

THE TRAUMA-INFORMED CODE OF CONDUCT

For all Professionals working with Survivors of Human Trafficking and Slavery

By Rachel Witkin and Dr Katy Robjant







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Citation: The Trauma-Informed Code of Conduct for all Professionals working with Survivors of Human Trafficking and Slavery, by Rachel Witkin and Dr. Katy Robjant, Helen Bamber Foundation 2018.

PREFACE FROM THE AUTHORS

Trauma informed methods of working are based upon an understanding of the harmful effects of traumatic experiences, together with fundamental principles of compassion and respect.

We would have found the TiCC very useful when we first started working with survivors of human rights violations years ago. Since that time survivors have taught us so much about what they need and how best to work with them. We are still learning from them in our daily work now. The TiCC is a sharing of that experience.

Professionals who encounter survivors in the course of their work are often aware of the huge trauma that they have suffered, and may worry about how to avoid increasing their distress. Many professionals fear that they could do or say the wrong thing, and that this could make things worse or re-traumatise the survivor. Sometimes, professionals can also become confused about why routine tasks they perform in their daily work seem to be particularly challenging with survivors of trafficking. We realised that a trauma informed code of conduct was needed, to de-mystify trauma and to provide simple best practice guidelines for professionals in any field of discipline who are working with survivors. We explain how to counter-act the trauma processes which might otherwise complicate this work.

Ensuring a calm, consistency of approach and 'creating the illusion of time' are simple procedures that even highly experienced professionals can benefit from, especially in the course of hectic schedules and while working under pressure. It is equally important to be able to take care of yourself in your work and stay safe. Having the TiCC should mean that professionals do not have to draw solely and repeatedly upon their own resources of emotional intelligence and intuition, but can remember tips and guidance for using simple techniques in all contexts, including the difficult process of obtaining disclosure for legal procedures.

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THE TRAUMA INFORMED CODE OF CONDUCT

Trauma-informed methods of working are based upon an understanding of the harmful effects of traumatic experiences together with fundamental principles of compassion and respect. Any form of professional communication with a person who has suffered human trafficking should be treated as an opportunity to help them to progress towards a long-term situation of safety, stability and well-being.

The Trauma-Informed Code of Conduct (TiCC) is designed to enable professionals in all fields of discipline to:

- Establish and maintain a mutual relationship of trust with survivors in any working context or environment
- Impart a consistent sense of calm, security and safety throughout the course of their work.
- Increase the confidence of survivors and minimise the risks of causing distress and re-traumatisation.
- Remain safe and well in the course of their work, avoiding secondary traumatisation and professional 'burnout'

The TiCC is intended for use only within the strict parameters of each professional's allocated role and remit. It is equally applicable for people who have been trafficked domestically (within the borders of one country) and those who have been trafficked across international borders. Its methods are designed to be adaptable to all environments and situations in which professionals may encounter survivors, bearing in mind that specialist services for survivors vary widely across international regions. In emergency and conflict settings it may be more difficult to apply every principle, but the ethos of the guidance can still be maintained.

¹ Clinical supervision can help to prevent professional burnout. This should be sought by all organisations and professionals who work with survivors of human rights violations.



1. Understanding Survivors' Presentation

Many survivors experience psychological distress as a result of traumatic experiences. Some may develop mental health problems, including Post-Traumatic Stress Disorder (PTSD), Complex PTSD, anxiety and depression. The presence or absence of mental health conditions should not be assumed: wherever possible, survivors should have access to a comprehensive mental health assessment and to a programme of specialist therapeutic care provided by an experienced mental health professional.

It is useful to know that the mental health problems of survivors are rarely immediately visible or obvious to others. People who have been trafficked and enslaved become used to minimising, concealing or denying their injuries and suffering in order to survive.

Survivors may feel nervous, afraid and confused at a first meeting. Some may suffer signs and symptoms of distress, for example panic attacks or shaking, while others may be withdrawn or seem 'numb'. In some cases, survivors may appear to be detached, disinterested, or sometimes even hostile.

It is helpful for all professionals to be able to identify and understand presentations which indicate **'dissociation'**.

Dissociation is caused by trauma. It is a temporary, often recurring detachment of a person's mind from their emotional state and body which can manifest in various ways. For example, a person may stare into space (for seconds, minutes or even hours), they may fail to respond to environmental cues or behave as if they are re-experiencing traumatic events from their past.

Dissociation stems from the automatic biological reaction that can occur during traumatic events, when a person cannot escape from danger. Once they are out of danger, dissociation can be triggered by their memories, or parts of their memories which are associated with the trauma. Sometimes they may not be aware of the trigger. Many survivors experience feelings of shame and humiliation, which can prevent them from feeling able to express themselves and to assert their needs with others. Those who have post-traumatic stress disorder (PTSD) may go to great lengths to avoid speaking about traumatic aspects of their history because they fear that their symptoms (for example flashbacks, panic attacks, psychological distress and physiological hyperarousal) may be triggered and become overwhelming for them, leading to loss of control.

In many cases survivors will not display any signs of fear or confusion and will appear to be fine and able to manage. Professionals should proceed sensitively and simply observe each person's presentation and manner, providing them with appropriate physical space, and ensuring that they are as comfortable as possible. In most cases the presentation of survivors will change and adapt over time as a working relationship of trust is established, and professionals will become better placed to understand their individual needs.



2. Focusing on Current and Future Safety: Establishing a Mutual Relationship of Trust

Securing the long-term safety of survivors relies upon professionals' ability to establish a mutual, working relationship of trust. This provides survivors with the vital gateway to a full and informed understanding of their legal rights and entitlements, as well as the responsibilities and duties of organisations and systems that are designed to help them.

Establishing a relationship of trust with survivors can often be challenging. This is the case even within the secure and private environment of an office or therapy room, let alone in other more pressured contexts in which professionals and survivors meet and need to communicate. However, with the use of simple techniques, it can be achieved in any environment, whether offline and in person, or conducted online over phone or visual media.

The following procedures are designed to help professionals to establish a mutual relationship of trust as swiftly as possible, bearing in mind that in an ideal situation significant time is required for trust to be fully developed:

There is always a risk that continuing contact with survivors may be lost and their safety jeopardised. Demonstrate interest in survivors' well-being from the first point of contact and deliver a calm, kind, consistent approach at all times, and in all environments. This applies regardless of whether time and capacity are limited: it is strengthened by effective teamwork in which all colleagues extend the same high level of courtesy and consistency of approach. It provides a model of the professional response that survivors of trafficking can reliably expect, and therefore it helps to maintain trust.

- If survivors' initial impression is positive, they will be far more likely to remain in contact. Ensure that the intention to communicate clearly, and to help and support survivors in a practical way is evident from the outset, and that this is maintained throughout the professional relationship. Avoid providing a lot of complex information at once, and proceed at a pace which is appropriate for each individual person, checking whether they have understood, and if they have any questions.
- Inform survivors of the name of the lead professional, and the name and contact details of the organisation or service. Check that they have understood, and that they have a written record. Provide advance notice of the times and dates for meetings and appointments and ensure that survivors know whom they can contact when the lead professional is not available. Practicing pronunciation of names can be a helpful way to ensure that survivors have memorised contact details in case of any crisis further on.
- It is common for survivors to be confused about the identity of professionals who are working with them. In any situation where a person is providing information which could affect their legal rights, it is essential that they are able to understand this, and that they have access to specialist legal advice. Take time to explain if the organisation or service is connected to the authorities (for example, police, government agencies, immigration), or if it is not (for example, a charity or Non-Governmental Organisation (NGO)).
- All current safety risks should be assessed as quickly as possible for each person and then monitored on an ongoing basis. There may be ongoing risk of harm and reprisals from traffickers or networks against survivors or their family members. However, there are many other risks to consider which may relate to physical health, mental health, safeguarding issues, legal matters, housing & welfare, and current relationships.

