

Shelter Self-Improvement Project Toolkit





UNIAP JNITED NATIONS INTER-AGENCY PROJECT ON HUMAN TRAFFICKING

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An illustrative list of specialist trainings and micro-trainings provided to shelter managers, counselors, and other staff and victim service partners



Within the process of victim protection, from victim identification to reintegration, shelter (and other custodial facility) stays are just a fraction of the services that may be appropriate for an individual victim. Still, investing in better shelters and transit centers that meet international standards, and in the capacity of facility managers to provide better services, is an investment that trafficking victims deserve. While anti-trafficking organizations and victim service agencies have been working steadily to improve the services available to trafficked persons across the region, there are still shelters that struggle to provide care and protection that meet international quality standards. These facilities are often run by shelter managers and staff who lack the financial or technical resources to improve the conditions of their facilities, the quality of services that they offer to trafficked persons, or the breadth of referral services that meet the needs of the victims they serve. While many government and non-government agencies are involved in the longer term process of developing and implementing procedures for improved comprehensive victim protection under COMMIT, UNIAP has aimed to jump-start this process through an innovative time-bound approach that builds the capacity of shelter managers and helps them to help each other improve the conditions of their facilities.

The purpose of this toolkit is to provide policymakers and victim service providers with a basic set of tools and program guidelines to implement a shelter self-improvement project, to be customized to meet the needs of the localized context, with training provided by experts who understand well international quality standards for rights-based trafficking victim protection and services.

Is this guide for you? Understanding the objectives of UNIAP's Shelter Self-Improvement Project may help you to decide whether this toolkit may be a useful resource for your efforts to improve victim protection in your own capacity.

The objectives of the Shelter Self-Improvement Project are:

- 1. To measurably improve shelters and other custodial facilities that serve trafficked persons in the country (and Mekong region);
- 2. To build the capacity of shelter / facility managers to maintain uniform standards for victim care and support nation-wide; and
- 3. To build a sustainable network of government and non-government shelter managers and other victim service providers who know how to maintain these uniform standards in victim care and support, and can help other victim service providers reach these standards in their programs and facilities.



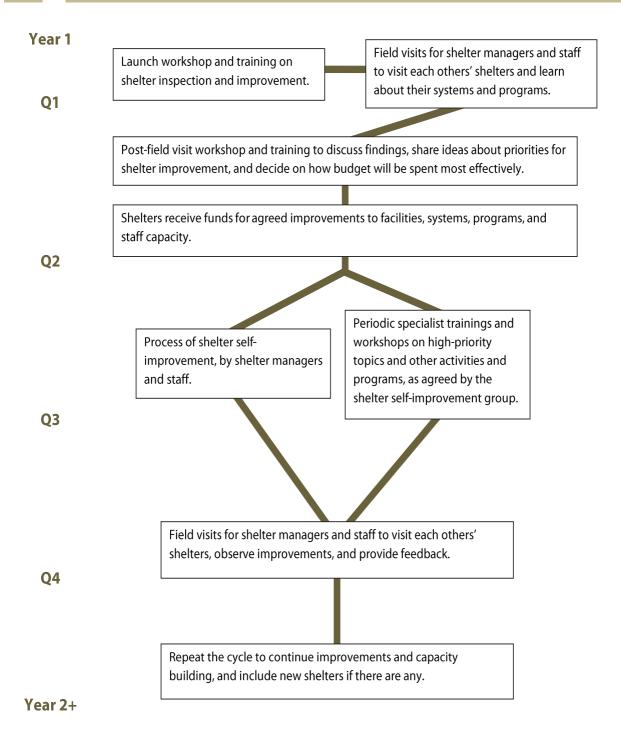
How does it work? Over the course of approximately one year...

- Government and NGO shelter managers, counselors, and victim service providers are trained by UNIAP (or other competent victim protection specialists) on how to conduct shelter inspections and train others to do shelter inspections, using a scoring sheet that rates various aspects of shelters according to international standards (facilities, services, case management systems, etc.);
- The national shelter self-improvement group divides into teams and conducts group visits to each others' shelters;
- After the shelter visits, and based on the scores that identify areas requiring the most improvement in each of the shelters, the shelter self-improvement group will determine the best way to allocate funding among the shelters for immediate improvements, whether physical changes or improvements to the system, capacity, or case management;
- Over the course of several months, the shelter improvements are made, and common capacity needs are addressed by specialized group trainings and micro-trainings, provided by area specialists;
- The shelter self-improvement teams reconvene to revisit each of the improved shelters and conduct follow-up inspections to document and learn from the improvements; and
- A strategy workshop reconvenes the shelter self-improvement group along with other victim service provider NGOs and relevant central government officials to discuss next steps and sustainability longer term plans for continued shelter improvement, strengthening referral networks, strengthening reach to victims not served by the system, for example self-returns, and any other topics that are a high priority interest of the victim service community.





