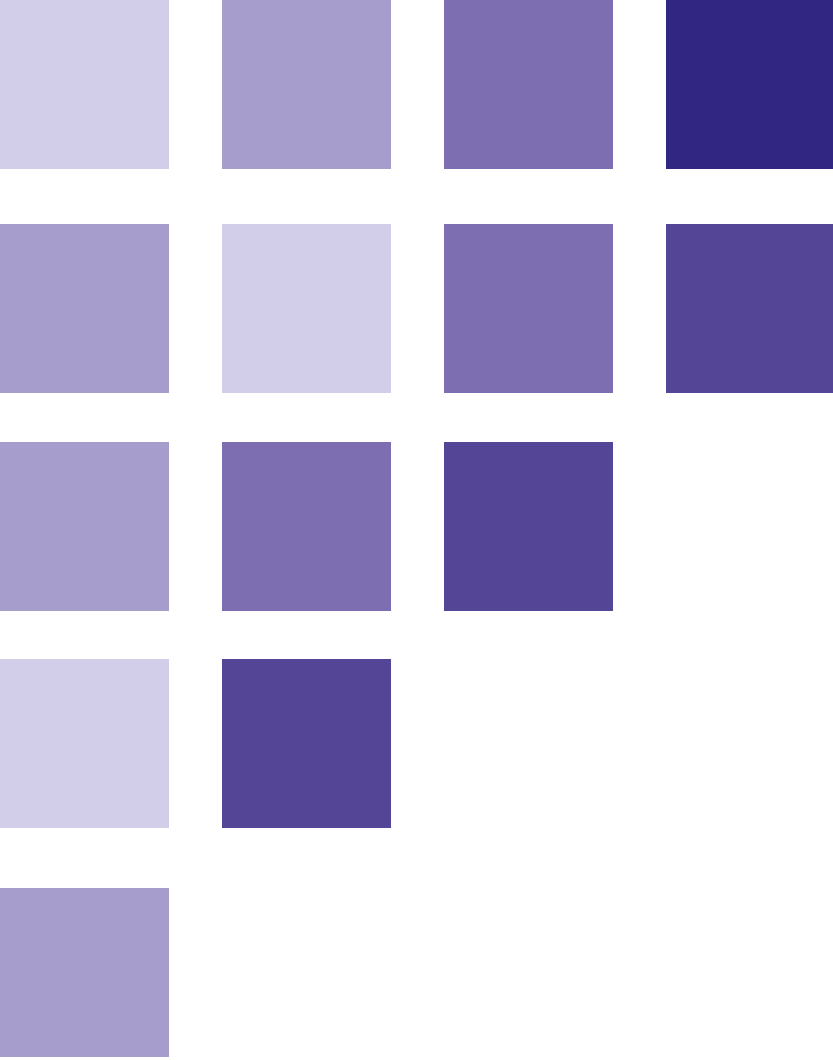


Stabilise and assess – tools for helping victims of human trafficking

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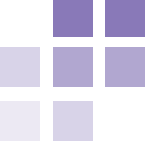


Table of Contents

Foreword	6
Introduction	7
1. Purpose and use of the handbook	8
2. Definitions	9
3. Empathetic social work as part of the assessment of service needs	13
3.1 A stabilising approach to work	13
3.2 Hope supporting recovery.....	17
4. Human trafficking as a phenomenon	18
4.1 Psychological control.....	20
4.2 Why recognising human trafficking is important.....	21
4.3 Identifying victims of human trafficking.....	22
4.4 Raising concerns about suspected human trafficking	24
5. Guest writer: Human trafficking among young people	28
6. Assistance system for victims of human trafficking	33
7. Trauma-informed perspective on human trafficking	42
7.1 Definition of psychological trauma	42
7.2 Guest writer: Human trafficking as a traumatic experience	44
7.3 The effects of trauma in practical work.....	47
7.3.1 Difficulty regulating arousal following trauma.....	48
7.3.2 Regulating arousal during meetings.....	50
7.3.3 Signs of dissociation and ways to address them.....	51
7.4 Trauma-informed engagement.....	52
7.5 Social worker’s wellbeing	53
8. Guest writer: Specificities of working with children and young people	57
9. Guest writer: Working with traumatised young people	69
10.Engagement with clients	73
10.1 Building trust	74
10.1.1 Supporting psychological safety	75
10.1.2 Supporting physical safety.....	76
10.1.3 A culturally sensitive and anti-racist approach.....	76
10.2 Psychoeducation and validation	78
10.3 Change management.....	80

11. Mental health assessment and referral for further treatment	82
11.1 Mental health evaluation	82
11.2 Evaluating and addressing the risk of suicide	83
12. Assessment of service needs	86
12.1 Recording the client's appearance and behaviour	89
Appendices	94
Background and objective of the handbook	94
Summary of the survey for wellbeing services counties	95
Support for victims of human trafficking in the Wellbeing Services County of Vantaa and Kerava	98
Background information for health services	100
Resource map	103
Form for identifying victims of human trafficking	104
How to bring up human trafficking with a client	106
Recognition – Red flags	107
Support Circle: a tool for assessing service needs and analysing the client's situation	109
Exercises for mindfulness and relaxation	110
Exercise to ground your gaze and body	110
Butterfly hug	110
Diaphragmatic breathing	110
Mindfulness exercise for three senses	111
TIPP skills for emotion regulation	111
References and further reading:	113



Foreword

The work to combat human trafficking is challenging and multifaceted. Providing assistance to victims, recognising human trafficking and raising awareness constitute, to a large extent, human rights work, for which there is an ever-growing need in today's world. As I write the final lines of this handbook, I feel a great sense of pride in the enthusiastic, diverse and incredibly skilled group of professionals from various fields who are working to fight human trafficking. Many of them have shared their expertise with me and contributed to the production of this handbook.

Whilst writing this handbook, I have had the opportunity to meet numerous professionals and experts from a wide range of fields. The handbook has been met with an overwhelmingly positive response even prior to its publication, which I believe reflects the current mindset among professionals in Finland. There is a strong desire to help victims, develop the ways of working, and enhance the fight against human trafficking.

In fact, the handbook is largely the result of collaboration. I cannot stress enough how important it is to work together and across professional boundaries – solitary efforts only lead to stagnation. To this end, I hope that the work to combat human trafficking will continue to evolve, grow stronger and go on for a long time to come. I would like to personally thank everyone who has been involved in the creation of this handbook. Without you, this handbook would not exist. Thank you for your support, encouragement, guidance, advice and feedback. Every encounter, conversation and perspective has left its mark on these pages.

First of all, I would like to express my heartfelt thanks to **Larissa Söderling**, a specialist in clinical mental health psychology and my colleague on this project. Working with you has been seamless and straightforward and you have broadened my horizons.

A warm thank you also to everyone else who contributed to this handbook. Thank you **Sari Mutka, Minna Tuovinen, Jaanika Aho, Ilona Lähde, Katariina Mikkola, Tiina Kumpulainen, Mari Kuronen-Hakkarainen, Sarianna Ahlroos, Karoliina Himanen, Kreetta Burakowski, Roosa Koistinen, Ferdinand Garoff, Mira McLennan, Katri-Leena Mustonen, Lotta Mäkipää, Johanna Mäki-Opas, Noora Halmeenlaakso, Maria Lehti, Anniina Jokinen, Julia Korkman, Noora Kannisto, Tiina Kaitaniemi, Päivi Korkeala, Nina Nummela, Mari Levander, Hanna Grundstedt** and experts from the assistance system for victims of human trafficking, as well as staff from the services supporting integration in the Wellbeing Services County of Vantaa and Kerava.

Marjukka Nyström

Project Manager

Helsinki, 24 March 2026



Introduction

Human trafficking is a serious violation of human rights and a criminal offence with long-term physical, psychological and social impacts. Physical injuries usually heal over time, but the psychological scars often remain invisible and can continue to affect a person's life for years. Human trafficking is a prolonged process of exploitation characterised by the abuse of power, control, and violence. The effects typically continue for a long time after the abuse has ended.

This handbook is based on the understanding that human trafficking is often a traumatic experience. Psychological trauma does not automatically mean a loss of functional capacity, but its effects may manifest themselves, for example, as anxiety, shame, inability to trust others, difficulties in daily life, and poor emotion regulation. In social work, it is essential to recognise these effects in order to identify service needs and target support measures in a timely and appropriate manner.

The aim of this handbook is to provide social workers with information, practical tools, and insights on how to support victims of human trafficking. At the heart of assistance work lies ensuring the victim's physical and psychological safety and building trust through a consistent, predictable and respectful approach. Trust is built gradually. It is crucial for collaboration and can also help the client gain a restorative experience and reinforce the feeling that the world is not always unpredictable and unsafe.

Although social work is not equivalent to mental care, understanding the psychological effects of trauma is important for assessing the need for support and providing a path for further care. The handbook provides practical methods and tools for stabilising the client's situation, strengthening their sense of agency and supporting their recovery.

The need for this handbook emerged both in day-to-day practice and in a survey conducted among social welfare professionals working in wellbeing services counties. The survey highlighted the need for more information on human trafficking and how to recognise it, as well as the perceived lack of support for managing challenging situations. This handbook provides social workers with support and practical guidance on working with victims of human trafficking.



1. Purpose and use of the handbook

This handbook is intended to support social workers by raising awareness of human trafficking as a phenomenon and offering perspectives on how to approach it from a trauma-informed perspective. It focuses in particular on client engagement and on how the effects of traumatic experiences can be taken into account in the client's current situation and in the assessment of their need for services. This handbook is not an exhaustive guide setting out procedures for every situation; rather, its aim is to support and supplement social work and to help social workers engage with people who have lived through traumatic experiences.

Although the handbook is primarily aimed at social workers, its content is also well suited for use by other professionals and with other client groups. It is useful for anyone who comes into contact with victims of human trafficking, or other individuals who have experienced severe trauma, in the course of their work.

The handbook first explains human trafficking as a phenomenon and then moves on to the topics of recognising and addressing human trafficking. Next, the handbook discusses the effects of trauma caused by human trafficking and, finally, ways of engaging with clients with trauma. The handbook features articles from professionals in various fields, which broaden the reader's understanding and add a diversity of perspectives to the handbook. The articles are the authors' own and reflect their professional expertise. The handbook combines scientific facts with extensive practical experience gained through working with clients. The handbook also includes illustrative examples, which depict fictional scenarios based on real client interactions.

Each section closes with a list of references and further reading for more information about the section's themes. The appendices outline the creation process of this handbook and describe how services for victims of human trafficking are organised in the Wellbeing Services County of Vantaa and Kerava. In the appendices, you will also find exercises and practical tools to support your work.

You can read the handbook in its entirety or select the sections that are most relevant to your work. Each section has been written to stand on its own, which is why there is some repetition. The best way to gain a thorough understanding is to read the handbook from cover to cover.



2. Definitions

This section introduces the key terms used in the handbook to help you use it. It is worth noting that the definitions of terms are not always unambiguous and that they may change over time.

Support measures

When working with victims of human trafficking, social workers adhere to the Social Welfare Act and the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings. Victims of human trafficking with a registered municipality of residence are entitled both to the same social welfare and health care services as other residents and to the special support measures provided for under the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings (746/2011, section 38 a). Support measures are based on an individual assessment of service needs and may include, for example, advice and guidance, social and health services, safe accommodation, reception allowance or income support, as well as support for a safe return.

Vulnerability

Vulnerability refers to the increased susceptibility of an individual or group to harm, exploitation or violations of their rights in situations where their resources, freedom of choice or ability to protect themselves and exercise their rights are diminished, and they may therefore require special support or protection. Vulnerability is often caused by social structures and external circumstances; it is not a personal trait or the fault of the individual. Victims of human trafficking are often already in a vulnerable position to begin with, and human trafficking itself further increases that vulnerability. Vulnerability can also manifest itself through the concurrent presence of multiple vulnerability factors.

Human trafficking

Human trafficking is a serious offence under the Criminal Code. In human trafficking, the offender oppresses the victim and exploits them for financial or other gain. The victim may be exploited, for example, sexually or by being forced to work in unlawful conditions. The offender seeks to control the victim and prevent them from breaking free.

Forms of human trafficking

Forms of human trafficking include, amongst others:

- human trafficking related to sexual exploitation, i.e. pressuring or coercing a person into prostitution, exploiting them in the sex industry or subjecting them to other forms of sexual abuse, such as sexual slavery
- labour exploitation, i.e. forced labour
- forced marriage
- trafficking in minors, i.e. persons under the age of 18

- exploitation in begging
- exploitation in criminal activity
- trade in human organs.

Recognising human trafficking

Recognising human trafficking refers to a situation in which a service provider detects signs of human trafficking and suspects that a person is a victim of human trafficking. This is known as pre-recognition. The formal legal recognition process is initiated when a person is registered as a client in the assistance system for victims of human trafficking. Service providers are not required to verify whether human trafficking is involved, but should recognise signs of exploitation and violence and, where necessary, refer the person to the appropriate support services.

Assistance system for victims of human trafficking

The assistance system for victims of human trafficking is the national expert authority on matters relating to human trafficking and anti-trafficking work. The purpose of the assistance system is to help victims of human trafficking and provide advice on matters relating to human trafficking.

International obligations

Human trafficking is regulated at international level. International conventions and EU directives on combating human trafficking have also shaped the current form of legislation in Finland. In Finland, efforts to combat human trafficking are primarily guided by the UN Palermo Protocol and the Council of Europe Convention on action against trafficking in human beings. Furthermore, the EU directives on human trafficking have sought to harmonise the legislation of the Member States.

Assessment of service needs

The assessment of service needs is used to determine whether a person requires support and whether that need is temporary, recurring or long-term. The assessment of service needs includes, for example, a summary of the client's situation and support needs, a professional's conclusions regarding the client's case, the client's own views on their service needs, and an assessment of the need for a personal support worker (Social Welfare Act 1301/2014, sections 36 and 37).

Undocumented person

The term "undocumented person" can refer to various groups, and the definition varies depending on the context in which it is used. Generally speaking, the term refers to:

- a person who is staying in Finland for an extended period without a valid residence permit or visa
- a person who has arrived in Finland from outside the EU, the EEA or Switzerland and whose private health insurance, which was a condition of their stay, has expired or is insufficient
- a person whose residence permit has expired or whose entry into or stay in the country is not lawful under the Aliens Act.

Psychological control

Psychological control is a key aspect of human trafficking. It is a form of invisible psychological abuse, where a person is brought under the perpetrator's control and forced into dependence and submission. Control is established gradually, which makes it difficult to identify individual acts of abuse. In psychological control, positive behaviour often alternates with threatening, controlling or domineering behaviour. Examples of psychological control include restricting the victim's daily life, isolating them from their family, friends or community, verbal abuse, subjugation, blackmail and threats, as well as threats of violence against loved ones.

Psychological trauma

Trauma refers to an event or series of events that threatens a person's physical integrity or continued existence and exceeds their capacity to tolerate and process it. Most people encounter potentially traumatic events at some point in their lives, but most recover without professional help. However, some experiences can leave a lasting impact. Traumatic experiences can lead to, for example, post-traumatic stress, depression and anxiety. Events considered particularly traumatic include war, the sudden death of a loved one, and serious physical or sexual violence and torture.

Criminal procedure

The criminal procedure consist of a preliminary investigation, consideration of charges, trial and enforcement of punishment. The purpose of the criminal procedure is to determine whether a crime has been committed and who is responsible for it. The provisions of the Finnish Criminal Code relating to human trafficking came into force in 2004. Victims of human trafficking are entitled to receive, where necessary, support during the criminal procedure and comprehensive information about the procedure, in accordance with their individual circumstances. Not all victims of human trafficking wish to proceed with the criminal procedure or report the offence to the police. The victim's right to receive any other support and assistance they may need is not dependent on the progress of the criminal procedure.

Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings

The Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings (746/2011) safeguards the livelihood and care of persons applying for international protection, persons granted temporary protection and victims of human trafficking, whilst respecting human rights and fundamental rights and taking into account EU legislation and international obligations. The act applies to the reception of these persons and to the provision of assistance to victims of human trafficking.

References and further reading:

Assistance system for victims of human trafficking, www.ihmiskauppa.fi

Traumatic experiences and trauma-related disorders – Terveyskirjasto www.terveyskirjasto.fi/pla00031 (in Finnish)

National Referral Mechanism (NRM). Handbook for Identification and Assistance of Victims of Trafficking in Human Beings <https://julkaisut.valtioneuvosto.fi/server/api/core/bitstreams/adc20d80-f96f-4d83-a8ba-3ed7b8ee6b86/content>

Preliminary investigation into human trafficking offences from the victim's perspective, HEUNI Report Series 105 www.theseus.fi/bitstream/handle/10024/865010/Polamk_raportteja_146.pdf?sequence=2

Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings 746/2011. Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings | 746/2011 | Legislation | Finlex, <https://www.finlex.fi/en/legislation/2011/746> (in Finnish)

Police of Finland, www.poliisi.fi/en/trafficking-in-human-beings

Contact Point for Cross-Border Health Care, www.eu-healthcare.fi

Victim Support Finland, www.riku.fi/en

Social Welfare Act 1301/2014. Social Welfare Act 1301/2014.

Social Welfare Act | 1301/2014 | Legislation | Finlex. www.finlex.fi/en/legislation/2014/1301 (in Finnish)



3. Empathetic social work as part of the assessment of service needs

Empathetic social work is not merely a method, but an attitude and a way of working. It permeates the entire process and requires sensitivity, calmness and an ability to regulate their own emotions of a social worker. Every interaction is an opportunity to build trust and support the client's recovery.

The role of social work is to support individuals in their recovery from experiences of abuse and to strengthen their resilience. A social worker must recognise the effects of traumatic experiences and act in a way that does not re-traumatise the client. The aim is for the client to gradually move from a position of vulnerability towards resilience, to build a sense of agency, and to restore their trust in both themselves and the wider society. Empathetic social work emphasises interaction, trust and presence. A client's sense of security and inclusion is gradually built up through a personal relationship. The social worker is not just a service provider, but an active participant who supports the client's recovery and empowers them.

Empathetic social work requires particular sensitivity, a calm demeanour, and the ability to adapt one's approach to the situation. The social worker's role is to create a safe and predictable environment in which the client can be present with their feelings. This handbook sets out practical ways to create a safe space and be fully present. To ensure genuine and active engagement, the use of technology and note-taking should be side-lined during the meeting. Validation helps identify and articulate the client's feelings and experiences in a way that reduces shame and builds trust. The client plays an active role in their own process; the social worker does not make decisions on the client's behalf, but seeks to find solutions together. Reinforcing the client's mental resources is an essential part of empathetic social work. This approach highlights and brings to the fore the client's strengths and coping methods, thereby supporting their agency and recovery. Empathetic social work and the stabilising, trauma-informed approach discussed in this handbook share many common characteristics. They also have their own areas of focus, which can support practical client work. The social worker does not need to distinguish between the different approaches, as they naturally overlap in client interactions.

3.1 A stabilising approach to work

A stabilising approach to social work is not an individual method used in a specific situation. In this handbook, a stabilising approach is viewed more as an overarching approach to practice, encompassing validation and psychoeducation. This approach requires the social worker to understand the symptoms of trauma and to consciously structure their work in such a way as to support the client's commitment to the work within their window of tolerance and zone of proximal development. The window of tolerance refers to the range of arousal within which a

person is able to function, think and regulate their emotions. When a person is within their window of tolerance, they are able to deal with situations flexibly and use their mental resources appropriately. Outside the window of tolerance, a person either becomes overstimulated (hyperarousal), causing the body to go into alarm mode, or understimulated (hypoarousal), causing their nervous system to shut down and freeze. Trauma and chronic stress narrow the window of tolerance, whereas stable interactions and experiences that provide a sense of security help to widen it. The zone of proximal development refers to the space within which a person is able to learn and perform tasks with the support of another person, even if they cannot yet do so independently.

Trauma can be simplified as a state of unstructured mental chaos. When a social worker carries out an assessment of service needs, they have a clear overall picture of the client's situation in mind, and their aim is to facilitate change. However, the client's starting point for the meeting may be completely different: the situation may be hectic, their mind confused and the experience chaotic, making it impossible to grasp the full picture. The client may not necessarily understand what the meeting is about, nor be able to articulate what kind of help they need. They may understand they need help, but they do not know what sort of help they need or how to ask for it.

As trauma often affects emotion regulation as well, the client may wonder why they sometimes feel extremely agitated, whilst at other times they find themselves unable to get anything done. This state of mind may be coloured by a sense of shame at their helplessness and a feeling of failure. The client may feel that they are not learning the "basics" that the social worker considers important. Repeated experiences of failure can be demoralising and cause the client to withdraw from the situation rather than face their discomfort.

The social worker's role is to gain an overall picture of the client's situation, assess the support measures needed and work towards bringing about change. A social worker who adopts an empathetic and stabilising approach keeps these objectives in mind, while involving the client in the process and facilitating their inclusion. The social worker structures the meetings so that the client remains within their zone of proximal development and window of tolerance, ensuring that the work does not become too overwhelming or distressing for the client. This requires predictability, a slow approach, and creating space for the client to process and express their emotions.

It is the social worker's responsibility to establish a clear framework and purpose for the meeting. Knowing in advance what will be discussed at the meeting gives the client a sense of security and clarity. In the midst of mental chaos, external structures are important, as they gradually begin to translate into internal frameworks. This can be illustrated by imagining sorting socks: if you have a large pile of socks in different colours, the task can seem overwhelming, but once you make a clear plan – for example, to sort the socks into separate baskets by colour for half an hour every day – the situation becomes easier to manage. On the fourth day of sorting, you can evaluate the results and plan your next steps. In the same way, a clear structure and a step-by-step approach to the meeting help the client make sense of the situation and reduce any feeling of chaos.

Stabilisation also involves helping the client process their emotions. The client may dwell on past events and the injustices they have experienced. This is understandable, but it does not help them move forward. Sometimes, it can also be a mechanism to avoid the difficult issues of the present. At the same time, talking can bring strong emotions to the surface and cause agitation, but the client may not know how to stop the flood of complaints without help. In situations like these, the social worker can help the client by listening to and acknowledging their experiences, whilst gently steering the conversation back to the present moment.

For example: "Hearing what you're saying, I can well understand why those experiences are so difficult for you. You've been through some really unfair things, and I'm sure they're on your mind a lot. How about we go back to those everyday routines we were discussing just now, and think together how to better organise your life?"

This work can be supported by practical exercises. One way to do this is to list all the problems and worries weighing on the client and draw two large circles on a piece of paper: one for "things I cannot influence" and the other for "things I can influence". The focus is on matters relating to the latter circle, which enhances the client's sense of control and clarifies the situation.

Sometimes, the social worker needs to bring the client back to the present moment – and to the matters they can actually influence – in a rather firm manner. This may seem strict, but it is helpful to the client. Dwelling too much on the past aggravates difficult emotions and clouds the ability to see the present and focus on the future. When the social worker consistently guides the client to return to the present moment and make sense of their stress factors, this approach gradually becomes ingrained in the client's mind, which in turn supports their ability to manage their mental turmoil.

The aim of stabilisation is to increase the client's sense of security, bring structure to the situation and build up their mental resources. The client's situation can be analysed, for example, by means of a needs assessment. The client's concerns and problems can be identified by drawing up a list of issues to be addressed, such as understanding the service system, managing their affairs independently, managing their finances and their experiences of injustice, or challenges of parenthood. Once the list is complete, the client ranks the items in order of priority. The first step is to address the issue that matters most to the client. Empowerment creates hope and gives the client greater control over their circumstances.

Various visual aids can be extremely useful. They allow the client to be creative: if talking about something feels difficult, drawing it and breaking it down on paper can be a great help to the client. Colour-coded sticky notes can be used to help the client remember their appointments; for example, a note with a picture of a yellow flower might remind them that it is an appointment with social services.

Stabilisation table for social workers

A stabilising approach to work is key from the perspective of both the client and the social worker, as it facilitates the work, helps build trust and supports the social worker in considering the client's wellbeing. Table 1 outlines the key areas of stabilisation, the practical measures to be taken, and the objectives of these measures.

Table 1: Stabilisation in practice

Area of stabilisation	Practical measures	Social worker's objective
Situation assessment	Assess the client's security situation, mental state, any potential risks or threats, functional capacity, and immediate needs	Understand the victim's immediate situation, risks, and specific needs for the purpose of planning services
Creating a sense of security	Ensure physical and psychological safety, clear and calm communication; give the client space and time; avoid putting pressure on the client	Reduce fear and increase trust in the authorities and the service system
Emotion regulation	Recognise and identify emotions, help the client calm down, use grounding techniques, avoid going into detail about traumatic experiences	Help the client control overwhelming emotions and maintain their functional ability during the assessment
Building trust	Be consistent, respectful and transparent; explain the steps in the process; empower the client and give them options	Establish a collaborative relationship that enables the assessment of service needs and the planning of ongoing support
Reinforcement of resources	Identify the client's coping mechanisms and their strengths, give hope, and offer them the opportunity to influence their own situation	Improve the client's agency and prospects for recovery within the service system
Referral to further services	Draw up a plan, refer the client to the specialist services for victims of human trafficking, and ensure ongoing support and a safe transition	Ensure continuity and the provision of services, taking the victim's specific needs into account



4. Human trafficking as a phenomenon

Human trafficking is a serious violation of human rights and a criminal offence. The number of identified victims of human trafficking has risen year on year: according to statistics from the assistance system for victims of human trafficking, the system had a total of 1,634 clients in 2025, while there were only 916 in 2020. According to statistics, the most common form of human trafficking is forced labour, followed by forced marriage. The system clients represent over 80 different nationalities, with Finnish nationals forming the third-largest group. This phenomenon is international, multifaceted and ever-expanding, and it affects many different areas of Finnish society. As this is a form of hidden criminality, it is likely that many victims of human trafficking remain unidentified.