The concepts of 'trafficking', 'exploitation' and 'slavery' can be confusing or have little meaning for some survivors, however the term 'safety' is more widely understood, and it translates well into other languages. While a person may not comprehend that they have been 'trafficked', they will be aware of having suffered violence or abuse or feeling afraid. Therefore questions such as 'do you feel safe? 'Is your housing safe?' And 'is [this or that person] a safe person for you?' can be quickly absorbed and understood, as well as reassurances such as 'You are safe here, now.' (see 7.Referring Back to the 'Here and Now' to Instill Calm)

It may become known to professionals that survivors are living or working in risky or dangerous environments, or that they are involved in controlling, exploitative or harmful relationships. In all cases where there is an immediate risk of harm, police should be contacted, and safeguarding procedures followed. (see online working section).

- In other such cases where immediate safeguarding procedures do not apply, or the full circumstances are not yet known, it is important to work pro-actively to limit any harm as much as is possible without risking alienation or loss of contact. Ensure that each person is provided with the necessary time, space and professional support to make informed decisions about their current needs and options. The best and safest way for survivors to extricate themselves from harmful situations or relationships is by personal choice.
- Risk factors are highly individual, so it should never be assumed that a person is simply 'safe'. Forward planning, in collaboration with survivors, is essential for their ongoing safety. Potential safety risks should be assessed on a regular basis, including for survivors who are considered to currently have a high level of safety and support. This is often a temporary situation, which can leave survivors in a position of increased vulnerability as soon as they are without it.

Build an effective 'team' around any person who is not currently safe. Wherever it is helpful, and proceeding only with survivors' informed consent, initiate contact for them with other known and supportive professionals who can offer additional support, assistance and protection.



3. Communicating a Sense of Safety

Professionals can extend a sense of calm and security for survivors in any context or environment by making it integral to their own conduct, manner and approach.

- Demonstrate a pro-active interest in meeting survivors' immediate health and practical needs. In cases where it is possible, obtain any available information about survivors' disabilities or health needs prior to meeting with them for the first time. It is important to ensure that they feel able to access a building or meeting without difficulty and are provided with help to do so if necessary. Some survivors may be deterred from engaging with a service at all if the act of doing so feels overwhelming, intimidating or unmanageable.
- Remember that people who have been trafficked and exploited often become used to minimising, concealing or denying injury. Remain observant as to whether each person is able to sit and converse comfortably. They should know from the outset that they can finish the meeting to continue it on another day if they are not well or feel too tired to complete it.
- Care for each person can be quickly communicated through concern for their physical comfort, acknowledgement of any pain or discomfort they may be currently experiencing and the desire to accommodate their related needs. Ensure that each person knows how to access the bathroom and they are offered access to fresh water. It is important that survivors are as physically comfortable as possible throughout any meeting. Consider the room temperature and whether they are able to sit for long periods or require frequent breaks and intervals.

Effective communication skills require a friendly, non-judgemental attitude, together with awareness of, and respect for the culture, religion and gender-identity of each person. Survivors will not generally expect professionals to know how to conduct themselves in a manner that is specifically appropriate to their culture, however they will quickly understand if they are being shown kindness and respect, that their freedom of space and movement is observed, and that work with them is being conducted within the parameters of secure, professional boundaries.

All people require respect for their individual integrity and privacy. This is communicated by listening and responding sensitively to confidential and personal information, ensuring that all environments are clean and hygienic and that any requirements for physical privacy are met (for example for changing clothes, breast-feeding, using the bathroom, or praying). Professionals should also demonstrate interest in the significant challenges that survivors often face with regard to maintaining personal integrity and privacy in their daily lives.

Encourage individual preferences: survivors should be supported to feel as confident as possible in making choices and asserting their needs, and these should always be foremost in the minds of professionals. Each decision made is a positive step towards (re-)building agency and autonomy and therefore towards re-building their lives and remaining safe. People who have lost their capacity for self-assertion through experiences of trafficking can find it extremely challenging to make decisions and express preferences. Therefore, encouraging them to make minor choices can be gradually increased over time. This can be initiated through kind enquiry about survivors' practical needs (for example in relation to a meeting and any professional tasks that are undertaken for them), and by endeavouring to accommodate their preferences wherever possible. If individual preferences cannot be met, providing a simple explanation of the reason demonstrates to survivors that their choices and decisions are valued and respected.



4. Vetting Other People Who Accompany Survivors

In order to understand any potential risks that survivors may face, it is important to observe, and carefully enquire about any current and arising relationships.

In any case in which a person is clearly being controlled or abused by another person who is accompanying them, the police should be contacted and all safeguarding procedures followed.

If professionals suspect that any other kind of relationship or situation may be potentially harmful, it is important not to act in a way that could be perceived by survivors as intrusive or judgmental. The best and safest way for survivors to extricate themselves from harmful situations or relationships is by their own personal choice. Each person should be provided with confidential time, space and professional support to discuss any concerns they wish to and make informed decisions about their current needs and options. Ongoing support of this kind helps to ensure that contact is maintained. It can be helpful to engage other supportive professionals and community networks in their local area to ensure that they have access to professional contact and safe places to go to near their home.

Survivors may have friends, associates and family members who are genuinely close to them and supportive of them. However, it is essential to be aware that *any* accompanying person, including family members, may be complicit in their trafficking. In such cases survivors may, or may not have fully realised this. Some survivors are forced or manipulated into pretending that traffickers or other perpetrators who accompany them are acting in their best interests. It is also common for people who have suffered trafficking to be particularly vulnerable to feeling dependent and powerless within controlling or abusive relationships. The true nature of such relationships may not be immediately apparent to observers. In some cases, relationships which have appeared to begin well for survivors can deteriorate and become exploitative or harmful over time.

- There is no harm in extending a normal level of welcome and respect towards accompanying family members, friends and associates. A positive response can impart confidence and reassurance to survivors as well as other people who are genuinely supporting them. It also avoids arousing the suspicions of those people who are perpetrators. Therefore, in all cases an outwardly friendly approach towards people who accompany survivors can help to keep them safe and prevent loss of future contact.
- Every person who is present at a meeting with a survivor should be there in a professional capacity and vetted to ensure safety and confidentiality. As a general rule, persons who are accompanying the survivor as associates, family members or friends, should not accompany them into a meeting. It is best to explain that each person needs to be seen alone and that people who are accompanying them can wait for them or return to meet them later.

In some cases survivors may request that a particular person be permitted to accompany them into a meeting because they feel unable to proceed without them. For example they may feel too frightened or intimidated to enter the room alone, or they may require support due to health issues, disabilities or the need for help with a baby or young infant. In such cases, it may be necessary to permit an accompanying person to be present in the room at the beginning of a meeting. However, no aspect of survivors' personal or confidential information (including the survivor's correct name and contact details) should be discussed while others are present. Rely upon light and friendly conversation which relates to the relationship (for example how their journey was today, where the companion lives, how they know each other) and observe the dynamics between them. The intention should always be to ensure that the survivor will feel safe enough, as soon as possible, either to continue the session on their own or to attend a further arranged appointment on their own. By the time any personal details are discussed, people who are accompanying a survivor should not be present in the room. The way in which this is managed depends upon each individual situation, but wherever possible, ensure that for future meetings, health, disability or childcare needs are taken care of in a safe and appropriate way.



