

**NATIONAL POLICY ON
PROTECTION AND ASSISTANCE TO
TRAFFICKED PERSONS IN NIGERIA**

FOREWORD

The National Agency for the Prohibition of Traffic in Persons and other Related Matters was established in July 2003, by the Federal Government of Nigeria, as a response to the social menace and negative image engendered by the phenomenon of human trafficking. Human Trafficking is a euphemism for the obnoxious 18th century slave trade proscribed by International laws. It is the worst form of human degradation, deprivation and violation, and works against the cardinal provision of the Constitution of the Federal Republic of Nigeria, which ensures the security, welfare and the human rights of its citizens.

Victims of human trafficking are usually subjected to various forms of physical assault, exploitation and abuse resulting in highly traumatized individuals. Trafficked persons are often rejected and exposed to health hazards, such as HIV/AIDS, STIs, mental disorders and other related problems. Unfortunately, victims are further traumatized by the absence of appropriate intervention to remedy these experiences. This National Policy is a response to this problem. The provisions of the document which are in line with international standard procedures and best practices are expected to facilitate recovery of trafficked persons by restoring their self worth and esteem.

In articulating this policy document, various issues relevant in the rehabilitation and reintegration of victims, objectives and implementation guidelines to regulate the activities of practitioners were incorporated.

I have no doubt that this will be a useful guide to policy makers, civil society organizations, law enforcement agencies, international organizations, development partners and countries facing the challenge of protection and assistance to victims of human trafficking.

The National Policy on Protection and Assistance articulated by the Counselling and Rehabilitation Department, (NAPTIP), in collaboration with relevant stakeholders is hereby recommended as a useful guide and referral to all stakeholders as it meets internationally accepted standards and best practices.

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We acknowledge the contributions from our sister agencies, line ministries, NGOs and other relevant stakeholders too numerous to mention here, in actualizing this policy document. The literature provided by them in the course of articulating the document will remain invaluable resource in providing succour and instilling hope in victims of human trafficking.

The Technical Committee which articulated this document and the Review Committee that fine tuned it both did a great job. Thank you immensely for your assiduousness, diligence and commitment all through the project. We appreciate the able leadership of the Director, Counselling and Rehabilitation Department, Mrs. L. N. Oguejiofor for her initiative and dynamic leadership in achieving this feat. The contributions of the Secretariat all through the development of this document are also appreciated. We thank all whose collective efforts have brought success to the production of this policy document, the first of its kind in the whole of Africa.

Carol N. Ndaguba, OON
Executive Secretary
NAPTIP.

LIST OF ACRONYMS

AIDS	-	Acquired Immune Deficiency Syndrome
ART	-	Antiretroviral Therapy
CBOs	-	Community Based Organizations
CBVR	-	Community Based Vocational Rehabilitation
CEDAW	-	Convention on the Elimination of all Forms of Discrimination Against Women
CIDA	-	Canadian International Development Agency
CPC	-	Criminal Procedures Code
CPL	-	Criminal Procedure Law
CSOs	-	Civil Society Organizations
ECOWAS	-	Economic Community of West African States
FBOs	-	Faith Based Organizations
HCT	-	HIV Counselling and Testing
ILO	-	International Labour Organization
IOM	-	International Organization for Migration
LFN	-	Laws of the Federal Republic of Nigeria
NACA	-	National Agency for the Control of AIDS
NAPTIP	-	National Agency for the Prohibition of Traffic in Persons and Other Related Matters
NASCP	-	National AIDS & STD Control Programme
NGOs	-	Non-Governmental Organizations
OVC	-	Orphans and Vulnerable Children
PEP	-	Post Exposure Prophylaxis
PMTC	-	Prevention of Mother to Child Transmission
STI	-	Sexually Transmitted Infections
TIPPLEA	-	Trafficking in Persons (Prohibitions) Law Enforcement and Administration Act

TIPs	-	Trafficking in Persons
TP	-	Trafficked Person
TPs	-	Trafficked Persons
UBE	-	Universal Basic Education
UN	-	United Nations
UNICEF	-	United Nations Children's Fund
UNIFEM	-	United Nations Funds for Women
UNODC	-	United Nations Office for Drug and Crime Control
VCT/HCT	-	Voluntary Counselling and Testing/HIV Counselling and Testing

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NATIONAL POLICY ON PROTECTION AND ASSISTANCE TO VICTIMS OF HUMAN TRAFFICKING IN NIGERIA

1.0 INTRODUCTION

1.1 PREAMBLE:

Several policies and programmes have been adopted by the Federal Government with the declared intention of improving the well-being of its citizens and the protection of their rights. Amongst these are policies covering a wide range of subjects including education, health, population, social development, women, child welfare and youth development.

Until now, there had not been any policy programme specific to the protection and rehabilitation of victims of Trafficking in Persons (TIPs) and child labour in Nigeria. These are victims of infamous and inhuman modern-day slavery, a multi-million dollar business perpetuated and masterminded by a network of clandestine organizations.

1.2 BACKGROUND:

The problem of TIPs became prominent in the past two decades due to severe economic plight of the African Continent. In this regard, trafficking for prostitution and forced labour has become a big-time money-spinning business by cartels and has posed a tremendous challenge to African countries. It is the third largest profit yielding business after arms dealing and drug trafficking. United Nations (UN) estimate indicates that TIPs generates about \$10 billion annually for the criminals. An African child trafficked to the US might net the trafficker \$10,000 - \$200,000 (USAID, 2005: Department of States Annual Trafficking in Persons Report).