Human trafficking is not a single act, but a long-term and multifaceted form of exploitation involving the abuse of power, intimidation and, often, violence. These experiences can cause victims to suffer severe symptoms of trauma, which continue to affect their ability to function long after the abuse has ended.

From the perspective of violence and exploitation, human trafficking appears to be a form of skilful manipulation and subjugation. The abuser may gradually trap the victim in a situation from which there seems to be no escape, and which is often difficult to break free from. Victims are rarely abducted from the street or physically held captive, so the notion of human trafficking as such an activity should be rejected once and for all. Human trafficking is a gradual process of exploitation in which the perpetrator gradually subjugates the victim to their control in order to derive financial or other benefits from them.

Victims are often already in a vulnerable position in some way. The abuser takes advantage of this vulnerability, and as the abuse continues, the vulnerability may deepen or take on a different form. Factors contributing to vulnerability may include, for example, financial hardship, homelessness, addictions, a lack of social safety nets, and issues relating to the right of residence. Factors relating to the individual can also increase the risk of becoming a victim of abuse. These include, for example, age, gender, long-term physical or mental illness, disability, limited language skills, and previous experiences of violence and abuse. Exploiting these vulnerabilities is exploiting the individual's state of insecurity. Vulnerability is not a personal trait or a weakness, but rather the result of circumstances that increase the risk of becoming a victim of abuse.

On the other hand, the abuser may also place the victim in a vulnerable position. The abuser may therefore either exploit an individual's vulnerable position or create the vulnerability themselves. Often, the lure is a promise of something better: a better life, financial security, educational opportunities, or love and family. A person is misled, deceived or blackmailed into acting in accordance with the abuser's wishes. At first, the situation may seem consensual, but as it progresses, it gradually turns into control, isolation, and exploitation. The two examples below illustrate how exploitation works.

Example 1: A young person falls for an older person; a romance develops between them, and the younger person agrees, at the older person's request, to be filmed in a sex video. Later, the older person uses the video as a means of blackmail to force the young person to have sex with others in exchange for money. The older person receives the lion's share of the money. If the young person tries to refuse the arrangement, the older person threatens to share the video with the young person's friends and family.

This example illustrates that the activity began with consent: the young person agreed to be filmed voluntarily. This can confuse the victim and cause them to feel ashamed. The victim may not necessarily recognise the controlling behaviour and the abuse; instead, shame causes them to follow the abuser's orders.

Example 2: A person is recruited by their acquaintance for a job, promising them a good position and a good salary. The recruit agrees and joins of their own free will. A loan is taken out for the trip, which the recruiter promises to arrange. On arrival, there is no job after all; the debt is greater than expected, and the recruiter threatens to harm the recruit's family if they do not pay the debt. The person who has agreed to work to pay off the debt is forced into prostitution. However, the amount of debt increases with every "failure", such as falling ill, and the person has no real chance of ever paying off their debt.

This example shows the process by which a person is placed in a situation with no alternative. The obligation is designed in such a way that it is practically impossible to repay the debt, and failure to do so is said to have serious consequences for the person's family and friends. From the outside, it might look as though the person is free to leave, as they are not kept captive. In reality, however, the person has no realistic chance of escaping the situation, as running away would have disproportionate consequences.

One of the key characteristics of human trafficking is psychological control, which is used to manipulate and direct the victim into acting in accordance with the abuser's wishes without overt physical coercion. In human trafficking, the abuser uses psychological and physical violence to subjugate the victim to their will. Consent is irrelevant. Exploitation and violence are always wrong, even if the victim appears to have consented to them. This should also be borne in mind when providing support, as the victim's initial consent to the abuse may lead them to believe that they themselves are to blame for what happened. Such an interpretation causes shame and guilt. It can also be difficult for a victim to recognise themselves as a victim of human trafficking or to realise that they are being controlled, which makes it hard to understand the situation.

Human trafficking is generally categorised according to its various forms:

Labour exploitation

Sexual abuse

Forced marriage

Exploitation in criminal activity

Abuse of benefits

Exploitation in begging

Trade in human organs and tissues

Other circumstances that violate human dignity

4.1 Psychological control

At the heart of human trafficking lies psychological control, which is invisible to outsiders but an extremely effective means of controlling the victim. Control is based on psychological abuse, which can take the form of threats, a constant threat of violence, and restricted agency and autonomy. The aim of psychological control is to place the victim in a submissive and helpless position from which there appears to be no escape. An abuser can use a variety of manipulative tactics to keep the victim under their control.

One key method of control is giving the victim false information. If the victim does not speak Finnish, the abuser may claim, for example, that they know influential officials who will believe their story because they speak the language. At the same time, they may imply that seeking help would lead to further problems. The victim may be intimidated with the threat of deportation, which can feel threatening and shameful. Furthermore, the victim may be blackmailed by threats to harm their loved ones. The abuser often gains control of the victim's identity papers and other personal information, such as bank details, contacts with public authorities, and social media accounts. At the same time, the abuser isolates the victim from their social circle and keeps them under their control through fear and manipulation. Psychological control can also manifest itself as spiritual control and abuse, in which the abuser exploits the victim's religious or spiritual beliefs. The victim may be threatened, for example, with damnation, hell or God's rejection, or their situation may be presented as a punishment or a consequence of disobedience. Such spiritual manipulation can intensify the victim's fear, guilt and shame, and reinforce the feeling that there is no way out of the situation without serious spiritual or moral consequences.

This control is also evident in the rules imposed by the abuser to restrict the victim's life in many ways. The rules may relate to the use of money, housing, dress, parenting, social interaction, and mobility. The purpose of these restrictions is to undermine the victim's ability to function and to make them dependent on the abuser. Isolation and loneliness are effective means of control, as people need contact with others to cope. When the abuser is the victim's only social contact, even the slightest positive gesture can feel meaningful. The abuser's behaviour often alternates between friendly and threatening, making the control even more effective. This kind of alternation is more effective than direct threats. The abuser may appear simultaneously as both a threat and a source of assistance – even as the victim's sole source of security or protection – which reinforces the victim's dependence on the abuser.

The victim's relationship with the abuser can be complex. The victim may form a trauma bond with their abuser and perceive the abuser as both an intimate friend and a cause of severe suffering. The victim may not necessarily recognise the control or know how to break free from it. Loyalty towards the abuser can continue long after the abuse has ended.

Psychological control is not easy to spot from the outside, but its effects run deep. It restricts the victim's freedom, undermines their ability to function and makes it extremely difficult to break free. For this reason, identifying the mechanisms of control is crucial to ensuring that victims receive timely support and that the cycle of abuse is broken.

4.2 Why recognising human trafficking is important

Recognising human trafficking is a professional duty and a key prerequisite both for the victim's recovery and for the initiation of the criminal procedure. Without recognition, the cycle of abuse continues: the victim receives no help and no chance to recover, yet the abuser is not held accountable for their actions either. Recognition makes it possible to provide timely assistance and initiate the criminal procedure.

Recognising human trafficking is challenging because the abuse happens behind closed doors and does not consist of isolated acts, but rather a continuum in which control and the exercise of power bind the victim to the abuser. If the authorities focus on individual offences rather than the bigger picture, the victim can easily become trapped in a cycle of abuse. Punishing the abuser is not enough on its own; the victim must be referred to the appropriate support services, and the networks that enable human trafficking to continue must be dismantled. Identifying these cases also helps prevent the cycle of crime, since if the situation is not resolved in time, the victims may become abusers themselves and the experience of abuse may be passed down from one generation to the next. Taking action early on has a massive impact and protects many people.

Going through the criminal procedure can be frightening and overwhelming for the victim, so they need close support to get through it. The criminal procedure and trial may not begin until a long time after the abuse has ended, which can bring back traumatic memories and undermine the victim's mental wellbeing. Nevertheless, the criminal procedure is important, as it holds the abuser to account and can reinforce the victim's feeling that the injustice done to them has been recognised. Even if the abuser is never convicted, the mere fact that the victim's account and experiences have been heard and their situation has been taken seriously can have a great impact on the victim. Recognition and the criminal procedure also play a vital role in recovery: the fact that someone sees, hears and believes the victim's story can be a healing experience. Simply putting it into words can be an empowering experience for the victim: "What was done to you is wrong. It is a form of violence, and it has a name: human trafficking."

Understanding human trafficking as a phenomenon and recognising its various forms also influence the way we treat victims of human trafficking who have been involved in criminal activities. If coercion into criminal activity is not recognised as human trafficking, victims may be treated as criminals rather than as victims in

need of support. Victims have the right to be treated as victims, not as criminals. That is why the authorities must be able to recognise the mechanisms of recruitment, control and coercion. Under the principle of non-punishment, based on international law, victims of human trafficking should not be punished for crimes that their abuser has forced them to commit. Although the principle of non-punishment has not yet been applied to any great extent, the provisions in the Criminal Code concerning the waiver of measures make it possible for victims of human trafficking not to be prosecuted or punished (more on this topic: Principle of Non-Punishment of Victims of Human Trafficking).

Victims' recovery must be actively supported, and they must be offered alternative paths. Victims who are forced into crime may not see any alternatives and feel that criminal activity is their only possible option. That is why they must be offered better, practical alternatives, for example, in terms of employment. To support this, the client's abilities, skills, knowledge, and motivation can be assessed to tailor them a training and career path that meets their individual needs. The client can be offered clear options for existing training and employment opportunities, from which they can choose the one that best suits them. If the client is in debt, they can be drafted a realistic plan for managing and repaying it.

Many victims of human trafficking fear their abusers and live under constant threat of violence. Abusers pressure their victims by making them feel ashamed and guilty, by imposing fabricated debts, and by threatening their loved ones. They isolate their victims from their social networks and threaten them with public authorities or deportation. Victims may already have had bad experiences with public authorities. Due to their vulnerable position, victims are not always aware that they have fallen victim to human trafficking. Recognising the signs enables victims to break free, helps prevent them from becoming victims again, and ensures they receive the necessary help and care. It may also affect their right of residence and the criminal procedure. It is important to remember that the account given by a victim who has experienced traumatic events may have inconsistencies. It is the professional's role to extract the relevant information and refer the victim to the appropriate support services.

The effects of human trafficking have a profound impact on an individual's mental, physical and social wellbeing. In social work, it is important to understand human trafficking in its entirety so that the victim's situation can be recognised and their needs can be met appropriately. Helping victims of human trafficking is not merely a matter of providing individual services, but rather of offering comprehensive support centred on building trust, reinforcing the victim's sense of security and restoring their sense of agency. The criminal justice system is not the best means of rehabilitation for victims of human trafficking.

4.3 Identifying victims of human trafficking

When identifying human trafficking, it is important to remember that victims cannot be identified based on external signs. You must keep an open mind: anyone can fall victim to human trafficking, regardless of their nationality.

It is often difficult to identify human trafficking, as the exploitation takes place behind closed doors and the victim may not necessarily realise that they are a victim of human trafficking. Human trafficking is associated with shame, fear, and insecurity. The victim may also have been given false information that prevents them from speaking out about their experiences. It is important for the social worker to recognise the many forms of human trafficking and to be able to interpret the signs indicating exploitation.

A victim of human trafficking may not necessarily be aware of their situation or know how to seek help. Shame and fear of the abuser can prevent the victim from seeking help, as can fear of the authorities. The abuser may have threatened the victim with contacting the authorities or given false information about what would happen if the victim sought help or spoke about their experiences. For example, the abuser might claim that seeking help will lead to deportation or other negative consequences. Often, people seek help for so-called secondary reasons; in healthcare, for example, due to an accident at work or recurrent sexually transmitted diseases or abortions. As human trafficking is not always obvious, the victim may have had several dealings with public authorities before being identified as a victim of human trafficking.

As it is difficult to recognise and raise the issue of human trafficking, we have developed ways to make this easier. We have compiled a list of signs that social workers can take as possible red flags of exploitation and abuse. The purpose of the red flags is to draw the attention of professionals. They do not, therefore, automatically imply human trafficking, but may indicate a need to investigate the situation more thoroughly.

Examples of red flags:

- A client always attends appointments accompanied by a person who speaks and handles matters on the client's behalf. One reason for this might be that the companion speaks better Finnish or is better at managing such affairs. However, it is important to remember that a close friend or family member cannot officially act as an interpreter. To ensure legal protection for both the client and the social worker, professional interpreters must always be used during meetings.
- A client is unclear about, for example, their living arrangements or who lives with them.
- A client's employment contract is unclear or they do not have an employment contract.
- A client does not have their own identity papers, online banking credentials or other key information with them.
- A client is unable to provide details of their medical history (such as vaccinations or contraception).

The enclosed form for identifying victims of human trafficking may be used to recognise human trafficking. Do not go over the form question by question, but rather use it as an aid during the interview.

A professional does not need to know whether it is specifically a case of human trafficking, but it is essential to recognise the signs of abuse and ensure that the person receives the help they need. The National Referral Mechanism (NRM) handbook for identifying and referring victims of human trafficking has been published to support professionals. It is a practical tool designed for professionals who come into contact with victims, aimed at improving the identification of victims, service referral, and the organisation of services and care at national level. The examples of possible red flags in the table below are based on the NRM handbook.

Table 2: Possible red flags of exploitation and abuse

Social services:	Health care:
The client is always accompanied by another person	The client is often accompanied by another person or someone often acts on behalf of the client
Someone else holds the client's documents or finances	Repeated visits to the emergency department or cancellations
Cancellations or no-shows	Lack of health information
Nervousness	Unexplained injuries or scars, repeated accidents, untreated chronic conditions, recurrent infections or sexually transmitted diseases
It is difficult to get a clear picture of the client's situation	Unwanted pregnancies or lack of antenatal care
Weather-inappropriate clothes	Substance use
Uncertainties regarding debts or the use of money	Neglected appearance, fatigue, timidity, poor nutrition
Multiple child welfare or general welfare notifications	Weather-inappropriate clothes
The client has moved frequently from one town or region to another	Difficulty committing to treatment
Inconsistencies in the client's story	
Lack of awareness of their own situation	

Source: Nuotio, 2025

4.4 Raising concerns about suspected human trafficking

If you notice any potential signs of abuse, always raise the matter with the client. Sometimes, you might simply get a feeling that something is not quite right. Even then, it is better to ask than not to ask. Even if your interpretation turns out to be wrong, it is always safer to ask than to remain silent. Sometimes a victim of human trafficking may deny being exploited, even if the professional's suspicions are correct. It is still important to ask, as every time the subject is raised, the client may become more comfortable with telling the truth. It often takes several people to pluck up the courage to ask before the client dares to admit – perhaps even to themselves – what has happened.

Bringing up the subject requires trust, sensitivity, and courage. To understand the client's situation, it is important to ask questions directly, but respectfully.

Any urgent matter should be raised immediately. The client's safety must be ensured, for example, by referring the client to the police if there is a threat to their life or health, by arranging safe accommodation, by drawing up a safety plan, or by taking other appropriate action as the situation requires. At the same time, it must be determined who will continue to work with the client so that there is no break in the chain of support. If there is no immediate threat to safety and several meetings have been scheduled, time can be taken to build trust and clarify the situation.

It is important to provide the client with reliable information about their rights and the services available to them. The client has the right to be informed about the options available to them, such as the assistance system for victims of human trafficking. Knowledge can dispel the false beliefs that perpetuate exploitation and serve as a basis for discussion.

Preparing for the appointment

Prepare for the meeting in advance and think about how you will bring up the subject and what you will say. Create a calm and safe space. Make sure that there are no other persons present at the meeting, such as children. If possible, bring a colleague with you and arrange an interpreter, if necessary. When dealing with sensitive topics, it is generally advisable to use an interpreter of the same gender as the client. If the client's community is small and the risk of being recognised is high, you might consider using a telephone interpreter; otherwise, an in-person interpreter is preferable. Tell the client why you are raising the concern.

Guidelines for discussing potential abuse

It can be difficult for the client to talk about their experiences, so avoid asking detailed questions. Aim to reduce their feelings of guilt and shame and take cultural sensitivity into account. You can use specific examples, such as a tenancy agreement or a payslip, to back up your point: "This tenancy agreement raises concerns and I suspect that you may have been taken advantage of."

The client's emotional reaction can spark a conversation. Give their feelings space and ask whether something has come to mind – perhaps a memory or an incident – that they would like to talk about. Sometimes, you just have a nagging feeling that something is wrong. Trust your intuition and bring it up:

"I have a feeling that something is wrong here, and I'm deeply concerned about you. Are you safe?"

How to bring up human trafficking with a client

Below is a list of different ways in which you can raise the issue of suspected human trafficking. These are examples that you can adapt to the situation on hand. Choose expressions that sound natural to you.

General approach

"I/we usually ask everyone..."

- Have you experienced physical or sexual violence?

- Does anyone control your life, for example, what you're allowed to do or say?
- Do you have access to your own money?
- Are you able to move about freely?
- Are you afraid of someone close to you or anyone else?

Personalised approach

- "I see you may have a bit of a problem. Would you like to tell me more about it?"
- "I'm worried about you, but I can't quite put my finger on why. Is there anything I should know so that I can help you?"
- "You seem sad. Would you like to talk about it?"
- "You told me that you're in this sort of situation. What's bothering you? What do you think of the situation?"

Make a generalisation

- "I've noticed that clients' employment contracts often contain..." → This allows you to start a conversation without the client feeling that they are alone in their situation.
- "These things can be difficult to talk about, but have you ever been asked to do something sexual that you didn't want to do?" (adult clients)

Sharing information to serve as a basis for discussion

- Explain the phenomenon and relevant legislation so that the client feels that they are not alone in their situation.
- After providing some general information, encourage the client to talk about their personal experiences.

Give concrete examples

- The client's documents (e.g. employment contract, payslip, tenancy agreement) can serve as conversation starters: "When I looked at your employment contract, I noticed that you don't have any record of your working hours, which is typical in cases of forced labour. That's why I began to wonder whether you might have been a victim of forced labour. Can we talk about this?"

Reactions and emotions

- The client's emotional reaction can be a starting point for the conversation: "It occurred to me that perhaps you would like to tell me more about some incident or something else that has been on your mind?"

Explaining the seriousness of the situation

- "What you're telling me about your experiences sounds very serious and concerning. It is possible that you have experienced abuse and been treated badly. Thank you for telling me – now I can help you."
- "You told me about the way your partner treats you, and it made me worry. Can we talk about it some more?"

References and further reading:

Hopper, E., & Hidalgo, J. (2006). *Invisible Chains: Psychological Coercion of Human Trafficking Victims*. *Intercultural Human Rights Law Review*.

Human trafficking as a phenomenon encountered in health and social services, Online Courses – Finnish Institute for Health and Welfare

Assistance system for victims of human trafficking www.ihmiskauppa.fi

National Referral Mechanism (NRM). Handbook for Identification and Assistance of Victims of Trafficking in Human Beings <https://julkaisut.valtioneuvosto.fi/server/api/core/bitstreams/adc20d80-f96f-4d83-a8ba-3ed7b8ee6b86/content>

Principle of Non-Punishment of Victims of Human Trafficking <https://julkaisut.valtioneuvosto.fi/items/ab84aee9-8b1f-48ac-b714-561f1100eaea>

Handbook for forensic child interviews in presumed cases of trafficking | HEUNI <https://heuni.fi/-/lapsen-kuulemisen-kasikirja#1f15655f>

ODIHR National Referral Mechanisms Handbook, 2nd Edition | OSCE Office for Democratic Institutions and Human Rights <https://odihr.osce.org/odihr/NRM-handbook>

Policy brief 2/2023. Human trafficking: Psychological coercion and investigative interviews | HEUNI <https://heuni.fi/-/pakottava-kontrolli-ja-rikostutkinta#1f15655f> (in Finnish)

Report Series №96a: From exploitation to fair working conditions. Report on the provision of employment services for foreign-born victims of human trafficking in Finland | HEUNI <https://heuni.fi/-/report-series-96a#1f15655f> (in Finnish)

Report series №106b: “This isn’t easy”—Stepping up support for victims of forced marriage.” EASY Project Guide to Best Practice | HEUNI <https://heuni.fi/-/tuen-tehostaminen-pakkoavioliiton-uhreille#1f15655f> (in Finnish)

Report series №108b: “The Long Road”—A toolkit for supporting victims of forced marriage | HEUNI <https://heuni.fi/-/report-series-108b-pitka-polku-tyokalupakki-pakkoavioliittojen-uhrien-tukemiseen#1f15655f> (in Finnish)



5. Guest writer: Human trafficking among young people

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Young victims of human trafficking are rarely discussed in the context of social welfare and health care services, even though the phenomenon is by no means unusual. When discussing young victims of human trafficking, it is important to highlight those young people who are in a particularly vulnerable position, such as those requiring special support and foster youths. It is essential to recognise that the factors that undermine young people's wellbeing are often also factors that make them vulnerable to human trafficking or other forms of abuse.

Human trafficking targeting vulnerable young people often goes unrecognised. Human trafficking may be involved, for example, if an adult provides accommodation to a young person in exchange for sexual acts, or pressures a young person into forced labour or criminal activity. Young people, too, can be guilty of human trafficking or commit offences against other young people. This is not always intentional – it may stem from a lack of understanding. For example, a couple of friends might get the idea of selling sex and carry it out in a way that actually constitutes a criminal offence. Young people do indeed need information about criminal law and sexual violence in general in order to understand how they and others should be treated.

Transactional sexual violence

Sexual violence is sexual activity without or against consent; it constitutes a violation of an individual's right to sexual self-determination and personal integrity. A non-consensual sexual act may occur either because the other party does not give their consent, or because that person is unable to give their consent due to, for example, their age, intoxication, or mental state. In the Criminal Code, the definition of rape is based on consent. Sexual violence or harassment can include any behaviour that the victim finds distressing. Even acts or words that do not constitute a criminal offence can be traumatic and cause a sense of insecurity.

The phenomenon known as transactional sexual violence is not always recognised as human trafficking, even though it clearly exhibits characteristics typical of human trafficking. Transactional sexual violence refers to offering a young person something they would want, such as money, valuables or other goods, in exchange for some form of sexual act. The term "commercial sexual abuse or exploitation of a minor" may also be used in this context. In order to be considered transactional

sexual violence, an act does not need to involve a physical interaction. Transactional sexual violence can also occur online or on social media, for example, via online services or platforms that distribute pornographic or erotic content. When a young person falls victim to transactional sexual violence, they may believe they are acting of their own free will and the act is consensual. However, consent cannot be given in a situation where a young person is unprotected or unsafe and is offered drugs, a place to stay or some other temporary benefit in exchange for sexual violence. According to a survey conducted as part of Pesäpuu ry's Hatkassa project on runaway children (2023), 18% of the young people who responded to the survey had exchanged sex or sexual acts for, for example, drugs or a place to stay, and 4% had sold sex. The same report revealed that 24% of young people who had left their foster care unit without permission – i.e. who had run away – had been raped whilst they were on the run. Paying or offering payment to a minor in return for sexual acts is a criminal offence, and the so-called age of consent of 16 does not apply in such situations.

Young people with special needs and disabilities

The vulnerability of young people who require special support, such as those with physical, sensory or intellectual disabilities or cognitive impairments, is exacerbated by the prevailing mindset that these groups are non-sexual, incapable of defending themselves or so protected in terms of social relationships that there would be no risk of sexual violence. Young people with intellectual, physical or sensory disabilities, and those requiring other forms of special support should also be recognised as a particularly vulnerable group. The need for physical and psychological support and assistance among young people with disabilities who require special support can lead to dependence on the carer. This may, in part, make young people vulnerable to the exercise of power and restrictions. If a person caring for a young person with a disability or in need of special support seeks to exploit that young person in any way (including work or similar activity), it is important to determine whether the act meets the criteria for human trafficking.

There should be no exercise of power relating to sexuality whatsoever in a care or support relationship. The exercise of power may manifest itself in a refusal to discuss matters relating to sexuality or to answer a young person's questions, or in prohibiting masturbation or punishing a young person for it. For this reason, when working with young people who require special support, it is important to discuss sexuality and safety skills in a way that is appropriate for them.

Published in 2022, the report *Frequency of domestic violence experienced by persons with disabilities and availability of services: A quantitative and qualitative examination* states that people with physical or other disabilities who received insufficient support were more likely to have experienced violence than those who did not need support or who received sufficient support. Physical contact and proximity associated with caregiving increase the risk of violence and abuse. A disabled person may also be financially or emotionally dependent on the perpetrator of the violence. This dependency can make it difficult for the disabled person to speak out about the violence and thus affects their ability to get help.

Engaging with a young person

Talking to a young person about difficult, sensitive or embarrassing topics, such as sexuality or sexual violence, is not always easy. Sometimes, it helps both parties to be open about how it is important to have the conversation, even though it may feel awkward. Difficult topics must also be addressed. Emotions are contagious, which is why the professional's ability to reflect on themselves and to recognise and manage their thoughts and feelings is essential. An atmosphere of respect, openness, non-judgement and acceptance is created through the professional's own attitude: Even if the professional does not approve of all the young person's actions, the aim is still to understand why and how they have reached this point.

The young person themselves, their peers and even adults taking caring of them may blame the young person if the sexual violence they have suffered is in some way linked to their own conduct: for example, if the young person has sought accommodation in exchange for sexual acts or with the perpetrator of the sexual violence whilst on the run, if the sexual violence occurred in connection with substance use, or if the young person has sold sex. The guilt and shame associated with sexual violence increase the risk of deteriorating mental health; therefore, it is essential to help the young person process these feelings. If the young person lacks the ability to protect themselves, the work can sometimes feel like a balancing act: one must provide protection without inadvertently increasing the young person's sense of guilt. It is a good idea to plan in advance when to bring up safety skills and what words to use. The young person may feel like they are being guilt-tripped if safety skills are discussed immediately when sexual violence comes to light, for example.