5. Explaining Professionals' Identity, Role and Duties

Survivors should be informed of the name and job title of each person present at a meeting. They should be provided with a simple explanation of each professional's role before any work commences. Check that they understand the information they are being given, and that they feel welcome to ask questions about professionals' roles at any time.

- It is common for survivors to feel nervous with new people whom they have just met. In some cases, they may struggle at first to absorb the content of introductions. They may be feeling disoriented as a result of their traumatic experiences within trafficking or from further traumatic experiences that occurred afterwards, for example violence, exploitation, destitution, detention or imprisonment. It can be useful to check and repeat introductions further on, or towards the end of a first meeting.
- Professionals who are working entirely independently of the Government authorities should always state this clearly at the outset and ensure that it is fully understood. Some survivors will have had recent contact with a wide range of professionals and services and find it difficult to tell them apart (see 2. Focusing on Current and Future Safety: Establishing a Mutual Relationship of Trust).
- Explain the duty of client confidentiality at the outset of each meeting. This assists survivors to understand that the duty applies, and it is a helpful reminder for all other professionals present. This practice supports survivors to feel secure and confident enough to speak openly.

Choices made by survivors as to the gender of interpreters and other professionals who work with them, should be complied with. In some cases, survivors may feel uncomfortable or intimidated by people who are from their own culture or country of origin due to their previous traumatic experiences. Equally they may feel intimidated by people who are from a different cultural origin. It is best to work in line with survivors' preferences as much as possible, especially at the beginning of the professional relationship.

It is often the case that professionals who are from the same country of origin, including cultural mediators or survivor-leaders are highly experienced and skilled in working with survivors. They can be central to lending professional support, insight and understanding over time which helps survivors to gain confidence and independence and move forward with their lives.

In any case where doubt is either indicated or expressed about a reputable professional for any reason, sufficient time should be taken to hear survivors' concerns. This requires a separate conversation with survivors using open and honest dialogue. It may be helpful to explain the professionals' specific role, skills, and experience, their duties of conduct and confidentiality as well as how it is intended that they will work with the survivor. Any doubts and fears may be gradually overcome with time and careful explanation. However survivors should be able to make a decision, and to have that decision respected and complied with. (see 3. Communicating a Sense of Safety and <u>6. Working with Interpreters and Cultural Mediators</u>).



6. Working with Interpreters and Cultural Mediators

In consideration of the particular challenges that survivors face in providing an account of their history, it is important to take all practical steps to make communications as straightforward as possible. The option of using an interpreter or cultural mediator should always be offered if the language being used is not their first language. Even if survivors can speak a second language quite fluently, they can benefit greatly from being able to express themselves fully and freely in their first language. This removes the additional thinking processes and challenges which are required for speaking in detail in a second language about difficult and sensitive topics.

Ensure that interpreters and cultural mediators are experienced, vetted professionals who are not related to, or personally associated in any way with the survivor whom they are working with. They should have the appropriate professional qualifications and be police-checked and vetted. It is a good idea for professionals to speak to new interpreters or cultural mediators separately before a first meeting, to ensure that they are aware that they may hear about highly traumatic experiences in the course of their work. Check beforehand that they feel prepared to go ahead, and take a few minutes afterwards to ask them about any emotional impact of the session. This is reassuring and brings the meeting for all persons appropriately to a close.

Aim to meet survivors' individual preferences concerning interpreters (for example their gender) as efficiently and practically as possible. Some may be anxious about using an interpreter or cultural mediator at all and may prefer to speak in a second language rather than speak their native language with another person present. In such cases this preference should be respected and complied with, even if the survivor is not fully competent in the second language. The confidence to work with specific professionals may be gradually acquired as trust is built over time. Once a survivor has established a trusting relationship with a reputable professional, it is best to continue to work with them whenever possible. If a survivor does <u>not</u> want to work with a particular interpreter or cultural mediator again for any reason, a different one should be employed. If all possible steps have been taken and this change cannot be made, the reasons for this should be explained and survivors should be given the option of working without them being present.



7. Referring Back to the 'Here and Now' to Instil Calm

Discussion of traumatic histories or uncertain futures can be distressing and overwhelming for survivors, and this can exacerbate existing psychological problems and symptoms. However, such discussions may be necessary within professionals' specific role and remit. It is important that these are managed sensitively and conducted at a pace that survivors can manage.

If survivors become distressed or overwhelmed at any time in the course of a meeting, a helpful technique is to quickly return their focus to the *'here and now'*. This can have the effect of instilling calm and helping them to avoid experiencing dissociation or 're-living' traumatic experiences in the form of intrusive memories or flashbacks. (see 1. Understanding Survivors' Presentation)

- Keep simple objects nearby, (for example plants, paintings, photographs, pebbles, beads). These can assist a swift change in conversational direction because they provide a pleasant focus point for distraction and discussion.
- Return to discussion of current minor, practical issues and the planning of small actions that relate to survivors' current needs. This can be effective in helping them to regain the feeling that they are safe and in control.
- Movement can be extremely helpful for calming distress, ending dissociative episodes and changing focus. Survivors can be advised to move around in their chair, to stand up and walk around in the room, or to take a walk in the fresh air. Some may prefer to have some time alone in the room without professionals present in order to allow time and space for them to recover. However in all cases where a person is disoriented or confused it is important to remain nearby and on hand, as they should not be left alone.

Maintain a calm and steady voice which is slightly louder than normal. People who are on the verge of dissociating have reduced vision and hearing. In cases where a person has become extremely anxious and cannot seem to change to this focus, it can be helpful to tell them that they 'are safe here, right now', and 'everything is fine here'.

Ensure that any meeting is drawn to a close calmly, allowing enough time for *'here and now'* practice so that each person feels composed and can leave with the feeling that their overall experience was positive. 8



Working with Parents who are with Children and Babies

It is best to work with parents when their children are being looked after by another trusted and safe carer so that they are able to focus on the meeting and speak fully and openly. However, in many cases this may not be possible. In situations where children or babies have to be present at a meeting, the following procedures should be followed:

- Acknowledge the presence of children and babies in a positive, affirmative way: they should not be treated simply as 'add-ons' of their parents. Children also have rights and entitlements which should be considered, both alongside, and independently of, their parents.
- Mothers of babies should have access to a kettle, fresh drinking water and appropriate changing facilities. They should be able to change their child privately if no external room is available, and to breastfeed privately or while continuing the meeting, whichever they prefer.
- Ensure that the environment is as bright and 'friendly' for children as possible. It is helpful to provide distraction for children, for example books, toys, crayons and pens and little chairs or cushions to sit on. Any potentially traumatic visual or reading material should be kept out of sight. Avoid discussing traumatic experiences in front of children
- Child safeguarding procedures must be followed at all times. All babies and children should be kept safe and appropriately cared for. If a child is frightened, overly withdrawn or showing signs of neglect, or if there are any other concerning signs or indicators, child safeguarding and protection policies should be followed, and child experts consulted.

