(Re)Building the Future

Supporting the recovery and reintegration of trafficked children.
A handbook for project staff and frontline workers.

Stephanie Delaney

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Terre des Hommes
International Federation
(RE)BUILDING THE FUTURE
prepared by Stephanie Delaney, November 2012

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This handbook was prepared for the Terre des Hommes International Federation (TDHII), which is a network of ten national Terre des Hommes (TDH) organisations, whose mission is to provide active support to children, their families and their communities without racial, religious, political, cultural or gender-based discrimination, in the framework of the United Nations Convention on the Rights of the Child.

The Terre des Hommes organisations mobilise political will, advocate for appropriate government policies and run 1043 development and humanitarian aid projects in 72 countries in close partnership with local and national NGOs. They also carry out research and evaluations to document the impact of interventions and uphold project quality. Projects are run in close partnership with the population concerned, including children.

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Abbreviations / Definitions / Glossary

We have tried to keep this handbook in an easy to follow format, avoiding jargon and technical terms where possible. Still, the field of child protection and child welfare is full of specialist words and concepts. These words can mean different things in different places (within countries or even within organisations) or their meaning is not always clear.

To avoid any confusion, we use terms in the handbook in accordance with the following working definitions. Please note that some of the terms are discussed in greater detail in the relevant sections of the handbook.

ACRONYMS
TDHIF Terre des Hommes International Federation
TDH Terre des Hommes

WORKING DEFINITIONS

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Abuse</td>
<td>Any act or omission that may be deliberate or accidental and that results in or is likely to result in significant harm to a child’s well-being and development. There are four main categories of abuse: physical, sexual, emotional (sometimes called psychological) and neglect. Trafficking and exploitation are complex manifestations related to these forms of abuse. Violence is also often used as a substitute word for abuse, although it is not used in the handbook because the way in which the term violence is used in everyday life can be misleading when applied to abuse (for example, neglect may not be violent).</td>
</tr>
<tr>
<td>Assessment</td>
<td>The process of collecting information about a child and making sense of it in order to develop a plan to ensure that that child’s needs are met.</td>
</tr>
<tr>
<td>Best interests of the child</td>
<td>The concept of ensuring that what actions take place or what plans are made places the most importance on the needs of a child and their welfare. This is particularly important because within the United Nations Convention on the Rights of the Child (1989) – much of which is reflected in national legislation – it can sometimes appear as if the rights and interests are contradictory. It is necessary to balance these competing demands so that decisions made support the most positive outcome for a child.</td>
</tr>
<tr>
<td>Care plan</td>
<td>An action plan that is developed following an assessment; it outlines the tasks, responsibilities and time frames to ensure that the needs of a child are met.</td>
</tr>
<tr>
<td>Child</td>
<td>In line with international agreements and conventions, ‘child’ refers to anyone younger than 18 years, even if national law or policies or customary practices are different.</td>
</tr>
<tr>
<td>Child-centred care/child-centred approach</td>
<td>The concept of ensuring that services are provided in a way that places the greatest emphasis on the needs of a child rather than on the efficiency of the organisation or management/administration processes.</td>
</tr>
<tr>
<td>Child-friendly approach / child-friendly procedures</td>
<td>A way of working that ensures that services are provided in a manner that is suitable for children, taking into account the age and development of each child.</td>
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<tr>
<td>Child participation</td>
<td>Empowering children to engage in decision-making processes that affect their lives. This can take two main forms: general consultation (such as with the design of services) and specific individual involvement in relation to a child’s own care plan and their life in general.</td>
</tr>
<tr>
<td>Child protection</td>
<td>The protection of children either suffering or at risk of suffering from all forms of abuse. In the context of this handbook, it does not refer to the promotion of children’s rights generally (as it is sometimes understood) but specifically relates to protection from abuse.</td>
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<tr>
<td>Child protection agency</td>
<td>Any organisation that has the mandate to protect children. This can include state social welfare departments, the police and NGOs. The extent and powers of individual agencies will be dependent on the local operating context and national laws.</td>
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<tr>
<td>Child protection mechanism</td>
<td>A protocol, procedure or way of working that may operate at a local or national level and that is designed to identify children who are at risk of abuse or are suffering abuse and provide services to them.</td>
</tr>
<tr>
<td>Child protection system / national child protection system</td>
<td>The legal and policy framework together with services, operating in a coordinated way to ensure that children are protected and their welfare is promoted. This involves various stakeholders, including those in social services, health, education, the police, NGOs and community groups (depending on the specific country context).</td>
</tr>
<tr>
<td>Child rights</td>
<td>Rights to which children are entitled under the United Nations Convention on the Rights of the Child and which governments have given a commitment to upholding and fulfilling. This includes the right to protection from abuse.</td>
</tr>
<tr>
<td>Counselling</td>
<td>An umbrella term that refers to the process of emotionally and psychologically supporting a child. There are many different understandings of counselling, ranging from giving advice to helping a child to recover from a traumatic event (or events) and in-depth therapy. Where a specific form of counselling is referred to in this handbook, it will be made clear; otherwise, it is used in its broadest sense.</td>
</tr>
<tr>
<td>Exploitation</td>
<td>Abusing a child for the cash or in-kind benefit of a third party (another person).</td>
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<tr>
<td>Investigation</td>
<td>In this handbook, the term refers to the processes involved in undertaking a criminal investigation that would lead to the prosecution of traffickers and abusers.</td>
</tr>
<tr>
<td>Maltreatment</td>
<td>Refers to the mistreatment of children and, to avoid confusion, is sometimes used to refer to all forms of abuse, exploitation and violence.</td>
</tr>
<tr>
<td>Project (or Schemes)</td>
<td>A general term to cover any part of a programme that is designed to support children who have been trafficked. This includes shelters.</td>
</tr>
<tr>
<td>Rescue</td>
<td>The removal of a child from a situation of exploitation or abuse. This can be either through action by the police and sometimes in collaboration with child protection organisations or through a child seeking support (for example, a street child who may have been trafficked showing up at a drop-in centre). However, it is important to stress that rescuing a child does not always mean that they will not return to a situation of abuse or exploitation, perhaps even more severe than previously experienced. For this reason it is sometimes useful, and more accurate, to say that the child has been withdrawn from the situation.</td>
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**Recovery**
The process of working through experience and healing hurts which have been caused through abuse, in order to move on.

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

**Repatriation**
In this handbook, the term is used specifically to refer to the legal and administrative procedures associated with returning a child who has been trafficked across international borders to their home country.

**Resilience**
The characteristics and skills of a child that help to protect them from the worst effects of abuse and which enable them to recover.

**Social welfare department**
A government department or ministry that is responsible for social care and child protection. Depending on the country, there may be one or more departments (or none) that has this responsibility. If not ‘social welfare’, such a department can go by the name of ‘social affairs’ or ‘social services’.

**Trafficking**
The process of moving a child from one place to another for the purposes of exploitation. The term can refer to the whole process generally or to specific parts of the process, such as recruitment, harbouring or transporting a child.

**Withdrawal**
The removal of child from a situation of abuse and exploitation. This can either be because the child is ‘rescued’ by a child protection agency or seeks support to leave or because the child decides to leave the situation of abuse or exploitation (perhaps with the support of friends or others but without seeking support from an agency).

The terms project worker, worker and staff are used interchangeably to mean anyone who works in a project or service that provides support and assistance to trafficked children, either as a paid member of staff or a volunteer. Where a particular role, for example teacher or counsellor is referred to, this is made explicit.

