></li><li>• <b>Education Register</b></li><li>• <b>Parent/Visitor Permission</b></li><li>• <b>Parent Meeting Register</b></li><li>• <b>Staff Meeting Minutes</b></li><li>• <b>Home Committee Reports</b></li><li>• <b>Visitor Register</b></li><li>• <b>Donation Register</b></li></ul>

### Activity 3.4

<p><b>Natural Death</b></p> <ul style="list-style-type: none"><li>• FIR (rescue)</li><li>• Court order</li><li>• Home Investigation Report</li><li>• Medical Records</li><li>• Medical Report-Cause of death</li><li>• Death Certificate</li></ul>	<p><b>Escape</b></p> <ul style="list-style-type: none"><li>• Latest Photo</li><li>• FIR Copy</li><li>• Court Order</li></ul>	<p><b>Transfer</b></p> <ul style="list-style-type: none"><li>• FIR (rescue)</li><li>• Court Order (admission)</li><li>• Court Order (release)</li><li>• Medical Reports</li><li>• Belongings</li></ul>
<p><b>Unnatural Death (Suicide/Accident)</b></p> <ul style="list-style-type: none"><li>• FIR (death)</li><li>• FIR (rescue)</li><li>• Court Order</li><li>• Photographs of the victim</li><li>• Counselling Records</li><li>• Post-mortem reports</li><li>• Family Details/Home Investigation Reports</li></ul>	<p><b>Attack (Internal or External)</b></p> <ul style="list-style-type: none"><li>• Report of security guard (external) or the care-giver (internal)</li><li>• Details of the attacker (identification details)/CC TV footage/Photo</li><li>• Photo/video-documentation of the damage</li><li>• Medical Report if there is a bodily harm</li></ul>	<p><b>Repatriation</b></p> <ul style="list-style-type: none"><li>• FIR (rescue)</li><li>• Court Order (admission)</li><li>• Repatriation Order</li><li>• Temporary passport</li><li>• Exit Permit</li><li>• Medical Records</li><li>• Counselling Reports</li></ul>

## WHY REFERRAL?

- **WHEN WE KNOW WE ARE NOT SKILLED TO HANDLE THIS SITUATION**
- **WHEN SPECIAL INTERVENTION IS THE ONLY WAY TO HELP THE VICTIM**
- **WHEN THE BEST INTEREST OF THE VICTIM CAN BE PROVIDED BY OTHER PROFESSIONALS**
- **TO BE LEGALLY SAFE TO DEMONSTRATE ALL EFFORTS WERE TAKEN**

## SITUATIONS THAT DEMAND REFERRAL

- **PHYSICAL HEALTH CONDITIONS THAT REQUIRE SPECIALIZED CARE**
- **MENTAL HEALTH CONDITIONS**
- **LEARNING DISABILITY**
- **LIVELIHOOD TRAINING**
- **PALIATIVE CARE**
- **CULTURAL/LANGUAGE CRISES**

## **SOME TYPICAL SITUATIONS**

- **DE-ADDICTION**
- **CARE FOR HIV/AIDS**
- **TREATMENT FOR TUBERCULOSIS**
- **LEARNING DISABILITY**
- **SERIOUS PSYCHIATRIC DISORDERS**
- **SELF-HARM BEHAVIOUR**
- **VICTIMS FROM OTHER STATES**
- **TERMINAL ILLNESS**
- **LIVELIHOOD SKILLS**

**Session 5**  
**Activity 5.2**

## **STRESS**

IMPACTS THE

- BODY
- MIND
- SPIRIT

STRESS IS THE STIMULUS.  
BURNOUT IS A BEHAVIOUR

## **CARE-GIVERS**

- WHILE PROFESSIONAL ROLE IS MEANINGFUL AND REWARDING
- IT IS ALSO DIFFICULT AND PAINFUL
- LACK OF RECIPROCATION OF SERVICE PROVIDED CAN BE DEMORALIZING
- DAY TO TODAY INTERNAL AND EXTERNAL CHALLENGES CAN BE DEPLETING

