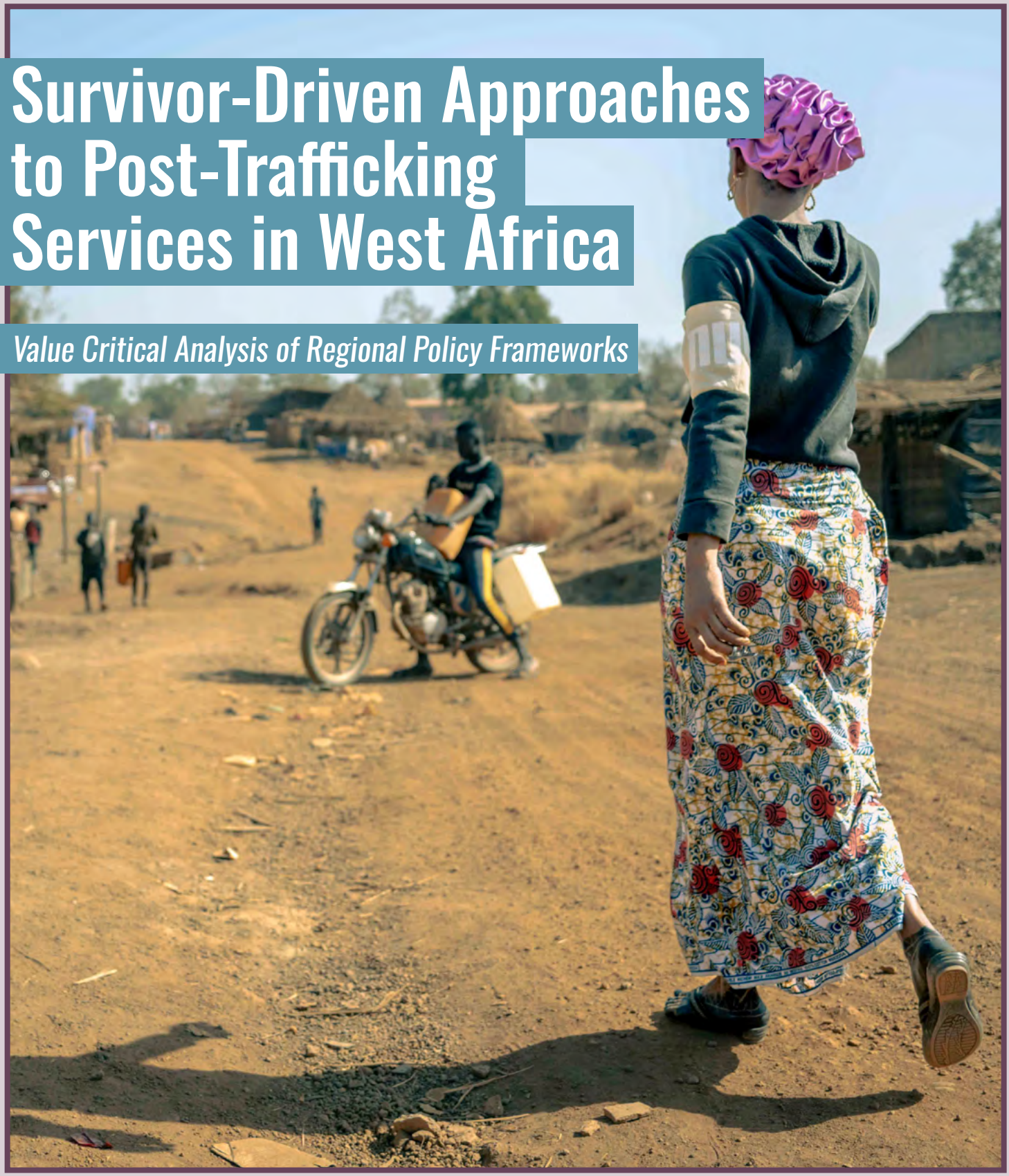
Survivor-Driven Approaches to Post-Trafficking Services in West Africa

Value Critical Analysis of Regional Policy Frameworks



CenHTRO

UNIVERSITY OF GEORGIA
School of Social Work

AFRICAN SURVIVOR COALITION
Against Human Trafficking

FOOTPRINT TO FREEDOM
"Freedom through Empowerment"

Survivor-Driven Approaches to Post-Trafficking Services in West Africa

Value Critical Analysis of Regional Policy Frameworks

August 2025

Prepared by

Center for Human Trafficking Research & Outreach (CenHTRO)-UGA

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ACRONYMS AND ABBREVIATIONS

ASC	African Survivor Coalition
ATIP	Anti-Trafficking in Persons Task Force Secretariat (Sierra Leone)
CenHTRO	Center on Human Trafficking Research & Outreach
CNLTP	Cellule nationale de lutte contre la traite des personnes (Senegal)
CNLTPPA	Comité National de Lutte contre la Traite des Personnes et des Pratiques Assimilées
ECOWAS	Economic Community of West African States
NAPTIP	National Agency for the Prohibition of Trafficking in Persons (Nigeria)
NGO	Non-Governmental Organization
TIC	Trauma-Informed Care
TIP	Trafficking in Persons
UGA	University of Georgia
USDOS	United States Department of State

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ACKNOWLEDGMENTS

We express our deepest gratitude to the survivors of human trafficking who participated in the data collection activities of this project and generously shared their lived experiences, insights, and hopes. Their voices are at the heart of this report and continue to guide our mission toward more compassionate and survivor-centered care systems.

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Finally, we would like to thank the representatives of four national West African anti-trafficking units who have contributed to this project's development. These individuals include:

- Guinea: Mr. Aboubacar Sidiki Camara, President of Comité National de Lutte contre la Traite des Personnes et des Pratiques Assimilées (National Committee for Anti-trafficking and Similar Practices)
- Nigeria: Mr. Rasheed Olatunji, Head of the Data & Statistics epartment at National Agency for the Prohibition of Trafficking in Persons
- Senegal: Mrs. Awa Ndour, Head of Programs at Cellule Nationale de Lutte Contre la Traite des Personnes (National Unit for the Fight Against Human Trafficking)
- Sierra Leone: Mr. Dehunge Shiaka, Executive Director of Anti-Trafficking In Persons Secretariat

Their contributions to project design, contextualization, and field engagement have been essential to ensuring that this work is regionally grounded, locally relevant, and survivor-informed.

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- Chylian Ify Azuh
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- Itohan Okundaye
- Missy Resilience
- Hassan
- Mercy Obade

Responsibilities on the Project

CenHTRO

CenHTRO provided coordination of all project activities, including organizing meetings, providing technical support for the analysis of the data collected from the surveys and focus groups, and co-authoring the report of these findings. CenHTRO was also responsible for ensuring that high ethical standards were upheld with respect to engaging with survivors. Additionally, CenHTRO produced policy recommendations and advocacy tools based on the assessment findings and with the inputs and review of ASC.

ASC

ASC leveraged their network of connections to survivors with lived experience across the West Africa region to conduct surveys and focus groups to gain insight from survivors on the status of trauma-informed practice and gaps in the services and care they received. ASC engaged in the process of analyzing the feedback provided through the surveys and focus groups, with the technical support of CenHTRO, to identify key values and themes provided by study participants. ASC produced two comprehensive analysis reports, one on survey data and one on focus group data, which can be found in this annex. The findings of these reports are used as the foundation of this policy analysis.

National Task Force Leads

The national anti-trafficking task forces of four West African States engaged in this project by determining project direction and objectives and providing consultation and recommendations. This included the representation of Guinea's Comité National de Lutte contre la Traite des Personnes et des Pratiques Assimilées (National Committee for Anti-trafficking and Similar Practices) by Mr. Aboubacar Sidiki Camara, Sierra Leone's Human Trafficking Secretariat by Mr. Dehunge Shiaka, Senegal's Cellule Nationale de Lutte contre la Traite des Personnes (National Unit for the Fight Against Human Trafficking) by Mrs. Awa Ndour, and Nigeria's National Agency for the Prohibition of Trafficking in Persons (NAPTIP) by Mr. Rasheed Olatunji.

KEY TERMS

Trafficking in Persons

"the act of recruiting, harboring, transporting, providing, or obtaining a person for compelled labor or commercial sex acts through the use of force, fraud, or coercion. Under the TVPA[1] and consistent with the UN (United Nations) Protocol to Prevent, Suppress and Punish Trafficking in Persons (Palermo Protocol), individuals may be trafficking victims regardless of whether they once consented, participated in a crime as a direct result of being trafficked, were transported into the exploitative situation, or were simply born into a state of servitude. Despite a term that seems to connote movement, at the heart of the phenomenon of trafficking in persons are the many forms of enslavement, not the activities involved in international transportation." (DoS Award Stipulations, pp 8-9).

Survivor of Human Trafficking[2]

An individual who previously experienced trafficking in persons, as defined by this document, but is not currently a trafficking victim.

Victim of Human Trafficking

An individual who is currently experiencing trafficking in persons, as defined by this document. It can also refer to someone who continues to manifest the effects of trafficking.

At-Risk of Trafficking[3]

Possessing personal/demographic characteristics that have been identified as placing one at risk for trafficking and/ or living in a community with characteristics identified as increasing residents' trafficking risk

Sex Trafficking

"the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act" (TVPA, section 103 (8), amended as 22 U.S.C. 7102).

Forced Labor[4]

"labor obtained by any of the following methods: recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery" (DoS Terms and Definitions, pg. 21). Note, the "force, fraud, or coercion" requirement does not have to be met for persons under the age of 18 in order for the activity to be defined as trafficking.

Child Trafficking[5]

"the recruitment, transportation, transfer, harboring or receipt of a child for the purpose of exploitation shall be considered 'trafficking in persons' even if this does not involve any of the means set forth in subparagraph (a) of this article [means set forth in Article 1, subparagraph (a) of the Palermo Protocol: "the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation."]. Thus, the recruitment, transportation, transfer, harboring, or receipt of a person under the age of 18 for any form of exploitative labor or commercial sex act is considered child trafficking.

Debt Bondage[6]

"the status or condition of a debtor arising from a pledge by the debtor of his or her personal services or of those of a person under his or her control as a security for debt, if the value of those services as reasonably assessed is not applied toward the liquidation of the debt or the length and nature of those services are not respectively limited and defined" (TVPA, section 103, amended as 22 U.S.C. 7102).

Involuntary Servitude

"includes a condition of servitude induced by means of— (A) any scheme, plan, or pattern intended to cause a person to believe that, if the person did not enter into or continue in such condition, that person or another person would suffer serious harm or physical restraint; or (B) the abuse or threatened abuse of the legal process" (TVPA, section 103, amended as 22 U.S.C. 7102).

4P Framework[7]

Emphasized through both the United States Department of State and the United Nations, there are four major components of comprehensive anti-trafficking work, each starting with "P": Prevention, Protection, Prosecution, and Partnership."

Trauma[8]

Trauma is the result of an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. (SAMHSA)

Trauma-Informed Care

An approach to care interventions that is grounded in an informed understanding of what trauma is and how it may uniquely present itself in the social, neurological, biological, and psychological development of individuals. Trauma-Informed Care intentionally avoids circumstances that would result in re-traumatization. (UK Gov)

Survivor-Centered Engagement[9]

A program, policy, intervention, or product that is designed, implemented, and evaluated with intentional leadership, expertise, and input from a diverse community of survivors to ensure the program, policy, intervention, or product accurately represents their needs, interests and perceptions (US Advisory Council on Human Trafficking)

[1]*Victims of Trafficking and Violence Protection Act of 2000, Pub. L. No. 106–386, 114 Stat. 1464 (2000), codified as amended at 22 U.S.C. §§ 7101–7114.*
[2]*U.S. Department of State, Monitoring, Evaluation, and Learning Award Stipulations for the Office to Monitor and Combat Trafficking in Persons (J/TIP), pp. 8–9 (2022).*
[3]*U.S. Department of State, J/TIP Monitoring, Evaluation, and Learning Award Stipulations, pp. 8–9 (2022)*
[4]*U.S. Department of State, Monitoring, Evaluation, and Learning Award Terms and Definitions, p. 21 (2022).*
[5]*Palermo Protocol*
[6]*Victims of Trafficking and Violence Protection Act of 2000, § 103 (8), as amended, codified at 22 U.S.C. § 7102(8)*
[7]*Victims of Trafficking and Violence Protection Act of 2000, Pub. L. No. 106–386, 114 Stat. 1464 (2000), codified as amended at 22 U.S.C. §§ 7101–7114*
[8]*SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884, Rockville, MD: SAMHSA, 2014.*
[9]*U.S. Department of Health and Human Services, OTIP. Guiding Principles for Working with Survivors of Human Trafficking*

EXECUTIVE SUMMARY

This report applies the findings of a regional survivor-led assessment aimed at evaluating trauma-informed protective services for victims of human trafficking in West Africa to analyze regional policy frameworks aimed at addressing the issue. The study was conducted through a partnership between the Center on Human Trafficking Research & Outreach (CenHTRO) and the African Survivor Coalition (ASC), with contributions from national anti-trafficking task forces across four countries (Guinea, Nigeria, Senegal, and Sierra Leone) and input from survivor advocates.

The policy analysis draws on data collected through surveys and focus group discussions (FGDs) involving 21 survivors from nine West African countries, as well as Cameroon. It examines survivor experiences, recommendations, and values in relation to protective services, and explores how trauma-informed care (TIC) principles are, or are not, reflected in current systems through the lens of existing policy structures.

The intention of this report is to center the interests of those with direct experiences attempting to receive post-trafficking services in the West Africa region, survivors, in the analysis of the policy frameworks that dictate and highlight future directions for protective care of survivors. Due to the relatively small sample size, the intention is not for this data to be generalizable, but to provide a depth of understanding that has not previously been presented or considered in the establishment of program structure and policy provisions.

To our knowledge, a project of this nature, taking the format of a value-critical policy analysis where survivors of human trafficking themselves have provided the set of value criteria to evaluate anti-trafficking policy frameworks, has not previously been undertaken. With that, we sought to engage in the process of attempting a process that did not come with much of a guidebook. We hope that this report may encourage others to engage in this project and continue building on this format of policy analysis in other contexts and on other issues.

KEY FINDINGS

The key findings of this value-critical analysis of regionally applicable human trafficking policy frameworks for West Africa are as follows:

1. Current global, continental, and regional policy frameworks with application to the West Africa region most consistently and substantially emphasize measures related to the survivor values and trauma-informed principles of (1) safety and (2) legal justice.

2. Of the 24 survivor values used to analyze the five policy frameworks in this report, there were 9 survivor values without any correlations to policy provisions.

3. Of the six trauma-informed care principles also used for analysis, there was one principle without any correlations to policy provisions.

4. The one TIC principle with no policy correlations, which was also emphasized in more than one survivor value, is that of "peer support."

5. There were four survivor-values with correlations to African policy frameworks, whether continental, regional, or both, which were not also correlated to the global policy framework, the Palermo Protocol.

6. Where policy provisions are present, gaps in accessibility or implementation persist.

PROJECT OVERVIEW

The scope of this project was determined through the culmination of various inputs, including: (1) findings from CenHTRO's research and programming in the West Africa region; (2) objectives outlined in the most recent agreement on regional priorities, the ECOWAS Freetown Roadmap; (3) responses to an assessment questionnaire completed by 10 West African states; and (4) conclusions from the cohort launch and strategizing meeting in Abuja, Nigeria in March of 2024.

Project Objectives
The primary objectives of this initiative are threefold:

1. To prioritize and center the expertise and values of survivors with lived experience in service provision frameworks, as well as in national and regional policy discussions.

2. To improve practices and harmonize efforts for trauma-informed protective care of victims across the region.

3. To enhance cross-border collaboration and communication frameworks.

Project Outputs
This report, titled "Values of Human Trafficking Survivors on Trauma-Informed Protective Services Across West Africa," is one of two primary outputs of the project. Each output serves a distinct purpose and audience:

1. Values of Human Trafficking Survivors on Trauma-Informed Protective Services Across West Africa

This report presents findings from a values-based assessment of survivors' experiences with trauma-informed care and protective services in the region. Target Audience: Protective service providers, including social workers, law enforcement, and national-level protective service entities.

2. Survivor-Led Value-Critical Policy Advocacy on Trauma-Informed Protective Services Across West Africa

This output focuses on translating survivor-identified values into actionable policy recommendations through survivor-led advocacy and stakeholder engagement. Target Audience: National and regional policymakers, government stakeholders, and researchers.

METHODOLOGY

Description
This assessment was carried out through a survivor-led, trauma-informed, and participatory research process designed to center the voices and values of survivors of human trafficking across West Africa. The methodology combined qualitative and quantitative methods and prioritized ethical engagement throughout all stages of data collection and analysis.

Study Design and Objectives
The purpose of the study was to assess the extent to which protective services in West Africa reflect trauma-informed care (TIC) principles, and to elevate survivor-defined values to inform service provision and policy development. The study was part of a broader initiative coordinated by CenHTRO in collaboration with the African Survivor Coalition (ASC), with support from national anti-trafficking task forces and survivor networks.

Data Collection Methods
Data was collected using a mixed method approach. It included:

- A structured survey questionnaire, co-developed by ASC and CenHTRO, aimed at collecting survivor perspectives on protective services received after their trafficking experiences.

- Focus Group Discussions (FGDs), conducted virtually across ASC's survivor networks, aimed at gathering in-depth feedback and contextual reflections on trauma-informed care experiences.

Sample and Participants
The study engaged 21 survivors of human trafficking from nine West African countries and one central African country (Cameroon). The survivors were part of ASC's network of survivor-led organizations. Participants were selected to reflect diverse trafficking experiences, including both labor and sexual exploitation, and represented a mix of genders, ages, and countries of origin.