There is much debate about the use of the word “victim” to describe children who may have been trafficked; many people think this label can trap children in a situation of powerlessness. Thus, the term survivor is preferred by many people working with children. However, both terms are problematic because they define and make judgements about children. In this handbook, we use the terms trafficked children, children who have been trafficked or former trafficked child because they are purely descriptive of what has happened to children.
TERRE DES HOMMES IN ASIA

TDH has worked in Asia for many years, in particular focusing on programmes for trafficked children. TDH recognises that advocacy is a core element of its work in effecting change in children’s lives. Additionally, TDH considers it important that advocacy messages are based upon concrete experience from the field and thus assists numerous partner agencies to carry out direct child protection and child welfare programmes.

INTRODUCTION

This handbook has been written for mainly for use in South and South East Asia. Given the diversity of the region, and the differences both among countries and in the operation of various organisations, it is not possible to provide a complete guide with detailed instructions. To do so would be misleading.

Workers need to be aware of, and work within, the legal framework of their country with respect to the protection of children. This might include, for example, mandates about the particular role and responsibilities of the organisation they work for, or issues regarding confidentiality and the need to report alleged abuse. This could be either a legislative requirement or part of the professional code of conduct for certain occupations (such as social workers and psychologists).

Similarly, workers also need to be aware of any standards or indicators that have been developed, such as those relating to the establishment and operation of shelters. Where standards do not exist, projects might consider it useful to develop such, in order to guide and assure the quality of their services.

PURPOSE OF THE HANDBOOK

The primary purpose of this handbook is to expand on project workers’ understanding of how to help trafficked children in schemes supported by members of the Terre des Hommes International Federation (TDH) and their local partners. Ideally, the material will be useful more generally to other organisations or programmes for abused children. The handbook is not intended to be a training guide but instead should be considered as a tool for reinforcing training previously provided and to act as an introduction for newer workers. It can also be used to help project workers, and their managers, identify areas of further capacity building that may be needed.

The handbook seeks to explore the principles underpinning work with trafficked children and to examine the main processes involved. Consideration is also given to the dilemmas that may be encountered and issues that workers should keep in mind as they work with trafficked children.

HOW THE HANDBOOK WAS DEVELOPED

The handbook was developed within the framework of a wider programme concerning Children on the Move, of which a number may be trafficked.

In addition to a review of existing literature, two workshops (one in Asia and one in South Asia) were conducted with TDH and its country partners to explore current practices. The outputs from these workshops, together with information from the literature review and supplementary information provided by the consultant, were compiled into a draft document. This document was then distributed for partners to review, and further inputs provided during a workshop with partners in Bangkok during early November 2012. The final version of the handbook was produced in November 2012.

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

FORMAT OF THE HANDBOOK

The handbook is divided into sections, beginning with a general discussion about the implications of trafficking for children and its impact on their lives. Each ensuing section covers a different aspect relating to the reintegration of trafficked children. This has been done as a way of systematically organising the material. It should be remembered that there is considerable overlap between the sections; each aspect affects the others and should not be considered in isolation.
Typical effects and consequences of trafficking

Rarely, if ever, is a child left unaffected by the experience of being trafficked. Some consequences can be acute (serious and immediate), while others may be long term, with effects lasting for years. Psychological consequences in particular can impact heavily on a child’s life and follow them into adulthood.

An added complication is the age at which a child is trafficked. We learn our ideas about ourselves and develop our identity partly as a result of the relationships that we have with others. Children who have not had the opportunity to grow up in a loving home or have only experienced adults who are abusive may develop ‘skewed thinking’ and unhelpful attachments to inappropriate adults (such as the abuser), place themselves in situations of danger or increased risk, develop unhealthy and unhelpful ideas about themselves and the nature of relationships. This is particularly the case when children may have been lied to about why they were trafficked (for example, being told that their family did not want them or that their parents were dead). This can result, among other things, in an inability to trust others and low self-esteem.

Specifically relating to a child’s psychological well-being, trafficking has three main dynamics: first, the impact of separation from family and the effects of the abuse on a child’s psychological, social and emotional development; second, the impact of the abuse itself on a child (for example, feeling as if they are worthless or it is their fault). These two impacts are intimately linked. Third, the child may suffer further emotional, mental and psychological problems because of the impact of the trafficking experience on their life and, in turn, how this affects the nature of the relationship between them and their community or the greater society. For example, if one of the effects of the abuse is low self-worth, this may affect future relationships that the child has and their ideas about their future. This could then lead to a compounding, or multiplication, of the feelings of low self-worth and other unhelpful and negative feelings and create additional problems for the child, even once they have been removed from the trafficking situation.

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

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

Children and adults may see the impact and consequences of trafficking very differently. Some children may see their experiences and/or behaviour as okay or acceptable.

If this is the case, then it may be especially challenging for workers to help the child first of all to accept the support offered. Put simply, the child may not see themselves as having a ‘problem’ or as needing assistance and may be resistant to help. This is especially true when the child may have a self-image of being in control or, as a way of coping, regard the trafficking experience as positive (for example, as a way to make money and be independent or to provide for the family).

We should remember that typically the behaviours that a child exhibits are as a result of their experiences.

Table 1 offers a summary of the typical consequences of trafficking. It is important to stress that the impact of trafficking on each child is very individual and is influenced by three main factors:

1. The individual character, skills and attributes of the child.
2. The age the child was when first trafficked and their previous experience of being cared for.
3. The nature and duration of the trafficking and exploitation.

A fourth important factor for the child is the help and support that is offered once they have become identified as a trafficked child. Sometimes services that are designed to support and protect children actually do more harm if they are not carefully tailored and based on the actual needs of a child. For example, making children undergo intimate medical procedures when they have been sexually exploited can be just as distressing as the original abuse if it is not carried out carefully and using child-friendly approaches.

Additionally, the effects of trafficking may lead to damaging behaviour patterns developing, which, if not addressed in a sensitive and suitable way, may continue or become worse and impact negatively on the child and their future life. One example of this would be a child who believes that they need to look after themselves, because nobody else will. This might lead to them rejecting the help and support of workers, resulting in the worker becoming frustrated with the child and rejecting them, thereby increasing the child’s feelings of being alone. Another common example is children who self-harm, which can sometimes be seen as a way of ‘seeking attention’ and can be difficult to deal with but which may be very dangerous for the child if staff do not know how to respond appropriately.

1. See the handbook’s references and resources section for details regarding publication and research relating to the effects on children of abuse, exploitation and trafficking.
TABLE 1 SUMMARY OF TYPICAL CONSEQUENCES OF TRAFFICKING

<table>
<thead>
<tr>
<th>FACTOR</th>
<th>POTENTIAL CONSEQUENCES INCLUDE</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAIN FORMS OF ABUSE</td>
<td></td>
</tr>
<tr>
<td>Physical abuse and neglect</td>
<td>Physical health problems, contusions, cuts, burns, broken bones, failure to meet developmental milestones and emotional and psychological distress. In some cases, disabilities or death may also result.</td>
</tr>
<tr>
<td>Emotional abuse and psychological harm</td>
<td>Lack of interest, hopelessness about the future, feeling worthless, low self-esteem, depression or suicidal thoughts (including self-harm), inability to trust others, fear, panic attacks, restlessness, nervousness, rage, violent outbursts, a need to be in control and post-traumatic stress disorder.</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>Sexually transmitted infections (including HIV), pelvic inflammatory disease, infertility, vaginal fistula, unwanted pregnancy, unsafe abortion, poor reproductive health, physical injury and emotional or psychological distress, unhelpful ideas about the nature of relationships, and sexualised behaviour.</td>
</tr>
<tr>
<td>SECONDARY EFFECTS</td>
<td></td>
</tr>
<tr>
<td>Development of poor social skills and coping mechanisms</td>
<td>Inability to develop and maintain appropriate relationships, placing self in harmful situations, violence, misuse of substances such as drugs and alcohol (leading to overdose, drug or alcohol addiction, mental health problems and physical health problems as a result of effects of substances on the body).</td>
</tr>
<tr>
<td>Economic disadvantage, including debt bondage, withholding promised payments and lack of appropriate remuneration for work</td>
<td>Malnutrition, developmental milestones not met due to lack of basic needs, risk-taking (to repay debts), insufficient funds to pay for care (where required) and lack of educational opportunities.</td>
</tr>
<tr>
<td>Legal insecurity, such as forced (illegal) activities or confiscation of documents</td>
<td>Restriction from or hesitancy to access services and protection.</td>
</tr>
<tr>
<td>Marginalisation, stemming from structural and social barriers (isolation, discrimination, linguistic and cultural barriers, difficult logistics and administrative procedures) and stigma and rejection from society</td>
<td>Unmet needs, lack of opportunities to access services and secure protection, difficulties in reintegration and acceptance by families and communities, lack of opportunities for viable income generation and independence as adults.</td>
</tr>
</tbody>
</table>