## **PROFESSIONAL STRESS**

- INADEQUATE SKILLS
- INADEQUATE JOB TRAINING
- IRREGULAR WORK SCHEDULES
- INTENSIVE PAPER WORK
- FUNDING STRUGGLE

## **PERSONAL STRESS**

- FAMILY RESPONSIBILITIES
- INADEQUATE SUPPORT
- MEDICAL
- AGE RELATED ISSUES
- FINANCIAL

## COMPASSION FATIGUE

- HAPPENS TO PEOPLE WHO ARE IN CARE-GIVING
- CLOSE PERSONAL ENGAGEMENT WITH THE RESIDENT/VICTIM
- ABSORBING OTHER PERSON'S TRAUMA AND RE-EXPERIENCING IT

## COMPASSION FATIGUE SYMPTOMS

### EMOTIONAL

- ANXIETY
- ANGER/RAGE

### BEHAVIOURAL

- IRRITABLE,  
WITHDRAWN

### COGNITIVE

- DECREASED SELF  
ESTEEM
- PERFECTIONISM

### SOMATIC

- SWEATING
- DIZZINESS
- MIGRINE

### SPRITUAL

- LOSS OF PURPOSE
- LOSS OF FAITH
- LOSS OF HOPE
- LOSS OF SELF  
SATISFACTION

## **COST OF BURNOUT**

- INEFFECTIVE PROFESSIONAL
- VIOLATING BOUNDARIES
- WITHDRAWAL
- BAD JUDGEMENTS
- INABILITY TO TAKE OBJECTIVE DECISIONS
- LEAVING THE FIELD

## **COPING STRATEGIES ADAPTIVE HEALTHY**

## ADAPTIVE COPING

### STRESS RESISTANCE & BETTER HEALTH

1. REGULAR EXERCISE
2. NO SMOKING
3. LIMITED ALCOHOL USE
4. REASONABLE WEIGHT CONTROL
5. LIVING WITHIN ONE'S MEANS
6. SOCIAL SUPPORT/FAMILY SUPPORT/FRIENDS

## PERSONAL MEANING

“Meaning is the sense that, no matter what is going on in your life, you can hang on to the things that really matter to you. It is the belief that there are elements and people and views that cannot, no matter what, be taken from you”

- Viktor E. Frankl

## HEALTHY COPING

“First heal yourself, and then  
go out and heal others”

- Maya Angelou

## STRESS RESISTANT

- PERSONAL CONTROL
- CLARITY IN TASK INVOLVED
- WISE LIFESTYLE CHOICE
- SEEK SOCIAL SUPPORT
- SENSE OF HUMOUR
- CONCERNED WITH WELFARE OF OTHERS

- Dr. Ray Flannery, Harvard Medical Center

## HEALTHY COPING

1. TIME MANAGEMENT
2. ATTITUDE – POSITIVE
3. HEALTHY BOUNDARIES
4. NUTRITION
5. EXERCISE
6. RELAXATION – FESTIVALS/ CELEBRATIONS
7. HUMOUR – MOVIES
8. CONNECTION

### 1. TIME MANAGEMENT

- Track your time
- Establish goals
- Plan your activities
- Keep interruptions to a minimum
- Structure meetings
- Improve communication skills
- Keep work area organized
- Use a planner

## 2. ATTITUDE

- Power of positive thinking
- ABC's of emotional reaction
  - Activating event
  - Belief
  - Consequence

## 3. HEALTHY BOUNDARIES

- Stay focused on assisting individuals to reach their goals and outcomes.
- Reassure individuals they don't have to be a friend to receive services.
- Share concerns with your supervisor.
- Set limits on availability and what you can do

Durkin, N. The importance of setting boundaries in home care and hospice nursing, *Home Healthcare Nurse* 18 (7), July/August 2000, 478-481, Lippincott Williams & Wilkins:MD.