Participation was voluntary, and survivors provided informed consent before engaging in any data collection activities. No financial incentives were offered beyond transport or participation allowances consistent with ethical research practice.

Limitations and Ethical Considerations

Sample Size
The analysis is based on a small sample of 21 survivors from both the focus group discussion and the survey that participated in the research, which limits statistical generalizability but offers deep insight into lived experiences.

Potential Biases
There may be underrepresentation of male, LGBTQ+, or disabled survivors. Additionally, although survivor experiences are each unique through each step of victimization and recovery, all of the participants in this study now find themselves connected to the ASC network, which may or may not reflect factors associated with the care and recovery they were able to receive.

Ethical Considerations
The study was designed and implemented in alignment with global ethical standards for working with vulnerable populations. Participation was entirely voluntary and anonymous, with informed consent embedded in the survey design and the option for survivors to remain anonymous or use Pseudonyms, if preferred. Trauma-informed engagement principles guided all interactions and data analysis, ensuring respectful handling of survivor narratives. The confidentiality and anonymity of responses were strictly upheld, and psychosocial support was made available where needed. Survivors retained the right to withdraw at any time. All engagements with survivors were led or facilitated by ASC staff trained in survivor-centered approaches and supported by CenHTRO's technical team.

Due to the small sample size, informal assessment format with the African Survivor Coalition network members, and lack of intention for this study to be broadly generalizable, International Review Board approval was not sought for this project.

Data Analysis
Survey and FGD data were reviewed and thematically analyzed by ASC's research team, with support from CenHTRO. Responses were coded to identify key values, recurring patterns, and regional trends. Survivor quotes and themes were categorized under the six core principles of trauma-informed care (SAMHSA framework). The Values Table used in this report was developed based on this thematic analysis.

This collaborative analysis process was iterative and included validation checks by survivor leaders to ensure that findings were accurately represented and respectful of participant experiences.

LITERATURE REVIEW & CONTEXTUAL FRAMEWORK

Trafficking in persons and Trauma-Informed Care

Both the phenomena of trafficking in persons and the practice of trauma-informed care are relatively new fields of scientific study and social emphasis. Trafficking in persons was not defined as an independent and distinctive issue until the year 2000, with the establishment of the United Nations' Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children (Palermo Protocol), as part of the broader UN Convention on Transnational Organized Crime. In a similar way, the practice of integrating trauma awareness into service provision was not directly introduced as an idea until the United States' Substance Abuse and Mental Health Services Administration (SAMHSA) began to incorporate the need for trauma to be understood in mental health and substance abuse treatment facilities through updated policies in 1994. By the early 2000s, this concept of adjusting care in response to trauma-awareness began to spread across various fields (schools, healthcare, child welfare, and criminal justice) and across the globe. However, it was not until 2014 that SAMHSA coined the term "Trauma-Informed Approach" and established a direct framework for what that entailed in the context of their work. As part of this, six widely recognized principles emerged as core-tenants of trauma-informed care and are used within this analysis.

The Landscape of Anti-Trafficking in Persons Movement Building, Research, and Practice.

As outlined in the Palermo Protocol, trafficking in persons can be defined as, "the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation" (OHCHR, 2000). The enactment of the Palermo Protocol and the adoption of it by UN member states, largely marks the beginning of global efforts to address and combat the scourge. 2025 marks 25 years since the Palermo Protocol's establishment, and in the 2.5 decades that have followed, great strides have been made in research, practice, and policy. The global movement to address the phenomena has gained significant momentum and has garnered significant backing from nation states and civil societies across the globe (Zhang, 2022).

Human Trafficking Research

In research, the issue of human trafficking has successfully moved beyond the stage of needing to justify whether it is a problem worthy of specific scientific inquiry and tailored policy responses (Zhang, 2022). Zhang describes the current status of human trafficking research as having moved from infancy into adolescence (Zhang, 2022). It is now well understood that the magnitude and complexity of the issue require specific scientific attention and there is much work to be done to continue to establish consistency in how the issue is defined, understand appropriate sampling frames, improve prevalence methodologies, and build upon evidence-based best practice for caring for those who are victims and survivors of the scourge (Barrick & Pfeffer, 2021; Tyldum & Brunovskis, 2005). However, because these areas are currently underdeveloped, despite knowing that the issue of trafficking in persons is significant and worthy of serious attention, there are vast inconsistencies in data and estimates of prevalence.

Understanding the intersection of good data and best practice is critical to adequately address trafficking in persons. Data is needed to inform all relevant actors, including but not

limited to service providers, healthcare providers, law enforcement personnel, courtroom actors, and policy makers, on how to respond to human trafficking within their area of responsibility and expertise (Barrick & Pfeffer, 2021). Victims of trafficking depend on interventions and action from these entities to be well-informed and able to provide targeted responses in prevention, protection, and prosecution efforts (Barrick & Pfeffer, 2021).

Impact of Human Trafficking on Victims

Survivors of human trafficking exist in all parts of the world and represent all genders, ages, races, ethnicities, countries, regions and religions (Steiner et al., 2018). The impact on individuals who have been victimized can be detrimental in a multitude of ways. Human trafficking leaves victims with a significant and often long-lasting toll on their psychological, physical, and psychosocial wellbeing (Chambers et al., 2024; Goldberg et al., 2017; Lederer & Wetzel, 2014). In addition to physical health concerns, victims of trafficking experience increased rates of mental health challenges and diagnoses, including depression, PTSD, suicide, and physical harm from violence which require coordinated care and attention throughout their post-trafficking experiences (Barrick & Pfeffer, 2021; Hopper & Gonzalez, 2018; Okech et al., 2018).

With this, human trafficking is now widely understood to be both a global public health concern (Miller & Lyman, 2017) and social justice concern (Schroeder et al., 2023; Okech et al., 2017). The public health lens provides emphasis on prevention measures and interventions that address physical and mental well-being (Schroeder et al., 2023; Greenbaum, 2020; Zimmerman & Kiss, 2017).

Trauma-Informed Care and Application in Post-Trafficking Services

The effects of trauma extend well beyond the immediate psychological and physical effects that may be most apparent or anticipated (Kimberg & Wheeler, 2019). In fact, experiencing trauma can have such an effect that it can continue to alter an individual's biology and behavior over the course of the rest of their lives and can have a profound impact on interpersonal and intergenerational dynamics (Kimberg & Wheeler, 2019). How an individual responds to trauma is complex, unique, and dependent on a multitude of factors including the care, resources, understanding, and support they receive or have access to (Kimberg & Wheeler, 2019).

Across human service systems globally, it is understood that service recipients often have high rates of past and/or current trauma (Yatchmenoff, Sundborg, & Davis, 2017; Hopper, Bussuk, & Olivet, 2010). Additionally, as understandings of trauma have continued to develop, it has also become increasingly understood that many social service settings, programs, and processes can be re-traumatizing to the trauma-survivors attempting to receive them (Yatchmenoff, Sundborg, & Davis, 2017; Bloom & Farragher, 2011).
Understanding the trauma experienced by survivors of human trafficking is critical to implementing the most effective forms of care for their individualized, unique, and complex needs (Chambers et al., 2024). Additionally, utilizing a trauma-informed approach when providing services to survivors of human trafficking allows for a strengths-based and empowerment focused framework to be centered which should ideally build towards long-term and sustainable modes of support for survivors (Steiner et al., 2019). This sustainability requires that service providers understand that the needs of survivors of human trafficking may shift and change over time, and in fact, are likely to (Steiner et al., 2019; Heffernan & Blythe, 2014). As survivors reintegrate and recover following experiences of trafficking, they may move through stages of various physical, emotional, psychological states.

Common Immediate, Short-term, and Long-term Support Needs of Survivors

Immediately following exiting trafficking circumstances, needs of survivors often include

emergency shelter or housing, food and material resources, and safety measures. Shorter-term needs, after immediate needs are met, may include reconnecting with family or safe social support systems, engaging in mental health services or receiving medical treatment (Steiner et al., 2019; Clawson & Dutch, 2008). Long-term needs for survivors of human trafficking may entail employment opportunities and support, housing support, educational opportunities, life and skillset training, legal and/or immigration assistance, and continued safety and protection measures (Balfour, 2020; Steiner et al., 2019; Busch-Armendariz, Nsonwu, & Heffron, 2011). With each of these services or supports for every individual, it is critical that survivors are able to voice and prioritize their individual needs and desire for support.

There is growing consensus in literature on reintegration programs for survivors of trafficking which indicates that a continuum of care model is the most effective framework for addressing the long-term needs of survivors (Balfour, 2020; Macy & Johns, 2011; Sapiro et al., 2016). A continuum of care model coordinates cross-sector services, across both system and service delivery levels, needed by survivors into a comprehensive plan for care that is individualized and provided in the most appropriate modes and settings (Balfour, 2020; Stroul & Friedman, 1986). While this is frame may be understood to be the most beneficial to survivors, it is well understood that survivors experience significant gaps in services indicating that effective continuums of care have not been implemented (Balfour, 2020).

The Current State of Trauma-Informed Post-Trafficking Services

Currently, very little research exists that identifies evidence-based practices which have been demonstrated to adequately support survivors of trafficking in persons (Schroeder et al., 2023; Steiner et al., 2019; Gozdziak & Collett, 2005; Weitzer, 2014; Zhang, 2012). The research that does exist in this area is largely focused on child sex trafficking in western-centric settings, predominantly in the United States (Steiner et al., 2019; Desyllas, 2007; Hodge, 2014).

Developing trauma-informed practices takes significant dedication from agencies and service entities to educate and train their practitioners, restructure service modalities, and re-evaluate measures of successful service administration (Ladd & Weaver, 2018; Hopper, Bassuk, & Olivet, 2010). Incorporating a trauma-informed lens to social service provision may slow procedures down and take a greater amount of follow-up, which may feel counter-intuitive to existing practices. However, taking the extra time and attention is the only way to ensure that survivors are able to have agency over their healing and have their unique needs met in ways that best assist reintegration and resist re-exploitation (Ladd & Weaver, 2018).

In recent years, it has become increasingly clear that collaboration amongst service providers is an essential gap that currently hinders the comprehensive support and long-term success that survivors have access to (Steiner et al., 2019). In order for care services to address the complex needs of survivors of human trafficking, multiple providers with various areas of expertise or practice are usually needed. However, communication, collaboration, and continuation of care models are rarely coordinated across providers. In fact, research has shown that social services, victim services, criminal justice entities, healthcare providers, and other involved actors do not participate in inter-agency collaboration to any extent (Steiner et al., 2019; Jones & Lutze, 2016). Where it does occur, collaboration is often extremely limited (Steiner et al., 2019; Jones & Lutze, 2016).

Although the goal of services is to set survivors up for long-term resilience through reintegration and the ability to avoid revictimization, there is currently no explicit consensus on what outcomes are needed for the ultimate recovery of survivors of human trafficking (Jannesari et al., 2023). In response to this, in 2023, Jannesari et al. developed the Modern Slavery Core Outcome Set after conducting extensive reviews on intervention outcomes. The 7 final

outcomes selected by survey participants included: "long-term consistent support," "secure and suitable housing," "safety from any trafficker or other abuser," "access to medical treatment, "finding purpose in life and self-actualization," "access to education," and "compassionate, trauma-informed services" (Jannesari et al., 2023).

Strengths-based Strategies for Post-Trafficking Services

Trauma-informed care and strengths-based approaches are inherently interconnected with the idea being that all strengths-based approaches require trauma awareness, and the ultimate goal of incorporating trauma-informed approaches would be to establish strengths-based empowerment of the individual in the long-term. Strengths-based strategies require that the service provider walk side-by-side with the survivor, providing collaborative accompaniment throughout healing processes, rather than dictating dynamics or care procedures (Ladd & Weaver, 2018). This strengths-based accompaniment framework allows the survivor and their service providers to work together to explore the survivor's strengths and determine the best steps for long-term success of the goals the survivor is hoping to achieve (Ladd & Weaver, 2018; Collins et al., 2013).

Timeline of Policy Actions to Combat Trafficking in Persons

2000
United Nations (UN) establishes the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (The Palermo Protocol), a supplementary agreement to the UN Convention on Transnational Organized Crime

2001
Economic Community of West African States (ECOWAS) establishes the Declaration on the Fight Against Trafficking in Persons, in recognition of the Palermo Protocol. The Initial Plan of Action against Trafficking in Persons was also created

2002-2003
The intended implementation period for the Initial Plan of Action against Trafficking in Persons

2006
The European Union and the African Union establish the Ouadougou Action Plan to Combat Trafficking in Human Beings, Especially Women and Children

2006
ECOWAS and ECCAS (Economic Community of Central African States) adopt a bi-regional plan of action following a conference held in Abuja between the two regional economic communities (RECs).

2008-2011
Implementation period for the bi-regional Plan of Action.

2018-2022
Slight revisions to the Plan of Action were made, and the implementation period was extended.

2023
The "Freetown Roadmap" was signed by ECOWAS member countries to strengthen regional cooperation to counter trafficking in persons.

Below is a table of the current, most comprehensive, national-level legislation in place to address trafficking in persons in each ECOWAS member state.

ECOWAS Member States Anti-Human Trafficking Legislation

Member State	Year	Title of Legislation
Benin	2006	Act Relating to the Transportation of Minors and the Suppression of Child Trafficking
Burkina Faso	2008	Trafficking in Persons Law
Cabo Verde	2015 amendment	Article 271-A of the Penal Code
Cote d'Ivoire	2016	Law No. 2016-111 on the Fight Against Trafficking in Persons
The Gambia	2007	Trafficking in Person Act, 2007
Ghana	2005; amended 2009	Human Trafficking Act, 2005 (Act 694)
Guinea	2024	Law to Combat Human Trafficking and Similar Practices in Guinea
Guinea-Bissau	2011	Public Law 12/2011, Law to Prevent and Combat Trafficking in Persons
Liberia	2005; amended 2021	Revised Act to Ban Trafficking in Persons Within the Republic of Liberia
Mali	2012	Law 2012-023 Relating to the Combat against Trafficking in Persons and Similar Practices, as amended
Niger	2010	Order No. 2010-86 on Combating Trafficking in Persons
Nigeria	2003; amended 2005 & 2015	Trafficking in Persons Law Enforcement and Administration Act
Senegal	2005	Law to Combat Trafficking in Persons and Related Practices to Protect Victims
Sierra Leone	2022	Anti-Human Trafficking and Migrant Smuggling Act of 2022
Togo	2015	Penal Code, Articles 317-320

What is a Value-Critical Policy Analysis

Value Critical Policy Analysis is a framework that was re-established by Chambers and Wedel in 2005 as an adaptation of Martin Rein's 1976 value-critical method. Martin Rein's work significantly impacted the field of social policy through his emphasis on the critical nature of values, beliefs, and framing when it comes to social issues. Rein's work was particularly focused on social policies seeking to address retirement and the welfare state within the context of the United States of America.

Rein sought to dig deeper into the theory-fact-value relationship, which is at play in how social policies are thought about, created, and acted upon (From Policy to Practice, 1983). Rein noted that much of conventional thought functioned through the separation of fact and value, seen as the way in which "reality can be understood without distortion" (From Policy to Practice, 1983). In scientific research and practice, as well as in policy practice, facts and values are largely disjointed. Value-neutral approaches, emphasizing objectivity, are often framed as the most intellectually, technically, and strategically important.

However, in the realm of social policy and human service practice, Rein argued that facts need to be understood through the lens of the values of those the policies and practices seek to serve, rather than being solely determined by metrics or the perspectives of those observing the issues from a strictly scientific perspective. This hints at the reality that although "value-neutral" approaches are often framed as being the most credible, value-neutrality does not actually exist. Instead of analysis being framed in terms of the values of the populations impacted by the policy, the analysis will inevitably be framed in the values of the analyzer, the values of the policymakers, or the values of other institutions, organizations, or individuals tasked with working on the issue at hand.

Building on this, Donald Chambers and Kenneth Wedel continued to adapt Rein's 1976 value-critical method of policy analysis in 2005. Drawing on Rein's foundation, Chambers and Wedel continued to emphasize the importance of considering values and ethical considerations when evaluating social programs and policies. They sought to acknowledge that while policy analysis is frequently driven by value-neutral objectives, the policies themselves are established by individuals or groups who define and frame social problems and design solutions according to their own set of values and intentions for resolution. Taking a value-critical approach allows for the acknowledgement of both the values embedded in the policy itself, as well as the values of the analyst.

Chambers and Wedel break down that there are three forms of value-centric approaches to policy analysis. These include: (1) value-analytic: describes what a policy is but does not veer into what it "should" be; (2) value-committed: starts with a strongly held position on how things should be and views the policy through that lens; and (3) value-critical: uses a value-based criteria to highlight policy programs and features (Chambers & Wedel, 2005).

Chambers and Wedel believe that of these three, the value-critical approach is the one that is most essential and effective in the realm of social work research and policy practice, because it requires that the social worker, "...analyze for multiple competing values and frames of reference, to make hard choices among them, and take even their own frames and values into question as they confront the reality of both the social world in general, the world their clients/consumers live in, and the daily operating world of organizations, laws, and public expectations (Chambers & Wedel, 2005)." Chambers and Wedel ultimately argue that an important part of any social policy analysis is the judgement of whether it is just, fair, and appropriate to the target population.

The framework for value-critical policy analysis that Chambers and Wedel developed consists of five key steps. These include:

1. Framing the Issue
2. Identifying Value Criteria
3. Evaluating Policy Frameworks
4. Considering Unintended Consequences
5. Making Recommendations

This report will follow this model as it evaluates five major policy frameworks in place to address trafficking in persons in the West Africa region, according to value criteria obtained through surveys and focus group discussions from survivors with lived experience across the region.