However much we try, can we ever really assess the impact of trafficking on the lives of individual children? Even after working with a child for a long time, there will still be areas of their lives and their experience that they may not choose to share. Remember that, as a coping mechanism, children can ‘block out’ painful experiences or seek to minimise them (either consciously or subconsciously). We need to be very careful when working with children who have been trafficked not to ‘destroy’ their way of coping with life in our efforts to help.

This needs sensitivity and, almost certainly, workers will need specific training for working with children who have been trafficked.
In thinking about the support to be provided to trafficked children, three main stages are important to understand:

**RESCUE (Withdrawal):**
The point at which a child is removed from or leaves a trafficking situation. We often think of this as a result of adult intervention (such as when police raid a brothel), but children are sometimes able to leave a situation on their own, with or without the aid of services. For example, street children who have been trafficked sometimes seek out a drop-in centre on their own.

**RECOVERY:**
The stage following rescue (withdrawal), during which a child comes to terms with and works through their experiences and begins to heal, learning new skills for life and new ways of relating to others. This is often a very difficult time of adjustment for the child. Sometimes, there is a temptation to return to a situation of exploitation (which may place a child in a very risky circumstance) because this is what feels 'safe' and known.

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

Even though reintegration can be considered the final step, this can be the most challenging because there is a tendency to be very optimistic (especially if the child is returned home). Without careful consideration about the situation that the child is being reintegrated into and if there is no or little follow-up support, there is a high risk that the placement will break down and the child will end up either being re-trafficked or exploited again.

The process of recovery and reintegration is often seen as linear - in that one stage follows the other. This is partly a distinction that is convenient for services and organisations to make. However, the process is more circular, as shown in figure 1.

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**FIGURE 1 INTERLINKED PROCESS OF RECOVERY AND REINTEGRATION**

- **REINTEGRATION:** Reconnecting with society and developing skills for the future
- **RECOVERY:** Healing from experiences and learning new ways to relate
- **RESCUE:** Establishing safety - both physical and emotional
- **Children** who self-refer or who are not formally rescued by police or child protection agencies may repeatedly seek support and then reject or distance themselves from more intensive help.
3 Supporting physical, emotional and social well-being

The goal of any reintegration project should be to support the physical, emotional and social well-being of children in need. To do this necessitates creating a protective environment, one in which children feel safe and valued. This includes ensuring that there are agreed codes of conduct for workers that explain the expected behaviour of all staff (especially in relation towards children). Each agency or project also should have clear policies and guidelines regarding the protection of children, including what actions the organisation takes to ensure that children are protected from abuse (such as the recruitment of staff who are suitable to work with children and the training that will be provided to them) together with what steps will be taken if a situation of abuse occurs. These should be produced in child-friendly formats so that children are aware of the procedures and know how to raise a concern.

Looking after and working with children who have been trafficked and who have had distressing experiences and who may have challenging behaviour can be very draining for workers. To prevent burn out and to help staff further develop their skills (and to ensure that the care of children is kept at appropriate levels), it is important that workers are supervised and supported. This should be done through team meetings and also individual sessions with a supervisor in which more personal issues can be discussed.

Even though it takes resources, supporting the physical well-being of a child (by providing safe shelter, food, clothes and health care) can be most easily anticipated and provided. These are items that are more tangible and obvious in terms of assessing what is needed and because children must have their basic physical needs met - otherwise, they will not survive. Additionally, having physical needs met is a right and can give important messages to children about their own value as individuals.

In contrast, it is more difficult to promote the emotional and social well-being of a child. This is largely because it is not so readily apparent and thus often difficult to assess. It is of great importance, however, because we know that the emotional world of a child has a strong impact on their lives. In the longer term, an emotionally warm environment in which children feel accepted, valued and cared for is just as important - perhaps even more so - than the physical conditions in which they live or experience.

The emphasis that is placed on providing emotional and psychological support is critical for children. The emotional environment of a project is crucial, and this needs to be set from the moment that a child first comes into contact with project workers. Staff who are consistently caring and available, even if they do not always agree with a child, and who help children explore and address their emotional issues can make a huge contribution to the successful reintegration of a child. They can help children to develop new ideas about themselves (such as building their self-esteem and confidence) and give them a chance to experience different kinds of non-abusive relationships with adults.

Specialist support, such as counselling, is typically needed to help children address their emotional and psychological issues; but creating a warm, emotional environment - provided there are sufficient workers - requires no special resources. All that is needed is for project workers to adopt behaviours and attitudes (such as helping children to control their behaviour) that demonstrate through constant reinforcement that the child is important.

2. Several training and resource packages are available to help organisations develop and implement their child protection policies and procedures. For example, see the Keeping Children Safe Coalition leaflet "How to run a child protection policy".
3. See reference and resources section for resources on child development and abuse.
4. Workers may need training on how to develop and consistently apply such behaviour.

Being 'rescued' and moving into a shelter (or other alternative care setting) can be stressful and difficult for children to cope with. Having someone to help them settle in, such as another child, and designating someone to be the 'Key Worker' (the primary point of contact) with whom a child can develop a close relationship helps set the tone that the project values children.

This 'continuity of care' should be provided across the whole recovery and reintegration process, although it can be difficult to achieve, especially if returning a child to another country or region when a change of workers may be necessary. In such cases it is important to prepare the child and help them to cope with the change. For example, if possible introducing workers to children in advance before 'hanging over' at borders and ensuring that any care plans developed are carried through even when the child changes location.

3.3 Control and behaviour management

All children who have been trafficked have experienced a loss of control of their lives. This can have a profound effect on how they see themselves and how they feel about managing problems as they struggle to regain control. Additionally since change and uncertainty can increase a child's struggle for control, having a stable and routine environment (though not one that is rigid and inflexible) in a project can help the child manage their feelings and behaviours.

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

Unhelpful behaviour patterns are set over time, so it should not surprise project staff that if their initial tactics for managing behaviour do not work, they will need to persevere with the strategies. We need to also remember that the behaviour probably makes sense to a child engaging in it, even if they cannot explain it and it does not seem helpful. Our role is to help children learn new ways of relating and behaving.

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

- Wherever possible, ignore bad behaviour and concentrate on good behaviour - Children want attention. By noticing the good things that they do we can encourage children to repeat such behaviour. Often a reward for good behaviour is praise.
- Criticise the behaviour and not the person - Say, "That was a stupid thing to do", not "You are stupid." Trafficked children typically already have poor self-esteem and low self-worth (even if they sometimes give the opposite impression and seem very confident); externalising the behaviour allows children to see themselves as separate from the behaviour and hence able to choose to do things differently in the future.
- Be consistent - Children need to feel secure. Part of this comes from knowing the 'rules'. This includes understanding how staff will react.
- Give good and positive messages - Noticing and commenting on the things that children are good and skilled at helps build self-esteem.
- Create opportunities for learning - Say, "Because you spilled your drink this time, remember next time not to fill the glass so full".
Enable children to see that mistakes can be made and that this is not a threat to the relationship with them, which will continue despite the incident.