Globally: There is a general dearth and unreliability of statistics on the number of trafficked persons due to the clandestine nature of the phenomenon. Proxy indicators derived from the number of rescued trafficked persons therefore form the basis for extrapolating data on trafficked persons.

USAID,2005: Department of States Annual Trafficking in Persons Report puts the estimate of people trafficked globally at:

- i 4 million annually;
- ii 800,000-4 million persons move across international borders annually;
- iii 80% of trafficked victims are believed to be females;
- iv 50% are youth and children and majority are trafficked for commercial sex.

Regionally: UNDOC Report, 2005: Crime and Development in Africa; shows that,

- i. 89% of African nations are involved in TIPs;
- ii. 300,000 children are taken from their homes in West Africa each year and sold into domestic slavery (www.fairfund.org/subpage.asp, 2006)
- iii. Between 28,000 and 30,000 children are lured into prostitution in South Africa, half of whom are between 10 ó 14 years of age while the other half are between 15 ó 18 years of age (Molo, S., 2000: The Trafficking of Children for the Purposes of Sexual Exploitation in South Africa.)
- iv. More than 120,000 children under the age of 18 years, which is about one third of the world's child soldiers, are currently participating in armed conflicts across Africa. Some of these children are not more than 7 or 8 years of age (www.reliefweb.int/fts (UN, 2006 1: Africa Recovery, Relief Web, 2006)

Nationally: According to the US Department of State, (*e-Journal of U.S Department of State*; June, 2003: "Global Issues"),

- i. 15,027,612 working children exist in Nigeria;
- ii Over 2 million children are exposed to long hours of work (15 hours or more);
- iii Of this number 56% are in school while 42% are found in house-keeping activities.

In 2003, an ILO/UNICEF report revealed that 8 million Nigerian children went through the worst forms of child labour, serving mainly as domestic servants, beggars, street hawkers, prostitutes, etc. Sixty percent of prostitutes in Italy hail from Africa, and 80% are Nigerians. (ECPAT-End 2003: Child Prostitution and Trafficking- www.ecpat.net/eng/index.asp, 2003).

In addition, data emanating from Nigeria show that for the period 2003-2007, 9,466 victims were intercepted at the country's borders (UNODC: Sept.2006: Measures to Combat Trafficking in Human Beings in Benin, Nigeria and Togo). Information provided by NAPTIP for the period 2003-2008 also indicate that 2,120 victims of human trafficking were rescued by the Agency (NAPTIP: 2007 unpublished document).

The rise in the practice, especially in Nigeria has been a source of serious embarrassment to the nation, hence, the establishment of the National Agency for the Prohibition of Traffic in Persons and Other Related Matters (NAPTIP) by the Trafficking in Persons (Prohibitions) Law Enforcement and Administration Act (TIPPLEA) 2003, by the Federal Government of Nigeria. The Act prohibits TIP and prescribes punishment for offenders. It also makes provisions for supervising,

controlling and coordinating the rehabilitation of TPs and victims of child labour. Since the establishment of the Agency, it has recorded an increase in the number of rescued victims. However, quite a number are yet to be rescued from this inhuman trade. This necessitated the development of this policy as a standard and uniform guideline for Protection and Assistance to TPs.

1.3 **BASIC PHILOSOPHY:**

Chapter II, Section 14 (2) (b), of the Nigerian Constitution of 1999, provides that "Security and Welfare of the people shall be the primary purpose of the Government". The fundamental objective, which stands out clearly in the Nigerian Constitution is the protection and advancement of the rights, security, dignity and welfare of the Nigerian people. There is no doubt, therefore, that the inhuman business of TIPs is a violation of the fundamental rights of the victims as enunciated in the Constitution. As a response, the Federal Government set up NAPTIP as an instrument to re-instill confidence in these traumatized and dehumanized victims to re-integrate them as functional and effective members of the Nigerian society.

Against this background, it becomes imperative to formulate a National Policy as a guide for the social workers and other relevant professionals in the discharge of their duties of implementation, monitoring and evaluation of the policy.

1.4 **VISION**

To establish and maintain a supportive and friendly environment where TPs and victims of exploitative/hazardous child labour have equitable access to Protection and Assistance in Nigeria.

1.5 **MISSION STATEMENT**

Commitment to the restoration of the victims of TIPs and exploitative/hazardous child labour to the state of physical, psychological, social, vocational and economic wellbeing through sustainable assistance programmes.

1.6 **GOAL**

To ensure that victims of TIPs and exploitative/hazardous child labour are empowered to become functional members of the society.

1.7 **SCOPE**

This policy adopts a holistic approach in the protection and assistance to TPs through rehabilitation programmes that provide appropriate and relevant services that will empower them for effective integration into their various communities.

The components of the scope include: reception, identification, sheltering, counseling, family tracing, return/repatriation, integration, empowerment, follow-up/after care and disengagement.