Framing the Issue

As aforementioned, the issue of trafficking in persons is a phenomenon that has a relatively recent history of being understood as an independent issue with a global definition, as found in the Palermo Protocol. Even still, there are discrepancies in definitions, frames, and criteria used in clinical and legal settings across contexts and countries which result in differing understandings of the issue itself and different measurements of its prevalence.

The definition of trafficking in persons within the Palermo Protocol is recognized within the ECOWAS Declaration on THE FIGHT against Trafficking in Persons stating that the heads of states and government of the Economic Community of West African States solemnly declare, amongst other notions, that they are…

> *"Aware that the crime of trafficking in persons as defined in the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children, addresses the transnational and trans-regional dimension of this crime, but that similar acts can also occur within the States" (ECOWAS, 2001).*

Once more, and comprehensive in length, the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children defines trafficking in persons as,

> *"(a)…the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs;*
> *(b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used;*
> *(c) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered "trafficking in persons" even if this does not involve any of the means set forth in subparagraph (a) of this article;*
> *(d) "Child" shall mean any person under eighteen years of age."*

This definition within the Palermo Protocol, which is then used to frame the issue within ECOWAS policy documents, is frequently broken down into three components which must be simultaneously present, excluding circumstances involving children. The three key elements of trafficking in persons are: (1) the act, (2) the means, (3) the purpose. In circumstances with children, the act alone is justification.

Framing the definition of trafficking in persons according to this three-component-breakdown can be further viewed in this way:

- The Act can be understood as the recruitment, transportation, transfer, harbouring, or receipt of persons.
- The Means can be understood as which method is used to accomplish the act. This includes threats, coercion, abduction, fraud, deception, abuse of power or vulnerability, or the giving/receiving of payments to gain control over another person.
- The Purpose is exploitation, whether that is sexual exploitation, forced labor, slavery or servitude.

Framing Trafficking through lenses of Vulnerability and Exploitation

Centering victims and survivors within the frame of the issue of trafficking in persons requires the acknowledgement of the interconnected nature and presence of both vulnerability and exploitation. As exemplified by the definition of trafficking and persons above, and the act-means-purpose breakdown, it is clear that the presence of the intention to exploit is a central and defining feature of the crime. Exploitation can be understood, according to Cambridge Dictionary, as, "the act of using someone or something unfairly for your own advantage."

Those who are at risk of being exploited or who have been exploited by someone else have been made vulnerable. Vulnerabilities to trafficking are vast and there is no singular, agreed upon comprehensive list of factors that contribute. However, as research and programming on human trafficking continue to be backed by greater amounts of data, trends in vulnerabilities have begun to be highlighted.

For instance, some of the most widely recognized vulnerabilities to trafficking in persons include:

1. Poverty and lack of access to economic resources and opportunities
2. Lack of or limited access to education
3. Isolation or lack of social supports or networks
4. Migration, asylum seeking, or displacement
5. Housing instability or insecurity
6. Humanitarian crises or residing within conflict zones
7. Past trauma, abuse, or neglect

Again, while vulnerabilities are complex and there is not one singularly defined list, understanding some of these prevalent risk factors allows for an understanding that those who have been victimized by human trafficking likely also have unique and complex social and personal needs that must also be addressed in post trafficking services to avoid the risk of re-trafficking or re-exploitation.

Differentiating Human Trafficking from Other Crimes

Human trafficking can be frequently associated with other crimes related to smuggling, migration, and various forms of abuse. While smuggling, migration, physical or sexual abuse, prostitution, domestic violence, and gender-based violence can all co-occur in instances of trafficking in persons, they are not to be mistaken as one in the same issue or as criteria constituting trafficking. Trafficking does not require movement across borders or even internally within a country.

Of particular note, the issues of trafficking in persons and smuggling of migrants are frequently consolidated in government responses to the scourges. Similar institutional entities may be tasked with addressing both

issues, and occasionally, policies are enacted that simultaneously lay the legal frameworks for both issues. This can be witnessed, for instance, in Sierra Leone's 2022 law, which is the Anti-Human Trafficking and Migrant Smuggling Act. Within the act, the two issues are given distinction, but they are addressed together.

While both crimes have globalized parameters that can be traced back to the United Nations Convention on Transnational Organized Crime, there are key distinctions. For one, as just discussed, trafficking in persons involves exploitation as a defining characteristic. In instances of migrant smuggling, exploitation of the migrant may or may not occur, but is not a required criterion. Inversely, a defining feature of migrant smuggling is movement, especially across borders, which may or may not occur in instances of trafficking, but is not a required criterion.

The UN Protocol against the Smuggling of Migrants by Land, Sea and Air, a supplemental protocol of the same nature as the Palermo Protocol, defines migrant smuggling as, "the procurement, in order to obtain, directly or indirectly, a financial or other monetary benefit, of the illegal entry of a person into a State Party of which the person is not a national or permanent resident." Put more simply, the smuggling of migrants involves making money by moving people across borders without the proper legal permission to do so.

The purpose of making this distinction clear is to specify the centrality of exploitation in trafficking and clarify that movement across national borders is not a required criterion.

Further distinctions can also be made to differentiate trafficking in persons from other correlated, but distinctive acts. This involves issues such as prostitution and gender-based violence. Although trafficking can involve prostitution and gender-based violence, not all circumstances of those two issues constitute trafficking in persons, and not all situations that constitute trafficking in persons include prostitution or gender-based violence.

Survivor Framing of Justice and Empowerment Post-Trafficking

As part of the Focus Group Discussions conducted by African Survivor Coalition, survivors shared their personal definitions of both justice and empowerment. As the concepts they shared go well beyond only legal or financial measures, their responses highlight the importance of framing service modalities according to what is most impactful to those receiving services. It also provides further glimpses into how survivors conceptualize and frame their experiences of trafficking in persons. Below are quotes from survivors who participated in a focus group discussion on what justice and empowerment mean to them.

"Justice is to see my trafficker being held accountable and all those that exploited me being brought to book. Empowerment means for me to be able to make my own choices."

"Justice is fighting for others, and in justice, there is empowerment."

"Empowerment means having the resources and the confidence to make my own choices, whether it's starting a business, going back to school, or advocating for others. It's about not being seen as a victim, but as a leader with potential."

In their analysis, African Survivor Coalition noted that participants, "...articulated their vision for justice not only as legal redress but also as reclaiming dignity and human rights." ASC also noted that, "similarly, empowerment was seen as more than just financial independence, it was also about regaining self-worth and having a voice in the decisions affecting their lives."

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Identifying Value Criteria

Through the year-long partnership between the Center on Human Trafficking Research and Outreach at the University of Georgia and Footprint to Freedom's African Survivor Coalition, surveys and focus group discussions were conducted to establish a set of survivor values on trauma-informed post-trafficking protective service provisions across the West Africa region.

In addition to this value-critical policy analysis, this collaboration produced an additional report intended to provide service providers across the region with recommendations for improving service delivery according to the indicated values of survivors. This same core set of values will serve, in this report, as the value criteria used to analyze regional policy frameworks that lay out provisions and expectations for protective services and care of survivors.

The list of values below is not organized by way of ranking by any metric. They are randomized in the order in which they are presented within the reports compiled by ASC.

Values

Below are the values that were highlighted through the surveys and focus group discussions administered by African Survivor Coalition, including 21 participants from 10 countries.

1. Survivors value access to counseling, therapy, and mental health services.
2. Survivors value access to medical care and support.
3. Survivors value access to economic aid and financial support.
4. Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt.
5. Survivors value the ability to connect with peer survivors and learn from the recovery experiences of survivor leaders.
6. Survivors value access to family and the ability to connect with informal support networks post-trafficking.
7. Survivors value access to the transportation and logistical support needed to receive services.
8. Survivors value a lack of language barriers between themselves and service providers.
9. Survivors value localized, culturally competent support.
10. Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability.
11. Survivors value the ability to trust those who are providing services and for trust to be maintained through clear and caring communication.
12. Survivors value being safe in the environments, circumstances, and with the people involved in their care.
13. Survivors value services that are welcoming and uniquely tailored to their needs.

14. Survivors value being able to engage their faith and spirituality individually and with community.

15. Survivors value the ability to engage in non-traditional therapeutic and emotional regulation practices for self-care.

16. Survivors value the ability to continue to learn through school, training, reading, and other avenues on topics related to healing, growth, spirituality, and success.

17. Survivors value prompt access to reintegration packages and support.

18. Survivors value care that is not only immediate but also is sustained throughout the full process of reintegration and works to ensure continued well-being.

19. Survivors value kind and empathetic service providers.

20. Survivors value evaluation and feedback processes for services that include their input and seek to improve processes accordingly.

21. Survivors value flexibility in the services they receive, in addition to having voice and choice in them, as well.

22. Survivors value when the various service providers they engage with are connected and in collaborative communication with one another to avoid gaps.

23. Survivors value when their post-trafficking circumstances do not involve further situations of exploitation or revictimization.

24. Survivors value regaining self-worth and being able to make decisions on what they want in life.

These values can be found in the Findings on Survivor Values table within the annex of this report, with quotes and context from the ASC analysis reports on the surveys and focus group discussions. The table indicates which set of data the values were pulled from.

Categorizing Survivor Values According to Trauma-Informed Care Principles

Although there are occasionally minor discrepancies or distinctions in language, six key principles of trauma-informed care are frequently used to describe what is considered to be a comprehensive approach by leading experts in the field of trauma-awareness practitioners, such as the United States' SAMHSA, as mentioned in the literature review section.

The six key principles of Trauma-Informed Care include:

1. Safety
2. Trustworthiness & Transparency
3. Peer Support
4. Collaboration & Mutuality
5. Empowerment, Voice, and Choice
6. Cultural, Historical, Gender Issues

The following descriptors exemplify how each of these principles of trauma-informed care were conceptualized in the process of correlating them to each legal provision on protective care within the five policy frameworks being analyzed.

Safety

The principle of "safety is understood to include physical, emotional, and psychological safety for all individuals. Safety, in the sense of trauma-informed care, involves safety for and from self, as well as safety with all circumstances, environments, and personnel involved in care. For the sake of this review, legal provisions that mentioned the upholding of human rights ideals were categorized under this principle.

Trustworthiness and Transparency

Trustworthiness and transparency are principles understood to consist of clear communication, proactively providing information that is relevant to the case or circumstance of the person receiving services, consistency and follow-through on responsibilities and promises, and listening and responding appropriately to needs.

Peer Support

Peer support is a principle of trauma-informed care that allows those receiving services to connect with individuals with similar experiences who are able to provide a sense of validation and understanding, establishing healthy relationships that allow survivors to learn from one another and collaborate on their individual and collective healing journeys.

Collaboration and Mutuality

Collaboration and mutuality in trauma-informed care mean working to make sure services are delivered with and according to the needs and desires of the individual, rather than care simply being delivered "to" or "for" them. This principle highlights the foundational truth that all services involve relational dynamics.

Empowerment, Voice, and Choice

Empowerment, voice, and choice comprise a principle of trauma-informed care that is especially survivor-centered in its recognition that the individual receiving services needs to be able to determine their individual pathway for care, healing, justice, recovery, and reintegration. Empowerment looks like the agency to make personal decisions while still receiving support and backing throughout the entire timeline of engagement with services.

Cultural, Historical, and Gender Issues

Cultural, historical, and gender issues are important to prioritize as principles of trauma-informed care because no individual's experiences exist outside of the influence of these social factors. Acknowledging the cultural, historical, and gender issues that may be present for the individual receiving services is critical in ensuring that the services are comprehensive and address macro-level, systemic factors as well as micro-level, personal ones.

Evaluating Policy Frameworks

This value critical policy analysis will evaluate five policy frameworks with influence over the region and nation-states of West Africa. Descriptions of the policies are included below.

Palermo Protocol (2000)

The first is the Palermo Protocol, established in the year 2000, which has been frequently noted throughout this report. It is part of the United Nations Convention on Transnational Organized Crime, and all nations considered to be within the West Africa region have adopted, signed, or acceded to it. The Palermo Protocol is referenced as the guiding global policy framework within some of the other policies being evaluated in this piece. Where that is true, it is noted in the tables below; however, the values are not double counted for where this is reflected.

ECOWAS Declaration on THE FIGHT Against Trafficking in Persons (2001) & ECOWAS Initial Plan of Action Against Trafficking in Persons (2002-2003)

The second and third policies being analyzed here are the ECOWAS Declaration on THE FIGHT Against Trafficking in Persons and its coordinating ECOWAS Initial Plan of Action Against Trafficking in Persons. Both of these were established by ECOWAS in the year immediately following the passing of the Palermo Protocol, 2001, with an implementation timeline of 2002-2003 for the action plan. New adaptations of the Action Plan have been established, building on this initial one and maintaining most objectives, though published copies are not publicly available online.

The Ouagadougou Action Plan to Combat Trafficking in Human Beings (2006)

The Ouagadougou Action Plan was established in 2006 by the African Union at the Ministerial Conference on Migration and Development. Like the ECOWAS instruments above, the Ouagadougou Action Plan was a response to the responsibility endowed by the enactment of the Palermo Protocol. While ECOWAS policy frameworks set the scope of West African approaches and priorities to combat trafficking in persons, the Ouagadougou Action Plan established a clarified direction on a continental level.

ECOWAS Freetown Roadmap on Enhancing the Combat of Trafficking in Persons in the ECOWAS Region (2023)

The signing of the ECOWAS Roadmap was part of the Regional Conference of ECOWAS States on Ending Human Trafficking in April of 2023, co-hosted by CenHTRO, the Government of Sierra Leone, and the Economic Community of West African States. High-level meetings assessed existing practices, analyzed opportunities to respond more effectively, and discussed plans for further harmonization of regional efforts, resulting in the establishment and signing of the Freetown Roadmap. It serves to continue to build on the foundation initially laid by the ECOWAS Declaration and subsequent Action Plans.

Breakdown of Policy Frameworks, Protective Service Provisions, and Survivor Values

Below, each of the five policy frameworks being analyzed in this report is represented in an individual table. Each table includes the individual provisions of the specified policy which pertain to protective care, rather than prosecution or prevention. Each provision is then correlated to the most relevant or connected trauma-informed principle(s) and the most relevant or connected survivor value(s). The numbers preceding each survivor value in the third column of the table matches the order in which the value was listed in the value criteria list above, 1-24.

Palermo Protocol

Policy Provision	Trauma-Informed Principle(s)	Survivor Value(s) from the list above
Article 6 (1): In appropriate cases and to the extent possible under its domestic law, each State Party shall protect the privacy and identity of victims of trafficking in persons, including, inter alia, by making legal proceedings relating to such trafficking confidential.	Safety; Empowerment, Voice, and Choice	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (10) Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability. (23) Survivors value when their post-trafficking circumstances do not involve further situations of exploitation.
Article 6 (2): Each State Party shall ensure that its domestic legal or administrative system contains measures that provide to victims of trafficking in persons, in appropriate cases: (a) Information on relevant court and administrative proceedings; (b) Assistance to enable their views and concerns to be presented and considered at appropriate stages of criminal proceedings against offenders, in a manner not prejudicial to the rights of the defense.	Trustworthiness and Transparency; Empowerment, Voice and Choice	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (10) Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability. (11) Survivors value the ability to trust those who are providing services and for trust to be maintained through clear and caring communication.

Article 6 (3): Each State Party shall consider implementing measures to provide for the physical, psychological and social recovery of victims of trafficking in persons, including, in appropriate cases, in cooperation with non-governmental organizations, other relevant organizations and other elements of civil society, and, in particular, the provision of: (a) Appropriate housing; (b) Counselling and information, in particular as regards their legal rights, in a language that the victims of trafficking in persons can understand; (c) Medical, psychological and material assistance; and (d) Employment, educational and training opportunities.	Collaboration and Mutuality, Safety, Trustworthiness and Transparency; Empowerment, Voice, and Choice	(1) Survivors value access to counseling, therapy, and mental health services. (2) Survivors value access to medical care and support. (3) Survivors value access to economic aid and financial support. (16) Survivors value the ability to continue to learn through school, training, reading, and other avenues on topics related to healing, growth, spirituality, and success. (22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Article 6 (4): Each State Party shall take into account, in applying the provisions of this article, the age, gender and special needs of victims of trafficking in persons, particularly the special needs of children, including appropriate housing, education and care.	Cultural, Historic, and Gender Issues; Safety	(21) Survivors value flexibility in the services they receive, in addition to having voice and choice in them, as well.
Article 6 (5): Each State Party shall endeavor to provide for the physical safety of victims of trafficking in persons while they are within its territory.	Safety	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
Article 6 (6): Each State Party shall ensure that its domestic legal system contains measures that offer victims of trafficking in persons the possibility of obtaining compensation for damage suffered.	Empowerment, Voice, and Choice	(3) Survivors value access to economic aid and financial support.