- **Use positive phrasing (wherever possible)**
  Do not say, “Don’t make a mess”, but instead say, “Please remember to clean up after you have finished.” This enables children to have interactions in which not everything is negative, which thus increases their self-esteem.

- **Use distraction before the situation escalates**
  It is better to avoid a conflict than to deal with it. Humour often is a good way of defusing a situation, but we need to use this with care so that a child does not feel that we are laughing at them.

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

- **Increase a child’s sense of control**
  Give choices and include children in decision-making processes, even if it may not be appropriate for them to have the final say. This increases a child’s perception of being in charge of their life and reduces feelings of powerlessness and vulnerability. By doing this, a child will learn that they can get what they want without having to ‘act out’ (by having temper tantrums, for example).

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

- **Allow children to take responsibility for a task or the well-being of others**
  This will help a child develop a sense of achievement, importance, and self-esteem (being careful not to place other children at risk nor place the child in a situation in which they may feel overwhelmed with responsibility).

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

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

- **Remove onlookers or a child from a negative situation**
  Particularly when a child’s behaviour is distressing to other children (if they are harming themselves, for example), it is important to remove other children from the situation so that they are not harmed by witnessing something disturbing. In other circumstances, such as when a child is being violent or demanding attention, it might be more appropriate to remove that child, such as by using “time out”.

Although ‘time out for cooling off’ can be useful, one of the problems with this technique is that it can reinforce a child’s sense of isolation and rejection. A more helpful tactic is to bring the child closer to a worker rather than push them away and thus remove them from a negative situation. For example, if there is a fight, one option could be to send the child to another room alone, but it would be better to suggest that the child went somewhere with a project worker. It is never appropriate to lock a child up, leave a child isolated for long periods of time or withdraw food as punishment.

Sexualised behaviour, which is typically a result of sexual abuse, can be particularly challenging for staff to handle. By sexualised behaviour we mean that the child may use sex, or the offer of sex, such as flirting, as a strategy for trying to get what they want. This must be understood as a consequence of the child’s abuse, and not an indication that the child is deviant or morally wrong.

Workers need to remember that for teenagers and adolescents, this is a time of great hormonal and physiological change. It is important to appreciate that often a degree of what might be interpreted as sexualised behaviour is actually more a stage of normal development.

**SUMMARY BOX: BEHAVIOUR MANAGEMENT TECHNIQUES**

- Wherever possible, ignore bad behaviour and concentrate on good behaviour.
- Always criticise only the behaviour that is not wanted and never criticise the person.
- Be consistent in applying rules and, where possible, negotiate them with a child. Be fair and always give children the opportunity to tell their side of the story or express their opinion.
- Give positive messages about a child and their skills, talents and behaviour.
- Remember that every situation creates an opportunity for learning new skills and behaviour and new ways of relating to others.
- Increase a child’s sense of control by giving choices and responsibility as appropriate, such as responsible for a task or looking after the well-being of others.
- Use distraction before a situation escalates; if this is not possible, remove the child or onlookers from the situation.
- Be clear about what is expected and what will happen if expectations are not met – give a child the choice of what to do, knowing what the consequences will be.
- Listen and empathise with the feelings or views that a child expresses (or which you think are there), even if you don’t agree.
- Apologise if you are wrong, giving an explanation (if appropriate) for your action.
3.2. Developing social skills

Children who have been trafficked may not have learned appropriate ways to interact with others. This is a social skill they need to learn if they are to be reintegrated successfully into their own or another community and to have a fulfilling and productive life as an adult. High self-esteem, self-worth and confidence are the foundations for positive social skills. People who are secure about themselves are more able to develop mature and balanced relationships with others.

There are many things that workers can do to help increase the self-esteem of children and increase their sense of importance and value. As with many issues concerned with emotional well-being, it is not just the case of what a staff worker says but how they behave.

Simple ways of helping a child to increase their confidence and self-esteem include:
- giving positive messages and praise
- providing positive role models
- encouraging pride in appearance
- giving responsibility where appropriate and encourage helpfulness
- listening and responding to what a child says
- creating a ‘culture of belonging’ and encouraging participation.

Social skills can be improved and developed in a number of ways, as explained in Table 2.

### Table 2: Developing and Improving Social Skills

<table>
<thead>
<tr>
<th>Activities – crafts, music and drama plus day-to-day activities, such as cooking, and light chores, such as cleaning (if seen as helping out and not a duty)</th>
<th>Can help develop:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- ability to share</td>
</tr>
<tr>
<td></td>
<td>- communication skills</td>
</tr>
<tr>
<td></td>
<td>- experience of success/failure and winning/losing and ways to cope with this</td>
</tr>
<tr>
<td></td>
<td>- ability to participate</td>
</tr>
<tr>
<td></td>
<td>- patience (taking turns and thus reduce impatience)</td>
</tr>
<tr>
<td></td>
<td>- self-esteem</td>
</tr>
<tr>
<td>Games – ball games, cards, board games</td>
<td>Can be used to explore specific issues and develop particular skills, such as keeping safe, assertiveness and anger management.</td>
</tr>
<tr>
<td>Group work</td>
<td>Enables specific skills to be developed, according to the individual needs of each child</td>
</tr>
<tr>
<td>One-to-one support – including explanations and mentoring from staff</td>
<td>‘Shows’ children ways of behaving that they can imitate and alternative ways of handling situations</td>
</tr>
<tr>
<td>Modelling by staff</td>
<td>Provides different forums for children to explore, acquire and practise their social skills and have different experiences</td>
</tr>
</tbody>
</table>

3.3. Coping skills

Everyone needs to find ways to cope with difficult situations and circumstances. For some trafficked children, unfortunately, the strategies that they develop to cope with their past experiences may negatively impact upon their future life.

Working with children to help them develop construct coping skills can be useful. At the same time, workers must ensure that they do not remove the coping skills that a child has – even if they are seen as undesirable – but instead offer alternative ways of coping for a child to adopt. Replacing the existing coping mechanism without giving an alternative one may leave children in a dangerous position of having no way to manage their feelings.

Specific techniques, such as meditation or listening to music to relax and calm down, as well as breathing exercises, writing and drawing thoughts and feelings can all be helpful for children. The ability to seek out appropriate support is also essential.

Every activity and every social interaction can be an opportunity for self-development and growth and in itself can be helpful for a child in terms of increasing their emotional and social well-being.

3.4. Empowerment of children through the process

Much emphasis is rightly placed on the importance of child participation and empowering children to be involved in decisions that affect their lives, thus helping them to take some control of what happens to them. Although child participation is often seen as a separate activity (such as taking part in consultations), the best way to empower children is through the various processes in a project and by incorporating their involvement at every stage. This includes making sure that children are given choices about what to participate in as part of a programme rather than being ‘made’ to participate because that is what is expected or what is provided. Ensuring that children have a voice in what happens to them is an extremely important part of the healing process. We should not forget also that the meaningful participation of children is a right according to the CRC.

The age, development and the extent to which children have exercised control over their lives in the past will have a direct bearing on the amount of support and encouragement that they will need from protection workers to actively participate. Particularly with children who have been punished for not doing as they were told, it may be difficult for them to speak freely. With children who have not been listened to or who think that their opinions will not be taken into account, it may take some time for them to accept that workers are genuinely interested in what they have to say.

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

The establishment of peer support, education or advocacy schemes must always be undertaken with careful consideration for the safety of the children involved. It is also necessary to ensure that such schemes are inclusive and that they are carefully supported.
3.5. Helping children move through traumatic experiences

Hopefully by supporting the emotional and social well-being of children, project workers actually help move them through their traumatic experiences (and assist them with their recovery). Some children may need additional support, perhaps with a professional specialist, for example, a trained and experienced psychologist if they are experiencing post-traumatic stress disorder.