When the young person talks about their experiences, the professional takes on the role of a listener and asks only open-ended questions (e.g. what happened next, how are you feeling now?). It is particularly important to ask open-ended questions when the young person is recounting events that may involve a crime against them, but which the police have not yet investigated. Leading or suggestive questions, or poorly worded comments from a professional, can undermine the credibility of a young person's account during the preliminary investigation. In these situations, it is advisable to write down both the young person's account and your own words as accurately as possible. The professional can thank the young person for trusting them enough to open up to them. Where possible, it is advisable to explain openly to the young person what will happen next: for example, the professional could say that what the young person has told them could necessitate them to contact the police for further investigation, if necessary. If the professional is unsure whether to tell the young person about reporting the case to the police, they should explain to the young person that what they have said is important and that the professional needs to think about it and come back to the matter later. The adult world, and official procedures in particular, are slow. If, after a young person has spoken to a professional, it takes months or, in the worst case, years before adults appear to respond to what the young person has said, the young person may feel that adults are indifferent and that the violence they have experienced is not taken seriously. A professional's honesty regarding the next steps and their statutory duty to report also help to maintain a relationship of trust.

The impact of experiences of violence varies from person to person. Sometimes, the young person's attitude or reaction to what has happened may seem unusual or different to the professional; for example, the young person may appear indifferent. The young person may also have a negative attitude towards professionals, be reluctant to cooperate with them and, to put it bluntly, be annoying to the professional. In such situations, it can be helpful for the professional to consider the matter through the lens of the young person's life experiences. If a young person has not had a single trustworthy adult in their life, and they have been valued solely for the benefit they provide, whilst experiences of violence have been a daily occurrence for them, experiences related to human trafficking and sexual violence may be a continuation of a familiar pattern for the young person – a repetition of what came before. Due to an attachment disorder caused by severe traumatic experiences in early childhood, indifference may serve as a coping mechanism. Individual risk factors and life experiences influence both the likelihood of becoming a victim of violence and the consequences of such violence. For example, a delay in cognitive or socioemotional development can make a young person more susceptible to being lured or persuaded into engaging in behaviour that is harmful to them. At the same time, it can make it more difficult to process traumatic life experiences and, for example, to benefit from therapeutic work.

Knowledge helps. For example, understanding the stress response and the fact that an individual cannot choose whether to react to a threatening situation by fighting, fleeing or freezing can help them come to terms with what has happened. For example, freezing during an incident of sexual violence can lead to feelings of guilt. Thus, understanding that the victim did not choose to freeze in response to violence can help alleviate that guilt. Similarly, helping the young person understand psychological coercion and that all people find it difficult to resist other people's demands and pressure can help them reflect on their experiences and potential submission to another person's control. Understanding how the body and mind may react to traumatic events reduces the burden of potential symptoms and also fosters hope in recovery and in the fact that symptoms may pass or become easier. It is important to support the young person's belief in the future and in their recovery, but in a way that does not downplay their current experience.

It is essential to focus on building a positive self-image and supporting sexual development, particularly in the daily lives of young people who have experienced abuse and sexual violence, and, where necessary, within a therapeutic context as well. You can find more information on the importance of sex education and safety skills, as well as ways to incorporate them, in the recommended reading and resources listed at the end of this section.

References and further reading:

Frequency of domestic violence experienced by persons with disabilities and availability of services: A quantitative and qualitative examination

<https://julkaisut.valtioneuvosto.fi/items/458992f2-11c2-4ee8-be00-2203adce41dc>
(in Finnish)

A tool for discussing suspected violence with a child or young person –

<https://barnahus.fi/tyokalu-keskusteluun-lapsen-tai-nuoren-kanssa-vakivaltaepailyta/> (in Finnish)

The “Hatkassa Suomessa” report on runaway children

<https://pesapuu.fi/wp-content/uploads/2023/03/HatkassaSuomessa-raportti.pdf>

How to approach a young person aged 12–19 who is suspected of having experienced sexual violence? – Information pack for professionals – Barnahus

<https://barnahus.fi/seksuaalivakivalta/miten-kohdata-12-19-vuotias-nuori-jonka-epaillaan-kokeneen-seksuaalivakivaltaa-tietopaketti-ammattilaiselle/> (in Finnish)

HEUNI Report 89: Trafficking of children and young people in Finland 2019

http://old.heuni.fi/material/attachments/heuni/reports/J4q2bt28H/HEUNI_Report_89_Lapsiin_ja_nuoriin_kohdistuva_ihmiskauppa_Suomessa_2019.pdf
(in Finnish)

Nuorten Exit Ry, <https://nuortenexit.fi/ammattilaisille/seksuaalinen-kaltoinkohtelu/haavoittuvuutta-tuottavat-tekijat/> (in Finnish)

Criminal Code (8.7.2022/723).

<https://www.finlex.fi/fi/laki/ajantasa/1889/18890039001#L20>

6. Assistance system for victims of human trafficking

Co-written with experts from the assistance system for victims of human trafficking

In Finland, assistance for victims of human trafficking and their right to special assistance and protection are guaranteed by the assistance system for victims of human trafficking (“the assistance system”). The assistance system is a national authority whose statutory duties include acting as the national expert authority, identifying victims of human trafficking, and providing assistance to victims of human trafficking and their children. These activities are governed by the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings. The Act also sets out the support measures to be provided for victims of human trafficking and the responsibilities for organising them. The assistance system operates throughout Finland and is run by the Joutseno Reception Centre under the supervision of the Finnish Immigration Service.

In addition to identifying and assisting victims of human trafficking, the assistance system plays an important role in advising other authorities on matters relating to human trafficking, and the assistance system can be consulted on such matters at a low threshold. The assistance system operates a 24/7 helpline that is available every day of the year, providing information, advice and guidance. It also serves as a gateway to the services of the assistance system, where necessary.



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Recognising human trafficking

Finland is committed to combating human trafficking through international agreements and is obliged to identify and assist victims of human trafficking. Identifying victims of human trafficking is crucial both for ensuring that victims’ rights are upheld and that they receive the assistance they need, and for raising public awareness of the phenomenon. Raising awareness can increase knowledge about human trafficking and help combat it.

Recognising human trafficking helps victims break free from their situation and access the support they need. For social welfare and health care professionals, knowledge of human trafficking helps them understand a client’s situation and serves as important background information when assessing service needs and determining the support required. A victim of human trafficking may also need to come to terms with the exploitation they have experienced, and a professional can support them in this by, for example, validating their experiences.

Referring victims to the assistance system

Any person residing in Finland who is identified to have been a victim of human trafficking and who, as a result, is in need of support from the assistance system may be admitted as a client to the assistance system for victims of human trafficking. A child residing in Finland who is a victim of human trafficking may also be admitted to the assistance system if they are in need of support. Furthermore, a person assisting in the investigation of a human trafficking offence may be admitted as a client of the assistance system if they are in particular need of support.

The assistance system does not carry out outreach work to identify potential victims of human trafficking. A public, private or third sector actor may submit an application to admit a person whom they believe to be a victim of human trafficking in the assistance system. An individual can also apply to be admitted as a client in the assistance system themselves. An employee of the wellbeing services county can submit an application together with the client.

Submitting an application does not require definitive proof that human trafficking has taken place; a reasonable suspicion of exploitation indicative of human trafficking is sufficient. The person concerned must always give their consent before an application is submitted. If a minor is proposed as a client of the assistance system, the consent of their parent, guardian or legal representative is required. In addition, the consent of the person concerned is required if they are aged 15 or over and have joint decision-making rights with their representative. In order to give their consent, a person must be informed of the assistance system and the significance of being admitted to it as a client, as well as about the rights of victims of human trafficking within the assistance system and the implications of those rights. In order to submit an application, the client must be consulted regarding their need for assistance. A brochure about the assistance system in various languages, as well as information on the processing of personal data within the assistance system, is available here: <https://ihmiskauppa.fi/en/assistance-system/referring-a-victim-to-support-services/>.

Table 3: Referring victims of human trafficking to support services

A brief guide to applying to the assistance system
Please submit the application in writing, unless the case is urgent.
Fill in the application form available on the ihmiskauppa.fi website.
Send the application via encrypted email to ihmiskauppa.auttamisjarjestelma@migri.fi.
If necessary, ask the assistance system for an encrypted email link to submit the application.
The decision of admittance is always made in writing.
The decision may initially be made orally if the case is urgent.

The decision to admit someone as a client of the assistance system is made on the basis of the information provided. In practice, the assessment is often based on the person's own account. Decisions are always based on the information available at the

time the decision is made. The decision-makers regularly consult social welfare and health care professionals to assess the need for support measures.

As a result of a positive admittance decision, the person is added to the assistance system as a client. A positive decision also means that the assistance system recognises the person as a victim of human trafficking. It serves as a strong indication to other authorities that the person may be a victim of human trafficking, which will be taken into account, where appropriate, in matters falling within the remit of each relevant authority and in their decision-making.

Purpose of the assistance system

The assistance system decides whether to admit a person as a client. The decision may be positive or negative, and it is possible to appeal the decision. When the decision is positive, the assistance system recognises the person admitted to the system as a victim of human trafficking. The assistance system organises support measures for persons in the system who do not have a municipality of residence in Finland as defined in the Municipality of Residence Act. It also provides guidance and advice to persons who do have a municipality of residence in Finland. The assistance system may grant a temporary reconsideration period to persons residing in Finland without a legal right of residence, thereby legalising their stay for a maximum of six months (sections 52 b and 52 c of the Aliens Act). A reconsideration period may also be granted to a person who has a municipality of residence but no longer has a legal right of residence in Finland.

The assistance system also decides when to close a client's case in the system. The decision is an appealable administrative decision. In accordance with the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings, a person is removed from the assistance system if, on the basis of an overall assessment, they are no longer in need of support measures; if they leave or are deported from the country; if they express their wish to leave the assistance system; or if they have gone missing. A person may also be removed from the assistance system if they pose a serious threat to public order or safety.

The assistance system employs social welfare and health care professionals: social workers, social counsellors and public health nurses. Social welfare and health care professionals working for the assistance system are responsible for organising social welfare and health services provided as part of support measures, and they collaborate with reception centres and wellbeing services counties to assist victims.

Other experts also work within the assistance system. They make administrative decisions regarding admission to and removal from the assistance system, and provide clients with guidance and advice on residence permits and criminal law matters. In addition, personnel across the entire assistance system play stakeholder and expert roles both nationally and internationally.

Social welfare professionals working for the assistance system assess the needs for services and draw up a personal plan for clients without a registered municipality of residence, identifying their support needs, setting out the support services to be provided, and laying out a follow-up plan. On this basis, a range of social services can

be provided for clients, such as supported housing, family support, vocational support services, and social rehabilitation. The professionals take a systematic and change-oriented approach to client work, guided by the principles of a trauma-informed approach.

In addition, the assistance system acts as the national expert authority on matters relating to human trafficking and anti-trafficking work. The assistance system plays a broad expert role in combating human trafficking and promoting efforts to tackle it. The support system monitors developments in human trafficking and builds expertise nationwide by organising training courses, amongst other activities. In addition, the assistance system provides general advice and guidance on human trafficking, how to detect and identify it, and how to assist victims.

Table 4: Purpose of the assistance system

Task	Description
Client admittance decisions	Decision to admit a person as a client in the assistance system (positive or negative decision; right of appeal).
Victim identification	If the decision is positive, the person is recognised as a victim of human trafficking.
Organising assistance	Organisation of services for clients without a registered municipality of residence; guidance and advice for clients who with a registered municipality of residence.
Granting a reconsideration period	Granting a temporary residence permit for a reconsideration period (1–6 months) in accordance with the Aliens Act.
Termination of the client relationship	Decision to terminate the client relationship. The decision is an appealable administrative decision.
Social welfare and health services	Social workers and health care professionals organise services and collaborate with wellbeing services counties.
Administrative decisions and advice	Other experts make administrative decisions and provide guidance on matters relating to residence permits and criminal law matters.
Assessment of service needs	Service needs assessment and personal plan for clients without a registered municipality of residence; organisation of social services.
National expert role	Acting as an expert authority in the fight against human trafficking, monitoring of developments in human trafficking, and organisation of training courses.
Advice and guidance	General guidance on identifying human trafficking and assisting victims.

Support measures

Clients of the assistance system for victims of human trafficking may be assisted through the support measures provided for in the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings (section 38 a). Support measures are organised in accordance with section 38 b, subsection 3 of the Act, based on an assessment of the individual needs of the victim of human trafficking. When organising support

measures, due consideration must be given to the victim’s special needs, arising from their age, vulnerable position, and physical and mental state, as well as to their safety. Furthermore, the Act provides for its application to persons with special needs due to vulnerability (section 6).

Where a client has a municipality of residence as defined in the Municipality of Residence Act, the wellbeing services county has the authority and responsibility for assessing the need for support measures, organising such measures and determining how they are to be organised. Support measures are organised for clients based on an assessment of their individual support needs. In wellbeing services counties, this means assessing the need for services and care. When assessing service needs, a wellbeing services county must take into account any special needs arising from having been a victim of human trafficking. The body responsible for organising support measures may organise the measures itself or outsource them to a public or private service provider (section 38 b of the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings).

<p>Reception facility clients</p>	<p>Clients without a registered municipality of residence</p> <ul style="list-style-type: none"> • Persons without lawful residence • Undocumented migrants • Persons with an indefinite leave to remain • Unregistered EU citizens • Persons with a temporary residence permit 	<p>Clients with a registered municipality of residence Including Finnish citizens</p>
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A wellbeing services county may apply to the Economic Development Centre for reimbursement of the costs of services or support measures organised for a client in the assistance system due to special needs arising from the client’s status as a victim of human trafficking. Reimbursement may be filed for the period during which the person was a client of the assistance system. A person does not need to be without income or means in order to claim reimbursement for services provided to them. Reimbursement is not limited to social welfare and health care services, but may also be applied for to cover costs arising from other support measures. Applications are submitted retrospectively. More detailed guidance on specific services, reimbursement of costs, and the application procedure can be found in the guidance issued by the Ministry of Economic Affairs and Employment to the wellbeing services counties.

Support measures include:

Advice and guidance

Guidance and advice provided by the assistance system, requiring expertise and in-depth knowledge of human trafficking and the circumstances of victims of human trafficking. Guidance and advice provided as part of support measures may include, for example, practical advice and assistance regarding applications for residence permits, access to legal aid and legal representation, and criminal proceedings. Experts working for the assistance system can also provide guidance and advice on these matters to the personnel of wellbeing services counties.

Safe accommodation

There is no legal definition for “safe accommodation”. In practice, arranging safe accommodation may involve, for example, organising temporary accommodation, support for renting a flat in a safe area, supported accommodation solutions, various safety measures, and taking safety into account when arranging accommodation.

Reception allowance or income support

An assistance system client may be entitled to financial support in the form of a reception allowance or income support to ensure a standard of living necessary for a decent life and to promote independence, provided that they are in need of such support and are unable to secure a livelihood through gainful employment, other income or assets, support from a person legally obliged to provide for them, or by any other means. Support measures can also be provided to clients through means such as supplementary financial assistance.

Social welfare and health services

The provision of support to an assistance system client with a municipality of residence is governed by both social welfare and health care legislation and the provisions of the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings concerning support measures and their organisation. In accordance with the Social Welfare Act, eligible social services may include, in addition to social work and social counselling, supported accommodation, family support, social rehabilitation, or mental health and substance abuse services. In addition to the services provided under the Social Welfare Act, support measures may be customised for the client to meet their specific needs.

Safe return

If a client wishes to return to their home country or to another country where they have the right of residence, the safety of their return must be carefully assessed. In the case of a victim of human trafficking, it is particularly important to identify any potential safety risks before their return.

The assistance system may implement assisted voluntary return as a support measure by commissioning the International Organization for Migration (IOM). Wellbeing services counties may also organise an assisted voluntary return for assistance system clients in cooperation with the IOM. The IOM makes the travel arrangements and often also provides support for reintegration in the destination country.

Cooperation between the assistance system and wellbeing services counties

The assistance system cooperates with wellbeing services counties to assist residents with a registered municipality of residence. A client may already have a municipality of residence when they are first registered in the assistance system, or it may be established during the course of the client relationship. Wellbeing services counties are obliged to provide services for clients of the assistance system, and social services are responsible for service coordination (section 38 b of the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings).

The assistance system refers clients with a registered municipality of residence to services provided by their wellbeing services county by submitting a notification in accordance with section 35 of the Social Welfare Act. The notification is usually submitted via the wellbeing services county's own notification channel. The notification should specify the main aspects of human trafficking suffered by the client, the known needs for support, and any services that may already have been provided. With the notification, the wellbeing services county is requested to cooperate in assisting the victim and urges them to initiate an assessment of the victim's service needs without delay. Victims of human trafficking who have been referred to the wellbeing services county may have urgent needs for services relating to housing, livelihood or safety. A person's status as an assistance system client is temporary and contingent upon their need for services as a victim of human trafficking.

It is recommended that clients be accompanied when moving from one service to another. It is advisable to hold transfer meetings to ensure that information is passed on to the next service provider. The authorities must also ensure that information regarding victimisation by human trafficking is passed on from one wellbeing services county to another if the client moves. Wellbeing services counties should notify the assistance system once the client no longer requires support services and their case is being closed. In practice, this usually also means that the person's status as a client of the assistance system comes to an end.

Clients with a registered municipality of residence are also assigned personal case workers within the assistance system. These case workers can provide guidance and advice to clients themselves or to the wellbeing services county regarding residence permits and criminal law matters. In addition, an independent case worker may, where necessary, collaborate with other professionals in the wellbeing services county at various stages of the client's care pathway and participate, for example, in multi-sectoral network meetings. The assistance system informs clients with a registered municipality of residence about its role, the division of responsibilities, its powers and the rights of victims of human trafficking.

Table 5: Support measures

Support measure	Explanation
Guidance and advice	Practical advice and assistance regarding residence permit applications, access to legal aid and legal representation, and criminal proceedings.
Safe accommodation	Arranging temporary accommodation or supported housing, or helping with renting a flat in a safe area. This may include various safety measures and safety considerations when arranging accommodation.
Reception allowance or income support	Financial assistance to ensure a minimum standard of living and to promote independence.
Social welfare and health services	Services and support measures under the Social Welfare Act. These include, for example, social work, social counselling, supported accommodation, family work, social rehabilitation, and mental health and substance abuse services. In addition, specific services can be arranged to meet the victim's needs.

Safe return	Assisted voluntary return to the home country or another country, in cooperation with the IOM. Includes travel arrangements and often also support with reintegration.
Cooperation with wellbeing services counties	Referring clients with a registered municipality of residence to the wellbeing services county's services, notifications, and service coordination. Includes information exchange, transfer meetings, and case worker's support for the client and authorities.

What should you tell about the assistance system to potential victims?

It is advisable to provide potential victims of human trafficking with comprehensive information about the assistance system before submitting the application.

A potential victim can be informed about the assistance system's role as an authority and its statutory obligations, as well as the rights of clients who have been identified as victims of human trafficking. The assistance system also provides guidance on filling in the application and, where necessary, preliminary advice on the implications of becoming a client of the assistance system.

It is a good idea to explain to the client, in clear terms, which support measures they may be entitled to. The support measures are determined based on a professional's judgement, but it is important that the client is also given a say in matters concerning them. Clients of the assistance system are entitled to support measures regardless of their residence status.

The assistance system does not disclose information about its clients to other authorities without a valid reason, nor does it require its clients to report the exploitation to the police. However, the client can get help from the assistance system in filing a police report, should they wish to do so.

The assistance system cannot influence the Finnish Immigration Service's processes relating to residence permits or be involved in the processing of applications for international protection or residence permits.

Becoming a client of the assistance system is voluntary, and clients may withdraw from it whenever they wish. Clients of the assistance system for victims of human trafficking must not be assisted against their will, nor are they obliged to accept the services provided as support measures.

Checklist for explaining the assistance system:

- Briefly explain to the client what the assistance system is and who is eligible to apply for it.
- Tell the client what support measures they may be entitled to under the assistance system.
- If necessary, help the client to fill in the application.
- Take into account the client's safety and the urgency of the matter.
- Ask the client for their consent to submit the application and explain to them how their data will be processed by the assistance system (further details are available on the ihmiskauppa.fi website).

- Emphasise that seeking help through the assistance system is voluntary and highlight the rights of those identified as victims of human trafficking.
- Explain to the client how the application process works.
- Tell the client what will happen once the decision has been made.

Example 1: forced marriage, client with a registered municipality of residence

Amina, aged 21, has sought refuge in a women's shelter due to domestic violence. Amina has arrived in Finland a year earlier on a residence permit based on family ties. With Amina's consent, a social worker at the shelter submits an application to the assistance system, and an expert from the assistance system determines that Amina is a victim of a forced marriage. In addition to violence, the marriage has been characterised by controlling behaviour. For example, Amina has not been allowed to participate in services intended to promote integration. As Amina has a registered municipality of residence, the assistance system expert notifies the wellbeing services county in accordance with section 35 of the Social Welfare Act and requests that her service needs be assessed without delay. Based on the service needs assessment carried out by the wellbeing services county, a rented flat will be arranged for Amina in another town. The wellbeing services county will introduce Amina to the social services in her new town. The assistance system provides Amina with guidance and advice on how to submit a new application for a residence permit. The wellbeing services county refers Amina to services that support integration and assists her with government services, amongst other things.

Example 2: labour exploitation, undocumented client

Ahmed arrived in Finland in 2015. His asylum applications have been rejected on numerous occasions and he has remained in Finland undocumented. Ahmed starts working at a car wash. He sleeps in the back room of the car wash and works 16-hour days. He does not receive decent pay for the work, nor does he have any days off. Ahmed does not have the right to work, but his employer has told him that he could apply for an employee's residence permit. In the end, Ahmed decides to seek help and contacts the assistance system himself. The assistance system determines that Ahmed has fallen victim to human trafficking linked to forced labour. Ahmed does not have a registered municipality of residence, so the assistance system is responsible for organising support measures for him. A social worker from the assistance system coordinates Ahmed's client process based on a service needs assessment. Ahmed is provided with accommodation and granted a reception allowance on the grounds that he has no income and no means. In addition, he will be provided with essential health care services and given guidance and advice on matters relating to criminal law and residence permits. The assistance system grants Ahmed a three-month reconsideration period and helps him file a police report. The police launch a preliminary investigation into Ahmed's case. The assistance system helps Ahmed apply for a residence permit as a victim of human trafficking and organises support measures for him until he is granted a residence permit. Once Ahmed has a registered municipality of residence, he will be transferred under the jurisdiction of the wellbeing services county. This initiates cooperation between the assistance system and the wellbeing services county and transfers responsibility for assessing the need for support measures and social services to the wellbeing services county, which takes into account the specific needs of potential victims of human trafficking when assessing Ahmed's service needs.



7. Trauma-informed perspective on human trafficking

When working with people who have experienced serious abuse and traumatic events, it is important to understand what trauma means and the impact it has on an individual's life. In social welfare, clients must be embraced as a whole. When assessing a client's situation and the services they require, it is essential to understand their past experiences and how these have shaped their current circumstances. Understanding the symptoms of trauma helps the social worker approach the client's behaviour and actions from the perspective of trauma reactions. This also makes it easier for the social worker to respond to symptoms appropriately and with empathy, and to meet the client's actual needs. The effects of trauma are highly varied. If they are not recognised, the individual may not receive the help they need.

7.1 Definition of psychological trauma

Trauma is defined as an experience that exceeds an individual's ability to cope with a situation or to process the associated emotions and thoughts. Trauma is often caused by a life-threatening event, or an incident that is perceived as such. However, not all difficult experiences lead to trauma, which is why we speak of potentially traumatic events. However, there are events that leave a lasting impact on most people's mental wellbeing and are, thus, traumatic. These include, for example, war, serious physical or sexual violence, and torture.

Trauma can be a single event or a recurring experience that causes feelings of helplessness, insecurity and isolation. All traumatic experiences are unexpected and unpredictable and they are characterised by a feeling of being powerless to influence the course of one's life. Trauma can sever the connection to one's own inner resources, sense of security, and love.

Trauma also affects the body's mechanisms. Stress regulation can become disrupted, leaving the body in a constant state of alert. In such cases, people tend to react strongly to situations they perceive as threatening, even if there is no real danger. Interpreting social situations can also become unclear and lead to errors of judgment. For example, a person's ability to assess the safety of their circumstances may be impaired, which can lead to repeated dangerous and harmful relationships. Kindness can be interpreted as a threat, and encouragement to take responsibility can be seen as a rejection. A traumatised person may also start to avoid stressful situations.

Trauma affects an individual's cognitive, emotional and physical responses. It can change the way they see themselves, others, and the world. Many people who have experienced trauma feel worthless, damaged or permanently broken. Experiences like these can lead to social isolation, a tendency to avoid social interaction, and difficulties in managing daily life. Emotion regulation can also be challenging for a traumatised person – their emotions can be either overwhelmingly intense or completely numb. Feelings of anxiety, anger and depression can fluctuate unpredictably. Shame and guilt can be long-lasting, preventing a traumatised person from seeking help and making it difficult to interact with other people. Trauma can also lead to avoidant behaviour, in which a person goes to great lengths to avoid situations that remind them of past trauma. This can make it difficult, for example, to access social welfare and health services.

