

**MYANMAR NATIONAL PRACTITIONERS' WORKSHOP ON REINTEGRATION
ASSISTANCE TO VICTIMS OF TRAFFICKING**

**14-16 OCTOBER 2010
NAY PYI TAW, MYANMAR**

FINAL RECOMMENDATIONS

**STAGE 1: PRE-RETURN & INTERIM CARE FACTORS IMPACTING ON SUCCESSFUL
REINTEGRATION**

- 1.1 **Cooperate with Thailand to ensure that victims of trafficking are repatriated to Myanmar within 6 months** of admission to Thai shelters.
- 1.2 **Support Myanmar victims in Thai shelter to have regular communication with their family members.** For example, by exchanging letters during quarterly Case Worker Visits of DSW and NGO staff to Thai shelters, or assisting victims in Thai shelters to make telephone calls their family members living in Thailand.
- 1.3 **Discuss with Thailand's DSDW the most useful kind of vocational training** to offer to Myanmar victims in Thai shelters. Vocational training for Myanmar victims provided in Thailand should be based on a technical assessment of work and business opportunities that are most likely to be available to victims in their source communities in Myanmar.
- 1.4 **Discuss with China's anti-trafficking officials the possible referral of Myanmar victims of trafficking identified in China to a central transit shelter in China as a last step before Myanmar victims are repatriated** at Ruili-Muse. The location for the shelter could be in Kunming, Yunnan province and could be either government- or NGO-managed. The shelter could have the following functions: (1) To provide Myanmar-Chinese interpretation capacity to enable victims to be screened according to the definition of trafficking in China's national law, (2) To conduct trafficking-specific short-term needs assessment and to offer short-term care to Myanmar victims of trafficking while they are waiting to be repatriated, (3) To develop *basic* case files on Myanmar victims of trafficking to be exchanged with Myanmar officials during repatriation, and (4) To be the central location from which repatriations from China to Myanmar could be planned in advance (in a similar way to which Myanmar and Thailand cooperate to plan returns in advance through their G-to-G repatriation channel). A central shelter for victims of trafficking in Yunnan province could also serve victims from other neighbouring countries trafficked to China, specifically from Vietnam and Laos. Victim protection agencies and organisations in both Myanmar and China could discuss ways to support a functional transit shelter for Myanmar and other victims in Yunnan province. The G-to-G repatriation channel between Myanmar and China would also be improved if Chinese social workers based at a central transit shelter in Yunnan province could hold annual case management meetings with their Myanmar counterparts to discuss bilateral victim protection issues, similar to the current Myanmar-Thai "Case Management Meetings". Such annual meeting between the respective countries' social workers could be held back-to-back or concurrently with annual Myanmar-China MOU review meetings.