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

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

Time and space is needed for children to work through their experience at their own pace and in their own way. A typical solution offered to children is counselling, but this may not always be what a child wants or needs. Some children find the process of talking difficult and would rather not revisit what has happened to them. Others may find sharing their experiences very helpful.

Unfortunately, there is a great deal of variance in the quality of counselling offered to children who have been trafficked (not specifically in projects supported by THF but more generally). Counselling, or talking about problems, in some cultures is considered a Western concept and may not make sense or fit with some children. It may cause more distress if the child feels they have to participate. Other kinds of support, such as spiritual guidance and rituals, may have more meaning and be more helpful to a child. The important thing is that children should have a choice about the kind of support that they are given and their participation in it.

Figure 2 illustrates the dimensions of ‘healing’ to be considered as part of a programme.

Given the available resources, a range of opportunities for children to explore their emotions (for those who want to) can be beneficial. This can include options for expression through art, music, drama, storytelling, writing and other creative activities. Such activities do need resources and so may not be feasible, especially in a context in which there are limitations on training, capacity building, professional skills or finances for staff. However, listening and providing emotional support, if that is what a child wants, still can be easily provided by protection workers with a limited amount of training.

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6. Post Traumatic Stress Disorder (PTSD) is a specific clinical condition that some - but not all - people who have experienced trauma, including that associated with trafficking, can suffer. It is characterized by a number of symptoms, including intrusive thoughts, nightmares and flashbacks, panic attacks and for the avoidance of situations that stimulate memory. Distress following a traumatic event or events is to be expected and is quite normal. PTSD is characterised by the fact that the symptoms of distress do not reduce over time and as a person begins to feel safe, PTSD is more likely to happen. This means that whilst a child will experience PTSD it is relative to the child and not for the ‘safety’ of what has happened.

A further technique that we would like to see a child develop is a 21-step plan based on a memory box to help them understand and process their experiences. This is particularly recommended for children who do not live with their family and is included in the United Nations’ Guidelines for the Alternative Care of Children, available at: www.unece.org/docs/Guidelines-English.pdf (accessed 3 October 2012). More information on the memory box can be found at: www.a4w.org.uk/the-memory-box-memory-box-and-memory-journeys.

Resilience building and protection from further harm

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

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

4.1. Understanding resilience

A number of characteristics are evident in children considered resilient:
- high self-esteem
- belief in their capacity to make a difference or have some control over their lives
- a range of problem-solving skills and interpersonal skills.

Although resilience is closely associated with vulnerability, it is not the same thing. A child can be very vulnerable to being trafficked but very resilient to the impacts of trafficking. Resilience is highly individual (it can differ between children in the same family) and can change over time. A number of factors seem to increase the chances of a child developing resilience because they help the child develop the characteristics of resilient children.

These include:
- competent parenting or caregiving
- a close relationship with at least one adult, which lasts over time
- good relationships with peers
- increased educational opportunities
- involvement in regular activities or groups
- positive ideas and dreams for the future
- availability of formal and informal support
- the age of the child.

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

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

When thinking about the attributes of resilient children and what helps a child to develop resilience, project workers should consider to what extent the support and assistance being offered actually contributes to the development of their resilience.

4.2. Developing self-protective behaviours

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

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

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

Some projects also teach self-defence techniques to children. These should be treated with care, even though such techniques can help children defend themselves, they also can lead to a sense of overconfidence, which might encourage children to underestimate the risks they face and the level of danger.

Children learn through experience and by example, so it is important that staff model the desired behaviour. For example, it is difficult to reinforce the idea that children have a right to privacy if workers do not respect children’s privacy (such as by walking into bathrooms without asking for permission to enter when children are washing or entering a bedroom without knocking).

4.3. Linking with local protection mechanisms and systems

Even in the most difficult circumstances there is normally some form of protection that exists, although it may be very limited. Communities often have their own informal practices for solving problems, including those relating to the protection of children.

Having an understanding of the local protection mechanisms and informal systems of protection before a child is reintegrated can help workers in preparing that child for reintegration. It is important assistance to help a child access protection mechanisms that exist and to prepare all available mechanisms for protecting children who have been or who are at risk of being trafficked (such as by raising awareness of the trafficking situation in relation to children in a certain vicinity). Local protection mechanisms also can be useful in terms of ensuring acceptance of a trafficked child in the community.

Project workers must be mindful in discussions with communities that they do not break a child’s confidentiality. As a general rule, only those who are responsible for the direct care of a child should be made aware of their past experiences. It is particularly important to consider confidentiality in communities in which stigma may be attached to trafficking and abuse.
5 Determining & Supporting Best Interests

To determine what is in the best interests of a child, we need a careful assessment of that child and their situation. The basis of this should be a clear understanding of that child's needs.

It is important to understand that when we talk about the needs of a child, we are not moving away from a rights-based approach. In fact, international law transforms needs into rights so that there is also legal responsibility and accountability for States to assist individuals in fulfilling those rights. Thus, it is possible to consider needs within a rights-based approach. Indeed, Article 3 of the CRC specifically directs that the best interests of a child should be “a primary consideration”, and this can only be done in relation to a child’s needs.

A child’s needs are closely associated with their age and development; for example, how we might interpret and fulfill the right to education will be very different for a 6-year-old compared with a 15-year-old. For this reason, workers need a good grasp of the developmental needs of children at different ages.

5.1. Understanding children’s needs

One model that workers often find useful in thinking about the needs of children (and adults, too) is Maslow’s Hierarchy of Needs.

![Maslow's Hierarchy of Needs Diagram]

Although this model was developed in the 1940s, it still holds true today; the hierarchy shows that it is important for certain needs to be fulfilled before other needs can be met. This strongly ties in with the process of recovery and reintegration (figure 1), which also proposes that a child needs to feel safe and have their basic needs met before they can give any energy to their recovery. An important aspect of meeting basic needs is that the provision of something tangible and real for a child lays the foundation for beginning to develop a relationship of trust with the child, showing them that protection workers are adults on whom the child can rely.

5.2. Undertaking assessments

A thorough, appropriate, holistic assessment is the foundation to identifying what a child needs and in establishing what is in their best interest, and how to promote this. There are various kinds of assessments (explored later in this section), although they all follow the same basic steps:

**FIGURE 4 STEPS IN THE ASSESSMENT PROCESS**

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

2. **Steps 2 & 3 — Gather and verify information**
   - These stages entail the actual gathering of information and then checking it for accuracy. For example, a child may say that they have no family or that their family does not want them, but this needs to be checked out by visiting the family and seeking their views. Gathering and verifying information can be done by using a variety of tools and techniques, such as genograms, ecmaps, interviews, observations, data from existing files and other service providers and questionnaires.

3. **Step 4 — Analyse information**
   - This is perhaps the most difficult part of the assessment process because a protection worker needs to look at all the gathered information and make sense of it in relation to the child and their situation.
In undertaking an assessment, a number of principles should apply, including:

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

Keep in mind that an assessment is a snapshot in time: It says what the situation has been in the past and what the current situation is. Information can – and does – easily change. Assessments need to periodically be revised and updated, especially because they form the basis of decision-making and care planning processes.

5.3. Types of assessments

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

The timing of the comprehensive assessment and how long it takes to complete is also a key consideration. Rushing an assessment can mean that not enough information is gathered to make a proper analysis of what would be in the child’s best interests. Conversely, spending too much time on an assessment may mean that a child is left to “drift” for a long while.

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

Figure 5 shows the different types of assessments.