Typical symptoms of trauma include low spirits, anxiety, nightmares, irritability, avoidant behaviour, problems with concentration and memory, and dissociation. The body may react to trauma with insomnia and physical pain. These symptoms can combine with other risk factors and make the situation worse.

Trauma cannot be pushed into the background or forgotten, as it is a holistic experience that affects an individual's mental, physical and social wellbeing. Everyone needs support to recover from abuse, regardless of the severity of the trauma. Human trafficking must be understood as a traumatic experience, as it involves abuse of power, control, isolation, and psychological or physical violence. Even if the trauma is severe, it does not automatically mean a total loss of one's functional ability. The effects of trauma can manifest in many different ways, for example, as anxiety, numbness, shame, fear, or difficulty trusting other people.

The trauma caused by human trafficking differs from many other forms of trauma in that it does not stem from a single incident, but from repeated or ongoing events. The victim is often subject to strict control, and the abuser may be someone close to the victim. Human trafficking is often characterised by trauma bonding, social isolation, and a lack of support. Trauma bonding refers to a coping mechanism in which the victim becomes attached to the abusive relationship. This attachment develops when the abuser alternates between violence and fear and occasional kindness or care. This kind of back-and-forth relationship binds the victim to their abuser and makes it difficult to break free.

The trauma may be caused by a close relative or friend who acts in a deliberately harmful manner. That is why the psychological trauma associated with human trafficking is often interpersonal by nature; in other words, it stems from a relationship with another person. Such traumas have a wide range of consequences: a loss of trust, shame, guilt, conflicting feelings towards the abuser, distrust, long-lasting fear, and difficulties in social relationships. It can be difficult for the victim to break free from the abuser's control and feel a sense of agency in their life. Criminal proceedings may place an even greater burden on the victim.

Table 6: Summary of trauma symptoms

Symptom	Example
Loss of trust	Difficulty trusting the authorities, other people or oneself
Inconsistent story	Inconsistent or disjointed narrative
Difficulty in remembering and concentrating	Difficulty remembering everyday matters and concentrating on one thing for any length of time, as well as challenges in learning new things
Taking responsibility or hyper-independence	Refusing help even when in need, emphasising the ability to cope without support, overachieving in everyday matters, doing everything alone, downplaying their experiences, and carrying excessive responsibility for others
Difficulties with emotion regulation	Quick and intense emotional responses to even the slightest stimulus, uncontrollable emotional outbursts, emotional numbness, impulsiveness, and mood swings
Shame and guilt	Withdrawal in social situations, self-reproach, silence over what has happened, excusing the behaviour of the abuser
Avoidant behaviour	Avoiding situations and topics of conversation that remind the person of traumatic experiences
Dissociation and fluctuations in arousal	Inattentiveness, lapses in interaction and memory, restlessness, tension, fatigue, lethargy
Mood and anxiety symptoms	Depression, anxiety, irritability
Sleep and nightmares	Insomnia, nightmares, need to keep watch over one's surroundings, constant fatigue
Pain and physical reactions	Physical pain, tension, headaches, stomach problems
Addictions	Substance abuse, other addictions
Self-harm	Self-harm, suicidal thoughts, suicide plans or attempts, neglecting one's personal wellbeing, refusing help, exposing oneself to dangerous situations
Misinterpretation of facial expressions	Perceiving a neutral expression as hostile and perceiving friendliness as threatening
Slow process of building trust	Withdrawal, emotional distance in interactions, hesitation and caution, testing boundaries

7.2 Guest writer: Human trafficking as a traumatic experience

Ferdinand Garoff, Doctor of Psychology, Forensic Psychologist, Psychotherapist

Should human trafficking be viewed as a trauma?

Human trafficking is often a serious and complex traumatic experience. In most cases, victims have not been exposed to just a single traumatic event; rather, they have typically lived in a prolonged environment of fear and control. Such prolonged exposure to insecurity and abuse can lead to a loss of a sense of security and trust in other people.

Exploitation is particularly hurtful when it stems from the betrayal of someone close to you – a family member, partner, friend, or other trusted person. Examples of this include so-called “disciplinary trips” abroad or situations in which a child is sold into a forced marriage. In such cases, the child or young person feels let down by their parents, which erodes their trust in them and causes a deep moral conflict. In labour trafficking, too, victims are often lured to Finland with false promises of a better life, which is likely to foster deep mistrust.

How does trauma affect mental health, functional ability and social interaction?

Traumatic experiences leave their mark and are often reflected in a client’s behaviour when using social services. Post-traumatic stress disorder (PTSD) is significantly more common among victims of human trafficking than in the general population. It can manifest itself as intrusive memories, hyperarousal and hypervigilance, avoidant behaviour, and emotional numbness.

In practice, the disorder may be reflected in the client appearing distracted, being unable to concentrate on instructions, or failing to attend scheduled appointments. Such behaviour does not necessarily indicate a lack of willingness to cooperate, but may be the result of trauma symptoms or serve as a coping mechanism. Avoidance is a key symptom of PTSD. A client may avoid places, people or topics of conversation that remind them of difficult experiences.

The range of emotions experienced by a victim of human trafficking may make the situation even more difficult. Victims of human trafficking often experience intense feelings of shame, guilt and anger. They may also feel worthless or damaged, which can lead to social isolation. Discrimination and hostility experienced in Finland can increase victims’ mistrust of professionals and the assistance system. If a client feels that they have been rejected or discriminated against by the authorities, this mistrust may also extend to the social worker, making cooperation difficult.

What are the key points to bear in mind when addressing suspected human trafficking?

When there is a suspicion of human trafficking, it is important to restore the client’s sense of security. First, however, you must fulfil their basic needs and ensure their physical safety. This is often followed by a slow but essential process of building trust. Victims of human trafficking often fear the authorities because they have been threatened with deportation or may have been subjected to pressure from corrupt officials in their home country. In Finland, this has been evident among berry pickers, who have been reluctant to speak out about their working conditions for fear of losing the chance to earn even a small amount of money.

When speaking with a potential victim of human trafficking, it is advisable to avoid interrogative questioning. Instead, questions should be asked tactfully and respectfully. A victim of human trafficking may not necessarily recognise themselves as a victim. Many victims do not see themselves as victims of crime, but may view the abuse as a duty towards their family or as a necessary means of survival.

When it comes to children or young people, the situation calls for particular sensitivity. A victim's trust in adults may have been completely shattered if they have experienced violence and abuse at the hands of their parents or relatives. In such cases, the official must act as a safe adult who listens to them without judging.

Why is a trauma-informed approach needed when working with victims of human trafficking?

A trauma-informed approach does not mean that social welfare professionals should become trauma therapists. It is, rather, an approach through which a professional seeks to understand a client's behaviour. The trauma-informed approach helps the professional understand the prevalence and impact of traumatic experiences, as well as the signs and symptoms of trauma, and to apply this understanding in practice in order to avoid re-traumatising victims of human trafficking.

Thus, the aim is to recognise that a client's difficult or evasive behaviour may be the result of abuse or a coping mechanism. Young people who have fallen victim to human trafficking may, for example, test boundaries and the trustworthiness of adults. The trauma-informed approach can help interpret such behaviour as a consequence of insecurity.

A victim of human trafficking has lost control over their life and the power to make decisions. That is why it is important for clients to feel in control when using social services. This can be achieved by taking small steps: letting the client choose where they want to sit, offering them water, explaining clearly what will happen next, and asking for their consent before initiating any measures. The professional should also demonstrate their willingness to help the client and build trust by offering practical assistance, such as financial or social support. This can play a significant part in recovery, as it conveys a sense of care and restores the person's dignity.

Positive encounters with social services can serve as a healing experience for victims of human trafficking. By understanding the traumatic nature of the experience, recognising the client's specific needs and applying a trauma-informed approach, the client can be offered a path towards recovery and a fresh start in life.

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7.3 The effects of trauma in practical work

Traumatic experiences often manifest themselves in the client relationship, which is why building a sense of security and trust is essential. Being treated with respect can provide victims with positive experiences of dealing with the authorities, which can support their recovery. Victims of human trafficking may find it difficult to trust the authorities, other people, or even themselves. This is evident if for example, the client misses their appointments, questions the social worker's reliability, or keeps testing how the social worker reacts to their story. The client's account may be inconsistent, and they may find it difficult to concentrate, remember what has been discussed or keep track of scheduled appointments. On the one hand, it may be difficult for the client to manage their own affairs; on the other hand, the client may display a marked sense of independence and insist that they do not need any help. Furthermore, symptoms may manifest as addictions and as direct or indirect self-destructive behaviour.

Building trust can be a slow process, as feelings of insecurity and shame can affect the interaction. The victim's account may be fragmented, making it difficult to form a complete picture. The client may avoid certain topics of conversation, have difficulties remembering and concentrating, and experience fluctuations in arousal. Inattentiveness and a loss of focus are common symptoms, as is a disjointed account. Trauma also affects memory. All aspects of memory can be affected, manifesting as forgotten appointments, difficulty learning new things, and challenges in understanding the service system.

Traumatic experiences can also affect how a person interprets a helper's facial expressions. Neutral expressions may be interpreted as hostile, and excessive friendliness as threatening. In the past, friendliness may have been a cover for exploitation or deception. On the other hand, a distant professional may seem threatening. Clients monitor subtle facial expressions and gestures because they have learnt to be on their guard against potential threats. Micro-expressions refer to extremely brief, often involuntary facial expressions that last only a fraction of a second. They reveal emotions that a person does not have the time or the ability to hide. Micro-expressions can, for example, reveal a very brief flash of fear, anger or sadness before a consciously controlled expression returns to the face.

It is important to build a sense of security so that the client can let down their guard and work within the client's window of tolerance (see Figure 2).

A safe and reassuring presence is generally open and approachable, indicating a genuine interest in the client. Do not hide behind a computer screen but engage with the client directly. A soft, rather expressionless face, open and relaxed arms, and a calm manner of speaking convey a sense of security. There may be some cultural differences in how one interprets a person's demeanour, so it is worth remembering that authenticity is the most important thing, as it is the best way to convey a sense of security.

In social work, it is important to recognise symptoms of trauma as part of a client's lived experience, rather than merely as psychiatric diagnoses. The social worker's role is to create a safe environment in which the client can be present with their feelings without fear of being judged. This requires a calm, predictable and empathetic approach, in which the social worker takes the client's experiences seriously and supports their agency.

7.3.1 Difficulty regulating arousal following trauma

Arousal refers to an individual's ability to regulate their alertness and activity level in relation to their environment and the situations they face. When arousal is at an appropriate level and suited to the situation, it enables the person to function effectively and, for example, concentrate, learn new things, and relax. However, trauma impairs this regulatory capacity. Prolonged stress or a strong sense of insecurity can lead to either hyperarousal or hypoarousal. A traumatised person's level of arousal may be constantly unbalanced or fluctuate dramatically between hyperarousal and hypoarousal.

Hyperarousal is a state in which the body and mind are stuck in a “fight-or-flight” mode. It can manifest as restlessness, impulsiveness, nervousness, panic attacks, and difficulty concentrating. Hypoarousal, on the other hand, is a state of lethargy that can manifest as inattentiveness, sluggishness, brain fog, drowsiness, and an inability to function. Both states make engaging with other people and making decisions more difficult.

Trauma can manifest as hypoarousal, causing a person to withdraw, freeze or numb. A client may feel disconnected from their own emotions or body and find it difficult to connect with others or recognise their own feelings. In relationships, they may feel lonely and isolated and have difficulty setting boundaries.

In social work, it is important to recognise a client’s state of arousal and know how to respond to it, so that they can be offered appropriate support with a genuine impact. If the client’s state of arousal is not considered, they could, for example, become overly excited during the meeting and be unable to concentrate and retain what was discussed. In such cases, the impact of the work may be minimal. Recognising the client’s state of arousal is also an essential in the stabilising approach. For more information, see section 3.1. When a social worker is carrying out a service needs assessment or otherwise working with a client, they must constantly observe the client’s physical appearance, rhythm of speech, facial expressions and ability to concentrate. If the client seems overly excited, it may be necessary to calm the situation down, for example, by taking breaks in the conversation, moving on to lighter topics or allowing them to move around in the room. In cases of hypoarousal, the social worker can gently engage the client, for example, through questions, visual aids or simple exercises. Whether dealing with hyperarousal or hypoarousal, the key is to try to bring the client back to the present moment. The client may not necessarily be aware of their own state of arousal, in which case it is up to the social worker to draw their attention to the present moment. The social worker can gently help the client by making them aware of their unusual behaviour and reminding them of the time, place, and safe nature of the current situation. Utilising the senses is an effective approach: what does the client hear, see, smell, feel or taste? The social worker can help the client relax by doing various grounding exercises, such as breathing exercises or the so-called butterfly hug. Instructions for these exercises can be found in the appendices.

A clear meeting structure, predictability, and respect for the client’s pace also help regulate their arousal. When the client feels safe and is in an optimal state of arousal, they are better able to participate in the conversation, understand their own situation, make decisions and remember the matters discussed during appointments. Key to stress relief is fostering a sense of security and showing empathy. When stress is not dismissed but is addressed with empathy, the client can begin to reconnect with themselves and their sense of agency.

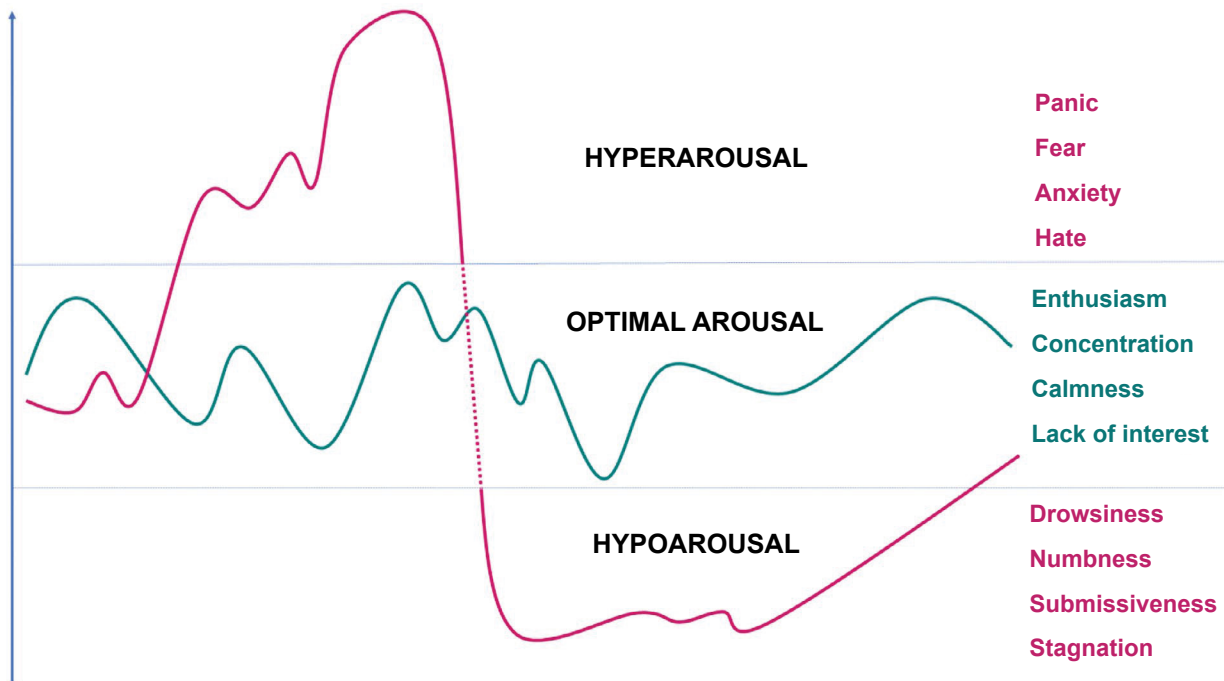


Figure 2: Window of tolerance. Source: Serene, 2025

7.3.2 Regulating arousal during meetings

There are many ways to help the client regulate their arousal during meetings. Taking short breaks during the conversation helps the client to recharge and cope better. Scheduling meetings so that they are short and frequent rather than long and infrequent helps maintain optimal arousal and reduces stress. Starting and ending each meeting with light conversation, e.g. small talk, allows the client to ease into the topic and move away from it smoothly, which helps stabilise their level of arousal. At the end of each meeting, it is a good idea to summarise the points agreed upon and clearly go over what the client and the social worker need to do before the next meeting. It is a good idea to ask the client to repeat the agreed points so that you can both make sure you are on the same page regarding what has been agreed.

Visual aids, such as timelines, cards or drawings, can help the client gain a better understanding of the situation. This also means that things are not left entirely up to the client's memory. Articulating the client's state of arousal, for example by saying, "I can see that you might be finding it difficult to concentrate right now – would you like to take a short break?", can help the client recognise their own state of arousal and make appropriate decisions. Taking the client's state of mind into account is not merely a technical skill, but part of an empathetic and client-centred approach that supports recovery and helps build a collaborative relationship.

Summary

- Breaks: During the meeting, take short breaks to chat about other things or get up and stretch your legs together. Sometimes a client needs to go outside for a bit.
- Meeting schedule: It is better to hold several short meetings than a few long ones.
- A gentle start and finish: Start and end each meeting by chatting about lighter topics. At the end, summarise clearly what has been agreed and plan the next meeting.
- Visual tools: You can use timelines, cards, drawings, or sticky notes to help the client make sense of the situation.
- Articulating the client's state of arousal: If necessary, tell the client about your observations: "I can see you might be finding it hard to concentrate right now – would you like to take a short break?"

7.3.3 Signs of dissociation and ways to address them

Dissociation is a protective response of the mind that can be triggered by a traumatic experience. Dissociation during meetings is a form of disruption in cooperation. It refers to an individual's momentary detachment from their experience, body or surroundings. You can gently guide a dissociating client back to the present moment, for example by focusing on their senses. In the context of social work, dissociation may manifest itself in, for example, the client's detached demeanour, disjointed speech, and a loss of sense of time. The client may give the impression that they are not fully present in the situation, even though they are physically there. Their gaze may wander, their speech may become illogical, or they may forget what was just said. Their body language may also change: stiffening, shallow breathing or avoiding eye contact can be signs of dissociation.

Dissociation can be mild and temporary, or severe and debilitating. It is a common reaction, particularly when a client faces situations that resemble a previous traumatic experience or trigger strong emotions. During the meetings, dissociation may be triggered, for example, when difficult topics such as abuse, violence or insecurity are brought up.

When the social worker notices signs of dissociation or inattentiveness in the client, it is important to be calm and maintain a safe environment. When a dissociative episode occurs, the social worker should calm the situation down and try to help the client reconnect with the present moment. This can be achieved through grounding techniques, such as asking the client to name objects in the room, guiding the client to breathe deeply, or using "here and now" exercises. It is important that the social worker remains calm and predictable, avoids sudden movements and speaks clearly.

Dissociation is not an obstacle to working, but it requires the social worker to be particularly sensitive, calm and able to adapt their approach to the client's condition. When dissociation is recognised and addressed appropriately, the social worker can help strengthen the client's sense of security and support their recovery.

Dissociation may also be accompanied by hypoarousal. In such cases, dissociation may manifest itself as staring into space, a lack of emotion, or an altered sense of reality. Dissociation is a coping mechanism in which a person detaches from their emotions and body. It can manifest as brain fog, a loss of sense of time, or a distortion of reality. Everyone is capable of dissociation, but trauma can turn dissociation into an uncontrollable and prolonged condition. It is not a disorder but a coping mechanism – a normal reaction to an abnormal situation, which can be triggered by traumatic memories. During severe dissociation, a person is unable to form a coherent picture of their feelings, thoughts and the present moment, which can lead to feelings of unreality or detachment. If a person seems to drift off during a meeting, there is no need to panic; simply bring them back to the present moment. For tools to address dissociation during a meeting, see the appendices.

7.4 Trauma-informed engagement

As described earlier, experiences of human trafficking are often traumatic and can leave lasting scars. Traumatization manifests itself in many ways, both in the client's private life and, for example, in their dealings with the authorities. It may also impair the client's ability and opportunities to access services. For this reason, when working with victims of human trafficking, it is always advisable to adopt a trauma-informed approach, even if it is not known whether the client in question has experienced trauma.

A trauma-informed approach means engaging with the client in a way that takes into account how their past experiences affect their current situation, their ability to function and their interactions with others. It is not a form of therapy but an approach centred on strengthening the client's sense of security, identifying their strengths and treating them with respect. The social worker must understand the effects of violence, abuse and trauma and minimise the risk of re-traumatization. This requires the exchange of essential information between the organisations working with the victim. Trauma-informed social work is based on an understanding of how trauma affects a person as a whole – their body, mind, behaviour and interactions. The services provided must be safe and inspire confidence, respect the client's right to choose, and support recovery without the risk of re-traumatization.

When working with victims of human trafficking, a trauma-informed approach is particularly important, as traumatic experiences can have a profound impact on trust, arousal and the ability to understand one's own situation. The main aim is for the client to feel secure enough to be able to trust the social worker and commit to the work.

In a trauma-informed approach, the social worker aims to create a predictable, calm and clear environment for interaction. Hyperarousal, dissociation, withdrawal, or other reactions on the part of the client must not be interpreted as a lack of willingness to cooperate, but understood as part of the after-effects of a traumatic experience. Missing appointments does not necessarily mean a lack of willingness to cooperate; rather, it may be a sign that the client does not trust the social worker. In such cases, it is important to be persistent and invite the client to further appointments or keep in touch with them in other ways.

The social worker takes note of the client's state of arousal, takes breaks where necessary and ensures that the conversation proceeds at the client's pace. It is also essential that the client is not judged on the basis of their experiences, but is treated as an individual who has the right to be heard and understood. It is important to foster hope and to identify and highlight the client's strengths. A trauma-informed approach supports the client's agency and helps them rebuild trust both in themselves and in the wider society. It also enables timely referral to mental health services, when needed.

A trauma-informed approach does not simply mean having knowledge about trauma, but also the ability to engage with people in an empathetic and safe manner. The work should emphasise choice, supporting autonomy and strengthening the client's coping mechanisms. Understanding the effects of trauma helps the social worker approach the difficulties experienced by the client as part of a wider network of causality, in which psychological, social and biological factors are intertwined.

7.5 Social worker's wellbeing

The social worker's personal well-being and ability to cope are integral to trauma-informed practice and have a direct impact on their ability to engage with the client. Clients' accounts of traumatic experiences can lead to a feeling of hopelessness, exhaustion, cynicism, a diminished capacity for empathy, and even addiction.

Vicarious traumatisation refers to the process whereby clients' traumatic experiences are transferred to the worker, causing psychological distress. The symptoms can be wide-ranging: difficulty concentrating, depression, withdrawal, cynicism, irritability, and distressing thoughts, as well as physical symptoms such as pain, tension and insomnia. Vicarious traumatisation often develops gradually, but it can also be triggered by an individual incident. Compassion stress and fatigue are similar phenomena, in which the client's difficult experiences also take their toll on the social worker. Compassion stress is a normal reaction to abnormal situations, but if the stress continues for a long time or cannot be relieved, it can lead to burnout. Compassion fatigue can manifest itself, for example, as insomnia, anxiety, and various physical symptoms. These symptoms are not diagnoses, but work-related reactions that can be managed.

Vicarious traumatisation can be prevented. It is important for social workers to look after their wellbeing by taking breaks, ensuring their recovery from work, laughing with colleagues, and switching off from work during their free time. You can discuss stressful experiences with a work colleague, supervisor or occupational health providers. Adequate support at work, regular training, and job control are key to prevention. Compassion fatigue can also be prevented by fostering a culture of open dialogue, where people can talk about their workload without being seen as weak. Teamwork and working in pairs also help social workers cope, as does the transfer of clients to another worker, where necessary. It is worth remembering that “good enough” suffices, and that the social worker can only do what is possible with the resources available. On the other hand, bringing the client’s strengths to the fore can, at its best, also strengthen the social worker’s own resources. This phenomenon is known as vicarious resilience.

Job control is an essential tool for managing stress and professional development. It provides a safe space to explore the feelings and thoughts that work brings up and to develop working methods. Job control may be provided for individuals or groups, and the cost of the service must be covered by the employer. It is important for the work advisor to be familiar with the specific issues involved in the work, so that their advice supports wellbeing and improves the quality of work. Job control is particularly important in demanding work with clients who have suffered multiple traumas, such as victims of human trafficking.

Summary: How do I take the impact of trauma into account in practice?

The trauma caused by human trafficking and its interaction with other risk factors can be reflected in a variety of reactions and symptoms. The table below (Table 7) illustrates how these symptoms manifest themselves in practical client work, using examples, and provides specific practical advice for social workers.

Table 7: Trauma symptoms in practice

Symptom or phenomenon	Signs	Practical tips for workers
Lack of trust	Missing appointments Testing the social worker's reactions Inconsistent narrative	Be consistent and predictable. Only promise what you can keep.
Difficulties concentrating and remembering	Forgetting scheduled appointments Difficulty remembering what has been discussed Disjointed account	Make use of visual aids. Use colourful sticky notes to help the client remember their appointments. Go over things again and again. Make sure you are on the same page regarding the plan.
Challenges of emotion regulation	Intense or numb emotions Anxiety, anger, freezing	Put the experience into words with the client. Allow the client express their emotions freely. Validate the experience.
Hyperarousal	Impulsiveness, restlessness Nervousness, panic symptoms Difficulty concentrating	Create a calm and predictable atmosphere. Do not rush. Encourage the client to do breathing exercises or use other calming techniques.
Hypoarousal	Withdrawal, freezing Numbness, inattentiveness	Give them time. Avoid putting pressure on them. Help build a connection one small step at a time and empower the client.
People-pleasing	Blind acceptance Failure to express their own opinions Avoiding conflicts	Ask open-ended questions. Give them options to choose from.
Physical symptoms	Sleep problems Pain Physical tension	Take note of the symptoms and ask how they affect the client's daily life. Refer them to health care services, if necessary.
Self-destructive behaviour or addiction	Self-harm, suicidal thoughts and plans, or a suicide attempt Avoiding treatment, putting themselves in dangerous situations, neglecting their wellbeing (e.g. diet, sleep), overworking Substance abuse or other addictions	Ask about it directly. If necessary, carry out a risk assessment and refer the person to the appropriate support services.
Misinterpretations	Neutral expressions are perceived as hostile Kindness is perceived as threatening	Pay attention to your own demeanour. Be open and calm. Put your intentions into words.