1.8 **LEGAL/POLICY INSTRUMENTS**

The Policy draws its inspiration from:

- (i) The Constitution of the Federal Republic of Nigeria (1999);
- (ii) The Trafficking in Persons (Prohibition) Law Enforcement and Administration Act, 2003, and amended Act 2005;
- (iii) Child's Right Act, 2003;
- (iv) The Criminal Procedures Code (CPC) and Criminal Procedure Law (CPL) as applicable to each state of the Federation;
- (v) Immigration Act Cap. 189, LFN, 1990;
- (vi) The Labour Act Cap. 198, LFN, 1990;

- (vii) United Nations Convention on the Rights of the Child, 1989;
- (viii) African Charter on the Rights and Welfare of the Child; (OAU Doc. CAB/LEG/24.9/49 (1990), entered into force Nov.29,1999);
- (ix) The Universal Declaration of Human Rights 1958;
- (x) ILO Convention 182 on the Elimination of the Worst Forms of Child Labour (1989);
- (xi) Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) 1979;
- (xii) International Convention On Transnational Organised Crime 1999;
- (xiii) The Supplementary Protocol to Prevent, Suppress and Punish Human Trafficking Especially Women and Children, 2000 and
- (xiv) The ECOWAS Plan of Action on Human Trafficking 2000.

1.9 **DEFINITION OF TERMS**

a. Trafficking in Person:

Trafficking in Person includes all acts and attempted acts involved in the recruitment, transportation within or across Nigerian borders, purchase, sale, transfer, receipt or harbouring of person involving the use of deception, coercion or debt bondage for the purpose of placing or holding the person whether for or not in involuntary servitude (domestic, sexual or reproductive) in forced or bonded labour, or in slave-like conditions.

Trafficking could be for the following purposes:

- (i) Exploitative labour/sexual exploitation;
- (ii) Sexual abuse;
- (iii) Slavery;

- (iv) Organ harvest/sale;
- (v) Pornography;
- (vi) Marriage;
- (vii) Baby harvest/sales;
- (viii) Begging;
- (ix) Sale of drugs
- (x) Armed conflicts, and
- (xi) Other related matters.

b. Target groups:

The target groups for the purpose of this policy are **TPs, victims of exploitative/hazardous child labour and other persons at risk** (children, women and youths).

c. Victim: A person trafficked, voluntarily or involuntarily for the purpose of exploitation such as child labour, commercial sex, pornography, armed conflict, drugs, sex with animals/object, etc., rituals, organ harvest/sales, baby harvest/sales, seduction, servitude, debt bondage or slavery by the use of deception, coercion, force or fraud.

d. Trafficked Person(TP): TP Means a victim of TIPs

e. Trafficker: A person or an entity that intends to commit, aids, abets or acquiesces to an act of trafficking in person.

2.0 POLICY ISSUES AND IMPLEMENTATION STRATEGIES

2.1 RECEPTION

Reception is a warm and friendly welcome and acceptance of TPs by trained personnel. This is because TPs often pass through severe traumatic experiences, and

if not properly received on return, thus, could further heighten their trauma. Adequate reception facilities should, therefore, be provided to ease their reintegration process.

OBJECTIVES

- (i) To establish a friendly and conducive environment that will create a trusting relationship between TPs and service providers;
- (ii) To uphold the fundamental human rights of TPs;
- (iii) To reduce to the barest minimum the time spent in reception centres by TPs.

IMPLEMENTATION STRATEGIES

- (i) Provide warm, protective and supportive environment on arrival/reception to calm and reassure TPs;
- (ii) Provide adequate reception centres to process, identify and receive TPs;
- (iii) Design a standard interview protocol to be used at reception;
- (iv) Set and enforce standards to ensure the fundamental human rights of TPs;
- (v) Ensure the presence of care providers and interpreters at reception;
- (vi) Provide information materials about the rights, obligation and welfare of TPs at every reception centre;
- (vii) Ensure the initial screening of TPs within a period of 72 hours on arrival at the reception centre;
- (viii) Provide immigration personnel at the point of reception to process deportees and identify TPs without moving them to immigration and police cells;
- (ix) Establish appropriate referral mechanism at reception centres.

2.2 **IDENTIFICATION**

Due to the complex nature of TIPs, a good number of service providers do not recognize the criteria that qualify persons in transit or at reception centres as victims, therefore the need to equip operational officers with background information that will facilitate easy identification of victims.

Checklist for identifying victims:

- (i) A person who was sold in exchange for money;
- (ii) A person put in debt bondage;
- (iii) A person whose travel documents were confiscated by the agents, employers and traffickers;
- (iv) A person whose freedom of movement was either partially or totally curtailed;
- (v) A person subjected to violence or threat against his/her family;
- (vi) A person from whom the traffickers have obtained economic or other profit through deception, coercion and/or other forms of exploitation;
- (vii) A person who has suffered physical, mental and/or sexual abuse;
- (viii) A person who had no foreknowledge of the exploitative nature of the job.

OBJECTIVES

- (i) To identify the TIPs;
- (ii) To rescue TIPs;
- (iii) To obtain and document information on the TIPs;
- (iv) To counsel the TIPs;
- (v) To obtain information that could lead to identification of traffickers.

IMPLEMENTATION STRATEGIES

- (i) Provide guidelines to facilitate the identification of TPs;
- (ii) Document TPs;
- (iii) Provide counselling services and
- (iv) Provide information to TPs on TIPS.

2.3 **SHELTERING**

There is need to provide immediate shelter and rest for TPs. The shelter offers protection to the TPs in regaining their self-esteem, and provides the opportunity to face future challenges.

