

Rebuilding Lives

An Introduction to Promising Practices in the Rehabilitation of Freed Slaves

By Helen C. Armstrong
March 2008



**FREE
SLAVES**

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FOREWORD

Thankfully, in the next few years, the number of people coming out of slavery will continue to multiply. Some people will get free with the help of government and international organizations. Yet more will simply escape, making their own bid for freedom. Many people will be helped towards liberation by groups and individuals who have little experience of providing care and support – by people who are touched by the atrocity of human bondage, and decide they will no longer live in a world with slavery. When such groups start to help people freed from slavery, if they are listening, they will hear the urgent questions of former slaves: *How will we get food? Where will I live? Who will protect us from the slaveholder? What if we get sick? How can our children go to school?*

This manual is not about supplying all the answers to these questions, for every place on the globe and for every different type of slavery, but it will help groups to think through their own response and try out the best, most convincing answers that might work.

From Free the Slaves' experience around the world, we know that when former slaves and their allies can find some of these convincing answers, the outcomes can be transformative – for individuals, for groups, even for whole communities where slavery has been a way of life for generations. And when “rehabilitation” is done right, it can even start to address the root causes of enslavement.

Some of the world's slaves are in isolation, held as individuals. But many more are in slavery “at large”, with other slaves in the fields, in factories, on the streets. They are watchful of changes around them. When such people become aware that there truly is a realistic exit - a way to survive in freedom - they will make their move. Sometimes whole groups of people will make their move. **Rebuilding Lives** is about multiplying the exit points.

This manual was written for Free the Slaves by Helen Armstrong, a long-time worker in the international movement to promote and protect breastfeeding. Having written training materials now used by health professionals in many countries, she took on the challenge of making a simple global rehabilitation manual. The manual draws on many more complicated publications, and on the experience of programs in numerous cultures. We are confident that front-line workers and their clients will be able to sort through the suggestions collected in **Rebuilding Lives** and decide what works well in their own settings.

Ginny Baumann
Director of Partnerships
Free the Slaves
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1. INTRODUCTION

Defining slavery

Slaves are people who are forced to work without pay (or getting only enough to survive), for someone else's profit, and completely controlled by violence or the threat of violence. *Slavery* takes many forms, including *debt bondage* (forced work because of an old loan); the *worst forms of child labor**; forced labor in farming, mining, and factories; service in homes; *sexual exploitation* (sex abuse for profit) and forced marriages.

Slavery affects people differently, depending in part on their age, how long they are in slavery, and how badly they are treated. But all slaves have had their basic human rights taken away by lies and violence, and have suffered great harm.

Today, all forms of slavery have three other things in common:

- slaves do not cost much
- *slaveholders* (the people who use slaves) only plan to keep them for as long as they are useful to them
- slaves are *trafficked* (traded) among many countries and are working in almost all

*enslavement, prostitution, being a soldier, criminal activities, and any work that is dangerous to the child's safety, health or moral development.

After slavery, what next?

No one should be living in slavery. It is time to end this terrible custom.

All people have the right to live in freedom.

But setting slaves free is not enough to give them a good future. They need time to recover in a helpful environment, and they need to get their feet under them before they can start life again.

Rehabilitation is a long process that helps a former slave find his or her mental balance again and become part of a group. Former slaves usually also need to learn new skills, in order to live in freedom.

The aim of this manual

This *manual* (how-to-do-it book) is for people who are seeking how to help freed slaves. It is a long process. Here is a picture of what rehabilitation programs can face:

2 Introduction

Now we were in a house with 37 abused and traumatized children, with the youngest ones starting to melt down (wailing, to be exact) in fatigue and anguish and trauma, and the oldest ones expressing their own anguish and capable of acting out with significant mischief. What in the world were our exhausted, small IJM team and overtaxed nongovernmental friends supposed to do with all these kids? How were we supposed to care for them, keep them secure, and walk all of them through the very difficult criminal justice processes necessary for bringing their perpetrators to justice?

(Haugen, Terrify No More)

No one is sure of all the answers, the *best practices* (what we are sure is the best thing to do). But freed slaves cannot wait for perfect programs. They need help now. So we have collected *promising practices* (what existing programs do that seems to have good results).

Many of the suggestions in this manual come from the hard work and thinking of small non-governmental groups and experienced individuals. Some are adapted from publications of international organizations and agencies of the United Nations.

Most rehabilitation programs have little money, limited space, and only a few trained *staff members* (people who work in a program at any level). Freed slaves may be with them for only a short time. So we try to explain what rehabilitation workers can do in such difficult situations.

We hope that this manual also leads toward development and resources for many more rehabilitation programs. The need is much larger than what anyone is doing so far.

Two important national goals might be

- to improve rehabilitation services that already exist
- to make such services much more widely available

Too many slaves struggle toward freedom without help, and then must deal with its effects by themselves. Too many freed slaves are again *trafficked* (taken away from where they belong, bought and sold, and kept in slavery).

This manual is only a short guide to promising practices, with examples taken from the experience of people in the field. If no source for a comment is given, that is to protect a client or an observer. More Resources are listed on pages 101-104.

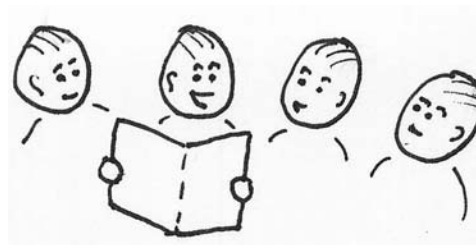
The language of the manual

The manual is written mostly in Special English, the limited 1500 words* that are used in US international radio news. People who learned English in secondary school will find that they know most of these words.

We have tried to limit the number of new words that people need to learn. In each chapter, there are 10-20 useful added words (such as *debt bondage*, *compensation*, *retraumatize*). Most of them are needed in order to understand other materials on rehabilitation of freed slaves. They are defined in Special English where they are first used. They are also in the Definitions of Words on pages 105-109.

*The words of the Special English list are defined at www.voanews.com

Read aloud or translate parts of the manual during staff meetings or in training classes for staff members who do not read English,



Using the manual

People may use these ideas in planning what they will do in a new rehabilitation program. Staff of older programs may use the ideas to consider what they already do, and how they might improve parts of their work.

For each subject, the manual divides the rehabilitation process into three periods:

IMMEDIATE CARE

Giving care in the first days after a client's release or rescue from slavery

THE FOLLOWING WEEKS AND MONTHS

Helping the client recover, whether in the community or through services in a special safe place

MOVING TOWARD REINTEGRATION

Preparing the client to settle and start life again in a normal community

Rehabilitation programs can use the manual in several different ways. You could:

Choose a period of rehabilitation, such as IMMEDIATE CARE. In discussions with staff, make a checklist or a chart.

- What is our program already doing well?
- Does the manual suggest anything that might make our program better
 - for newcomers?
 - for clients who are staying with us for a longer period?
 - for clients who are soon going to leave and resettle somewhere?
- Who will do that? How and when will they do it?



Choose a subject that interests staff, for example Food and Water. Discuss that subject in a similar way.

- What is our program already doing well?
- Does the manual suggest anything that might make our program better?
- Who will do that? How and when?

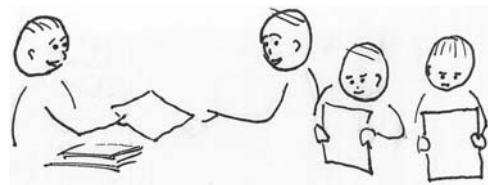
Read aloud the stories about other programs and practices, which are in boxes or in small size print.

- Have we had experiences like this?
- Have our clients had experiences like this?
- What can we learn from this other program?

Read the Table of Contents to find a subject that you want to know more about.

Use parts of the manual when you are looking for money and other resources. For example, if you want to be given vitamin capsules from a clinic, show people what the manual says about micronutrients.

Give photocopies to staff members and volunteers.
Translate into local languages as necessary.



For example:

- Copy the boxes A policy against exploitation and abuse (page 12) and Code of Conduct. Give a copy to all people who come into regular contact with clients. Check that everyone understands these rules.
- Copy the different boxes titled Skills for Daily Life, and give them to the staff and volunteers who can teach those skills to every client.
- Copy boxes such as Areas to Learn About Before a Client Returns Home, and Possible Questions for Follow Up for field staff members.

Write to us about your experience in using the manual. Please also write to us if you want to adapt the material, making changes that fit better with your culture. We would like to have your suggestions for making it more helpful.



Free the Slaves, P.O. Box 34727 Washington, DC 20005
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Working to end slavery

Clients (adults and children, anyone in a rehabilitation program) have learned to survive in terrible conditions, to work extremely hard, and to keep on going through pain and illness. But they have also been very deeply damaged in many ways. Children especially have not had the conditions for normal growth and *psychosocial development* (developing their own abilities of thinking, feeling and being part of a group.)

Rebuilding the lives of clients means *empowering* them, helping them to find their own abilities and strength. It also requires that we heal their physical and emotional wounds as far as possible. But the terrible effects of slavery on victims can never be fully undone.

Improved rehabilitation services are important to changing the whole system that keeps slavery going. Rehabilitated clients can lead their communities to throw out traffickers, and to demand people's rights and their share of public resources.

Rehabilitation means not simply helping victims, but creating the human conditions for a future in which slavery will be unknown.

Ending slavery completely is our goal.

2. HOW PEOPLE BECOME FREE

How people get out of slavery affects how they feel and how quickly they can rebuild their lives. For some slaves, rehabilitation starts with being able to take action for themselves.

Slaves take action to escape

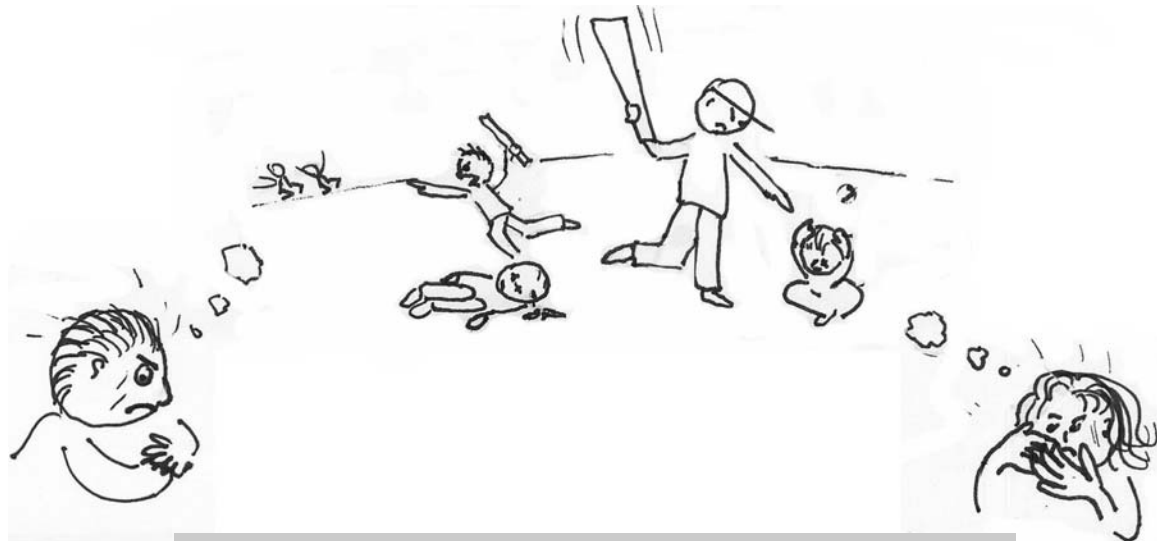
When slaves participate in escaping, a process of deep change begins even before they become free. When slaves decide not to accept the control of a slaveholder any longer, they begin to become *empowered* (finding their own abilities and strength).

When a whole group of people struggle against their fear and act together to become free, they depend on each other. That trust in each other helps them to survive in freedom.

Freeing themselves has helped thousands of people to heal from the *psychological* (mental and emotional) effects of generations of slavery.

A few strong people escape from slavery by themselves. They become empowered to act, and manage to find their own way to freedom.

But escapes alone and without help are usually prevented by depression, lack of energy, and many fears -- of violence, of being lost in a strange place, without food or anywhere to hide, being ill, in pain, and dying. These risks are real.



Provide immediate help to slaves who act to escape.

There is more chance of slaves acting for themselves to become free if they

- are living and working as a group,
- are in their own country, knowing the language and culture,
- are *youths* (aged 14-17) or adults (18 and older) rather than young children,
- have *advocates* (people who stand with slaves and speak up for them), and
- can talk about and plan the future with their friends and advocates.

Villages of slaves have freed themselves

In Uttar Pradesh, India, whole communities of stonebreakers have left debt bondage, a form of slavery that is against the law but still common. An organization called Sankalp works to help them free themselves.

A community organizer makes quiet, gentle contact with communities. *S/he* (he or she) talks with a few people, learns whom they respect, and slowly collects information about the situation.

When s/he is well known, the organizer starts to talk about what stonebreakers in other places have done. Some of them have been able to get their own *quarry leases* (rights to dig and sell stones), or have got land to build houses or to farm.

The workers start to join into a *self-help group* (a group formed by workers in debt bondage to demand their rights and to help each other). They discuss their situation, and what they might do to make it better.

If the slaveholder learns that workers are organizing, there may be threats or actual violence against the group, especially against women. One self-help group had to build a new village after slaveholders burned their old one. A member says:

I'm just so happy with this new life that I've got and it gives me so much joy -- the fact that I can control my own mind, my own thoughts, my own movements -- that I can't even look back at my earlier existence.

Now we are in control, to do what we want, when we want, how we want.

So strong among all of us, this feeling of brotherhood that we now share, that we all actually formed this entire village just by ourselves.

(Ramphal, in *Free the Slaves, The Silent Revolution*)

As the laborers continue organizing in their village, larger things may happen. When freed workers from other groups join in the public meetings, slaveholders have seen thousands of empowered stonebreakers facing them together.

Through acting together, self-help groups have got quarry leases, become independent of slaveholders, and sold their own stones -- getting three times as much money as before. At the same time, they send their children to school.

Rescues

Slaves often have become depressed and *passive* (psychologically unable to take action). This is a natural result after years of living under the violent control of

others. They may need to be rescued by *outsiders* (people who do not belong to the community) who have no connection to the local slaveholder system.

There is more chance that slaves will need rescue by outsiders if they

- are all alone, for example as *domestic servants* (workers doing housework, cooking, and child care in homes)
- have been trafficked out of their home country or language area
- are children
- believe that anyone who tries to escape will be violently punished or killed
- have become passive and unable to take risks
- have no friends and advocates
- cannot imagine any other future

Fear and terror

Slaveholders often tell child slaves and sexually exploited girls and women that outsiders will harm them. If strangers come, the slaves must hide, because if they are caught they will go to prison or be killed.

Because most slaves are very strongly controlled by the slaveholders, only a surprise rescue can get them away. In villages where few outsiders come, news of strangers spreads quickly and gives slaveholders time to hide their slaves.

Sudden rescue is frightening but often necessary.

When a rescue takes place, the rescuers cannot immediately explain what is happening. The slaves can feel great fear and terror. Using women police may make a surprise rescue less frightening for women and children.

Good effects of rescues

Rescues get slaves out of violent exploitation without delays. Evidence against the slaveholders can be collected at the same time.

Bringing along parents on a rescue may empower the family to demand *compensation* (money and resources provided for freed slaves). They may also see why they should keep their other children out of slavery. And because the parent can now provide legal evidence, officials may be less likely to deny what has happened and to drop the case.

Rescues can also have an effect on communities where the slaves have been working. The people there may have accepted slavery without question, or may have profited from it. A public action against slaveholders tells everyone that slavery is completely against the law.

In Uttar Pradesh, India, rescue of children from rug looms made the rug-weaving villages more ready to set up community Vigilance Committees to report on slavery.
(DDWS Bal Vikas Ashram monitoring report)

Arresting slaves

Women and girls who have been trafficked into *prostitution* (sexual exploitation for profit) are often arrested by police. Arrest may take slaves out of situations of sexual abuse and exploitation, but is itself full of risks.

Many officials blame the victim, accusing trafficked and sexually exploited people of illegal activity. Too often, the girls and women are put in prison, accused of crime or of coming into a country without correct papers, while their slaveholders go free. Where corruption is common, some police officers will take money from slaveholders. These police then use fear and force to make girls obey their slaveholders, and return them to the *brothels* (places where women and girls are sexually exploited for a slaveholder's profit.) After this kind of experience, for a long time a girl cannot trust other people, and has trouble settling into a community again.

Slaveholders should be arrested, not the slaves.

Children who were forced into asking for money on the street, or other activities that are against the law, are also often arrested. It is important for children's advocates, police and government officials to agree on how to give them immediate care in a safe place.

Trafficked people often need protection from immediate *deportation* (being sent out of the country).

Arrest helps slaves only if police or other officials

- treat them with respect
- immediately take them to a safe place
- protect them from deportation
- help them to get the care that they need



Buying slaves to set them free

In paying for a person, the buyer is acting to keep a market system going. Paying slaveholders increases the risk that more people will be trafficked. Outsiders should not use this way of rescuing slaves.

Buying slaves in order to free them encourages trafficking.

Where corruption is common, families may feel that the only way to rescue a child is to pay the slaveholder. A child's parents should not be blamed for paying money. They need understanding.

When officials accept slavery and fail to act against it, the tragic need for families to buy back their own children is a result. Action is necessary to change the system that traps people into slavery.

3. PROTECTING CLIENTS

Keeping records



Keep a record for each client, either one person or as a family. When a client comes into the rehabilitation program, learn what you can, and write it in his or her record. You will add more when you have *assessed* the client's condition (learned more through observing, listening with attention, and considering his or her condition.)

To learn from clients of any age, in the first *interview* (questions for learning from a client):

- be warm and sympathetic
- ask questions gently
- let the client take time to answer, or not, as s/he wishes
- do not make the client feel *shame* (a feeling of having done something terrible and being blamed by oneself and others)
- try not to *retraumatize* (harming a client by forcing him or her to remember and live through the pain, shame and fear of past experiences again)

Be very careful. Unless you are a trained professional *counselor* (someone specially trained in mental health who can help people with their emotions) do not ask children about sexual experiences or other terrible violence. Such questions can retraumatize the child.

**You can give healing care without knowing how
a child was exploited.**

People who are not ready to talk should be given time – perhaps days or weeks. They need to become used to the center and to develop trust in its staff.

Give special attention to what clients say when they go beyond answering questions.

The women's rehabilitation program of Asha Nepal UK uses a case study interview technique. After a brief, gentle conversation, a pair of rehabilitation staff members follow a list of questions. One of them writes down the answers. The other quietly makes notes on any extra comments that the client adds.

At the end of the interview, the staff members encourage an informal conversation. The client often finds this very helpful and opens up the conversation into a more in-depth understanding of her situation. This informal part of the process is often the most revealing and important.

(adapted from Bashford, letter to Free the Slaves)

If clients are moved to another rehabilitation service, discuss the record with them and explain what is in it. If they agree, send their record with them.



Outline of a client's record

Early information, such as

- full name, home language, nationality
- area or place that they came from, and how s/he traveled with the trafficker
- where the client worked as a slave and what s/he was doing
- what the slaveholder had promised
- how the slaveholder treated the client

Assessment and care by the rehabilitation program, such as

- information on health and *nutrition* (how food affects health)
- psychosocial assessment, *recommendations* (what should be done), and progress notes
- education and training needs, and how they are being met

Notes on other subjects, such as

- the client's own needs and wants, for the present and for the future
- the client's skills and what s/he enjoys learning
- anything that is being done to help the client, such as
 - help from *lawyers* (professionals in the practice of law)
 - getting official papers
 - getting compensation
- reports from field staff on finding the family
- plans for *follow up* (seeing that the client is all right after leaving the program)

Case managers

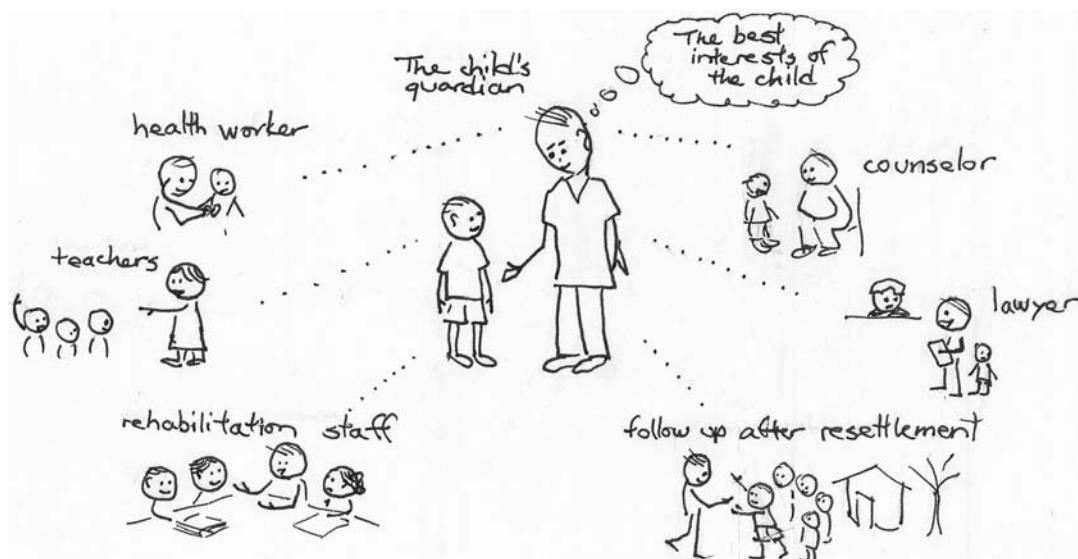
A *case manager* gives careful attention to the needs of each client, and follows up to be sure that action is taken. The case manager gives a client warm attention very often, and also speaks up for the client when necessary.

Name a case manager for each client. A client might be seeing a health worker, a counselor, teachers and a lawyer. A field staff member might be searching for the family. The case manager makes all of these efforts work well together for the client.

Guardians for children

A person under 18 years old has a right to a long-term *guardian* (an advocate who works for and speaks for a child throughout rehabilitation and beyond). This can be a member of the rehabilitation staff, someone appointed by a government office, or another responsible person.

The guardian makes sure that decisions and actions are in the child's *best interests* (what is best for the child at present and in the future). A guardian should follow up on the child even after s/he has left the rehabilitation program.



Without a long-term guardian, a child may become abused, exploited or trafficked into slavery again.

Name a guardian immediately if possible. If a government office must appoint the guardian, try to have that done soon. Sometimes there is no system for appointing guardians. In that situation, the case manager acts as guardian to a child while s/he is in a rehabilitation program.

The responsibilities of a guardian

- To be sure that all matters are decided in the child's best interests
- To be sure that the child victim has the right kind of care, place to stay, health care, psychosocial support, education and language support
- To be sure that the child victim has legal and other advocates where necessary
- To talk with, advise and give the child victim information on his/her rights
- To be part of finding a *durable solution** in the child's best interests
- To provide a link between the child victim and different organizations that may provide services to the child
- To help the child victim in finding his or her family
- To be sure that if the child victim is sent back to his or her family or country, it is done in his or her best interests

(adapted from Dottridge, [Reference Guide](#))

*A *durable solution* is a long-term plan for the child, giving the child the best chance of a good future life.