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8. Guest writer: Specificities of working with children and young people

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Human trafficking is a crime that robs people of their freedom and, often, their hope for the future. When the victim is a parent, their children often bear the feelings of fear, shame and insecurity too. These children are easily overlooked, even though their experiences can be just as traumatic as those of a direct victim.

A child living in the shadow of human trafficking often learns to stay quiet. They may fear the authorities and feel a sense of guilt or shame that should not be borne by any child. Typical consequences of trauma include, for example, anxiety, sleep and behavioural disorders, various delays in development and self-regulation skills, as well as attachment issues.

Working with children and young people builds on the professional skills you already possess. You can also improve your interpersonal skills. It all comes down to your professional ethics and competence. For someone who has experienced traumatic events, a calm, safe encounter can be a particularly important healing experience. In every interaction, it is advisable to bear the following points in mind:

- Create a sense of security. The child needs to know that their family is getting help. Tell the child who you are and what the purpose of the meeting is.
- Set the boundaries and roles. Tell the child what your role is and what you can offer them. Do not make promises you cannot keep.
- Listen to the child and validate their feelings. Listen and talk without putting pressure on them: the child will only share what they feel safe sharing. Encourage the child to ask questions. Do not rush the process.
- Stay focused on the present moment. Focus on what can be done right now.
- Take the family's language and culture into account. Using an interpreter is not merely a technical solution, but a tool for building trust.
- Take a trauma-informed approach. Bear in mind that a child's reactions may be coping mechanisms.

The risk of exploitation and human trafficking increases if a child or young person has previously experienced physical or emotional abuse or neglect, or if their parent has an untreated substance abuse problem or a serious mental health condition. Furthermore, the risk increases if the child or young person lives in a violent environment or experiences long-term poverty. Experiences of exclusion can intensify the desire to belong to a community, or to matter to someone. Untreated trauma symptoms can make a person enter into relationships that repeat patterns of interaction that are harmful to the person themselves or to others. When a child has faced human cruelty, they can also suffer moral harm. In such cases, their view of people, the world, and the meaning of life may become distorted. A victim of oppression can become an oppressor and abuser if they have not been able to process their past experiences. Children and young people may also become re-traumatised. It is worth bearing this in mind if a child or young person's symptoms worsen or change.

Although the shadow of human trafficking is long, timely support can break the cycle of trauma. Every encounter is an opportunity to restore a child's belief that the world can be a safe place. Our role is to address even difficult issues and to see the child as an individual who has the right to grow and recover.

A trauma-informed approach to working with children and families

Serious trauma experienced by one family member can affect the whole family and, consequently, a child's growth, development and symptoms. Whether a family chooses to talk about or remain silent regarding difficult experiences also influences the impact these have on children. Often, a child's account of traumatic experiences can take a back seat to that of a traumatised parent. That is why it is important that the child is also listened to.

A parent's prolonged depression, physical pain, anxiety and feelings of hopelessness affect a child's development. Children naturally observe and follow their parents' behaviour and actions. Sometimes a child may try to help and cheer up their parent by being overly cheerful and helpful, thereby also seeking the parent's approval. A child may also become aggressive and demanding, or exhibit physical and psychological symptoms such as tension, misbehaviour, bedwetting, soiling, refusal to eat, and non-verbality.

A child may also have experienced traumatic events themselves. Symptoms of trauma in children can be more difficult to recognise than in adults, as they manifest themselves differently across different age groups. Children who have survived traumatic experiences are also generally unaware that they might be exhibiting symptoms of trauma. It is important to bear in mind that misbehaviour may be caused by trauma-related responses and symptoms. Someone needs to notice the symptoms so that the child's symptoms can be interpreted correctly and, if necessary, the child can be referred for assessment and treatment.

Good parenting skills, a supportive environment, and restorative experiences can protect a child from the effects of trauma. Similarly, as a child grows and strives to understand their traumatic experience, this development can improve the child's and their family's wellbeing.

A model developed by the Substance Abuse and Mental Health Services Administration (SAMHSA), which operates under the U.S. Department of Health and Human Services, is often used to help understand the trauma-informed approach. The aim of the model is to identify symptoms and phenomena associated with traumatisation, and to raise awareness of the effects of trauma and the possibilities for recovery. This information is put to use in day-to-day interactions, ensuring that the work supports the recovery of both the individual and the community. Proactive and preventive measures are designed to prevent re-traumatisation. The basic principle of the model is that each “R” is realised at the level of the individual, the group (such as a family or school class) and the organisation. The implementation of the trauma-informed approach must be supported in all activities and at all levels of the organisation.

Recognition: Recognise any signs of trauma in a child or young person’s behaviour and demeanour (e.g. withdrawal, insomnia).

Realisation: Bear in mind that trauma can affect, among other things, emotion regulation, concentration, and trust.

Response: Help create predictable and safe daily routines.

Resistance of re-traumatisation: Avoid situations that might remind the child or young person of past trauma (e.g. loud noises, powerlessness).

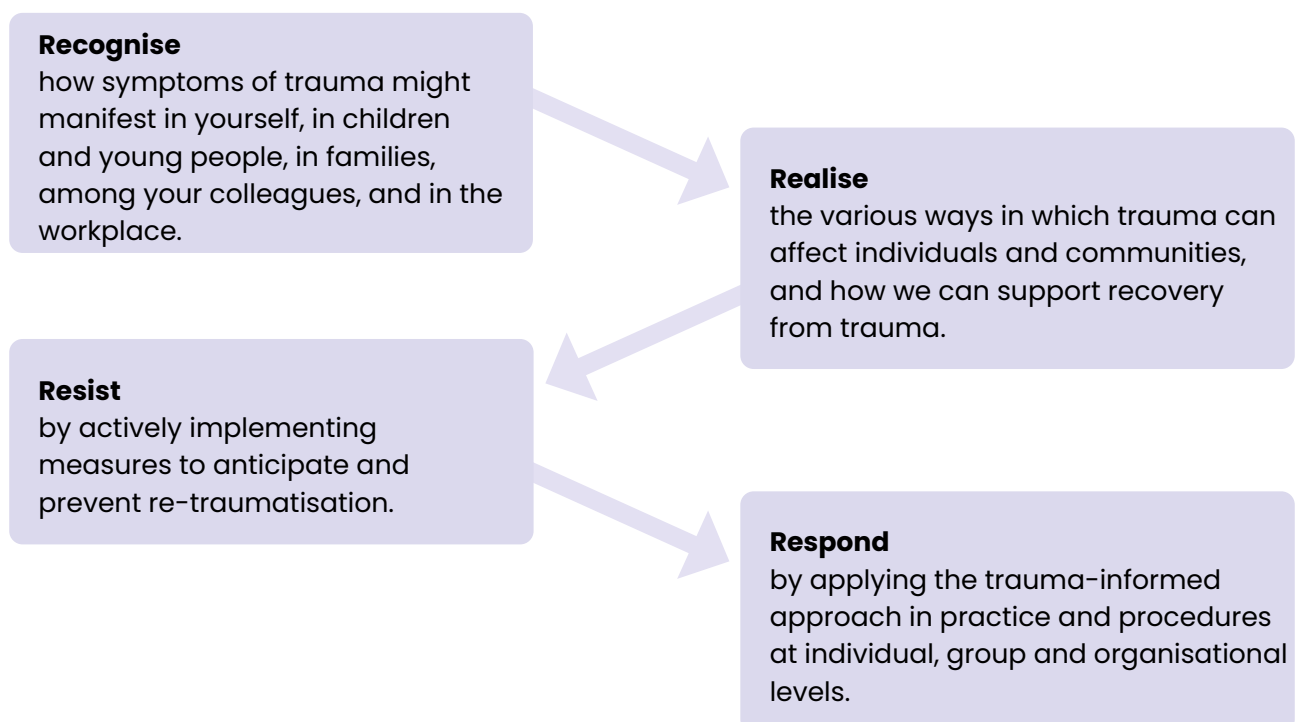


Figure 3: The Four Rs model (Substance Abuse and Mental Health Services Administration 2014).

The key is to be aware of the possibility of trauma. In such cases, the other person's misbehaviour may become easier to understand. When you understand another person's behaviour and actions from the perspective of trauma responses or symptoms, it is much easier to respond appropriately. You may also gain a better understanding of your own reactions or the challenges you face when dealing with a particular situation or client, which can help you approach your work and interactions with greater flexibility.

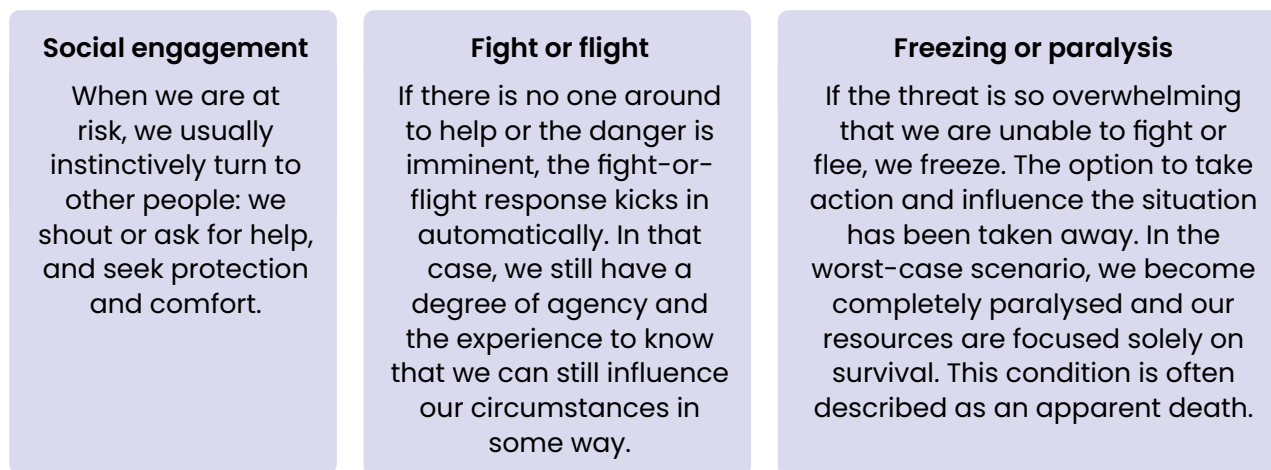


Figure 4: An overview of defence mechanisms and trauma responses.

Common human defence mechanisms and trauma responses can be categorised in a simplified manner, for example, as shown in the figure above. The figure can also be used as a tool for psychoeducation. It can help a child understand what typically happens to people in dangerous situations. The same responses can also be triggered when a child faces things and situations that remind them of the traumatic event, or with nightmares related to it. You can read more about the symptoms of post-traumatic stress disorder and the specific characteristics of trauma in young children in, for example, the Current Care Guidelines (see Literature and materials).

Knowledge, foresight and openness enhance agency and a sense of security. Children and families should be provided with information about trauma and its effects in a way they can understand, and on a regular basis. It is essential to emphasise the perspective of strengths and hope. Children and families should be given a say and a choice in matters where this is possible. It is important to provide several opportunities for them to be heard and to repeatedly convey that their opinions matter – even when it is necessary to act contrary to the child's and the family's own wishes and views. Trust and the opportunity to make choices increase the willingness to commit to the support provided and any treatment processes.

In practice, a lack of communication or silence can also pose a challenge. A child or family does not always share the whole story, or may describe events in an illogical, contradictory or disjointed manner, making it difficult to identify what is relevant or what actually happened, to whom and when. Feelings of fear, guilt and shame can influence the account. Any trauma experienced may also have a significant impact on memory and the ability to recount events. Measures that enhance a sense of security, reduce stress levels and support the regulation of arousal facilitate the discussion.

Creating a safe and predictable atmosphere

- Establish a clear meeting structure.
- Hold meetings in a quiet room (always use the same one).
- Use an interpreter if necessary and take into account the client's preferences regarding the interpreter.
- Remember to introduce the interpreter and note their duty of confidentiality. Ensure that the interpreter and the client understand each other.
- Go over who are present and why. Tell them how long the meeting will last.
- Let them know in advance what is going to happen next.
- Please note the use of time: "We've still got 10 minutes left. Is there anything else important to note, or do you have any questions?"
- To finish, summarise the meeting and the points agreed upon, thank and praise the child, and explain what will happen next.
 - "Thank you for letting me get to know you. You're really good at drawing."
 - "Let's have a quick chat with Mum and agree on when we'll meet next."
 - Before ending the meeting, ask the child if there is anything else they would like to ask or tell you, and make sure they feel safe.
 - "Is there anything I haven't thought to ask you that you'd still like to tell me?"
 - "Are you feeling OK enough to wrap things up now?"
 - "Now, you can give your body a little shake and a hug, and take a couple of deep breaths."
- Arrange a follow-up appointment together with the child and their parent.
- Be present and calm.
- Always make sure you set aside at least a little time to relax before your next meeting. A calm demeanour conveys the client that the situation is under control.
- Take care of your "emotional hygiene": do not carry emotional baggage to the next meeting.
- On the other hand, transparency, openness and setting an example can also be very important: "I'm sorry I was a bit rushed when I met you. Let's take a couple of deep breaths together first, and only then shall we begin." It is these little moments that can build trust.

Recognise both your own and the other person's feelings and state of mind. A lot happens in social interactions. From time to time, it is good to consciously recognise what you and the other person are feeling. When we feel strong emotions, our ability to think logically and engage in constructive dialogue is temporarily diminished. To this end, various mood or arousal level indicators can be a useful tool. During the meeting, we can help the child regulate their emotions and articulate our own observations.

- "I can tell you've become restless / you've drifted off somewhere far away / you are starting to get a bit upset. How are you feeling right now? Shall we get up for a moment and push against the wall together / do some stretching / hug a pillow for a bit?"
- Start with small, neutral questions. For example, ask: "How did you get here?" or "How has your day been?"
- Give them options to choose from.
- Let the client choose where to sit.
- Ask the client if they have any expectations regarding the meeting.
- Explain that the client can ask to take a break, for example by raising their hand or using another signal. Picture cards, traffic lights or an emotion chart on display can help with communication.
- The ability to choose reinforces the client's sense of control and agency. It is also important to gradually strengthen the client's sense of agency in their own life: what needs to change, how can I make this change happen, and who could support me in this?
- Use stabilising methods: offer the client some water or pastilles.
- Try simple breathing exercises: "Let's take three slow inhales and exhales together."
- Encourage them to name their bodily sensations: "Can you tell me how your legs feel?"
- Make use of drawing, play and creative methods. Drawing, modelling with play dough, and playing in a sandpit are safe ways to express feelings without words.
- Explain to the child their rights: "You have the right to feel safe."
- Use simple language, examples and visual aids, and repeat information at appropriate moments during subsequent meetings as well. Tell the child that you are bound by professional secrecy: "I am bound by professional secrecy. This means that I am not allowed to discuss your personal matters with others without your permission, except in special circumstances, such as when I am concerned that your health or safety is at risk. And even in such situations, I'll tell you that I have to report what you have told me to child protection services or your parents so that we can protect your wellbeing."
- Use various educational materials as aids, such as cards explaining children's rights and the materials for the Children's Rights Week (see Literature and materials).

- Provide psychoeducation: explain to the child, at an appropriate time, that people who have been through difficult experiences may have various symptoms and reactions, which can be treated.

Assessing and providing comprehensive support for the wellbeing of children and young people

Particularly hurtful and complex situations are those in which the child themselves or their parents are victims of human trafficking. In such situations, safeguarding the child's rights requires a comprehensive, multi-professional and child-centred approach.

The support must be based on the UN Convention on the Rights of the Child and the Finnish Child Welfare Act. The best interests of the child are the overriding priority and, therefore, the child's safety, wellbeing and development must be taken into account in every decision. This principle guides all service providers and requires that the child's rights are upheld regardless of their own status or that of their parents.

If a victim of human trafficking has underage children, the children's situation, any need for support and their vulnerability must be assessed systematically and on a case-by-case basis once the parent has been identified as a victim. The assessment is always carried out after meeting the child in person, not solely on the basis of information provided by the parent. Where necessary, the social worker must consult the child welfare authority to assess the child's situation and file a child welfare notification if the child's circumstances give cause for concern. However, if the child welfare authority judges that there is no need for child welfare measures, it is of the utmost importance to ensure that the child's need for support is not overlooked by other social services.

A separate assessment of service needs should be carried out for a child of a victim of human trafficking, regardless of which social services the family is registered with. The purpose of assessing the child's personal service needs is to understand the child's perspective on the family's situation. A structured questionnaire should be used to ensure that the child's situation is assessed in a systematic and comprehensive manner. The questionnaire not only enables the monitoring of any changes in the child's circumstances at different times, but also ensures that data collection does not rely on the social worker's approach. The structured questionnaire also neutralises the questions: they do not directly concern the child's family, but are presented as general themes relating to life circumstances. In social work, the focus tends to be on the problems faced by the client and their family and on resolving them. It is therefore important to take the family's strengths into account in the questionnaire.

The following aspects should be included in the assessment of a child's service needs:

- Safety, including digital safety
- Physical health
- Mental health and the need for long-term rehabilitation

- Social relationships
- School attendance
- Financial situation and need for support
- Hobbies and leisure
- Substance use and risky behaviour
- Current cooperation network or the establishment of one

Many of the aspects covered in the questionnaire concern the whole family, but when interacting with a child, it is important to focus specifically on the child's perspective as an individual. Children have their own needs and experiences, which may differ significantly from those of their parents. For example, when assessing safety factors, it is particularly important to take digital safety into account in the case of children and young people. One way to explore these topics is to ask the child about their typical week and everyday life: what they do and with whom, what they like, whether they have friends, whether their parents know their friends, whether they are allowed or able to go out without supervision, whether they have their own money, what they do with the money, etc. It is also important to bear in mind the possibility of psychological coercion and to assess the extent to which the child's freedoms are being restricted.

A child's symptoms are of particular concern if they cause significant problems in everyday life, such as at school, in friendships, or in leisure activities. Particular attention should be paid to repeated aggression, self-harm or harm to others, marked social withdrawal, prolonged mood swings, suicidal thoughts, severe sleep problems, eating disorders, or persistent problems at school.

Give the child some time and space to talk about their family situation. Matters concerning a child should not be discussed and resolved solely through their parent. It is the adult's responsibility to broach difficult subjects and provide the child with the space and the words to process them. When discussing difficult and sensitive topics with a child, such as human trafficking or sexual abuse, the language used should be safe, clear and appropriate to the child's level of development. The language used should be plain, concrete and neutral, and terms should always be explained.

It is advisable to use words that the child understands. Example:

"If someone forces you to do something you don't want to do, it is not right."

Children should be encouraged to speak and ask questions. It is important to make room for the child and their questions. Articulating their feelings helps the child understand their experiences. You can help the child express their feelings in words. For example:

"It may feel confusing or scary. It's perfectly fine to feel that way."

It is best to keep the conversation at a general level until you know whether the child is ready to talk about their experience. For example:

“If anyone touches you in a way that feels wrong, tell a trusted adult about it straight away.”

The adults around the child should emphasise the child’s safety and rights:

“You have the right to feel safe. No one is allowed to hurt you or force you to do anything.”

Younger children may find it easier to understand the concept with the help of pictures or stories.

Safeguarding the child’s best interests and identifying their needs often requires multi-professional cooperation that transcends organisational boundaries. If a family has a history of human trafficking, there are often several different organisations involved in providing support. When a family is supported by several support organisations and professionals, the importance of effective networking and the coordination of services becomes all the more apparent. It is of the utmost importance that the responsibilities, roles and services of all parties involved are clear and known to everyone. The situation can also be confusing or even chaotic from the family’s point of view if there are lots of people involved without a clear common objective. Effective coordination relies on a so-called “case manager” – a designated person who has overall responsibility for collaboration and ensures that the child and their family receive the support they need. When a client is transferred between services, for example to another municipality or another service provider, it is important to ensure the continuity of services and the transfer of information to the new service providers. The transfer of services should always be carried out by providing support and “accompanying” the client to the new service.

Aspects of supporting a child client:

Safe accommodation: A domestic environment, or emergency accommodation if the child’s safety is at risk. Consider whether the child needs a personal safety plan.

Do not forget about digital safety!

Psychosocial support: Trauma and crisis support for both children and parents. Also assess whether the family needs practical support, such as domestic help, childcare assistance, etc.

Support for children in building a meaningful daily life: It is widely recognised that children’s leisure activities play a significant role in their social and physical wellbeing, as well as in preventing social exclusion and mental health problems.

Ensuring school attendance: Going to school and learning are central to a child’s daily life and recovery. Initiate potential collaboration with the child’s school or early childhood education provider. Organise a network meeting and work with the family to plan what kind of support will be provided for the child and the family (e.g. school psychologist, family counselling service).

Psychoeducation, sex education and sexual counselling: Children and young people must be informed of their rights and the relevant legislation in an age-appropriate and professional manner. Exploitation and human trafficking must also be addressed from the perspective of prevention. Sex education and counselling should also be provided as a preventive measure, as previous experiences of abuse or violence, and difficulties in setting personal boundaries, increase vulnerability to abuse.

Show an interest in the child and ask them about their culture and their family's customs. Make sure the client understands the service path.

Situations are often complex, as the child or young person may be a victim of human trafficking themselves or they may have witnessed the exploitation of their parent or been involved in facilitating the trafficking of other children. This increases the risk of trauma and can have a long-lasting impact on the child's development. That is why long-term psychosocial support and follow-up are needed. It should also be noted that building a child's trust takes time and requires consistent, safe interactions.

Parents who have fallen victim to human trafficking should be offered parenting support and opportunities to process their experiences. It is well known that trauma can have a significant impact on parenting in many ways, often impairing the ability to regulate emotions, form secure relationships and provide consistent care for a child. Children's symptoms may be a reaction to their own difficult emotions and memories, to their parents' mood and behaviour, or to the atmosphere at home and, possibly, the family's difficult financial situation. Stability in daily life and referral to treatment, where necessary, can improve the chances of recovery. However, people also have the ability to recover, and some even experience what is known as post-traumatic growth.

Supporting a child or young person in situations involving human trafficking is not a one-off measure, but a comprehensive process that requires a clear division of responsibilities, close cooperation, and a child-centred approach. This is the only way to ensure that the child's rights are upheld and their future is safeguarded. This is a matter of both a legal obligation and an ethical responsibility. No professional should be left to consider families' circumstances and how to help them on their own; instead, multi-professional and often cross-sector cooperation is required. Supervisory support is important, as is the opportunity for consultation.

Situations that a social worker or counsellor may encounter in their work with clients:

What should I do if a child does not want to be separated from their parent during the meeting?

Start the meeting together with the parent present. Tell the child, together with the parent, that the adults are going to another room to discuss adult matters, but that the parent will be right next door. Show the child the room the parent is going into. Take the child to a room next to the room the parent will be waiting in. Keep the door open or ajar if possible. Think of some fun activities for the child to do on their own, away from their parent, for example, playing, drawing, colouring, and

playing with stickers. Do not force the child to be separated from their parent, and allow the child to go see their parent even during the meeting.

What should I do if a child reacts strongly to closed doors or locked rooms?

Where possible, keep the door open or ajar and let the child choose where to sit. Tell the child in advance who will be in the room with them and how long the meeting will last. Where possible, use a room with a window. Place safety items such as pillows, blankets or plushies into the room in advance.

What should I do if a child starts talking about traumatic experiences while playing?

Do not steer the conversation away from the topic; let the child talk about their experiences in their own way. Record your observations and assess what further action is required. Reassure the child that they are being listened to and that what they have to say is important. Do not ask for specific details. Praise the child for telling you something important.

What should I do if a child tells me they have a secret they must not tell anyone?

Thank the child for telling you the secret. Tell them that it is safe to share the secret and that it is the adults' job to protect children. Do not promise not to tell the secret anyone else. If possible, ask the child's parent for "permission" for telling the secret.

What should I do when a child acts as an interpreter for their parent and takes on an adult role?

A child should not have to act as an interpreter for their parent. Gently bring the situation to a halt and thank the child for their help. Make it clear that it is not the child's job to act as an interpreter or to shoulder an adult's responsibilities. Always use an official interpreter when necessary.

What should I do if a parent does not want their child to speak to a social worker alone?

Calmly explain to the parent that the child has the right to be heard and to share their thoughts and experiences without the parent being present. You could arrange to meet the child briefly and explain that the aim is not to bypass the parent, but to give the child the opportunity for a one-to-one conversation.

What should I do if a child asks whether they might have to go back to the country the family has fled from?

Tell the child that it is understandable that they are worried about this. Tell them that the adults and the authorities are looking into the matter and will sort it out, and that the child does not need to take responsibility for it. Do not make promises you cannot keep. Instead, you could say: "You're here now, and the adults are doing their best to make sure you stay here."

What should I do when a child says they do not want to tell me anything because I am a stranger?