ECOWAS Declaration on THE FIGHT against Trafficking in Persons

Policy Provision	Trauma-Informed Principle(s)	Survivor Value(s)
Take measures, in close consultation with the countries of origin, transit and destination and with the victims themselves, for the care and repatriation of any of our citizens who have been victims of trafficking whether within the territory of Member States, or outside the ECOWAS sub-region;	Safety; Empowerment, Voice and Choice; Collaboration and Mutuality	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care. (17) Survivors value prompt access to reintegration packages and support.
Implement measures to provide for the protection and physical, psychological and social recovery of victims of trafficking through affording them the full protection of their physical safety, privacy, and human rights;	Safety	(1) Survivors value access to counseling, therapy, and mental health services. (2) Survivors value access to medical care and support.
Establish comprehensive policies, programmes, and other measures to prevent and combat trafficking in persons, and to protect victims of trafficking from further victimization;	Safety	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care. (23) Survivors value when their post-trafficking circumstances do not involve further situations of exploitation or revictimization.
Commend those Member States which have signed and ratified the United Nations Convention against Transnational Organized Crime and the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, and recommend that those countries who have not yet done so, sign or ratify these instruments at the earliest possible time;	All listed above in policy-specific table for the Palermo Protocol	(1), (2), (3), (4), (10), (11), (12), (16), (21), (22), (23)

Ouagadougou Action Plan

Policy Provision	Trauma-Informed Principle(s)	Survivor Value(s)
Measures to prevent and combat trafficking in human beings should be based on respect for human rights including protection of victims and should not adversely affect the rights of victims of trafficking. Special attention should be given to the United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children. The best interest of the child, including as recognized in existing international conventions, shall be considered paramount at all times.	All listed above in policy policy-specific table; safety	(1), (2), (3), (4), (10), (11), (12), (16), (21), (22), (23)
The empowerment of women and girls through national policies is an important part of combating trafficking. A gender perspective should be applied when adopting and implementing measures to prevent and combat trafficking in human beings.	Empowerment, Voice, and Choice; Cultural, Historical, and Gender Issues	(13) Survivors value services that are welcoming and uniquely tailored to their needs. (18) Survivors value care that is not only immediate but also sustained throughout the full process of reintegration and works to ensure continued well-being.
Poverty and vulnerability, an unbalanced distribution of wealth, unemployment, armed conflicts, poor law enforcement system, degraded environment, poor governance, societies under stress as well as non-inclusive societies, corruption, lack of education and human rights violations including discrimination, increased demand for sex trade and sex tourism are among the root causes of trafficking in human beings and must be addressed.	Empowerment, Voice and Choice	10) Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability. (13) Survivors value services that are welcoming and uniquely tailored to their needs. (18) Survivors value care that is not only immediate but also sustained throughout the full process of reintegration and works to ensure continued well-being.
States should base their policies, programmes and other measures for victim protection and assistance on international human rights instruments, including those relating to the rights of the child and of women, forced labour, child labour and trafficking in human beings.	Safety	(13) Survivors value services that are welcoming and uniquely tailored to their needs.

States should identify victims of trafficking so as to provide them with appropriate assistance and protection, taking fully into account their special vulnerabilities, rights and needs.	Safety; Collaboration and Mutuality	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care. (13) Survivors value services that are welcoming and uniquely tailored to their needs.
States should find the most appropriate measures to ensure protection and assistance to victims of trafficking, especially for children and their families, taking into account, in particular, the rural and urban divide.	Cultural, Historical, and Gender Issues; Empowerment, Voice, and Choice	(13) Survivors value services that are welcoming and uniquely tailored to their needs.
States should adopt appropriate measures for the protection of victims of trafficking and provide them with information on their legal and other rights in the country of destination as well as the country of origin in case of repatriation.	Safety	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
States should encourage victims of trafficking to testify in the investigation and prosecution of cases of trafficking in human beings, by giving due consideration to the safety and security of victims and witnesses at all stages of legal proceedings, in particular with regard to children.	Safety	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
States should adopt specific measures to avoid criminalisation of victims of trafficking, as well as stigmatisation and the risk of re-victimisation.	Safety; Empowerment, Voice, and Choice	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.

States should endeavor to provide victims of trafficking with short- and long-term, appropriate, psychological, medical, and social assistance in order to promote their full recovery.	Safety; Empowerment, Voice, and Choice	(1) Survivors value access to counseling, therapy, and mental health services. (2) Survivors value access to medical care and support. (3) Survivors value access to economic aid and financial support. (18) Survivors value care that is not only immediate but also is sustained throughout the full process of reintegration and works to ensure continued well-being.
States should consider adopting legislative or other appropriate measures that permit victims of trafficking to remain in their territory, temporarily or permanently, and give appropriate consideration to humanitarian and compassionate factors.	Safety; Collaboration and Mutuality	(17) Survivors value prompt access to reintegration packages and support. (12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
States should take special measures to address the plight of children-headed households, especially girls.	Safety; Cultural, Historical, Gender Issues	(19) Survivors value kind and empathetic service providers.
States should promote an HIV/AIDS sensitive approach and protect the dignity and human rights of victims of HIV/AIDS, taking the special needs of children into account.	Safety; Cultural, Historical, Gender Issues	(2) Survivors value access to medical care and support. (13) Survivors value services that are welcoming and uniquely tailored to their needs.

ECOWAS Initial Plan of Action Against Trafficking in Persons

Policy Provision	Trauma-Informed Principle(s)	Survivor Value(s)
States, in co-operation with NGOs and other representatives of civil society as appropriate, shall take measures to create or develop the capacity of the reception centers where victims of trafficking in persons can be sheltered. These centers shall provide physical security, basic material assistance, medical care, and counseling and information to victims of trafficking, particularly on legal assistance, and reporting and filing complaints, taking into account the special needs and legal status of children.	Safety	(1) Survivors value access to counseling, therapy, and mental health services. (2) Survivors value access to medical care and support. (3) Survivors value access to economic aid and financial support. (4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (13) Survivors value services that are welcoming and uniquely tailored to their needs.
States shall encourage victims of trafficking to testify in the investigation and prosecution of cases of trafficking in persons, by giving due consideration to the safety and security of victims and witnesses at all stages of legal proceedings, permitting them to remain in their territory.	Safety; Empowerment, Voice, and Choice	4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt. (12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
ECOWAS shall establish a fund for victims of trafficking. The fund shall be used in particular to provide support to States for the repatriation of victims of trafficking.	Safety	(3) Survivors value access to economic aid and financial support. (17) Survivors value prompt access to reintegration packages and support.

Policy Provision	Trauma-Informed Principle(s)	Survivor Value(s)
Full elaboration and implementation of the Trafficking in Persons Plus concept at both regional and national levels, integrating human rights-based response measures to human trafficking with other criminal justice, social workforce and regulatory initiatives and responses to protection risks and victimization. This shall include addressing the vulnerability to Sexual and Gender-Based Violence, Violence Against Children and other related victimization.	Safety	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Implement ECOWAS Guidelines on Protection, Support and Assistance to Witnesses in Trafficking in Persons Cases and other related protection situations, including situations of Violence Against Children, Sexual and Gender-Based Violence.	Safety	(10) Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability.
Enhance regional cooperation frameworks between criminal justice practitioners, including law enforcement and judicial officials of ECOWAS Member States to ensure the effective investigation and prosecution of human trafficking cases. The regional cooperation areas may include reinforced cross-border police operations, judicial cooperation and mutual legal assistance; and the promotion of inter-agency cooperation at both regional and national levels.	Collaboration and Mutuality	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt.
Promote local community frameworks and structures for child protection especially outside main cities and urban areas with a focus on sensitization on child protection risks and vulnerabilities and strengthening surveillance initiatives	Safety	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.

Develop effective Social Service Workforce through harmonized minimum standards for curricula and ensuring appropriate numbers and distribution between urban and rural areas.	Collaboration and Mutuality	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Implement the ECOWAS Child Protection Strategic Framework and Guidelines, especially with regard to 'Auxiliary' Social Work-force personnel, including 'Community Child Protection' actors, to augment formally certified social workers.	Collaboration and Mutuality	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Compile relevant Protection and Human Security instruments for ease of reference by Member States functionaries and other stakeholders. Also, consider the development of a Protection and Human Security Handbook as a central body of knowledge and for the standardization of concepts and response measures to critical protection concerns.	Collaboration and Mutuality	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Increase the rate of implementation of the ECOWAS Policy on Care and Protection of Victims of Trafficking in Persons as a means of strengthening the Regional Referral System (RRM)	Collaboration and Mutuality	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.

Ensure an adequate focus on responding to trafficking in persons in emergency contexts, including conflict-related trafficking in women, children, and persons with vulnerability exacerbated by displacement.	Safety	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.
Strengthen cross-border coordination to provide comprehensive assistance to victims in countries of origin, transit, and destination, and effectively implement the Regional Referral Mechanism instituted by the ECOWAS Commission.	Collaboration and Mutuality	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.
Strengthen National Referral and Care Mechanisms as well as Standard Operating Procedures for identification, referral and protection of victims, including establishment and improvement of shelters within the wider National Referral Mechanisms. Also, ensure adequate funding, training of personnel, and representation in remote areas, and improve the monitoring of the implementation of victim support interventions in remote or rural areas.	Safety; Empowerment, Voice and Choice	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care. (22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps
Ensure effective communication of protection standards and engage in social mobilization and advocacy to address negative social practices such as child begging, the use of children as domestic servants, and child labor. Integrate counter-human trafficking and other protection messaging into primary and secondary school curricula.	Safety; Collaboration and Mutuality; Empowerment, Voice and Choice; Cultural, Historical, Gender Issues	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.

Ensure adequate provision of mental and psychosocial health assistance in reintegration support for victims of trafficking in persons.	Safety; Empowerment, Voice, and Choice	(1) Survivors value access to counseling, therapy, and mental health services.
Establishment of Compensation and Reintegration Funds for victims of trafficking in persons in ECOWAS Member countries.	Empowerment, Voice and Choice	(3) Survivors value access to economic aid and financial support
Build the capacities of Consular Services of member states in transit and destination countries towards effective intervention in the identification, care and protection of victims of trafficking in persons and vulnerable persons; including trauma-informed and victim centered return and reintegration.	Safety; Empowerment; Voice and Choice	12) Survivors value being safe in the environments, circumstances, and with the people involved in their care. (17) Survivors value prompt access to reintegration packages and support.

Most Frequently Correlated Survivor Values to West Africa Policy Frameworks

Number of Correlations	Survivor Value	Policy Frameworks with Correlations
14	(12) Survivors value being safe in the environments, circumstances, and with the people involved in their care.	Palermo Protocol (1), ECOWAS Declaration (2), ECOWAS Plan of Action (1), Ouagadougou Action Plan (5), ECOWAS Freetown Roadmap (5)
8	(4) Survivors value access to legal justice, including the resources and representation to effectively do so to the extent that they desire. Survivors value legal care that is not re-traumatizing and legal systems that are not corrupt.	Palermo Protocol (2), ECOWAS Plan of Action (2), Ouagadougou Action Plan (3), ECOWAS Freetown Roadmap (1)
8	(22) Survivors value when the various service providers they engage with are connected and in collaborative communication with one another in order to avoid gaps.	Palermo Protocol (1), ECOWAS Freetown Roadmap (7)
7	(13) Survivors value services that are welcoming and uniquely tailored to their needs.	ECOWAS Plan of Action (1), Ouagadougou Action Plan (6)

6	(3) Survivors value access to economic aid and financial support.	Palermo Protocol (2), ECOWAS Plan of Action (2), Ouagadougou Action Plan (1), ECOWAS Freetown Roadmap (1)
5	(1) Survivors value access to counseling, therapy, and mental health services.	Palermo Protocol (1), ECOWAS Declaration (1), ECOWAS Plan of Action (1), Ouagadougou Action Plan (1), ECOWAS Freetown Roadmap (1)
5	(2) Survivors value access to medical care and support.	Palermo Protocol (1), ECOWAS Declaration (1), ECOWAS Plan of Action (1), Ouagadougou Action Plan (2)
4	(10) Survivors value the ability to have autonomy and choice in the services they receive and for those services to prioritize dignity, agency, and long-term sustainability.	Palermo Protocol (2), Ouagadougou Action Plan (1), ECOWAS Freetown Roadmap (1)

4	(17) Survivors value prompt access to reintegration packages and support.	ECOWAS Declaration (1), ECOWAS Plan of Action (1), Ouagadougou Action Plan (1), ECOWAS Freetown Roadmap (1)
3	(18) Survivors value care that is not only immediate but also is sustained throughout the full process of reintegration and works to ensure continued well-being.	Ouagadougou Action Plan (3)
2	(23) Survivors value when their post-trafficking circumstances do not involve further situations of exploitation.	Palermo Protocol (1), ECOWAS Declaration (1)
1	(11) Survivors value the ability to trust those who are providing services and for trust to be maintained through clear and caring communication.	Palermo Protocol (1)

1	(16) Survivors value the ability to continue to learn through school, training, reading, and other avenues on topics related to healing, growth, spirituality, and success.	Palermo Protocol (1)
1	(19) Survivors value kind and empathetic service providers.	Ouagadougou Action Plan (1)
1	(21) Survivors value flexibility in the services they receive, in addition to having voice and choice in them, as well.	Palermo Protocol (1)

Summary of Correlation Frequency Findings for Survivor Values

The table above depicts the wide range of the frequency with which these policies included provisions that aligned with survivor values. However, it is clear that values on safety and legal justice sit at the top of the list with the highest number of occurrences.

This makes sense, especially considering that in its relatively short timeframe of being a legally defined issue, anti-trafficking efforts have focused, first and foremost, on a criminal justice approach. From an institutional standpoint, addressing an illegal act with legal and law enforcement measures is perhaps the most logical and the most directly connected to their area of expertise. However, we know that adequate survivor care, support, and rehabilitation require efforts and services that move beyond the courtroom, and legal provisions provide a framework for institutional support of services

Following safety and legal justice are legal provisions pertaining to the coordination of services. It is clear that there is an institutional awareness of the need for services to be coordinated between provider entities. From an institutional perspective, well-coordinated services are more efficient and therefore may have a positive impact on the amount of overall resources expended. From the perspective of survivors, well-coordinated care means that individuals are not experiencing large gaps in the supports and services they are given, less of the responsibility falls on the survivor to try to coordinate multiple systems for their own care, and there is consistency and shared objectives in the care that they receive.

Of important note, there are four survivor values which have correlations to Africa-specific policy frameworks (whether continental, regional, or both) that do not have direct correlations to the global, standardized policy framework, the Palermo Protocol. The four policies for which this is true include:

1. Survivors value services that are welcoming and uniquely tailored to their needs.

2. Survivors value prompt access to reintegration packages and support.

3. Survivors value care that is not only immediate but also is sustained throughout the full process of reintegration and works to ensure continued well-being.

4. Survivors value kind and empathetic service providers.

Although there are survivor values with no direct policy correlations, these four, which were independently addressed by continental and regional policy frameworks, may provide an indication of more contextual priorities or advances in survivor-centered care.

Survivor Values Without Direct Policy Correlations

While the table above indicates the frequency of the survivor values that were correlated to the protective service provisions, it does not include the survivor values that were not correlated to any of the protective service provisions being analyzed. Below is the list of survivor values that were not represented in any of the policy provisions. Please note that the numbers indicate the initial numbers of the values on the survivor values list used as value criteria/

1. Survivors value the ability to connect with peer survivors and learn from the recovery experiences of survivor leaders.

2. Survivors value access to family and the ability to connect with informal support networks post-trafficking.

3. Survivors value access to the

transportation and logistical support needed to receive services.

4. Survivors value a lack of language barriers between themselves and service providers.

5. Survivors value localized, culturally competent support.

6. Survivors value being able to engage their faith and spirituality individually and with community.

7. Survivors value the ability to engage in non-traditional therapeutic and emotional regulation practices for self-care.

8. Survivors value evaluation and feedback processes for services that include their input and seek to improve processes accordingly.

9. Survivors value regaining self-worth and being able to make decisions on what they want in life.

In considering the survivor values which were not correlated to any of the protective service policy provisions in the regionally applicable frameworks being analyzed, it can be noted that many are attributes that could be seen as additional or enhancers of service. However, to the survivors who provided these insights, values such as having access to informal support networks, being provided services in their own language, and having service providers who understand their cultural contexts, are not additives to adequate care, they are essential to it.

Number of Correlations	Key Principle of Trauma-Informed Care	Policy Frameworks with Correlations
27	Safety	Palermo Protocol (4), ECOWAS Declaration (3), ECOWAS Plan of Action (3), Ouagadougou Action Plan (9), ECOWAS Freetown Roadmap (8)
16	Empowerment, Voice, and Choice	Palermo Protocol (4), ECOWAS Declaration (1), ECOWAS Plan of Action (1), Ouagadougou Action Plan (5), ECOWAS Freetown Roadmap (5)
11	Collaboration and Mutuality	Palermo Protocol (1), ECOWAS Declaration (1), Ouagadougou Action Plan (2), ECOWAS Freetown Roadmap (7)
6	Cultural Historical and Gender Issues	Palermo Protocol (1), Ouagadougou Action Plan (4), ECOWAS Freetown Roadmap (1)
2	Trustworthiness and Transparency	Palermo Protocol (2)
0	Peer Support	– –

Frequency with which TIC Principles Correlated to Policy Provisions

The table below illustrates the frequency with which each trauma-informed care principle was correlated with a provision of one of the five policy frameworks being evaluated in this piece.

Summary of Correlation Frequency Findings for Trauma-Informed Care Principles

As highlighted in this table, there are vast discrepancies in how frequently each key principle was emphasized across the protective service provisions included in the five policy frameworks being analyzed. Safety, by far, was the most frequently correlated, while peer support was not correlated to any of the provisions at all. This reality was also true for the survivor values.

Again, it may be easy to understand why safety would be the most frequently correlated principle of trauma-informed care. From an institutional perspective, ensuring the safety of individuals involved may be the first priority in the timeline of care, with, simultaneously, the highest level of felt responsibility. Removing, or assisting in removing, victims from circumstances of exploitation and harm and into circumstances that are safe and secure is very important. In fact, the importance of this is also voiced by survivors in the surveys and focus group discussions. Safety is, and should continue to be, prioritized as a very critical component of post-trafficking care. However, there are many additional attributes to safety that must be addressed and accounted for in efforts to move services from only checking a trauma-informed box, to being truly centered on survivors' needs and healing processes.