OBJECTIVES

- (i) To provide temporary accommodation for TPs;
- (ii) To provide opportunity for obtaining additional information from victims;
- (iii) To offer psychosocial and legal services to TPs;
- (iv) To provide accessible recreational facilities;
- (v) To offer cultural, spiritual and vocational guidance;
- (iv) To provide clothing and medical services;
- (vii) To ensure warm, protective and supportive environment for personal development;
- (viii) To create opportunity for knowledge enhancement.

IMPLEMENTATION STRATEGIES

- (i) Provide adequate shelters for TPs for a period not exceeding 6 weeks;
- (ii) Offer counselling, psychosocial, medical and legal services;
- (iii) Offer cultural and spiritual services;

- (iv) Establish security facilities at the shelter;
- (v) Facilitate fostering and adoption processes;
- (vi) Provide recreational facilities;
- (vii) Provide effective referral system for the protection and assistance of TPs;
- (viii) Provide library or reading rooms with relevant materials;
- (ix) Provide interpreters where necessary.

2.4 **HEALTH**

Victims of Human Trafficking are exposed to various health risks and abuse. This may result in health problems such as sexually transmitted infections (STIs), HIV/AIDS, pelvic inflammatory disease, hepatitis, tuberculosis, skin infections and other communicable diseases; unwanted pregnancy, forced abortion, abortion-related complications, mental and emotional health problems including nightmares, insomnia, suicidal tendencies, alcoholism, drug abuse and addiction.

TPs also face neglect and poor living conditions which often result in anaemia, malnutrition, diarrhoea and parasitic infestations.

Against this background, it is imperative that all victims of trafficking are provided with non-discriminatory, comprehensive and equal access to adequate health-care services.

Provision of health care for TPs is a basic human right that must be promoted and protected, in accordance with Section 17(3) of the 1999 Nigerian Constitution and Article 16 of the African Charter on Human and Peoples Rights. In addition, Article 25 of the Universal Declaration of Human Rights provides for the rights to standard of living adequate for the health and well being of individuals and their families, irrespective of gender, age and background. Victims of human trafficking,

therefore, have the right to access all health care services irrespective of gender, age or background.

OBJECTIVES

- (i) To ensure equitable access to comprehensive and qualitative health care services for all TPs irrespective of age, gender or other circumstances;
- (ii) To provide standardized screening and treatment of identified health conditions especially malaria and communicable diseases such as HIV/AIDS, tuberculosis, STIs, etc., and referral.
- (iii) To offer comprehensive mental health care services to all TPs, including rehabilitation, referral and follow-up;
- (iv) To provide standardized counselling services, which addresses specific health needs and social problems of TPs and support for future planning and reintegration;
- (v) To provide adequate health information and communication services on reproductive health, HIV/AIDS, STIs, malaria, mental health, etc., to all TPs;
- (vi) To educate law enforcement officers and other stakeholders on the importance of health care services and referrals to TPs;
- (vii) To ensure the delivery of health services that meet specific needs of TPs. including alternative medical care such as spiritual or traditional where necessary;
- (viii) To uphold the fundamental human rights of TPs, especially mother and child by protecting them from stigmatization and discrimination in accessing health care services;

- (ix) To ensure that TPs have information on existing health services in their community for follow-up;
- (x) To ensure that all TPs are accommodated in a healthy and conducive environment at all stages of the rehabilitation process;
- (xi) To ensure that all shelters accommodating TPs network with existing health care facilities in order to achieve these objectives.

IMPLEMENTATION STRATEGIES

- (i) Provide access to standardized and equitable health care services at the shelters for all TPs irrespective of their gender or circumstances;
- (ii) Link shelters with government endorsed health care facilities, providing VCT/HCT, ART, PMTCT, STIs and tuberculosis management, mental health services and other referral services as appropriate;
- (iii) Provide mental health services to all TPs through prompt and functional referral system;
- (iv) Develop standard instruments for counseling services capturing information on socio-cultural background of TPs including planning and reintegration;
- (v) Provide comprehensive health information and communication services on reproductive health, HIV/AIDS, STIs, Malaria, Mental health, etc., to all TPs;
- (vi) Sensitize stakeholders especially law enforcement officers on the importance of health care services to TPs;
- (vii) Create enabling environment for the involvement of alternative medical practitioners including spiritual and traditional healers in the management of TPs where necessary;

- (viii) Provide information to the TPs on their fundamental human rights, especially mother and child so as to protect them from stigmatization and discrimination in accessing health care services;
- (ix) Inform all TPs of their medical status and provide all necessary information and referral for follow-up in their communities;
- (x) Register shelters with NAP TIP for appropriate monitoring and coordination;
- (xi) Establish shelters that meet basic hygienic and environmental health standards;
- (xii) Train staff to acquire specific skills on protection and assistance for victims of trafficking;
- (xiii) Train shelter staff in the administration of First Aid/Post Exposure Prophylaxis (PEP) and refer when necessary;
- (xiv) Provide shelters with First Aid kits, ART for PEP, vehicles/ambulances for medical emergencies;
- (xv) Provide for periodic Monitoring and Evaluation of shelters to ensure compliance with aforementioned standards.

2.5 **COUNSELLING.**

This involves working in conjunction with TPs to establish the circumstances surrounding their trafficking. It affords the counsellors opportunity to penetrate the psychological state of mind of the victims, thereby building rapport, confidence and reassurance as well as determining appropriate intervention programmes for their rehabilitation. It also seeks TPs cooperation in investigating and prosecuting traffickers.