Helping staff to deal with emotions

Rehabilitating freed slaves may be unlike anything that staff members have done before. It is not easy to work day after day with people who are depressed, feeling *anxiety* (worries and fears) and experiencing many other emotions.

Clients can be holding a lot of anger from their experiences in slavery. They may become very angry at staff members or at anyone who seems to have power. They may *act out* (express their feelings by doing things that cause trouble in the group). Or they may simply not join in anything that other clients are doing.



Staff members have their own emotions. They may sometimes look down upon clients who were sexually exploited. Some may *discriminate against* (treat unequally and badly) people from a different religion, ethnic group or country. Discrimination prevents a client from trusting the staff.

Train staff to give every client equal respect and care.

Whenever possible, provide staff with training that helps them understand their clients better. Discuss about how to treat all clients gently. Give staff members chances to talk about their own feelings and difficulties.

To help staff members learn how to deal with anger, depression, and other common problems, use *role plays* (short exercises in which people act like someone else).

When a client is so angry and violent that s/he is putting other clients or staff in danger, get help from a trained professional counselor. It is possible that the client needs a kind of psychological care that the program cannot provide.

Protection against abuse

A policy against exploitation and abuse
for all staff, volunteers and visitors of a rehabilitation program

- Rehabilitation staff and all others should never physically, sexually or emotionally abuse any client in any manner.
- Staff and others must respect and protect the rights of clients.
- The rehabilitation program has a system to prevent abuse, and to report abuse by clients and by staff members.
- The program has a system to be sure the right kind of action is taken if abuse happens.
- Each rehabilitation staff member is responsible to make sure that their own behavior and that of all others follows an agreed Code of Conduct.

Staff members have some power, and clients – especially children and women -- may feel that they have little or no power. This means that a risk of exploitation and abuse exists in any rehabilitation program. *Abuse* includes

- physical injury
- sexual actions or comments with a client
- emotional injury including damaging comments and discrimination
- threats to a client
- *neglect* (not doing what is needed, and so causing harm)
- failing to protect a client from danger or illness

Former slaves may be retraumatized by any experience of abuse. Have a written policy that protects all clients against abuse in the rehabilitation program. Be sure that all staff members understand the policy well – including staff who cannot read.

Agree on a code of conduct

Have a written *code of conduct* (list of behaviors) that is based on the policy. This code says exactly and clearly what is permitted or not permitted in the program. Staff members need to agree on these clear rules of behavior. Others such as teachers, lawyers, and volunteers who work with clients also need to know the code of conduct.

Following a clear agreed code of conduct protects everyone.

Dismiss any staff member who violates the policy and code of conduct. Consider taking legal action against any person who uses his or her power to exploit clients.

Protect clients from each other if necessary

Clients are *vulnerable* (at high risk of harm) when a program is not well controlled. Even when staff themselves follow the code of conduct and are careful to treat everyone equally, some clients may discriminate against others. Older or stronger clients may expect to make younger or weaker ones obey them by *bullying* (violent abuse and control of weaker clients by stronger ones).

To protect everyone:

- Teach all clients to treat others with respect.
- Do not allow violence or *verbal abuse* (strong words or comments that cause fear, shame and anger).
- Do not allow bullying.

If a client starts to bully others, be alert and separate them. Talk quietly with each client. With staff members, discuss how to teach the bullying client more self-control, without ever permitting him or her to harm others.

Code of Conduct
from Free the Slaves partners

What to do

- Affirm the dignity of children and clients, listening to them and valuing them even where society generally might not do so on account of their age, gender, class, ethnic group, or past history.
- Treat all clients as equal in their human rights, and prevent any exploitation.
- Become aware of potential abuse by listening to clients, asking them about their interactions with rehabilitation staff, other workers, and other clients.
- Inform clients of their right to be free from abuse and exploitation.
- Describe physical, sexual and emotional abuse so they can recognize it, including inappropriate behavior that would lead toward abuse.
- Encourage rehabilitation staff and clients to report any abuse and inappropriate behavior, by explaining whom they should talk to
- Tell clients of their right to confidentiality* and how they will be protected from any retaliation.
- Support anyone who reports abuse, investigate without delay and take decisive action to eliminate it and prevent it happening again.
- Organize and plan workplace spaces and activities to minimize risks of activities that could contribute to exploitation and abuse between rehabilitation staff and clients, or among clients themselves.
- Balance the privacy needed for one-on-one counseling with the need to have some openness to the sight of others.
- Use touch to reassure and comfort only as culturally approved, usually only between rehabilitation staff and clients of the same gender.
- Provide warm attention to all clients, demonstrating daily that each one is valued.
- *Ensure* (be sure) that no client will be endangered or stigmatized by publication of their picture or story, and request their specific permission to use it.
- Respect a client's decision not to be interviewed or photographed.

What not to do

- Do not hit or otherwise physically abuse clients.
- Do not exclude clients from the group as punishment
- Do not force them to take part in any activities, including religious observances.
- Do not use touch or physical one-on-one contact that could lead toward sexual or exploitative relations with a client.
- Do not use language or gestures that are inappropriate, sexually suggestive, humiliating or offensive. Do not respond to such language or gestures if used by clients.
- Do not threaten a client or place them in a risky situation.
- Do not spend time alone and out of sight with a client, take them home with you, or share a bed or room with them.
- Do not provide personal care for clients that they can do for themselves.
- Do not have favorites, give extra privileges to some clients, or exclude some.
- Do not make promises to clients that you will not fulfill.

*See Chapter 9, page 54, for explanation of confidentiality.

4. A SAFE PLACE TO STAY

Clients coming out of slavery immediately need a shelter that protects them from slaveholders. During the next weeks and months, a center or program that provides services is usually the most promising form of care. When they move on from the rehabilitation program, finding a safe place to live is very important to their *reintegration* (the client becoming settled in a normal community).

IMMEDIATE CARE

In the first week, the safe place may be with relatives or friends, or in a short-term shelter. Sometimes officials will bring rescued slaves immediately to a long-term care center. Freed *bonded laborers* (people who were in debt bondage, a form of slavery) sometimes take in others who need their help.

Appropriate shelter

A place to stay for temporary or long-term care is *appropriate* (good for the purpose, meeting a need well) if it is

- secret from traffickers and slaveholders
- protected from unwanted outsiders, threats, and danger
- caring for one *gender* (male or female) and clients of similar age, unless it is serving whole families

Children often come into shelters off the streets as well as from the worst forms of child labor. With all of the children needing help, some shelters keep them together. But if possible, keep freed child slaves with others who have similar special needs.

When there is no shelter for trafficked women and children, sometimes they are put into shelters for victims of *domestic violence* (abuse within families). These shelters are not appropriate for long-term care of freed slaves.

Shelters that are not appropriate

Clients coming out of slavery must not be kept, even for a short time, with

- homeless people or those that constantly move from place to place
- people accused of breaking the law
- criminals
- drug users
- people likely to be violent or having severe emotional problems
- people accused of choosing to come into a country without correct papers

Any form of prison is not appropriate. Being put in such places shames the victims and suggests that they are bad. If they stay there, there is a risk that some officials and others will treat them as criminals.

Temporary limits on free movement

Clients have the right to stay in a protected place without outsiders coming in.

When asked what they most wanted for their shelter, children in Togo replied "A fence."

Most clients also have the right to go out into the community, if they wish, or to leave. Coming and going freely is completely different from the experience of slavery. A former bonded laborer speaks:

If I would move in my house or out of my house, if I wanted to sit somewhere, to get up, if I wanted to eat, wanted to drink -- any single action at any point of time, anything that I wanted to do -- I required permission. That's what I mean when I say I was a slave. Freedom of movement was something I didn't know existed, I was not aware of.

(Ramphal, in Free the Slaves, The Silent Revolution)

However, if there is a court order to keep a client in, a shelter may limit his or her movements. Limits may be necessary to protect a client from being *abducted* (suddenly and secretly taken away with violence), running away, or *self-harm* (hurting himself or herself in some way).

In Sanlaap's shelters in Kolkata, many of their about 90 girls are under direct threat from traffickers. Attempts by traffickers to abduct girls from the shelter are common. Girls do leave the shelter, but under very careful protection. In other cases, some girls are seriously disturbed and have histories of attempted suicide as well as running away. These girls are, by court order, kept strictly within the shelter.

(Frederick, letter to Free the Slaves)

Children who are in rehabilitation centers for a long time need to be in touch with normal communities. The International Labor Organization guides programs to consider what is possible.

Visits outside the shelter might include excursions, trips to the local market, school or to attend vocational training or apprenticeship courses. Care providers should distinguish between actual safety risks connected to an individual child's case and slight risks based on general issues and common beliefs about a community or *stigmatization*.*

Many shelters seem to prefer to lock up children and only let them out in controlled occasional excursions. However this is not necessary in all cases and if inflicted in the long term, can be very damaging to a child's *psyche*.** Depriving children of their liberty may cause them to run away or inflict harm on themselves or others.

(ILO, Child Friendly Standards)

*stigmatization (belief that a whole group of people are bad and should be blamed and treated badly)

**psyche (inner spirit)

Programs without a shelter

Some services to increase safety are possible through part-time programs in communities. They need to be open at times of day when women and girls can come to them safely.

In Port-au-Prince, Haiti, an afternoon drop-in center serves 450 children in domestic slavery. It provides uniforms, schooling, a meal, and other activities. Its staff urges employers to give the children regular contact with their birth families, and time off. If a child reports abuse, the Foyer

Maurice Sixto center sends committees of three or four adults to talk with the employers, as well as with the children's own families. The program has been shown to improve the children's working conditions.

(Hyde, "Physical and mental health")

Families getting free from debt bondage, a form of slavery, often continue to live in their own communities, not far from the slaveholders. These groups may need help to protect themselves through community organizing, finding strength in numbers.

Field staff also need to advocate strongly for fair enforcement of laws in rural communities. Clients have rights to protection from violence and abuse wherever they live.

THE FOLLOWING WEEKS AND MONTHS

Getting settled in a rehabilitation center

As soon as possible, show new clients around the center, and tell them they are free to go everywhere in it. Explain the routines and any simple rules. Choose an experienced client to talk with a new one, stay nearby, and make him or her feel s/he is among friends. Being responsible for a *newcomer* (a new client) can also be good for the older client.

Protection from outside dangers

In slavery, children have learned not to trust anyone. They may run away due to fear or anger. But if trafficked children simply walk out, they may quickly become slaves again. Have a friendly but strong person at the door or where people enter the center. This important staff member keeps out unwanted outsiders. S/he also can persuade frightened clients that staying inside is a good idea at first.



Keep clients in only for a few days, until they see the shelter is safe for them. Consult clients about all visitors, including those who claim to be family members. Sometimes a relative was in fact the client's trafficker or slaveholder. If there is a real outside threat to a client, move him or her to somewhere safer if possible.

Size of a care center

Group centers are most common, some small and some with 50 clients or more. Smaller centers may be more helpful to troubled clients. But because getting people out of slavery is so important, many centers take more than they can care for easily.

Try to find enough funding so that space can be made available for more clients.

In a few programs, children are placed with *foster families* (families which take children to live with them, equal with their own children, often for a long time). Choose foster families carefully. (See Chapter 14, page 91.)

Shared space

Do all that is possible to have

- good light
- enough heat or coolness, and fresh air
- a bed or sleeping area for each client
- clean washrooms and toilets
- places where clients can wash and dry clothes

Some large centers have separate areas for sleeping, cooking, eating, playing and classes. Let clients move freely everywhere in the center. If the eating room is the only large room, let them use it freely between meals.

A center exists to give clients the new taste of freedom.

For normal development, children must have space to play. Both boys and girls need to climb, run, jump and move freely, to play games, sing, dance and make noise, to use their hands for catching and throwing, drawing and making things.



Play also helps clients to develop their language and thinking skills. Even a small group home or foster family should provide girls and boys with as much space as possible to move freely and play.

Help clients to make the center their own. Provide places where they can show their *handcrafts* (things made by hand), or put up their pictures on the walls.



Private space

In many cultures, having a private place of one's own is important. If possible, give clients of any age somewhere that they can call their own – even if it is only a small box with their name on it.

Adult clients may dream of having a room of their own with a door they can close. Few centers can provide this, but it is a promising idea.

Try to give clients control over their own things, possibly for the first time in their lives. Unless you ask first and s/he agrees, do not open a client's own box or room.

Avoid moving clients often

If possible, place freed slaves immediately in a center where they may stay all through rehabilitation. Change is not easy for clients who are just beginning to feel safe. They may recover more slowly if they have to leave what they know and learn new places, new people and new daily *routines* (what happens the same time every day).

However, if clients are in a situation that is not appropriate for their needs, move them to somewhere that is more appropriate. If you move a client, explain why, and what they can expect at the new place. Let the client ask questions and express *anxiety* (worries and fears).

Have a staff member go with them to keep them safe and decrease their anxiety. If the client agrees, take along their record and discuss it with the new case manager. Try to prevent the new place from retraumatizing the client by asking questions again about painful past experiences.



MOVING TOWARD REINTEGRATION

Safety outside

Clients must become able to spend hours on their own, outside the protection of a center. They need good self-protection skills. A girl who had been forced to become a soldier in Colombia describes going out:

I don't feel safe, because the problem that we had was very difficult for us...I'm very, very careful, for example when I go out, it's like they taught me, I'm like, I'm looking everywhere, I mean if you see someone right behind you, like, someone who's following you, I'm really very careful about that.

(Keairns, The voices of girl child soldiers)

Young children may not be able to protect themselves. As clients return home, encourage community members to discuss keeping them safer and watching out for traffickers.

Finding and keeping a safe place to live

Before they leave rehabilitation, teach clients how to find *housing* (a place to live). This is especially important with clients who will settle in a new city or country.

Slaves who lived in houses that the slaveholders own now need their own housing. They may need advocates to help them claim their rights to housing.

In India, children freed from bonded labor are supposed to get a one-room brick house as part of their government compensation. But in one district in Bihar, of 400 released bonded child laborers, researchers found only 63 had received such houses.

(Lize, [Recovering Childhoods](#))

Some rehabilitation programs provide shared housing for clients. If necessary, talk about the human relations that make it easier for people to share a space.

Skills for daily life: Finding and keeping safe housing

Most clients will have to find their own housing. Those who will pay for a place to live need to learn how to

- find the place
- agree with the owner about how much to pay and when
- have the agreement in writing
- pay the full amount every week or month
- prevent *eviction* (being thrown out by the owner)

Every client needs to learn how to

- keep a house clean
- make small repairs
- pay for electricity, water, and possibly heat
- make the housing feel safe and protected

Add subjects that are important in the area and the culture where clients will settle.

5. PHYSICAL HEALTH

IMMEDIATE CARE

Treat sickness and injuries

As soon as possible, look for sickness and injuries, and treat them. Write the information in the client's record, with a note if more treatment is needed.

Before a newcomer has a complete physical examination, wait a few days. S/he needs to become calmer and start to trust the rehabilitation staff.

For children under age 12, if possible give an immediate *immunization* (an injection that protects against a disease) against *measles* (a serious disease of children). In a group, measles can quickly spread and be very serious. Consider whether this risk is important enough for you to do something to new children that they will not like.

Help clients to keep clean

Keep the shelter itself clean, and provide what clients need.

- soap and water for washing themselves and their clothes
- appropriate toilets
- a way to wash hands after using toilets and before meals
- a way to wash and dry dishes and cooking utensils
- clean *bedding* (mattresses or mats, sheets, blankets)
- monthly supplies for young and adult women

Slaves often were not able keep clean as they would like. When youths (aged 14 to 17) and adults have toilets and washing water, they are likely to use them well. If necessary, show children how to keep clean, now that they have soap and water.

Some children may wet their beds, because in slavery there was nothing else they could do safely. Anxiety, sadness, and fear are connected to bedwetting. Clients have those feelings from their experiences, and may continue to wet their beds for a long time. Give kindness and understanding to children who wet their beds. Do not make any child feel shame, or that s/he is bad. Quietly give the child clean bedding. Ask night staff to wake the child up and take him or her to the toilet at night.

Sleep



Most slaves do not get enough sleep. The domestic worker, whether a child or an adult, is first up in the morning, and last to go to bed at night. Sexually exploited women often work day and night. Slaves in all kinds of work are kept at it as much

as 16 or 18 hours out of the 24. Usually without any day off from work, slaves do not have any chance to catch up on sleep.

Let clients sleep. Sleep heals.

Assume that newcomers will be tired almost all the time. Permit them to sleep as much as they need to. Newcomers do not need to follow the routines of older clients, but be sure that they get their meals.

Clothes



If it is possible, provide clean clothes. New clothes can help newcomers to feel cared for, and to know that they are starting a new life. But do not take away anything that they value. Favorite shirts or caps, or all of their usual clothes, may be important to clients who have nothing else of their own.

For this reason, some programs try to go back and get the clothes and other few things of clients who were rescued. However, in most situations, going back would be dangerous for rehabilitation staff, and clients must simply be given new clothes.

THE FOLLOWING WEEKS AND MONTHS

Plan a physical examination

The client will need a physical examination by a doctor. Explain that

- a friendly person can stay with the client if s/he wishes
- the client does not have to take off clothes unless s/he agrees
- the client can stop the examination at any time

If the client is very *anxious* (full of anxiety), put off the examination until s/he feels safe enough to agree.

If possible, choose doctors who are gentle and show respect for all clients. They help to make a client feel safe, and will also learn more from the client. Girls and women usually prefer a female doctor.

During medical tests and treatments, male health workers sometimes touch or talk to vulnerable girls in ways that shame or frighten them. This must not happen to your clients. Provide a friendly woman to be with each client during medical care, unless the client wants to be alone.

Stay with a female client to keep her feeling safe during all medical examinations, tests and treatments.

Physical problems to look for in freed slaves

Be sure that the doctor finds and records problems that are connected to slavery.

- injuries from beatings, bruises, broken bones
- cuts, burns, rashes
- headaches, dizziness, fainting
- stomach problems, pain in the abdomen, vomiting, diarrhoea
- breathing problems, TB (tuberculosis) and other infections, pains in the chest
- general pain and weakness, being tired or sleepy all the time, conditions caused by very poor diets (see Chapter 5)
- strains and back pains, bent body shape due to long time spent in one position
- *repetitive motion injuries* (harm from doing the same action again and again)
- poisoning by chemicals or *pesticides* (chemicals used to kill insects)

The doctor's statement for the client's record should

- list all physical problems
- sign the report
- describe immediate treatment
- suggest future treatment plans



This evidence will be needed in any *prosecution* (court process against someone accused of a crime) against a slaveholder.

Sexual experience: be very careful

Rehabilitation staff do not need to know clients' *HIV status* (whether they have the disease called HIV or AIDS.) HIV does not go from person to person unless

- they have sex, or
- blood goes from the infected person into another person

Neither should be happening in the rehabilitation program.

Rehabilitation staff can give healing care without knowing a client's sexual experience or HIV status.

Sexual exploitation is built into many situations of slavery. Many, probably most, girls and women in slavery experienced sexual exploitation and *rape* (being forced into sex by violence). Boys also may have been sexually exploited.

The danger of retraumatizing clients by asking about sexual experiences is extreme. Bringing up these experiences again can be terrible for clients, making them remember what they want to forget and put behind them. Some clients have even killed themselves after talking with someone who was only trying to help.

This is an area for the trained *professional* (someone specially trained for complex work, such as a psychological counselor). It is not appropriate for most rehabilitation staff to explore. Be sure that everyone understands the risks of questioning clients.

Consider whether it is necessary to include sexual experiences in physical examinations. Often doctors do not have enough time to deal with the client's painful memories slowly and gently. It may be better to leave this subject to trained counselors.

Wherever possible, only a trained professional counselor should talk with clients about sexual experiences – and only as much as the client chooses.

However, some clients are at high risk of *STDs* (sexually transmitted diseases). If they are infected, they need treatment as soon as possible.

The doctor can very gently ask a client if s/he wishes to be checked for

- pain and injuries in any particular part of the body
- diseases that go from person to person through sex
- pregnancy

The client decides, and has the right to refuse testing or treatment.

Every client has the right to decide about medical care, including exams and tests of all sorts.

Testing for HIV

Be sure that treatment for HIV is available

If a client tests positive, s/he must receive treatment. Don't test if you cannot treat.

Respect the right to information

If a client might be infected with HIV, and you can provide treatment:

- Gently counsel him or her on the possibility of being tested.
- Give information on why testing can be good, and how it can be not so good.
- Explain that a *positive test* for HIV would show that the client is infected.
- Talk with the client about what HIV infection might mean for his or her life.

Respect the right to make decisions

- The client decides whether to be tested for HIV.
- If s/he refuses to be tested, s/he must still receive all other medical care.
- The client decides whether to be told the results of the test.

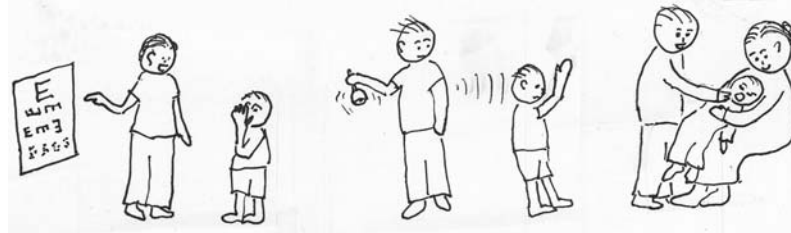
Respect the right to confidentiality, keeping information private

- Only the client is told the result of an HIV test.
- The client decides whom to tell about the result. (S/he might chose to tell a trusted case manager.)
- If records cannot be kept confidential, do not record the client's HIV status.

Check eyesight, hearing and teeth

Working to make rugs or small objects in poor light causes eye problems. Any client may not be seeing clearly, or have bad headaches that are connected to eye problems.

Untreated ear infections, noise in factories, and beatings around the head can cause loss of hearing. Clients may have mouth injuries and bad teeth.



Have appropriate professionals examine all clients for

- eye problems and how well they can see
- ear and hearing problems
- problems with their teeth, or pain when eating

Record problems in the client's file, and provide treatment.

Age and development of children

Most child clients will not know exactly how old they are. Keep in mind that many enslaved children are very short for their age. To estimate age, a child's *motor development* (what s/he can do with his or her body, arms, legs and hands) may help.

Do not use tests of language and understanding to estimate clients' age. After being locked up in slavery, they will not speak or think as well as free children of their age. During rehabilitation, they will start to catch up in speaking and thinking.

Most children get their second permanent back teeth at about 12 years old. If a child does not have all four of the second back teeth, probably s/he is not yet 14 years old. And even if a child does have all four of these teeth, s/he may still be less than 14 years old.

If you cannot learn a child's real age, try to estimate it fairly.

Immunizations

Child clients probably have not had immunizations. Immunize all children against measles, if this was not done immediately, and give BCG vaccine against tuberculosis. Provide other immunizations as recommended by the national health system.