## 4. NUTRITION

- TIMELY FOOD
- DIET:
- Carbohydrates
  - Protein
  - Fat
  - Antioxidants

## 5. EXERCISE

- Stretching
- Yoga
- Regular walk
- Aerobics
- Work Outs

## 6. RELAXATION

- Breath Work
- Progressive muscle relaxation
- Meditation

## 7. SENSE OF HUMOR

- Effect on Body
- Effect on Mind
  - Fun filled activities
  - Movies
  - Television

## **8. CONNECTION**

- Peer Support
- Family
- Friends

## **TAKING CHARGE OF STRESS**

- ACCEPT – THAT STRESS IS INEVITABLE
- AVOID – THOSE SITUATIONS/THOUGHTS THAT WILL AGGRAVATE STRESS
- ALTER – YOUR LIFESTYLE TO INTEGRATE COPING
- ADAPT – YOUR THINKING TO SEE THE POSITIVE SIDE OF A SITUATION.

## Activity 5.4

### Meditative/Breathing Exercise

Ask the participants to lie down in comfortable position, loosening any tight clothes.

Follow the below-said process:

- Close eyes, take a deep breath, hold it for a while and slowly exhale.
- Inhale and exhale like this for 6 times.
- Concentrate on the sounds around, maybe the fan, birds chirping etc. ( 2minutes)
- Listen to the sound of your heart-beat (2 minutes)
- Now concentrate on your hand, slowly start tightening your fist till it hurts and then gradually relax
- Gradually complete the entire body in this manner in the following order
  - shoulder
  - neck
  - face (eyes, nose, mouth)
  - chest
  - stomach
  - pelvic region
  - thighs
  - knees
  - ankle
  - feet
- Once the entire body is relaxed, take a deep breathe. Inhale and exhale around 6 times
- Listen to the sound of your heart beat
- Listen to the sounds around you (2 minutes) and slowly open eyes.
- The exercise should take about 30 minutes to complete.

## **SUPPLEMENTARY READING MATERIAL**

## HOME PROTOCOLS

When victims with severe trauma whose care and protection has several legal implications are admitted in a safe shelter/protection home, clearly defined protocols which are evolved within the legal framework is imperative to manage the home with professional standards upholding the minimum standards of care. These protocols take into consideration psychological needs of the victim, the enabling environment required facilitating a healing environment, safeguarding the rights of the victims and the legal statutes to be followed. The protocols also have to ensure that all action done in good faith is well protected and the home managers are not made unnecessarily vulnerable to attacks and criticism and the caregivers do not physically and emotionally depleted over a period of time. The home protocols should be looked into from several perspectives including:

1. Security Protocols
2. Documentation as a Legal Protection
3. Care For Care-givers

## SECURITY PROTOCOLS

This is an important factor in the Home Management. Victims, in their early days of stay in the safe shelter has a tendency to self-harm, run away or hurt other fellow residents of the safe shelter. The security measures taken in the shelter homes is not only about creating physical infrastructure but also the process of care in the shelter that reduces the risk of harm to oneself and also to others.

Security protocols have to be looked into from two dimensions:

- Internal Security Protocols
- External Security Protocols

### Internal Security Protocol

The Protective Homes are the legal custodian of the victims of sex trafficking and thus the caregiver needs to ensure safety and security of the resident in the shelter/protective homes as well as outside the shelter/protective home.

To perform this role, the care giver needs to conduct a detailed risk assessment of each victim and prepare a security plan for them. The risk assessment should include:

- What are the external threats from the traffickers
- How is the victim perceiving her stay in the safe shelter
- What is the influence of other victims
- What is the mental health situation of the victim at this point of time

This assessment would then help in forming a team of caregivers to escort the victim to go to court or any other place outside of the shelter.