OBJECTIVES

- (i) To ascertain the various reasons why persons are trafficked;
- (ii) To formulate appropriate interventions for the protection and assistance of different categories of TPs;
- (iii) To facilitate the identification and prosecution of traffickers;
- (iv) To encourage TPs to overcome the fear of oath taking and threats, thereby escaping the cycle of being re-trafficked;
- (v) To rebuild the confidence and enhance the independence of the victims.

IMPLEMENTATION STRATEGIES

- (i) Provide information on rehabilitation services to stakeholders;
- (ii) Facilitate placement for formal education for TPs;
- (iii) Offer religious and moral counselling;
- (iv) Provide psychosocial, medical and legal services.

2.6 FAMILY TRACING

There is need for family tracing in order to return and integrate TPs into the families and the socio-economic life of their various communities. In addition, the families and communities shall be enlightened and counselled to create a warm and supportive environment for the proper integration of TPs.

OBJECTIVES

- (i) To locate and prepare TPs' families and communities for their return;
- (ii) To enlighten the families and communities on TIPs and its danger;

- (iii) To facilitate the integration of TPs within families, communities and the society.

IMPLEMENTATION STRATEGIES

- (i) Conduct the risk assessment of returning the TPs to their families and communities of origin;
- (ii) Provide family counselling;
- (iii) Collaborate with relevant stakeholders in the process of family tracing of TPs;
- (iv) Facilitate the provision of psychosocial, medical and legal services to the victims and their families;
- (v) Provide security for the families of the TPs where necessary.

2.7 RETURN/REPATRIATION

The primary goal in the successful handling of trafficking cases is the eventual return of victims to their homes or places of origin. Many victims of human trafficking are continuously rescued in Nigeria, hence the need for proper procedure for return/repatriation.

Depending on the circumstances, return can take place within the country (victims of internal trafficking-return) or between two countries (victims of cross-border trafficking-repatriation). Safe and dignified return/repatriation is essential in the integration process.

OBJECTIVES

- (i) To ensure safe and secure return of TPs from the shelter to their local communities;

- (ii) To ensure safe, secure and dignified repatriation of foreign victims to their own countries;
- (iii) To establish efficient referral and networking mechanisms;
- (iv) To discourage internal and cross-border TIPs;
- (v) To encourage collaboration between service providers, local communities, and home countries of TPs;
- (vi) To provide efficient psycho-social support that will facilitate return/repatriation.

IMPLEMENTATION STRATEGIES

- (i) Ensure appropriate handling of return/repatriation processes by relevant agencies;
- (ii) Strengthen referral mechanism and networking with other countries;
- (iii) Embark on social investigations of the home settings of victims to ensure effective return/ repatriation;
- (iv) Develop MoUs with other countries, agencies, NGOs, etc.;
- (v) Arrange the transfer of victims from shelters to receptive and nurturing home environments;
- (vi) Provide necessary psycho-social support.

2.8 INTEGRATION

Integration is paramount in the protection and assistance of TPs. Its primary goal is to facilitate reintegration into their communities. It is an ongoing process that seeks to develop the potential of the TPs to live a normal life.

OBJECTIVES

- (i) To assist TPs to achieve socio-economic independence through community-based vocational skills acquisition, education, etc.;
- (ii) To reduce the impact of trafficking and associated social stigma on TPs and their families;
- (iii) To provide access to psycho-social and spiritual care to the TPs and their families;
- (iv) To periodically monitor the integration process.

IMPLEMENTATION STRATEGIES

- (i) Pay advocacy visits to communities, traditional and religious leaders on TIPs;
- (ii) Embark on community sensitization programmes to enlighten the community on the dangers of TIPs;
- (iii) Integrate TPs using the Community Based Vocational Rehabilitation (CBVR) approach;
- (iv) Monitor the integration process;
- (v) Collaborate with relevant stakeholders;
- (vi) Provide TPs stipends during the period of internship.

2.9 **EMPOWERMENT**

Many TPs have inadequate educational qualification, low self-esteem and awareness. Many TPs come from poor background and their families are not sufficiently informed about the evils of TIPs. They are, therefore, vulnerable and susceptible to human trafficking.

Empowerment provides the TPs and their families enhanced knowledge, coping skill and some level of income security. This prevents re-trafficking, and ensures full integration into their communities.

OBJECTIVES

- (i) To restore self-confidence and dignity in TPs;
- (ii) To empower TPs to achieve socio-economic independence;
- (iii) To build up self-esteem and assertiveness in TPs;
- (iv) To prevent re-trafficking through awareness and job creation.

IMPLEMENTATION STRATEGIES

- (i) Provide vocational training programmes for TPs to ensure income security and self-reliance;
- (ii) Provide information on rehabilitation services to stakeholders;
- (iii) Make rehabilitation services accessible to TPs
- (iv) Create opportunities for formal and informal education for TPs;
- (v) Enlighten victims on their rights, obligations and other relevant information;
- (vi) Expose victims to decision making and entrepreneurship skills;
- (vii) Provide micro-credit facilities for the establishment of micro-enterprises through liaison with financial institutions;
- (viii) Provide training kits and resettlement tools.

2.10 **FOLLOW-UP/AFTER CARE**

The physical, social, psychological and economic stability of TPs as well as impact assessment of service delivery on the integration process are important aspects of after care.

Once the immediate needs of the victim are met after return, it is necessary to follow up, to ensure that TPs remain safe and make progress, to avert any possibility of being re-trafficked.