- 1.5 **Cooperate with Thailand's Department for Social Development and Welfare to update the Victim Case Form** currently in use by Thailand. Because Thailand is the destination country for several source countries, Thailand could revise the current Victim Case Form in joint consultation (by means of a regional workshop, for example) with all source countries for victims trafficked to Thailand, including Myanmar, Vietnam, Cambodia and Laos. Among other improvements, revisions to the Thai case form should: (i) aim to make the case form shorter; a shorter case form than the existing 20-page form could be easier to consistently complete in full, and (ii) be revised to ensure that more background information on each victim's family situation and background is recorded in the victim case form, to allow for more effective and efficient family tracing and assessment in Myanmar.
- 1.6 **Cooperate with Thailand's Department for Social Development and Welfare to increase the number of completed full-length victim case files** that are shared with Myanmar (using a revised and shorter victim case form – see 1.5 above). Priority should be given to completing full-length case forms for victims with special needs ("Special Cases"), including information on interim care received. Discussions on how best to increase the number of completed full-length cases files can take place during bilateral Case Management Meetings between Myanmar and Thailand. Completed victims case files could initially be scanned and sent electronically to Myanmar as soon as possible after a victim's admission to a Thai shelter, to enable more effective family assessment. Later, the original version of each case file could be shared with Myanmar DSW officials at the border at the same time that the victim is repatriated.
- 1.7 **Operationalise "continuum of care" by cooperating with Thailand's Department for Social Development and Welfare for early identification of victims with special needs** ("Special Cases"). Include cooperation on Special Cases in bilateral Standard Operating Procedures on Repatriation, Reintegration and Case Management being developed between Myanmar and Thailand.
- 1.8 **Organise a national technical discussion on approaches to family tracing and assessment in Myanmar.** This discussion should include: (1) Identifying and classifying specific risk factors in the Myanmar context that would immediately result in a negative family assessment, (2) Developing unique risk indicators for child and adult victims, (3) Expanding the list of risk factors other than those that are family-related (community-level risk factors), and (4) Making a clear distinction between "family tracing" and "family assessment". Based on the outcome of the workshop, develop national guidelines on family tracing and assessment and a national family tracing and assessment form (see Article IV "Assessment and Best-Interest Determination of (Re)integration", clause 4 of Regional *Guiding Principles*). Different questions in the national family assessment form should be linked to each specific risk, and users of the form should be able to rank all potential risks to the returnee (i.e. no risk, low risk, medium risk, and high risk).
- 1.9 **Provide training to DSW shelter staff**, community members of MAAF and ATTF officers on the national guidelines on family tracing and assessment.
- 1.10 **From the time of the family tracing and assessment, keep family members informed** of what is happening to their child or family members before they are returned to the home community. When the victim is ready to be returned to the home community, conduct preparatory visits to family members to prepare them for the return and reception of the victim, to support successful family reunification (in response to the input from practitioners that family members sometimes refuse to accept victims back into their families and households). Cooperate with Thailand's

Department for Social Development and Welfare to ensure that there is early notification of victims that have escaped, to enable family members to be informed as soon as possible.

- 1.11 **Develop a video for Myanmar victims in Thai shelters** to show to them the return process to Myanmar, as well as to inform them about what they can expect during their short stay in a DSW transit shelter in Muse, Mandalay, Yangon or Mawlamyine. A similar video could be developed for returnees from China and shown to them in Muse or at a transit shelters(s) in China.
- 1.12 **Increase the number of interpreters** available to work with Myanmar victims of trafficking in Thai shelters.

STAGE 2: VICTIM RECEPTION IN MYANMAR & SHORT-TERM SHELTER CARE

- 2.1 **Continue the good practice of giving victims the option staying temporarily in the DSW shelters** in Mawlamyine, Mandalay or Yangon. The reason for an extended temporary stay at a DSW shelter may be to give victims access to health care and medical facilities in these cities, or any other reason connected to victims' recovery.
- 2.2 **Develop a national guidance note on cases involving victims (i) who do not want to be returned to their families/home communities following repatriation,** and (ii) who cannot be returned home because family assessment is negative or because their families are not willing to receive them. Separate guidance should be developed for adult and child cases. Consideration should also be given to (i) the need to fully inform adult victims of all options and risks before they make a decision to leave the shelter, and (ii) the security risks of allowing young adult victims to leave a shelter unaccompanied. The final guidance should be a balance between the specific Myanmar context and culture on one hand, and the principle of victims' right to "self-determination" (i.e. the right to make their own decisions) on the other.
- 2.3 **Develop and provide training and on-the-job mentoring to DSW shelter staff** on the following topics: (1) Communicating with victims and short-term needs assessment, (2) case management, (3) shelter management, (4) psychosocial support, (5) health & personal hygiene for victims, (6) relevant laws relating to victims and trafficking, and (7) collection of basic victim statistics. Identify and train focal points among DSW staff for different services and types of support to victims. There should be a strong focus on creating skills among DSW shelter staff for communication with victims, and building trust with (and gaining the confidence of) victims.
- 2.4 **Myanmar and China should jointly address the issue of improved "safe and timely repatriation of victims" at their next bilateral annual meeting.** As per Article 6 of their bilateral MOU signed in November 2009, the two countries could (i) consider how to "simplify the repatriation proceedings [and] smooth repatriation channels through common procedures" and (ii) how to notify each other "in advance" before repatriation to exchange victim names (to enable Myanmar to conduct family tracing and assessment prior to victims' return to Myanmar). These and other aspects of cooperation could be included in a document detailing standard operating procedures on the repatriation of victims from China to Myanmar.
- 2.5 **Training for victims at DSW shelters should focus on life skills, development of life plans, and knowledge of basic health.** The time period at the shelter is too short for victims to gain any usable vocational skills.