5.4. Dimensions to be assessed

The overall, in-depth assessment should be holistic in that it should consider every aspect of the child’s life. Many projects use the Triangle of Assessment³, originally developed for use in the United Kingdom, which considers a child’s developmental needs, parenting capacities along with the family situation and environment issues. Although this is a useful model, it is worth remembering that it was developed for a specific social context in which there is a relatively well-developed child protection system, with comprehensive support (including economic assistance) generally available. This is generally not the situation in Asia; in fact, the model does not adequately address some of the push and pull factors – economic pressures in particular. For this reason, the triangle model has been expanded for this handbook to five main dimensions that need to be assessed in order to determine the best interests of a child, as the following illustrates.

![Dimension of Assessment Diagram](image)

**CHILD’S DEVELOPMENT NEEDS**
- also taking into account issues relating to the effects of abuse and the child’s skills and capacity to protect themselves

**PARENTING/CAREGIVING CAPACITY**
- taking into account the ability of the parents/caregivers to protect the child and to respond to their needs and the way in which the family functions

**SOCIAL & CULTURAL CONTEXT**
- including the degree to which the child will be accepted in the community, the situation concerning trafficking and attitudes towards children who have been trafficked

**COMMUNITY & WIDER FAMILY INFLUENCES**
- such as the presence of other supportive adults, the availability of assistance for the family and the child, and other protective mechanisms in the community

**ECONOMIC FACTORS**
- such as the poverty level of the family and living conditions, options and opportunities for the child in terms of education, vocational training and income generation to create viable employment options in the longer term
### Table 3: Assessment Dimensions & Key Issues

<table>
<thead>
<tr>
<th>Child's Development Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Age</td>
</tr>
<tr>
<td>- Health</td>
</tr>
<tr>
<td>- Educational</td>
</tr>
<tr>
<td>- Identity &amp; self esteem</td>
</tr>
<tr>
<td>- Self care</td>
</tr>
<tr>
<td>- Capacity to self protect</td>
</tr>
<tr>
<td>- Relationships with others - including peers</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parenting / Care giving capacity (note this is in relation to the child's family and alternative family if cohabitation 'twin' is not possible)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Emotional warmth</td>
</tr>
<tr>
<td>- Parenting style - including discipline and setting boundaries and expectation</td>
</tr>
<tr>
<td>- Acceptance of child, and their experiences</td>
</tr>
<tr>
<td>- Ability to meet, and provide for, child's basic needs</td>
</tr>
<tr>
<td>- Ability to protect child</td>
</tr>
<tr>
<td>- Family relationships and dynamics</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Community and Wider Family Influences</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Presence of other supportive and protective adults</td>
</tr>
<tr>
<td>- Availability of assistance for the family and the child</td>
</tr>
<tr>
<td>- Protective mechanisms in the community</td>
</tr>
<tr>
<td>- Attitudes towards trafficked children and understanding of their needs</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social and Cultural Context</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Broader social attitudes towards children, their value and protection</td>
</tr>
<tr>
<td>- Situation concerning trafficking</td>
</tr>
<tr>
<td>- Attitudes towards children who have been trafficked</td>
</tr>
<tr>
<td>- Values and beliefs</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Economic Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Poverty level of the family and living conditions</td>
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<tr>
<td>- Options and opportunities for the child in terms of education, vocational training</td>
</tr>
<tr>
<td>- Viable employment options in the longer term</td>
</tr>
<tr>
<td>- Availability and access to financial support and economic assistance schemes, including savings and credit</td>
</tr>
<tr>
<td>- Attitudes towards money in general - is it short term benefit valued more than long term gain</td>
</tr>
<tr>
<td>- Budgeting skills</td>
</tr>
</tbody>
</table>

**Sources of information on which to base the assessment(s) include:**
- Information from previous assessments / on file
- Interviews (and activities with children)
- Observations
- Home visits

Other reports, such as situational analysis and mappings, can be useful in terms of identifying the broader social and cultural forces that may operate.

Each project tends to develop its own assessment forms, which should be used to record information gathered. For reference purposes, a suggested assessment form is included in the appendix.

After collecting all the information, it must be analysed. This is usually the most difficult step since it involves carefully weighing up the different strengths and risks and considering these in relation to the needs of the child. Often these contradict or compete. As previously mentioned, in many cases a 'perfect' solution will not be possible.

Undertaking assessments can be an uncomfortable process – either because the parents, community or child will not cooperate or because the outcome is not what is desired. It can be especially challenging to have to make judgements about parents / communities abilities to accept and care for a child. On the one hand workers want to be fair and understanding but simultaneously they have to be realistic about the chances of success. Again it is useful to remember that the ‘perfect parent’ or a ‘perfect situation’ is unlikely, but what is needed is one that is ‘good enough’. This means where a child is likely to have their needs met in a regular and consistent enough way to ensure that they are not harmed and their welfare is promoted.

### 5.5. Balancing protection with participation

As already emphasised, every child has the right to participate in decisions that affect their lives (Article 3 of the CRC). Involving a child in care can be critical in terms of helping them acquire and develop their resilience. For children who have been trafficked, it can be an important stage in the recovery process because it can help restore the sense of control that they will have been robbed of as a consequence of being trafficked.

To ensure that children actively participate, workers need to develop their own skills in working with children, particularly their skills of communicating with young people (as previously discussed in relation to helping a child with healing).

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

This needs to be clearly explained to children, so that they do not get the impression that whatever they say or want will happen. If they believe this and they do not get what they want, it may reinforce any feelings the child may have about not being able to trust adults.

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12. Numerous variations of the Assessment Triangle have been reproduced. For the official verson, please see http://www.dh.gov.uk/PublicationsandStatistics/Publications/PublicationDetails/DF_R003206

13. This is not to say that the system is perfect or cannot be improved or that workers do not want more training and support for children.
5.6. Multidisciplinary working

Good practice recommends that multidisciplinary working, in which all sectors or services are involved in the assessment, planning and delivery of assistance, be used because it enables plans to be made and services to be delivered in a holistic manner. This is especially the case when children are to be returned across borders or where the family may be in another region or country and another NGO or team is needed to carry out that part of the assessment and / or support the care plan by providing services or monitoring after a child is reintegrated.

Multidisciplinary working necessitates a shared vision of what is to be achieved. Often, service providers can become preoccupied with their own function, and this may not always be compatible with the best interests of a child. For example, the desire to ensure medical treatment or secure a conviction against an alleged trafficker can mean that plans are put in place that are not helpful for a child in terms of their recovery and reintegration. Workers in projects need to ensure that they always advocate for the best interests of every child rather than other interests that might be at stake.

Another problem that sometimes can occur with multidisciplinary work is that there are differences of opinion in terms of the involvement of a child. It also can be difficult to engage partners or can seem a waste of time if they are perceived as bringing little or no input.

Multidisciplinary working should transpire between agencies and between teams/workers within the same project or organisation. In this circumstance, it is especially important to ensure that someone is nominated to act as the focal point or key worker so that there is a clear line of responsibility for ensuring that actions take place and work is coordinated”.

Wherever possible families and children should be involved in the assessment and decision making process.

5.7. Developing care plans

Determining what is in the best interests of a child is a careful balancing act between their needs, the risks and the available resources and possible solutions. Sadly, frequently this can be a choice of the ‘least bad’ option, given the constraints of the situation or context.

In order to ensure that a trafficked child’s best interests are met it is almost certainly going to be necessary to develop a care plan so that the necessary actions take place.

When developing care plans, it is important to consider – and plan – for four timescales:
1. immediate (up to one month)
2. short term (up to three months)
3. medium term (three months to nine months or even one year)
4. long term (one year plus).

Objectives should be set that are realistic and achievable, with steps outlined to achieve the desired goals. In addition, whose responsibility for which action should be stated.