Empowerment, Voice, and Choice appeared as the second most frequently correlated trauma-informed care principle. This, of course, is encouraging to see. However, it is important to understand the limitations of simply looking at this number of frequencies. Empowerment, Voice and Choice, for the purposes of this analysis, was correlated with policy provisions which expressed endowing victims with the full range of human rights they are deserving of, and to provisions which emphasized the awareness of unique needs and protections of victims and survivors in pursuing care and legal recourse. These notions, of course, do embody the ideals of empowerment, voice, and choice, though the language in individual provisions varied on emphasis, particularly on the component of "choice." Because these ideals are grouped together in one TIC principle, it is important to not lose sight of the realization that there is much room for continued growth in policy provisions explicitly indicating the choice survivors should have in each step of their healing journey, and especially in circumstances relating to legal processes.

In a similar way, throughout this analysis, the value of Collaboration and Mutuality was correlated with the coordination of services, which differs, in some respects, from the collaboration or felt sense of mutuality between the survivor and the service provider. The coordination of various service providers was a value that was brought to light as a gap and recommendation by survivors in the surveys and focus group discussions, so association was drawn in this way. "Collaboration and Mutuality" was correlated with policy provisions that aligned with either the coordination of service providers or emphasized the role of survivors in their care.

Considering Unintended Consequences

As expressed in the sections above, for some of the policy provisions, there were not perfectly aligned survivor values or trauma-informed principles. Instead, they were correlated with the values and principles that seemed to be most closely aligned. While the correlations are still, in fact, innately connected, they may express slightly different emphasis than the value or the principle does in their more explicit context. This is important to consider.

Another unintended consequence that this analysis could have, which is also addressed in the section on biases, is the relatively limited sample size of study participants. Engaging in this form of policy analysis was out of the intention to bring forward voices and perspectives that are not usually included in the high-level deliberations that result in the establishment of policy frameworks. This is accomplished. Perspectives are being presented, and new considerations are being brought to the policy discussion as a result. However, it is impossible to say that these perspectives are all encompassing.

It is also important to address the limitations of this process. While this analysis does evaluate the presence of policy provisions correlated to survivor values and trauma-informed care principles, it does not evaluate the accessibility or consistency of their application or implementation. The data collected from survivors through the surveys and focus group discussions highlight that there are significant gaps in how even the survivor values with policy provisions are upheld. While survivor values such as safety and legal justice were consistently represented in the policy frameworks, survivors still noted instances of not feeling safe and not having access to the legal justice they wished would have been possible.

RECOMMENDATIONS

In evaluating the five regional policy frameworks pertaining to West Africa, through the lens of the perspectives garnered from survivors across the region, much opportunity for continued advancement and evolution of post-trafficking services has been brought to light.

One substantial realization that can perhaps be viewed as both an encouragement and a critique is that many of the gaps (differing from values) expressed by survivors have some level of recognition within at least one of the policy frameworks being addressed in this piece. On the one hand, this represents that the more comprehensive care has been acknowledged within the policy landscape. On the other hand, this indicates that although the need for holistic care has been acknowledged, the implementation and accessibility of the services that should result from such policy parameters are not being successfully carried out in all contexts.

Considering this analysis, policymakers and institutional actors should continue to develop practices and procedures which bring survivors' direct input into the process of establishing policy frameworks. Policymakers across West Africa can incorporate the findings of this initial analysis, or could take on a similar structure in evaluating country-specific frameworks. Utilizing a value-critical approach whereby the value criteria is determined by those the policies seek to impact, is a practice that is not only innovative to the current landscape and conceptualization of policy analysis, it is also incredibly effective. Value-critical policy analysis on social policies such as those addressing trafficking in persons allows for necessary reflection on whether the priorities of institutional level influences align with the hopes and needs of those who seek services and support.

Survivor Recommendations

Directly from the focus group discussions, below are the recommendations provided by survivor participants with particular connection to the findings of this analysis or relevance to institutional actors and policy makers. The full list of recommendations, within which those listed below are included, can be found within the Focus Group Report within the annex. Including the direct recommendations provided by survivors is central to the overall approach of this report.

1. **Develop Comprehensive, Trauma-Informed Counseling Centers:** Establish centers offering long-term, culturally sensitive mental health support, ensuring regular follow-up and individualized care.

2. **Integrate Tailored Economic Empowerment Programs**: Combine skill acquisition with post-training support such as start-up capital, mentoring, and provision of necessary tools or equipment.

3. **Ensure Long-Term Funding and Continuity of Care**: Advocate for funding models that extend support beyond short-term projects and promote inter-organizational collaboration to prevent gaps in service.

4. **Strengthen Confidentiality and Survivor Inclusion**: Implement strict confidentiality protocols and include survivors in decision-making processes through advisory boards and regular feedback sessions.

5. **Enhance Coordination Among Service Providers**: Build networks among government bodies, NGOs, and community organizations to create a seamless referral system that ensures continuity of care.

6. **Involve Survivors in Monitoring and Evaluation**: Oftentimes survivors are

being overlooked in this process, they should be involved in the monitoring and evaluation of programs.

7. **Involve Survivors in Funding Decisions**: Funding should be made available to survivors and they should be included in donors decision-making processes.

8. **Develop Guidelines for Countries**: Guidelines should be developed to empower countries to build capacities for national survivor advisory councils and take into account the perspectives of survivors in policy formulation and implementation.

9. **Develop Accountability Mechanisms**: Develop accountability mechanisms for government and law enforcement to address systemic failures.

10. **Improve Access to Legal Representation for Survivors**: Establish survivor-centered legal aid services, ensuring free, accessible, and confidential legal assistance for survivors of trafficking.

11. **Speed Up Prosecution and Reduce Corruption**: Implement stricter anti-corruption measures in trafficking cases and prioritize fast-tracking these cases to ensure justice is served.

12. **Enhance Witness Protection and Safety for Survivors Seeking Justice**: Establish strong survivor protection programs, including safe housing and security measures for those testifying against traffickers.

13. **Provide Legal Literacy and Awareness Programs for Survivors**: Develop legal education workshops to inform survivors about their rights, legal processes, and available support services.

14. **Strengthen Law Enforcement Training on Trafficking Cases**: Provide specialized training to police, prosecutors, and judges on handling trafficking cases sensitively and efficiently and develop guidelines for trauma informed judicial processes.

15. **Compensation for Survivors**: Improve access to compensation for survivors through survivor-centered justice frameworks.

16. **Expand Vocational Training and Skill Development Programs**: Governments, NGOs, and private sector actors should invest in training programs tailored to survivors needs.

17. **Provide Start-Up Capital and Business Grants for Survivors**: Establish grant programs, microfinance opportunities, or survivor-focused investment funds to help them start businesses without the usual barriers to loans.

18. **Establish Long-Term Economic Support Rather Than Short-Term Aid**: Shift from short-term relief efforts to sustainable economic interventions such as savings programs, mentorship, and ongoing financial education.

19. **Provide Free or Subsidized Healthcare for Survivors**: Governments and NGOs should establish medical programs that offer free or low-cost treatment for survivors, including physical and mental healthcare.

20. **Expand Access to Mental Health Services**: Increase the availability of free or affordable counseling and therapy services, ensuring that survivors have ongoing psychological support.

21. **Improve Accountability and Ethical Engagement with Survivors**: Services must ensure survivors are not exploited for publicity or donor engagement. Ethical guidelines should be established for working with survivors.

22. **Strengthen Community Awareness Campaigns to Reduce Stigma**: CSOs should work with local leaders, religious figures, and schools to educate communities on human trafficking and support reintegration efforts.

CONCLUSION

To conclude this report, we begin by returning to the direct words of the survivors who participated in this study. When asked how they could be better supported by those involved in their care, they responded with these words:

> *"Treat survivors with respect and kindness and recognize their strengths as it is unique to every individual. Recognize that the healing journey is unique, and survivors should be allowed to heal at their own pace."*

> *"Ensure survivors are included in all aspects of reintegration and prevention programs."*

> *"Take time to evaluate and assess the needs of every survivor."*

> *"Respect survivors without discrimination and let them have the freedom and autonomy to choose when to speak."*

> *"Encourage training of social workers. If you save a life, you are saving a community."*

> *"Listen to survivors as every survivor's need is unique. Building trust should be the foundation for any care provider."*

This Value-Critical Policy Analysis set out to engage in a process that has not yet been attempted in this format, pertaining to this issue, or in this context. In seeking to understand the values of survivors with lived experiences of attempting to access post-trafficking services across the West Africa region, and bringing the values they expressed to bear as the lens through which we understand and evaluate policy is an endeavor that is full of nuance, but also full of potential in re-imagining and re-aligning services to be not only trauma-informed, but also survivor-centered.

To avoid "trauma-informed" and "survivor-centered" ideals from simply becoming idealized lingo without substantive action or backing in the anti-trafficking movement of researchers, of practitioners, of institutional actors and policy makers, work must continue to be done to engage processes where these notions are not simply used as adjectives but are reflected in the direct experiences of survivors themselves.

While policy and program evaluation can involve a multitude of metrics, it is critical to recognize that the criteria that is perhaps most telling, most insightful, and most important to consider, is the perceptions, experiences, and desires of those it impacts. In the pressing and essential work to combat trafficking in persons, survivors must continue to be brought into these processes.

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ANNEXES

12.1. Annex I : Values table

Survivor Values Table

Findings on Survivor Values from ASC's Survey and FGD Reports

Theme	Identified Survivor Value	Survivor Experience	Source of Value	Context from ASC Survey and FGD Reports
Mental Healthcare	Survivors value access to counseling, therapy, mental health services	Experienced, with gaps identified	Survey and FGD	Survey: Access to trauma counseling was one of the most frequently mentioned forms of support. Survivors valued being able to process their experiences in a safe space with trained professionals. Survivors emphasized the importance of trauma-informed therapy, specialized counseling, and support groups as services that were either missing or insufficient in their experiences. For many, the lack of immediate emotional support made reintegration feel overwhelming. "Comprehensive mental health care should be the foundation of any reintegration process."
				FGD: A key theme that emerged from the FGDs was the critical importance of mental health support in the recovery process for trafficking survivors. Participants emphasized that untreated trauma significantly hindered their reintegration into society. Several survivors spoke about their ongoing struggles with trauma and the lack of access to adequate mental health services. One survivor shared, "Despite my advocacy work, I still struggle with trauma and wish I had access to free counseling." Survivors also recalled instances where generic or inadequate counseling left them feeling misunderstood or exposed Increase the availability of free or affordable counseling and therapy services, ensuring that survivors have ongoing psychological support. Governments and NGOs should establish medical programs that offer free or low-cost treatment for survivors, including physical and mental healthcare.
Physical Healthcare	Survivors value access to medical care and support	Experienced with gaps identified	Survey and FGD	Survey: This was the second or third most cited form of assistance, particularly important for those with untreated health issues resulting from trafficking.
				FGD: The need for comprehensive medical support was also highlighted, particularly for survivors with chronic health conditions. Many participants noted that when they returned, they faced stigma, health issues, and mental health challenges, all of which were not adequately addressed. Another participant expressed concern that survivors often had to use their reintegration funds for medical bills rather than starting a business due to unresolved health issues.
Financial Support/ Economic Empowerment	Survivors value access to economic aid and financial support	Experienced with gaps identified	Survey and FGD	Survey: While highly appreciated, economic aid was often short-term and lacked follow-up mechanisms for sustainability. Survivors wanted support that could help them become self-reliant. Survivors consistently raised concerns around the quality, relevance, and duration of economic reintegration programs. Short-term aid and one-off training programs were not sufficient to ensure economic stability.
				FGD: Economic self-reliance emerged as a critical factor in breaking the cycle of vulnerability for survivors. A lack of livelihood support often left survivors dependent, struggling with necessities like accommodation and food. Survivors discussed the limitations of programs that offer short-term business grants or support without providing proper training or access to necessary capital and equipment. One survivor emphasized that empowerment programs should extend beyond just skill acquisition, noting that there needs to be follow-up support and mentorship. The consensus was clear: economic empowerment must not stop at training but should include sustained support and resources. One survivor noted, "Sustainable livelihood support and empowerment programs are vital. Survivors need to have the opportunity to go back to school, receive training, or even set up micro- businesses so they can become financially self-reliant."

Legal Justice	Survivors value the ability to access legal justice, including the resources and representation to effectively do so. Survivors value access to a non-corrupt justice system. Survivors value access to legal care that is not retraumatizing.	Identified as a critical gap	Survey and FGD	Survey: Only 8 % of survivors were able to pursue justice to the extent they desired. 50% had some legal support but faced significant barriers (like cost, delays, or fear), and 42% had no access at all. 92% agreed that their country's legal system did not protect them adequately. (Survivor quotes included in the document). There was a notable absence of legal aid, court accompaniment, and safe housing in several countries. This left survivors exposed, unsupported in justice processes, and at risk of re-traumatization. FGD: Participants expressed dissatisfaction with the lack of legal protection for survivors, and the minimal penalties traffickers often face. One survivor shared a troubling example where a trafficker, who made millions from exploiting girls, was only fined a small amount while the survivor who testified continued to face threats and harassment. This highlights the need for stronger legal frameworks to ensure that traffickers face appropriate consequences and that survivors are given the protection they deserve.
Peer Support	Survivors value the ability to connect with peer survivors. Survivors value the ability to learn from the recovery and care experiences of survivor leaders.	Experienced with gaps identified	Survey	Survey: Many survivors found great comfort and strength in connecting with others who had endured similar experiences, which contributed significantly to their healing. 67% of survivors were able to connect with peers during service delivery, and 75% shared that these connections had a positive impact on their healing journey. Peer interactions offered survivors emotional safety, validation, and the ability to learn from others' coping strategies. In some cases, healing began with knowledge when another survivor helped name their experience and introduced concepts of trauma and recovery. Survivors emphasized that peer-to-peer support should not be incidental but intentional and structured. Their suggestions included: 1. Train survivors as peer leaders and facilitators to lead group healing sessions. 2. Pair new returnees with experienced survivors for one-on-one support. 3. Create both physical and digital environments for survivors to share, heal, and access resources. 4. Recognize leadership potential within survivor communities and support their growth.

				5. Organize survivor reunions and experience-sharing forums to combat isolation and build solidarity.
Relationships	Survivors value access to family throughout repatriation. Survivors value the ability to connect with informal support networks post-trafficking.	Identified as a critical gap	Survey	Survey: Survivors emphasized that being able to see or communicate with family would have enhanced their emotional security. Isolation after repatriation deepened their emotional security. Several survivors emphasized that emotional healing was made possible through the presence of supportive family and friends, even when they had not disclosed their trafficking experience.
Logistical Support	Survivors value access to the transportation needed to receive services. Survivors value logistical resources and support.	Identified as a critical gap	Survey	Survey: Survivors often traveled long distances on foot to attend counseling sessions. As one survivor noted, "If I would have been provided with transportation, it would have helped me a lot... but there was no budget allocated to support me." This gap created physical strain and emotional fatigue, potentially reducing attendance and effectiveness of services. Survivors living in rural or remote areas felt excluded from support systems designed without geographic flexibility.
Language Access	Survivors value a lack of language barriers between themselves and service providers.	Identified as a critical gap	Survey	Survey: Survivors struggled to communicate when service providers used languages they were not fluent in. A survivor shared, "As a Ghanaian, my native language is Twi, but the staff spoke mostly English. This made it difficult for me to communicate my needs." Ensure that services can be provided in the preferred language of the survivor, especially in decision-making processes. Incorporate language interpretation services and offer materials in local languages/ the languages of the survivors being cared for.

Cultural Competency	Survivors value culturally-sensitive and culturally-informed service providers. Survivors value localized, culturally competent support.	Identified as a critical gap	Survey	Survey: Service providers were often unaware of local customs, leading to misunderstandings and a feeling of alienation. One participant noted, “The staff were not familiar with Ghanaian culture and customs… they could not understand my perspective and needs.” Programs must foster a culture of empathy and dignity, while respecting diverse cultural contexts and survivor experiences. “Treat survivors as yourself, we are all human.” “Respect survivors’ cultural differences and avoid imposing Western values.” Respect cultural and religious values and avoid making assumptions. Practice respect for differing religious practices. Train staff in understanding and respecting survivors’ cultural and religious contexts. Develop community-based models that include survivors’ cultural values in healing and reintegration processes.
				FGD: “When you are trying to help survivors, you need to think about their culture and spiritual life. Healing is a process.” This highlights the importance of providing culturally sensitive, ongoing support that goes beyond one-time sessions.”
Autonomy and Choice	Survivors value the ability to have autonomy and choice in the services received. Survivors value access to services that prioritize dignity, agency, and long-term sustainability.	Identified as a critical gap	Survey and FGD	Survey: Survivors expressed frustration at being passive recipients of help, with little agency in choosing what services they received. As one put it, “We couldn’t decide what we wanted… other than take what we were being offered and be grateful.” This undermines a key principle of trauma-informed care: empowerment through choice. 83% of survivors reported that they were not pressured to do anything they were uncomfortable with in order to receive services. This indicates some level of trauma-informed care in service delivery. However, 17% either experienced pressure or were unsure.