- Avoid making quick assumptions about the quality of survivors' parenting as there may be multiple factors which are beyond their control. For example, people who feel anxious, fearful or self-conscious may act differently with their children when they are in the presence of professionals whom they perceive to have authority. In such cases they may temporarily overlook a child's needs out of deference to the professional, which does not necessarily indicate a situation of general neglect. This initial response can change as a mutual, working relationship of trust becomes established. As above, qualified child specialists should be notified in all cases where significant concerns arise for the safety and well-being of children.
- Parents may feel pressured to reprimand or control a child who is simply being naturally active and boisterous. In such cases they will feel more comfortable if children's behaviour is positively acknowledged as normal, and children are encouraged to play and be distracted from the main work of the meeting. Professionals can lead by example in keeping their tone and manner light and friendly when speaking directly to the children, and ensuring they are kept busy. It is helpful to remember that an active, curious or talkative child is demonstrating confidence, and this can be encouraged by engaging the child in conversation at frequent intervals and showing approval of their interests. The presence of children lends itself to this approach because children have current needs and activities which are easy to comment on positively and discuss.
- It is helpful to acknowledge the experience of parenting in the course of a meeting, both in terms of its challenges and its joys. This is often an effective way to build trust with survivors who will value their children being welcomed and benefit from being supported and acknowledged as parents. It also lends itself to the *'here and now'* practice which helps to return focus to the present moment (see 7. Referring Back to the *'Here and Now'* to Instil Calm).

- Whenever children are present, it is important to carefully observe their responses. Their reactions to any distress of their parents are always significant. Bear in mind that babies and infants can sense, and are affected by the distress and disturbed emotions of people who are around them, especially when it concerns their parents. Children of around 2 years old can understand spoken language, even if they are not yet speaking themselves. If a parent becomes overwhelmed in the course of a discussion, a break should be immediately provided for the parent and child.
- Professionals may find that some children react to any distress of their parent and have become used to trying to 'protect' and comfort them. Others may register and absorb the distress of their parent without appearing to react to it at all, which should not lead to the conclusion that they are able and 'used to' managing it. The distress of a parent causes anxiety and is upsetting for any child. In situations where there is no option other than for children to be present when traumatic subjects need to be discussed, break up the discussion into short question-answer periods and provide frequent short intervals in which children and their parents can be positively acknowledged. The presence of babies and children fortunately lends itself easily to lighter conversation which focuses on the 'here and now'.



9. The Correct Use of Names

It is common for survivors of trafficking to be known by various different names, and to have more than one name recorded on their files and documents. Some may also have had their name recorded or spelt wrongly by the authorities, or they may be using a name which has been provided to them by traffickers rather than their 'given' or 'birth' name. For example, they may have a false name that has been allocated to them for use in trafficking for sexual exploitation, or a name that has been used by traffickers to create a false identification for immigration purposes.

In such cases, an officially recorded name may have to be maintained for use in relation to legal procedures, rights and entitlements, until a time that it can be formally changed at survivors' request. However, the use of names can have a serious significance for survivors' sense of identity. Professionals should always ensure they are using the correct name for a survivor from the outset:

Each person's name of choice should be checked (together with the correct form and pronunciation) at the outset of the first meeting. The use of this chosen name should be maintained consistently throughout the professional relationship. Survivors may associate their 'trafficking name' (i.e. one which has been imposed by traffickers) with experiences of violence, subjugation and exploitation. Ensuring that each person is always addressed by the name that they expressly wish to be known by is a progressive step towards securing trust. Conversely, the continued use of a 'trafficking name', especially once a different name preference has been expressed, can be experienced by survivors as disrespectful or unkind and so it can significantly undermine trust.

Survivors may not express a name preference early on.

However, this may change as the professional relationship progresses and further trust is established. It is useful to bear in mind that the origins of both chosen and allocated names often provide useful insight and possibly a 'gateway' into the details of a trafficking history. Therefore, obtaining all names at an early stage can help to enable disclosure (see 14. Supporting Survivors to Give a Full Account of Their Trafficking Background).



10. Providing a Calm, Consistent and Welcoming Environment

Any meeting space should feel as safe as possible. If survivors experience a calm, consistent environment and approach at each point of contact, their trust and confidence will gradually increase over time, enabling them to speak and express themselves more freely.

- Maximise light and space in the meeting room or area. Ensure that each person has the ability to move around as much possible and to choose where they want to sit. Even if a room or space is small, dark or cramped, minor changes can always be made to make it more welcoming. This is helped by the presence of plants, pebbles or other comforting, natural objects. Light, use of colour and the creation of a sense of space promotes feelings of security and well-being. This is particularly helpful for people who have been held in confined spaces by traffickers or have previously been confined, detained or imprisoned.
- Avoid a 'formal interview' setting in which a professional faces a survivor across a desk and therefore appears to be an authority figure. Sitting as equals in the room, at the same level and on similar chairs, will help to create a feeling of safety and openness which assists communication.
- Offer each person minor choices and decisions. For example they should choose where they prefer to sit, if they would like a drink, and whether to have the window open or the heating on. This quickly establishes a relationship which directly contrasts with their trafficking experiences and helps to build self-assertion and individual preferences (see 3. Communicating a Sense of Safety).



11. Maintaining Awareness of Communication in all Forms

Communication with survivors is integral to every verbal expression and physical gesture. Therefore, in addition to considering carefully all that they say, it is important to focus on making appropriate eye contact, maintaining an open facial expression, speaking in a measured tone and pace of voice and making only calm and predictable physical movements. This helps survivors to feel reassured and it increases their confidence.

Professionals can increase trust and confidence of survivors by communicating in a way that 'creates the illusion of time'. This means that no matter how restricted their time is, or how busy they are in the course of their daily work, they ensure that the pressure of time does not feel like a problem or concern for the person they are working with. There is no need to share the frantic nature of a work schedule, halt a discussion abruptly or walk guickly past on the way to other parts of the building. This can set back the relationship of trust and inhibit survivors from feeling confident enough to speak freely. It is more far effective to listen carefully to each person, maintaining conversation at a normal, moderate pace and then simply agreeing a time for a further appointment in order to hear more. Hurried, swift movements, lack of eye contact or any form of action which suggests that professionals are in a hurry or have authority over a person, has the opposite effect, and can exacerbate any anxiety they may be feeling. The appearance of having time to listen to each person is calming and it increases their confidence.

Whenever professionals see survivors again (including elsewhere in the building or in any different context or setting), they should return to the same measured consistency of pace and manner to greet them. Each time that professionals stop to say hello and ask a person how they are, is another positive step in building trust.

- In all cases where an interpreter or cultural mediator is needed, everything that is communicated should be fully interpreted. Any verbal 'aside' from a professional to others in the room which is not immediately explained can be experienced by survivors as isolating and intimidating, regardless of how innocuous it may seem. For example, a comment between two professionals about the weather accompanied by mild laughter, could be perceived as hostile and unsettling if a survivor does not understand the language. They are left to guess what is being said and may worry that it is about them.
- In some cases, survivors will not feel able to make eye contact, either fully or at all, for some time into a new relationship. This can be due to a history of subjugation to traffickers or the fear of any people who appear to be in authority. If a person seems unable to make any eye contact at all in initial meetings, it is helpful to acknowledge this with them, and for them to understand that it is fine.
- Making gentle eye contact can be reassuring and it helps to prevent feelings of loneliness and isolation. If a survivor sees a kind and sensitive response upon obtaining eye contact with another person, they will feel less stressed, feelings of shame will lessen and their confidence will improve. This can be a powerful and corrective experience for those who are used to feeling diminished, humiliated, or mocked by others. Eye contact is also important for safety reasons, because survivors will be able to have a visual recollection of the person they have spoken to, and are working with.
- In many cases the confidence for continued eye contact builds gradually, over time. It should never be demanded, and should only be introduced slowly. However sensitive support to achieve eye contact, especially if this is echoed in parallel therapeutic sessions, can be effective both for building a mutual relationship of trust and for increasing survivors' confidence in their responses to other people.