ILLUSTRATIVE PROJECT TIMELINE: NATIONWIDE SHELTER SELF-IMPROVEMENT IN 12 MONTHS





SHELTER ASSESSMENT CHECKLIST FOR SHELTER MANGERS AND STAFF / AID WORKERS

Organization name:				
Shelter/facility address:				
Date of opening:				
Assessment date/number:	//_	🛛 1 st	□2 nd	□3 rd
Participants:				

Number of residents:	in the past 12 months		Isince the shelter/facility opened		
residentsi	Total #	# who are trafficking victims	Total #	# who are trafficking victims	
Girls					
(under 18)					
Adult					
women					
Boys					
(under 18)					
Adult men					

Please briefly describe how residents enter the facility (estimate %): How many walk-in? How many referrals? Where do referrals come from?

Please list all shelter staff, their age, gender, titles, certifications, and responsibilities.



SECTION 2: SERVICE AREA WALK-THROUGH

		S	cor	е		Commente
1. FACILITIES	[1 = poo	or; 5	= 0	outs	tandin	g] Comments
1. Location: Removed from red light or other hazardous areas	1	2	3	4	5	
2. Schools: Convenient to primary and secondary schools	1	2	3	4	5	
3. Neighborhood services: Convenient to hospital, police, and market	1	2	3	4	5	
 Ambience: Sufficient natural light; overall welcoming and free ambience and furnishings 	1	2	3	4	5	
 Cleanliness: Healthy noise levels; clean air and ventilation; clean water, with adequate supply for washing, bathing, drinking; clean bathrooms; clean beds and sleeping area 	1	2	3	4	5	
 Bathroom: 1 toilet for every 6 to 8 children and every 4 to 6 adults; toilets readily accessible from sleeping areas 	1	2	3	4	5	
7. Sleeping areas: 1 mattress per resident; indoor, single-sex sleeping arrangements and separation from but close proximity to staff	1	2	3	4	5	
8. Privacy: Separation of public and private spaces; locked storage space for each resident; gender and age-sensitive privacy structures, including bathing and recreation areas	1	2	3	4	5	
 Nutrition: Adequate, wholesome, and clean food; special diets for pregnant and lactating victims, and ethnic and religious needs; informational pamphlets available 	1	2	3	4	5	
10. Recreation: Adequate age- and gender- appropriate recreation and leisure time and materials; ensure recreational options for physical, educational, social, psychological, aesthetic/creative, and spiritual activities	1	2	3	4	5	
SUBTOTAL (out of 50):						



2. SAFETY, SECURITY, AND ACCESS	[1 = poo		icor = c		tanding	Comments
 Safety: Free of factors that have an adverse effect on the care of victims, such as violence, restriction of physical freedoms, or drug abuse 	1	2	3	4	5	
 Security: Protected facility, with careful scrutiny of all visitors; blocking of access by exploiters, their representatives, strangers 	1	2	3	4	5	
3. Freedom of choice: Victims have the right to choose to not meet visitors, and also to not participate in programs	1	2	3	4	5	
 Freedom of movement: Free movement within and from the facility; restrictions only in relation to a child where they have been agreed upon in the case management plan to safeguard his/her welfare 	1	2	3	4	5	
5. External access: Appropriate access to Telephone (safe communication), their children, family, and community resources; education for victims for how to keep themselves safe when in the community	1	2	3	4	5	

SUBTOTAL (out of 25):

3. MEDICAL & PSYCHOSOCIAL SERVICES	Score [1 = poor; 5 = or		Comments
 Healthcare facilities: Access to periodic, confidential check-ups by registered medical practitioners and counselors; stock of basic medicines and first aid equipment with staff trained in their use 	123	4 5	
 Medical services: Provision of adequate, confidential medical services with regular check-ups; provision of complete health assessment within a week after admission into facility; HIV test voluntary, following national standards on VCT. 	123	4 5	
 Psychosocial services: Provision of confidential, goal-based psychosocial counseling with a focus on positive self- identity and independence 	123	4 5	
 Harm reduction: Trafficked persons do not have to recount negative experiences repetitively 	123	4 5	
 Referrals: Provision of referrals for specialized medical, psychosocial, or addiction-related care as needed 	1 2 3	4 5	
SUBTOTAL (out of 25):			