	Survivors value the ability to make decisions.			While 75% said they could give some input regarding their care and recovery, the other 25% felt sidelined, which reflects a gap in survivor-centered approaches. Empower survivors with clear information and agency over their own journey.
				FGD: Survivors voiced frustration with generic service delivery models that did not account for their unique needs. One survivor highlighted, "When all survivors are given the same type of support, it ignores our unique challenges. Instead, there should be a needs assessment before empowerment programs are rolled out." This underscores the necessity of personalized care that considers the specific circumstances of each survivor.
Trust and Communication	Survivors value the ability to feel trust in those providing services. Survivors value clear and caring communication. Survivors value trust-based relationships	Identified as critical gap	Survey	Survey: Just 33% of survivors fully trusted the individuals providing their care. 25% were unsure and 42% only partially trusted providers. This signals a significant trust gap, possibly driven by past trauma, lack of cultural connection or inconsistent provider behavior. Less than half (42%) of the respondents felt that communication with providers was handled with full care and sensitivity. More alarmingly, 77% either doubted or did not believe that service providers had their best interests in mind. This undermines the very foundation of trauma-informed care, which relies on transparency, empathy, and empowerment. Protect survivors’ data and identities. Empower survivors with clear information and agency over their own journey. Treat survivors without discrimination or judgement.
Safety	Survivors value the ability to	Identified as	Survey	Survey:

	feel safe in the environments, circumstances, and with the people involved in their care. Survivors value access to services that are personal and welcoming.	critical gap		Only 49% of survivors reported feeling safe in the environment where services were provided, while 50% were neutral. This implies that service settings may lack culturally appropriate, comforting, or survivor-sensitive design features.
Faith and Spirituality	Survivors value being able to engage their faith and spirituality individually and with community.	Identified as survivor strength.	Survey and FGD	Survey: Faith emerged as a profound source of strength for some survivors. Participation in church activities, youth groups, and scripture-based teachings provided emotional safety and meaning.
				FGD: One survivor emphasized the cultural and spiritual aspects of healing, stating, "When you are trying to help survivors, you need to think about their culture and spiritual life. Healing is a process."
Self-care	Survivors value the ability to engage in non-traditional therapeutic and emotional regulation practices for self-care.	Identified as a survivor strength	Survey	Survey: Survivors also engaged in creative and physical self-care activities that helped regulate emotions and provide a sense of control and joy. "I engaged in various self-care activities that helped me cope with the emotional aftermath of my experience. These included church choir, exercise, nature walks, and creative pursuits like art, crafts, and crocheting."
Education and learning opportunities	Survivors value the ability to continue to learn through school, training, reading, and other avenues on topics related to healing, growth, spirituality and success.	Identified as a survivor strength	Survey	Survey: One survivor described how pursuing a degree in psychology not only offered intellectual growth but also equipped her with psychological tools to understand and manage trauma. Reading motivational books was also highlighted as a complementary tool for resilience building.
Holistic Reintegration	Survivors value prompt access to reintegration	Identified as critical gap	Survey	Survey: The delay experienced by survivors hampers early stabilization and undermines the purpose of reintegration support. Timeliness is essential to rebuilding trust and ensuring survivors' basic

Packages/Support	packages.			needs are met. A comprehensive reintegration strategy should address the full spectrum of survivor needs. "Provide safe housing, legal aid, and job placement– not just skills training."
Continued Support	Survivors value care that is not only immediate but also sustained throughout the full process of reintegration and works to ensure well-being.	Identified as critical gap	Survey and FGD	Survey: Sustainable reintegration requires follow-up systems, which were absent or weak in most experiences shared.
				FGD: Many survivors criticized donor-driven projects that provided only short-term assistance, typically lasting six months to a year. Participants felt that this duration was insufficient forlong-term recovery, leaving survivors in a perpetual state of instability and vulnerability.
Empathy	Survivors value empathetic service providers, in addition to clear communication, trust, and cultural competency.	Identified as a survivor recommendation	Survey	Survey: Programs must foster a culture of empathy and dignity.
Evaluation	Survivors value evaluation and feedback processes for services that include their input and seek to improve processes accordingly.	Identified as survivor recommendation.	Survey and FGD	Survey: Survivors recommend routine service evaluations and the integration of survivor feedback to improve programming and outcomes. "Always evaluate services and see if they're making an impact." "Use data and feedback to inform decision making."
				FGD: Involve survivors in monitoring and evaluation: Oftentimes, survivors are being overlooked in this process; they should be involved in the monitoring and evaluation of programs.
Flexibility	Survivors value flexibility in the services they receive, in addition to having voice and choice in them, as well.	Identified as a survivor recommendation	Survey	Survey: Flexibility ensures inclusivity, especially for survivors in remote areas or with mobility barriers. "Offer flexible options like online or in-person support." "Adapt services to changing survivor needs and realities."

Coordination of services and community engagement	Survivors value when various service providers within the community are connected and in communication to avoid gaps.	Identified as survivor recommendation	Survey and FGD	Survey: "Involving faith-based organizations, community groups, and local leaders can expand the support ecosystem for survivors. "Foster collaboration between agencies to avoid gaps. "Churches and communities can play a role if formally engaged."
				FGD: A key issue identified was the fragmented nature of service provision. Survivors frequently encounter a disjointed system, where the support from one service provider ends just as another begins, creating gaps in care continuity. This fragmentation often leads to survivors falling through the cracks and not receiving comprehensive, ongoing care. There was a clear call for improved coordination among government agencies, NGOs, and the community organizations to create a seamless and effective support system. Enhance coordination among service providers: Build networks among government bodies, NGOs, and community organizations to create a seamless referral system that ensures continuity of care.
Dignity/ Lack of exploitation	Survivors value when their post-trafficking circumstances do not involve further situations of exploitation.	Identified as critical gap	FGD	FGD: Several participants expressed how they were often paraded on TV, at church events, and on radio stations, sharing their personal stories without compensation. They felt that organizations were more interested in using their stories as part of a publicity campaign rather than offering meaningful support. Survivors also reported being made to sign contracts without fully understanding the terms, leading to feelings of exploitation by organizations that used their stories for donor engagement without providing them with the help they needed.
Empowerment	Survivors value regaining self-worth and being able to make decisions on what they want in life.	Identified as critical gap	FGD	FGD: Participants articulated their vision of justice not only as legal redress but also as reclaiming dignity and human rights. For many, justice meant being able to take control of their lives and hold perpetrators accountable. Similarly, empowerment was seen as more than just financial independence, it was also about regaining self-worth and having a voice in decisions affecting their lives. As one survivor succinctly put it, "Empowerment means having the resources and the confidence to make my own choices, whether it's starting a business, going back to school, or advocating for others. It's about not being seen as a victim but as a leader with potential."

ASC's Focus Group Discussions Report

FOCUSED GROUP DISCUSSIONS REPORT

Project Title: Values of Human Trafficking Survivors on Trauma-Informed Protective Services Across West Africa

Conducted by: African Survivor Coalition

Date: December 8, 2024

Executive Summary

This report synthesizes findings from two focus group discussions (FGDs) conducted with survivors of human trafficking across seven West African countries: Nigeria, Ghana, Cameroon, Gambia, Senegal, Côte d'Ivoire, and Sierra Leone. The study aimed to evaluate the effectiveness of care services, identify systemic gaps, and propose actionable recommendations to enhance survivor-centered care. Key themes emerged around the necessity of holistic support systems, systemic failures in justice and service provision, and survivor-defined concepts of justice and empowerment. The findings underscore the urgent need for long-term, culturally sensitive interventions that prioritize survivor agency, dignity, and economic independence.

Methodology

Participants: 14 survivors of human trafficking (7 per session), representing diverse nationalities, sexes, and trafficking experiences.

Moderators: Malaika Oringo and Joy Kingsley (Note Taker).

Translator: Eric Itangishatse.

Duration: Two sessions of 2 hours each.

Objective:
The primary aim of the FGDs was to gather qualitative insights into the effectiveness of post-trafficking care services. The sessions sought to identify existing gaps in survivor care, capture survivor priorities for their recovery and reintegration, and inform the development of trauma-informed service provision models. The discussions also aimed to explore survivors' views on the key services they require and how these services can be improved to better meet their needs.

1. KEY FINDINGS

a. Most Valuable Services for Survivors Post-Trafficking

i. Trauma-Informed Psychosocial and Medical Support:

A key theme that emerged from the FGDs was the critical importance of mental health support in the recovery process for trafficking survivors. Participants emphasized that untreated trauma significantly hindered their reintegration into society. Several survivors spoke about their ongoing struggles with trauma and the lack of access to adequate mental health services. One survivor shared, "Despite my advocacy work, I still struggle with trauma and wish I had access to free counseling."

The need for comprehensive medical support was also highlighted, particularly for survivors with chronic health conditions. Many participants noted that when they returned, they faced stigma, health issues, and mental health challenges, all of which were not addressed adequately. One survivor explained, "When you return, you face stigma, health problems, and depression. If these aren't tackled, you can't fully reintegrate. Right now, we have no experts to talk to, no free counseling, and no medical help."

Another participant expressed concern that survivors often had to use their reintegration funds for medical bills rather than for starting a business due to unresolved health issues.

One survivor emphasized the cultural and spiritual aspects of healing, stating, "When you are trying to help survivors, you need to think about their culture and spiritual life. Healing is a process." This highlights the importance of providing culturally sensitive, ongoing support that goes beyond one-time sessions. Survivors also recalled instances when generic or inadequate counseling left them feeling misunderstood and exposed, emphasizing the need for individualized and trauma-informed care that respects their unique healing journeys.

ii. Legal Assistance:

Legal support was deemed essential, but many survivors felt it was either inaccessible or ineffective. Survivors highlighted a significant gap in the legal system, with some legal practitioners lacking the understanding of how trafficking cases unfold. One survivor shared her experience, stating that she was forced to educate her lawyer while still trying to heal, emphasizing the lack of preparedness in the legal field to handle such sensitive cases. Survivors expressed frustration with weak justice systems that have hindered many from seeking or obtaining justice. They noted that traffickers often faced minimal penalties, creating a sense of injustice for those seeking legal redress.

iii. Sustainable Livelihood Support and Economic Empowerment:

Economic self-reliance emerged as a critical factor in breaking the cycle of vulnerability for survivors. A lack of livelihood support often left survivors dependent, struggling with necessities like accommodation and feeding. Survivors discussed the limitations of programs that offer short-term business grants or support without providing proper training or access to necessary capital and equipment. One survivor emphasized that empowerment programs should extend beyond just skill acquisition, noting that there needs to be follow-up support and mentorship. The consensus was clear: economic empowerment must not stop at training but should include sustained support and resources. One survivor noted, "Sustainable livelihood support and empowerment programs are vital. Survivors need to have the opportunity to go back to school, receive training, or even set up micro-businesses so they can become financially self-reliant."

iv. Safe Housing:
Safe housing was unanimously agreed upon as a crucial service for survivors. Survivors stressed the dangers of returning to abusive or high-risk environments. One survivor shared a particularly alarming case where a young survivor was sent back home because the NGO insisted that she needed her family, only to be re-trafficked within months. This story underscored the importance of ensuring safe housing that provides both physical and emotional security for survivors, highlighting the need for a more thoughtful approach to reintegration.

b. Harmful Practices and Systemic Failures:

Both focus groups revealed significant gaps in current post-trafficking support systems: **i. Re-exploitation by NGOs:**
Several participants expressed how they were often paraded on TV, church events, and radio stations, sharing their personal stories without compensation. They felt that organizations were more interested in using their stories as part of a publicity campaign rather than offering meaningful support. Survivors also reported being made to sign contracts without fully understanding the terms, leading to feelings of exploitation by organizations that used their stories for donor engagement without providing them with the help they needed.

ii. Short-Term Support:
Many survivors criticized donor-driven projects that provided only short-term assistance, typically lasting six months to a year. Participants felt that this duration was insufficient for long-term recovery, leaving survivors in a perpetual state of instability and vulnerability.

iii. Mass Service Delivery:
Survivors voiced frustration with generic service delivery models that did not account fortheir unique needs. One survivor highlighted, "When all survivors are given the same type of support, it ignores our unique challenges. Instead, there should be a needs assessment before empowerment programs are rolled out." This underscores the necessity of personalized care that considers the specific circumstances of each survivor.

iv. Weak Justice Systems:

Participants expressed dissatisfaction with the lack of legal protection for survivors, and the minimal penalties traffickers often face. One survivor shared a troubling example where a trafficker, who made millions from exploiting girls, was only fined a small amount while the survivor who testified continued to face threats and harassment. This highlights the need for stronger legal frameworks to ensure that traffickers face appropriate consequences and that survivors are given the protection they deserve.

v. Fragmented Service Provision:

A key issue identified was the fragmented nature of service provision. Survivors frequently encounter a disjointed system, where the support from one service provider ends just as another begins, creating gaps in care continuity. This fragmentation often leads to survivors falling through the cracks and not receiving comprehensive, ongoing care. There was a clear call for improved coordination among government agencies, NGOs, and community organizations to create a seamless and effective support system.

c. Survivor Definitions for Justice and Empowerment

Survivors shared their personal definitions of justice and empowerment, highlighting that these concepts go beyond just legal or financial aspects. One survivor from Ghana emphasized that "Justice is to see my trafficker being held accountable and all those that exploited me being brought to book, and empowerment means for me to be able to make my own choices." Another survivor from Sierra Leone shared, "Justice is fighting for others, and in justice, there is empowerment."

Participants articulated their vision of justice not only as legal redress but also as reclaiming dignity and human rights. For many, justice meant being able to take control of their lives and hold perpetrators accountable. Similarly, empowerment was seen as more than just financial independence, it was also about regaining self-worth and having a voice in decisions affecting their lives. As one survivor succinctly put it, "Empowerment means having the resources and the confidence to make my own choices, whether it's starting a business, going back to school, or advocating for others. It's about not being seen as a victim but as a leader with potential."

Several participants also stressed the importance of survivor inclusion in the design and implementation of all support services, emphasizing that programs should be survivor informed to ensure that they genuinely meet their needs. Survivors want to be actively involved in shaping the programs and services that are meant to help them, as they are the ones who truly understand what support is necessary for their recovery and empowerment.

d. Key Messages for Service Providers

Survivors provided insights on how service providers can better support them during their recovery and reintegration.

• **Chylian from Nigeria** emphasized, "Treat survivors with respect and kindness and recognize their strengths as it is unique to every individual. Recognize that the healing journey is unique, and survivors should be allowed to heal at their own pace."

• **Afasi from Ghana** highlighted the importance of survivor inclusion, stating, "Ensure survivors are included in all aspects of reintegration and prevention programs."
• **Francisca from Cameroon** called for individualized support, saying, "Take time to evaluate and assess the needs of every survivor."
• **Abdoul from Senegal** urged respect and autonomy, stating, "Respect survivors without discrimination and let them have the freedom and autonomy to choose when to speak."
• **Herve from Côte d'Ivoire** advocated for better training, noting, "Encourage training of social workers. If you save a life, you are saving a community."
• **Itohan from Nigeria** highlighted the importance of listening, stating, "Listen to survivors as every survivor's need is unique. Building trust should be the foundation for any care provider."
• **Sherry from Ghana** emphasized empathy, saying, "Survivors should be treated with empathy and kindness, and constant follow-up should be given."
• **Hassan from Sierra Leone** stressed the importance of involving survivors in program development, stating, "Listen to the voices of survivors and include them in the development of care programs."

Recommendations for Enhancing Post-Trafficking Support Systems

Based on the discussions, the following steps are recommended to enhance post-trafficking support systems:

1. **Develop Comprehensive, Trauma-Informed Counseling Centers:** Establish centers offering long-term, culturally sensitive mental health support, ensuring regular follow-up and individualized care.
2. **Integrate Tailored Economic Empowerment Programs:** Combine skill acquisition with post-training support such as start-up capital, mentoring, and provision of necessary tools or equipment.
3. **Ensure Long-Term Funding and Continuity of Care:** Advocate for funding models that extend support beyond short-term projects and promote inter-organizational collaboration to prevent gaps in service.
4. **Improve Service Delivery Through Needs Assessments:** Conduct individualized assessments to tailor interventions to each survivor's unique circumstances.
5. **Strengthen Confidentiality and Survivor Inclusion:** Implement strict confidentiality protocols and include survivors in decision-making processes through

advisory boards and regular feedback sessions.
6. **Enhance Coordination Among Service Providers:** Build networks among government bodies, NGOs, and community organizations to create a seamless referral system that ensures continuity of care.
7. **Involve Survivors in Monitoring and Evaluation**: Oftentimes, survivors are being overlooked in this process; they should be involved in the monitoring and evaluation of programs.
8. **Involve Survivors in Funding Decisions:** Funding should be made available to survivors, and they should be included in the donor's decision-making processes.
9. **Develop Guidelines for Countries:** Guidelines should be developed to empower countries to build capacities for national survivor advisory councils and also take into account the perspectives of survivors in policy formulation and implementation.
10. **Develop Accountability Mechanisms:** Develop accountability mechanisms for government and law enforcement to address systemic failures.

Recommendations for the Justice System and Legal Support

1. **Improve Access to Legal Representation for Survivors**: Establish survivor-centered legal aid services, ensuring free, accessible, and confidential legal assistance for survivors of trafficking.

2. **Speed Up Prosecution and Reduce Corruption**: Implement stricter anti-corruption measures in trafficking cases and prioritize fast-tracking these cases to ensure justice is served.

3. **Enhance Witness Protection and Safety for Survivors Seeking Justice**: Establish strong survivor protection programs, including safe housing and security measures for those testifying against traffickers.

4. **Provide Legal Literacy and Awareness Programs for Survivors**: Develop legal education workshops to inform survivors about their rights, legal processes, and available support services.

5. **Strengthen Law Enforcement Training on Trafficking Cases**: Provide specialized training to police, prosecutors, and judges on handling trafficking cases sensitively and efficiently develop guidelines for trauma-informed judicial processes.

6. **Strengthen Witness Protection System**s: Witness protection systems need to be developed considering the real needs of victims and the effect of trauma on individuals.

7. **Compensation for Survivors**: Improve access to compensation for survivors through survivor-centered justice frameworks.

Recommendations for Economic and Sustainable Livelihood Support

1. **Expand Vocational Training and Skill Development Programs**: Governments, NGOs, and private sector actors should invest in training programs tailored to survivors' needs.

2. **Provide Start-Up Capital and Business Grants for Survivors**: Establish grant programs, microfinance opportunities, or survivor-focused investment funds to help them start businesses without the usual barriers to loans.