- 2.6 **Review the contents of the UNICEF victim kit** to make it as appropriate as possible to *different victims'* needs. This should take into consideration child versus adult victims, boys versus girls, and victims returned from China versus those returned from Thailand.
- 2.7 **Consider ways in which NGOs could offer additional activities and services to victims staying at DSW transit shelters.** The Department of Social Welfare already has an existing programme for victims at shelters. For purposes of strengthening the programme, NGO staff could offer individualised services, for example, individual counselling for select victims before they return home. This discussion could also involve considering how to practically give victims the right to decline a service(s) at a DSW shelter, according to article 8.2 of the *National Guidelines on Repatriation/Return and Reintegration*.
- 2.8 **As good practice, prepare for family reunification by reviewing the results of family assessments with victims while they are staying at DSW transit shelters.** This is to identify potential family problems upon return, and to ensure that it is safe for victims to be returned home. This practice is especially necessary in cases where a victim is repatriated after a significant amount of time has elapsed since the original family assessment was carried out.
- 2.9 **Strengthen active coordination among state/region officials during victims' shelter stay.** For this purpose, develop terms of reference for "R&R Operational Meetings" and hold such meetings to be held regularly in Mandalay, Yangon and Mawlamyine. The aim of such meetings would be to help victim protection role players at 3 key locations to coordinate among themselves for the transit shelter support, and planning family reunification and reintegration of victims of trafficking recently repatriated by G-to-G channels. Participants of "R&R Operational Meetings" should include state- and region-level officials and staff from the following government and non-government entities: Department of Social Welfare, ATTF, General Administration Department, Department of Immigration, Department of Health, MAAF, UN Agencies and NGOs involved in direct assistance to victims.
- 2.10 Concerning psychological and social needs assessment for all repatriated victims during their stay at DSW shelters:
- 2.10.1 **Develop guidelines for DSW shelter staff on needs assessment interviews with victims of trafficking on their experiences of trafficking and exploitation, for the purpose of planning direct assistance to victims.** These interview guidelines should include a method for basic needs assessment, to enable shelter staff to determine and respond to victims' immediate needs before they return to the home village. The process to develop interview guidelines should draw upon existing guidelines on interviewing techniques. Provide training on the use of the social work interview guidelines and needs assessment to DSW, MAAF and NGO staff.
- 2.10.2 **Begin to use guidelines on needs assessment interviews at DSW shelters.** Needs assessment at the DSW shelters in Muse, Mandalay, Mawlamyine and Yangon should be prioritised to identify any victims with special needs "Special Cases" returned from China, Thailand, other GMS countries, or other parts of the world.
- 2.11 Concerning medical needs assessment for all repatriated victims during their stay at a DSW transit shelters:

- 2.11.1 **Develop a shelter-level guidelines document for medical assessments.** The document should include guidance on (i) informing all victims about and referring them for a medical assessment during their stay at DSW transit shelters, and (ii) offering health care and/or medical treatment to victims before to their return to the home village. This protocol should be drafted by a team consisting of victim protection role players and medical officers.
- 2.11.2 **Begin to give information to all repatriated victims about receiving a voluntary medical assessment.** Offer a medical assessment to all adult victims who voluntary choose it. Conduct a medical assessment of all repatriated child victims of trafficking, in a child-friendly way and in line with the above-mentioned protocol on health assessment.
- 2.12 **Develop a spreadsheet to enable DSW shelter staff to keep track of basic data on all victims of trafficking repatriated through Government-to-Government channels and assisted at DSW shelters.** Data can include: Age, sex, home township, date of recruitment, destination country, type of trafficking, date of return, and referral information, among other information. DSW shelter staff should update and manage this spreadsheet, and national statistics should be collated by DSW at the national level. For this purpose, a one-page case form should be developed and completed by shelter staff for each victim. Statistics on the total number of G-to-G repatriations should be sent to the Central Body by the Department of Social Welfare at the end of each year.
- 2.13 **Take necessary action in applying Chapter VIII, Article 22 (a) of the Anti-Trafficking in Persons Law to “establish a fund with money supported by the state and money donated from local and foreign sources” to support the rehabilitation and reintegration of trafficked victims.**