4. EDUCATIONAL & VOCATIONAL SERVICES	[1 = poc		icor		tanding]	Comments
 Access to education: Victims and minor dependents helped to obtain free formal education, including free supply of books, uniforms, transport, and scholarships 	1	2	3	4	5	
 Life skills and non-formal education: Provided by properly trained personnel in lieu of or in addition to formal education, including literacy and numeracy (or referrals made) 	1	2	3	4	5	
 Timeframe: Entry or re-entry of victim into formal or non-formal education as early as possible 	1	2	3	4	5	
 Skills training: Provided to teens and adults, ideally with apprenticeships or job placement services (or referrals made) 	1	2	3	4	5	
5. Marketability: Livelihood training provides competitive, adequate skills for viable markets that are not over-saturated	1	2	3	4	5	
SUBTOTAL (out of 25):						

5. SHELTER STAFFING AND MANAGEMENT	[1 = poc		icor = c	-	tanding]	Comments
 Staff training and competency: All staff are trained and certified at a level appropriate for the operating environment 	1	2	3	4	5	
 Behavior management: Peer group discussions to mediate day to day issues such as bullying, abusive language, fighting, and exploitation 	1	2	3	4	5	
 Discipline: Discipline through constructive measures and positive reinforcement; food deprivation, confinement, and physical punishment prohibited; staff code of conduct enforced 	1	2	3	4	5	
 Client feedback: Mechanisms for clients to provide monthly feedback on services, quality and appropriateness of programs, and quality and helpfulness of staff 	1	2	3	4	5	
 Referral networks: Referral systems and coordinated linkages to quality care, training, and other services 	1	2	3	4	5	
SUBTOTAL (out of 25):						



6. CASE MANAGEMENT AND VICTIM		9	Scor	е		
EMPOWERMENT	[1 = poor; 5 = outstanding]		g] Comments			
 Right of refusal: Adult trafficked persons have the right to refuse services at any time, including before and after entrance into a shelter/facility 	1	_	3	4	5	
 Orientation: Orientation to services, facilities, procedures, and victim^B rights provided in victims^Dnative language; victims given ample time to settle in comfortably and reflect on their options 	1	2	3	4	5	
3. Family tracing: Tracing of family members, communities, and relatives keeps the victims best interests in mind	1	2	3	4	5	
 Confidentiality: Complete facial and personal identity of each victim kept confidential 	1	2	3	4	5	
 Case management system: Maintain all relevant details on victims in a confidential case management database 	1	2	3	4	5	
 6. Time-bound case management and goal- setting: Timeline for progress from emergency stage → stabilization stage → exit planning stage, with measurable baselines, goals, and timelines 	1	2	3	4	5	
7. Victim empowerment and choice: Goals and timelines are set by the trafficked person, with counseling from trained staff	1	2	3	4	5	
 Economic reintegration plan: Victims have individualized plans to meet their livelihood and financial needs 	1	2	3	4	5	
 Legal services: Assistance with obtaining relevant documentation and remedies, including compensation, through criminal, civil, and administrative channels 	1	2	3	4	5	
10. Reintegration procedures: Procedures for planned and emergency departures told to all victim residents; adults can leave freely at any time	1	2	3	4	5	
SUBTOTAL (out of 5	0):					

	SECTION 2. SERVICE AREA WALK-THROUGH: SUMMARY OF SCORES						
1.	Facilities	/ 50	4. Education	/ 25	TOTAL		
2.	Safety	/ 25	5. Shelter management	/ 25	/ 200		
3.	Med/Psychosocial	/ 25	6. Case management	/ 50	/ 200		



SECTION 3: SERVICE PROVIDER VALUES AND PHILOSOPHY

For all responses, please show or provide written documents as appropriate.