12. Setting Realistic Goals and Objectives

Survivors need to be sure of what they can expect from professionals who are working with them:

- Always set realistic aims and objectives that are achievable in relation to each person's individual situation, needs and capabilities.
- All plans and objectives should be discussed, agreed and scheduled in a careful and collaborative process.
- All work that is conducted should be clearly and consistently explained. If intentions are unclear, or there are sudden changes of plan this can result in loss of trust and therefore the risk of loss of contact.
- Avoid setting up unrealistic expectations or making promises about the future. The non-realisation of promises or guaranteed expectations can damage any working relationship of trust that has been established and therefore be detrimental to a survivor's future safety. However it is neither necessary nor helpful to provide survivors with a full list of possible negative outcomes, as this can cause them additional distress and worry. Provide positive reassurance wherever possible, but always within the boundaries of realistic expectation.



13. Asking for Sensitive Personal Information

It is extremely difficult for any person to give a stranger

information that is highly personal or painful. Therefore this should only ever be requested or discussed within the remit of a professional task and in an appropriately confidential environment. Survivors' lives have often been shattered through sequential, traumatic events including violence and loss, so they can find the prospect of providing personal information extremely distressing. It is essential that survivors do not lose contact with organisations and services because the arduous nature of providing personal information makes them feel that they need to avoid it.

Do not give the impression that the only important task of a meeting is simply to gather as much information as possible, or act in a hurried or impersonal manner. In the course of trafficking, survivors become used to having the significance of their lives and emotions completely disregarded and diminished by others. Therefore this response towards them should not be reflected or re-enforced in any way. Maintaining contact with survivors relies upon consistent kindness and professionalism.

Always demonstrate sensitivity when approaching distressing questions, for example about the loss of family members, health difficulties, rape or injury. This can be achieved in the course of any work task, including making a phone call on their behalf or filling out extensive administrative forms or records. In some cases it will be helpful to introduce a sensitive topic before asking a question (for example 'I am now going to ask you about your family...' 'this is going to be a health question'...'I have some questions about the person who brought you to this country...'), and check that they feel able to go ahead.

- When sensitive information arises in the course of an interview or discussion, survivors' feelings about it should be briefly and respectfully acknowledged. Recognising that information is distressing does not undermine professional objectivity or prevent professionals' ability to later review an account in full and come to a different conclusion. It provides a reliable and supportive framework for the provision and receipt of sensitive information, and it emphasises the duty of professionals to act in survivors' best interests. Brief acknowledgment is appropriate, and it enables the conversation to progress forward without lingering for too long on a difficult subject.
- The subject of survivors' pregnancies (whether they resulted in birth or not), and their children (whether raised by their parents or not) can be particularly distressing. Women who have experienced trafficking for sexual exploitation may have become pregnant and had children as a result of rape; they may also have been forced to abort pregnancies, or have miscarried as a result of inflicted injury or ill-health. Some women will feel particular shame and distress about having had children outside of marriage or having been raped, which in some cultures would be perceived as being their own fault. Men and women may have had their children killed, maimed or taken from them in the course of being trafficked.



14. Supporting Survivors to Give a Full Account of Their Trafficking Background

Survivors are often expected to provide a full account of their history swiftly and accurately after coming to the attention of the authorities. This process is fraught with challenges for survivors, and therefore for professionals who are working with them. Survivors' provision of their full account is often necessary for their access to legal rights and entitlements, which are vital to their protection, support and long term safety.

- Specialist therapeutic care is necessary for the reduction of mental health problems and the long term, sustained recovery of people who have suffered trauma. Always extend understanding and sensitivity if information provided by survivors does not initially seem to make sense.
- The only truly effective way to obtain full, detailed and accurate accounts of trafficking histories is by establishing a working relationship of mutual trust. Survivors need to be sure that professionals they are working with have their best interests in mind and will not judge them negatively before they can feel able to fully discuss issues such as rape, assault, shame, stigma or intricate family details. Supporting survivors to gain the confidence to discuss their history, and permitting them as much time as they need to do so, is the best way of obtaining detailed disclosure. There is a lot to be said for a few simple words or expressions of positivity, kindness and recognition of the experiences that a person has been through. It is important to remember that any outward expression of disbelief or indifference from professionals, no matter how minor, is detrimental to building a relationship of trust.

The Effect of Trauma on the Brain

When working with people who have suffered trauma, it is useful for all professionals to have a basic understanding of **the effect of trauma on the brain.**

Memories of traumatic events (those in which there is serious threat to human life), are different to memories of *non*-traumatic events.

When a person is subjected to the threat of being killed or abused, or witnesses this threat in relation to other people, their body reacts in specific ways to enhance their chances of physical survival. This biological and evolved reaction also affects the parts of the brain that are responsible for the laying down of memory:

The **hippocampus**, which is the part of the brain involved in remembering the *time and place* of an event, stops working normally. At the same time, the **amygdala** (the part of the brain responsible for *linking emotions, bodily feelings, thoughts* and *sensory information*) works extremely efficiently. This means that any future reminder of the traumatic event (for example, the feeling of the heart racing, the sight of a blood red colour, a particular smell or the sound of a laugh or scream) can trigger a survivor's memory to be vividly recalled as if it was happening again. It can include re-experiencing all of their physical reactions such as pain, emotional reactions, sensory experiences and thoughts that they had at the time, because this part of their memory was stored so well.

However, because at the time of the traumatic event the hippocampus was not working well, the 'time and place' information is not linked with this reaction. Therefore the crucial information that the traumatic event "happened in the past, and in a different place", and that 'it is not happening now, right now I am safe,' is not accessible. Survivors therefore feel that they are in current danger, exactly as they were at the time of the traumatic event.

In addition, memories of different and various traumatic events can become mixed up together. Therefore, it is possible for professionals to ask about one traumatic event, and find that suddenly a survivor is describing a different event entirely.

It is also important for professionals to bear in mind that problems resulting from head injuries, learning difficulties, intellectual disability and mental health problems which can impair concentration are common in survivors. The potential presence of these should therefore always be considered, and adjustments made where necessary.

- Professionals' style of asking questions will vary in accordance with their specific training and the particular work task in hand. However, survivors should not be expected to understand highly professionalised or legalistic language, acronyms or other 'short-cut' terminology. To obtain an accurate history, all questions asked and advice given needs to be as simple and straightforward as possible.
- Interrogative methods of questioning, or those which commence from a place of doubt or disbelief, are never effective for obtaining disclosure from vulnerable people who have traumatic histories. This simply serves to make them feel nervous and intimidated. In cases where there is scope to adapt communications flexibly, ask each person whether they prefer questions which enable them to give longer or shorter answers. Alter methods of questioning as survivors' individual responses are observed and their needs become clearer.

It is helpful to bear in mind that some people will prefer 'open' questions and speaking in an 'open-ended' manner so that they have the freedom to express themselves fully, while others may feel more secure and able to manage communications are contained within a short-form question and answer format. In most cases, survivors' preferred style will fall somewhere between the two, but the latter is particularly helpful for those who have intrusive memories from trauma, or experience overwhelming feelings of shame. In such situations, professionals should not feel they are doing something wrong by asking simple questions requiring 'yes' or 'no' answers. In fact, this is the most appropriate approach in cases of severe trauma when it is necessary to obtain an understanding of traumatic events endured. This can be introduced by saying "I need to understand what has happened to you, but I can see that you do not want to talk about the details, and that is fine. Do you think you could just say 'yes' or 'no' to my questions'? 'If you want to, we can then speak in more detail about them afterwards.'