STAGE 3: REINTEGRATION SUPPORT AT THE COMMUNITY LEVEL:

- 3.1 **When assisting victims to return to their communities, conduct returns in a manner that is discreet and low-profile, and which does not draw unwanted and unnecessary attention to the victim.**
- 3.2 **Continue to provide training to existing and new case workers on approaches to supporting the psychosocial recovery well-being of victims.** Draw on existing psychosocial training materials and tools, and consider developing new materials, tools and activities for individuals as well as groups of victims.
- 3.3 **Consider case work approaches in which psychosocial support and income-generation assistance could complement one another.** This is based on feedback from practitioners that one of the most significant psychological concerns for returned victims is their future livelihood. In addition, income generation (IG) interventions for young adult victims should be done in consultation with the victim’s family members, without whose support it is difficult to succeed in IG assistance.
- 3.4 **Advocate among and develop cooperation with state and region Department of Health officials for improved provision of health care and medical services to victims of trafficking after their return to their home villages.** Advocacy should also include township medical officers concerned, INGOs involved in health service provision, and private health practitioners. Advocacy efforts should be prioritised in states, regions and townships to which large numbers of victims are returning.

- 3.5 **Develop a comprehensive national guidance note for managing cases during the reintegration period that involve victims who have a sexually-transmitted disease(s) (STD), including persons who are HIV-positive.** The guidance note should contain a list of all hospitals and projects where Anti-Retroviral Treatment is available in Myanmar.
- 3.6 **Continue the good practice of re-visiting victims whose case files have been closed.** At least one visit to the victim and his/her family one year after the closure of a case file should be considered as the minimum. Allow victims to be re-admitted into a reintegration project/activity in circumstances where victims have suffered setbacks in or failure of their reintegration.
- 3.7 **Conduct township-level mapping of UN agencies and NGOs** implementing community-level, non trafficking-specific projects to which victims could be referred for livelihoods support, health services and other forms of assistance. The focus
- 3.8 **Regularly organise experience-sharing meetings between reintegration practitioners in select States and Regions** (on a bi-annual basis, for example). The purpose would be to share experiences of case work and case management, and to receive training on new approaches. Experience-sharing should include all persons involved in working directly with victims, including DSW staff, local ATTF officers, and NGO staff.
- 3.9 **Continue the good practice of exposing DSW shelter staff to reintegration case work in the community** by creating opportunities for them to occasionally accompany NGO staff on joint case work visits to the field. The aim is to create mutual understanding between DSW shelter staff and NGOs of the practices and challenges of conducting community-level reintegration work. To maintain discretion while dealing with victims, just one DSW staff member would accompany one NGO staff member.
- 3.10 **Review and make adaptations to the case management approach among reintegration service providers** to consider how best to give optimal time and resources to Special Cases. This could involve: (1) Adjusting case worker schedules and project resources when Special Cases come up, (2) Sharing experiences between reintegration case workers on how to manage different categories of Special Cases, and (3) Establishing a monitoring & evaluation approach for work done with Special Needs Cases.