	What are the shelter's everall goals	
	What are the shelter's overall goals	
1	and vision for the trafficked	
	persons served in the shelter?	
	What programs or approaches are	
	used to promote communication	
2	between trafficking victims and	
	staff? How is trust built?	
	What strategies are used to learn	
3	the individual needs and concerns	
	of each trafficked person? How	
	are their immediate needs met?	
	How do shelter staff know or	
4	measure when a victim's specific	
	needs have been met?	
	What strategies are used to build	
5	self-esteem, empowerment, and	
2		
	resilience in trafficking victims?	
	When and how do you refer	
6	trafficked persons to other service	
	providers or organizations? Who?	
	What programs or approaches are	
	used to encourage appropriate	
7	behaviors, for example,	
	appropriate social and sexual	
	behavior?	
	What approaches are used to deal	
8	with victims who may be too	
	traumatized or unwilling to	
	participate in shelter programs?	
	How are victims positively	
9	reinforced? For what things would	
9	they be rewarded? Please give	
	examples for children and adults.	
	How do you deal with violence in	
	the shelter/facility – between	
10	victims, and between victims and	
	staff?	
	What are the most challenging	
11	elements to serving trafficked	
	persons in this shelter?	
	What are the most rewarding	
12	elements to serving trafficked	
	persons in this shelter?	



SECTION 4: SHELTER IMPROVEMENT ACTION PLAN

SUMMARY SHEET OF PLANNED IMPROVEMENTS	What? How? Who? When? What? How? Who? How much? Area requiring improvement Plan for improvement Partners completion Estimated budget involved date										
	Wh Area requiring	-	2	3	4	5	6	7	8	6	10



Shelter improvement planning sheet

Please use one planning sheet for each area requiring improvement.

1. *What?* What area requires improvement? Please provide details, and also provide the item's reference number from Section 2 or 3 – for example, 2.5.4 is Client Feedback: Section 2, Area 5, item 4.

2. How? What is the plan for improvement? Please provide details.

- 3. *Who?* What partners should be involved? What are their roles?
- 4. *How much*? What is the estimated budget for this improvement? Please provide details and a budget break-out.

5. *When*? What is the estimated date of completion for this improvement?



GUIDELINES HOW TO USE THE SHELTER ASSESSMENT CHECKLIST FOR SHELTER MANAGERS AND STAFF / AID WORKERS

The Shelter Assessment Checklist is one of the key tools of the Shelter Self-Improvement Project. The objectives of the Shelter Self-Improvement Project are:

- 1. To measurably improve shelters and other custodial facilities that serve trafficked persons in the country (and Mekong region);
- 2. To build the capacity of shelter / facility managers to maintain uniform standards for victim care and support nation-wide; and
- 3. To build a sustainable network of government and non-government shelter managers and other victim service providers who know how to maintain these uniform standards in victim care and support, and can help other victim service providers reach these standards in their programs and facilities.

The Shelter Assessment Checklist defines the uniform standards for shelter facilities and management, and allows teams of shelter managers to evaluate their own shelters as well as other shelters according to the same measurable indicators and standards. This will help managers to clearly identify key strengths and weaknesses, and to plan improvements addressing the most urgent needs.



FREQUENTLY ASKED QUESTIONS

Q1. Who should use the Shelter Checklist?

Trained shelter managers and staff, individually or in teams.

Q2. Where should it be used?

At participating reception centers, shelters, or other custodial facilities that serve a significant number of victims of human trafficking annually.

Q3. When should it be used?

At least 3 times, according to the national shelter team's schedule: first assessment, mid-project assessment, and third assessment. Approximately 6-8 months should pass between assessments, to allow for improvements to be made.

Q4. How should it be used?

According to instructions...provided here! UNIAP training can assist individual teams or groups of teams in how to use the Checklist properly.

Q5. Why should it be used?

The Checklist gives shelter managers a common "language" to speak with each other about the strengths, weaknesses, and needs of their services. This will help managers to link with each other for the purpose of exchanging good practice, helping each other improve their services and materials, and strengthening service referral mechanisms nation-wide.

Thus, it will assist in improving not only individual shelter services, but also the nation-wide standard of care given to victims of human trafficking.



SHELTER CHECKLIST SECTION 1: GENERAL INFORMATION

The purpose of Section 1: General Information is to collect key data on the shelter, including:

- Who is being served by the shelter,
- Where the intake comes from, and
- Who works in the shelter.

In Section 1, as you collect information on intake and clients, be sure to gain a strong familiarity with the following 5 areas of interest:



Client numbers. How many people are served annually, and how many are in the facility at any one time? Is the shelter over-busy? Under-busy?



Proportion of trafficked persons. Are a significant number of the clients in the facility trafficked persons? If not, who are the major clients? Is this an appropriate facility to include in an anti-trafficking program?