In developing any care plan, it is always useful to ensure that a contingency plan is included. This means planning what to do or what will happen if the plan cannot be carried out. Sometimes, the contingency plan can be very simple, amounting to organising a meeting so that another plan can be developed; in other cases, it may be appropriate to have alternative courses of action already specified within the plan.

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

The care plan should be closely monitored by the key worker and reviewed, preferably by a manager or another project worker, on a regular basis to ensure that it continues to meet the child’s needs. If necessary, the plan should be adjusted accordingly or a new plan developed. As a rough guide, a plan should be reviewed at least every three months”.

The appendix includes a suggested care planning template.

5.8. Role of case management

Many projects have their own case management system. Such a system is a protocol or procedure to ensure consistency in the way cases are handled and that action takes place in a timely manner. The aim of a case management system is to safeguard that the needs of a child are met and to be a tool for the effective delivery of services.

Typically, a case management system outlines the order in which activities should be carried out, who is responsible for carrying out each activity and the time frame for action (for example, how long to conduct the assessment and the periods for reviewing plans). It can contain standardised forms and tools for collecting information. A case management system typically makes reference to standards of practice and to the way in which information and records are kept.

Irrespective of the particular details, all case management systems contain the same important elements:
1. receiving referrals
2. assessment
3. development and review of care plans
4. procedures for follow-up and case closure.

16. The need for a key worker is also important in terms of creating an emotionally warm and welcoming environment in a project, as previously discussed.  
15. The CRC requires that where a child is not living with their parents or family there is a periodic review of their care.
5.9. Record keeping and reporting

It is important that all records are maintained. This is necessary so that all workers keep up to date on each child’s case and to ensure the monitoring of care for each child. Records can also be useful for children as part of their recovery (which sometimes takes place as an adult) in being able to help them understand their experiences and how decisions that impacted on their lives were made.

Individual case files for children, kept secure (such as in a locked cabinet) should include:
- basic information on the child and their family, together with copies of important legal documents, such as the birth registration form
- copies of progress reports, such as education reports
- copies of medical and other health records
- copies of important personal possessions (family photographs or letters) in case they are lost or the child destroys them
- copies of assessments
- care plan, together with copies of reviews and updated care plans
- records of any specific incidents that occur regarding the child.

6. Finding durable and alternative living situations

In terms of reintegration, one of the central elements to any successful reintegration plan is a durable living situation for the child. In an ideal situation, the optimum plan for the child would be return them to the family or at least to their community. In many cases, this is not possible or feasible as a long-term solution.

There are a number of reasons why this may be the circumstance. First, if the family contributed or participated in the trafficking, there may be a risk to the child of being re-trafficked. If the child was trafficked originally because the parents lacked the skills to protect that child, then a careful assessment of the situation would be necessary to evaluate what, if any, changes had occurred (or how the family could be supported) to ensure that the child would remain safe. An additional complication in returning a child to the family is that, depending on the time apart from the family and the effects of trafficking on that person, the parents may not be able to adjust their parenting style to adequately care for their child.

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

It is important to find a long-term and durable living situation for children because, if the placement were to break down, it could cause further damage to the child’s emotional well-being. In practice, this means that finding a lasting placement, even if it is not ideal, may be better for a child than a better living situation that will eventually fail.

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

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

When workers negotiate a placement with other agencies, it is a good idea to check what the features are of the living situation rather than rely on what it is called. References or terms used often vary and misunderstandings could affect a child’s safety or well-being.
TABLE 4 ALTERNATIVE LIVING OR CARE OPTIONS EXPLAINED

<table>
<thead>
<tr>
<th>Institution/ orphanage/shelter</th>
<th>An institution that cares for a large number of children, frequently on a long-term basis. The main disadvantage of institutions is the difficulty to provide highly personalised care; children can get lost and be just a number rather than an individual with needs. Institutions can be expensive to run because of the overhead, although they can accommodate large numbers of children and so can be helpful when there are limited resources. Both the difficulties of enabling children to establish close relationships of a significant kind — and the effect of this on the child in terms of their social and emotional development, institutions should only be considered as a last resort for younger children.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency shelter/ specialist shelter</td>
<td>An institution that cares for children either in the short term (when a child is first rescued and until a more suitable placement can be found) or where the child may live for an extended period of time to receive specialist support. As with other institutions and depending upon the number of children accommodated, it can be difficult to provide personal care and for children to have the opportunity to develop significant relationships with important adults. It can be disruptive to children if other children are constantly arriving or leaving.</td>
</tr>
<tr>
<td>Small group home</td>
<td>A form of institutional care that tries to overcome some of the limitations of institutions in terms of enabling children to develop close relationships by only housing a small number of children (normally 6-12).</td>
</tr>
<tr>
<td>Core and cluster</td>
<td>A variation on the small group home in which children live in small family-type units with a carer. These units then use central services (such as a school or community activity centre). Although the living arrangement promotes a family-like lifestyle, one of the criticisms of core and cluster units is that they can be isolated from the local community.</td>
</tr>
<tr>
<td>Secure unit</td>
<td>An institution in which children are detained, normally because they are a danger to themselves or to others. Because children are locked in, a placement in a secure unit should only be made with a court order; otherwise, children are deprived of their freedom.</td>
</tr>
<tr>
<td>Move-on unit</td>
<td>An institution that has additional support included to prepare children for independent living — sometimes known as a 'halfway house'.</td>
</tr>
<tr>
<td>Supported or independent living and paying guest schemes</td>
<td>Instead of living in an institution, children live independently, either with a protection worker visiting them regularly to ensure that they are coping or with a worker also residing onsite. The main advantage of independent living schemes is that children are given some support, although they are basically unsupervised. This means that they are only suitable for older children, especially children who have become autonomous (such as a street child) or who may be resistant to the care provided in one of the other alternative living situations. A variation of this type of care is the 'paying guest', in which 'sympathetic' and accepting families rent out a spare room to a child. This option often provides a low level of informal support.</td>
</tr>
<tr>
<td>Foster care</td>
<td>A scheme in which a child is placed with a family (either permanently or for a defined period of time) and thus has the opportunity to be cared for in a family setting. Foster carers are typically paid a stipend or allowance. Foster schemes take much support to establish and maintain.</td>
</tr>
</tbody>
</table>

6.1. Settlement and adjustments to new living situations

When children are placed in new (alternative) living situations or return home to their community, they typically pass through a period of adjustment that consists of three phases. During this period, it is important that protection workers support the parents or caregivers or ensure that they have the support in place; otherwise, there is a risk that the placement may break down.

Initial ‘settling in’ phase (may last 24 hours to two or three weeks or longer)

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

Adjustment phase (typically from three to nine weeks, following the settling in phase)

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

The attitude and responses of carers in this phase is crucial. It is important to deal sensitively with a child and to remember that it is phase that will pass (even though it may take many weeks to subside); carers / workers must not become too punitive; otherwise, the situation (and behaviour) will increase.

Setting phase

In this phase, the child begins to feel more secure and behavioural problems gradually diminish, although it may take months or years. There still may be occasional times when the child’s behaviour reverts as they ‘test’ the safety of their new world.

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

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

6.2. Securing economic futures

For children to live independently as adults, plans need to be made during their childhood for them to become financially independent – otherwise, they may find themselves back in a situation of exploitation as a way to survive.

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

- Vocational training – especially functional literacy and numeracy – as a pathway to employment.
- Income-generating schemes – in which children are given training, guidance and sometimes financial assistance to set up their own business.
- Enrolment in government social protection or economic assistance programmes.

The area of vocational training and income-generation schemes is highly specialised; it is unlikely, however, that staff will need in-depth knowledge of how they operate. However, it is important that we ensure that children can access such education or schemes to set them up for a productive future.