Tests for common diseases

If possible, test all clients for parasite infections (malaria, roundworms, etc.) and provide treatment. If clients were trafficked from countries that are far away, remember also to test them for diseases that are common in those countries.

When corruption affects the official doctor's report

In some countries, doctors can sabotage a case by issuing a false age certificate, delaying a physical or rape examination in order to avoid detecting evidence of violence, or recording the wrong cause for an injury.

To protect a slaveholder from prosecution, a corrupt doctor may state that a child is too old to be protected by the strongest laws.

Indian laws set rules for employment of children under age 14. They can work only six hours a day, and must have an hour's break after three hours. They may not work at all between 7 pm and 8 am, and must have a full day off every week. They must be paid full minimum wages, equivalent to what an adult would earn.

The laws also list dangerous jobs that children under 14 may not do, including work in factories, mines, hotels, restaurants, and domestic work.

A labor official explains, "Sometimes it happens that the employer can 'manage' the medical examination. Then the Chief Medical Officer writes on the examination certificate that the child has completed his fifteenth year of age."

(Lize, [Recovering Childhoods](#))

It may become necessary for rehabilitation programs to organize their own system of physical examinations by doctors whom they can trust.

If a client's situation is not reported correctly by a doctor, get a second examination by a doctor whom you trust.



Responsibility for the health record

The client's record should have the results of physical examinations and tests, information on treatment that is given, plans for future care, and follow-up.

The case manager is responsible for

- keeping the record confidential
- recording treatments whenever they are given
- following up to be sure more treatment is given when it is needed
- keeping the legal evidence for the court safe from anyone who might copy it or remove it.

MOVING TOWARD REINTEGRATION

As clients make progress in rehabilitation, give them lots of experience in the domestic skills of keeping a home and its environment clean.

Teach healthy practices to everyone, including men and boys, not only to girls and women.

Children who were domestic servants may be able to teach others who did not have their experience. Staff of a center, such as cleaners, also can teach good *practices* (what people really do).

Skills for daily life: A clean home

Give all clients, both males and females, experience in being responsible to

- put things in order
- clean rooms and outdoor spaces
- wash and dry clothes and bedding
- clean toilets,
- get rid of human wastes in other ways (where homes lack toilets)
- get rid of trash, including *recycling* (using materials again)

A family still living in their own community may already be doing most of what is needed for a clean home.

But if some customs are not the best for family health, encourage rehabilitation *field staff* (staff who work outside of a center, in communities) to gently guide families toward cleaner practices.



Home health care

Children and youths will have their own families in a few years. This may be their best chance of health education. In many communities, boys and men do not get information from public health services, because only women go there.

If clients are *youths* (children from 14 through 17 years old) or adults (18 and older), discuss family planning and STDs. Choose a trusted staff member or health worker of the clients' own gender. Methods of family planning that are acceptable to all religious traditions now exist. Consult local health workers to learn what methods are used.

Invite clients' questions. Correct any mistaken beliefs that are dangerous to health.

Skills for daily life: How to be healthy

Teach how to prevent disease and injuries

- prevent malaria, hookworm, and other parasite infections
- prevent accidents (fires, drowning, road accidents, whatever is common)
- avoid smoking
- avoid using or coming to depend on alcohol
- reject drug use and solvent sniffing
- avoid sexually transmitted diseases (including HIV/AIDS)

Teach how to give simple health care at home

- provide first aid for small injuries
- care for minor sicknesses (headache, upset stomach, colds, fevers, etc.)

Getting health care services

Clients often had no health care services, even before they were enslaved. They need to understand that they have a right to health care. They need to know how to take action calmly and strongly if their community does not have appropriate services.

Clients will have different experiences, including good effects of traditional practices. Invite them to discuss their experiences. Respect treatments that are common in the clients' culture, unless you know for a fact that the treatments are dangerous.

Skills for daily life: Community health services

Teach what a health service should do for a community

- be open often, and be staffed with trained health workers
- give quick care at any time after accidents
- provide family planning methods that people can accept
- give care to pregnant women so their babies will be healthy
- give children immunizations against common diseases
- provide treatment for sickness

Discuss when it is helpful to

- buy pills and medicines in the market
- use traditional medicines (herbs, teas, etc.)
- get help from a traditional healer (ayurvedic physician, bonesetter, massage woman, healer who uses local plants, traditional birth attendant, etc.)

Discuss when it is dangerous to

- buy pills and medicines in the market
- get injections from someone who is not a doctor
- use treatments that cause harm
- wait too long to get professional help for a sick person or a pregnant woman

6. FOOD AND WATER

Slavery and hunger are closely connected. Having enough to eat today and knowing there will be enough to eat next week is a great step away from most clients' experiences in slavery.

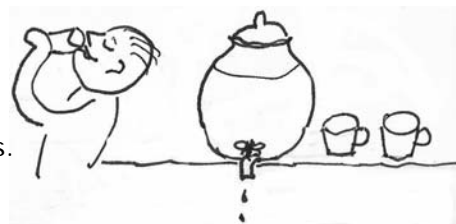
IMMEDIATE CARE

Satisfy hunger and the need for water

Many slaves ate only once a day, or when the slaveholders did not eat all of their own meals. Three meals a day will usually start children growing and bring back the strength of adults. Each person should have his or her own fair share of food.

Respect clients' food traditions. Ask them to decide the times of meals in seasons of *fasting* (not eating for some period of time).

Provide plenty of clean water to drink. Newcomers may be *dehydrated* (without enough water in their bodies). Urge them to drink water with meals and between meals.



Provide vitamin A

Most slaves had bad diets, and their bodies will need some important *micronutrients* (vitamins and minerals that are needed for health and growth). Give micronutrients to all clients to improve their health, and to make them less vulnerable to disease. Government health services often provide micronutrients free or at low cost.

Vitamin A prevents eye problems. It also makes people's bodies stronger against diseases that go from one person to another. Where people live together in a rehabilitation center, vitamin A helps to protect them all from sickness.

Vitamin A *capsules* (soft pills to take by mouth) should be available from health services. Vitamin A is stored in the body. The amount in one capsule provides enough vitamin A for six months. After six months, give another capsule.

For any girl or woman who might possibly be pregnant, be sure to give a smaller amount of vitamin A. The big amount of vitamin A all taken at once can harm a child before it is born. The small daily amount of vitamin A will not harm the child. If you have female clients, get a supply of the special 10,000 IU capsules for pregnant women. Use them if a new client might be pregnant and she is in *doubt* (not knowing what is true).

If a woman's in doubt, give the smaller amount.

Vitamin A amounts

For children ages 5-17 and adults who are not pregnant, give a bigger amount, once

Give one 200,000 IU capsule of vitamin A. Cut the capsule open and press it so the liquid goes into a child's mouth. An adult can take it with some water.

For any girl or woman who might be pregnant, give a smaller amount every day for two weeks

Give one 10,000 IU capsule of vitamin A every day for 14 days. She can take it with some water.

Provide iron and folate

The other micronutrients that most clients will need are iron and *folate* (micronutrient that is similar to vitamins in green leafy vegetables). These micronutrients improve the quality of a person's blood.

Iron and folate amounts

Usually iron and folate are together in one pill, with 200 mg of ferrous sulphate, and 250 mcg of folate. If available pills are different, ask a doctor to advise on the amounts.

For children ages 5-10, break the pill in half

Give half of an iron-folate pill every day with water at a meal for at least 14 days.

For children ages 10-17 and adults, use the whole pill

Give a whole iron-folate pill every day with water at a meal for at least 14 days.

THE FOLLOWING WEEKS AND MONTHS

Provide a good simple diet

Estimate the food that each adult needs each day:

- 400 g (weight before cooking) of grains (such as rice, millet, maize, wheat)
- 40 g of fatty food giving plenty of energy (such as oil, groundnut butter, shea butter)
- 50 g (weight before cooking) of food giving plenty of *protein* (such as beans, lentils, chickpeas).

Protein is necessary to build bodies and give strength.

Children need less of the grain foods than adults. But children need fatty foods that give plenty of energy, and foods giving plenty of protein, as much as adults do.

If people do not eat grains but eat roots (such as cassava, taro or potatoes), then they need more of the higher-energy and higher-protein foods.

When possible, every day provide some food from animals – eggs, milk products, meat, chicken or fish. These are high in protein.

Build health with other good foods

Whenever possible, add

- dark green leafy vegetables (such as spinach, wild greens, collards)
- red, orange and yellow vegetables (such as tomatoes, carrots, pumpkins)
- any other vegetables (such as onions, cucumbers, potatoes, okra)
- fruits
- the spices that clients like (such as chilies, cumin, mustard)

Use only iodized salt.

Continue to be sure that clean water is always available for drinking.

Hot drinks are part of many traditions, but not usually necessary for health and growth.

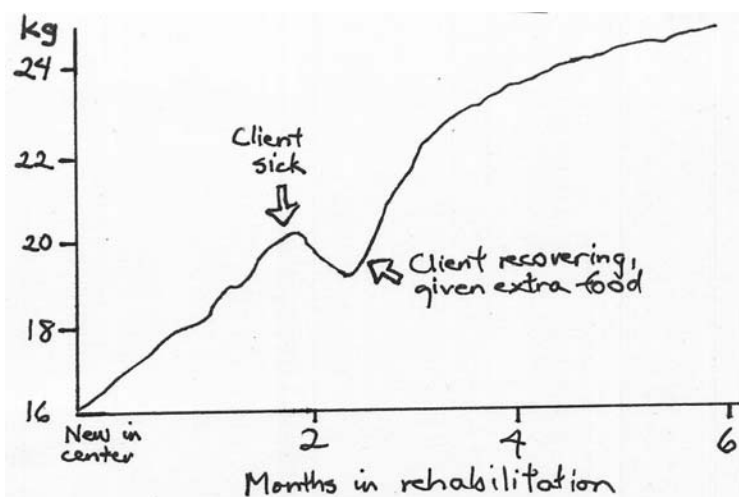
If clients use sugar in their tea or porridge, try not to give more sugar in other parts of their diet. Bottles of soda, fruit squashes, sweet cakes and candies do not build health. Between meals or on special days, a center can offer traditional foods without sugar such as

- roasted nuts
- roasted or boiled maize
- fried bean cakes and samosas
- cassava chips
- fruits

Watch the growth of children

With more food, children may become taller. But the change is slow, and they may always remain short. You will see changes in weight more quickly. Record them. Be careful that sad clients do not refuse to eat for a long time, and so lose weight.

Clients who are sick need to eat, but often they do not want to eat much for a few days. Give them extra food as they recover, so they will get back the lost weight.



Watch for signs that a client lacks micronutrients

The good food at a center will improve all clients' health. But a few may have more severe conditions that the diet alone will not correct. These usually are caused by lack of iron, vitamin A or vitamin D.

Signs of *anemia* (low iron in the blood) include

- the client is always extremely tired
- the client's tongue is not red but *pale* (with a weak color, going toward white)
- the inside of the eyelids is not red but also pale

After two weeks of iron-folate pills, plenty of food, and plenty of sleep, if a client has these signs and is still very weak, test for anemia. Anemia has several possible causes, so get a doctor's opinion.

Signs of *low vitamin A* include

- difficulty seeing at night
- areas on the white part of the eye that seem *foamy* (with many pale small bubbles)



Two weeks after you gave the client 200,000 units of vitamin A, if these signs are still present, it is urgent to ask a doctor's opinion. If these eye problems are not treated, a person can become completely unable to see.

Lack of vitamin D can increase pain in the back, knees and other parts of the body. Vitamin D makes bones stronger and decreases many kinds of pain.

Half an hour in sunlight causes a person's skin to make vitamin D. But many slaves, especially girls and women, were kept in dark rooms. Some women also went out only if their bodies and faces were covered.

With a severe lack of vitamin D, children develop bones that are soft. A child may need vitamin D pills, but do not give this vitamin without a doctor's opinion.

Make it possible for everyone to have their skin (at least faces and arms) in the sunlight for part of each day. Girls and women may want a private place in the sun.

Signs of lack of micronutrients

Sign of a problem

- extreme tiredness; tongue and inside eyelids pale
- difficulty seeing at night, foamy pale spots on eye
- back and other body pains, never being in sunlight

Probably needed

iron-folate (pills)
vitamin A (capsules)
more sunlight

In communities, rehabilitation field staff should also watch for lack of micronutrients, especially among children and women. To prevent problems, advocate that children get vitamin A from their health services every six months. Also advocate for pregnant women to get iron-folate pills, and if necessary the fourteen appropriate smaller amounts of vitamin A. However, women in families that eat dark green leafy vegetables all year may not need any extra vitamin A.

Teach rights to food

Slaveholders use anxiety about food to control what people do. In a rehabilitation program, be sure that everyone gets the food and water that they need. Remember that children need as much protein food as adults.

- Teach clients that everyone has a basic right to food and water.
- Give everyone a fair share.
- Give the same food to everyone – males, females, visitors, all levels of staff -- unless someone needs a special diet. Find other ways to show respect to visitors, instead of giving them extra or special food.
- Do not take away food to punish someone.

Everyone has the same right to food.

Help clients toward a good diet

In slavery, many clients did not learn to cook, cooked the same food every day, or had to eat mostly street foods. Give everyone part of the work of getting, cooking and sharing out food.

Clients may have a lot to learn from staff cooks. Adult clients may also be able to teach others about cooking. Shared cooking brings clients together and can increase their *self-confidence* (trusting themselves, feeling able to do things well).

Skills for daily life: Cooking food

Have all clients, both males and females, serve the group. Teach everyone to

- get food ready for cooking (cut vegetables, make breads, etc.)
- cook (boil, fry, roast, bake, etc.)
- serve out equal amounts for everyone
- wash up and put things away

MOVING TOWARD REINTEGRATION

Making water safe

Discuss how water is shared out where clients will *resettle* (make a home again in the old place or a new one). Tell clients of their rights to water.

With the help of the local organization Sankalp, 26 families in a rural district of northern India cooperated on constructing a dam to trap rainwater. When it filled, they were able to irrigate crops, grow their own food, and leave bonded labor.

(Baumann, trip report)

If clean water will not be available, discuss how to make dirty water cleaner and safer to use.

Skills for daily life: Safe water

Invite clients to talk about water in the places where they will resettle.

- Where does the water come from?
- Is it always available?
- How much will it cost?
- Is it clean?
- What are the risks of disease from water?
- How can the water be made safe to drink?
- How can clean water be stored, to keep it safe?

Buying food

Some countries have programs that give out food when it is needed. If the country where clients will resettle has this kind of system, advocate for them to get their share. They probably need to be on a special list, or to get *ration cards* (special documents that say someone can get free or low-cost food).

When you are teaching how to use numbers, talk about food costs and values.

- Talk about which traditional foods provide the best value for money.
- Talk about which street foods provide the best value for money.
- Explain the low food value of sodas, squash drinks and candies. Help clients to add up the cost if they buy sugary foods every day. What else could that money buy?

Planning to protect a family from hunger

Some clients were sent away from home in hopes that they would get enough to eat. In the future, clients will have children of their own. Discuss what they can do to protect their own children from hunger.

In the old days, there were not so many ways to store food safely and also to keep money to buy food in bad times. Now there may be more ways available to do these things. In the old days, people did not have ways to control how many children they had. Now families can choose to have the number of children that they can feed.

Skills for daily life: Feeding a family

Talk with clients about how they will feed their family, when they have one. Discuss

- growing vegetables at home, in gardens or pots
- choosing food from a market
- costs of different foods
- costs of fuel and how to use less fuel in cooking
- storing food safely

7. PSYCHOSOCIAL CARE

How a person thinks and feels, and how s/he is a part of groups of other people combine to make up his or her *psychosocial* experience.

Former slaves can have serious and complex psychosocial problems. In a perfect world, rehabilitation programs would include mental health professionals who could help clients through *counseling*. Counseling includes:

- listening to a client express his or her experiences and emotions,
- accepting all that s/he feels, without judging or criticizing,
- showing care and understanding, and
- helping the client toward more self-confidence and a *sense of self* (knowing oneself as a person).

But often mental health professionals are not available to do counseling. People who are not professionals can help mostly by *active listening*:

- allowing a client to speak and express feelings in his or her own way,
- listening with complete attention,
- showing that you understand, by body language and small sounds, and
- not giving opinions or advising.

Staff members also need to know some ways to *assess* newcomers (to form an idea of their psychosocial condition through observing and listening to them with attention). Assessing clients permits staff members to plan the care that each one needs. This may include a need for professional mental health help.

Needs differ from one person to another. The age and gender of clients, the form of slavery and how long it went on, their relations with slaveholders, their experience of violence, how they got out of slavery and many other things will affect their needs for psychosocial care.

Slavery that was longer, lonelier, and more severe usually has worse psychosocial effects on the victims.

IMMEDIATE CARE

Newcomers are beginning a long process of learning to feel safe. It is most important in the first days to

- give a warm welcome
- establish safety
- let the newcomer know what to expect
- provide food and water, health care, and rest
- keep clients together with others from similar situations

Keeping [traumatized children] together turned out to be one of the most therapeutic decisions made....After what they had just experienced, ripping them from their peers and/or siblings would only have increased their distress.

(Perry, "Stairway to Heaven")

Sexually exploited children need mental health professionals

Children coming out of prostitution are a minority among the total number of children in slavery. But they need special consideration. They have deep psychological and social problems that the rehabilitation program must deal with carefully. There are very risky areas in dealing with these children that in my experience are not as common in children removed from other situations of slavery.

Should organizations without professional mental health training and experience attempt their rehabilitation? Personally, I think they should not, because the behavior problems and the trauma, as well as stigmatization and sometimes violence upon reintegration, are often too severe. Helping appropriately requires specialized counseling and social work skills.

For example, inviting children who were sexually exploited to express emotions is a definite no-no for anyone who is not a fully trained professional. It is easy to get the emotions out. But after they are out, it may take far more skill, understanding and experience to help the client deal with those expressed emotions.

At the same time, these human resources don't drop off the trees to us. Few organizations have such highly trained professional staff. Active listening and showing care and understanding are not counseling. They can surely be done by anyone. We must give care as best we can, without fear.

(Frederick, letter to Free the Slaves)

Assess newcomers

When newcomers arrive, the case manager and other staff begin to assess their condition and needs. If possible, the case manager should know the client's culture and speak his or her language. This is especially important with children. If you must use an *interpreter* (someone who speaks two languages easily), find one who is very gentle.

The case manager may do an *intake interview* (quiet talk with a new client about his or her experiences, problems, needs and wishes). Explain why you are gathering information, and do not hurry or put pressure on the client. Adults can usually give the information needed for their record; children often cannot.

**Do not urge anyone to talk more than they want to.
Allow time for trust to develop.**

Remembering pain, fear and shame may become terrible, and retraumatize the newcomer. If any interview becomes too difficult for the client, offer to wait until another time.

Suggestions given on page 37 for interviewing children can also be useful in interviews with traumatized adults.

Suggestions for interviewing a child

Children will react in different ways. Try more than one way to gain their trust, and see what makes them *comfortable* (feeling warmly accepted, at ease, not having anxiety).

In order to get the fullest answers, make a child as comfortable as possible before inviting him or her to speak.

Use a gentle, calm, soft voice. Sit down with your head at the level of the child's head, not above it. Do not hurry or urge the child to talk.

Try doing something that does not need any words from the child. You could show a picture book, or show how something works. Or you could explain a little about other children and their experience in the rehabilitation program.

Take time. Some children have a lot of fear and shame. These emotions keep them quiet, and they may not speak in the first interview. You may need to wait until another time, even for weeks, before a child is ready to speak freely.

Usually asking a series of questions does not help people to express themselves. When the child is comfortable and feels safe, s/he may tell you a lot without your having to ask many questions.

Use active listening to show that you are paying attention and understanding what you hear.

If you must ask questions, give the child a way of understanding why you are asking them. For example, you can say:

"Sometimes children who come to the center tell me how they feel.
Putting their feelings in words helps them to feel better.
That's why I am asking you about yourself."

Invite the child to talk by explaining some of the things that other children have told you. (Do not name those children.) Say that you wonder if the same sort of things are also true for the child you are talking with.

"Last week a boy told me he is afraid at night.
He has bad dreams about what happened to him.
I wonder if sometimes it is like that for you...."

If the child asks questions, answer them honestly.

After the interview, write down as many notes as possible. These should go into the child's confidential record.

It is helpful to read the notes before the next interview or quiet talk with a child.

Psychosocial conditions to look for in newcomers

The psychological condition of a client could include

- levels of fear, anxiety, sadness, anger, shame, and other emotions
- whether s/he is *agitated* (not able to be quiet, moving all the time, shaking, reacting very suddenly, very anxious)
- whether s/he is very *inhibited* (very silent, closed in, not able to express any feelings)
- problems with paying attention
- problems with bad memories being always present, often in dreams
- speaking that is *disorganized* (not making sense, out of order, mixed up)



Social situations will also show how the client *relates to* (connects with) other people.

- relating to others very slowly, or perhaps not at all
- being full of fear and anxiety with other people
- using force, angry words or bullying
- seeking too much touch in ways that are not appropriate

You may have young clients who were soldiers. If they do not agree with someone, they may not know any way to respond except by violence. If fighting helped clients to survive in slavery, they may also expect to fight in a rehabilitation center.

Understand the experiences that make some clients difficult, acting out their anger and fear. You may need to set limits on any behavior or expression of feelings that is not good for the newcomer or for the other clients.

Case management planning

As soon as possible, hold a meeting of the case manager and other staff who are important for this client. In this meeting

- discuss what staff members have learned by paying attention, observing, and listening to the client
- decide which of a client's psychosocial problems are most important
- exchange ideas, and develop a plan for the client's care in the coming weeks
- write it down with the names of the staff members who are responsible for each part of the plan

For example:

Therese (the client) has stomach pains. She also suffers from a lot of shame and anxiety, and is very agitated. But she is not fighting, trying to run away, or threatening to harm herself.

Mary, the case manager, will take her to a doctor this week to have the stomach pains assessed and treated. Mary will stay with her all through that experience.

Jedidah, the house mother, will find calming activities for Therese to try. She will ask *Mariam*, one of the more settled clients, to stay near her for a few days.

Savitri, a junior staff member, will find time to sit with Therese every day in these next two weeks and talk quietly with her, using active listening.

Everyone will pay attention to Therese for two weeks and consider how she is doing. Then we will decide whether we need to get help for her from a mental health professional.

Such a meeting is the first step in psychosocial rehabilitation. However, for at least two weeks, and possibly for a month or longer, continue to assess the client's changing condition and needs.

THE FOLLOWING WEEKS AND MONTHS

Continue active listening

Provide quiet times for actively listening to each client. Find a space that is private, but not completely away from everyone.

A center in Togo uses a small open building for private counseling. Grass mats hang around the sides, but the client can see out. Other people can see that someone is talking inside there. But they cannot watch and cannot hear what is being said.

(Hyde, "Physical and Mental Health")



All staff members can learn to do active listening.

If you want clients to talk freely, avoid asking questions that can be answered with *yes*, *no*, or just one word. Use *open questions* (questions that encourage a person to talk freely and give him/her more control over what s/he talks about).