OBJECTIVES

- (i) To ensure that rehabilitated persons are fully integrated into their communities;
- (ii) To ensure the goals of rehabilitation and integration are achieved;
- (iii) To address problems TPs face in the home environments after return;
- (iv) To monitor and evaluate the implementation of the programme.

IMPLEMENTATION STRATEGIES

- (i) Conduct periodic visits to victims to assess the progress of the programmes;
- (ii) Identify challenges victims face during integration and proffer solutions
- (iii) Develop indicators as a basis for assessing the success of the integration process.

2.11 **DISENGAGEMENT**

When TPs are empowered and the challenges they face in the process of reintegration into their communities are addressed and have attained self reliance, disengagement can take place.

OBJECTIVES

- (i) To assess the readiness of TPs for disengagement;
- (ii) To determine the point of disengagement;

- (iii) To ensure that victims are successfully integrated into their communities;
- (iv) To foster independence and self-reliance of victims;
- (v) To develop appropriate indicators for disengagement.

Poverty, ignorance, greed, large family, low level of education, broken homes and

IMPLEMENTATION STRATEGIES

- (i) Determine the success of integration plan based on indicators;
- (ii) Prepare victims towards disengagement;
- (iii) Develop indicators to assess victims' readiness for disengagement;

2.12 **PREVENTIVE MEASURES**

increasing number of orphans and vulnerable children (OVC), in the society have been identified as the major causes of human trafficking in Nigeria. (Situation Assessment of Child Trafficking in Eleven Southern Nigeria States, 2004: Published by United Nations Children's Fund, UNICEF)

Preventive measures are actions that address these identified social factors, and are achieved by empowering the citizenry, to reduce vulnerability.

OBJECTIVES

- (i) To address the root causes of TIPs;
- (ii) To sensitize families on the phenomenon of TIPs;
- (iii) To minimize the vulnerability of individuals to TIPs;
- (iv) To establish and maintain bilateral and multilateral agreements with relevant countries on TIPs;
- (v) To eradicate incidence of TIPs in Nigeria.

IMPLEMENTATION STRATEGIES

- (i) Create employment opportunities for people at the grass root level;
- (ii) Provide infrastructural facilities at the grass root level;
- (iii) Introduce social security schemes for vulnerable groups;
- (iv) Implement compulsory Universal Basic Education (UBE) policy;
- (v) Implement penalties stipulated for offenders in the NAPTIP law;
- (vi) Conduct aggressive sensitization/awareness programmes for families;
- (vii) Implement the National Policy on Orphans and Vulnerable Children (OVC);
- (viii) Implement the Child's Rights Act.

3.0 RIGHTS AND OBLIGATIONS OF VICTIMS

The United Nations High Commission for Human Rights has provided guidelines and principles that incorporate the rights of victims of TIPs. Victims must be acquainted with these rights and their obligations as part of the rehabilitation and integration process.

3.1 RIGHTS OF VICTIMS

- (i) There shall be no other form of criminal investigation against the victim on the ground of his/her status;
- (ii) A victim shall not be compelled to stay in a shelter to undergo rehabilitation;
- (iii) A victim shall not be abused in any form while undergoing rehabilitation and integration;
- (iv) Security of the victims shall be ensured while undergoing rehabilitation;
- (v) A victim who volunteers to give evidence against trafficker(s) shall be protected during and after the prosecution;
- (vi) A victim shall be entitled to medical counselling services during the period of holding, sheltering, rehabilitation and integration;

- (vii) A victim shall be assisted to achieve financial sustenance;
- (viii) A victim shall have the right to an independent legal counsel in respect of civil procedures;
- (ix) The right to privacy of the victim shall not be infringed upon;
- (x) The social integrity of the victim shall not be brought to disrepute;
- (xi) The right to own private property by the victim shall be protected;
- (xii) The right to retrieve all his/her belongings from the country of deportation shall be facilitated and protected;
- (xiii) After the identification process, a victim shall be protected from being put under Police or Immigration detention;
- (xiv) A victim shall be protected from any form of maltreatment or degradation during reception, sheltering and rehabilitation;
- (xv) Adequate information on the rights, privileges and obligations of the victims shall be provided on arrival;
- (xvi) The health status of a victim should be handled with confidentiality;
- (xvii) Victims are entitled to routine medical check on arrival at the shelter.

3.2 **OBLIGATIONS OF VICTIMS**

- (i) A victim that has consented to rehabilitation shall comport himself or herself in a manner that will not jeopardize the objectives of rehabilitation;
- (ii) A victim shall make himself or herself available at all times for the purpose of informal/formal education to achieve the purpose of rehabilitation/integration;

- (iii) A victim shall comport himself or herself in a manner that will not be detrimental to the well being of other victims and care providers;
- (iv) A victim shall subject himself or herself to the rules and regulations, as well as the daily routine of the shelter while in residence;
- (v) A victim who has consented to rehabilitation shall complete the rehabilitation programmes designed for him or her;
- (vi) A victim shall disclose relevant information concerning his or her health status to counsellors to enhance the quality of care.

OBJECTIVES

- (i) To identify the rights and obligations of victims of TIPs in respect of protection and assistance;
- (ii) To acquaint the victims of TIPs of their rights and obligations;
- (iii) To respect the fundamental human rights of victims of TIPs;
- (iv) To encourage healthy interaction amongst TPs and service providers.