3. **Enhance Job Placement and Employer Engagement Programs:** Partner with businesses to create survivor employment programs and incentivize employers to hire survivors.

4. **Establish Long-Term Economic Support Rather Than Short-Term Aid**: Shift from short-term relief efforts to sustainable economic interventions such as savings programs, mentorship, and ongoing financial education.

5. **Improve Survivors' Access to Markets and Business Networks**: Connect survivor entrepreneurs to larger markets, e-commerce platforms, and business networks to help them grow their enterprises.
6. **Provide Mentorship and Business Guidance Alongside Funding**: NGOs and funding organizations should not only provide survivors with grants or business funding but also pair them with mentors who can guide them in managing finances, marketing, and growing their businesses sustainably. This mentorship should include financial literacy, business planning, and networking opportunities.

Recommendations for Medical Support for Survivors

1. **Provide Free or Subsidized Healthcare for Survivors**: Governments and NGOs should establish medical programs that offer free or low-cost treatment for survivors, including physical and mental healthcare.
2. **Expand Access to Mental Health Services**: Increase the availability of free or affordable counseling and therapy services, ensuring that survivors have ongoing psychological support.
3. **Train Healthcare Providers on Trauma-Informed Care**: Conduct sensitization programs for doctors, nurses, and medical staff on how to treat survivors with dignity and without judgment.
4. **Increase Availability of Sexual and Reproductive Health Services**: Provide specialized care for survivors of sexual exploitation, including testing and treatment for infections, access to contraceptives, and safe spaces for discussing reproductive health concerns.
5. **Create Survivor Health Funds for Emergency Medical Needs**: NGOs and donors should establish emergency health funds to cover urgent medical expenses for survivors who cannot afford treatment.

Recommendations for Addressing Re-Exploitation and Community Reintegration

1. **Ensure Survivor-Centered and Long-Term Support**: CSO's should prioritize sustainable support instead of short-term projects. Programs should focus on long term empowerment rather than temporary relief.
2. **Improve Accountability and Ethical Engagement with Survivors**: CSOs must ensure survivors are not exploited for publicity or donor engagement. Ethical guidelines should be established for working with survivors.
3. **Strengthen Community Awareness Campaigns to Reduce Stigma**: CSOs should work with local leaders, religious figures, and schools to educate communities on human trafficking and support reintegration efforts.
4. **Support Family Reintegration Programs**: Create family counseling and mediation programs to help survivors reintegrate into their homes without facing rejection.
5. **Enhance Mental Health and Emotional Support for Survivors**: CSOs should provide long-term psychosocial support, including therapy and peer support groups, to help survivors deal with stigma and emotional struggles.

ASC's Survey Report

SURVEY REPORT

Project Title: Values of Human Trafficking Survivors on Trauma-Informed Protective Services Across West Africa.

Prepared by: African Survivor Coalition (ASC)

Number of Respondents: 16 Survivors of Human Trafficking

Respondents Country: Nigeria, Ghana, Senegal, Togo, Mali, Guinea, Cote d' Ivoire, Sierra Leone, Gambia, Cameroon.

Executive Summary

This report presents findings from a regional survivor-led survey capturing the voices, values, and lived experiences of 16 survivors of human trafficking from 10 West African countries: Nigeria, Ghana, Senegal, Togo, Mali, Guinea, Côte d'Ivoire, Sierra Leone, Gambia, and Cameroon. The survey was collaboratively developed by the African Survivor Coalition (ASC) and the Center on Human Trafficking Research & Outreach (CenHTRO) to inform and improve trauma-informed, culturally responsive services for survivors across West Africa.

Participants are survivors of various forms of trafficking including forced labor, sexual exploitation, and domestic servitude. While many received some level of post-rescue assistance, including repatriation or temporary shelter, their testimonies reveal significant and ongoing barriers to recovery. These include limited access to financial support, legal and immigration services, stable housing, and consistent psychosocial care.

Survivors highlighted the importance of dignity, safety, agency, and peer-led support throughout their reintegration. Yet language barriers, lack of culturally sensitive care, and insufficient awareness of available services undermined their ability to fully heal and rebuild their lives. Many also encountered stigma, distrust, or exclusions when engaging with service providers.

Key regional trends include inconsistent support systems, a reliance on informal networks such as religious institutions and peer groups, and the urgent need for survivor-centered approaches that honor cultural, spiritual, and gender-specific needs. This report synthesizes

these insights to guide practitioners, policymakers, and organizations in creating holistic, survivor-informed frameworks that promote sustainable reintegration and long-term well-being.

Introduction

Survivors of human trafficking hold critical insight into the effectiveness and limitations of support systems intended to aid their recovery and reintegration. Yet, their voices are often missing from the conversations shaping those systems. To address this gap, the African Survivor Coalition (ASC), in collaboration with the Center on Human Trafficking Research & Outreach (CenHTRO) designed a regional survey to collect direct feedback from survivors across ten West African countries.

This report is grounded in the lived experiences of 16 survivors who participated in the survey. Rather than approaching the data solely through a service delivery lens, the analysis centers on survivor perspectives, focusing on how they interpret, evaluate, and experience support mechanisms. The goal is to provide a nuanced understanding of what dignity, safety, and healing look like from the viewpoint of those most affected.

Through a thematic analysis of their responses, this report surfaces survivor-defined priorities, identifies systemic and contextual challenges, and highlights strategies that could strengthen trauma-informed, culturally grounded service provision across the region. It also recognizes the role of local organizations, informal networks, and peer support as essential components of care.

Methodology

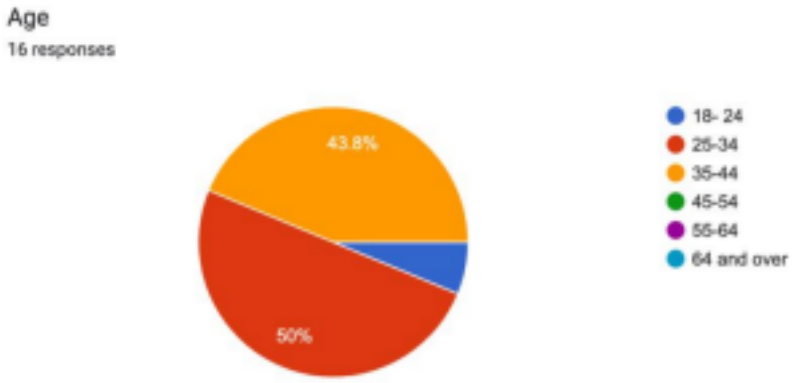
This report draws on qualitative and quantitative data collected through a regional survey developed by the African Survivor Coalition (ASC), with support from the Center on Human Trafficking Research & Outreach (CenHTRO). The survey was designed to capture in-depth
survivor perspectives on the effectiveness and accessibility of post-trafficking support services in West Africa.

To support and contextualize the qualitative data, quantitative elements such as age, gender, type of trafficking, and country of origin were also collected and analyzed. Participants had the option to complete the survey in multiple languages to ensure accessibility and accurate expression.

The resulting analysis centers survivor narratives to inform a more trauma-informed, culturally responsive, and survivor-led approach to service delivery across the region.

Demographics of Respondents

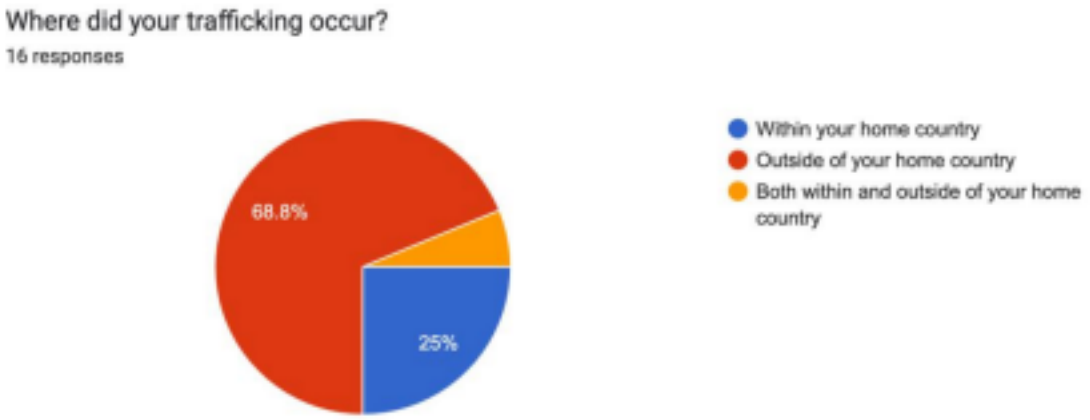
Age Range: Participants were Mostly between 25–34 years old and 35- 44 years old.



Gender: 69% identified as female and 31% identified as male.

Forms of Trafficking Experienced: Predominantly Forced labour , other forms highlighted include Sex Trafficking, domestic servitude, child trafficking, debt bondage and Familial trafficking.

Location of Trafficking: Predominantly occurred outside the survivors' home countries



Limitations and Ethical Considerations

Sample Size:
The analysis is based on a small, qualitative sample (16 survivors), which limits statistical generalizability but offers deep insight into lived experiences.

Potential Biases:

- There may be underrepresentation of male, LGBTQ+, or disabled survivors.

Ethical Safeguards:

- Participation was voluntary and anonymous.
- Informed consent was embedded in the survey design.
- Trauma sensitivity guided the analysis, ensuring respectful handling of narratives.
- Survivors could choose to remain anonymous or share pseudonyms.

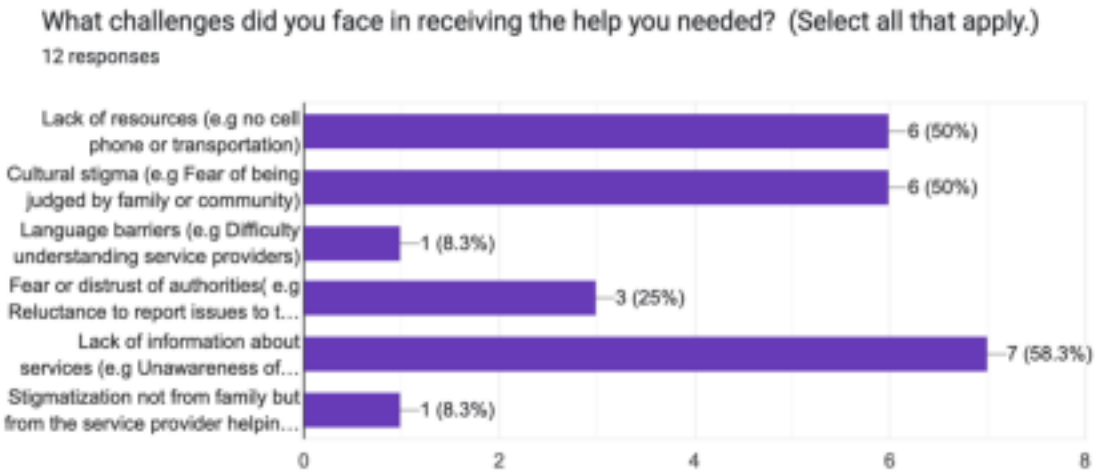
Thematic Analysis

Theme 1: Access to Services Post-Trafficking

Key Findings

- **Access Gaps Remain Significant**: Only 75% of survivors reported receiving any form of post-trafficking services, leaving 25% without access primarily due to:
    - o Lack of awareness about available services
    - o No services available at the time of their trafficking or return
- **Limited Immigration Support for Cross-Border Survivors**: Among survivors trafficked across borders, only 31% received immigration-related assistance, exposing a major protection gap in regional response systems. These supports were either provided by:
    - o Family
    - o IOM
    - o Civil Society Organizations
- **Informal Networks Played a Vital Role**: Survivors most often learned about available services through family, friends, or civil society organizations (CSOs)**,** rather than through formal referral systems.
- **Short-Term Support was Common**: Among those who received help -
    - o Only 25% received support for up to one year
    - o The majority received support for less than a year
    - o None of the respondents are still receiving ongoing services today

Major Barriers to Accessing Services



Survivors highlighted multiple systemic and personal barriers that made accessing services difficult:

- **Lack of Basic Resources**: Many lacked essentials such as a mobile phone or transport to reach service providers.
- **Stigma and Fear of Judgment**: Survivors were afraid of being judged by family or their communities, which discouraged them from seeking help.
- **Limited Information about Available Services**: Many were unaware of existing shelters or programs in their area highlighting poor outreach and visibility of support systems.
- **Negative Experiences with Authorities**: A history of distrust and harmful interactions with law enforcement made survivors reluctant to report or engage with formal systems.
- **Language Barriers**: Communication challenges further isolated survivors from accessing and benefiting from services.

Organizations Identified as Helpful

Survivors specifically named the following as trusted sources of support:

- IOM (International Organization for Migration)
- Civil Society Organizations**,** including NGOs and faith-based groups
- Family Networks

The findings also indicate the complex role of families**.** Some survivors experienced stigma or fear of judgment from relatives, while others identified family support as critical to their reintegration**.**

Theme 2: Effectiveness and Gaps in Post-Trafficking Services

What Survivors Valued Most

Survivors consistently identified the following as the most meaningful supports in their recovery journeys:

- **Counseling and Therapy**: Access to trauma counseling was one of the most frequently mentioned forms of support. Survivors valued being able to process their experiences in a safe space with trained professionals.
- **Medical Support**: This was the second or third most cited form of assistance, particularly important for those with untreated health issues resulting from trafficking.
- **Economic Support**: While highly appreciated, economic aid was often short-term and lacked follow-up mechanisms for sustainability. Survivors wanted support that could help them become self-reliant.
- **Peer-to-Peer Support**: Many survivors found great comfort and strength in connecting with others who had endured similar experiences, which contributed significantly to their healing.

Critical Gaps in Service Delivery

Despite the services offered, survivors identified key areas where their needs were unmet:

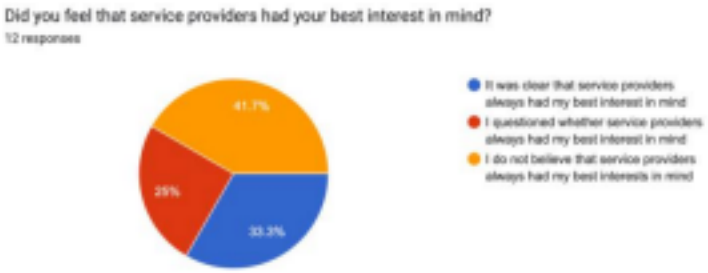
- **Lack of Family Access**: Survivors emphasized that being able to see or communicate with family would have enhanced their emotional security. Isolation after repatriation deepened their trauma.
- **Transportation Barriers**: Survivors often traveled long distances on foot to attend counseling sessions. As one survivor noted, *"If I would have been provided with transportation, it would have helped me a lot… but there was no budget allocated to support me."* This gap created physical strain and emotional fatigue, potentially reducing attendance and effectiveness of services.
- **Language Barriers**: Survivors struggled to communicate when service providers used languages they weren't fluent in. A survivor shared, *"As a Ghanaian, my native language is Twi, but the staff spoke mostly English. This made it difficult for me to communicate my needs."*
- **Lack of Cultural Sensitivity**: Service providers were often unaware of local customs, leading to misunderstandings and a feeling of alienation. One participant noted, *"The staff were not familiar with Ghanaian culture and customs… they couldn't understand my perspective and needs."*

- **Lack of Autonomy and Choice**: Survivors expressed frustration at being passive recipients of help, with little agency in choosing what services they received. As one put it, *"We couldn't decide what we wanted… other than take what we were being offered and be grateful."* This undermines a key principle of trauma-informed care: empowerment through choice**.**

The findings underscored that while essential services were available to some survivors, they often lacked the depth, adaptability, and survivor-centered delivery needed for true healing. Survivors called for:

1. Localized, culturally competent support
2. Financial and logistical resources (e.g., transportation) that make services accessible
3. Services that prioritize dignity, agency, and long-term sustainability

Theme 3: Safety, Trust, and Communication with Service Providers



Key Findings

Survivors' experiences with safety, trust, and transparency in service provision revealed mixed and sometimes concerning trends, pointing to critical areas for improvement in trauma-informed care services across West Africa.

- **Perceptions of Safety Were Inconsistent**: While 58% of survivors reported feeling safe and comfortable, a significant 42% remained neutral, suggesting they neither felt safe nor unsafe. This neutrality may indicate a lack of consistent safety practices or unmet emotional and psychological needs during service delivery.
- **Service Environments Were Often Perceived as Impersonal or Unwelcoming**: Only 49% of survivors reported feeling safe in the environment where services were provided, while 50% were neutral. This implies that service settings may lack culturally appropriate, comforting, or survivor-sensitive design features.
- **Trust in Service Providers Was Limited**: Just 33% of survivors fully trusted the individuals providing their care. 25% were unsure and 42% only partially trusted providers. This signals a significant trust gap, possibly driven by past trauma, lack of cultural connection, or inconsistent provider behavior.
- **Communication Was Often Lacking in Care and Clarity**: Less than half (42%) of the respondents felt that communication with providers was handled with full care and sensitivity. More alarmingly, 77% either doubted or did not believe that service providers had their best interests in mind. This undermines the very foundation of trauma-informed care, which relies on transparency, empathy, and empowerment.

These results highlight a disconnect between the intent of services and the lived experiences of survivors**.** Survivors were not always reassured or made to feel like true partners in their healing journey. The high percentage of neutral and unsure responses may reflect:

- A lack of survivor-centered approaches

- Inadequate training in trauma-informed practices
- Insufficient feedback mechanisms for survivors to express discomfort or needs

To build truly trauma-informed, culturally competent systems, service providers must:

1. Invest in training that builds empathetic, trust-based relationships with survivors.
2. Adapt service environments to feel safe, inclusive, and respectful of cultural backgrounds.
3. Communicate clearly, consistently, and with demonstrated care**,** ensuring survivors understand their rights and options.
4. Center survivor voices in program design and evaluation**,** building services around what safety and trust mean to them.