Survivors should be reassured that they can take the time that they need to process their thoughts and to provide further detail or describe events in their own way. Any hesitation or lengthy consideration of an answer should not be taken as an indication that a person is being untruthful or does not know the answer. It is important not to hasten survivors' responses by trying to summarise what they are saying in an attempt to move their account forward. Drawing any conclusions on survivors' behalf is also unhelpful. Gaps and silences do not need to be filled unless a person is suffering distress, and even then, survivors' may prefer to have a few moments in silence to process their thoughts and emotions. All communications with survivors are assisted by 'creating the illusion of time' (see 10. Providing a Calm, Consistent and Welcoming Environment). In cases where a survivor is becoming distressed or overwhelmed, it is helpful to 'refer back to the here and now.' (see 7. Referring Back to the 'Here and Now' to Instil Calm)

Check that all of the information provided to survivors has been fully understood and that they feel able to ask questions, or to request a break whenever they wish. Professionals should carefully observe responses to questions, and ensure they are aware of any indications that survivors need to pause, or stop the session entirely. It is better to draw a meeting to a close and arrange to obtain further details of an account at another time, than to risk a person becoming overwhelmed and therefore unable to continue. Always acknowledge any memory intrusions or symptoms that survivors appear to be experiencing. If a person feels that they have to focus on suppressing or concealing intrusive memories it will affect their ability to provide a full account of their history. This can be discussed in a simple, practical way with the aim of ensuring that each person is as comfortable and unimpeded as possible. Mental health symptoms are far less likely to inhibit or distress a person when they are reassured that the professional with whom they are working understands that this is difficult for them, and demonstrates a sympathetic and supportive response.

All fully detailed histories of trafficking 'begin at the beginning'. Survivors often have complex backgrounds: in many cases they have experienced sequential traumatic events leading to circumstances which have culminated in their being targeted for trafficking. There are many scenarios of trafficking, for example some people have been trafficked from birth or early childhood, while others may have had a more positive start in their life and education, and then suffered circumstances that made them specifically vulnerable to traffickers. Regardless of the common features found in trafficking patterns and networks, each individual person's history is entirely unique.

It is most useful to begin with questions about birth and early childhood and proceed onward from there in order to build up an accurate picture of survivors' origins and circumstances. This is an effective way to capture details, because it aids survivors' recall to work progressively and chronologically through a sequence of related events, and link their relationship to each other.

- People who have suffered trauma may lose whole areas of memory, or they may not understand the full significance of parts of their history. Take the time needed to work through a history, paying particular attention to understanding survivors' relationships with others. It is important to understand the reasons why events have occurred in relation to how each person perceives other people and the world around them. This approach can provide crucial insight into the nature of survivors' vulnerability to trafficking as well as leading to information on the identity and operation of traffickers.
- In the course of taking an account of a trafficking history it can be helpful to recognise and affirm the individual strengths of each person that they have shown in surviving their experiences, as well as recognising any positive relationships they have made along their way. There are always positive individual traits and elements that professionals can briefly pick up on, which helps to limit the impression that a person's life is a long-term sequence of negative outcomes. It is common for survivors feel that their misfortune is such that they must be 'cursed by fate' or that they are somehow to blame and at fault, so it is good practice to emphasise their courage and positive strengths.
- Take time to consider an account rather than dismissing anything that is said in the early stages of contact because it seems flawed. Professionals who work closely with survivors over multiple sessions often find that a whole account becomes more coherent as a relationship of trust is established and they are more able to speak openly and fully about their experiences. Over time, apparently inaccurate or inconsistent aspects of an account may be resolved and clarified.



15. Working with Survivors who have Instilled Beliefs and Fears about Traffickers

Survivors often have multiple reasons for continuing to fear their traffickers after their escape, including the threat of reprisals and attacks upon themselves and family members. These should always be taken seriously and recorded in detail where appropriate. Reprisals, targeting, re-trafficking (by the original traffickers or new traffickers) and attacks on family members are a significant risk. Therefore all current and future risks should be carefully assessed and monitored on an on-going basis, with every measure put in place to ensure that survivors are protected and remain safe.

However, it is also useful for professionals to be aware that in some cases instilled beliefs and fears relating to the power of traffickers can operate on a deeper level, regardless of the trafficker's physical proximity and their actual current capacity or intention to exercise further harm. For some survivors the intensive psychological impact of being controlled and subjugated can leave them with a belief, fear, or abiding sense that their trafficker is somehow omnipotent and therefore has a continuing power over them.

The experience of subjugation to traffickers can affect survivors' sense of self, identity and autonomy long after they have left their direct control. Some may find it extremely difficult to imagine a situation in which the traffickers' control over them is no longer being exercised, and the threat of imminent punishment is no longer there. A continuing sense of being watched and monitored by traffickers can apply in cases where people have been physically confined, or in cases where they have had a level of freedom of movement but have been psychologically entrapped.

15.1 Traffickers' use of existing belief systems and ritualised violence as a form of control:

Traffickers are known to utilise multiple forms of psychological control at their disposal in order to subjugate victims and ensure that they continue to obey them. This can involve the *co-option* of cultural or religious beliefs and practices for the criminal purpose of trafficking.

Many cultures have existing belief systems which can be used to traffickers' advantage. For example, traffickers may co-opt local traditional folklore (as seen in some cases from Middle and Eastern Europe) or Juju or Voodoo rituals and ceremonies (as seen in some cases from West Africa) or wider beliefs in witchcraft or sorcery more generally. In all such cases, deep and profound fears and traumatic memories may be triggered for survivors whenever their histories are discussed.

Some survivors may have a belief that their traffickers have supernatural powers because they have been told this by other people or by the traffickers themselves. In some cases (not all), survivors may feel that they have to rely upon traditional protection rituals (for example carrying symbolic 'protective' items, performing a counter-ritual at certain times, or observing ritual practices) in order to try to remain safe from them. In other cases, traffickers may have used rituals designed to instil a false sense of invincibility or protection to survivors, so that they are more easily manipulated into carrying out life threatening or dangerous acts.

Each person has a history which is unique to them. The meaning it has for them and their responses to it are highly individual.

Assumptions should never be made, and professionals should understand that there are many effective variations practiced by traffickers and survivors can experience great difficulty in speaking about their experiences. It is important to allow time to build working a relationship of trust in order to gradually understand survivors' needs. In all cases, professionals must be able to make a clear differentiation between the existence of wider beliefs and practices and criminal co-option of these for the purpose of human trafficking.

It is always useful for professionals to learn as much as possible, and to seek advice from experts in related fields in order to gain some cultural understanding of beliefs and practices from regions of the world. Some professional organisations, cultural mediators and survivor leaders offer services for survivors which can extend knowledge and insight from specific experience. All services should only be referred to with survivors' informed consent, ensuring that they are vetted and appropriate to meet their specific and individual needs as a victim of trafficking.

15.2 Trafficking Ceremonies Which Use Ritualised Violence

In keeping with all of the advice provided in the TiCC, the guidance below is intended to ensure that professionals from any background or field of discipline can communicate safely with survivors, using trauma-informed methods of working to minimise the risks of causing distress and re-traumatisation.

Ceremonies which utilise Juju or Voodoo rituals are known to be used for trafficking victims from some West African countries.