IMPLEMENTATION STRATEGIES

- (i) Provide a check list of rights and obligations of victims;
- (ii) Sensitize TPs on their fundamental human rights to protection and assistance;
- (iii) Assist TPs to fulfill their obligations;
- (iv) Facilitate access to available services.

4.0 INSTITUTIONAL FRAMEWORK

4.1 REFERRAL

The complexity of the crime of TIPs, warrants a multidisciplinary and coordinated

approach, involving all sectors of the society, whether in countries of origin, transit or destination.

In assisting victims of human trafficking, care providers, governments, law enforcement agencies, CSOs and other actors must work together for an effective referral system.

OBJECTIVES

- (i) To establish an effective national/international referral system;
- (ii) To identify partners and their roles in the referral system;
- (iii) To offer TPs specialized services that will aid their integration;
- (iv) To facilitate guardianship, fostering and adoption;
- (v) To reduce duplication through mapping of the various responses;
- (vi) To enhance coordination by streamlining intervention strategies for TPs;
- (vii) To link TPs to micro-credit facilities for the establishment of micro-enterprises;
- (viii) To monitor the welfare and progress of TPs.

IMPLEMENTATION STRATEGIES

- (i) Establish effective national/international referral system;
- (ii) Identify partners and their roles in the referral system;
- (iii) Offer TPs specialized services that will aid their integration;
- (iv) Provide opportunities for guardianship, fostering and adoption;
- (v) Reduce duplication of efforts through mapping out the various responses to TIPs;
- (vi) Enhance coordination by streamlining intervention strategies for TPs;
- (vii) Link TPs to skills acquisition programmes and micro-credit facilities;

(viii) Provide necessary assistance to ensure the welfare and progress of TPs.

4.2.1 **INSTITUTIONS/STAKEHOLDERS**

The institutions and stakeholders responsible for the protection and assistance of TPs shall include:

- (i) Government (Federal, State & Local);
- (ii) Local Communities;
- (iii) Organized Private Sector;
- (iv) Civil Society Organizations (CSOs);
- (v) Foreign Governments;
- (vi) International Agencies and Donors;
- (vii) Mass Media and
- (viii) Individuals/Philanthropists.

OBJECTIVES

- (i) To adopt a coordinated and multi-sectoral approach to the rehabilitation of TPs;
- (ii) To identify the specific roles of partners to avoid duplication of efforts;
- (iii) To develop effective collaboration, technical, financial, and material resources for maximum input;
- (iv) To identify possible partners;
- (v) To provide media-related services on TPs;
- (vi) To provide opportunities for networking among stakeholders.

IMPLEMENTATION STRATEGIES

- (i) Establish and strengthen public/private sector partnership;

- (ii) Develop referral system and linkages;
- (iii) Establish and strengthen national, state and local government advisory committees on the treatment and rehabilitation of TPs;
- (iv) Establish bilateral and multilateral agreements with relevant countries and international organizations.

4.2.2 **ROLES**

Institutions and stakeholders responsible for the protection and assistance of TPs are expected to contribute in the following ways:

- (a) **Government shall:**
 - Provide political will;
 - Review legislation;
 - Formulate and review policies;
 - Make budgetary allocation;
 - Provide security and social safety nets;
 - Coordinate research, planning, monitoring and evaluation;
 - Create an enabling environment and provide infrastructure and other forms of support;
 - Create awareness;
 - Build capacity of practitioners.

- (b) **Local Communities shall:**
 - Provide community policing in collaboration with relevant institutions;
 - Improve community development efforts to enhance the quality of life;
 - Create warm, protective and supportive environment for the rehabilitation of TPs;

- Create awareness within the community.
- (c) **Organised Private Sector shall:**
- Provide funds and sponsorship for programmes;
 - Assist government in infrastructural development;
 - Provide community development and skills acquisition centres;
 - Provide scholarship and employment.
- (d) **Civil Society Organisations (NGOs, FBOs, CBOs, etc.) shall:**
- Provide felt needs of the communities;
 - Network in the areas of referrals, care and treatment of TPs, information sharing, etc;
 - Complement Government efforts;
 - Encourage spirit of volunteerism among youths;
 - Empower and build capacity of TPs;
 - Offer spiritual care and counselling to TPs;
 - Mobilize resources;
 - Create awareness and encourage advocacy on the dangers of TIP.
- (e) **Foreign Governments and International Agencies/Donors may assist in:**
- Providing funds, training, capacity building and infrastructural development;
 - Creating awareness and advocacy;
 - Encouraging information sharing and collaboration;
 - Development of bilateral and multilateral agreements and linkages;
 - Shall ensure humane treatment of TPs in transit/destination countries.

(f) **Individuals/Philanthropists may assist in:**

- Providing Funds;
- Spiritual care and counseling;
- Volunteerism;
- Information sharing and awareness creation.

(h) **Mass Media shall:**

- Create awareness and sensitization;
- Encourage information sharing, partnership;
- Create specialized beats/desks on human trafficking.

5.0 RESEARCH, PLANNING AND DEVELOPMENT

5.1 DATA COLLECTION

The effective planning and implementation of development programmes and projects depend largely on the availability of reliable and valid data. There is need to conduct research at regular intervals in relevant areas in order to generate up-to-date data that make planning more meaningful. This also enhances the adoption of appropriate intervention strategies.