Theme 4: Peer Support, Collaboration and Choice in Service Delivery

Key Findings and Deductions

- **Peer Connection as a Source of Healing:** 67% of survivors were able to connect with peers during service delivery, and 75% shared that these connections had a positive impact on their healing journey. Peer interactions offered survivors emotional safety, validation, and the ability to learn from others' coping strategies.
- **Choice and Autonomy Generally Respected, but Not Universal:** 83% of survivors reported that they were not pressured to do anything they were uncomfortable with in order to receive services. This indicates some level of trauma-informed care in service delivery. However, 17% either experienced pressure or were unsure.
- **Limited Influence in Decision-Making:** While 75% said they could give some input regarding their care and recovery, the other 25% felt sidelined, which reflects a gap in survivor-centered approaches.
- **Mixed Feelings on Being Heard:** Half of the respondents who received services felt understood and listened to by service providers; the other half did not. This suggests inconsistencies in provider training or approach, particularly around active listening and validation.

Survivors expressed a strong desire to be treated with respect, without assumptions:

- **Justice Was Often Inaccessible or Traumatizing:** Only 8% of survivors were able to pursue justice to the extent they desired. 50% had some legal support but faced significant barriers (like cost, delays, or fear), and 42% had no access at all. 92% agreed that their country's legal system did not protect them adequately. Survivors cited corruption, re-traumatization, lack of protection, and cultural stigma as deterrents:

"Survivors who dared to report were not protected... the punishment was so light that it put our lives at risk once the trafficker got out."

"Too much corruption and bias… the system also requires survivors to be witnesses over and over, reliving the trauma."

"In my country, many prefer to stay silent. The justice system is expensive and unsafe."

Barriers to Justice

Access to justice remains one of the most significant challenges for survivors of human trafficking and exploitation across West Africa. Despite legislative advancements in some countries, survivors continue to face immense obstacles when attempting to pursue justice Some as highlighted by the survey participants are mentioned below:

- **Systemic Failures and Weak Enforcement:** Many survivors described a legal system that is structurally unresponsive and inconsistently enforced. Even where protective laws exist, enforcement is often weak especially in rural or underserved areas.
  "Sierra Leone has made progress... but enforcement of these laws remains inconsistent. Corruption and long delays in the justice system often undermine survivors' trust in legal processes."

  Participants also noted that even when cases were prosecuted, penalties for traffickers were often minimal, leading to fears of retaliation.

- **Legal Processes as a Source of Trauma:** The legal process itself was described as lengthy, expensive, and emotionally exhausting. Survivors frequently had to serve as witnesses multiple times, forcing them to relive their trauma.

  "The legal process takes an extremely long time... it also needs a lot of money, which survivors may not have. The system also requires survivors to be witnesses on multiple occasions, hence exposing them to recurring trauma."

- **Corruption, Bias, and Lack of Accountability:** Survivors identified corruption and bias as pervasive problems that disincentivize reporting and pursuit of justice. Many felt that the justice system was not designed to protect them but instead left them further exposed.

  "Too much corruption and bias within the justice system makes it scary to seek legal services. Also, fear of retaliation or further harm, as well as societal stigma... makes justice far-fetched for survivors."

  "In my country, survivors are not adequately protected. When exploitation is reported, authorities often demand extensive evidence... law enforcement frequently

  fails to provide protection or act, leaving survivors vulnerable and without

justice."

- **Gaps in Implementation and Training:** Inadequate training for law enforcement and judicial personnel was a recurring concern. Survivors felt that officers often lacked the sensitivity and knowledge to handle trafficking cases effectively.

  "There is a need for more specialized training for law enforcement, prosecutors, and judges to handle human trafficking cases effectively."

  "One major challenge is the lack of effective implementation of the law. Many cases of human trafficking go unreported or uninvestigated, and perpetrators often go unpunished."

- **Economic and Structural Barriers:** Survivors cited the high cost of legal services, lack of legal aid, and the inaccessibility of courts especially in remote areas as major deterrents to seeking justice.

  "Many people are victims of exploitation or trafficking in my country. Survivors avoid going to court because most of them cannot afford it. They prefer to stay silent."

  In Mali, the absence of survivor-centered policies and financial support has further restricted justice access.

  "That is why this survivor coalition is very welcome in Mali. Survivors in Mali do not have the means or policies in place to defend their interests."

Recommendations from Survivors for Survivor-Centered Support

- Treat survivors without discrimination or judgment.
- Provide choices in services, rather than one-size-fits-all offers.
- Respect cultural and religious values and avoid making assumptions. • Protect survivors' data and identities.
- Empower survivors with clear information and agency over their own journey.

Creating and Sustaining Peer Support Systems

Survivors emphasized that peer-to-peer support should not be incidental but intentional and structured**.** Their suggestions included:

- Train survivors as peer leaders and facilitators to lead group healing sessions. • Pair new returnees with experienced survivors for one-on-one support. • Create both physical and digital environments for survivors to share, heal, and access resources.

- Recognize leadership potential within survivor communities and support their growth.
- Organize survivor reunions and experience-sharing forums to combat isolation and build solidarity.

"They can best help us if they form a united front around the well-being of all survivors."

Theme 5: Cultural, Language and Gender Factors

Key Findings and Deductions

- 67% of respondents who received services reported that language barriers did not impact their ability to access or benefit from services, indicating that many survivors were able to communicate effectively within the service systems provided.
- 33% indicated that language posed a barrier either minimally or to a significant extent suggesting that a substantial minority may have faced difficulties in understanding or expressing their needs, which could affect the quality and timeliness of support received.

While services appear generally accessible language-wise, there remains a need for improved multilingual communication support to ensure inclusivity, particularly for those who are not fluent in dominant service languages.

- 75% of respondents who received services felt that services respected and accommodated their cultural and religious expectations**,** reflecting positive integration of cultural competence within service provision.
- 16% reported that they were required to act against their cultural or religious beliefs while receiving services, which may have caused distress, reduced trust, or hindered full engagement with the support process.
- 8% stated that culture and religion were not a factor in their care experience, possibly indicating either neutrality in service delivery or a lack of culturally tailored approaches.

The findings highlight a strong foundation of cultural responsiveness in service delivery,

but they also reveal gaps. It is crucial to further integrate culturally sensitive practices and ensure that no survivor is made to compromise their beliefs as a condition of care.

- 92% of respondents who received support said that gender dynamics did not negatively affect their service experience, suggesting that service environments were generally gender-sensitive and respectful**.**
- 8% reported that gender did impact their comfort or experience, pointing to the need for greater survivor choice in provider gender**,** particularly in services involving sensitive topics or personal trauma.

While most survivors felt safe regardless of provider gender, it remains important to maintain gender-informed practices and offer flexibility in provider assignment to support trauma-informed, survivor-centered care.

Cultural and Religious Considerations in Service Delivery

- Respect for Religious Practices: Survivors emphasized the need for prayer spaces, modest interactions, and religious dietary options. Spiritual support was seen as essential to trust and well-being.
- Staff Cultural Competence: Culturally sensitive care requires providers to be trained in understanding and respecting survivors' cultural and religious contexts.
- Language Access and Participation: Survivors expressed that being served in their preferred language and included in decision-making processes improved their comfort and trust.
- Community and Traditional Engagement: Involving community leaders and traditional healers can build trust and provide culturally resonant support structures.

Recommendations

- Provide faith-friendly spaces and allow time for religious practices.

• Train staff in cultural and religious sensitivity using survivor-informed materials. • Incorporate language interpretation services and offer materials in local languages. • Collaborate with traditional and spiritual leaders where appropriate.
• Develop community-based models that include survivors' cultural values in healing and reintegration processes.

Theme 6: Healing in the Absence of Formal Support Services

For survivors who did not receive professional or institutional support following their trafficking experiences, healing was still possible through a combination of personal resilience, faith, informal peer networks, and family or community-based care. Their journeys reflect the power of self-driven healing strategies rooted in trust, creativity, spirituality, and education.

- **Informal Support Networks:** Several survivors emphasized that emotional healing was made possible through the presence of supportive family and friends, even when they had not disclosed their trafficking experience.

  "I have a very supportive family even though I didn't tell them my story, they are always there for me. They have never judged or discriminated against me. They make me feel like we are in this together."

  "One of the most significant factors that helped me heal was the support of my family and friends. Having a strong network of loved ones who believed me, listened to me, and validated my feelings was instrumental in my recovery."

- **Self-Awareness Through Peer Survivors:** In some cases, healing began with knowledge when another survivor helped name their experience and introduced concepts of trauma and recovery.

  "A survivor reached out and explained to me what trafficking and trauma is. With this information I got to realize I am a victim and I have trauma now I know how to address it."

  This peer connection acted as a catalyst, not only for self-recognition but also for the initiation of coping strategies.

- **Faith-Based Healing and Spiritual Anchoring:** Faith emerged as a profound source of strength for some survivors. Participation in church activities, youth groups, and scripture-based teachings provided emotional safety and meaning.

"As a Christian, I devoted myself to the Word of God and being active in my church family... I found hope for my future and emotional and psychological comfort through scripture."

These activities were often combined with peer support and motivational sessions offered in faith spaces.

- **Therapeutic and Creative Self-Care Practices:** Survivors also engaged in creative and physical self-care activities that helped regulate emotions and provide a sense of control and joy.

"I engaged in various self-care activities that helped me cope with the emotional aftermath of my experience. These included church choir, exercise, nature walks, and creative pursuits like art, craft, and crocheting."

Such activities allowed for emotional expression and served as a non-verbal outlet for healing trauma.

- **Education as Empowerment:** One survivor described how pursuing a degree in psychology not only offered intellectual growth but also equipped her with psychological tools to understand and manage trauma.

"Entering university for my undergraduate programme in Psychology was another empowerment process. Through courses like Abnormal and Clinical Psychology, I gained insights and skills to deal with PTSD, which facilitated my emotional healing."

Reading motivational books by authors such as Joyce Meyer, John C. Maxwell, and Myles Munroe was also highlighted as a complementary tool for resilience-building.

While the absence of formal services remains a major gap in survivor care, these narratives reveal how survivors have developed powerful, often community-rooted, strategies to support their own healing. These findings reinforce the importance of expanding trauma-informed and survivor-led peer support networks, recognizing the role of faith and family, and building bridges between informal healing and formal mental health services.

Accessing Resources and Rebuilding Post-Trafficking

For survivors who did not receive support, they described varying pathways to meeting their basic needs after escaping trafficking. Their responses reflect a strong reliance on personal networks, creative survival strategies, and community support especially from churches,

friends, and informal jobs.

- **Immediate Reliance on Family and Friends:** For many survivors, initial survival hinged on the support of trusted family and friends. These informal networks provided essential resources such as food, shelter, and emotional reassurance in the critical early period post-trafficking. These connections not only provided material support but often served as the survivor's only safety net in the absence of official reintegration services.
- **Income Through Informal and Creative Work:** Survivors often had to rely on their own ingenuity and resourcefulness to make ends meet. Creative crafts, volunteering, and informal labor were common strategies.

  "To achieve financial stability, I volunteered with local organizations and did crocheting and art pieces that I sold for survival. These steps helped me rebuild my life, gain independence, and support others who experienced similar traumas."

  Others turned to low-wage or physically demanding work due to barriers in formal employment markets.

  "When I got back, I struggled to meet my family's expectations financially. I had no choice but to seek employment. This was not an easy task since most of the jobs required 10 years' experience and education, which I did not have. So, I went for odd jobs."

- **Absence of State Support and the Role of Churches:** In countries where formal anti trafficking frameworks were nonexistent or newly established, survivors highlighted the total absence of state-led reintegration resources.

  "Such resources were not available in my country at the time. This was even worsened by the fact that, until 2015 when the Human Trafficking Act was passed, this heinous crime was normalized and there was no national response." – Survivor leader, Togo.

  In such contexts, the church emerged as a source of stability and care:

  "I had to fall on friends, family and church community to secure some support and resources to build myself and to thrive. My greatest support came from my local church community and my own personal effort reaching out to anyone who would listen and help me, as well as resorting to books."- Survivor leader, Togo.

These testimonies reveal a striking gap in formal post-trafficking support systems, pushing survivors to rely on faith communities, creative entrepreneurship, and informal networks. Survivors' resilience and initiative were key to their recovery, but these paths were often difficult and uncertain. There is an urgent need to institutionalize survivor-centered reintegration services including access to housing, food, employment, and mental health care especially in contexts where survivors currently face these burdens alone.

Theme 7: Impact of Services

Key Findings

- Only 8% of survivors highlighted that the service was all the help they needed. 17% highlighted that it was mostly helpful, and the other 75% highlighted that the help was either not enough, a little helpful or somewhat helpful.

- 50% highlighted that the services were very impactful in having a better life. 33% said it was slightly impactful, 8% said it was extremely impactful and only 8% said it was not impactful at all.

Key Services That Were Missing or Inadequate

Despite receiving some support, survivors identified critical gaps and areas that required urgent improvement in the post-trafficking recovery process:

a. Delayed or Inaccessible Reintegration Packages: This delay hampers early stabilization and undermines the purpose of reintegration support. Timeliness is essential to rebuilding trust and ensuring survivors' basic needs are met.

b. Limited Access to Mental Health and Psychosocial Support: "Comprehensive mental health care should be the foundation of any reintegration process."
Survivors emphasized the importance of trauma-informed therapy**,** specialized counseling**, and** support groups as services that were either missing or insufficient in their experiences. For many, the lack of immediate emotional support made reintegration feel overwhelming.

c. Gaps in Economic Empowerment: Survivors consistently raised concerns around the quality**,** relevance**, and** duration of economic reintegration programs. Short-term aid and one-off training programs were not sufficient to ensure economic stability.

d. Lack of Monitoring and Ongoing Support: Sustainable reintegration requires follow-up systems**,** which were absent or weak in most experiences shared.

e. Insufficient Legal and Shelter Support: There was a notable absence of legal aid**,** court accompaniment**,** and safe housing in several countries. This left survivors exposed, unsupported in justice processes, and at risk of retraumatization.

f. Geographic and Logistical Barriers: Survivors living in rural or remote areas felt excluded from support systems designed without geographic flexibility.

Survivor Recommendations to Improve Services

a. Survivor-Centered and Trauma-Informed Approaches: Survivors urge service providers to place mental health and emotional well-being at the center of all reintegration efforts, recognizing the complexity of trauma recovery.

b. **Empathy, Respect, and Cultural Sensitivity:** Programs must foster a culture of empathy and dignity**,** while respecting diverse cultural contexts and survivor experiences.
"Treat survivors as yourself, we are all human."
"Respect survivors' cultural differences and avoid imposing Western values."

c. **Stronger Monitoring, Evaluation, and Feedback Loops:** Survivors recommend routine service evaluations and the integration of survivor feedback to improve programming and outcomes.

"Always evaluate services and see if they're making an impact." "Use data and feedback to inform decision-making."

d. **Holistic Reintegration Support:** A comprehensive reintegration strategy should address the full spectrum of survivor needs.

"Provide safe housing, legal aid, and job placement—not just skills training."

e. **Flexible and Adaptive Service Delivery:** Flexibility ensures inclusivity, especially for survivors in remote areas or with mobility barriers.

"*Offer flexible options like online or in-person support."*

"Adapt services to changing survivor needs and realities."

f. **Greater Coordination and Community Engagement:** Involving faith-based organizations, community groups, and local leaders can expand the support ecosystem for survivors.

"*Foster collaboration between agencies to avoid gaps."*
"Churches and communities can play a role if formally engaged."

These above underscored a pressing need to humanize reintegration**,** tailor services to diverse needs**,** and build responsive, trauma-informed systems**.** Survivors are not only beneficiaries, they are experts whose lived experience offers a roadmap to creating more compassionate, effective, and sustainable anti-trafficking programs.

Table 1: Country-Level Patterns in Survivor Experiences

Country	**Key Themes Identified**
Nigeria	Counseling and peer support; inconsistent shelter access
Ghana	Reintegration support noted; gaps in financial aid
Mali	Lack of immigration/legal support; housing a major concern
Guinea	Low awareness of services; cultural mismatch noted
Togo	Returnees felt abandoned; no guidance received
Senegal	Peer networks helped; stigma prevalent
Sierra Leone	Low trust in providers; request for staff training
Côte d'Ivoire	Mixed experiences; shelter noted, legal help lacking
Gambia	No service contact; need for awareness campaigns
Cameroon	Language and cultural barriers disrupted access

Table 2: Service Mapping – Survivor-Identified Key Organizations

Organization	Role Noted by Survivors
IOM	Repatriation logistics, some shelter support
Local churches/mosques	Emergency food and shelter support

Survivor-led groups like
ASC Peer support, mentorship

Conclusion

The insights shared by survivors through this survey offer a compelling and necessary call to action for improving anti-trafficking response systems across West Africa. While some survivors received meaningful support particularly through peer networks, repatriation efforts, and faith-based institutions, gaps remain significant and widespread. Inadequate legal and immigration support, inconsistent access to shelters, limited cultural and language accommodations, and a general lack of awareness about available services continue to hinder the healing and reintegration journeys of many survivors.

Survivors emphasized the importance of being treated with dignity, of feeling safe, and of having services that reflect and respect their cultural and religious identities. They also called for more sustained, survivor-informed programming that centers their voices and lived realities.

For governments, NGOs, and service providers working in this space, the message is clear: effective anti-trafficking responses must be holistic, culturally grounded, and survivor led. Future interventions should prioritize trauma-informed care, enhance language access, support traditional healing practices where appropriate, and invest in long-term reintegration strategies

END OF REPORT