Usually open questions are not questions about facts and do not have correct answers. They are like gentle invitations to speak, such as:



- How was it for you when you were there?
- What happened after that?
- Why do you think that happened?
- I'd like you to tell me more, if you want to.
- How do you feel about being with us here?

Accept whatever the client says. If you think it is wrong, do not say so. Avoid giving advice or criticisms. The *basic* (very necessary) aim is to listen to the client.

Feeling listened to and understood is basic in any process of healing.

But if the client says things that are wrong about himself or others, you can gently give correct information. For example:

Client: They all hate me, because I'm different. They don't talk to me.
 Staff member: Yesterday I saw Yolanda and Jyoti ask you to play a game with them. And did I hear Salmah say something good to you today about the new food?

If a client starts to cry, remember that s/he has a lifetime of pain inside. Being able to express emotions may be part of the healing process. A client does not need to feel shame about crying. The active listener lets the client cry, and quietly stays with him or her.

Active listening is to help the client, not to seek facts. But clients' stories will come out, little by little in their own words. Later, make a note of any new facts and evidence about what they experienced in their confidential records.

Try to learn from a child whether it is a good idea to contact their family, to say that their child is safe and being cared for. Start to learn, without asking directly, whether the child thinks going home again will be safe.*

*Also ask field staff to visit the client's home and community, and assess dangers of abuse and violence. See Chapter 11, Finding Families.

Overall psychosocial aims

Create a healing environment for clients.

Most clients need to develop

- trust in other people
- self-confidence
- a sense of self
- a feeling that they have personal power and control

Many clients also need help in

- learning how to relate to other people
- understanding their own feelings and problems

Some clients will understand their difficult feelings better when they can name them. They think more clearly when they can use words such as *anger, sadness, anxiety, being agitated, not relating to other people, being afraid, or going out of control.*

Talking and being listened to may be helpful, but it also brings up painful memories. If you need to end a meeting but the client is still full of strong feelings, take a few minutes. Help the client to put away the pain of the past for now, and come back into the present time. One way is to ask simple questions of fact like these:

- What are you going to do right after this?
- What did you eat for lunch today?
- Will you be working in the garden this afternoon?

Very simple methods of calming emotions can be tried, like breathing deeply, or counting from ten to one. Additional *activities* (things that people do) that calm and heal are given in Chapter 8.

When people are deeply traumatized, be careful not to go too far into feelings that the client is not ready and able to deal with. For girls traumatized by sexual exploitation, staff without professional training should not try to give counseling.

Be careful not to retraumatize any client.

Trauma

Trauma is a psychological condition coming from terrible experiences that people see as a threat to their lives. Most slaves experienced violence, were threatened with violence, and saw violence against others. Other common causes of trauma are severe hunger, war, serious abuse as a child, sexual abuse such as rape, serious injuries, being *abducted* (suddenly and secretly taken away with violence).

Not all people who go through terrible experiences show signs of trauma. But many do, especially after repeated and long-term traumatic experiences.

Among rehabilitation clients, signs of trauma will appear in their feelings, behavior and mental and physical health. They are listed here in groups, but any of these can appear at any time, and many of them can appear together.

Signs of trauma to watch for in rehabilitation clients

At first, clients may

- be very anxious, worried about danger all the time
- have *flashbacks* (memories and feelings that keep coming back to someone, making them live through past terrible experiences and trauma again)
- be agitated, too active, very restless
- have frightening dreams and difficulty sleeping,
- show very sudden changes in emotions (loud, strong anger, or sudden crying)
- feel great shame
- feel that they have no value, believe that they are "nothing"

A little later, clients may

- suffer *panic attacks* (sudden extreme fear), anxiety, *phobias* (severe fears of particular things such as going outside, or animals, or high places)
- experience mental emptiness
- show *avoidant* behavior (ways of acting that prevent a person from relating to others because s/he is protecting himself or herself)
- have no feeling of connection to the world
- seek dangerous situations
- completely forget the past and who they are, or forget many things
- not be able to connect with and relate to others
- fear death or fear they will have only a short life

Severe signs of trauma take longer to develop and are more and more complex.

Severely traumatized people may

- almost never talk, not look at other people, or hide away in fear
- react to other people and situations with very little feeling or emotion
- be very tired all the time
- have health problems of the immune system, be sick very often
- experience pain that continues on and on
- have problems with their digestive system
- suffer from *depression* (silence, passive behavior, not being able to act, not being able to relate well to others, very deep sadness)
- have great difficulty in making plans for the future

Red flags: signs that professional help is urgently needed

For clients who show signs of severe or increasing problems, do all that is possible to find a mental health professional and get the client into their care. Professional help is urgent when a client

- seems to be getting worse in some way, such as
 - continuing to lose weight
 - becoming more disorganized in speech, thinking or behavior
 - becoming more depressed, silent and passive, seeming almost to freeze
- talks about killing himself or herself
- is harming himself or herself
- has strong anger that s/he cannot control
- seems not to connect with real life, hears voices or sees things that are not there
- uses physical force and verbal abuse to hurt others

Delays are dangerous. Urgent professional care saves lives.

How a professional helps a traumatized person

Counseling clients who are suffering from severe trauma is a special skill. Do whatever is possible to find a mental health professional who will work with the traumatized client. The professional will

- make the client feel safe
- develop a connection of care and understanding
- help the client become able to trust
- decrease the client's feeling of being passive and having no control
- work with a client's anger and other strong emotions
- lead the client to understand himself or herself better
- help the client to develop self-confidence and a sense of self
- help the client to value himself or herself and have a sense of personal power

Group discussions

For older children and adults who are not suffering from severe emotional problems, organize group meetings. In these meetings, clients share their ideas and feelings.

An hour is usually plenty. Shorter meetings are better for children.

A staff member leads the group, to make sure that it is helpful to the clients. Good group discussions can build clients' self-confidence and their trust in others. The aim is to help clients to feel better, so they can go forward with their lives.

Group counseling is not a class or teaching session. The clients do most of the talking. A skilled leader asks only enough questions to keep the discussion active and going in a good direction.

The leader works hard. S/he

- starts the discussion
- keeps it from going too far away from the subject
- may make some rules, such as “No telling people what to do” or “No criticizing”
- gives everyone a chance to speak
- keeps everyone feeling safe and able to speak freely
- gives comments on how members of the group are relating to each other

**In good group discussions, the clients talk a lot
and the leader talks much less.**

Two advantages of group discussions are that they include more clients and increase their social skills. Everyone in a group can be a helper as well as the receiver of help, which improves the way they value themselves.

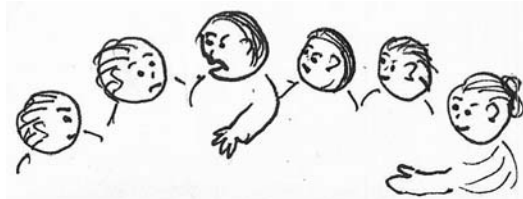
Group sessions, reported by nearly all programs [in Cote d'Ivoire, Togo, Haiti and India] may be a more powerful form of therapy than individual counseling because the stories of others' experiences serve to diminish the sense of isolation, reduce the stigma attached to low status and enslavement, and provide perspective.

In the group, children are also encouraged to think of ways to prevent child abuse and enslavement, such as reporting suspected traffickers to the police. Children develop ties to one another through this process, which adds to their feeling of belonging, security and support.
(Hyde, "Physical and Mental Health")

Some groups plan the subjects they will talk about. The clients may choose the subjects, or the leader may decide.

Other groups do not have a fixed subject for a meeting. Instead, everyone says

- what is on their mind
- how they are feeling
- what problems they are struggling with



Other group members may listen with attention and give support. They may also make suggestions, if the leader thinks such comments will be useful to that group.

Good effects of other groups

Other kinds of groups can provide a time and place for clients to be together in good relationships, to learn new ideas and skills, and to know that they belong. Belonging to community groups may be especially important. Aims of such groups include education, service, and cultural or spiritual practices.

MOVING TOWARD REINTEGRATION

Learn what psychosocial care the client wants

Through quiet talks and active listening, the case manager learns

- what the client wants to have happen, now that s/he is safe
- what continued psychosocial problems the client needs help with
- what questions s/he has
- how much understanding s/he has of how the world works

The last case management meeting

It is difficult to say how long it will take for a client to be strong enough psychosocially to lead an independent life. Many things affect recovery, including

- the client's age
- the services that the rehabilitation program provided
- the client's skill at relating to others
- his or her nature

When the client seems ready to leave the program, consider having a case meeting that includes him or her. Discuss what has happened, record progress as seen by both the client and the staff, and name the fears and possible difficulties of the future.

Consider the client's strengths and skills that will help her or him to resettle. It is important to talk about the good work the client has done, especially in building relationships.

Discuss the plan for the client's real future. Let the client know of any ways that you can be available for continued support.

Ending the stay in a center

Saying goodbye in a way that really helps the client may take more than one event. The client can be asked to seek out anyone who has been helpful, to say a private goodbye.

Give the client space and time to express feelings, both good and bad, about leaving. Also have the case manager, the guardian of a child, and other staff and clients share their feelings about the person going away.

Perhaps a center can establish a special leaving ceremony, appropriate to the culture. The ceremony can speak of hopes for the future and sadness at losing a valued person. Such a ceremony gives extra importance and strength to the client and to the others in the program.

8. ACTIVITIES THAT CALM AND HEAL

The appropriate balance between individual and group psychosocial rehabilitation is different in different cultures, and from one person to another. A mix of activities can help clients of all ages

- to feel better in themselves
- to connect with others in a friendly way
- to relate better to a group

Money, special spaces and equipment are not necessary. For ECPAT in Thailand, Colin Cotterill developed an Ideas Bank of activities for programs that do not have much money. (See More Resources, page 101.)

Use all of the rehabilitation staff to lead activities that calm and heal clients. Only a few of these activities require the leader to have any special training.

IMMEDIATE CARE

Knowing what will happen

An organized routine can help clients to feel less anxiety. Include free time in the *timetable* (list of what will happen when).

Explain any changes before they happen.

A sample timetable for child clients

530	awaken, wash, dress
630	physical exercise and meditation
730	chores such as cleaning, cooking, looking after animals
830	breakfast
900	classes
1300	lunch and rest
1500	social education
1700	free time
2000	dinner
2200	sleep or quiet reading

(from Mukti Ashram, New Delhi, India)

For clients who are living in their own homes, the activities of daily life will be different. But they may still want to know how each day will go.

The community field worker should increase the sense of order by always coming when s/he is expected.

In families, help parents to plan how to get children fed and at school on time every day. Discuss with parents how to give boys and girls the time that they need for studying at home and for playing, as well as for family work.

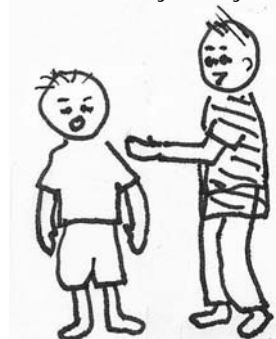
Establish a sense of order, so clients know what to expect.

A friendly welcome to the group

Consider which activities might be most helpful to a newcomer. Gently invite the client to *participate* (to join in the activity), but do not require it.

If the victim is silent, sad or inactive, then this is also due to the impact of trauma which she has undergone. In this case, we do not talk about the experiences she has gone through. We try to bring her to life in a day-to-day activity and watch her expression and statements she gives during watching TV and playing games. We try to divert her, whenever she becomes sad, and slowly-slowly the participation of the survivor increases.

(SARC, information provided for manual)



For clients who were *isolated* (kept away from others, very lonely, treated as an outsider), getting close to others of the same age is especially important. Everyone, young or old, needs friends.

But new clients may have lost the social skills of connecting with others. They may be inhibited and avoidant. Some others may mostly use force, anger and abuse in relating to others.

Notice when clients make friends. When friends choose each other, keep them together in activities.

Developing good social skills is even more important for a client's future than learning to read and write.

THE FOLLOWING WEEKS AND MONTHS

Touching

Closeness and touching may be part of ordinary life. However, think carefully before giving the same kind of touching. Touching, even from someone of the same gender, can threaten or retraumatize a client who has suffered abuse.

Before touching a client

- put out a hand toward the client and see if s/he takes it
- ask if s/he wants to be touched and will let you touch
- limit touching to hands and lower arms (in some cultures, feet or head may also be appropriate)
- touch without moving your hands



If in doubt, don't touch clients. Show them care in other ways. Do not allow any touching that a client does not want.

Massage (touching people with moving hands) can be powerful in healing people who want it. But even in cultures where massage is a custom, if it is given by someone who does not understand trauma, the experience may retraumatize a vulnerable client.



Many young children feel a strong hunger to be touched and held. Pay attention to how they react, and learn the kind of touching that they like.



Some children who were sexually abused may try sexual touching of others. Be aware that this behavior is possible. If it happens, gently teach what is appropriate, and what the limits are. Do not make any child feel guilty or shamed.

Be sure that every staff member follows the center's Code of Conduct (see page 14). Be especially careful to avoid touch or physical one-on-one contact that could suggest or lead toward sexual exploitation of a client.

Any touching that requires hiding from others must not happen in a rehabilitation program.

Show and teach respect for everyone

Require and expect respect in all relationships among clients and staff. This is not always easy. Many clients lived where struggle and abuse were part of every day. They had to fight to survive.

In the rehabilitation program, fighting and bullying behavior is not needed. However, some clients may continue to use it for some time. Work with staff and clients to

- keep everyone feeling safe
- set limits to threatening behavior
- help all clients to learn calmer ways to get along in a group

Treatment with calming medicines

Give medicines to calm severe reactions only if a mental health professional and a doctor agree that they are needed. First discuss with the client

- what treatment is possible
- what it can do for them
- whether it might have bad effects

The client then has the right to choose whether to receive the treatment or not. A child's guardian must decide on this matter, in the best interests of the child.

If treatment is given, note the amount and times in the client's confidential record.

Continue to pay attention to how the medicine affects the client. This kind of treatment can be difficult to get right. The case manager should inform the doctor and mental health professional about how the client reacts to the treatment.

Other health *traditions* (old, respected customs and beliefs) such as ayurveda or homeopathy may offer some helpful calming medicines. Local traditions may also include some calming medicines taken from plants.

Consider offering such medicines if clients who really need calming medicines know about these traditions and want to try them. Be sure to follow up their effects.

Treatment with medicines of any sort must be followed up by someone highly trained and experienced in that system.

Calming oneself through sitting quietly

Meditation (sitting quietly, breathing, calming the mind and spirit) helps some clients to recover. Many forms of *yoga* (a system of many different exercises to balance the body and mind) also give strength and calm.

But for some clients, to sit still and be guided through a meditation is not helpful. The mental pictures and memories that come up can make a client anxious, fearful or angry. Be aware that some clients may be psychologically *vulnerable* (at risk due to past trauma) and should not try this activity.

Relearning one's home language and culture

Isolation decreases people's learning of language. Clients who were trafficked out of their home areas will know fewer words and less complex structures of language than people who are still living in their community. As slaves, they may have had to use a new language that no one taught them to speak well.

Clients may not have learned the words and the actions that show friendship and respect in their home culture. If they go home before they learn these things, they may be blamed and stigmatized for lack of respect.

- Give every client lots of chances to use his or her home language.
- Hold religious ceremonies from the client's tradition. Each client decides whether s/he will participate.
- Celebrate other traditional community events and special days.
- Teach good behavior and the forms of language that show respect in the client's own culture, possibly through role plays.

Music, singing and quiet

Music that clients make for themselves can build their self-confidence. Singing increases clients' language and can bring a group together. Singing can also express emotions that people cannot put into their own words.

Consider the effects of recorded music. Some music calms and heals clients, but some recordings are full of anger and violence.

Discuss with staff what music, and how much quiet, is most appropriate to create a healing environment. The music that vulnerable clients need to have around them may not be what the staff would choose. Clients may also need more quiet.

At a rehabilitation center, the clients' needs come first.

Movement and dancing

Physical activity is very important to children and helps adults as well. Plan physical activities for clients every day, and give them a choice if possible. Simply taking walks together may help ill or depressed clients who do not yet have the energy for more activity.

Dancing has special value. Local traditions often include special songs and dances for girls and women. Teach these so they can fit in to their home culture again.



We are huge fans of dance therapy and have witnessed newly arrived children/young women with horrendous backgrounds make their first steps into peer bonding (connecting with others), first smiles, etc. in dance class.

(Bashford, Asha-Nepal UK, letter to Free the Slaves)

Games

Remember that clients may be very vulnerable in their feelings. Team games that include everyone may build self-confidence better than games that name winners and can make losers feel shame.

If everyone is active and laughing, that is a good sign. If some clients are left out or feeling isolated, offer different activities that will meet their needs better.

Sometimes a center gives the boys footballs, but has nothing for girls to do. Then the girls do not get enough physical activity and may remain passive.

**Girls and women need physical activity
as much as boys and men do.**

Have some sitting-down games available for two or more people to play. Many traditional games *encourage* (give good conditions for) thinking and also help clients relate to each other. *Checkers* (draughts, a game played on squares of black and white) is one of these games. If a client does not yet want to talk much, encourage her or him to play such games with others.

Think carefully before providing computer games. Games played alone will not develop the language and social skills that an isolated or avoidant client needs.

Practicing relaxation

Some centers have clients practice *relaxation* (making their bodies less tense, more at ease and comfortable). Staff teach clients to stretch, breathe deeply, and move gently. Relaxation helps clients to let go of the trauma and fear that may be stored in the body as pain.

Drama: role plays and puppets

Developing small role plays helps clients to share their own painful experience and also find some emotional distance from it. They choose the subjects.

Boys at an Indian rehabilitation center acted their own role play showing a father who drinks alcohol with a trafficker. The father then accepts money from the trafficker, and sends his son away with him. The mother is left out of the decision.

Another role play made by children themselves shows a woman kicking a sick child who is lying on the floor. She says with anger, "I paid a lot of money for him, and now he's dying."
(Free the Slaves video footage, BVA and Loknayak)

When children do not speak with ease, give them hand *puppets* (cloth figures of people or animals that are put on one's hand). Puppets can be made from a *sock* (foot covering) with eyes drawn on. Puppets give a child a safe way to express anger, fear and other feelings that they sometimes do not talk about freely.



Making pictures and handcrafts

Art materials that cost a lot of money are not necessary. Pencils and any old paper are enough, until colors can be provided. Through pictures, clients express feelings that cannot be put into words.

Children who have suffered as soldiers draw men with guns, houses on fire, and bloody people running away.

Boys who were slaves in the rug industry draw what life was like when they were locked in the loom buildings.

Children who were in the silk industry draw the cocoons that they had to take out of boiling water with their hands.

Invite clients to talk about their pictures if they want, but do not urge them. Many people do not like to explain what they have put into a picture.

Some clients like to make art from *clay* (special kind of earth). If there is no clay, provide anything else that will make shapes, such as a *dough* (a mixture of salt, water and flour). Some clients will know how to use wire, wood and plastic to make things like small cars and people.

Encourage clients to use all materials freely in their own way, instead of doing just what someone else does. This is their chance to create what they want. They need to have their work recognized. Provide places where clients can show their handcrafts with their names, so as to build their sense of self.

Support traditional handcrafts. Wherever appropriate in the culture, teach clients to make baskets, sew clothes, or paint designs on things – and to put their names on the work. If a client's work is sold, s/he should get and keep the money.

Teach handcrafts as a way of calming and expressing oneself, but not as the only way to earn a *livelihood* (enough money or other resources to live on).

Most clients will not be able to earn a livelihood from handcrafts.

Using media with care

In many places, *media* (radio, films, videos and television) that use electricity are not available. But where they are, consider carefully how you will use them to calm and heal.

Computer internet connections also need to be considered for their effects on clients. Will clients find a lot of sex and violence on the internet? Will they be vulnerable to new exploitation? Problems of criminal sexual exploitation through the internet are growing.

Discuss with staff:

- Will the music, sounds and stories from media help clients?
- Could they possibly harm vulnerable clients?

In southeastern Europe, it seemed common to show films or videos about trafficking to girls who had been trafficked. This was perhaps being done without much thought about possible harm. When girls are recovering from commercial sexual exploitation, or being under the control of a trafficker, there may be times when watching these might be helpful. In other circumstances, watching such videos could cause harm.

(Dottridge, letter to Free the Slaves)

Some special videos may help appropriate clients, when used by mental health professionals.

The Stairway Foundation of the Philippines has developed videos on child sexual exploitation. They are very carefully designed to be helpful in healing. The videos are used as part of a program of skilled counseling during rehabilitation of abused street children.

The answers to the questions on page 52 differ from one situation to another. Discuss with all staff what use of media will be most appropriate and helpful to the clients.

Will media calm and heal our clients?

Do the programs contain material that is of value?

Does the program give clients better understanding of their culture and language?

Does the program give information that the clients need?

Will clients be healed by the expression of emotions and experiences like their own?

Will agitated and anxious clients be calmed by getting away for a time from their own feelings?

Do the programs contain material that could do harm?

Does the program contain violence or abuse?

Will the clients be retraumatized by strong emotions, violence or abuse?

Will programs or computer games encourage clients in fighting and attacking others?

Does the program give the idea that females are of little or no value (unless they are beautiful and young, or belong to a powerful man?)

Will clients use the internet to find sexy material or make sex connections?

How will using media affect the rehabilitation program?

Will the media help clients to talk with counselors about their own experiences?

Will clients relate less to each other because they come to depend on media programs instead of social connections?

Will clients put all their attention and energy into internet games?

Will using media decrease the attention that staff members give to clients?

Will using media decrease physical activity?

MOVING TOWARD REINTEGRATION

Traditional healing ceremonies

When possible, plan traditional ceremonies that make clients feel clean again.

Clients who were sexually exploited or who were soldiers may especially need such ceremonies.

[In Angola] traditional healing rituals for child soldiers...provide acceptance for the child, assuage the ill spirits associated with the child soldier's actions during conflict, and reconcile the child with ancestral spirits. Similarly in Northern Uganda, former child soldiers report that traditional cleansing ceremonies are important so that the whole community understands they are 'decontaminated'.
(Verhey, Child Soldiers)

Speaking out publicly

Usually a client takes years before s/he is ready to speak out in public. However, the Indian rehabilitation group SARC has found that speaking out is part of healing for some clients:

A survivor develops her confidence level whenever she participates in a rally, protest or political activity. She gets a belief that she also has rights to demand and she gradually identifies the discrimination faced by women in society.
(SARC, letter to Free the Slaves)

9. TEACHING RIGHTS

Freed slaves need to learn that they have rights, and that slavery violated their rights. Clients have as many rights as any other person, even if they belong to an ethnic or social group that has often suffered discrimination.

A child sent into slavery by someone in the family has rights of his or her own – even if tradition gives parents power over their children.

Children have the same rights as adults, and more.

For newcomers, a rehabilitation program sets an example by being careful to respect their rights. In the next weeks and months, the program can empower clients to name and claim their rights.

As they become ready to leave the program, prepare them to find what they can do to gain rights for their whole community.