Any movement in and out of the shelter needs to be done under proper supervision and with the order from the legally competent body  
Internal security protocol should be designed taking into consideration the specific backgrounds of all the residents. This should include:

- Visitors Protocol
- Kitchen Protocol
- Movement Protocol
- Physical Safety

### **a) Visitor's Protocol**

Visitors including parents are only allowed to meet the resident through an order passed by the legally competent authority.

A visitor register should be maintained in the safe space/protective home.

Every person desiring to meet the resident shall disclose his name and address with proof, which shall be noted in the visitors register and signed by the visitor.

Copy of the photo identity card containing the address and a photograph of the visitor to be taken before the meeting, shall be retained by the institution. If the visitor refuses to disclose his particulars, he shall be denied the meeting.

The visitor needs to be searched at the main gate. Female visitors shall be searched by female staff only.

Every meeting shall take place in the presence of the care giver, who shall be responsible for any irregularity that occurs and who shall be so placed that he is able to see and to prevent any objectionable or prohibited article being passed between the parties.

Every resident shall be carefully searched before and after the meeting in the presence of visitor. The resident should not be having anything with her before she goes for the meeting.

If any objectionable or prohibited article is found in the search conducted before the meeting:

the said article shall be seized;

the Person-in-charge shall conduct an inquiry to know the identity of the person(s) responsible for the article reaching the resident;

if the person(s) responsible are from the staff of the Care Institution, appropriate action will be initiated against them; and

A detailed report of the inquiry and its result shall be forwarded to the Department and the Board or court of competent criminal jurisdiction.

If any objectionable or prohibited article is found in the search conducted after the meeting:

the article shall be seized;

In case of any illegal article being found warranting legal action, the article and the visitor shall be detained and the police informed. The visitor and such article shall be handed over to the police;

a report of such visitor shall be prepared and placed in the case file of the resident;

a report of the incident shall be forwarded to the Board or court of competent criminal jurisdiction; and

Copy of the report shall be placed in the case file of the resident.

## **b) Kitchen Protocol**

No inflammatory or hazardous substances such as kerosene, petrol, pesticides, phenol, medicines, acid, bleaching powder, soap, rat killers should be kept in open, within reach of the residents.

The care giver needs to diligently maintain the stock register of all the hazardous substances. Any variation in stock should be taken seriously and immediate actions need to be taken.

Gas cylinder should be kept carefully and out of reach from the survivors

Kitchen key should be kept with the Kitchen manger and no access to the key to be given to any survivor.

### **c) Movement Protocol**

Each and every movement of the victim is dependent on the court orders.

It is mandatory that any movement in and out of the shelter needs to be done under proper supervision. To perform this role of the care giver, the care giver needs to conduct a detail risk assessment of each victim and have a security plan for them. The risk assessment should include:

What are the external threats from the traffickers

How is the victim perceiving her stay in the safe shelter

What is the influence of other victims

What is the mental health situation of the victim at this point of time

This assessment would then help in forming a team to escort the victim to go to court or any other place outside of the shelter.

### **d) Physical Safety**

The care institution needs to ensure that there is 24/7 security arrangements in the shelter homes.

The selection of security personnel is very important as the security arrangement should not have a feeling of living in jail.

The selected security personnel should not have any addiction to

substance or alcohol and s/he should be physically fit to take up this job.

Installing CCTV camera in strategic locations of the safe shelter is important. Care givers need to monitor these CCTV cameras to avoid any untoward incidents in the safe shelter. Having CCTV cameras in the visitor's room is an effective security measure.

Caregivers should also ensure that the residents have no access to phone. The phone calls to be made under the supervision of the caregivers. The Home must obtain fire safety certification from the statutory authority.

Caregiver needs to draw a field security plan by marking safe spaces and exit during a fire emergency and put it up in a visible area for all residents' reference. Caregiver should be trained to perform fire drills in regular intervals.

Medicines must be stored in a safe place under lock and key, which is out of reach for the survivors. Administration of any medication should be done under the supervision of the medical person and recorded properly in the medical register.