Tell the child that they do not have to talk about their experiences – at least not immediately. This can help ease the pressure. Give the child some time. For example, tell them: “I realise that this might feel difficult. That’s fine.” If circumstances allow, it may also be helpful for a person whom the child knows and trusts to be present. Explain to the child clearly and in a way they can understand which matters should be kept private and which need to be shared (for example, if the child’s safety is at stake).

References and further reading:

Best Practices for Combating Trafficking in Children and Young People and for Identifying and Supporting Victims: Report concerning the Baltic Sea States
<https://julkaisut.valtioneuvosto.fi/items/8e2520d8-16eb-452a-a685-265fc7c9f1c1>

Children as victims of human trafficking
<https://yhdenvertaisuusvaltuutettu.fi/documents/25249352/34268331/Lapsi+ihmiskaupan+kohteena+-selvitys.pdf/6060ff32-c062-407d-8242-3a6d2a4d5713/Lapsi+ihmiskaupan+kohteena+-selvitys.pdf?t=1715003084845>
(in Finnish)

Supporting children who have experienced violence and providing initial support – Finnish Institute for Health and Welfare
<https://thl.fi/aiheet/vakivalta/tyon-tueksi/vakivaltaa-kokeneen-lapsen-kohtaaminen-ja-ensivaiheen-tukeminen> (in Finnish)

The special status of children in the assistance system for victims of human trafficking, Hohti Teresa (pdf)
https://lauda.ulapland.fi/bitstream/handle/10024/65072/Hohti_Teresa.pdf?sequence=1&isAllowed=y (in Finnish)

Kid-Safe Conversations about Human Trafficking
<https://sosresponds.org/blog/kid-safe-conversations-about-human-trafficking/>

How to Talk to Youth About Human Trafficking: A Guide for Youth Caretakers and Individuals Working with Youth
https://www.dhs.gov/sites/default/files/publications/blue_campaign_youth_guide_508_1.pdf



9. Guest writer: Working with traumatised young people

Mira McLennan, Psychologist and Accredited Sex Therapist, Integrative Support for Young Adults in the Wellbeing Services County of Vantaa and Kerava

Engaging with a young person

Young people want to be accepted for who they are, with all their strengths and weaknesses, just like the rest of us. At the same time, however, young people may still be discovering themselves and unable to articulate their thoughts or feelings aroused by this uncertainty. In such cases, a young person may be unable to express how they would like to be treated, but needs a social worker by their side who acts as a trusted adult and supports them throughout the process. In my work with young people, particularly those who have come to the meeting alone, I have noticed that they do not always know how to answer when asked who they are and what their strengths are. It may be the first time a young person really starts to think about who they are and what their good qualities are. Their past has not always allowed them the opportunity to reflect on these questions. When a young person comes to the services, they have a need for support or are in a situation that is in the process of being resolved or evaluated. In this case, the focus is understandably on the problem to be solved. In my view, change requires not only identifying and addressing challenges, but also exploring and harnessing strengths as part of the process. Strength-centred work can help maintain motivation and reinforce the young person's sense of their capabilities and their role as an active participant.

The importance of articulating one's feelings

"Here, you can talk about anything you want. As a professional, I'm used to discussing subjects that others might find taboo."

A young person may be concerned about how the professional is coping, in which case it is good to reassure them that the professional can certainly handle what they hear. When a young person talks about difficult issues, the professional can acknowledge that the experience must have been very hard. However, there is no need to act horrified. We do not want the young person to feel that their situation is too much for us to handle. Almost all young people with refugee background have been in potentially traumatic situations, but that does not mean that all of them are traumatised. A person who has experienced trauma may feel both a deep need for connection and a desire to be part of a community and a desire to avoid other people and cope on their own. A trauma-informed approach is essential. Transparency is key for building trust and confidence: the client must be explained clearly what the point of the meeting is.

“You can choose what you want to talk about yourself. If I ask you about something or bring up a topic that you don’t want to talk about, just let me know and I’ll respect your wishes. If it’s a topic that I think is important to discuss, I’ll explain why, and you can then take your time to decide whether you’re ready to talk about it or not.”

Challenging situations

“If you are feeling angry, just be angry.”

As with all client groups, challenging situations can arise when working with young people. A young person may behave aggressively or use foul language. They may refuse to cooperate or even refuse to speak at all. Understandably, such situations can also stir up some unpleasant feelings in the social worker. Should this happen, take a moment to process your feelings. Personally, I have noticed that irritation and frustration often stem from a feeling of inadequacy as a social worker. It may feel as though you cannot help the client in the way you would like to. The client’s emotions can be contagious, so it may be worth considering whose emotions are actually affecting you. For example, despair and hopelessness can be overwhelming and very physical emotions that are difficult to bear. They may also manifest as anger. If, as a social worker, you feel that the situation is hopeless and that you cannot help the young person, take a moment to think about where that feeling is coming from. Is it a feeling of personal inadequacy, or does the feeling reflect the client’s deep sense of hopelessness regarding their situation?

It is advisable to talk to a rebellious teenager about anger: what it means, why it is an important emotion, and where it is stemming from. Naturally, it is also worth discussing the fact that, whilst anger is an acceptable emotion, there are certain rules governing their conduct in relation to other people, including social workers. Behind anger there is often another emotion, such as shame, fear, neediness, or grief. A young person may express their feelings through anger for quite some time before the sensitive core of the matter is reached. It has often been the case that allowing the client to express their anger has actually reduced the need for it. One young person became so flustered that all they could manage was to give me a fist bump. Sometimes, acting up can also be a sign that a young person feels safe enough with the social worker to dare to show their more difficult and demanding side.

A young person may feel deeply alone in their situation and that no one can understand them, which understandably makes them reluctant to accept help or open up about their situation. In addition to past experiences, their current experiences, such as racism, can be hurtful and create a sense of alienation. It is worth discussing openly with the young person how these experiences are affecting them today. We cannot change the past, but we can examine the present together and make the client feel safe. It is also important to reflect on one’s own position, background and values as a social worker. If a young person encounters racism or gender-based discrimination in their daily life, but you as a social worker do not, it is advisable to take a moment to reflect on the matter. It is understandable that the young person might feel that a social worker

from a similar background would be better placed to help them. Sometimes, a particular trait of the social worker may unintentionally remind the client of a painful experience. It is also worth discussing this openly with the young person and exploring their feelings, listening to them genuinely, and treating them with respect.

“You’re right. I could never fully understand what you’ve been through, but I promise to do my best to understand it as well as I possibly can. And although I do not fully understand your experience, I do understand why you feel/ behave this way, based on everything you’ve told me.”

However, the most challenging client is not always a young person who behaves aggressively. Persistent silence can be a serious concern. If a young person does not talk or keeps saying that everything is fine despite a difficult situation, you could put the situation into words for them like this, for example:

“I trust your judgement, but I’ve also found from experience that young people can sometimes find it difficult to talk about the things they really need support with. I don’t want you to be left alone to deal with something that is troubling you. Please let me know if there’s anything you’d like me to do differently, so we can discuss alternative approaches to this cooperation.”

It can be difficult for young people to trust the service and the authorities for a variety of reasons. Trust can be very fragile at first and it can take a long time to build, but it is worth putting in the effort. At the same time, it is a good idea to take a moment to reflect on your own concerns and distress and consider where these feelings stem from. Excessive fussing can make a young person feel that there is something wrong with them that needs to be fixed.

Tips that have proven useful in practice:

- Reflect on your own background and how it shapes your values, views and habits. Also, consider your attitude towards people from different backgrounds. Accept that, as a social worker, you are also imperfect. Sometimes, certain unchangeable aspects of ourselves, such as skin colour, gender, voice or appearance, can bring old feelings to the surface.
- A multi-professional approach can provide a young person with more safe points of contact with professionals. In that case, it is also more likely that the young person will find someone they get on with.
- Ask the client what would make them feel safer, for example, the freedom to move around the room during the meeting, fidget toys, or control over the physical distance between themselves and the social worker.
- Openness and transparency. Activate the client in a way that is appropriate for their age.
- Workers are people too. Sometimes we get caught up in the fuss, or a young person annoys us so much that it makes our hair stand on end. In such situations, it is a good idea to take a moment to reflect on your feelings and experiences and discuss the matter with colleagues or, for example, during a job control meeting.
- A trauma-informed approach is an important and valuable addition to one's professional expertise.
- Social work in itself supports and promotes mental health. It is worth bearing this in mind, even if the young person cannot see a psychologist or doctor straight away.



10. Engagement with clients

The previous sections have described the specific characteristics of human trafficking, its traumatic effects, and its impact on an individual's life. In social work, it is important to understand these factors so that, when assessing a client's service needs, you can take into account the client's mental wellbeing and provide them with genuine support. It is also worth bearing in mind that past experiences do not determine how well an individual copes with their situation. Even in the face of difficult circumstances and experiences, people can cope and thrive. Social workers should always maintain this perspective of hope.

The starting point for all support work is to see the person beyond their circumstances and experiences. Even if a person has been a victim of human trafficking, that experience does not define who they are as a person. They should not be viewed merely as a victim of human trafficking, but as a whole person. It is important to acknowledge past experiences and their impact on the present, whilst recognising that falling victim to human trafficking does not define a person for life. Labelling can hinder recovery and reinforce feelings of helplessness. That is why a client's agency should be supported right from the start, even if it is still weak in the early stages of the client relationship.

Experiences of abuse increase an individual's vulnerability. The key objective of support work is to prevent an increase in vulnerability and to consciously empower the individual. Vulnerability is often exacerbated by inactivity, a lack of knowledge about one's rights, poor language and literacy skills, and a lack of understanding of the service system. Seeking help can be made more difficult by the fact that a person may not recognise themselves as a victim of human trafficking or know what kind of support they are entitled to. Furthermore, the isolation, shame and fear associated with human trafficking can prevent people from seeking help. Violence and psychological coercion significantly undermine people's sense of security and their ability to function.

Helping others starts with creating a sense of security. Otherwise, working towards recovery will be impossible. Security means taking into account both physical and mental safety. Trust can only begin to be built once the client feels safe. Trust is essential for ensuring that the work is genuinely based on the client's needs. The experiences of victims of human trafficking have often eroded their sense of security. When a person does not trust other people, they resort to defensive mechanisms. These may include dissociation, severe anxiety, withdrawal, impulsive behaviour, or people-pleasing behaviour. If protective measures dictate the course of the meetings and the assessment of service needs, the focus of the work will be on the protective measures rather than the client's core needs. In such cases, the work is ineffective, and it is difficult for the client to commit to it. Building trust takes time, so the social worker must be kind and patient.

Building trust is important not only for the success of the work, but also for the client's own experience. What has been broken in human relationships can also be mended. Every encounter can be an opportunity to reinforce the client's belief that

life is worth living and that people can be trusted. Little by little, confidence in their ability to function and cope improves. A key aspect of social work is to foster this belief in the client's own capabilities, so that they can learn to take responsibility for their own life. Once the client learns to trust the social worker, that trust can gradually extend to other public officials and people in general.

Breaking free from abuse can be difficult, as can recovering from it. The mind gravitates towards the familiar and predictable, even if it is harmful – the saying “better the devil you know than the devil you don't” captures this phenomenon well. Leaving the past behind means stepping into the unknown, which can feel daunting, even if the new life is better. If help is not available quickly enough, going back to the abuser may feel easier. Insecurity, uncertainty and isolation are poison for the mind, which is why a victim may return to their old ways several times before finally breaking free. Next, we will look at ways in which victims of human trafficking can be supported in their journey of breaking free from abuse and recovering.

The following sections discuss helpful ways of engaging with clients. First, we will examine the principles of engagement and a stabilising approach to work, which form the basis of the practice. We will then look at validation, psychoeducation and a trauma-informed approach in practical work. Finally, we will discuss goal-oriented and motivating work practices.

10.1 Building trust

Trust is a fundamental prerequisite for life, because all human interaction is ultimately based on trust. That is why trust is also a prerequisite for social work. It is built on predictability, clarity, consistency, and a sense of psychological and physical security. The previous sections have examined key themes in the development of trust, such as trauma-informed and stabilising approaches. The next section outlines concrete methods that can be used to consciously reinforce and build trust.

Every meeting should have a clear start and end, and the social worker must adhere to the agreed schedule. At the end of the meeting, the client is told the date of the next appointment and given instructions on what to do between appointments. Making expectations and objectives transparent reduces uncertainty and increases a sense of control.

The working principles of the meetings are agreed in advance: for example, how to act in situations where the client's emotions run too high. For example, the meeting participants can set rules for taking breaks or leaving the room in the middle of the meeting. It is the social worker's responsibility to set boundaries for safe interaction. There is no need to put up with threatening behaviour or offensive language. This creates a safe and respectful working environment.

Trust is not built on words, but on consistent and reliable actions. The social worker should be calm, predictable and clear. Every encounter is an opportunity to build trust. What has been broken in human relationships can also be healed through safe and transparent social interactions. Trust can also be conveyed through body language: maintain an open posture, keep your arms relaxed and speak clearly in a

calm tone. If a person has been deceived, betrayed or treated badly, they may find excessive empathy difficult to accept or even threatening. That is why it is important for the social worker to be warm yet neutral and genuine.

Building trust is an ongoing process, not a one-off act. Trust is built by acting consistently at every meeting and only making promises that can be kept. The best way to build trust is to be genuine and show a real interest in the client's situation. A sense of trust is essential if the client is to feel comfortable enough to talk about difficult issues and commit to the process.

Keep a trauma-informed approach in mind. This means identifying the client's strengths and reinforcing their sense of security, rather than delving into the details of traumatic experiences. There is no need to question the client, as the investigation of human trafficking offences falls within the remit of the criminal investigation authority. It is enough to gain an overview of what has happened to the client and the nature of the abuse they have experienced in order to respond appropriately to their service needs. Avoid getting bogged down in the details, but give the client space and the opportunity to talk about their experiences at their own pace and discretion. Work only with professional interpreters. Do not use the client's friends or relatives as interpreters, even if the client suggests it. Even when working with an interpreter, remember to speak directly to the client.

10.1.1 Supporting psychological safety

Psychological safety refers to the feeling that a person is emotionally secure, accepted by others and in control of their situation. For victims of human trafficking, psychological safety is particularly important, as their past experiences have often been traumatic and involved a loss of control. Psychological safety is built on the client knowing what will happen during the meetings, who they will be meeting, and why. The social worker's consistency, presence and open communication lay the foundations for safe interaction. These are also the principles of a trauma-informed approach.

Supporting psychological safety also requires strengthening the client's sense of inclusion. The social worker must not make decisions on the client's behalf, but work with them to find solutions. The client is given the opportunity to have a say in their process, and their opinions are taken seriously. This empowers the client and reduces the risk of them returning to the abuser. Rushing things can undermine trust, so it is absolutely essential to proceed at the client's pace. A victim of human trafficking may be in contact with a wide network of authorities and several professionals, whose names and roles can be difficult to remember. The constant stream of appointment reminders can feel overwhelming and add to the sense of chaos. The client may not necessarily remember which appointment is which. For this reason, it is important to use visual and written aids, such as network maps, meeting schedules, and personalised appointment slips. For example, notes with pictures can help the client understand the purpose of each appointment (e.g. a yellow flower = a social services appointment). The social worker must state their name and role at the start of every meeting and also clarify the roles and responsibilities of other parties. This reduces uncertainty and enhances psychological safety.

10.1.2 Supporting physical safety

Physical safety is just as important as psychological safety. When assessing service needs, it is always necessary to identify the client's current security risks, such as threats, retaliatory actions or legal proceedings, that may increase the risk. It is important to ensure that the client's living arrangements do not put them at risk. If necessary, measures such as installing a security lock, helping the person find a place in a safer area, or ensuring their safety in other ways can be taken. A safety plan should be drawn up with the client, where necessary. The social worker must also ascertain who has access to the client's data, since in some cases the data of a victim of human trafficking is processed by someone other than the client themselves.

It is important to ensure that no unauthorised persons are present at the meeting. If the client comes to the appointment accompanied by a family member or other person, only general matters are discussed in the presence of this person; matters relating to security are discussed only with the client. During meetings, the client should be able to sit and chat comfortably. If necessary, take breaks and break meetings down into shorter segments. It is better to hold several short meetings than a few long ones. The topics to be discussed can be quite heavy, so it is advisable to start and end meetings with lighter subjects. The client's arousal and wellbeing should be closely monitored, and the topics discussed should be adapted accordingly.

Supporting safety is holistic. It is worth remembering that addressing issues relating to physical and mental wellbeing is also part of this. The social worker must assess the client's immediate health needs and, where necessary, refer them to health care services. Safety therefore does not simply mean eliminating external threats, but taking a holistic view of the client, in which physical and psychological wellbeing are integral.

10.1.3 A culturally sensitive and anti-racist approach

A culturally sensitive and anti-racist approach is also key to building trust and security. In addition to human trafficking, a client may also have other factors contributing to their vulnerability, which may partly overlap and intersect. One significant factor, for example, is belonging to a minority group, which can leave people vulnerable to discrimination and racism not only in everyday life but also in their dealings with the authorities. Experiences of discrimination and racism can undermine mental health, exacerbate symptoms of trauma and be traumatic in themselves.

In meetings, the social worker always has the position of authority that comes with their role. It is important to be aware of this so that its impact on interactions and encounters can be taken into account and equality can be achieved. An anti-racist approach is an essential part of gaining a comprehensive understanding of the client's situation and of working in a safe and effective manner. Everyone has preconceptions and prejudices, for example about different cultures and ways of doing things. No one can completely free themselves from them, but being aware of one's own preconceptions makes it possible to examine them critically and

change one's approach. Furthermore, an active anti-racist approach can help to dismantle structural racism within organisations.

An anti-racist approach builds trust and creates a safe space for the client. This means engaging with each client on an individual basis, identifying their needs and tailoring the meetings to meet those needs. An anti-racist approach is naturally linked to culturally sensitive working practices. The social worker does not need to know everything about different cultures, minorities or customs, but it is important to be aware that clients come from a wide variety of backgrounds and may see and experience things in different ways. The most important thing is that, as a professional, you are open-minded and not afraid to ask questions.

Cultural sensitivity refers to a professional's ability to act in a culturally respectful manner, foster a non-discriminatory atmosphere, and treat and communicate with clients with respect. Both parties have the right to express their culture and to be accepted and heard on that basis. At the same time, it is important to remember that, in addition to their cultural background, everyone is an individual with personal needs. Particularly when dealing with clients from different cultural backgrounds, it is important to avoid stereotypes and view the client first and foremost as an individual. On the other hand, when designing services, it can sometimes be important to take the client's cultural background into account. For example, it may be necessary to reserve more time for client meetings if the client has a limited command of Finnish or is unfamiliar with the Finnish service system. A culturally sensitive approach supports clients' wellbeing and mental health.

"A holistic approach takes just as much time and other resources as an approach relying on prejudice and stereotypes."

-Koko Hubara, Finnish Institute for Health and Welfare's online course on anti-racism

What can I do as a professional?

- I understand my cultural background and know that it influences how I interact with others.
- I respect diversity.
- I ask the client about their customs, values and culture, rather than making assumptions or generalisations.
- I always work with a professional interpreter when necessary.
- I do not dismiss what the client has said, nor do I dismiss the cultural significance of the issues.
- I do not question experiences of racism or discrimination.
- I am aware of the structural barriers faced by the client.

10.2 Psychoeducation and validation

Psychoeducation and validation are important approaches to interaction that are used as the situation requires.

Psychoeducation

Psychoeducation refers to increasing knowledge and understanding of the effects of trauma in a way that supports an individual's coping and recovery. This handbook describes how human trafficking affects individuals and why it is a traumatic experience. You can use this information when discussing the client's situation with them.

For example, if the client is feeling anxious during a meeting and talks about their experience, you can provide psychoeducation by explaining that these symptoms are normal reactions to traumatic events. For example, you could say: "It's normal that you're having nightmares about what happened now that you're safe. The mind begins to process what has happened, and nightmares are common after trauma."

Psychoeducation has been found to reduce stress in difficult life situations and to make it easier to adapt to new circumstances. It is, in fact, a good method to support the client at different stages of the service.

Psychoeducation does not mean giving a lecture, but rather providing a clear explanation of what has happened and what the implications are. You could say, for example: "What happened to you is known as human trafficking. It is a form of violence, and it has impacts like this on victims." Psychoeducation provides accurate and up-to-date information about the client's situation, helps normalise reactions and reduces fear and stigma. The aim is to empower the client, avoid overwhelming them with information and reduce unnecessary worry and fear.

Validation

Validation acts as a counterbalance to shame. It involves articulating the client's experience and reactions and identifying them in a way that makes them understandable within their specific context. Validation does not mean agreeing with the client, but rather treating them with respect.

For example, if the client mentions that they find it difficult to trust people, the social worker might say: "It's understandable that you find it hard to trust people when you've been let down so many times."

Validation is a key tool for professionals in building trust. It is also part of the stabilising and trauma-informed approaches. The opposite of validation is invalidation. For example, if the social worker interprets the client's account of their experience as a lack of motivation, a symptom of a mental illness, immaturity, selfishness or a lack of discipline, this constitutes invalidation. Invalidation can undermine the client's sense of inclusion and hinder or completely prevent the development of cooperation, trust and self-direction.

For example, if the client is having trouble sleeping and is facing a lot of uncertainty and stress in their life, you can acknowledge their situation by saying: "It's no wonder the situation feels overwhelming and you're finding it hard to sleep when you've got so much on your mind."

As noted earlier, people who have experienced trauma may sometimes misinterpret facial expressions or find excessive empathy threatening. It is indeed a good idea to aim to be warm, yet neutral, and to express your acceptance of the client clearly:

“It’s no wonder you feel awful being home alone at night, when you’ve had to go through so many really horrific things.”

Validation can help reduce feelings of shame, offer comfort and create a supportive atmosphere in which it is easier to talk. When listening to the client, there may sometimes be situations where it is difficult to relate to their experiences. It is worth remembering, however, that there is always some aspect of their story that can be validated. Validation does not equate flattery, pandering, encouragement, or positive thinking.

Validation can also involve acknowledging the client’s problems and stating them out loud. For example, you could say: “It seems like you’re pretty much stuck in this situation.” The key point is that the social worker listens to what the client has to say without passing judgement or criticising them. It is important not to blame or stigmatise the client, but to keep the person and their actions separate. People must always be accepted, even if their actions have been harmful.

Table 8: Trauma symptoms and methods of stabilisation

Traumatic reaction	Manifestation in behaviour	Stabilisation
Hyperarousal	Restlessness, overheated speech, irritability, difficulty concentrating	Calm interaction, breaks, light small talk at the start and end of each meeting
Hypoarousal	Freezing, withdrawal, silence, apathy	Gentle engagement, visual aids, short and clear exercises
Dissociation	Inattentiveness, no eye contact, “blank” expression	Returning to the present moment, meeting agenda, grounding the body, calm voice
People-pleasing	Accepting everything, ignoring their own needs	Encouragement to express their thoughts, validation, setting boundaries
Hypervigilance	Interpreting a neutral expression as hostile, fearfulness	Clear and calm communication, paying attention to facial expressions and body language
Withdrawal/ evasiveness	Cancelling meetings, avoiding contact	Strengthening a sense of security, consistency in communication
A negative self-image	A sense of worthlessness, failure or brokenness	Honest and constructive feedback, putting strengths into words
Shame and guilt	Difficulty talking about experiences, self-blame	Validation, normalisation of experiences, non-judgemental interaction
Fear and the need for control	The need to be in control of the situation, mistrust of the authorities	Predictability, clear structures, respect for the client’s pace

10.3 Change management

Change is often difficult. The saying “better the devil you know than the devil you don’t” sums up well why change can feel daunting. The body and mind are accustomed to the familiar, so the familiar is perceived as safe – even if the circumstances are extremely harmful. For a victim of human trafficking, change means breaking free from exploitation and the exploiter, and often from their own networks as well. This can feel overwhelming and cause anxiety.

Social work is always about bringing about change. The social worker’s role is to help the client by breaking the change down into small, manageable steps. This handbook describes ways in which the social worker can support the client in building a safe and confidential relationship. These methods help the client take steps in the desired direction. It is important to set goals together with the client, taking into account their current circumstances. If the change envisaged by the client does not match their own idea of their future, it will not motivate the client either. The client does not necessarily understand the need for change or grasp the objective, so the social worker must support them in this regard.

The objective must be sufficiently small, clear and achievable, and it must be rooted in the client’s everyday life. For example, the social worker and the client could first set the objective of financial management, for instance, and then discuss ways to achieve this objective. Small successes boost the client’s self-efficacy and confidence in their abilities, which in turn increases their motivation to achieve subsequent goals. It is important to celebrate each success and write them down. Even if a step taken seems small, it can be hugely significant for the client. The client’s sense of self-efficacy may be very low, so they need a great deal of support to build it up.

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Report series №106b: “This isn’t easy”—Stepping up support for victims of forced marriage.” EASY Project Guide to Best Practice | HEUNI <https://heuni.fi/-/tuen-tehostaminen-pakkoavioliiton-uhreille#1f15655f> (in Finnish)

Report series №108b: “The Long Road”—A toolkit for supporting victims of forced marriage | HEUNI <https://heuni.fi/-/report-series-108b-pitka-polku-tyokalupakki-pakkoavioliittojen-uhrien-tukemiseen#1f15655f> (in Finnish)

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Online course on anti-racism for professionals – Finnish Institute for Health and Welfare <https://thl.fi/aiheet/maahanmuutto-ja-kulttuurinen-moninaisuus/tyon-tueksi/verkkokoulutus-antirasismista-ammattilaisille> (in Finnish)



11. Mental health assessment and referral for further treatment

11.1 Mental health evaluation

The above provides a fairly comprehensive overview of the effects of trauma on an individual's wellbeing and mental health, as well as ways in which social welfare professionals can support clients and stabilise the situation when assessing their need for services.