IMMEDIATE CARE

Use people's names

Many slaveholders use a word such as *girl* or *boy* or even *slave*, instead of a person's name. But every person has a right to his or her own name. For each client, use the name s/he wants you to use. Child clients may need help in remembering their full names.

Tell new clients the names of staff members. Encourage all clients to use those names, with respect, rather than using words like *sir*, *aunty* or *teacher*. Everyone has the right to know and use the names of people in power.

Recognize rights to the home language and religion

International conventions include every person's rights to

- their own name
- their own language
- their own *nationality* (being recognized as a citizen of a country by birth or law)
- their own religion and its traditions

The rehabilitation staff can discuss how they will give clients these rights through the work that they do. Find a balance between what the rehabilitation staff believe, and respecting the right of clients to their own religion and its traditions.

Respect rights related to information

**What people know makes them strong.
What they don't know keeps them weak.**

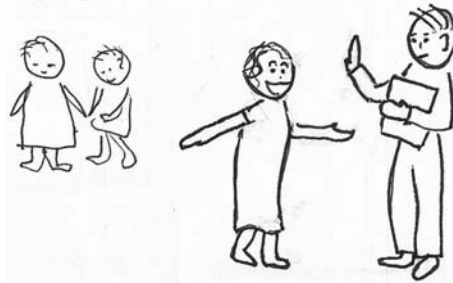
Slaveholders usually control slaves by “keeping them in the dark.” They do not want slaves to know anything that would help them to get away or find help. At the same time, slaveholders control their slaves by knowing all about them. Slaves have no private lives.

The rehabilitation program should show that every person has rights to

- information that is important for their lives
- confidentiality

Tell newcomers whatever they need to know, and answer their questions honestly and fully.

Do not tell other people information about the client. This includes other clients, other staff members, important visitors, and outsiders of all sorts. Protect each client's confidentiality.



What is confidentiality?

Confidentiality means keeping information private, not letting others know anything that someone does not want known. The person has the right to decide what should be told, and to whom.

Records. If information that could harm a client must be written in a record, it must be kept out of reach of anyone who does not need to know. Usually only the case manager needs to know this kind of information about a client.

Talking. When staff members learn something new about a client's history, health or other personal information, they must not tell it generally to other staff. They can tell the client's case manager.

Outsiders and media. A rehabilitation program should not tell names or stories of clients to anyone unless the client agrees. If someone wants information and pictures for media stories or prosecutions, the client decides whether to participate. Prepare clients to think carefully, and to say “no” to any public event that they are not ready for. This includes stories used by *NGOs* (non-governmental organizations) to get money for work against slavery.

The guardian is responsible to protect a child if s/he is asked to speak in public or to permit use of his or her picture and story. The guardian decides after considering the rights and best interests of the child.

The added rights of children

The Convention on the Rights of the Child lists added rights of everyone under 18 years old. If you are not sure of the age of youths, give them all the added rights of a child.

Every child has the right to

- say what s/he thinks
- have his or her ideas listened to and considered in any decisions
- be in contact with parents and family, if s/he wants the contact
- receive *primary schooling* (the first 6-8 years), and appropriate added education and training
- play
- rest

Every child coming out of slavery also has a right to

- a guardian all through the process of rehabilitation

If staff members feel that they must put some limits on a young child's rights, the child's guardian must make that decision.

The best interests of a child must be the main thing that is considered in all decisions.

THE FOLLOWING WEEKS AND MONTHS

National laws and practices

Almost all countries have signed international rights *conventions* (official documents stating the rights and policies that countries agree on). Countries need to make their own laws, in order to give the conventions force in their own system.

Many countries now have developed their own laws against slavery. These may often include parts that

- define what slavery is
- make slavery illegal
- explain a process for finding and releasing slaves
- describe legal processes for prosecutions
- list punishments for traffickers
- require appropriate help to victims

But too often, people do not know their national laws. Be sure that rehabilitation staff know the national laws that affect rights, so they can teach these to clients.

Clients especially need to know the laws of the place where they will settle. Teach them their rights under those laws. Where some rights are not yet expressed in the laws, teach them their rights under international conventions.

Are the laws being enforced?

Often there is not a good connection between what the laws say and what really happens.



Very often, a government is not enforcing its own laws against slavery. People in power look the other way so they do not see slavery.



Officials or police take money to drop cases against traffickers. Or slaves who run away are arrested, while slaveholders go free.

In teaching clients about their rights under the law, you may have to discuss this kind of problem.

Rights are learned through examples, teaching, and plenty of practice in using them.

Teach clients to name their rights

At first, clients may not have language to understand what has happened to them. They need to learn the words that name their rights.

Working with Indian youths in rehabilitation, the Bal Vikas Ashram finds it helpful to have them chant simple messages, like "Children have a right to school."

Clients need to know

- the right to *free movement* (going where one chooses)
- the right to *free association* (choosing whom to be with, making groups)
- the right to *free expression* (saying or writing whatever one wants)
- the right to receive equal treatment under national laws
- the right to protection from all forms of discrimination because of gender, ethnic group, physical or mental difficulties, or other differences

Both males and females need to discuss the subject of gender. Bring up questions such as

- What is happening to girls and women?
- Are they discriminated against?
- What are women's and girls' rights?
- Do men believe that they have some rights that women do not have?
- What needs to change?
- Who can make changes happen?

Ensure that all boys and men discuss violence toward women. Help them to see that a man who suffered in slavery should not beat and abuse his own wife and children. Discuss other ways of settling conflicts.

Teach clients to claim and use their rights

Rights die when they are not used.

In slavery, clients probably were safest when they were quiet or passive. Many girls and women also have learned from childhood to let men speak and make decisions for them. Clients of both sexes may have been taken from home so young that they have never decided anything for themselves.

But now clients have the right to free expression, to information, to have their ideas listened to, and so on. By encouraging clients to claim and use all of their rights, the staff gets them ready for the real world.

Use role-playing, in which clients practice what to say, in order to increase their self-confidence. Clients start by learning a few sentences and acting out that situation. After that they can go on to role play the same situation with their own words.

Role play many different situations in which a client is vulnerable to exploitation unless s/he demands his or her rights. Have the clients name the rights that are being used.

Sample role plays on rights

Getting information important for one's life

Employer: * Make your mark on this paper.

Woman: I need to know what it says.

Employer: I'm a busy man. Just mark it and get out.

Woman: *(She picks up the paper.)* I'll take it with me and have the schoolteacher read it for me tonight. *(She quietly goes out with it.)*

Employer: Stop! You can't do that! *(He's too late. She has simply done it.)*

Saying no and being listened to

Teacher: I want to take pictures of this class for the newspaper.

Girl: I don't want my family to see my picture here.

Teacher: But this newspaper does not go to your home country.

Other youths: *(all talking together)* Let's have the picture. What is the harm? We will all be in it together. Why are you keeping out of it?

Girl: *(She looks sad and frightened.)* I just don't want to.

Teacher: Is there anyone else who does not want to be in the picture?

Three more girls: *(finding their voices)* We don't want to.

Teacher: All right, you don't have to. We can take the picture without you.

*An employer is someone who pays a person to work.

Ask clients to think of situations where they have trouble using their rights. Then they can make up their own role plays.

Encourage clients to practice two by two. They can exchange roles, so that each one practices

- saying what needs to be said
- doing what needs to be done



Continue attention to children's added rights

The child should know the name of his or her guardian, and see the guardian often. The guardian gives him or her information in language that s/he can easily understand. The guardian should listen to the child's ideas carefully and consider them in deciding what to do. For example:

Guardian: Tomorrow we have a police officer coming to talk with you.
 Child: *(looks away, no answer)*
 Guardian: How does that sound to you?
 Child: I don't want to see him....I'm afraid.
 Guardian: He wants to know about the slaveholder who broke your arm. You don't have to say anything that you don't want to.
 Child: *(looking down)* Is the policeman going to shout at me?
 Guardian: We will not let him do that. You have not done anything wrong. Would you like me to stay with you when the policeman is here?
 Child: Yes, please.
 Guardian: All right. I will make sure you are safe.

MOVING TOWARD REINTEGRATION

Getting one's rights in any new place, or even where one was born, is not a sure thing. Keep on pushing officials who have the power to provide the documents that clients need. In difficult situations, get help from lawyers (See Chapter 12).

Clients' rights to documents

Usually traffickers take away people's legal documents, so that they become vulnerable and afraid of officials. This is a common step in making someone into a slave who can be completely controlled and exploited.

Clients have a right to documents such as official papers naming them as citizens or *legal residents* (people permitted to live somewhere) of the place where they will resettle. Advocate for these rights to be met.

Get documents for each client before s/he leaves rehabilitation.

Where births are not registered, or documents have been lost or taken away by traffickers, officials will not give recognize or give services to clients. Each client must have new documents, such as

- a card that identifies them
- a *residence permit* (document that officially permits a person to live somewhere)
- a *passport* (official document that shows a person's name and nationality)

Government officials can be very slow to give freed slaves their documents. Small ethnic groups that officials see as “outsiders” have special problems with long delays.

Some 27,000 Bangladeshi women and children trafficked to India, and perhaps 40,000 boys trafficked to Pakistan, have no legal way to return home. Without repatriation agreements in place, these victims of trafficking cannot return to their own country.

(ECPAT, Global Monitoring...Bangladesh)

Negotiate for your clients to go back to their own countries if they want to. Work toward the development of repatriation agreements between governments that would allow all trafficked people to go home.

Rights to community services

Usually clients need help with food, water, housing and fuel as they get settled. Many countries have programs that help people with *basic* (required daily in order to survive) needs. Teach clients how to

- claim their rights in basic needs programs
- get the papers that they will need for those services, such as ration cards
- claim their rights in other community programs that give help (perhaps clothing, transport, mental health counseling, physical health care, school, or finding work)

Ask clients to remember that they have the right to freedom of association. This means they can organize and cooperate to claim their rights. They can go together to speak with officials.

When a school meal program did not reach their children, self-help groups cooperated to demand their children's right to that food.



Rights to compensation and special help for freed slaves

National laws and rules may say that freed slaves have special rights, such as

- compensation
- cost of travel to a new place
- land, a plot for a house, or the house itself
- special health care and counseling
- schooling or training
- equipment for a new livelihood
- a paid job
- a permit to start a small business

Field staff need to know the laws and rules where clients will settle. Teach them how to push for their rights to be met. Because clients are freed slaves, people may expect clients to be quiet and passive. Encourage clients not to be passive. Urge them to keep pushing officials respectfully, again and again if necessary, in order to get action.

Going back to an official again and again is a right of any citizen or legal resident.

In claiming and getting rights for former slaves, do not forget that children and youths have their own needs and rights.

Child soldiers want to be recognized and included in formal demobilization programs [for people coming out of the military]. As one former child soldier in El Salvador said, "We young people were not recognized in any way....This was the worst that could have happened to me and my comrades."
(Verhey, Child Soldiers)

Urge clients to use their civil rights when they resettle

Resettled clients have the same rights as other citizens and legal residents. They need to know

- which officials such as police must help them when their rights are violated
- how to get equal protection under the law
- how to fight against discrimination
- how to get legal help
- what to do if wages are not paid or job agreements are broken
- how to register, vote and become politically active

With active encouragement from Sankalp community organizers, self-help group members in Uttar Pradesh succeeded in registering to vote and in standing for election. In early 2006, 48 men and 31 women from the self-help groups were elected to local government councils (panchayats) or as village heads, in three different districts. They will serve in those positions for five years.

(Awasthi, conversation, and Bales, Ending Slavery)

Labor rights that protect workers

Laws about working are different from place to place, but there are basic rights that are the same everywhere. Teach those rights, and the labor laws of the country where clients will settle. Also teach them that in every country

- Trafficking is against the law.
- Using threats and violence to force people to work without pay (or getting only enough to survive) violates their rights.
- In any job, the hours, the kind of work, and the pay should be agreed before the job starts, written down and signed. The worker has a right to keep a copy of the agreement, even if s/he cannot read it.
- If there is a *minimum legal wage* (the lowest amount of pay that the law allows), every worker has a right to that wage.
- They have a right to be paid on time, and the agreed amount of money.
- They have the right to move around freely outside of working hours. They may not be kept behind closed doors day and night.
- Workers have the right to leave a job.

If a worker uses some wages to pay off a loan from the employer, the worker has a right to get and keep a *receipt* (a signed paper proving that money was paid).

Discuss debt bondage where it still exists

The commonest form of slavery in the world is *debt bondage* (making slaves of people who took a small loan and exploiting their labor without letting them pay off the debt). Debt bondage within communities makes slaves of whole families. The bondage is often passed down from grandparents and parents to children.

Since passage of India's Bonded Labour System (Abolition) Act in 1976, this form of slavery has been against the law. The old debts are not legal now and the workers do not have to pay them off. However, an estimated ten million Indians are still in debt bondage. The system continues wherever laborers do not have the knowledge and support to demand their rights.

(Awasthi, conversation)

Traffickers and slaveholders often threaten that a victim owes them money for getting them a job, for travel, for food, and for any mistake or resistance. But the slave gets no money, so the debt cannot be paid off. This also is debt bondage.

Encourage clients to consider how they can stop the custom of debt bondage. If the existing laws are not enforced, what will they do about that?

Added protections for working children

International conventions and rules say that children must be protected from work that can harm them. Clients going home to their own communities may have to explain these limits to others.

Limits on the work of children

From 5 to 11 years old

- Children should not work for someone's *economic profit** outside their family.
- Their work for their own family should not prevent their attending primary school.
- The work must not be dangerous to their safety, health, or moral development.

From 12 to 14 years old

- Children can work for no more than 14 hours a week for someone's economic profit outside their family.
- The work must not be dangerous to their safety, health, or moral development.

From 15 to 17 years old

- Children may work outside the family but not in the *worst forms of child labor*. These include slavery, prostitution, being a soldier, criminal activities, and any work that is dangerous to the child's safety, health or moral development.

**Economic profit* here means producing whatever could be sold for money, like things made in a factory or crops grown on a farm. It also includes services like domestic work or working in a shop or restaurant.

Discuss with clients:

- Why are rights different at different ages?
- Why is there a difference between work in the family and outside the family?
- Which sorts of work can harm a child's safety and health?

Teach clients any list of the worst forms of child labor that is in their national laws. A few common examples of labor that is dangerous for children could be

- using insect-killing chemicals in farming
- mining, quarrying, and breaking rocks
- making things of glass or hot metal, and other processes using great heat
- working with boiling water and hot oil
- making fireworks
- carrying heavy loads on their heads or backs
- working in heavy traffic to ask for money, sell things, or wash cars

In most parts of the world where there is slavery, children are doing these jobs and similar kinds of heavy and dangerous work.

Talking with each other, clients can make their own lists.

Then they can discuss how to stop this use and abuse of children.

In Ending Slavery, Bales states that rehabilitated clients can become powerful examples and activists when they resettle.

Every freed slave who has economic options and understands human rights is a beacon of hope to enslaved and enslavable neighbors.

10. SKILLS FOR DAILY LIFE

Having *skills* (knowing how to do things) is very important to clients' future. Even adult clients may lack some skills for modern life.

Give attention and time to teaching the skills that are needed for daily life. Be sure that they practice these skills. You do not want clients to become too *dependent* (depending too much on being taken care of by others, being passive).

IMMEDIATE CARE

Build trust through full communication

As slaves, clients probably could not ask questions or talk freely to slaveholders. Encourage every client, including children, to talk with and ask questions of anyone on the staff.

Discuss and explain everything that interests clients.

If all the people in a group have their heads at the same level, free discussion is often easier. Try to get away from customs where differences in power are shown by who is standing up and who is sitting down



Also try to change any traditions that older people speak while younger ones keep quiet. Create an environment where everyone is equally valued.

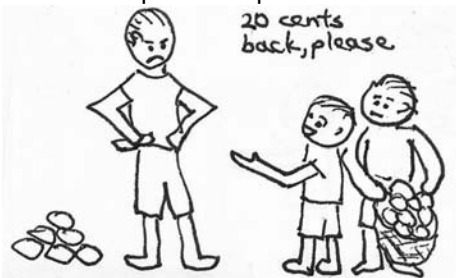
Traffickers and slaveholders lie to slaves. Always tell clients the truth. This shows respect and helps them to develop trust again. Knowing that some people can be trusted, and deciding whom to trust, are important steps in rehabilitation.

Honest and full sharing of information helps clients to develop trust.

THE FOLLOWING WEEKS AND MONTHS

Teach basic knowledge for survival in freedom

Every staff member knows and uses the skills for daily life, so everyone on the staff is a teacher. Clients can also teach each other. Have them practice the skills both in and out of a rehabilitation center, for example buying food for the center at a market. This practice prevents them from becoming too dependent.



People learn best by doing things for themselves.

People living in communities may also need to learn some skills for daily life from rehabilitation *field staff* (rehabilitation staff who work outside of a center, in communities).

Look back at the Skills for daily life boxes in earlier parts of this manual and be sure that you cover them:

Finding and keeping safe housing	Page 20
A clean home	Page 27
How to be healthy	Page 28
Community health services	Page 28
Cooking food	Page 33
Safe water	Page 34
Feeding a family	Page 34

More skills for daily life: Simple reading and numbers

Reading numbers and important common words

- Reading numbers
- Reading important signs such as *Danger, Exit, Tickets, WC (or toilet)*
- Telling time
- Reading a timetable

Money

- Counting money, and knowing if the money given back is correct
- *Bargaining* (talking with a seller to bring a price down)
- Receiving wages, getting correct pay for work*
- Saving money, avoiding loans and debts
- Sending money safely to others, keeping it safe at home or when traveling
- Using banks or micro-credit groups
- Getting *receipts* (signed papers proving that money was paid)

*If a client in the rehabilitation program does anything that makes money, have that client keep the money. Clients have had plenty of practice in working without pay. Now they need the skills of keeping and managing money. Taking away what they earn keeps them dependent.

More skills for daily life: Household work

Producing food at home

- Growing vegetables and grains, and storing them
- Caring for animals, chickens, etc. (where appropriate)
- Fishing and catching wild animals (where appropriate)

Clothes

- Choosing clothes for long use
- Fixing them when they tear or get holes (for boys and men as well as girls and women)

Preventing accidents in the house

- Using things that can be dangerous (charcoal, gas stoves, insect-killing chemicals, electricity, etc.)
- Storing things that are dangerous to children (medicines, paraffin/kerosene, matches)

More skills for daily life: Getting around

- Finding one's way in a new place
- Whom it is safest to ask for help and directions
- Traveling alone on buses, trains (and other ways, as appropriate)
- Riding and repairing a bicycle (for girls and women as well as boys and men)

More skills for daily life: Communications and papers

Keeping important papers

- Keeping receipts and why they are important, even if you cannot read them
- Getting and keeping safe other documents such as birth registrations, health cards, job *contracts* (agreements between a worker and an employer), loan agreements, passports
- When documents are required, getting and providing *photocopies* (copies of documents made by copying machines)

Communications

- Using telephones and radios (and cell phones and internet, if appropriate)
- Using telephone numbers and addresses
- Buying postage, sending and receiving letters

The skill of speaking; finding one's voice

Slaves often had to keep quiet, or were isolated without friends. Because talking with ease is an important skill for daily life, encourage clients to talk with each other as much as possible. Everyone, especially women and children, needs practice in saying what they think. Encourage clients to express their ideas. Gently encourage quiet clients to speak loudly enough so everyone can hear.



Use open questions that invite people to speak

Open questions are questions that encourage a person to talk freely.* They invite someone to speak freely. The speaker has control over what to say and how to say it. Open questions are not questions about facts, and cannot be answered just *yes* or *no*. Open questions have many possible answers; they have no right or wrong answers. For example:

- What do you think?
- How is this going for you?
- What would be some good ideas?
- What was it like for you, before you came here?
- What more could we talk about for a while?
- What else would you like to tell us?

There is no need to stop discussion with the first answer. Encourage many different answers, and welcome everything that clients say. Listen with attention.

*It is not easy to learn to ask *open* questions instead of asking *yes/no* questions. It is also not easy to learn to wait for and accept many different answers. Staff may need to practice these skills in role plays.

Help freed slaves to find their voices.

The skill of deciding for oneself

As soon as possible, avoid telling clients what to do, so they become skilled at making *decisions* (deciding about something) for themselves. Each day a client should be able to decide at least

- what to do with free time
- whom to be with
- what to study, practice or learn

Clients need to learn how to trust themselves. They may have become very anxious and dependent, and question whether they can make good decisions. Being responsible for small decisions that go well, during rehabilitation, may reduce their fear of making decisions in the future.

Making decisions develops a person's sense of self

Just like every other area in the brain, the regions involved in developing a sense of self grow or fail to grow depending upon how often they are *exercised* (used many times).

To develop a self, one must exercise choice and learn from the results of those choices. If the only thing you are taught is to do what you are told, or to follow a rule, you have little way of knowing what you like and want.

(adapted from Perry, "Stairway to Heaven")

Tell clients stories that show what people can do. The Indian organization MSEMVS gives sessions for their female clients on successful personalities and movements. Clients' self-confidence increases through these stories of how women succeed.

Teach a seven-step process for making decisions. A group can practice the process together. Then a client can also use it for his or her own decisions.

Seven steps for making decisions

- 1) Agree in simple language: *What is the problem* or question that you need to decide?
- 2) Think of all the *possible ways to respond* (to react, to act in answer to a situation). Make a list of them.
- 3) Discuss what will probably be the *consequences of each response*. These results might be good or bad, or both.
- 4) Think about what is important to you, your *basic values and beliefs*. For example, these might include respecting yourself, caring for others, keeping yourself safe, telling the truth, respecting your family, being loyal to friends, etc.
- 5) Thinking about the expected results of each response, and remembering your basic values and beliefs, *choose one response*.
- 6) *Do what you have decided*. If it is going to take a long time, perhaps make a step-by-step plan first. But act on your decision; do not stop with planning.
- 7) After you have acted on your decision, *look back at how it worked out* for you. Even a good decision may not have worked out very well. You can repeat the steps to make a new decision.

(adapted from material provided by Judy Logan, teacher, based on Wagman and Cooper, [Family Life Education](#))

The skill of protecting oneself

Discuss and role play situations where clients struggle with fear and anger. Practice:

- how to recognize people who could be dangerous
- how to get out of any bad situation
- when it is important to fight back, to get angry, or to shout for help
- how to avoid or escape people who are sexually dangerous



If possible, use Frederick and Subedi's Power Girls curriculum, developed from experience in Nepal and other countries. It covers very important subjects such as "My gender and my society" and "Men in my life". (See page 101 for source).

Training in physical and mental self-protection through arts such as *karate* and *tae kwan do* can be given to both females and males. In the simple form of these arts, physical strength is not so important as self-control and knowing how to move. When girls and women learn how to protect themselves if they are attacked, they have more self-confidence. But be sure that if clients get training in these arts, they do not use them for fighting and bullying.

Rewards for new ideas and progress

Most slaves are not rewarded for having new ideas. But to be successful in freedom, clients need to act for themselves and do new things. Warm attention and words can be used to reward a client's good acts and ideas.