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

Increasing the chances of successful reintegration

7 Increasing the chances of successful reintegration

Most workers want to know how to measure success in terms of outcomes for individual children. This is not an easy thing to do, particularly because one of the difficulties is deciding on what basis to measure success.

For example, is success the point when a child is returned home or reintegrated into the community? Is success achieved when a child is not being exploited or abused or has not been re-trafficked after a specific period of time? Or can we only say that we have been truly successful in our interventions if children grow into healthy adults who go on to lead successful, independent lives?

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

Although everyone would like an easy way to measure success, there is not one. If we want to increase the likelihood of success, however we define it, there are a number of factors that can increase the chances of successful reintegration, as explained in Table 4.

**TABLE 5 Factors Increasing the Likelihood of Successful Reintegration**

- Limited or short duration of involvement of the trafficking situation.
- Clear and comprehensive assessments of a child's needs, their situation and their best interests – upon which decisions regarding reintegration are based.
- A child has had opportunity to work through experiences and learn new ways of relating to others.
- Increase in a child's self-protective skills, life skills, coping mechanisms and resilience.
- A child has positive and realistic dreams and hopes for their future and a viable plan for how to reach their goals.
- Access to education or vocational training and income-generation schemes to ensure that a child has viable economic prospects for the future.
- Supportive family or community who accept the child and are willing to work through any problems related to the child's reintegration.
- Contact, where possible, if a child is separated from their family, with the family or other important people in the child's life (if this can be done safely).
- Presence of other sources of support for a child and their family, such as community groups, NGOs, etc.
- Risk of trafficking removed from or not present in the vicinity (through more effective investigation and policing or proactive protection services) or there is a comprehensive plan in place to prevent a child from being trafficked.
- Preparation and support of the family and the community before return / placement of the child – including practical and economic support if needed.
- Availability of long-term follow-up to ensure that problems that occur are addressed quickly and not left until they become severe.
There is a huge range of references and resources that can inform and support the work of projects in helping to reintegrate trafficked children. Many of these can be accessed online, although some discretion is needed because not everything that is available is of quality! This section contains selected references and resources which may be of particular use.

All online references were correct as at November 2012.

Online Materials:

Better Care Network - www.bettercarenetwork.org
There are many organisations with a vast experience in caring for children and their websites can be a useful source of information. One of the most helpful websites is the Better Care Network (established by UNICEF). It has an extensive library of resources that can be downloaded, many of which are from developing countries, on a wide range of issues related to child welfare generally and the alternative care of children specifically.

Key Documents:

UN Guidelines for the Alternative Care of Children, 2009

Publications:

ECPAT International (2001)
The Psychosocial Guide to the Rehabilitation of Sexually Exploited Children; ECPAT International, Thailand
A training guide focused on frontline staff, it contains exercises and information on understanding and working with abuse.
Can be downloaded from www.ecpat.net

Feibelberg V (2012)
A Child’s Journey Through Placement; Jessica Kingsley, USA
Although this publication is based on the experience of children in care in the US and UK, it is an excellent resource as it gives a very clear explanation of what children experience when they cannot live with their families and what can be done to minimise the stress to children, together with a concise overview of child development and child psychology. It also contains basic but comprehensive information on child development.
See www.jkp.com

Gardiner HW, Mutter JD & Kosmitzki C (2010)
Lives Across Cultures: Cross-Cultural Human Development; Allyn & Bacon, Singapore
Of the many publications regarding child development and children’s need, this is particularly useful as it takes a cross cultural perspective and explores how dominant ideas and theories fit in various contexts.

Keeping Children Safe Coalition (revised 2011)
Keeping Children Safe Toolkit; Keeping Children Safe Coalition, www.keepingchildrensafe.org
This training package includes a variety of exercises related to child protection.
This is specifically with regards to the development and operation of child protection policies. Unfortunately, it is not available to download but must be purchased. However numerous agencies, including TDH, are partners and may have spare copies.

Psychosocial Training Toolkit; Terre des Hommes Child Relief, Geneva, Switzerland
Contains tools and techniques for communicating and working with children, especially focussing on their psychosocial needs.
Available at: www.thch.ch

Terre des Hommes (2010)
Working with Children and their Environment; Terre des Hommes Child Relief, Geneva, Switzerland

Tolffree D (2005)
Facing the Orfals – Supporting Children through Positive Care Options; Save the Children Fund, London, UK
A very readable booklet, part of a series, which explores the care of children in developing countries. It is available online from Save the Children UK www.savethechildren.org.uk

UNHCR (2008)
Guidelines on Determining the Best Interests of the Child
Although specifically written for use in emergency situations and with refugees these guidelines give a comprehensive overview of factors related to determining best interests.
Available at http://www.unhcr.org/refworld/pdfid/4848c342.pdf.
**Appendix A – Assessment Form**

This form can be used (adapted where necessary) for all kinds of assessment, but in particular it is suitable for comprehensive / in-depth assessments.

By keeping a copy of the assessment on file, as further information is discovered, this can be added to the form.

<table>
<thead>
<tr>
<th>Name of Child:</th>
<th>Identification Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age / Date of Birth:</td>
<td>Sex:</td>
</tr>
<tr>
<td>Date Assessment Completed:</td>
<td>Assessment Carried Out By:</td>
</tr>
<tr>
<td>Family Composition / Household Members:</td>
<td>Address of Family:</td>
</tr>
<tr>
<td>Services / Agencies in Contact with Child:</td>
<td>School / Education / Vocational Training:</td>
</tr>
</tbody>
</table>
### Appendix B – Care & Protection Plan & Progress Review Form

This form can be used (adapted where necessary) for all kinds of assessment, but in particular it is suitable for comprehensive / in-depth assessments. By keeping a copy of the assessment on file, as further information is discovered, this can be added to the form.

<table>
<thead>
<tr>
<th>Name of Child:</th>
<th>Date of Plan:</th>
<th>Date of Next Progress Review:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Names of Persons Completing the Plan and Agency They Represent:</th>
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<table>
<thead>
<tr>
<th>Person Responsible for Monitoring of the Plan (until next Progress Review):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contingency Plan:</th>
</tr>
</thead>
<tbody>
<tr>
<td>What action will be taken if the plan cannot be implemented before the next review or if the situation for the child changes?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Please confirm if parents / child were present</th>
</tr>
</thead>
<tbody>
<tr>
<td>(If not, please explain how their views were sought when developing the plan.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dates of Previous Reviews:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note reviews should be carried out - 1st Review after 6 weeks of developing plan, and thereafter every 3 months</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Living Conditions &amp; Economic / Employment Situation:</th>
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<table>
<thead>
<tr>
<th>Support from Extended Family / Community:</th>
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<table>
<thead>
<tr>
<th>Previous History of Abuse:</th>
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<table>
<thead>
<tr>
<th>Opinions of Parents / Caregivers:</th>
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<table>
<thead>
<tr>
<th>Views / Wishes of Child:</th>
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<table>
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<tr>
<th>Additional Resources / Support Available:</th>
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<table>
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<tr>
<th>Strengths of Family:</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Any Other Relevant Information:</th>
</tr>
</thead>
</table>

Please list needs identified under each relevant dimension. 
PLEASE refer to assessment and detail how each risk factor will be reduced / eliminated

<table>
<thead>
<tr>
<th>Dimensions – Specific Needs Identified</th>
<th>Services Required to Meet Needs</th>
<th>Agency Responsible &amp; Timeframe</th>
<th>Update at Review / Change to Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety Needs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing / Accommodation &amp; Basic Needs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Health &amp; Development Needs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional or Psychological Health &amp; Development Needs</td>
<td></td>
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</tbody>
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<tr>
<td>Emotional or Psychological Health &amp; Development Needs</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Education &amp; Life Skills Needs:</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>