### External Security Protocol

Clear guidelines are necessary to put in place a standardised legally acceptable procedure to deal with all external contacts connected to the home. As all the victims in the Protection Home are victims of sex trafficking which is an organized crime, there are a number of external parties who with vested interested will try to take custody of the victim and make her go hostile in the court of law. Hence the external security protocols is aimed at protecting the victim from external threats and should include

- Claimant Protocol
- Hospital Protocol
- Court Protocol

### a) **Claimant protocol**

Anyone who submits a petition to the court for the release of the resident, should be verified

The claimant (including parents) can also visit the resident through the order of the legally competent authority

The claimant shall disclose his name and address with proof, which shall be noted in the visitors register and signed by the visitor.

Copy of the photo identity card containing the address and a photograph of the visitor to be taken before the meeting, shall be retained by the institution. If the visitor refuses to disclose his/her particulars, s/he shall be denied the meeting.

The visitor needs to be searched at the main gate. Female visitors shall be searched by female staff only.

Every meeting shall take place in the presence of the care giver, who shall be responsible for any irregularity that occurs and who shall be so placed that he is able to see and to prevent any objectionable or prohibited article being passed between the parties.

### b) **Hospital Protocol**

The court needs to be informed on the need for hospitalization of a resident with proper documentation and her medical file

The legally competent authority will then have to pass an order for her hospitalization.

The legally competent authority will then instruct the concerned police station for providing security to the survivor at the hospital.

While taking her to the hospital, the care giver needs to be extremely careful and protect her from any physical or mental harm.

The care giver needs to plan for the journey, based on the counselling

records and risk assessment plan and form a team to shift the resident to the hospital.

### c) **Court Protocol**

As the victim is the prime witness, she has to attend court hearings to give her evidence or has to appear before the court in case of claimants filing petitions in the court for her release. In all these cases, care giver has to ensure her safety when she goes to the court. As the victim is in the safe shelter on court order, it is mandatory that any movement in and out of the shelter needs to be done under proper supervision. Following protocol needs to be followed:

- The victims and offenders are separated as soon as the rescue happens.
- Victims are trained to ensure that during the court proceedings she is only looking at the Judge and not the other way where traffickers are seating
- If the process of trafficking has more than one accused and if the survivor is a witness for prosecution, in all these cases there is a need for the court to collaborate, so that the process of giving evidence is not repetitive and unduly delayed. The caregiver needs to ensure that the Investigative Officer has copies of the case diary, so that the diary is available to the different courts at the same time.
- The court must ensure privacy and dignity of the survivor. Privacy must be ensured by in-camera trial, witness anonymity and other methods which decrease the chances of the witness being identified.
- Caregiver needs to ensure that there is no access of media to the survivor, even in the court room processes where the survivor's identity is revealed.
- A court must be requested not to entertain aspersions regarding the survivors' character as a way of justifying the actions of traffickers.
- Caregivers need to work with investigation officers to inform the court about the phenomenon of re-traumatization and provide a list of measures which will prevent it. Insensitive cross-examination is the most re-traumatizing experience for the survivor. You must be able to predict the direction of the questioning and pre-empt questions which may harm the survivors.
- Wherever possible and needed it is necessary to seek the following modifications by the authorised caregiver:  
Changing the Court Room Arrangement

Witness Anonymity or Concealment

In-camera trial

Live witness in court with an opaque screen to protect the survivor

Separate Waiting Areas for the survivors

Close Circuit Television

Allowing a support worker or a trusted adult to be present with the survivor

Routing the question through the judge

Routing the question through a mental health professional

Video conferencing

## DOCUMENTATION AND LEGAL PROTECTION

Home management and the process of rehabilitation needs to be properly documented to facilitate effective management and accountability. This is also a requirement that is mandated by law and provides an extensive list of documentation that care institutions have to maintain. The purpose of documentation is to safeguard the interest of the residents and the staff and ensure continuity and consistency in the care process. These documents are maintained for the following purpose:

**a) Regular review by the Home manager/care givers:** Monitoring quality of the program records, including need assessments, judicial records, incident records and important decisions taken by staff for each survivor, minutes of meetings are very useful in the home management context.