General praise like "You're a good boy" is not the most helpful. Each day, look for something new or good that each client does. Name exactly what they did, and say how it was good.

In giving praise, say exactly what was done well.

A very shy child comes to you without being asked, and tells you he saw a big airplane.

Staff member: You came over here to tell me what you saw. I'm glad you told me. Let's look for it again tomorrow.

Another client calls a girl a bad name. She shouts "Leave me alone!" but does not hit him.

Staff member: You showed him how angry you are, but you did not hit him. That took a lot of self-control. Good for you!

Some clients sing together as they wash the dishes.

Staff member: It's very good to have music in this kitchen!

An older client welcomes a newcomer and stays close to her all day.

Staff member: You stayed with our new girl all through her first day. Thank you for making her feel that she has a friend here.

Staff members also become empowered when their good work is noticed and named.

Administrator: You are listening actively to those two frightened newcomers. You are giving them attention in a very warm way. That's exactly what they need. Thank you.

MOVING TOWARD REINTEGRATION

Self-confidence

Young women especially need strength and self-confidence to control relations with men and older women. They need to be empowered to exercise their rights, to make their own decisions and to protect themselves. A former girl soldier says:

We have to respect children's rights, decisions. For example, if I say something, then you have to respect the decision that I made. No one should violate other people's rights....Learn to regard yourself highly so that others respect you and also regard you well.

(Keairns, The Voices of Girl Child Soldiers)

Planning for the cost of living

Help clients to estimate how much it will cost them to

- live (rent, food, water, transport, health care, etc.)
- seek work
- pay taxes and other official *fees* (amounts paid for services)
- marry
- bring up healthy children and send them to school

Discuss sudden health problems, weddings, land buying, setting up a business, and other things that cost extra money. How will clients save money for these needs?

Encourage clients to practice living without debts. Suggest that they should not usually ask for loans. This is especially important where depending on loans can become a path into slavery. Explain how, if a loan is really necessary, a client can get the money from a cooperative, a self-help group or another community source that is not a landowner or employer. A former slave in India says:

We have a good group feeling and we give loans to other members when they're sick or need to pay for a marriage. Our members have taken loans to buy farm animals. One member took a loan to buy *bangles* (decorations for women's arms) and she takes them from village to village.

Loans must always be agreed in writing. The borrower is responsible for paying back the money. The written agreement should say how much to pay back each month, and when the loan will be completely paid off. For each payment, the *borrower* (person taking a loan) should get a signed receipt, and keep it safe.

Finding paid work

Clients may not know how to find paid work. Finding work is especially difficult where jobs usually go to relatives of employed people. Teach how to seek job *opportunities* (chances) through

- advertisements
- government services
- friends and neighbors
- where appropriate, offices of non-profit organizations

Usually finding a job takes effort every day for a long time. One cannot simply wait for a job to appear.

With clients who will be interviewed for a job, role play some interviews so they are ready for the usual questions and have good answers.

All clients should learn how to protect themselves against getting into another bad work situation.

When former slaves cannot support themselves, they are in danger of being entrapped into slavery again. For example, some former sex slaves are forced back into prostitution because that is all they know. Use the Seven Steps for Making Decisions to help clients coming out of sexual exploitation to consider what else they can do. Other work may not pay so much money, but it will give them a better future.

Advice to people thinking of going away for work

1. Check to make sure whether a job agency or opportunity is really there.
2. Ask to see a job contract, including the name, postal address, street address and telephone number of the employer, and the address where you will be working.
3. Have someone who knows about jobs read the contract and say if it is all right.
4. Read the contract yourself and be sure you understand what it says.
5. Sign it. After the employer has also signed it, make two photocopies. Give the contract to the employer, keep a copy for yourself, and leave a copy with relatives or friends.
6. Leave a copy of your passport with relatives or friends.
7. Tell your relatives or friends the postal address, street address and telephone number where you will be staying. Tell them by letter or telephone if these change.
8. Leave with relatives or friends the employer's postal address, street address and telephone number and the address where you will be working. (These should be on the contract, but if they are not, make sure you leave them written down.)
9. Agree with your relatives or friends on a special secret way to let them know that you are in trouble and need their help. It could be special words put into a letter or message.
10. If possible, attend a meeting at a center that advises people who are looking for good work.

(adapted from a Latvian checklist, Boak, powerpoint)

11. FINDING FAMILIES

IMMEDIATE CARE

Start trying to find a client's home village and family as soon as possible. Some will be eager to go home, but others may be afraid or feel ashamed. Going home is not a perfect solution for everyone. But rehabilitation staff cannot make suggestions unless they can find the family and visit them, as well as talking with the client.

Some centers help new children to visit home for a short time as soon as possible, to connect with their families again. After that visit, the children come back to a center for rehabilitation.

What can the client remember?

Ask clients about their home and family.

- Do they have a family name?
- Do they remember where they came from?
- How did they travel to the place where they were found?

Some young children cannot name themselves, their parents or their village but may remember

- names of some places
- names of siblings, other relatives or neighbors
- names of hills, rivers, where water is collected, markets or post offices
- what the family did to make a living



Listening to a child's language helps to locate his or her home. When a lost Indian boy developed enough trust to talk

I spoke to him in the languages of different districts: Bhojpuri, Maghi, Angika and Maithili. The Maithili and Angika languages were most *familiar* (known) to him. I spoke some popular words in those languages and he replied easily with the meaning of those words. I became sure that he came from North Bihar and his mother tongue was Maithili and also influenced by Angika.

But he could not give the name of his village, post office, police station or district. At length he recalled the name of the railway station where he was separated : Kushiyar Gaun. The boy was fully confident that if he could reach that station, he would find his village and house. So I took him there.

When we reached Kushiyar Gaun station, he recognized the uncompleted goddess Durga temple, and big trees outside the station. It was wonderful news for people that this boy had returned, and the news spread quickly. People gathered and all identified him. The boy and his family members were crying. The situation was very emotional.

(Kanhaiya, DDWS/BVA)

Identification by community members

From the communities where they work and are trusted, field staff members may have lists of children who are missing. Using a photo, they can ask parents or community committees whether they recognize a child.

Sometimes photos are put up in public places so family members and neighbors can identify them. Use this idea only if it will not bring shame on families.



THE FOLLOWING WEEKS AND MONTHS

How much contact does the client want?

Freed slaves have a right to contact with their families.

They also have a right to protection from contact. Perhaps they fear the family will not welcome them. They may fear some relatives, especially if they were trafficked by a family member. There may be a risk of verbal abuse or physical abuse. There may also be sexual exploitation at home or in that community.

Experience of Limye Lavi in Haiti has shown how difficult it is for children to go home, when they believe that their parents could have acted differently and prevented their becoming slaves.

Adult clients may want to meet their own children, or want to stay away from them.

Respect each client's wishes about family contact.

Consider paying for travel for the client to go home, or for family members to visit at the center. Offer connections through photos, letters, cell phones, or even videos. Everyone in the family needs to know that a rehabilitation center is not a prison.

MOVING TOWARD REINTEGRATION

Is the person who claims a child the real parent?

Children are in danger of being trafficked again if they are given to the wrong person. Before they meet, test what a person knows about the child. APPLE, an organization that rescues children in Ghana, has some suggestions.

- Show a photo of several children, and have the parents point out their own child.
- Ask the parents to name any special marks on the child – scars, tribal markings, etc.
- Ask them the age of their child.
- Ask them to name the slaveholder or trafficker who took away the child.

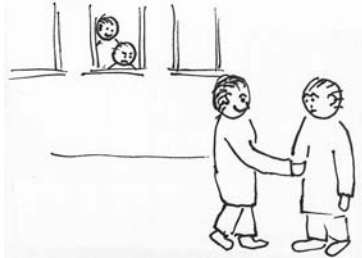
Also ask the person who claims a child whatever you have learned from the child

- names of siblings and other relatives
- age of the child
- names of hills, rivers, where water is collected, markets or post offices
- what the family does to make a living
- name of trafficker or slaveholder

In some situations, the parent can be asked to bring documents that name or picture the child, such as

- a family photo showing both the child and the parents
- birth registration or the child's ration card
- a letter from the head person of a village naming the parents and the child, although this by itself is not enough evidence

Observe the child's reaction to someone who claims him or her



Let the child see the person from a distance, without being seen. Or show the child a photo of the *claimant* (person who is claiming him or her).

- How does the child respond?
- Does he recognize that person?
- Is the child feeling pleasure or fear?

If you decide to let a child meet the claimant, observe whether the child is happy and comfortable, or not.

Four adults came to the Bal Vikas Ashram rehabilitation center in India to take their children home. One of the four seemed to have no relationship with the boy whom he claimed to be his real brother. The man met the boy with great happiness and put him into his lap, but the boy was not comfortable and the expression on his face said something different.

The boy and the man were talked with separately by center staff members. Through careful questioning of the man, it was learned that he was of the same village, but not the child's real brother. The child was not released to this man. His real parents were awaited.

(report from BVA)

Is the family ready to welcome the returning client?

Field staff members visiting a family and community can see what their conditions are. Difficulties that led to slavery for a family member may still exist. Listen to what they want and need, as you talk about the return of their missing family member. Also learn whether the family wants the client to come home again. (See pages 89-92 for discussion of alternatives to returning home.)

Learn through conversation and observation.

Try to learn about three areas: their *economic situation* (money and other resources), the condition of their children, and the level of danger. If possible, avoid asking too many yes/no questions or questions about facts. Open questions (see page 39) help families to talk freely.

Things to learn about a client's family

What is their economic situation?

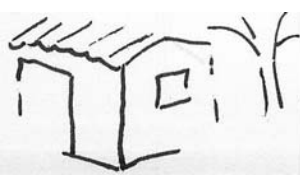
- Does the family have enough food and appropriate shelter?
- How many working adults are there?
- How do they make their livelihood?
- Do they owe landowners or *money lenders* (people who make loans)?
- Is anyone in the family always sick, or not able to work for some reason?

How are the children?

- Are the children in the home getting enough food and health care?
- Are the children going to school?
- Have other children been sent away to work, perhaps trafficked?
- Do any of the children show signs of neglect or abuse?

What is the level of danger?

- Are any family members using alcohol or drugs?
- Do any family members use violence to control or abuse others?
- Is there a risk that traffickers will attack the client or family?
- Do local officials protect people by enforcing the laws fairly?



Is the community ready to welcome the returning client?

In conversation with the family and community members, learn whether people may stigmatize the client as a bad person. For example:

- If a child was in an army that killed local people, will their relatives be angry?
- If a girl or woman was exploited for sex, will she be blamed and abused?

Plan how to prevent stigmatization. A community leader may be important as an advocate and protector for the returning person.

Workers from the organization Nava Jyoti in Nepal meet with family members to make them ready for a girl's return. They go with the girl who is returning, and talk with the villagers about how the girl was *entrapped* (caught through lies, tricks and violence) and is not to blame. When the worker leaves, s/he still keeps in touch with the returned girl. Most girls returned in this way have found themselves accepted back into their villages. An important part of the program is that six months of rehabilitation and education are followed by visits from Nava Jyoti field workers in the young women's own villages.

(SAHARA group and Beyond Trafficking, [Best Practices](#))

Giving extra resources can help a family to care for a returned member, but create bad feelings among neighbors who have less. Probably the whole community suffers from similar problems; everyone needs schools, health services, and livelihoods. Consider providing support to develop the whole village. Rehabilitated clients have skills that communities need, such as being able to read and write. They can also work to prevent trafficking of others. When clients return with resources for everyone, the community may be more ready to accept them.

12. HELP FROM LAWYERS

IMMEDIATE CARE

Protect clients from punishment

With the help of a lawyer when necessary, urgently protect new clients from

- suffering violence from traffickers and slaveholders, or
- being treated like criminals or *locked up* (put into a prison or place they are not permitted to leave).

Do not permit officials and police to use words that suggest clients are criminal -- words like "juvenile offenders" or "illegal immigrants". Speak up for the clients, and stop anyone from using such words. Trafficked clients did not choose to be slaves. If they broke laws, usually it is because slaveholders threatened them with violence.

Clients were entrapped into slavery. They must not be blamed or punished for what has happened to them.

If a client is locked up somewhere, get him or her out of there and to a safe place.

In order to protect a client, a rehabilitation program may need the help of a lawyer to get temporary legal *custody* (official responsibility for clients).

Protect clients from deportation

Quick deportation or *repatriation* (being sent to one's home area or country) puts clients at high risk of being lost on the way or trafficked again. Sarah Green of Amnesty International sums up this danger.

If you deport them very quickly and arbitrarily, you are simply throwing them back into the fire.

If local laws require, get each client a temporary residence permit for the period of rehabilitation.

Advocate for clients

If necessary, find an *interpreter* (someone who speaks two languages easily). The interpreter can explain legal rights and processes to clients in their home language. In difficult and complex situations, or where existing laws are not being correctly enforced, bring in a lawyer to advocate for clients.

A case manager or guardian should be with a client through any meeting with the police, courts, or officials who manage *immigration* (coming from one country to stay in another).



A staff member can advocate for the rights of a client if s/he is afraid to speak. A child's guardian takes this responsibility for a young client.

Stay with any client who is meeting officials.

THE FOLLOWING WEEKS AND MONTHS

Record facts that have legal importance

Keep information for lawyers safe and confidential in a client's record, including:

- names of traffickers and slaveholders,
- lies, tricks and methods used for entrapment into slavery,
- dates, places, and hours per week of work,
- sorts of work the slave actually did,
- additional crimes against the slave (violence, rape or other sexual exploitation, punishing with hunger, being locked up, etc.),
- evidence useful in prosecution, from rescuers and witnesses,
- work-related injuries and diseases (from the physical examination), and
- psychosocial effects on the client.

How a client is able to tell his or her story may change with time. One person may become more able to talk about a terrible experience. Another person may never remember clearly. Others may want to put the whole thing behind them.

If some clients do not want to talk about what has happened, do not force them.

Law enforcement officials who must interview sexually exploited children become frustrated when children claim they can't remember what happened or where they were taken or who they were with. It may be difficult to tell whether these children are [closing down the memory] or are simply frightened by their abusers and afraid to tell the truth.

(adapted from Barnitz, Commercial sexual exploitation of children)



Protect young clients against anyone in the police or legal system who pushes them too hard or says they are not cooperating.

Prosecutions are important

Laws that are not enforced have very little effect. Prosecutions show that the law is serious and that traffickers and slaveholders can be punished.

We do not need more laws. We have enough laws to prosecute people who are [trafficking]... But as long as there is massive profit to be made from indulging in nefarious activities such as these, we have enough people in India who would risk doing it because they know that the law, at the end of the day, is not going to get to them.

And therefore I would say that examples must be made out of some people and the maximum permissible punishment must be meted out to them.

(MP Udai Singh, video interview, Free the Slaves)

With the client, discuss possible good results if they decide to *testify* (make a statement in court and declare that it is completely true). The child's guardian must explain these effects as appropriate, in language that the child understands.

- The trafficker or slaveholder may be punished.
- The police and officials might enforce the laws more strongly.
- More crimes of entrapment and slavery might be prevented.
- Information from the trial might help to rescue other slaves.
- The court case might provide compensation such as money for the client.

Also discuss possible bad effects of a prosecution.

- Someone learns the client's name and attacks the client or their family.
- Witnesses are threatened with attacks if they testify against a slaveholder. The witnesses have to hide from attackers.
- People must go on living near someone whom they testified against.
- The trafficker or slaveholder just pays a small fine, and is then free to continue as before.
- The court process takes a long time.
- The witness may not be able to go home, work, or live a normal life during the months or years of legal processes.

The client decides what to do

If a girl wants to give evidence we accompany her to a lawyer and later to the court. It is important for us not to do anything without the knowledge and permission of the young person. (Otte, "What forms of assistance")

The client has the right to decide whether to testify.

In some countries, trafficked clients are pushed to give evidence by the offer of a residence permit. They may be told that if they decide not to testify in a prosecution, they will be deported. This practice violates every client's right to silence. Advocate for clients, and emphasize their right to refuse to testify.

Like all other clients, children have a right to keep quiet. If giving evidence will put a child at risk when s/he returns home, the guardian is responsible for making this decision in the child's best interests.

In some countries, children are allowed to give evidence to a judge in private, without appearing in court. Their names are not made public. Sometimes videotapes are used, with children's faces hidden or not shown clearly. Whenever possible, protect children in these ways.

Decisions to be made by lawyers and staff

Rehabilitation staff and lawyers need to start any prosecution with their eyes open.

Often the lawyers who are defending a slaveholder will find many ways to create delays and costs. Slaveholders and witnesses may testify falsely. The judge for a case may also be influenced by the power of local slaveholders. Court cases can take many years in some countries. Seek help from legal aid organizations that can provide free or low-cost services, where they exist.

In Bosnia and Herzegovina, the legal aid organization [Vasa Prava](#) has helped over thousands of clients. It arranges residence permits for clients from outside the country. It also provides lawyers from the time a client arrives at a shelter, and represents clients who give evidence in court. (US Dept of State TIP report)

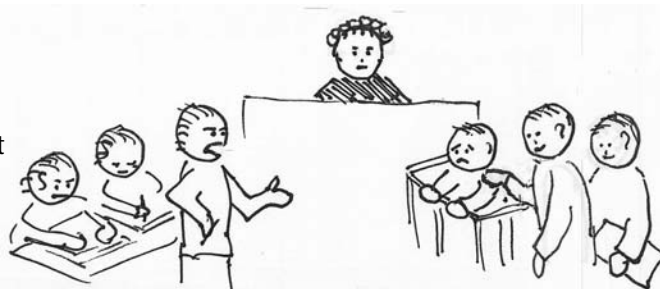
Staff, lawyers and legal aid workers will want to consider these questions:

- Is the client's evidence strong enough to use in court?
- Will the client's confidentiality be respected?
- Will witnesses be available and ready to testify?
- Do local officials and police protect families and witnesses?
- Will support from lawyers be available through the whole court process?
- How much will the process cost, and is there enough money?
- How much staff time will be required to follow the whole process through?

Preparing a client for court

To *prepare* (make ready) a client, explain what will happen in court. Use role plays so that the client knows when to speak and when to keep silent. Practice how the client will testify, responding to questions clearly and not getting off the subject. Be sure that the lawyer for a client understands the case well, and has all the facts and evidence from the client's record, such as evidence of injuries and mental harm.

A child's guardian must be with him or her at court, as well as the lawyer. Adults also need a friend or familiar staff member (in addition to their lawyer) to go with them and be present when they testify. The friend or staff member can help the client deal with anxiety, sadness, and other emotions, as they come up.



Courtrooms are not safe and secure environments for telling about terrible events...The sight of the slaveholder or trafficker, recall of a long-forgotten memory, or the sight of a loved one or of co-workers can seriously upset even the most confident witness. So can...cross-examination, as defense lawyers try to poke holes in a witness's evidence or suggest that he is lying.

(adapted from Bales, [Hidden Slaves](#))

MOVING TOWARD REINTEGRATION

Legal help to get needed documents

Most people who were trafficked out of their home country have no passports, or have false documents. A lawyer for clients can seek help from the appropriate *consul* (an official who represents his or her own country and protects its citizens in another country).

Provide legal help so each client can

- get a passport showing where s/he is a citizen
- get a residence permit for a new place, if s/he is not going home
- get a work permit or other necessary papers where s/he will resettle

Many clients were entrapped by giving their passports or papers to a trafficker. This must not happen again.

Teach all clients to hold on to their own documents.

Legal advice about future plans

Legal help may still be needed to prevent deportation and forced repatriation. Legal protection is especially needed by children.

Children should not be forced to go home against their will. Any decision that a non-national child should return to their country of origin should be taken by a child welfare agency, not by the police or an immigration authority, nor even by a court. Children should not be returned if...there are reasons to believe that the child's safety is not certain or their family is in danger.

(adapted from a joint statement of Terre des Hommes STOP conference)

Some clients may want to stay where they were rehabilitated. If they are not citizens, they may be refused permits to settle, work or go to school there. A lawyer should explain all of the legal limits and requirements, the length of time needed to become a citizen, and the delays that may happen.

Protect the client from public attention

After some time, clients who needed to be silent at first may find that they are ready to speak out. For some, telling their story in public may heal their own pain. For others, public attention is not wanted at all.

Clients (and the guardians of young children) decide whether public attention to their story will help them to recover, or will harm them or their families.

Clients have the right to decide about public use of their picture or their story.

A child's guardian is responsible to ensure that everyone -- including people who want to find money for the rehabilitation program -- respects the child's right to

- know that his or her record is confidential
- choose not to speak about his or her experience
- take part in all decisions
- be protected from anxiety, stigmatization, and other harm

Continued legal protection

When clients reach home, sometimes they are not treated fairly. They may be stigmatized and discriminated against, especially if

- they are girls and women
- they were sexually exploited
- they were in a military force
- they have had children without being married
- they belong to a family or ethnic group that has little or no power

Former slaveholders try to keep control through threats and criminal violence.

Vietnamese garment workers in Samoa won unpaid wages through a court case. This money was directly deposited into their bank accounts, but the employer sent strong men to force them to take the money out of the bank again. The employer threatened that anyone who refused or tried to get legal aid would lose their job and be returned to Vietnam. The frightened workers returned their money to the employer. (Bales, [Hidden Slaves](#))

In south Asia, landowners sometimes claim that government compensation paid to freed slaves belongs to them, to pay for old loans. Or when a child has been rescued from slavery, traffickers may try to take away one of his brothers or sisters instead.

In such cases, clients need quick access to legal advice and police protection. Inform all clients about legal help lines and local legal aid services where they will settle.

Every client needs to know how to get quick legal help.

Legal pressure to get compensation

In some countries, freed slaves who have release certificates gain rights to special services, such as food rations, housing, schooling for children, health and psychosocial care, and money. Expect delays. Repeated demands by the client, with more legal help and even returns to court, may be needed.

In the Indian state of Karnataka, bonded laborers were not getting their compensation because District Magistrates were not issuing their release certificates. In 2000-2001, there were 10,000 bonded laborers identified, but few had got their certificates, and none had received any compensation. (Human Rights Watch, [Small Change](#))

In early 1995, Christy was brought to the USA from Cameroon. For almost five years, she worked as a domestic slave for 15 to 18 hours, seven days a week. The court jailed her slaveholders for five years, and ordered them to pay her \$180,000 dollars of back wages. By 2007, Christy had received only \$2000. (Bales, [Ending Slavery](#))

13. SCHOOLING AND TRAINING

IMMEDIATE CARE

No hurry with reading and writing

Allow time for a newcomer to become calmer, watch lessons, listen and develop trust. Observe to see when s/he is ready to join in.

When families come out of slavery together, encourage parents to teach their children their home language and their traditional songs and stories.

Every parent is an important gentle teacher.

THE FOLLOWING WEEKS AND MONTHS

Understanding and speaking the home language

Language is basic to schooling. Clients trafficked as children need more help to learn the language, songs and stories that their parents and grandparents would usually teach. If staff members at a center do not speak the children's home language, seek volunteers who can talk with them in their home language.

Understanding and speaking freely are even more important than reading and writing.