The gathering of accurate information on TIPs is very vital, as it will enable all parties involved in the development and implementation of anti-trafficking strategies to have and maintain a clear understanding of issues. The use of standardized instruments and methodologies make it possible to measure, compare and interpret data across jurisdictions and over time provides a data bank on the prevalence, nature and effects of TIPs.

OBJECTIVES

- (i) To develop appropriate tools/indicators for effective planning, monitoring and evaluation;
- (ii) To collect and collate statistical information on trafficking;
- (iii) To identify emerging trends and challenges;
- (iv) To enhance counselling and rehabilitation initiatives;
- (v) To facilitate the implementation of the provisions of this policy.

IMPLEMENTATION STRATEGIES

- (i) Develop reliable data gathering survey/instruments and appropriate, reliable, valid, qualitative and quantitative indicators;
- (ii) Standardize the collection of statistical information on trafficking;
- (iii) Conduct specialized periodic and systemic studies, surveys and research;
- (iv) Collect and collate disaggregated data from all partners;
- (v) Organize conferences, workshops, seminars and trainings;
- (vi) Coordinate all research in TIPs;
- (vii) Provide resource base for research activities;
- (viii) Develop a pool of knowledgeable, skilled and academically qualified personnel;
- (ix) Produce and circulate reports on research, seminars, workshops, etc., for national and international use;
- (x) Build capacity for sustainable research projects.

5.2 CAPACITY BUILDING FOR PRACTITIONERS

Human resource and institutional capacity building occupy a central position in effective and efficient integration of TPs, hence the need for capacity building for better service delivery cannot be overemphasized.

OBJECTIVES

- (i) To increase the knowledge and enhance the skills of practitioners working in all areas of protection and assistance to TPs;
- (ii) To ensure more efficient/effective service delivery;
- (iii) To ensure overall success in the fight against TIPs;
- (iv) To strengthen the institutional capacity of public/private sector practitioners in the delivery of protection and assistance services;
- (v) To provide information on rehabilitation services to stakeholders;
- (vi) To identify areas of need for human resources and institutional capacity building.

IMPLEMENTATION STRATEGIES

- (i) Establish training/capacity building units in the Counselling and Rehabilitation Department of NAPTIP as well as other establishments in the field of TIPs or social workers and other relevant persons;
- (ii) Conduct training/development programmes for relevant operational personnel;
- (iii) Collaborate with international partners for the provision of training/capacity building programmes;
- (iv) Mobilize resources for training/capacity building activities.

6.0 RESOURCE MOBILIZATION

To effectively address the ills of TIPs through rehabilitation/integration of TPs, adequate human, financial, material and technical resources need to be committed to achieving the desired goal. Consequently, practitioners and stakeholders alike must identify and pool available resources to actualize effective service delivery.

OBJECTIVES

- (i) To fund programmes aimed at the protection and assistance to TPs;
- (ii) To ensure capacity building of care providers;
- (iii) To pool national and international resources for the effective implementation of the protection and assistance programmes;
- (iv) To gain the financial and moral support of all sectors of the economy;

IMPLEMENTATION STRATEGIES:

- (i) Allocate funds;
- (ii) Collaborate with financial institutions;
- (iii) Collaborate with development partners;
- (iv) Collaborate with Civil Society Organizations.
- (v) Solicit funds from the private sector and individuals in the society;
- (vi) Collaborate with Federal, State and Local Governments;
- (vii) Establish Victims' Assistance Fund;
- (viii) Conduct and coordinate fund raising activities;
- (ix) Collaborate with agencies involved in job creation, poverty alleviation, and care of TPs;
- (iii) Provide technical assistance for capacity building;

7.0 CO-ORDINATION, MONITORING AND EVALUATION

To ensure the success and sustainability of the entire protection and assistance programme, co-ordination, monitoring and evaluation must be undertaken periodically.

OBJECTIVES

- (i) To co-ordinate protection and assistance programmes;
- (ii) To monitor the implementation of the policy;
- (iii) To provide a veritable tool for efficient service delivery;
- (iv) To gather data for evaluating the effectiveness of the protection and assistance programmes;
- (v) To develop appropriate indicators for monitoring and evaluation;
- (vi) To identify challenges in the implementation of assistance and protection for TPs.

IMPLEMENTATION STRATEGIES

- (i) Coordinate protection and assistance programmes;
- (ii) Conduct baseline survey and design parameters for assessment of programmes;
- (iii) Evaluate the relevance of programmes to the target beneficiaries;
- (iv) Monitor programmes and services to assess the impact of intervention on the target groups;
- (v) Build capacity for monitoring and evaluation;
- (vi) Develop indicators for monitoring and evaluation;
- (vii) Review policy, planning and implementation programmes to address identified challenges.

8.0 POLICY REVIEW

The phenomenon of trafficking in persons is dynamic and changes overtime. It is necessary to infuse the changes required for policy update so that it remains a valid and useful guide for actions relevant and adaptable to contemporary situations.

The National Agency for the Prohibition of Traffic in Persons and Other Related Matters (NAPTIP) is the focal agency for all issues pertaining to TIPs in Nigeria and so, has the statutory responsibility for conducting periodic review of this policy based on researched data and proper harnessing of the relevant structure and mechanism in this area.

However, other participating agencies in the implementation of the policy have a responsibility of evaluating the impact of the policy at their levels, as a basis for making meaningful inputs into the review process.

For an effective review of this policy, consideration should be given to networking, research, best practices from all national, regional and international stakeholders.

This policy shall be reviewed every five years.