**b) Decision making:** The process of decision making and the participation level of the survivor should be documented. This will help in understanding how the survivor has progressed in understanding her own context and taken control of her life by taking informed decisions on her future.

**c) Safety and confidentiality:** The procedures for maintaining documents and keeping it stored safely should be informed to all caregivers. It is very important for all caregivers to understand the level of confidentiality that needs to be maintained and practiced for certain records with details on why can access what kind/type of information and at what context.

**d) Access to survivors:** The documentation should be done in such a way that the survivor could also access the information of her own case, if required.

**e) Legal Impunity:** Documentation is also to be maintained for attaining legal impunity. In case of any mishaps, the documentation will serve as an evidence to ensure that all procedures were maintained as per the law.

***For eg: A victim of sex trafficking was rescued along with 15 other minors from Hyderabad. She was 14 years old. On her arrival at the care institution, the case assessment report highlighted that she is very fragile and also looked pale. On the advice of the in-house doctor, the care institution immediately sent her for a complete blood test). The girl was diagnosed with multiple diseases and her CD4 count was very high. She was immediately hospitalized. The CWC was informed on her condition. Despite all efforts, she passed away within 10 days of hospitalization. A case was filed against the care institution of negligence as the cause for her death. The care institution provided the medical reports to prove that the girl was brought to the Home with a critical health condition. This medical report, in-house doctor's advice and Hospitalization details, ensured legal impunity to the care institution.***

The registers that are to be maintained by the Home Management Personnel are as follows:

Register and Forms	To be maintained by
Admission and Discharge Register which will indicate change of nature of custody	Case Worker
Attendance Registers for staff and children.	Shift In-charge
Case file of each child	Case Worker
Children's Suggestion Book	Children's Committee
Counselling Register.	Counsellor
Drug de-addiction programmer enrolment and progress register	Child Welfare Officer/ Case Worker
Handing over Charge Register.	Shift In-charge
House-keeping and Sanitation Register	House Parent

Inspection Book	Person-in-charge
Legal Services Register	Case worker
Library Register	Teacher
Log Book	Driver
Meals Register/Nutrition Diet File	House Parent
Medical File of each child	Staff Nurse
Meeting Book.	Case Worker
Minutes Register of Children's Committees	Case Worker
Personal Belongings Register	Case Worker
Production Register	Case Worker
Staff Movement Register	In-charge of Security
Visitor's Book	Security Guards

## CARE FOR CAREGIVERS

A caregiver is defined as all members in a safe shelter who provides care and support to the victim in a day to day basis. The safe shelter could be run by government or civil society. These may include social workers, case workers, counsellors, teachers, vocational skill trainers, life skill trainers, probation officers, house in-charge, doctors, superintendents who are in touch with the victim on a daily basis. The important thing to remember is that care giver may or may not live in the safe shelter with the victim, but are in regular touch with them during the entire period from post rescue to rehabilitation, reintegration and post re-integration scenario.

### Professional protocols for care-givers:

#### Being Empathetic:

To be able to understand the survivor, the care giver needs to understand their

feelings and thoughts. This is only possible when we are calm in our minds and not have pre-conceived thoughts about the survivor and her context. The skill to be able to understand the survivor's thoughts, feelings and needs adequately is called as Empathy. Empathy is the care giver's skill to align his/her thoughts and feelings with those of survivors. Identifying and understanding, thoughts and feelings of the survivor is the crucial skill for working with survivors.