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Client gender. Are males and females both served? If so, throughout the assessment, be sure to look at how and when males and females are kept separate as appropriate.

Client age. Are both children and adults served? If so, how young are the children? Throughout the assessment, be sure to look at how young children, older children, and adults are provided with education, leisure, and security in an age-appropriate way.



Staffing. How does the number of shelter staff compare with the number of clients? Is the staff over-busy? Under-busy? Are they qualified to provide the services that they provide?



SHELTER CHECKLIST SECTION 2: SERVICE AREA WALK-THROUGH

The purpose of Section 2: Service Area Walk-Through is to collect key data on the shelter from walking around the shelter, observing clients and facilities, and speaking with the manager and other staff. It is important to score shelters according to the real observed situation, and not just based on discussion with shelter staff.

It is recognized that reception centers and longer-term shelters have different goals and opportunities for assisting victims of trafficking: reception centers only have a few days or weeks to provide immediate care and proper referral or reintegration, while longer-term shelters have to also consider longer-term medical, educational, and vocational options for clients. Shelter assessment team members may want to confer with each other on scoring for consensus, so that the team can provide one set of agreed feedback to the facility being assessed.

In Section 2, be sure to...

- ...look around carefully!
- ...count things, like beds, bathrooms, and other facilities
- ...look inside things (with permission), such as medicine cabinets and cabinets for case files
- ... read posters, rules, and advocacy materials
- ...ask many questions.

This will help the team gain a strong familiarity with the following 6 assessment areas:

- 1. Facilities (10 questions, 50 points total). Are the facilities safe and pleasant, providing enough privacy, sleeping space, storage space, and leisure space for the number of clients it serves? Is it too cramped or too empty? This is relevant for both reception centers and longer-term shelters.
- 2. Safety, Security, and Access (5 questions, 25 points total). Are the facilities safe and secure, while not being too restrictive of freedom of movement, and allowing clients to remain connected with the outside world and society in a safe way? This is relevant for both reception centers and longer-term shelters.
- 3. Medical and psychosocial services (5 questions, 25 points total). Does the facility ensure that client medical and psychosocial needs can be checked regularly and confidentially, and that specialist service needs can be quickly diagnosed and appropriately addressed either on-



site or elsewhere? Both reception centers and longer-term shelters have to consider immediate medical and psychosocial needs, and longer-term shelters may have to develop longer-term goal-based psychosocial care plans for clients who require them.

- 4. Educational and vocational services (5 questions, 25 points total). Does the facility ensure that client educational and vocational needs are appropriately addressed, with children being integrated into local schools and adults receiving vocational and life skills training designed to assist them reach viable post-reintegration economic goals? Reception centers may not have clients for long enough to provide educational and vocational services, but they may be able to make initial case assessments that are very useful in informing longer-term care providers.
- 5. Shelter staffing and management (5 questions, 25 points total). Is the staff appropriately trained, certified, and realistic about the services they are qualified to provide themselves versus the services they should provide to clients through referral networks? Do they seek feedback from clients on how to improve their services, and do they discipline clients appropriately? Good facility staffing and management is critical for both reception centers and longer-term shelters.
- 6. Case management and victim empowerment (10 questions, 50 points total). Is the overall environment and philosophy behind case management one of client empowerment, choice, and confidentiality? Are economic and legal needs recognized, as well as psychosocial and safety? Having support providers with an empowering attitude is critical for victims of trafficking, at every step along the way.

What is the purpose of the scores?

In Section 2, in the beginning of the shelter assessment process, it may be difficult to pick a score for some of the items: it may be hard to imagine what is a 2 versus a 3 versus a 4 should be for some of the items. Additionally, at the end of Section 2, there is a summary of scores as follows:

	SECTION 2. SERVICE AREA WALK-THROUGH: SUMMARY OF SCORES									
4.	Facilities	/ 50	4. Education	/ 25	TOTAL					
5.	Safety	/ 25	5. Shelter management	/ 25	/ 200					
6.	Med/Psychosocial	/ 25	6. Case management	/ 50	7 200					

To make scoring easier and clearer, here are some important points to remember when scoring, and when discussing scores among assessment team members:



- Reflect on the 6 summary points outlined on the previous page. Use them as guiding principles to the philosophies behind the scoring.
- Benefit from honest discussions with your shelter assessment team members. Reflect on other shelters visited; be honest about strengths, weaknesses, and areas for improvement; and, consider all of the experience of the shelter managers and workers on the assessment team.
- ✓ Do not feel bad about giving a few low scores! Lower scoring items help to highlight gaps that need to be focused on and improved, and the Shelter Self-Improvement Project often provides the financial and technical assistance to address those needs. After the shelters undergo some improvements and get re-scored, those low scores will increase and real improvements will have been made that benefit victims of trafficking.