These ceremonies subjugate victims, causing enduring fear. They may have to take an oath to their traffickers to obey them and maintain life-long silence about what has happened to them, or this obligation may be otherwise instilled through psychological harm and control. In some cases, the rituals have a specific purpose of ensuring that victims remain in debt bondage and feel obliged to pay traffickers back a false debt, for example for their travel or for having been given a job. Victims are made to understand that if they breach this oath, evil spirits will cause them or their family members to become ill, go mad or die. These ceremonies can be extremely frightening and may be (not always) physically violent, involving assault or rape. It is intended that victims will never forget the rituals to which they are subjected: they are designed to evoke strong sensory memories, including smell, taste, touch, sight and sound, in some cases involving the ingestion of substances. Sensory memories which are traumatic can then be triggered when they recall the ceremony or try to speak about what has happened to them.

Ceremonies may be utilised by traffickers who are themselves practitioners or believers, or by traffickers who have created a theatrical device in order to instill fear and subjugation into their victims. Survivors may or may not have a wider belief system pertaining to Juju or Voodoo, however person who has experienced a trafficking ceremony is likely to have been devastated by what they have been forced to participate in, and will be suffering from related fears whether they are able to express this or not. The focus for professionals must always be on survivors' individual interpretation of the rituals and how they feel about them (which can vary at different times) as well as the impact that this may be having on their daily lives. Survivors who have instilled beliefs and about the supernatural or omnipotent power of traffickers should ideally have access to a specialist mental health assessment, and to appropriate trauma focused therapy if it is needed. This can help to address the origins of their ongoing fears, gradually enabling them to become less frightened and more confident of their safety in the present time, away from the perpetrator.

A person who has been subjected to ritualised violence will need particular support and assistance: professionals should understand that at any time they may be experiencing profound fears of imminent supernatural threats including sudden madness, disease or the death of themselves or their loved ones. When survivors recall the actions of traffickers, they are likely to associate these with the use of personal insults, threats, abuse, violation, mockery and humiliation, all of which diminishes them and serves to re-enforce the degrading effect upon their sense of self and identity. As with any traumatic memory, they may also recall vivid, unpleasant sensual memories of sights, smells, sounds and tastes that they were subjected to during a ceremony which can trigger feelings of shame, revulsion, fear and distress. Fears may also arise for each person intermittently ie they may be stronger at particular times for the victim than at other times. It is useful to know that while these fears can diminish at times, they can return with their original force when the victim feels under pressure.

There is no need for survivors to have to question or confront any particular belief system as a whole. This could be experienced as damaging or undermining, especially for survivors whose communities may share such beliefs. Instead, survivors will require support to gradually question, dismantle and depart from, the *specific*, and *criminal use* of the belief system, ceremony or ritual that was employed to subjugate them and hold them captive. This is a difficult and delicate balance for professionals to achieve, but it can be highly effective if it is approached carefully and gradually, over a significant period of time.

15.3 Enabling disclosure of instilled beliefs and fears:

(See 14. Supporting Survivors to Give a Full Account of Their Trafficking Background)

It is rare for survivors to feel able to speak fully, or at all, about instilled beliefs and fears at an early stage. It is common for them to have met a series of professionals who have not known that they have instilled beliefs and fears about their traffickers, or have experienced ritualised violence.

In some cases, the gender and cultural identity of professionals in whom survivors could potentially confide is directly relevant. For example, some survivors may feel unable to confide in a person from their own region or culture: they may feel that it is not considered within their culture either necessary or appropriate to discuss such matters, or they may fear that they will be looked down upon and considered to be shamed, cursed, tainted with witchcraft or an 'unnatural' being. Equally, survivors may not feel able to confide in a person from a region or culture where ritualistic ceremonies are not generally practiced, because they assume that they will suffer discrimination, will not be understood or believed, or their fears will be considered ridiculous or irrational. (See: 5. Explaining Professionals' Identity, Role and Duties) In cases where a history of instilled beliefs about traffickers or the use of ritualised violence is already documented, professionals can gently inform survivors that they know about it and understand it. It is important to reassure them that they do not ever have to fear being suddenly confronted or questioned about it without warning, for example, 'I understand you have had something very bad happen, which might make you feel afraid to talk to me'. It is not necessary to use any associated words such as 'witch', 'juju', 'voodoo', 'spirits' etc early on, as these may be frightening and intimidating words for survivors. The sensitive acknowledgement of survivors' experiences can be reassuring, especially if they know that the subject will not suddenly be raised or discussed with them without warning. Even after experience of ritualistic abuse is fully disclosed, it is helpful for this reassurance to be repeated.

If trust is built over time, survivors may feel able to speak about their experiences more openly. It is best to always introduce the subject beforehand, for example, 'I would like to talk a bit now about what the trafficker did to make you frightened/made you promise to owe the debt', is that okay?' However, once the belief system or ceremony is recorded sufficiently for practical or legal purposes, there is no need to revisit it. It is best that survivors have access to specialist trauma-focused therapy for assistance to sustain recovery from these experiences.

- In cases where a possible history of ritualised violence has not previously been disclosed or documented, professionals can re-iterate their duty of confidentiality, and inform survivors that they are aware of the types of methods that are used by traffickers to terrify and subjugate their victims. Questions that may be useful include: 'did the trafficker do anything to stop you from telling anyone about what happened to you?' Or, 'is there anything you haven't felt able to say about your case because you are frightened? 'Are you afraid that you or another person that you know might become unwell or have any other problems if you talk to me? For survivors who are held in debt bondage, useful opening questions include 'Do vou think you owe anyone money?', 'What do you think will happen if you don't pay this money back?'. In all cases, allow sufficient time for survivors to collect their thoughts and speak freely. If they seem distressed or nervous in response to questions, return to the 'here and now' practice and move to a different topic. It can always be returned to further on (see 7. Referring Back to the 'Here and Now' to Instill Calm)
- In all cases where instilled beliefs and fears arise or are alluded to in the course of a discussion, they should not be dismissed as 'unrealistic' or 'unfounded'. Professionals should demonstrate understanding of the seriousness of a fear before gradually helping to diffuse it. While many survivors believe in the validity of supernatural fears, others may state that they know that that supernatural fears are irrational, and may even try to laugh them off or demonstrate that they are dismissive of them due to shame or embarrassment. However, knowledge alone does not really help to lessen these fears, and professionals need to demonstrate consistent awareness of the seriousness and significance of such fears from survivors' point of view in order to support them effectively. It is good practice to ensure that they are encouraged to describe particular feelings and fears. Professionals can explain that any person in similar circumstances could experience the same fears and that other survivors are known to feel this way. Survivors can then be reassured that while traffickers are criminals who have no omnipotent power at all, they definitely 'have no power here, in this room where we are'.

15.4 Building positive relationships of trust

- Survivors' instilled beliefs and fears are best addressed with specialist therapeutic care. However, all professionals can help to contain them by lending appropriate time and support to survivors in order to build a working relationship of trust. Positive relationships which are safe for survivors can help them to gradually move away from internalizing the critical voice and power of their traffickers. Try to ensure that they are introduced to other reputable services and safe community networks in their local area. The safer a person is able to feel in their current situation, the easier it will be for them to manage and question their fears, so long as the perpetrator is very clearly no longer presenting a risk to them.
- It is helpful for professionals to emphasise any positive aspects of the survivors' current life, their achievements and any successful outcomes in their case going forward. This can reassure survivors that traffickers have no power over their fate and they are not being monitored, punished or cursed with bad luck for escaping and speaking out.
- After-appointment care is particularly important in cases of people who have suffered ritualised ceremonies, especially if they will be left alone or feel isolated afterwards. Try to ensure that when a victim leaves the appointment, there is still daylight outside. It is good practice to follow up with a call and check to see how they are doing. Ensure that the experiences disclosed by the survivor are not referred to directly, and the follow-up is all about communicating positivity and reassurance about how they are doing now, in the current moment.