### **Being Non-judgmental:**

Being judgmental is a human nature. Our judgements are formed due to our own experiences, upbringing and learnings through our personal experiences. We often don't realize that we are being judgmental – it is a natural human process. But in our role as care givers, we need to be non-judgmental as our pre-conceived judgements could be detrimental to the survivor's healing process. Judgement may change the way you behave towards the survivors and would make it difficult to form any relationship with her. Thus, as caregivers, it is important to acknowledge, recognize and challenge your judgements, to minimize the risk of your judgements affecting your relationship with the survivor.

The questions you should ask yourself are:

What is the basis of this thought that I have in my mind about this survivor?

Is this my own opinion from my past experiences or it is based on any information that I have on the survivor which is formulating this thought in my mind?

How will this thought affect the survivor and my relationship?

Is this thought of mine be helpful to develop/nurture a relationship of trust between us?

What should I do as a care giver to deal with my pre-conceived thoughts and develop a relationship that is based on understanding the survivor accurately?

### **Listening**

Listening is a very important skill that a care giver should have or develop in the course of their journey as care giver. Listening is not just about hearing. Listening is a skill to understand what the survivor is trying to communicate through both verbal and non-verbal message. The caregiver needs to show that

he/she is listening by small gestures, posture and some affirmative sounds as appropriate. The skill of listening includes

Show that you are listening

Summarize the discussion when necessary

Paraphrasing the information that is given by the survivor. This helps the survivor to feel confident that the care giver understands her context and problems in the way the survivor's perspective.

Reflection involves sensing of a feeling of a survivor and trying to explore that

Validation is the skill to let the survivor know that their feelings are justified.

## Patience

The quality of the caregiver to understand the pace of each survivor in their journey towards healing is an important skill. The ability to move accordingly to the pace of the survivor is called as patience in care giving.

## Confidentiality

The core of café-giver and survivor relationship is built upon maintaining confidentiality. The victim neither wants to share her past experience with everyone in the shelter/Home nor wants her past to be exposed to everyone. The trust is built stronger when she knows that whatever she discusses with the care givers is kept confidential and not spoken to with residents or other care givers unnecessarily. This is an important role of care giver – protecting information reading the victim with highest level of confidentiality. In fulfilling this role, the care giver needs to do the following:

Media interaction with the residents is an absolute NO. The care giver during and post rescue should insist that the victims should not be photographed or interviewed for media reports.

No pictures of the residents to be taken by any person without proper permission from the concerned authority of the Home. In case, there is a need to take the photograph of the resident, the photograph needs to be taken in a way that her facial and personal identity remains confidential.

No information on the residents should be provided to any outsider without orders from legally competent body.

Care giver should ensure that the records of the resident including the medical reports, counselling reports are maintained with utmost confidentiality with limited access to the authorized persons within the Home/Shelter as well.

### Un-conditional positive regard

The quality to go beyond personal warmth and respecting a person with all their life experiences without imposing any emotional condition is a very rare but important quality of a caregiver.

### Being in control

A caregiver needs to be emotionally balanced and always remain in control of her emotions while responding to a particular situations or circumstances. This will ensure a clam and enabling environment for survivor who is extremely traumatized.

### Willing to learn and accept their own limitations

Each victim is unique and thus dealing with each victim is also unique. There is no one formula that can fit all victims. The caregiver thus needs to be someone who is open to learning. Only a person who is open to learning will be able to provide the kind of support and care that a victim of sex trafficking requires.

This is also a quality that helps the caregiver to understand her own limitations and learn from mistakes and also seek help/support from experts or other care givers as may be necessary.

### **Detachment from the survivor**

In the role of the caregiver, the person needs to be within her boundaries that her/his role demands. Your role as a caregiver and your knowledge of the boundaries of your role will protect you from having an attachment towards the

survivor. If you have developed a strong feeling towards a particular survivor that should immediately be communicated to your supervisor so that she/he can help you to sort this out.

But, if your emotions are affecting your behavior, it is important that you withdraw from the particular caregiving role towards the concerned survivor rather than impacting her process of healing. Even if you withdraw and transfer the care to another caregiver, it is important to share this with the supervisor.