Help all clients to express themselves well in their home language. As slaves, they perhaps heard mostly rude words and commands. Even ordinary words may not have been learned because a slave was cut off from the home language, and was just surviving day-to-day in isolation and confusion.

Brought to the USA, 15-year-old Celia had never seen a bridge, for example, and panicked when they drove over one in a car. Celia was isolated by language as well, normally speaking the indigenous language of her village, K'Iche. (Bales, [Ending Slavery](#))

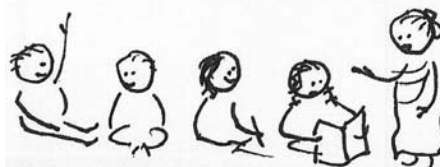
Add to clients' understanding of their whole language. Especially if they were trafficked as children, they may need to learn

- language that is *respectful* (showing respect, appropriate for the age of the person they are talking with)
- language for speaking about the past and the future
- words for their feelings
- words for complex linked thoughts (such as *if/then, although, because*)
- words for social problems (such as *slavery, corruption, poverty*)
- words for their own rights (such as *education, decisions, compensation*)

If clients come from several different areas, you may need to use a language that is new to some of them. However, work to improve each person's home language. That is the language that they use to think, to talk about their feelings, and to understand their rights. When they return home, speaking the local language is necessary for being accepted by the community.

Helpful schooling

Having a timetable and a chance to learn helps many children to feel more settled. Calling themselves *pupils* (school children) gives them a good new picture of themselves, and a new sense of purpose and progress.



Punishment (being punished with damaging words or physical violence) is not good for any pupil. Punishment is especially terrible for anxious or traumatized children. In local schools, some pupils or staff members may be *abusive* (doing or saying things that abuse others). Before sending vulnerable clients out to a local school, be sure that it will really be safe for them. If there is doubt, the child's guardian decides and follows up closely.

Education needed at different ages

For pupils from five to twelve years old, teaching with the usual schoolbooks may be appropriate. These can help the children to fit into normal classes at home.

Youths and adults need to catch up with schooling that they have missed. Seek ways to give these older clients the schooling that they need. Young children's books usually have too many simple stories and not enough information that an adult will find *useful* (helpful when it is used).



Teach reading and numbers using clients' own experiences. Many will be good at mental *arithmetic* (use of numbers) from working in markets. They may already recognize signs such as *stop* or *exit*.

Build on clients' existing knowledge.

Look for materials in local languages that are written for older learners. Usually such books are in simple words, and give information that youths and adults need for their future. Also ask the clients what they would like to learn, and teach them that.

Basic useful education for youths and adults

Reading words on road signs, names of bus and train stations, warning signs, common words in work and loan contracts, and receipts.

Reading numbers from paper money and *coins* (metal money), prices, times, dates, telephone numbers (where phones are used), addresses, wages, loan amounts, and receipts.

Writing can begin with a client's own name and address, other important names, lists of things to buy, directions to a place ("Go left at food store and go right at blue house"), and short family notes ("Meet auntie at 4:30 bus").

Arithmetic can be practiced using real money, weighing and measuring foods, bargaining, and getting correct money back.

Clients can practice adding up money that is saved, considering how much money is needed to pay off a loan, and finding how much money is earned for a week's work and a month's work at agreed wages.

Add up how many clients a hairdresser needs to work with, or how many bicycles someone needs to fix, in order to buy food for a family of five.

Schooling for children still in slavery

Basic primary schooling may be a very important part of *drop-in* programs (for clients to come when they can).

Some children who work as domestic servants in Haiti come to a drop-in afternoon program, when their employers permit. The children are over ten years old. Their basic school program takes four years of afternoon classes.

Drop-in programs can be useful to children still in slavery. The best of such services can give them friends and play, basic schooling, some health care, contact with caring adults, and hope.

But drop-in programs cannot give the children all of their rights, and do not make them free. In some situations, drop-in programs are a necessary first step. The staff of the program can then work with families toward complete freedom for their children.

Special evening schools reach very few slaves. The slaves are too tired to come at night, the streets are unsafe, and slaveholders usually will not release them.

Special schools run by the National Child Labour Program in India provide a free meal and payment of Rs. 100. But in some places these benefits attract non-working children and school dropouts, rather than bonded children who are not free to leave their work.

(Human Rights Watch, [Small Change](#))

Adding to skills that clients already have

The same skills that were used in slavery may earn a living in freedom.

Whole communities of Indian quarry slaves did not need any new training. They already knew how to break rocks. They needed their own quarry leases. In freedom, they could continue what they had been doing, and keep the profits. (Free the Slaves, [The Silent Revolution](#))

Clients who can get land sometimes know a lot already about farming. But wherever the government gives training for farmers, they should receive it. Farming trainers or small-business advisors sometimes give most attention to people who already have some education or are at a middle-class level. People from the poorest economic level and people from smaller ethnic groups may be left out.

Advocate with officials for clients to get the same training as other farmers and business people. Also urge clients to speak up and claim their rights to training.

Choosing training for a new kind of work

The rehabilitation program needs to teach clients the skills they need for a livelihood that is *sustainable* (going on for a long time, using local resources, so they can earn enough to live on for years.) Especially when clients have been in sexual exploitation, give training for a different kind of livelihood that will also improve the way that they value themselves.

Discuss a client's interests with him or her, and what s/he can learn to do well. A child's guardian should talk with the child about what kinds of training are available.

Let clients choose the training they want.

Rehabilitation programs may offer their own training, or cooperate with other organizations to offer clients more choices.

Training for a sustainable livelihood

In many places, very few local people buy handcrafts. They get just a few baskets, or tablecloths, or bangles, and then use them for a long time. Unless you are sure that plenty of local people want handcrafts, offering training in handcrafts may not be the best choice.

If your clients make handcrafts to sell to *tourists* (visitors to a country), the sales may not be sustainable. Tourists come and go, and change what they want to buy. Even if handcrafts are *exported* (sold in another country), what people want there also changes from year to year. A few very skilled clients might make a sustainable livelihood from high-quality handcrafts for export. But many clients will not produce work that is of such high quality. They cannot compete with more skilled workers, or with what is already on sale.

Some [previously enslaved girls] return with a sewing machine and some cloth and maybe some money. However more often than not, there are few market opportunities for using these skills. Today even in Ghana's most remote areas, secondhand clothes can be found at a cheaper price than sewn cloth, leaving very little opportunities for these young girls to become seamstresses. (Ibrahim-Tanko, Labour migration patterns)

Hairdressing and beauty services also may not provide enough money to live on. When clients return home, the market may be *saturated* (too many people offering a service, not enough buyers for them all).



Areas of training reported by rehabilitation programs

Sewing and fixing clothes, knitting sweaters and socks
 Embroidering designs on cloth
 Hairdressing and beauty services
 Weaving rugs
 Making bedsheets
 Printing T-shirts
 Making things of metal, welding steel
 Making pots, dishes, and other things for use in homes
 Building and *carpentry* (making tables, chairs and other things of wood)
 Repairing hand pumps
 Fixing bicycles
 Motor mechanics, repairing motorcycles and autos
 Electrical work
 Driving auto-rickshaws
 Growing vegetables and processing them for sale
 Keeping animals – goats, chickens, pigs
 Keeping bees for honey
 Baking bread and cakes, making jams and pickles, frying street foods
 Selling prepared foods
Catering (preparing and serving food for big special events)
 Doing office work, typing, bookkeeping, filing
 Working with computers, entering data
 Renting chairs for big special events like weddings and funerals
 Offering telephone and cell phone calls to people without phones
 Working in hotels
 Managing small businesses and shops
 Working as community organizers
 Working as staff members in rehabilitation centers

In northern India, self-help groups of freed bonded laborers learned to think about improving their own situation. They made their own list of what they wanted in training for their children.

Training that is useful for our children will

- be of high value in the market
- contribute to economic development
- have minimal chances of becoming out of date, not useful any more
- be learnable by students with primary education
- build on their individual interests and talents
- be available at local training centers
- be affordable, something we can find enough money to pay for
- fill an identified local need
- provide job opportunities in the community
- be unlikely to cause saturation in the area

(adapted by Sankalp from recommendations of self-help groups)

Training girls and women for an independent livelihood

Some programs train boys for better-paid jobs, but train girls for handcrafts and service work. With these jobs, a woman may not be able to support her family.

Women need real livelihoods, not just a little extra money.

Even without primary schooling, women in African and Asian countries have been trained to run and repair community wells and pumps, run community cell phone services, and fix bicycles.

New jobs especially developed by women are also possible. Discuss what communities need, and how women can meet that need.

Nava Jyoti was established in Nepal in 1988. It ran a trafficked women's center providing training in sewing and knitting. But recognizing that these skills would not give adequate employment opportunities, it then decided to train women as community development workers. The six-month residential training program includes personality development, group and personal counseling, guidance and therapy. The women are taught to recognize both their own limitations and their good qualities. The program improves self-esteem, which is really needed because of ingrained social and cultural values. Then the women go back to their own communities to run training focused on life skills, savings, and rights awareness.

(SAHARA groups and Beyond Trafficking, [Best Practices](#))

The pain of past experiences may prevent women and girls from feeling safe around any male employer. Train them to run their own businesses.

Due to the exploitation they have faced, some trafficked children, especially those trafficked into sexual exploitation, may not adapt well to working for an employer, as in a factory-style environment. They may prefer to work independently.

(Pearson, [Child-Friendly Standards](#))

In some countries, women and girls need to practice how they will protect themselves and their jobs, if an employer demands sex from them. Discuss and role play how they can seek protection from a *labor union* (group of workers with similar jobs), from other women, or from higher levels in the company. Encourage them to make up their own role plays.

A sample role play: Saying *no* to an abusive employer

Employer: I want you to stay late this evening, Maria.
 Maria: What is the work that I need to do?
 Employer: (*with a crooked smile*) You'll find out.
 Maria: I can't stay. My husband is waiting for me at the bus stop. (*She hurries out.*)

Next day:

Maria: I don't like the way he looks at me. Let's all leave at the same time.
 Friend 1: I'll stay with you as we go out.
 Friend 2: So will I. He tried the same thing with me last month.
 Employer: Maria, come in here. There's something you didn't do.
 Friends 1 & 2: Don't worry, Maria. We are coming in with you.
 Employer: (*with anger*) You two go away. I just want to talk to Maria.
 Friends: We are all coming in together. She wants us here. You can talk to her quietly and we'll be right here across the room.

MOVING TOWARD REINTEGRATION

Another language

Often a country's official language is necessary for secondary school or more training. Without this language, clients may not be able to improve themselves. They may risk being trafficked again. When clients speak, read and write their home language easily, they may be ready to start learning a language that is used in a wider area.

Going to local schools

Tell a child's new teacher what level of school work the child can do. Children can find going into regular school is difficult, especially if they meet discrimination from pupils or staff, or a custom of punishments. Local schools may also lack teachers, books and even timetables that can be trusted. Advocate for improvement of the local schools. Help parents to speak out for their children's right to primary schooling. When possible, consider funding secondary schooling for clients even after they leave a rehabilitation program.

On-the-job training

Some skilled workers such as auto mechanics, carpenters, or bread bakers will accept *apprentices* (young workers who are learning a job). They can start while they are still living in a rehabilitation center. In time, the apprentice should learn all

of the skills needed and be ready to work on his or her own. Advocate for girls and women to get on-the-job training opportunities. Do not accept gender discrimination.

Be sure that when an employer offers to take an apprentice, both of them agree on a contract. It should include

- the hours of work
- the wages, and when they will be paid
- the address where the apprentice will work
- what the apprentice will be doing
- a plan for the apprentice to move forward in learning all of the skills

Usually such a contract should be written and signed. A rehabilitation staff member should keep notes of the agreement. If there is no record and no outside witness, the apprentice may not be paid, kept at a low level of work, locked up, given many hours of extra work in the employer's house, and controlled through the threat of violence -- a slave again.

Teach how to be a good worker

In slavery, many clients had to lie and steal in order to survive. They may have worked hard only when the slaveholder was watching or threatening them. Now that they are starting a new life, help them learn what to do in order to keep a paid job.

Most workers have a *supervisor* (person responsible for the quality of their work). Be sure that clients know what employers and supervisors expect from a good worker.

Teach clients what employers expect

- Keep to the agreements that are in the contract.
- Wear clothes that are right for the kind of work.
- Come on every agreed working day (unless there is agreement on a reason to be away).
- Get to work on time and stay until the end of the working day.
- Never take things that belong to the business or factory.
- Listen to what the supervisor tells workers to do.
- When a worker does not understand, ask the supervisor to explain again.
- Report any difficulties on the job to the supervisor.
- Fill the working hours with real work.
- Cooperate well with other workers.
- Get things done on time.

Discuss the right of free association for people who have jobs. Workers can choose to join labor unions, paying something to the union each month. Unions advocate for their members, to protect them from some dangers and to improve working conditions and wages. Tell clients about unions where they will be working.

Follow up with clients who are new to paid work. Prevent them from losing jobs because of their lack of experience.

14. GETTING SETTLED AGAIN

PLANNING FOR A CLIENT'S REINTEGRATION

The length of stay in a center

There are no quick fixes for clients who are coming out of slavery. They need time and healing attention in a rehabilitation program.

However, the aim of rehabilitation is reintegration into normal social communities, not living for a long time in *institutions* (systems with buildings and administrations, like schools, hospitals, and large children's homes).

Staying *long-term* (for a long time) in a rehabilitation center or other institution offers some risks, including these:

- Children may not develop well without the care of a family.
- Adults may become very dependent, not ready to live and work on their own.
- Clients who like living there might not want to settle in a place where life will be much more difficult for them.

Will care in an institution help a child to reintegrate?

The environment [in an institution] is structured with a timetable for food, play and study, and no privacy. Strange adults and older children are in control.

Prolonged stay impairs the child's development of creative thinking, ability to wait for a want to be satisfied, and ability to engage in problem solving. It reduces a child's ability to relate to other children, to recognize adults who can help him or her, and to use learned skills.

Institutions make children less capable of integrating. The longer the child remains in an institution, the less s/he is capable of adjusting to the complexity and challenges of the outside community.

(adapted from Subbian, Compassionate Care conference)

Prepare clients to settle again in normal communities.

Experienced programs agree that clients should live in rehabilitation centers for as short a time as possible.

For children, a promising practice is to plan for about six months in a center.

However there are situations where a seriously traumatized client can only be helped by staying in a rehabilitation center or institution for much longer than six months. In case-by-case discussions, the case manager, the guardian of a child, and the client himself or herself, can consider what is possible.

Going home

Whenever possible without damage to the client, getting the family back together is the first choice. In El Salvador, 84% of former child soldiers reported that family ties had the most important effect on their reintegration. A Filipina child soldier said:

I think it's best for me to go home to give me the chance to think of what I should do, rather than stay here at the center and remain uncertain about my life...At home, I think I'll be able to forget about my dilemma. I just want to laugh.

(Keairns, [The Voices of Girl Child Soldiers](#))

But the long-term effects of slavery and trauma continue after a client is at home. A client has to learn how to fit into the family and community again, and bad memories usually come back.

After 10 years away from her community, Abak, a Sudanese woman, feels like a stranger in her own home. She has forgotten much of her native Dinka language, since the slaveholder forced her to speak Arabic, and her home village's customs and religious beliefs feel foreign to her. She says, "I am so happy to see my aunt again, and to be free, but now I do not know if I will ever feel at home again, no matter where I am." She says that her aunt encourages her to talk about the abuses she suffered as a slave, but that the words do not come. She has trouble sleeping at night.

(Free the Slaves website)

The travel home

If freed slaves travel home without protection, they may have terrible experiences.

[Togolese boys] trafficked to Nigeria described unassisted journeys by bicycle from Nigeria back to their villages, lasting up to nine days. They told of being robbed, forced to bribe soldiers, and going days on end without food...There are cases of boys who have died on the road on the way back. These boys pay with their lives.

(Human Rights Watch, [Borderline Slavery](#))

Not going home

Some clients cannot go home. They need to start life again in a new place, and that will not be easy at first. They may become very lonely. They will need to

- have a place to live
- create a sustainable livelihood
- get counseling and help when they need it
- learn the local language well
- make friends to take the place of family connections

The case manager or guardian needs to talk with each client about life outside the center. What are their wishes, fears and hopes? What will give them the best chance for a good future?



Foster families for children

Foster care (family care by people who are not close relatives, or not related at all) may be one possible choice. The rehabilitation staff needs to look closely at the foster family, to be sure that

- they have enough space, food, and other resources
- they will give loving attention and care to the child
- they can keep the child for a long time

Sometimes children are placed with foster families without staff taking a close look first. These children may not be treated equally with the family's own children. They may be kept in, given poorer food, and made to work while the other children go off to school.



Finding good foster families takes effort and time. If all goes well, a child will be able to settle down as a welcome member of a family. S/he will not need to be moved from one place to another.

Choose foster families carefully.

Foster families are easier to find if they are paid, and payment can encourage them to keep on giving the kind of care that was agreed to. Payment also reduces the danger that the family will suffer from money problems that affect the care of children. When money is given to foster families, programs usually require that the foster child is

- still being well cared for
- attending school
- not working for someone's economic profit outside the family
- not doing work dangerous to his or her safety, health, or moral development

However, some people might offer to take in a child mainly to get the money.

Some programs have found it wiser not to pay money for foster care. They suggest giving help to the whole family. For a farmer, this help could be seeds and *fertilizers* (substances that make soil more fertile so plants grow better). For a town family, it could be training in new skills that will improve the family's income. Providing financial support, health care, training and job placement to foster families can allow them to give foster children better care and treat them the same as their own.

Field rehabilitation staff should record where foster children are living, and follow up to make sure that each child's needs are met.

Discuss the Code of Conduct (page 14) with the family as appropriate. Explain that the child is especially vulnerable to any kind of punishment or violence.

Developing a new kind of family

Some programs set up houses with about five to fifteen children to create a new family. This size seems to work well for group homes. These usually have one or two full-time *resident* (living in the place) adults to give attention and care. The house parents may have their own children, along with the foster children.

In Cambodia, the Hagar Project chooses house-parent *couples* (married people) with up to three children of their own. The project pays them to care for eight more children rescued from abuse, slavery or living on the streets. They emphasize individual development, response to the children's emotional needs, and good, friendly relations with others.

(www.hagarinternational.org)

SOS Children's Villages in Nepal take in children below five years of age with their older brothers and sisters, if they have lost both parents. A woman who has no children of her own makes a lifetime *commitment* (serious promise) to be a resident SOS mother.

After two years of training, she lives with up to ten children of different ages and sexes. These children are considered brothers and sisters. They may take the mother's family name. They live in a village of SOS homes until they are about 17, and continue to keep in contact with their SOS family after that.

(www.soschildrensvillages.org)

The aim of the SOS program is to help the children belong to a permanent family and community. They go out to attend school, to get training and to work. The mother of that new family is theirs for life.

For children who have been traumatized by many losses and have difficulty feeling trust in anyone, very close and warm relations with a foster parent may not be possible. Group home care given by good-hearted people may be the most promising choice, giving the children as much of a family as they can deal with.

Boarding schools

Being resident at a boarding school may be a temporary answer for a child who cannot go home.

But a boarding school may not be a safe or happy place. Some schools lock children in, permit verbal abuse in class, give painful punishments, or allow bullying.

School staff who are responsible for many children may not observe that a newcomer is frightened and lonely. They may not understand why a child sometimes becomes depressed or angry without a reason that they can see.

A child who is not from the same ethnic group may also be at risk of discrimination or stigmatization by older children or staff.

Added to the dangers of care in any institution, these risks mean that the child in a boarding school needs to be followed up often by the guardian and rehabilitation field staff.

Shared housing

When clients are not children, more choices are possible. Youths and adults may be able to live together in

- a center where they get training in new skills
- a house or other place that they share
- workers' housing that is connected with their job

Programs in North America and Southeast Asia have learned that for their clients, shared housing is very important. If young women cannot go home, living with others gives them friends and a place to call their own.

Returning when troubles come up

A youth village in Israel works with youths who have had terrible experiences and are far from their families and homes. The center is available to these clients permanently.

Yemin Orde remains open and fully available to all students, 365 days a year. Since many of its children have no other home or family in Israel, Yemin Orde never closes and never turns a child away who has nowhere else to go.... [It] continues to support alumni after they have left the village....It is the message that Yemin Orde is family and 'will always be a home for you' that is most important to every child living in the village. (Yemin Orde website)

A study of girls from four countries who had been in the military recommends:

Provide safe centers to which they can return when they recognize they need help, where they know they will be listened to and where they will be respected. (Keairns, [The Voices of Girl Child Soldiers](#))

Try to be sure that clients are welcomed back to their rehabilitation center, foster family, or group home in later difficult times. When people have problems, they need a place to call home where they are warmly accepted.

PSYCHOSOCIAL PROBLEMS IN REINTEGRATION

Urgent desire to get married

Rehabilitation programs often find that after rescue from sexual exploitation, trafficked young women want to hurry into *relationships* (connections between two people). Their desire to get married makes them quick to fall in love. Even when they have a painful history with men, with the chance of a new relationship they are too *excited* (happy, full of hope) to be careful.

The situation is risky for the woman. When such temporary relationships explode, the woman can be psychologically broken to pieces.

A 26-year-old client was in hospital with her six-year-old daughter who needed urgent medical care. After only four days of being at the hospital, the client had met a man and fallen in love. She said that they were going to get married.

But someone who had known this client for six years knew that such situations had happened for her three times before. None of the other relationships had moved forward, and each time she was left terribly damaged and hurt.

The rehabilitation staff moved the client into what they thought would be a safe situation. But the move was made without respect for her human rights. She was treated like a child instead of like the kind, bright and caring adult that she was.

Such complex situations are common and need to be recognized and carefully considered. Rehabilitation staff need to consider how they will balance

- a woman's right to make her own decisions
- her need for care when she is excited and vulnerable

A long-term commitment to an unknown man is usually not in a girl's best interests. Getting married may look like a quick and easy answer for a young woman's future, but is not a promising practice. She may be entering another abusive situation.

Avoid offering marriage instead of training a young woman for her own independent sustainable livelihood.

Continuing effects of trauma

Signs of trauma can appear and continue long after a client has been resettled. Short rehabilitation programs do not heal all the complex damage to a victim's psyche.

For a client who suffers from the serious long-term effects of trauma, try to get the help of a mental health professional. Healing the deeply wounded psyche is usually beyond the skills and knowledge of a rehabilitation field staff member.

Long-term signs of trauma

After reintegration, field staff may observe signs in the client such as

- avoidant behavior
- reacting with very little emotion, not responding to situations
- feeling isolated, unable to connect with people
- being passive, not able to make plans and act on them
- depression
- self-harm, health problems, physical pains, being very tired every day
- seeming to seek threatening situations and dangerous people
- depending on daily use of drugs or large amounts of alcohol

Such signs show that the client is still struggling, carrying pain and sadness from a terrible past. S/he is making an effort to find a sense of self again, to avoid risks, to cover up the pain, and to protect against any more damage.