If these measures prove insufficient, the client should be referred to health care services where their psychological wellbeing can be evaluated more closely and the necessary treatment provided. It is worth considering seeking support from health care, particularly when the normal reactions to an abnormal situation described above begin to turn into disorders. This may manifest, for example, as symptoms that impair the client's functional ability and do not improve despite stabilising support. If, for example, sleep problems persist even though the crisis has already subsided, it is advisable to assess whether a health care intervention is required.

The need for services is always assessed on a case-by-case basis. It is important to consult the client themselves about their situation: whether they feel they can cope with their symptoms or whether they need support from health services. Monitoring the client and their wellbeing may also reveal a need to refer them to a health care professional, particularly if their condition deteriorates over time. Similarly, a question such as "How have you tried to alleviate your symptoms?" can provide valuable insight into the client's situation.

It is worth noting that sometimes it is necessary to explain to the client what kinds of issues can be dealt with within the health care system. If the client finds it difficult to commit to agreed appointments, it can be challenging to provide care within health services. In such cases, it is worth considering the possibilities for cooperation.

It is important to be aware that no referral is needed for primary health care. Anyone can access primary health care without a specific referral. In health care, a referral means directing a client to, for example, specialist medical care or rehabilitation services.

Provided that the systems and confidentiality requirements allow it, and the client has consented to the exchange of information between authorities, the social worker's assessment of the client's situation constitutes valuable information for health care. Relevant information may include, for example, the client's native language, literacy, need for an interpreter, family and housing situation, employment and social circumstances, such as educational background or occupation, substance use and addictions, and a description of their functional capacity.

It is important to highlight the main concerns arising from the client’s situation and to describe the symptoms as clearly as possible. If the client agrees, the social worker may also provide their own contact details so that the health care professional can get in touch if necessary.

To help gather background information on the client and facilitate their access to health care, we have prepared a form entitled “Background information for health care” to assist social workers. You can find the form in the appendices. The evaluation framework below (Table 9) can also be used to analyse the client’s situation.

Table 9: Evaluation framework: Evaluation of the mental health of a traumatised person

Evaluation category	Description
Safety	Assess the client’s physical and psychological safety. Is the client safe? Is someone controlling the client’s life?
Functional capacity	How well does the client cope with everyday life? Sleep, diet, exercise, social relationships, finances.
Symptoms	Recognise potential mental health problems: anxiety, depression, dissociation, hyperarousal, numbness.
Interaction	How does the client seem during the meeting? Trust, withdrawal, or effort to please?
Symptoms of trauma	Has the client had any traumatic experiences? Have they impacted the client’s current situation? If they have, how?
Need for referral	Is cooperation with health care services necessary? Does the client wish to work with health care services? Any other contacts?

11.2 Evaluating and addressing the risk of suicide

Evaluating and addressing the risk of suicide are important skills in social care. A person who has been through a traumatic experience may continue to feel great distress for a long time after the abuse has ended. They may find their situation so unbearable that the thought of death seems the only way to escape their suffering. Sometimes, self-destructive behaviour can be an ineffective way of relieving anxiety; at other times, it is a way of expressing one’s sense of hopelessness. Self-destructive speech and behaviour should always be taken seriously. It is important to carefully ascertain what is really going on: is there a genuine desire to die, have these thoughts progressed to the stage of concrete planning, or do they primarily reflect a need to escape from a situation that is perceived as unbearable? A deep sense of hopelessness may be a sign that a person has reached the end of their tether and cannot see any way out of their situation. Suicidal thoughts can manifest themselves in various ways: sometimes they remain merely thoughts, but at other times they can develop into concrete actions. It is therefore important to find out whether the person has previously attempted suicide or harmed themselves, and to assess whether they have a concrete plan.

It is important to look into the matter if, during the appointment, the client:

- is melancholic or feels hopeless
- feels insignificant and neglected
- cannot see a future for themselves
- hopes to die or for a way out of their situation
- sees death as an option or longs for it
- thinks about harming themselves or has already done so
- is contemplating suicide and has already made plans to kill themselves.

Do not hesitate to ask more about these feelings and plans. If the client avoids the subject and seems reluctant to talk, voice your concerns and ask for more information. You could say that the client's silence only adds to your worries.

You could use the following phrases, for example:

- "Have you ever thought about harming yourself?"
- "Could you tell me more about your thoughts?"
- "Have these thoughts ever developed into concrete plans or action?"
- "Have you ever attempted suicide?"
- "Is there anything stopping you from hurting yourself?"
- "If you've never attempted suicide, have you ever had a close call?"
- "If you had the chance, would you do something to yourself?"
- "What prevented/stopped the attempt?"
- "What has been stopping you from carrying out your plan?"
- "Can you promise me to stay alive until our next meeting?"

Based on the client's answers to your questions, assess whether the client is in immediate danger. If you are unsure, do not hesitate to ask a colleague to help you assess the situation. Keep asking questions until you are sure. Depending on the client's responses:

- If possible, schedule another meeting or book another phone appointment so that you can discuss the subject again later.
- Give the client the contact details for the Crisis Helpline.
- Remind the client about the emergency number and the 112 app.
- Discuss the situation with the client's designated team.
- Even if the risk is not immediate, you can still refer the patient to non-urgent health care services.
- Call an ambulance or send the patient to A&E.

Remember that you can seek medical advice during the meeting, for example by calling the out-of-hours medical service.

When you meet someone with self-destructive thoughts, do not ask “why?”, as there is often no single, clear-cut reason for these thoughts. Instead, it is advisable to ask what the person believes suicide would release them from. This may prompt a discussion about their situation and feelings regarding it and how they wish to resolve the problem. It is also important to let the person know that help is available and that self-destructive thoughts are quite common. This in itself can help reduce the stigma of self-harm and make the client feel more at ease. It is also a good idea to ask what sort of help they would like and what has helped them get through difficult times in the past. These questions can help you find ways to support the person in a way that is tailored to their specific needs.

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<https://mieli.fi/en/support-and-help/suicidal-thoughts-and-self-destructiveness/concern-over-the-suicidal-thoughts-of-a-loved-one/>

Mielenterveystalo.fi, Self-harm <https://www.mielenterveystalo.fi/fi/itsetuhoisuus>
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Supporting refugees’ mental health in Finland: PALOMA handbook
<https://www.julkari.fi/items/2ff82654-0cc5-4ff0-85b1-108a8e99d3ae>

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12. Assessment of service needs

The assessment of a victim of human trafficking's need for services is carried out in the same way as for any other social welfare client. In this section, the assessment of service needs is examined specifically from the perspective of interacting with a client. At the same time, we will review the topics covered previously and explore how they might be applied in practice. When conducting a service needs assessment, it is important to take traumatic experiences into account in order to identify the client's actual situation and needs. When the work genuinely meets the client's needs, the client is also more committed to it.

A client relationship is built on trust, presence and authenticity. Validation and acknowledging the client's experience are central to interaction that supports recovery and empowers the client.

A service needs assessment is a process designed to determine the client's current situation and their need for support and services in a timely manner. The focus is on the present, although past events and experiences are also taken into account in the assessment. At its best, the assessment of service needs is a stabilising process and, in itself, an intervention that forms an integral part of the work carried out with the client. The process begins with the initial meeting and lays an important foundation for goal-oriented change work. When it comes to victims of human trafficking, the assessment process requires particular sensitivity and a client-centred approach.

Helping victims of human trafficking in social work does not mean viewing the person's situation solely from the perspective of victimhood. Instead, human trafficking and its implications are taken into account as part of a comprehensive assessment of service needs. Human trafficking is a complex phenomenon, but it always involves violence against the individual.

Experiences of violence leave their mark, but their effects can manifest themselves in different ways in different people. Some people can be so resilient that even difficult experiences leave no significant mark or impair their ability to function, whereas others are deeply impacted by seemingly minor experiences of abuse. A social worker cannot predict, based on background information alone, how deeply these experiences have affected an individual; therefore, human trafficking must always be discussed as part of the assessment of service needs. It is part of an individual's life experience – the past affects us all, even in the present.

It is important to understand that not all clients can be helped in the same way. That is why this handbook cannot be exhaustive either. When assessing service needs, it is important to maintain transparency and explain to the client why certain questions are being asked, what the aim of the meetings is, and who has access to their information. The client may harbour deep mistrust towards the authorities, so it is worth taking the time to address this. It is important to ensure that outsiders do not have access to client records, as even seeking social services can pose a significant security risk to the client.

Preparing for meetings is an essential part of a trauma-informed approach. If the client is also a client of the assistance system, a decision has been made to admit them to the assistance system and a notification has been sent to the wellbeing services county in accordance with the Social Welfare Act. If there is any uncertainty regarding the client relationship, the social worker should contact the assistance system. Familiarising oneself with the client's background protects the client from being re-traumatised, since they do not have to recount everything all over again. The client is told that their background is known, but they are under no obligation to discuss these matters again unless they wish to do so. It is important for the social worker to be familiar with the client's background, as this helps them understand the context of the situation and assess the client's need for support.

The length and structure of the meetings affect the client's ability to cope and concentrate. When the client comes to an appointment, they may have numerous questions and concerns. It may feel tempting to try to resolve them all at once, but such an approach may simply reflect the chaos in the client's mind, which the social worker should not get drawn into. Instead, it is the social worker's role to help the client organise their thoughts and prioritise their needs. For example, the social worker could ask the client which two things are the most important today. Meetings should be kept short enough to ensure the client can stay focused. Even if the client appears to be engaged in the conversation, a meeting that goes on too long may not leave a lasting impression on them, in which case it fails to serve its purpose. Structuring and consistency in meetings are key: the social worker should plan an agenda for each meeting in advance and always inform the client of the time and topic of the next meeting. This provides reassurance and helps the client realise that they do not have to process everything at once. If there is a long gap between appointments, the client should be told how they can contact the social worker in the meantime. It is a good idea to set some ground rules for the meetings together in advance.

It can be difficult for the client to understand the service system, so it is worth taking the time to explain it clearly. The client may not always remember who everyone is and what they have talked about and with whom. Visual aids that support understanding and recall, such as a service map showing the names and roles of the workers the client has interacted with. A clear service map also helps to create a sense of security.

The mind of a traumatised person does not process new information in the same way as that of a non-traumatised person. That is why communication must be clear, and it is a good idea to use visual aids. For example, appointment details or contact information can be printed on coloured paper, which stands out from official documents and helps the client remember and make connections. The client may be dealing with several different authorities at the same time, in which case it is not uncommon for matters to become mixed up. The social worker's role is to identify the client's support network and aim to clarify it.

It is advisable to involve the client in the assessment of their service needs from the outset. It may seem tempting to manage everything on the client's behalf, but encouraging them to take the initiative promotes recovery. Helplessness may be the result of trauma, which is why it is important to help the client manage their own

affairs. The client should not be left to their own devices, but should be given strong support and encouragement to try take responsibility.

If you are in a hurry, you might be tempted to take notes during a meeting or whilst the interpreter is interpreting. However, it is advisable to not use the computer during the meeting so that the interaction remains of a high standard, the client’s body language is not overlooked, and the computer does not undermine the connection. A traumatised person is sensitive to facial expressions and gestures and often misinterprets them. That is why it is important for the social worker to be mindful of their body language and to convey a sense of safety.

Finally, it is important to agree on the ground rules for the meetings and what constitutes appropriate and safe behaviour. Clear rules increase predictability and trust and make the client feel safe and respected.

Checklist

1. Initial assessment: Recognise the possibility of human trafficking or make use of existing information from the assistance system. Ensure the client’s safety and find out who answers your phone calls or who has the phone in their possession.
2. Safety: Find out whether the client can receive post safely and who has access to their information. Assess whether it is safe for the client to return home.
3. Building trust: Start building trust right from the very first meeting.
4. Stabilisation: Use stabilising methods at every meeting.
5. Cooperation with the assistance system: If necessary, work with the assistance system and make use of the support it offers.
6. Written assessment and plan: Make sure you keep a careful record in a secure manner.
7. Assessment of service needs: Acknowledge that, in the case of victims of human trafficking, assessing their service needs can be a lengthy process and may require several meetings. Make sure the client finds the process is safe and inclusive.

Table 10: Checklist for assessing the need for services with stabilising methods

Task	Done (✓)
Use visual aids to illustrate the client’s networks, service system and appointments.	
Draw up a psychological safety plan for crisis situations.	
Create a sense of security at every meeting.	
Use practical measures to stabilise the situation.	
Structure the meetings clearly.	
Use stabilisation tools: engagement, collaboration, plans, a trauma-informed approach, validation, and psychoeducation.	

12.1 Recording the client's appearance and behaviour

Documentation is just as much a part of assessing service needs as any other aspect of the work. When assessing service needs, it is essential to document the client's circumstances, social environment and personal characteristics in slightly greater detail than usual. Through regular meetings, the social workers gets an idea of what working with the client is usually like, how they typically behave and what their general demeanour is like. Professionals often pick up on these kinds of things as a matter of routine, but they may go unrecorded as these aspects are more difficult to put into words and do not necessarily seem as significant as other matters discussed during the meeting. However, making a note of the client's behaviour can provide valuable insight into their situation and help both you and your colleagues in your work. These findings also support the overall assessment of service needs and help plan meetings in line with the client's individual needs.

These notes can provide important information, for example, on whether there have been any changes in the client's appearance or behaviour, either in the short or long term. Sudden changes may be a sign that the situation warrants closer scrutiny. Changes that become apparent during the meeting may also be worth noting, and it may be useful to consider the reasons behind them – together with the client, if necessary. If, however, the notes show that a particular variation or behaviour is typical of the client, this does not necessarily warrant concern. Changes in a person's demeanour and manner of interacting provide a great deal of insight into the client's situation.

Recording a person's appearance and behaviour provides valuable information that can be used to assess whether the client's situation has changed. Context is key when taking notes, but often a great deal can be gleaned from, for example, clothing, personal hygiene, behaviour, body language, facial expressions, communication, movement, motor skills, and speech – as well as other details. It is also important to note if the client's demeanour changes during the conversation.

When recording observations, one should remain objective and focus on concrete observations rather than guesswork or subjective interpretations. The notes should not contain any personal assumptions, but should describe only obvious behavioural characteristics. Professionalism and a respectful approach are key: offensive or inappropriate language and personal opinions should be avoided. It is also important to take into account the impact of the situation and the environment, as a person's demeanour and behaviour can vary significantly depending on the context. Where necessary, the notes should mention the circumstances.

Generally speaking, a client's behaviour, speech, body language, facial expressions, communication, movements, dress, and personal hygiene can reveal a great deal about their circumstances and wellbeing. There is no single correct way to phrase the notes; instead, there are many ways to approach the subject. However, all notes should serve a clear purpose. If necessary, you can discuss the content or wording of your notes with the client. This can prompt important reflection on why these aspects are observed and why certain behaviour is described as, for example, threatening or reserved.

Examples of situations in which notes about a client's appearance have been considered important:

- Varying states of intoxication at meetings.
- Unusually subdued or withdrawn behaviour during a conversation.
- Concern about the client's ability to cope with daily life; a decline in personal hygiene or other changes in their physical appearance.
- Behaviour that is out of character for the client, such as acting in a more threatening or impulsive manner than usual.
- An anxious, stressed or tearful demeanour, which may affect the planning of the next meeting (e.g. calming elements or materials that the client can touch during the meeting).
- Hyperarousal or being "on edge" during a meeting.
- Circumstances that have necessitated the presence of a colleague or holding a meeting in a different location (for example, due to threatening behaviour).

Examples of appropriate phrasing in the notes:

- "The client's body language is lively."
- "The client reacts strongly/loudly/gestures with their hands. This gives the social worker a feeling that xxx/This makes the social worker feel unsafe/This does not make the social worker feel unsafe."
- "The client raised their voice on several occasions during the meeting."
- "The client's body language and tone of voice were more subdued this time than on previous occasions."
- "This style of interaction/way of expression is characteristic of the client."
- "The client's body language/demeanour/emotional state is consistent with what they have described."
- "The client's behaviour was consistent with previous observations."
- "The client was clearly nervous at the start of the meeting."
- "The client avoided eye contact."
- "As the meeting went on, the client began to relax."
- "The client spoke very quickly and jumped from one topic to another without any clear connection between them."
- "The client broke down in tears several times during the meeting."
- "The client replied briefly and seemed distracted."
- "The client was restless and got up several times to walk around the room."
- "The client's breath smelled of alcohol."
- "It appears that the client has not been able to wash."
- "Hygiene appeared to have deteriorated/improved compared with the previous meeting."

- “The client wobbles slightly when moving around.”
- “The client walked slowly and had difficulty getting up from the chair.”
- “The client arrived at the meeting about 10 minutes late.”
- “The client left the meeting before it had finished.”

The table below (Table 11) can also be used as a guide when observing a client’s demeanour. It contains examples of observations relating to, amongst other things, physical appearance, demeanour, manner of communication, and gestures.

Table 11: Notes on appearance and demeanour

Appearance	Demeanour	Contact	Facial expressions and gestures
Well-maintained and tidy on the outside.	Breathing is shallow; fidgety hands.	Approachable, well-behaved and focused.	Lively and expressive. Smiles a lot.
Dressed appropriately for the weather.	Relaxed posture.	Calm, remains engaged apart from brief moments when they seem a little distracted.	Minimal gestures and unchanging expression.
Stained and torn clothes.	Leans forward.	Seems reserved and anxious. Does not take their hood off.	Their hands rest in their lap; calm movements.
No socks or underwear, feet dirty.	Stooped posture, eyes cast down or gazing into the distance.	Does not make eye contact; when speaking, looks past the social worker.	Gestures rapidly, shifting back and forth on the chair.
		Avoids eye contact.	Clutches their hands together, sweaty hands.
		The contact is challenged by the client’s fatigue.	Moves about restlessly.
		In this situation, the client becomes distracted and doesn’t hear when someone speaks to them.	Smiles, and sometimes even laughs.
		Appears calmer than before. They are active and responsive in their interactions, and they seem pretty happy.	

Secure recording

Recording social care data is also intrinsically linked to the client's safety. Entries made by a professional must form a coherent whole and contain the necessary information. This is also crucial from the point of view of the client's legal protection. The client has the right to know what information is recorded about them. Transparency regarding what information is recorded, how it is processed and where it is stored is key to building trust.

In some situations, particular care must be taken when recording information to ensure the client's safety. It is important to be aware who has access to the client's data and devices, and who can view notes relating to them in, for example, MyKanta or other information systems. The client's information may be accessed by someone other than the client themselves, and information relating to, for example, threats of violence or abuse could, if it falls into the wrong hands, pose a serious security risk. In such situations, it may be necessary to hide the entry completely or partially, restrict the content of the entry, or delay the recording.

Particular care must also be taken when recording children's information. Entries concerning children are, as a rule, visible to all guardians; therefore, they must not reveal any information that could jeopardise the safety of the child or a guardian, such as the address of the other guardian.

Table 12: Checklist for recording client information

Important points to remember when writing notes about a client
Be objective.
Record only concrete observations, without making value judgements or offering subjective interpretations.
Do not record your own assumptions, but only the observable behavioural traits.
Ensure that your wording is respectful and professional.
Record what the client says, using their own words and expressions.
Avoid offensive and inappropriate language.
Do not include your personal opinions.
Bear the context in mind.
As a person's demeanour and behaviour can vary significantly depending on the situation and environment, also take other contextual factors into account in your notes and mention them where necessary.
Ensure the client's safety.

References and further reading:

Hujanen, K., Kinnunen, U.-M., Ailio, E., & Koivumäki, L. (2021). The high quality structural documentation of social work described by social workers. *Finnish Journal of EHealth and EWelfare*.

Recording guidelines for social welfare services – Finnish Institute for Health and Welfare https://thl.fi/aiheet/tiedonhallinta-sosiaali-ja-terveysalalla/kirjaaminen/sosiaalihuollon-kirjaamisohjeet?utm_source=chatgpt.com

Social Welfare Act | 1301/2014 | Legislation | Finlex, section 36
https://www.finlex.fi/fi/lainsaadanto/2014/1301#chp_4_OT8



Appendices

Background and objective of the handbook

The preparation of this handbook drew on a survey aimed at social welfare professionals in wellbeing services counties, which sought to identify their experiences regarding their expertise in assisting victims of human trafficking, as well as their needs for competence development. The results of the survey and comments from professionals have been taken into account in the preparation of this handbook.

This handbook has played a key role in the Wellbeing Services County of Vantaa and Kerava's (Vake) contribution to the "Active agency – services promoting equality, non-discrimination and inclusion" project, focusing on the development of social services for immigrants, the Roma population and victims of human trafficking. The project is being carried out by the Finnish Institute for Health and Welfare, the University of Helsinki, the City of Kajaani, the Western Uusimaa Wellbeing Services County, Moniheli ry, Romano Missio ry, Setlementti Tampere ry, and the Wellbeing Services County of Vantaa and Kerava. The project, which is co-funded by the European Union, is coordinated by the Finnish Institute for Health and Welfare.

The handbook was developed and written as part of the project, and its effectiveness has been tested within Vake's integration support services. The handbook also features guest articles written by various professionals. In addition, a wide range of experts have read the handbook prior to its publication and provided valuable feedback. The handbook is the result of collaboration and, as such, accurately reflects the work carried out with victims of human trafficking – work that cannot be done alone.

Background survey

At the start of the project, we carried out a survey among social welfare professionals. The aim of the survey was to find out how professionals assess their own skills in assisting and identifying victims of human trafficking. The second objective was to identify training needs. A total of 121 social workers and social counsellors from 17 different wellbeing services counties responded to the survey. The survey assessed respondents' knowledge of human trafficking and how to identify it, the use of a trauma-informed approach, training needs, and their experiences of work-related stress and the need for support. The results highlighted a clear need for further training and practical tools.

The majority of respondents stated that they knew little about human trafficking and would like more information about the phenomenon, how to recognise it and ways to help victims. Almost 90 per cent felt they needed more training in identifying victims of human trafficking. More than half said they had not received any training on the subject, even though they would have liked to. Knowledge of

the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings and the assistance system proved to be poor, and only a few respondents applied a trauma-informed approach. The open-ended responses highlighted the need for clear operating models, specific guidelines, and practical training. The workload is exacerbated by the fact that many wellbeing services counties do not employ professionals with expertise in the field, and workplaces lack clear frameworks or guidelines for working with victims of human trafficking. Feelings of isolation and a lack of support were highlighted as major issues.

The survey was carried out prior to the preparation of the handbook to ensure that it would meet professionals' actual needs. As working practices vary from one wellbeing services county to another, it is not possible to draw broad generalisations from the results. However, the survey strongly suggests that there is a need for more information and support, and that there is a clear need for a handbook of this kind. Social welfare professionals are expected to have a broad range of skills and knowledge. Their role is to identify the specific characteristics of abuse and to support the individual in their recovery. The aim of the work is to strengthen the client's functional capacity and self-efficacy so that they can gradually move from a vulnerable position towards self-sufficiency and active participation.

Human trafficking is a growing problem, but it remains relatively rare. An individual social worker may not come across victims of human trafficking very often in their work, so it is understandable that their knowledge of the subject is limited.

Summary of the survey for wellbeing services counties

The aim of the project is to have a nationwide impact and support the work of as many professionals as possible. To ensure that the handbook meets the actual skills needs of social workers and social counsellors, we conducted a nationwide survey to assess their experiences of working with victims of human trafficking, their ability to identify the phenomenon, and their knowledge of human trafficking. A total of 121 social workers and social counsellors from across Finland responded to the survey. There were respondents from 17 different wellbeing services counties. This section presents the key findings of the survey.

The survey consisted of open-ended and multiple-choice questions covering the respondents' knowledge of human trafficking as a phenomenon and how to identify it, cooperation with the identifying authority (i.e. the assistance system), knowledge of legislation, training needs, and experiences of working with victims of human trafficking. The open-ended responses were analysed to identify key themes that recurred in several responses.

Most respondents need more information about human trafficking

The different wellbeing services counties were widely represented in the survey. The highest number of responses came from Pirkanmaa (29%) as well as Vantaa and Kerava (27%). The majority of the respondents worked in adult social services, migrant services or family services.

According to the survey, 50% of respondents had encountered victims of human trafficking on a few occasions during their careers, whilst 13% reported that they had never encountered victims of human trafficking in their work. The majority of respondents (61%) felt they knew very little about human trafficking, and 79% said they would like more information on the subject.

The open-ended responses highlighted a clear need to raise awareness of the assistance system for victims of human trafficking and to improve understanding of its role. In a multiple-choice question, around half (49%) of respondents stated that they had worked with the assistance system for victims of human trafficking. However, in the open-ended questions designed to identify training needs, there was a strong and recurring call for further information on the role of the assistance system, its responsibilities and its cooperation with the wellbeing services counties. Awareness of the Act on the Reception of Persons Applying for International Protection and on the Identification of and Assistance to Victims of Trafficking in Human Beings was also low among respondents: only 45% of respondents stated that they were familiar with the Act. 53% of respondents did not apply the Act at all in their work.

There was a need for further training in identifying and assisting victims of human trafficking. This need was highlighted strongly in both the multiple-choice and open-ended questions. As many as 89% of respondents said they needed to improve their skills in identifying victims. In addition, 55% said they had not received any training on the subject, even though they would have liked to. The responses called attention to the need for practical guidance that is applicable to everyday work and supports the identification of human trafficking victims, bringing up the subject with clients, and provision of support.