## **Stress & Burn Out**

The role of the caregiver is extremely stressful and challenging. Caregivers are often faced with mistrust, helplessness and lack of support in their day to day activity. This often shales their belief in what they are set to achieve. Caregivers can become over anxious, cynical and also lose hope in what they are doing. Being in contact with the victim and provider her with necessary care could also affect the caregiver negatively. Caregivers put their heart and soul to facilitate a process of healing for the victims of sex trafficking. The process of healing is slow in this case and a victim may face multiple challenges during this process of healing which can adversely affect her. For a caregiver to go through this process is extremely tough. Thus caregivers experience burn-out symptoms after a period of providing care to the victims. This burnout is experienced by each caregiver differently. The caregiver could become abusive, angry, and aggressive or may end up having high-blood pressure or diabetes or other diseases. These symptoms are usually noticed in the caregivers after few years of work. But this burn out of caregiver results in disturbing the therapeutic process of the victim care and causes re-victimization of the victim. Thus it is important to identify and address early signs of burn-out in caregivers.

### **Burn-out symptoms:**

The symptoms of burnout may include:

Feeling exhausted

Feeling lack of interest/motivation

Disturbed sleep

Having aches and pains

Feeling worthless

Losing temper at work

Making unnecessary mistakes

Becoming detached to the emotions of the victims

Judgmental in nature

Constant anxiety

Absenteeism

## **Managing stress and burnout**

Effective ways of managing stress and burnout needs to be done at two levels: a) Individual and b) Organizational.

### **Organizational Level**

The organisation should enable the caregiver to understand the reality of her/his work. The consequences and positivity of the work that they are involved in is necessary for caregivers to acknowledge.

An orientation on burn-out and how to recognise it is an important areas to get caregivers trained on

Exposure to other caregiving organisations to understand how they manage stress of burn-outs

Creating and facilitating a platform to review regular work, challenges faced and opportunities identified

Social interaction in the form of picnic and other recreational activities

Restructuring the roles and responsibilities of caregivers

Ensuring that care givers gets adequate break to do non-caring activities as part of the home management

Allocating new activities to the caregivers which may be less demanding

Monthly performance appraisals to encourage and motivate caregivers

Provide therapeutic support to caregivers through professionals

Appreciation and acknowledgement of work done by caregivers within the organisation

Mandatory vacation for caregivers

Create space for mutual sharing within the organization

### **At an individual level:**

Understanding sex trafficking and the important role of caregiver in facilitating an enabling process for their healing is important

Acknowledging that the role of caregiver is to facilitate a process that ensures dignity of the victims and not to force the victim to change

Practicing self-control, identifying a passion or a habit to continue, sharing frustrations and learning from it

Valuing oneself and understanding her/his worth is an important process to manage burn out

Engaging in activities outside of work

Exercises and regular work outs

Meditations and Yoga

Listening to music/songs

## Talking to peers and sharing the anxiety

Each person copes with their stress differently. The organization should identify this different method of coping among the caregivers and encourage them to practice the same to manage their stress.

### **It is important to have following platforms/spaces of communication to deal with stress and burn out in any care institution:**

**Team Meeting:** Weekly meeting of caregivers to review the program and plan activities for the next week is important. It helps in reviewing each survivor in a team meeting (upholding confidentiality as a value and practice) and to also assess the safety and impact of each care process in the meeting.

**Debrief:** This is an important part of the daily work. The caregiver can share information on survivors and also share any particular incidence/discussion that has any immediate impact on the caregiver. It is also a good space to clarify information with each other. This is usually a short duration meeting.

**Peer group:** This is a weekly meeting to talk about themselves and the impact of their work on themselves. This group is ideally be facilitated by a team member who can keep the process simple and neutral. IN this space, caregivers should no speak about survivors – It is a space to talk about them and sort out inter-personal issues, if any.