When one-to-one psychological counseling is not available, some adult survivors find healing through special *workshops* (group meetings where trained leaders help people to learn something together, usually over several days). These workshops require skilled, trained and trusted leaders.

More than ten years after the trauma of the 1993 Burundi/Rwanda conflicts, two men attended survivor workshops offered by the African Great Lakes Initiative:

Before the workshop, I liked to be alone most of time. My heart was exhausted from carrying all the bad stuff I had. After the workshop I remember that is when I slept more deeply than any other single night since 1993. The group sharing revealed to me that I am not the only one. On this earth, if you do not join others in groups, you would assume that you are the only one in sorrow.

I could not sleep, I could not eat and feel satisfied, I had chronic stomach pain and could not speak – thinking about what happened – and had headaches. Through [the workshop] I discovered I was traumatized....this was the first time I understood it....Now I have peace within myself, and talk, and I have no fear. Now I am human.

(Tovi and Sylvain, in Niyongabo, [Peaceways AGLI](#))

DEVELOPING A LIVELIHOOD

Will compensation money help the client and family?

Some NGO programs pay a child's fees for education and health care directly to a school or clinic. They continue the help only if the child goes to school *regularly* (every day, or for the usually expected times).

However, governments usually give compensation money to a child's parents. But a compensation payment can be more money than a poor family has ever had. They may spend it in ways that are not wise and that do not help the child or the family.

Rehabilitation field staff should:

- Provide clients and their families with help to plan how they will use compensation money.
- Encourage them to use it to learn new skills that will help them to earn money.
- Discuss buying something that will bring in money like a cow, a rickshaw, a sewing machine, or a place in the market.
- Suggest that they save some of the compensation money for special needs, so they will not need to take loans.

Try to have close contact with a family when money is handed over. Protect them from pressure to give it away or spend it quickly.

Explain clearly that families do not owe any of the money to slaveholders or money lenders. Also try to prevent more powerful community members or even family relations from taking the money.

A key point in educating people is to convince parents that when compensation is paid, they must not pass it to money lenders or landowners.

Bonded families depend on the money lenders for loans in future emergencies. They may not understand that their debt bond is against the law. They are often pressured to hand over funds received as compensation. This big profit for the landowners also makes the family poor again.

(adapted from Lize, [Recovering Childhoods](#))

Traditions of taking loans can be very strong. Families may need help in learning how to save money for buying farm equipment, getting health care, or paying for special events like the marriage of son or daughter.

Developing the whole community

Where a whole community has the same problems, helping just a few people may not be a promising idea. If a client's family becomes richer than others, bad feelings can develop. An organizer who develops a long-term relationship with a community, may help them to claim their rights to government programs for jobs, road building, schools and clinics.

In some cases, a rehabilitation NGO has provided some small amount of money to a whole community. Agreeing on a project that they all want, the community members are empowered to cooperate, work together, and see progress.

A community cooperated to plant trees again in an empty area that used to have forests.

(Free the Slaves, [The Silent Revolution](#))



Micro-credit loans

Micro-credit loans (small loans made through cooperative groups, not money lenders) can help people in a community to get training or start up small businesses.

However, be careful. Often families are so poor that any money from a micro-credit loan goes immediately to keep children in school and feed the family. Families with many personal problems may be driven into debt and poverty again by micro-credit loans.

Before giving a loan, first look at how a family works, and discuss their plans. Sometimes the micro-credit systems provide this kind of planning help.

- Do they have what they need to manage a small business? (a place, a plan, equipment, knowledge, enough health for hard work, a sense of responsibility, etc.)
- Will people want to buy what they produce? Or use the service they provide?
- Are there already many businesses doing the same thing in the same area? (Without good advice, they may want to enter a saturated market.)
- Is their business going to make money? Have they done the arithmetic?
- Will they earn enough and save enough to pay back the micro-credit loan?

Be sure that clients understand the week-by-week (or month-by-month) timetable for paying back the loan.

In some cases where loan money might not be well used, giving small amounts of money may be more helpful than giving a loan.

CHANGING THE HOME COMMUNITY

Returned clients work to prevent slavery

Several south Asian programs report that when clients return home, they help to prevent others being trafficked.

"I studied at the Bal Vikas Ashram and learned tailoring. Now I'm teaching tailoring to 50 children at the National Child Labor Project School in the next village. I'm going to teach there for about three years, then I plan to open a tailoring shop..." Since this boy and twelve other children returned from rehabilitation, no more children from his village have gone off to work in slavery. The slave broker doesn't even bother visiting any more.

(Baumann, trip report)

The Indian organization MSEMVS helped to develop several local schools. Rakesh, a 12-year-old former slave now leads the pupils' committee for good behavior and attendance.

He says, "I say that earlier you were beaten up, but now, since you got the chance to study and grow, you need to use that opportunity for yourselves. When the parents don't send the children, I go to them and say that you have to work for someone else and you're illiterate – Is this really what you want for your children?"

The children of his school send three representatives to a "children's local self-government" meeting with children from eight other schools. Through that grouping, MSEMVS is teaching them how to assess the social problems in their villages. They find out who is responsible for meeting those needs, and who is most affected. They plan what they can do to improve the situation.

(Baumann, trip report)

Where generations of people have lived in fear of landowners and slaveholders, the rehabilitated children are showing how to live in freedom. They will not allow slavery to return.

Bring different parts of the community together to look openly at child labor, trafficking and slavery. Encourage them to discuss the causes and effects of these practices. See if there is commitment and energy to address the problems together. Freed slaves can watch and report people who might be traffickers.

Rehabilitated slaves empower communities.

Many villages in India have developed *vigilance* (watching what happens with close attention) committees that look out for traffickers, record missing children, and keep in touch with officials and NGO organizers. The people cooperate to prevent their children being taken away into slavery.

Clients speak up for themselves

A resettled client with the appropriate papers can claim the same rights as all other residents, such as schooling and health care.

In some countries, the law says that housing, training and other *benefits* (good things, useful services) must be given as compensation to freed slaves. They need to speak up to claim these rights.

Support both men and women to find their voices and speak out.

Be sure that the right of children to be consulted is also recognized, and that their needs are met.

Officials may be slow to respond to people that they see as outsiders or as ethnic groups who do not belong in their area. Rehabilitated clients know their rights to join together and to insist on getting the same benefits as other residents and citizens. They can put pressure on officials as a group.

Knowing how to get help

Everyone has a right to help from officials such as police. But it is usually safer to go with someone else as a witness to the interview, or a whole group.

Clients in northern India have found the power to approach officials whom they used to fear. If there is any conflict with the village head, contractors or other groups, they now go to the police with a report of the problem.

When a women's group found that the village head had closed a drainage ditch, so dirty water was flowing back to their houses, they went to the police station on their own. The Sankalp field worker met them on the road but did not go with them. He simply said, "Go ahead. It is your right to speak out."
(Rampal to Baumann, trip report)

Discuss with clients and community members

- how to get service from officials without long delays
- how to get advocates from among well-respected, powerful people
- how to get help from organizations

Teach the names of local organizations that help to free slaves, or protect women and children. Some, such as *Childline India*, have free 24-hour telephone numbers.



Everyone should know how to get help.



FOLLOW-UP

Who follows up?

Children's guardians are still responsible for them during the years of rebuilding their lives. For other clients, name a person to take responsibility for the work of following up with resettled clients. When there are many clients to visit in an area, some rehabilitation programs hire their own field staff who live there.

The rehabilitation staff members need the feedback from follow-up. They can learn what works well, so they can make that a stronger part of their program. They can also respond to difficulties when clients resettle, by improving what they do for clients during their stay in a rehabilitation center.

**Follow-up tells rehabilitation staff
what to keep and what to change in their program.**

Follow-up may be done by a sister organization, in the place where a client will be reintegrated. A German program cares for girls trafficked from eastern Europe and Africa:

We help her even if she wants to leave the country fast. That means that we then make contact with organizations in her home country who will continue to work with her, ensuring that she never falls back into the vicious cycle of child trafficking. (Otte, *What forms of assistance*)

In some communities, it is possible to use groups of community volunteers for follow-up. Decide on who will follow up, and connect with that group or person, before a client resettles.

Ensure that the client knows who is going to follow up, if possible with the name of the responsible person. Tell the client how to contact that person when support or encouragement are needed.

How much follow-up is enough?

Follow-up is needed for a long time, especially when clients were exploited for sex or victims of violence. Most of a center's clients will have had one or both of these experiences.

Plan long-term follow up.

Try to visit child clients every month for the first six months. Then visit them every year, and more often if possible. Three to five years is considered a reasonable period for former child soldiers.

For other clients, the period may depend on how field workers assess their conditions. But there is more danger of too little follow-up, than of too much.

Rehabilitation and reinsertion require long-term follow-up, which is both costly and difficult. Not coincidentally, this is one of the most common weaknesses of many current projects.

For example, evaluating a recent Benin reinsertion project for children who had been intercepted during trafficking, the project team found that 80% of the children had been re trafficked.

Enormous amounts of money tend to be wasted because not enough attention is paid to follow-up, thus jeopardizing sustainability.

(Kielland, *Children at Work*)

Page 100 gives a sample form that might help field workers in following up.

Some possible questions for follow-up

Name of client _____ Name of field staff _____ Date _____

Where is client living?

 (If client is not there, where can he/she be found?*)

Is client recognized as belonging to that community? _____

Does s/he have all needed papers? (residence permit, voting card, release certificate, etc.) _____

Can the client name friends in the community? _____

Is s/he experiencing any bad treatment or violence? _____

Is client getting his or her rights met? (compensation, food allowances, housing, schooling, etc.) _____

Does client have access to usual community services? (health care, water, farm advice, etc.) _____

If a child, what school is the client attending regularly? _____

If a foster child, is s/he treated equally with other children in the household? _____

Are there problems with basic needs? (food, shelter, safety, etc.) _____

Are there problems with illness, debt, violence in the home? _____

How is the client feeling about his or her situation? _____

Does the client mention any psychosocial problems? _____

Does the client belong to a group? (support group, mothers' club, self-help group, etc.)** _____

Does the client know how to get, or has s/he obtained:

Help from local rehabilitation organizations _____

Help from people in power _____

Help from lawyers*** _____

Any micro-credit loan _____

Help from police or officials _____

How is the client (or a child client's parent) making a living? _____

Is the money enough for basic needs? _____

Are there other things the client would like to talk about? _____

What does the client need? _____

For each problem identified above, who will do something to meet those needs, and what will they do? (The client may be the best person to act.)

*Disappearance may mean that the client has been trafficked into slavery again.

**Being in groups is important for many people's sense of belonging at home, or for settling in a new place. A group also can take action together to get their rights met.

***Legal cases may continue long after a client has resettled. Field staff should tell clients how their case is going forward, and tell them when they are needed in court.

MORE RESOURCES

These publications will be useful to programs that want more information and suggestions than this manual can give.

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DEFINITIONS OF WORDS

This list shows how some necessary words are used in this book. If there are other words in the book that you do not understand, you can look them up in the Special English list at www.voanews.com.

- abducted** - suddenly and secretly taken away with violence
abuse - bad treatment causing harm or injury
abusive - doing and saying things that abuse others
acting out - expressing feelings strongly through doing things that may threaten others
activities - things that people do
active listening - allowing a client to speak and express feelings in his or her own way, listening with complete attention, showing that you understand, by body language and small sounds, and not giving opinions or advising
adults - people 18 years old or older
advocates - people who stand with slaves or clients and speak up for them
 (As used in this book, the word *advocate* does not mean a lawyer.)
agitated - not able to be quiet, moving all the time, shaking, reacting very suddenly, very anxious
amnesia - completely forgetting the past and who one is
anemia - low iron in the blood
anxiety - worries and fears
anxious - full of anxiety
apprentices - young workers who are learning a job
appropriate - good for the purpose, meeting a need well
arithmetic - use of numbers
assess - to form an idea of a client's psychosocial condition through observing and listening to them with attention
association - being with other people whom one chooses to be with, including meeting in groups
Freedom of association means one can choose whom to be with or whom to organize into a group.
avoidant behavior - ways of acting that prevent a person from relating to others because s/he is protecting himself or herself
- bangles** - decorations for women's arms
bargain - talk with a seller to bring a price down
basic - very necessary, required daily in order to survive
bedding - mattresses or mats, sheets, blankets
benefits - good things, useful services
best interests - what is best for the child at present and in the future
best practices - what we are sure is the best thing to do
bonded laborers - people in debt bondage
borrower - person taking a loan
brothels - places where women and girls are sexually exploited for a slaveholder's profit
bullying - violent abuse and control of weaker people by stronger ones
- capsules** - soft pills, medicines to take by mouth
carpentry - making tables, chairs and other things of wood
case manager - staff member who gives careful attention to the needs of each client, and follows up to be sure that action is taken
catering - preparing and serving food for big special events
checkers - draughts, a game played on squares of black and white
children - everyone under 18 years of age, including youths
claimant - person who is claiming a child
clay - a special kind of earth
clients - adults and children, anyone in a rehabilitation program
code of conduct - list of behaviors
coins - metal money
comfortable - feeling warmly accepted, at ease, having no anxiety
commitment - serious promise
compensation - money and resources provided for freed slaves
confidential - private
confidentiality - keeping information private

contract- agreement between a worker and an employer
consul - an official who represents his or her own country and protects its citizens in another country
conventions - official documents stating the rights and policies that countries agree on
cooperate - work together well
counseling - a mental health professional listening to a client express experiences and emotions, accepting all that s/he feels without judging or criticizing, showing care and understanding, and helping the client toward more self-confidence and a sense of self
counselor - someone specially trained in mental health who can help people with their emotions
couples - married people, and people living together in a long-term relationship
custody - official responsibility for clients

daily - common, usual, every day
debt bondage - making slaves of people who took a small loan and exploiting their labor without letting them pay off the debt
decision - deciding about something
dehydrated - without enough water in one's body
dependent - depending too much on being taken care of by others, being passive
deportation - being sent out of the country by the government
depression - silence, passive behavior, not being able to act, not being able to relate well to others, very deep sadness
discriminate against - treat people unequally and badly, often because they are from a different religion, ethnic group or country
disorganized - not making sense, out of order, mixed up
domestic servants - workers doing housework, cooking, and child care in homes
domestic violence - abuse within families
doubt - not knowing what is true
dough - a mixture of salt, water and flour
drop-in - for clients to come when they can
durable solution - a long-term plan for a child, one that gives the child the best chance of a good future

earn a livelihood - get enough money or other resources to live on
economic profit- producing whatever can be sold for money, like things made in a factory or crops grown on a farm, or services like domestic labor or working in a shop or restaurant
economic situation - money and other resources
emphasize - teach again and again, as basic knowledge
employer - someone who pays a person to work
empowered - finding their own abilities and strength
enslaved - in slavery
ensure - be sure
entrapped - caught through lies, tricks and violence
encourage - give good conditions for
ethnic group - usually a large group of people who share a language, race, and culture
eviction - being thrown out of housing by the owner
exercised - used many times
excited - happy, full of hope
exploitation - being used in a way that violates human rights, being abused for profit or made into a slave
exported - sold in another country
expression - saying or writing, making things or doing arts like singing and dancing
Freedom of expression is saying or writing whatever one wants.

familiar - known to someone, not strange
fasting - not eating for some period of time
feedback - a person's reactions to what another person has said or done
fees - amounts paid for services, like schooling, health care, documents
fertilizers - substances that make soil more fertile so plants grow better
field staff - rehabilitation staff who work outside of a center, in communities
flashbacks - memories and feelings that keep coming back to someone, making them live through past terrible experiences and trauma again
foamy - with many pale small bubbles
folate - micronutrient that is similar to vitamins in green leafy vegetables
follow-up - seeing that something is done as planned, seeing that a client is all right after leaving the program
foster care - family care by people who are not close relatives of a child, or not related at all
foster families - families that take in and care for children who are not their own

free association - choosing whom to be with, making groups

free expression - saying or writing whatever one wants

free movement - going where one chooses

gardens - where flowers or vegetables grow

gender - male or female

guardian - an advocate who works for and speaks for a child throughout rehabilitation

handcrafts - things made by hand

HIV status - whether they have the disease called HIV or AIDS

housing - a place to live

immigration - coming from one country to stay in another

immunization - an injection that protects against a disease

inappropriate - not good for a purpose

inhibited - very silent, closed in, unable to express any feelings

institutions - systems with buildings and administrations, like schools, hospitals, and large children's homes

intake interview - quiet talk with a new client about his or her experiences, problems, needs and wishes

interpreter - someone who speaks two languages easily

isolated - kept away from others, very lonely, treated as an outsider

kidnapping - abducting, especially children

labor union - organized group of workers with similar jobs

lawyers - professionals in the practice of law

legal residents - people permitted to live somewhere

livelihood - enough money or other resources to live on

locked up - put into a prison or place they are not permitted to leave

long-term - for a long time

manual - how-to-do-it book

massage - touching people with moving hands

measles - a serious disease of children

media - radio, films, videos and television

meditation - sitting quietly, breathing, calming the mind and spirit

micro-credit loans - small loans made through cooperative groups, not money lenders

micronutrients - vitamins and minerals needed for health and growth

minimum legal wage - the lowest amount of pay that the law allows

money lenders - people who make loans

motor development - what a child can do with his or her body, arms, legs and hands

mutual settlement - agreement that satisfies two people or groups

nationality - being recognized as a citizen of a country by birth or law

need to know - when a person needs information in order to give a client adequate help

neglect - not doing what is needed, and so causing harm

newcomer - a new client in a rehabilitation program

NGO - non-governmental organization

Nutrition - how food affects health

open questions - a sort of question that encourages a person to talk freely

opportunity - chance

outsiders - people who do not belong to the community

pale - with a weak color, going toward white

panic attacks - sudden extreme fear

participate - to join in an activity

passive - psychologically unable to take action

passport - official document from his or her government that shows a person's name and nationality

pesticide - chemical used to kill insects

phobias - severe fears of particular things such as going outdoors, or animals, or high places

photocopy - a copy of a document made by a copying machine

pill - small amount of a micronutrient or a medicine, to take by mouth

positive test - result of a test for HIV that shows a person is infected with the disease

practices - what people really do

prepare - make ready

- primary schooling** - the first 6-8 years of school
- professional** - someone specially trained for complex work, such as a doctor, lawyer, social worker, or mental health counselor
- promising practices** - whatever existing programs do that seems to have good results
- prosecution** - court process against someone accused of a crime
- prostitution** - sexual exploitation for profit
- protein** - a part of food that is necessary to build bodies and give strength
- psyche** - one's inner spirit
- psychological** - mental and emotional, thinking and feeling
- psychosocial** - both the psychological (mental and emotional, thinking and feeling) and the social (being part of a group) parts of a person
Psychological development means developing abilities of thinking, feeling and being part of a group
- psychosocial development** - developing abilities of thinking, feeling and being part of a group
- punishment** - being punished with damaging words or physical violence
- pupils** - school children
- puppets** - cloth figures of people or animals that are put on one's hand
- quarry leases** - rights to dig and sell stones
- rape** - being forced into sex by violence
- ration cards** - special documents that say someone can get free or low-cost food
- recommendations** - what should be done
- receipt** - a signed paper proving that money was paid
- recycling** - using materials again, like using old paper to make new paper
- regularly** - every day, or for the usually expected times
- rehabilitation** - a long process that helps a former slave recover some psychological balance, learn needed skills, and become able to live in freedom
- reintegration** - to settle and start life again in a normal community
- relate to** - connect with
- relationship** - connection between two people, usually a man and a woman
- relaxation** - making one's body less tense, more at ease and comfortable
- repatriation** - being sent to one's home area or country
Forced repatriation is being sent without agreeing to go
- repetitive motion injuries** - harm from doing the same action again and again
- resettle** - to make a home again in the old place, or a new one
- residence permit** - document that officially permits a person to live somewhere
- resident** - living in a place
- respectful** - showing respect, appropriate for the age of the person one is talking with
- respond** - to react, to act in answer to a situation
- retraumatize** - to harm a client by forcing her or him to talk about and live through the pain, shame and fear of past experiences again
- role plays** - short exercises in which people act like someone else
- routines** - what happens the same time every day
- saturated market** - too many people offering a service or product, not enough buyers for them all
- schooling** - going to school, learning
- self-confidence** - trusting oneself, feeling able to speak and act and do things well
- self-determination** - making one's own decisions and acting on them
- self-harm** - hurting himself or herself in some way
- self-help group** - a group formed by workers in debt bondage to demand their rights and to help each other
- sense of self** - knowing oneself as a person
- sexual** - about or having to do with sex
- shame** - a feeling of having done something terrible and being blamed by oneself and others
- s/he** - he or she
- skills** - knowing how to do things
- slaveholders** - the people who use slaves
- slavery** - forced economic exploitation taking many forms, including debt bondage, the worst forms of child labor including in the military, forced labor in farming, mining, and factories, service in homes, sexual exploitation and forced marriages
- slaves** - people who are forced to work without pay (or getting only enough to survive) for someone else's economic profit, and completely controlled by violence or the threat of violence
- sock** - foot covering
- staff members** - people who work in a program at any level. As used in this manual, a center's *staff* includes the director and leaders, the cooks and cleaners, and everyone in between.

- STD** - sexually transmitted disease, disease which goes from person to person through sex
- stigmatization** - the idea that a whole group of people are bad in some way and should be blamed, abused or treated badly
- supervisor** - person responsible for the quality of one's work
- supportive supervision** - encouraging and helpful discussion with a superior who says what the staff member is doing well and privately gives helpful advice
- sustainable** - going on for a long time, using local resources, usually through years
A sustainable livelihood means that a person will be able to earn enough to live on for years
- testify** - make a statement in court and declare that it is completely true
- therapy** - help given by a mental health professional
- therapist** - a specially trained mental health professional
- timetable** - list of what will happen when
- toilets** - places where human waste is passed out of the body
- tourists** - visitors to a country
- traditions** - old, respected customs and beliefs
 Practices that come from these customs and beliefs are *traditional* practices.
- trafficked** - taken away from where they belong, bought and sold, and kept in slavery
- trafficking** - trade in slaves, recruiting, transporting, selling, buying and keeping of people so as to exploit them (usually for their labor or for sex) through using power and threats, violence, tricks and lies to control them
- trauma** - a psychological condition coming from terrible experiences that people see as a threat to their life: violence, kidnapping, severe hunger, war, serious abuse as a child, sexual abuse such as rape, serious injuries, events like big storms and accidents, and being enslaved
- traumatized** - describes someone who has experienced severe trauma
- treated bed nets** - night protection against flying insects that cause disease
- useful** - helpful when it is used
- vagrants** - people who always move from town to town and have no settled place
- verbal abuse** - strong words or comments that cause fear, shame and anger
- victim** - someone who has suffered violence or enslavement
- vigilance** - watching what happens with close attention
- vulnerable** - at high risk of harm
- workshop** - group meeting where trained leaders help people to learn something together, usually over several days
- worst forms of child labor** - enslavement, prostitution, being a soldier, criminal activities, and any work that is dangerous to the child's safety, health or moral development
- yoga** - a system of many different exercises to balance the body and mind
- youths** - children 14 through 17 years old