Shelter assessment visits, Vietnam, September 2009.



SHELTER CHECKLIST SECTION 3: SERVICE PROVIDER VALUES AND PHILOSOPHY

The purpose of Section 3: Service Provider Values and Philosophy is to understand:

- The fundamental values of the service providers in the shelter,
- How they view their clients, and
- How they view their roles and relationships with clients.

In this section, there are no numerical scores, just space for writing open-ended responses. There are no right or wrong answers. However, there are empowering attitudes versus non-empowering attitudes in all social services, and the questions in Section 3 are designed to highlight empowering and non-empowering approaches being used by the shelter staff.

Assessing the key points in 12 open-ended questions can take time, and discussions between assessment team members will be valuable. Here are 3 key themes to consider when analyzing the responses of each shelter:

- Empowerment means seeing victims as individuals, and recognizing their unique needs. Do reception center staff try to assess the most urgent needs and concerns of the individual, including security or safety concerns in their family or home town that may challenge reintegration? Do longer-term shelter staff work with clients to design individualized psychosocial, social, and economic/vocational programs? To truly individualize support programs to victims, do shelters use referral networks to give clients more service options?
- ✓ Empowerment means helping victims realistically plan for their future. Are longer-term shelter staff working with clients to immediately set individualized, realistic goals for the individual's future, including social, economic, and vocational goals? Are counselors meeting with clients regularly to discuss progress toward these goals, and helping them to improve progress?
- Empowerment means not being paternalistic. Are both reception center staff and longer-term shelter staff treating clients in an age and gender-appropriate way? Are adults being treated as adults, and not as children, with full rights to decline assistance and give feedback about what they like and do not like? Remember: being sympathetic and compassionate to victims does not mean treating them like children!



SHELTER CHECKLIST SECTION 4: SHELTER IMPROVEMENT ACTION PLAN

The purpose of Section 4: Shelter Improvement Action Plan is for each facility to review the results of Sections 1, 2, and 3, including all feedback from shelter assessment colleagues, then to identify and plan:

- What are the highest priority areas requiring improvement?
- How exactly would those needs be addressed?
- Who are the partners that could be involved to address those needs?
- When could this be done, and how much would it cost?

The highest priority areas needing improvement could be specific areas with low scores in the Section 2 Checklist, or it could be more general improvements required in empowerment or shelter staff capacity and management (this would be seen in Sections 1, 2, and 3).

There are 2 general categories of improvements:

- Physical needs of the facility. Physical improvements include purchasing items such as mattresses, cabinets with locks, or age and gender-appropriate books, leisure, and sports equipment. Or, it could mean painting and decorating the shelter to make a more welcoming and pleasant ambience, or putting up a fence for privacy and security. Most of the physical needs will be identified in Section 2 of the Shelter Assessment Checklist – those items with lower scores.
- ✓ Capacity needs of the staff. Staff capacity building needs could include improvements in the empowering and individualized approaches taken by individual staff, or strengthening the facility's overall case management and shelter management systems. Capacity needs can be identified in all 3 sections of the Shelter Assessment Checklist. It is best if the management and counseling staff of several shelters could be trained together on topics of similar interest (such as advanced trauma counseling or techniques for empowerment), for 4 important reasons:
 - 1. It allows for the exchange of ideas, good practice, and useful materials;
 - 2. Everyone together can set a common standard;
 - 3. Service referral networks can be strengthened when shelter staff get together and talk about the services they offer and the needs and interests of their clients; and
 - 4. It is more fun and cost-effective!



SAMPLE SPECIALIST TRAININGS AND MICRO-TRAININGS

- O Victim interview skills and techniques
- Advanced counseling skills
- Crisis and trauma counseling and therapy
- O Data collection and forms, including development of common intake forms
- Beginning case management
- Advanced case management
- Shelter inspection and understanding international quality of care standards
- Shelter program planning and management skills
- O Understanding the laws and regulations related to trafficking victim protection
- Legal aid primer
- Report writing skills
- Strengthening referral systems and building victim support networks and communication systems
- Reintegration follow-up



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