4. SPECIAL ISSUES CONCERNING REINTEGRATION.

Extending geographic coverage of reintegration services in Myanmar

- 4.1 **At the country-wide level, expand the number of reintegration services providers offering assistance and services.** This can be done by developing the capacity of community-level MAAF members, and more local NGOs and Community-Based Organisations (CBOs) in the provision of reintegration assistance. New service providers should focus on priority townships where the largest number of victims come from but where no reintegration services are currently available. Presently, “hot-spot” townships are in Northern Shan state, Yangon and Bago divisions, and Mon and Kayin states. These “hot-spots” may change over time and should be analysed annually, based on national victim statistics (see “Collection of victim statistics” below). The current priority is to direct a larger share of reintegration resources to home townships of victims trafficked to China.

- 4.2 **At the state and region levels, be more flexible in designing reintegration projects and activities, to ensure that each reintegration service provider is able to cover a larger geographic area** in any state or region. For example, “roving case workers” can be based in one township but also extend their reintegration support to 3 or 4 neighbouring townships.
- 4.3 **Strengthen the DSW role in offering reintegration support to returnees**, with the aim of increasing numbers of victims returning to townships in close proximity to DSW state and region offices are able to benefit from this assistance.
- 4.4 **Continue the good practice of formally assigning as many victims as possible to existing reintegration service providers working in different geographic areas.** This can be done during regular “R&R Operational Meetings”. **The numbers of victims not able to be assigned to any reintegration service provider should be recorded** in DSW statistics of all G-to-G repatriations.
- 4.5 **Consider strategies to offer a minimum level of reintegration assistance** for victims who live in areas **where there are no reintegration service providers**.
- 4.5.1 **In cases involving child victims**, a “minimum model” of reintegration assistance could involve (i) accompanying the child to the home village, (ii) supporting family reunification, and (iii) immediately conducting an on-site needs assessment interview with parents/care givers. Based on the needs assessment, a case worker could immediately purchase items to meet material needs of the child victims and his/her family. No subsequent follow-up visits would be offered.
- 4.5.2 **In cases involving adult victims**, a “minimum model” of reintegration assistance could involve (i) cash support for transportation home and (ii) a reintegration grant given as cash-in-hand. No subsequent follow-up visits would be offered.

Offering the option of alternative care and integration

- 4.6 **Victim protection actors should pay special attention to cases where family assessments for returning victims are negative.** Such cases could be discussed among participants of “R&R Operational Meetings” in Mawlamyine, Mandalay or Yangon and alternative options discussed. Negative family assessments should be recorded in the G-to-G statistics maintained by DSW (see 2.10 above) and NGO service providers.

Victim security and victim participation in legal proceedings

- 4.7 **Work towards closer cooperation between law enforcement (ATU and local ATTF units), the Department of Social Welfare and victim support agencies** during victim’s participation in legal proceedings.

Collection of victim statistics & research on reintegration

- 4.8 **Agree on a format for a single national spreadsheet of basic victim statistics**, managed at a national level by the Central Body. The purpose of centralised data collection would be to have complete annual information on the profile of victims and what township they come from as an indicator of what areas of the country most need to be targeted with reintegration services. Data fields in a national spreadsheet could

include: age and sex of the victim, source village/township/state/region, month/year of recruitment, month/year of repatriation, and purpose of trafficking (forced labour, forced marriage, etc.). The spreadsheet should also disaggregate statistics according to the following 4 types of victim: (1) Cross-border victim repatriated through the G-to-G system, (2) Internal victim of trafficking, and (3) Self-returned cross-border or internal victim of trafficking that may have been identified by law enforcement or an NGO, in a border area or at community level. ATU and DSW would be primary sources of statistics. The proposed "spreadsheet" would not replace existing databases managed by the Central Body for the Suppression of Trafficking in Persons (CBTIP), UN agencies and NGOs that contain more detailed information on victims and cases.

Monitoring & Evaluation and Research on Reintegration

- 4.9 **Integrate basic M&E actions into all reintegration programming** in Myanmar, both governmental and non-governmental.
- 4.10 **In consultation with Myanmar's Central Body (as well as the Department of Social Welfare and NGOs), develop methodologies for and implement assessments** on all stages of victim protection, including reintegration. The aim of assessments would be to better understanding the experiences of victims of trafficking and their needs, as a basis for improving reintegration services in Myanmar.