16. Trauma-informed methods of working for remote phone and video calls

Trauma-informed methods of communication are essential when working with survivors remotely via phone or video calls. All of the methods contained in the TiCC, together with appropriate safeguarding procedures should be adapted for remote working, together with the additional guidance provided here. It is important to recognise that working with survivors in-person is the best method overall to ensure their security, safety and comfort. It is particularly important to build a mutual relationship of trust at the earliest stages of contact and establish a longer-term situation in which contact can be maintained. When a task involves obtaining accounts from survivors which include personal and sensitive information and/or discussion of traumatic events, this should always be conducted in-person with survivors in a traumainformed environment, unless there is no option other than to work remotely.

Survivors often lack access to quality smartphones, computers and wifi connection, so this should be explored sensitively with them and solutions found to ensure they have appropriate means of technological communication when working remotely is necessary. Survivors may also may struggle to find a confidential place in which they can receive calls, so this should be considered with them in advance. Professionals and services should always bear the cost of calls.

Remote working should be as safe as is technologically

possible. Ensure that voice or video calls are conducted via a platform that provides end-to-end encryption. The passwords used by each person should be strong, kept confidential and regularly updated: they should be unique to the specific service or platform, and not used to access multiple online forums. For added security, multi-factor authentication for log-ins (for example a password, then a code) is preferable to a single stage log-in. For all parties, the access to video call meetings should require input of a passcode. Anti-virus protection tools help to guard against general viruses and scams. If there is any specific concern about hacking of survivor's devices by traffickers in a particular case, it is useful to know that smartphones are generally safer for use than computers.

Avoid contacting survivors without any warning: Receiving sudden calls can be alarming for some survivors if they do not expect the call, cannot recognise the number they are being contacted from, or do not know the person who is contacting them. All non-urgent calls to survivors should be kept within normal, working 'office hours'. Try to avoid contacting survivors in the late afternoon if it is dark outside. Many survivors have received, or fear receiving threatening calls from traffickers and other perpetrators, and they can fear any withheld number or strange number that they do not recognise. In the case of calls from police or immigration authorities, survivors can be particularly afraid of answering the phone and they may think they are being contacted because they are 'in trouble'.

It is best to arrange calls beforehand by text in a language that survivors can understand, together with the name of the organisation and identity of the caller. In cases which require it, the text should also state that there will be a professional interpreter or cultural mediator who will be assisting. Be careful not to provide any reference to personal information in the text, in case others have access to the survivors' phone. Sending a text in advance can help to build initial trust and ease the way for effective remote communications. It can also be helpful is for survivors to key the caller information into their device, with the name of the organisation or service that will be phoning them in future. Apply trauma-informed methods of speaking from the outset and clarify the purpose of the call as soon as possible in the conversation, making sure that survivors have the necessary space and time to ask any questions.

- In all cases try to have in-person meetings in the early stages of contact with survivors so that safety risks can be assessed, and remote communications planned carefully in advance with them. It is far easier to vet and separate an accompanying family member or friend in a professional setting than it is to do so in a survivor's residence. In any case, no matter what the level of preparation beforehand, it is important to check the situation at the outset of any substantive phone or video call, asking the survivor if they are 'happy to speak now or at a later time?' Communications should permit survivors to simply indicate that they prefer to end a call, or receive a call at another time without having to explicitly state their reasons. If they wish to go ahead, check that they are on their own, and that they feel confident that they are not being overheard. Listen carefully and observe all that is being communicated by survivors verbally and also visually (if on a video call), maintaining trauma-informed methods of communication throughout.
- If the very first contact with a survivor has to be by phone or video call because there is no other option, any discussion of personal and sensitive information and traumatic history should be avoided. Communication should be focused only upon introduction, establishing a relationship of trust, checking their current safety if needed. Speak about matters that are current and non-distressing, and make arrangements for further contact with survivors' informed consent.

✓ If it is not possible to have in-person meetings with survivors for substantial discussions, video calls are preferable to phone calls. Maintain awareness of communication in all of its forms. A calm, consistent environment and approach is just as important online as it is offline: light and space should be maximised in the caller's background setting so that the caller's face can be seen clearly and fully. The background can be complimented with natural objects such as plants and pebbles and use of colour, but it should not be 'busy' or overly distracting. Although video calls can lend the perception that parties are 'looking' at each other directly, it is helpful to look (not stare) directly into the camera every now and then (if working on a computer) so that survivors have an image of the full eye, and eye contact being made with them. All parties should have access to fresh water and anything else they may need close by.

It is possible to offer minor choices and decisions in a video call, for example by discussing the use of the technology, the quality of image and sound, the need to take breaks during the session and the person's ability to stop the session at any time if they need to. Any access or adaptation needed in relation to healthcare issues or disabilities should ideally be identified and planned for beforehand. If this has not been possible, make sure to check any requirements at the outset. Ensure that each person is situated comfortably and attend to their health and well-being as if working in the same room with them. Remain observant for any signs that that a survivor is becoming stressed, distressed or exhausted.

Remote working requires the same duty of confidentiality for survivors as can be offered to them when working in-person.

This can be particularly challenging, because many survivors live in close proximity to others who could potentially overhear what they are saying, or even observe them having a video call session. Callers need to be alert to any situation in which other persons can hear the conversation through thin walls, or the possible presence of other persons with, or around a survivor during a phone or video call. Observe any signs that survivors may be being watched, monitored or controlled by others around them, and always follow safeguarding procedures if there is an immediate threat to life or safety. Phone calls should be made from a quiet and confidential environment without any noise interference in the background. It is important to speak to each person when they are on their own, and appropriate to ask them sensitively if this is the case. In order that a survivor understands that a video call is confidential, it can help to offer them a 'room scan' at the beginning of the call so that they can see exactly who is in the room. Survivors who are particularly nervous about confidentiality may be reassured if the door to the room is visible in the caller's background, so it is clear that other people are not entering. If survivors express the wish to do a 'room scan' from their end as well, this can be encouraged. However, it should not be a requirement: all aspects of remote working are about making survivors feel comfortable and confident to speak openly, so it is important not to raise additional concerns for them in the process of conducting work safely.

In cases where survivors' family members, friends or partners are known and have been assessed as safe for them, it is helpful if they can be on hand during any in-depth phone or video call. This means that they may be situated in another room, or proximate enough in the local area to visit the survivor and help them if needed. It is important to find out whether survivors' specific vetted friends and family know about their trafficking history, and to ensure that, in any case, there is no mention of the survivor's personal and sensitive information or background history when they are present. Always work with known and experienced interpreters and cultural mediators wherever possible. Introduce their role and explain their duty of confidentiality to all parties at the outset. A short-form of this introduction can be used in further, repeated calls, however it should never be omitted. When using a new interpreter or cultural mediator for remote video calls, it is best to work with them in-person to begin with, rather than adding them from another location. It can be reassuring for survivors to see professionals on video who are sitting and working together. If it is necessary to use an interpreter will come onto the call, make sure that the service is carefully vetted beforehand, an experienced and trauma-informed interpreter is requested in advance, and specifications concerning their gender will be met. (See 6. Working with Interpreters and Cultural Mediators)

We would like to thank the many survivors who have informed the TiCC, and the multi-disciplinary and clinical team of the Helen Bamber Foundation.