The survey also examined the use of a trauma-informed approach. 23% of respondents said they actively apply it in their work. Almost half (47%) said they would like more training on the trauma-informed approach and its practical application.

There is a need for practical guidance in client work and clearer guidelines on cooperation

The open-ended responses were used to identify training needs. The responses highlighted a desire for a more practical approach to client work, both in terms of identifying needs and providing support. Respondents wanted specific guidance on how to recognise and address the human trafficking: what to pay attention to, what signs to watch for, and how to act if concerns arise. There was a need for training in interacting with clients, taking special needs into account in a sensitive manner, and applying a trauma-informed approach in practice.

Cooperation with the assistance system was also mentioned in several responses, and views on this were somewhat divided. Some respondents felt that the collaboration was beneficial, whilst others thought that the collaboration and the roles of each party needed to be clarified. In particular, there was a need for clear information on the benefits and eligibility criteria of the assistance system. In addition, there was a call for a clearer definition of the division of duties and responsibilities between the wellbeing services counties and the assistance system.

Among the challenges associated with identifying and assisting victims of human trafficking, a sense of isolation regarding the issue stood out. The responses repeatedly highlighted the fact that there is little broad-based expertise in working with victims of human trafficking, which is why peer support is often inadequate. Respondents also described how a lack of resources and clear guidelines increased their workload. According to some respondents, these factors may have had a negative impact on recognition. The responses also raised the question of whether the special status of victims of human trafficking is justified, and whether services should be needs-based rather than status-based. There were calls for improvements to the transparency of the assistance system and the clarity of the legislation.

Working with victims of human trafficking was generally seen as meaningful and rewarding, but also challenging. The lack of experience and knowledge, as well as the isolation associated with the work, weighed heavily on many respondents. The workload was also increased by the fact that not all service providers were perceived to have a sufficient understanding of the client's rights, which hampered cooperation.

Summary

The results of the survey show that social workers need information on how to identify and assist victims of human trafficking. Awareness of human trafficking as a phenomenon should be raised through both training and practical tools. In particular, there is a need for additional resources, clear guidelines and practical training to enable professionals to identify and assist victims of human trafficking effectively. Furthermore, wider adoption of a trauma-informed approach could improve the way victims are treated and supported.

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Author: Marjukka Nyström, Social Worker and Project Manager

Support for victims of human trafficking in the Wellbeing Services County of Vantaa and Kerava

Services for victims of human trafficking have been brought under the umbrella of integration support services within the Wellbeing Services County of Vantaa and Kerava (Vake). These services are run by the IKU team, which specialises in assisting victims of human trafficking and comprises social workers and, where necessary, social counsellors. Depending on the client's circumstances, the IKU team works in collaboration with a health care team, which includes a doctor, a nurse, a public health nurse and a psychologist. A prerequisite for multidisciplinary cooperation is that new clients are always asked to provide written consent, which enables the exchange of information and cooperation between different professionals.

Although the IKU team is organisationally part of the services supporting integration, its client base is not limited to people with an immigrant background. The sole criterion for eligibility is that the person has been officially identified as a victim of human trafficking or that there are reasonable grounds to suspect that they have been trafficked.

Client assistance

New clients who have fallen victim to human trafficking are taken on as clients by the IKU team. The client relationship begins when a case is opened based on a notification, an application or some other form of contact. The client's residence permit or citizenship status has no bearing on their status as an IKU client. Guidance is also available in situations where a person does not wish to be formally identified. If a person is already a client of other services and suspicions of human trafficking arise there, the client will continue to use the service they are familiar with. In such cases, the IKU team can be consulted and, if necessary, asked to provide support, where possible.

Other local authorities can easily seek advice from the IKU team on matters relating to human trafficking. To this end, a dedicated consultation email address has been set up for the authorities for non-urgent matters. Vake's aim is to increase professionals' expertise in identifying victims of human trafficking in the wellbeing services county and to ensure that social welfare and health care professionals are familiar with the basic principles of assisting victims of human trafficking.

Multi-sectoral cooperation

The circumstances of victims of human trafficking can be complex and varied, so centralising services within a single team makes it possible to draw on specialist expertise and provide effective support. Multi-sectoral cooperation has proved to be an excellent way of working with victims of human trafficking. Cooperation reduces the need for outsourced services and streamlines client work by seamlessly combining expertise in social welfare and health care. The case worker is always a social worker, who determines which other professionals need to be involved in the assessment of service needs. If necessary, a social worker may request a colleague from the health care team to work alongside them, forming a partnership with, for example, a psychologist or a doctor. Joint meetings have

proved valuable for both clients and professionals. It can be difficult for a client to understand what issues are discussed at different appointments, and which matters fall within the remit of social services and which within that of health care. Joint meetings help bring the whole process together and reduce overlap. (section 41 of the Social Welfare Act.)

Family perspective

Support for victims of human trafficking is based on an understanding of the effects of trauma on the individual and their loved ones, as well as the long-term consequences that breaking free from control and exploitation can entail. Abuse tends to be passed down through the generations if left unchecked. Abuse experienced by adults can affect parenting and children's wellbeing – for example, a parent's ability to respond to a child's emotions and assess their safety in everyday life may be compromised. Human trafficking is therefore a trauma that affects the whole family. That is why the whole family needs support.

For this reason, the whole family must be taken into account in the work. This means that the situation of children of adult victims of human trafficking and their need for support must be assessed on a case-by-case basis. Individual service needs assessments are therefore carried out for children, and they are registered as clients on the basis of the assessment, where necessary. If a child is the direct victim of human trafficking or if the exploitation of a parent continues, the authorities are obliged to file a child welfare notification. In such cases, it is the duty of child welfare services to assess the child's situation and arrange the necessary support measures.

Organisation of services

Centralised services have been found to be effective, as wider expertise improves the opportunity to provide timely assistance. The low-threshold collaboration between the IKU team and the health care team eliminates the need for outsourcing. The managers of Vake's integration support services have a good understanding of the work carried out with victims of human trafficking, and social workers are supported in their work. Professionals can respond quickly and, where necessary, flexibly to situations. For outsourced services, we primarily use service providers selected through Vake's competitive tendering process, and, where necessary, bespoke solutions developed in collaboration with the contracting entity.

Sometimes situations can be tricky, and there are not always clear guidelines for everything. In such cases, solutions are discussed between the case worker concerned, their supervisor and, if necessary, the entire IKU team. A strong confidence in the case worker's assessment skills, joint discussion, and support from the team and supervisor improve the chances of finding the best possible solution for the client's situation.

If the client needs secure accommodation, the solution is tailored to the client's individual needs. During the course of the work, it may become necessary to assess the client's need to process their experiences in therapy. The need for therapy does not always become apparent straight away; it may only emerge at

a later stage of the process. Assessments of a need for therapy are always carried out in collaboration with health care services to ensure timely and appropriate care that supports the client's overall wellbeing. Support measures are also provided for children, where necessary.

Background information for health services

This form is intended for use when a client needs access to health care services and requires assistance in this regard. Fill in the form together with the client and give it to them.

You can guide the client to

- book an appointment for health care services remotely and bring the form with them to their appointment

or

- go to a clinic to book an appointment and take the form with them

Instructions for using the form

- You do not need to fill in all the fields if, for example, you do not have the information. Use the sections that are relevant to the client's situation.
- In the symptoms section, you can generally describe the client's physical or mental symptoms. You can also provide more details, for example, about the client's self-destructive thoughts, so that a health care professional can investigate the matter further.
- Under "Other relevant information", you can add details that are relevant to the situation, such as the client's family or housing situation, whether the client has a history of trauma, fears regarding the authorities or medical examinations, or whether the client is at risk of violence, etc.
- With the client's permission, you can also add your personal observations, which could be important information for a health care professional.
- You can add your own contact details, if the client agrees, so that a health care professional can contact you if necessary.
- If the client is undocumented, you can include information regarding their right to receive treatment.

Background information for health services Date _____

THE CLIENT WOULD LIKE

- a call from the health centre
- an in-person appointment
- counselling / assessment of need for psychological support
- other, specify: _____

CLIENT INFORMATION

Personal identification number (or reference number / date of birth): _____

Native language, literacy: _____

Interpreting requirements / language to be interpreted: _____

MAIN CONCERN/REASON FOR CONTACT: _____

DESCRIPTION OF SYMPTOMS: _____

FURTHER INFORMATION IF NECESSARY

Description of functional ability (e.g. physical, mental, social):

Other relevant information:

IMPORTANT TO NOTE AT HEALTH SERVICES:

Ask the client how they would like to be contacted, whether they need information about booking an appointment, or any needs regarding follow-up:

- take their level of literacy into account
- does the client use e-services?
- does the client wish to be contacted by telephone?
- is there a need for an interpreter?

Check:

- Has the client understood the plan going forward?
- Is the client actually able to commit to the follow-up plan?

(For example, do they know where a laboratory is located, can they book an appointment for further tests on their own, and is the planned treatment financially feasible, etc.)

If the client does not turn up for their appointment, call them (with an interpreter) to find out why and book a new appointment over the phone. Make sure the client understands when and where the appointment is. Send the appointment details to the client via SMS.

Resource map

stands up for themselves
desire for change
conscientiousness
dedicated
hope for the best
calm
hope for the best
positive things
is hopeful
reflection skills
wants to sort things out

diligence
motivation for change
perseverance
gratitude
self-confidence
coping
confident about the situation
shows up
mentally strong
has guts
trustworthy person
the best interests of the child
boldness
hard-working
acts in the interests of their child

willingness to communicate
tries to manage their affairs
expresses their negative feelings
capable of managing their affairs
family-centred
overcomes difficult situations
presents for the entire meeting
shows up to appointments

courage
resilience
self-reflection

kindness
hope

perseverance
brave
keeps trying
active listener
honesty

tenacity
patience
listening
dares to express their feelings

optimism
clear goals
is not afraid to challenge the social worker

Form for identifying victims of human trafficking

This form is intended for identifying victims of human trafficking as part of a client interview. The aim is not to go through all the questions, but to ask those that are relevant to the client's situation. The questions may relate to sensitive personal experiences, and answering them is entirely voluntary. The interviewer must ensure that the client feels at ease and that a relationship of trust has been established before using the form.

Arrival in Finland

- When and how did you arrive in Finland? Which route did you take?
- Did anyone organise your trip to Finland? Who and how?
- Have you (or your family) ever borrowed money from or owed money to someone who helped you travel? If you have taken on debt, have you been able to pay it off, or have you had to do something against your will in order to pay it off?

Example:

- There are situations where people have incurred debts to others for services or other reasons, and because of these debts, they may be forced to do things against their will. Have you ever experienced something like this, or do you think this could happen to you?

Working and living conditions

- Have you ever worked or done something for which you expected to be paid, but the payment never arrived?
- Did the work live up to what you were promised? Do you have a written employment contract? Do you understand the conditions of the contract?
- Has your pay been withheld, or is another person managing your pay?
- If your pay has been paid into your bank account, has someone else spent the money?
- Have you ever felt scared or unsafe at work?
- Have you been threatened at work, or has someone hurt you? Do you take breaks at work (e.g. lunch, toilet breaks)? Have you been allowed to take any breaks?
- How long are your working days usually, and how often do you have days off?
- Do you have access to health care? Are you free to leave your workplace?
- Have you ever been pressured at work to do something you didn't want to do? Physical or sexual? Have you ever had sex in exchange for something (money, food, accommodation)?
- Where do you live, and who else lives at that address? How do you pay your rent? Did you sign the tenancy agreement yourself, and do you understand what it says?

- Have you been allowed to choose freely where you live and who you live with?

Example:

- There are situations where people are tricked into accepting a job that doesn't exist, and they end up stuck in a situation they didn't want. Have you ever experienced something like this, or do you think this could happen to you?
- Sometimes, people live where they work or where their employer tells them to live, and they are not allowed to live anywhere else. Have you ever experienced something like this, or do you think this could happen to you?
- There are situations where people do dangerous or unsafe work, or remain in an unfair situation, because they are afraid that someone will harm them or their loved ones. Have you ever experienced something like this, or do you think this could happen to you?

Leisure time

- Are you allowed to spend your own money? Have you been free to choose who you have sexual relations with?
- Have you been able to keep your identity documents, or has someone taken them away from you?
- Have you been free to make your own choices about your life, or does someone else control your actions, decisions, movements, sleep, toilet breaks, personal hygiene, eating habits, and social relationships? Have you been free to choose your partner? Have you ever been afraid of your partner?
- Does your partner control your finances, behaviour, social life or movements? Has your partner been verbally or physically abusive towards you or your children?
- There are situations in which people's identity or travel documents are taken away from them. Have you ever experienced something like this, or do you think this could happen to you?
- There are situations where someone restricts a person's contact with their family or friends, or prevents them from moving about freely. Have you ever experienced something like this, or do you think this could happen to you?
- Sometimes people are forced to lie about their circumstances, including what kind of work they do, what goes on at home, or what their relationship with the person accompanying them is like. Have you ever been told that you should lie about your job, what you will be doing, or your relationship with the person accompanying you to an appointment?

How to bring up human trafficking with a client

Below is a list of different ways in which you can raise the issue of suspected human trafficking. These are examples that you can adapt to the situation on hand. Choose expressions that sound natural to you.

General approach

"I/we usually ask everyone..."

- ... have you experienced physical or sexual violence?
- ... does anyone control your life, for example, what you're allowed to do or say?
- ... do you have access to your own money?
- ... are you able to move about freely?
- ... are you afraid of someone close to you or anyone else?

Personalised approach

- "I see you may have a bit of a problem. Would you like to tell me more about it?"
- "I'm worried about you, but I can't quite put my finger on why. Is there anything I should know so that I can help you?"
- "You seem a bit down. Would you like to talk about it?"
- "You told me that you're in this sort of situation. What's bothering you? What do you think of the situation?"
- "What do you think about this?" (e.g. a suspicious work situation)

Make a generalisation

- "I have often heard that, when it comes to a client's employment contract..." → This allows you to start a conversation without the client feeling that they are alone in their situation.
- "These things can be difficult to talk about, but have you ever been asked to do something sexual that you didn't want to do?" (adult clients)
- Sharing information to serve as a basis for discussion
- Explain the phenomenon and relevant legislation so that the client feels that they are not alone in their situation.
- After providing some general information, encourage the client to talk about their personal experiences.

Give concrete examples

The client's documents (e.g. employment contract, payslip, tenancy agreement) can serve as conversation starters: "When I looked at your employment contract, I noticed that you don't have any record of your working hours, which is typical in cases of forced labour. That's why I began to wonder whether you might have been a victim of forced labour. Can we talk about this?"

Reactions and emotions

The client's emotional reaction can be a starting point for the conversation: "It occurred to me that perhaps you would like to tell me more about some incident or something else that has been on your mind?"

Explaining the seriousness of the situation

- "What you're telling me about your experiences sounds very serious and concerning. It is possible that you have experienced abuse and been treated badly. Thank you for telling me – now I can help you."
- "You told me about the way your partner treats you, and it made me worry. Can we talk about it some more?"

Recognition – Red flags

Work-related signs

- Long working days but low pay; the client cannot attend appointments.
- Vague or missing employment contract; wages are not paid.
- The employment contract looks official, but the terms and conditions are not adhered to in practice.
- Family members working in the family's own businesses are forced to work overtime without pay.

Family and social relationships

- The client is closely supervised during appointments; the person accompanying the client does not leave them alone, speaks on the client's behalf, and the client does not have a personal mobile phone; instead, matters are dealt with through their spouse or someone else.
- A significant age difference between the spouses; doubts as to whether the marriage was entered into voluntarily.
- The spouse demands details of the timing and content of the appointments, or otherwise prevents the client from attending them
- Sexual coercion; pressuring into pregnancy or an abortion.
- Sings that things are difficult at home.
- Illiterate women and girls without a male head of household are more vulnerable to exploitation.
- A disparity in educational attainment between spouses can create a power imbalance.
- Illiteracy can lead to dependence on another person.
- An uncertain tenancy; moving house/town frequently.

Financial matters

- The client does not have control over their own finances; benefits are transferred to their spouse.
- The client's bank statement shows unexplained payments, e.g. several Mobile Pay payments.
- The client is unable to apply for benefits or handle other transactions with public authorities, even though they have lived in Finland for a long time.

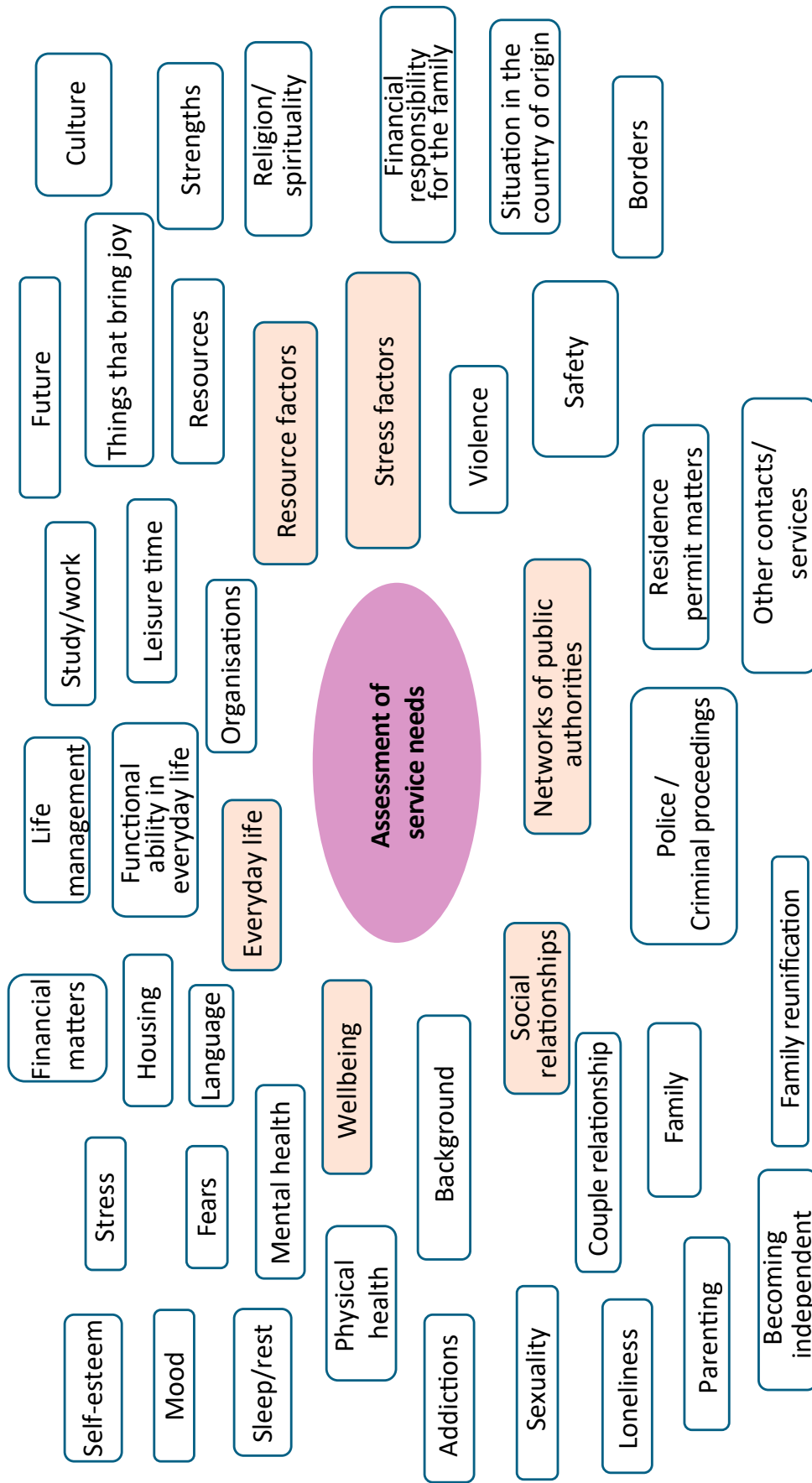
Other red flags

- The client has no idea about their situation or how they spend their money.
- Fearfulness, refusal to engage in conversation, a defensive stance.
- The client's and their children's passports have been taken from them.
- No telephone subscription; this also applies to teenagers.
- Certain routes into the country (e.g. West Africa, Italy) may leave people vulnerable to exploitation.
- Beliefs (e.g. witchcraft) can prevent people from speaking out.

Health-related signs

- Recurrent sexually transmitted diseases or abortions.
- Recurrent infections.
- Signs of violence.

Support Circle: a tool for assessing service needs and analysing the client's situation



Exercises for mindfulness and relaxation

Exercise to ground your gaze and body

Follow these steps:

1. Sit firmly on a chair. Lower your right hand, then as you inhale, raise your arm and follow it with your eyes.
2. With your hand raised, picture your favourite colour and, as you exhale slowly, imagine that you are painting waves sideways with your hand all the way down. Follow the movement of your hand at all times.

Butterfly hug

Butterfly hugging is a proven method for reducing hyperarousal.

Follow these steps:

1. Cross your arms over your chest.
2. Tap your chest gently and calmly, alternating between your right and left hand.
3. Take note of your thoughts, feelings and physical sensations. Do not try to influence them. Just let them flow.
4. Carry on for a minute, for example, or for as long as you like. Finally, take a deep breath and exhale, then let your arms drop loosely to your sides.

Source: Adapted from Lyytinen & Pääkkönen, 2022

Diaphragmatic breathing

Diaphragmatic breathing is a good relaxation technique. Simply becoming aware of and engaging your diaphragm can be enough to alleviate feelings of anxiety, for example. With diaphragmatic breathing, the abdomen rises as you inhale and falls as you exhale. The lungs fill with air right down to the bottom. Breathing anchors you to the moment.

Follow these steps:

1. Get comfortable but do not cross your legs.
2. Place one hand on your chest and the other on your stomach.
3. Breathe in and out slowly.
4. Try to ensure that only the hand resting on your stomach moves as you breathe. Your chest should not move.
5. Focus your attention on your breathing, and continue breathing like this for a moment.

Focus on counting your breaths: in for 1, out for 1, in for 2, out for 2, and so on.

Focus on counting your breaths to ten without speeding up your breathing. If you lose your concentration, start again from the beginning and take it slowly. There is no rush.

Source: *Mielenterveystalo: 7. Diaphragmatic breathing | Mielenterveystalo.fi*
<https://www.mielenterveystalo.fi/fi/omahoito/mielen-hyvinvoinnin-omahoito-ohjelma/7-palleahengitys> (in Finnish)

A video of the exercise is also available on the website.

Mindfulness exercise for three senses

The aim of mindfulness exercises is to calm the mind, learn to recognise one's own feelings, thoughts and sensations, and accept them as they arise in the present moment.

Follow these steps:

1. Get comfortable and focus on your breathing. Breathe in and out calmly through your nose. Relax your face and neck. If your mind wanders, simply acknowledge it and gently bring your attention back to your breathing.
2. Focus on a specific object in front of you. Pay attention to its colour, shape, design, light and shadow. Name the thing you see.
3. Close your eyes if you like. Listen to a sound around you and focus on it without rushing. Name the sound and identify whether it is high or low, and whether it is coming from near or far.
4. Next, focus on sensing your body and identify a sensation within it. What do you feel? Pay attention, for example, to muscle tension, your heart rate, the feel of your clothes against your skin, or any other sensations. Name the sensation. Accept even unpleasant feelings just as they are.
5. Take a few calm, deep breaths in and out, letting yourself relax. Open your eyes when you are ready.

Source: *Source: Adapted from the Finnish Student Health Service, Sensory Exercise – FSHS* <https://www.yths.fi/en/services/groups-and-virtual-courses/mental-health/stressless-coaching-course/sensory-exercise/>

TIPP skills for emotion regulation

TIPP skills refer to four techniques for regulating strong emotions. The aim is to influence emotions through bodily sensations. The acronym TIPP stands for temperature, intense exercise, paced breathing and paired/progressive muscle relaxation.

Temperature control

Even brief exposure to cold or hot temperatures is enough to have a calming effect on one's emotional state.

Cold temperature

- For example, a cold shower, briefly immersing your hands or face in cold water, dipping in an ice hole, or holding an ice cube in your hand

Warm temperature

- For example, a warm bath or shower, a hot cup of tea, a heating pad or sauna

Intense exercise

A heart-pumping, breathless workout can trigger a sudden and intense rush of emotion. Often, just a few minutes of exercise are enough.

- For example, running up the stairs, a sprint, skipping with a skipping rope, jumping jacks

Paced breathing

Paced breathing helps with difficult and intense emotions. In practice, this means breathing in slowly and deliberately through your nose and out through your mouth.

For example, count to five as you inhale, hold your breath and exhale. As the exercise progresses, your exhalation should become longer than usual.

Paired/progressive muscle relaxation

Paired/progressive muscle relaxation helps the body to relax. The body is relaxed by tensing and relaxing each of the 16 different muscle groups in turn for 5–10 seconds. You can do this exercise lying down or sitting up.

To start with, you could try relaxing the muscles in your lower body and then those in your upper body. After tensing and relaxing your muscles, you can tell your body, either out loud or in your mind, to relax. The idea is that once you have done this exercise enough times, your brain will remember the command without you having to tense your muscles.

Instructions and videos for the exercise are available on the website of Mielenterveystalo:

8. Relaxation and breathing exercises | Mielenterveystalo.fi
<https://www.mielenterveystalo.fi/fi/omahoito/mielen-hyvinvoinnin-omahoito-ohjelma/8-rentoutus-ja-hengitysharjoituksia> (in Finnish)

Source: Mielenterveystalo; Youth Mental Health Association Yeesi, 2025

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