An overview of Methodology development and exchange of best practices on voluntary return assistance in the enlarged European Union with particular emphasis on vulnerable asylum seekers
Editorial note

This overview is published in the framework of the project “Coping with Return: Methodology development and exchange of best practices on voluntary return assistance in the enlarged European Union with particular emphasis on vulnerable asylum seekers”.

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The Coping with Return participating countries to the project are Austria, Belgium, the Czech Republic, Cyprus, Estonia, Finland, France, Hungary, Ireland, Latvia, Lithuania, Malta, Norway, Poland, Slovakia, Slovenia, United Kingdom, Switzerland and the Netherlands. IOM in the Netherlands would like to thank all the participating countries for their project activities, as well as the delegates to the conference of Coping with Return for sharing their insight with us. IOM in the Netherlands also extends its gratitude to the different key-persons in Austria, Belgium, the Czech Republic, Hungary, Ireland, Slovakia, IOM Geneva and colleagues from IOM the Netherlands who were willing to cooperate in the research phase.

IOM is committed to the principle that humane and orderly migration benefits migrants and society. As an intergovernmental body, IOM acts with its partners in the international community to: assist in meeting the operational challenges of migration; advance understanding of migration issues: and uphold the human dignity and well-being of migrants.

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Executive Summary

The project *Coping with Return* aimed to contribute to the joint efforts by the enlarged EU in facilitating the sustainable return of asylum seekers through an integrated approach to voluntary return, with particular emphasis on vulnerable groups of migrants. It is particularly relevant to people who work with groups of vulnerable asylum seekers, such as unaccompanied minor asylum seekers, victims of trafficking, and returnees with health problems or asylum seekers who stayed in host countries for a long time. Another objective is to create synergy between and within the EU Member States, especially taking the ‘new’ EU Member States into account that actively pursue strengthening of their voluntary return mechanisms. The project offers recommendations that can contribute towards the harmonization of approaches and the development of common standards in voluntary return assistance and counselling within the European Union in the shape of this manual. The manual is based on information which resulted from the working conference held on 7 and 8 November 2005 in Amsterdam, the Netherlands - which brought together over 70 return counsellors and delegates from ministries and NGOs from 19 European countries - and the outcome of 120 counselling case studies carried out during a 10-month research phase in seven different EU Member States: Austria, Belgium, the Czech Republic, Hungary, Ireland, Slovakia and the Netherlands. In addition the participating states could exchange information on assisted voluntary return and return counselling through the website of *Coping with Return*.

Chapter I will inform the reader of the conditions and setting of the project which resulted in this handbook by explaining the methodology, definitions and institutional framework used. Chapter II will detail the pre-departure counselling stage with additional emphasis on unaccompanied minors, returnees with health problems, as well as the victims of trafficking. The chapter provides both the view from the return counsellor and the returnee’s perspective. Chapter III will compile the best practices and recommendations that resulted from the working conference and the research period. These will be exemplified in Chapter IV by case studies performed in Austria, Belgium, the Czech Republic, Hungary, Ireland, the Netherlands and Slovakia. Chapter 5 concludes this manual with an overview of recommendations for counselling.
Introduction

The project *Coping with Return* intends to address various issues how to provide return counselling to asylum seekers in order to facilitate their sustainable voluntary return. This question is of remarkable concern to all those whose daily work involves asylum seekers. It is particularly relevant to people who work with groups of vulnerable migrants, such as unaccompanied minor asylum seekers (UMA), victims of trafficking (VoT), and returnees with health problems or asylum seekers who stayed in host countries for a long time. The project’s target group therefore consists of (unsuccessful) asylum seekers considering a return to their country of origin and in need of special support/assistance, as well as intergovernmental organizations, missions, non-governmental organizations (NGO) and other partners (including return counsellors), who provide assistance to and/or work directly with these groups of asylum seekers.

The project furthermore aims to facilitate exchange of good practices and the development of a methodology for an improved integrated approach to voluntary return among the EU Member States. The Action Plan of 2005, which sets out a policy framework for the European Union activities on freedom, security and justice over the next five years, underlined the need for an integrated approach on AVR at EU level, as well as several Communications of this year.¹

Working experiences reveal that the earlier the information and counselling on return opportunities is provided, the better assisted voluntary return (AVR) can be carried out, since it helps asylum seekers during the decision-making process on whether or not to return. The decision to return can be a difficult step to take for asylum seekers, especially after a long asylum process. Vulnerable groups that wish to return have particularly complex problems and require special attention. Several EU Member States already have considerable experience in voluntary return counselling and preparation, particularly concerning vulnerable groups. There have been efforts and initiatives to strengthen cooperation among partners involved in the support of country-specific returns or caseload specific returns. In parallel, much attention has been paid to return counselling and information activities as a way to facilitate a more humane, effective and sustainable return. Many of such initiatives have also been supported by the European Refugee Fund National programs in recent years.

The following council decisions which stress the relevance of the project, were considered during the Council Meeting of Justice and Home Affairs on voluntary return which was held in Luxembourg on 12 October 2005:

> Return management is an essential element of a comprehensive approach to the efficient management of migration flows. Furthermore, within the broader framework of a coherent migration policy, it can prove beneficial to the host country, the country of return and the persons concerned..... Voluntary return, carried out in conformity with obligations deriving from applicable international instruments, is the assisted or independent departure to the country of return based on the will of the returnee and his/her informed decision to return. In addition to general voluntary return programs, there can be significant added value in establishing programs tailored to the circumstances and needs of specific categories of persons, in particular those who are deemed to be more vulnerable or with other special needs.

In addition to the abovementioned council decisions, the Finnish Presidency also underlines this item on their agenda during the second half of 2006.² During its Presidency Finland referred to the Hague Program adopted by the European Council of November 2004 that strove for a comprehensive

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approach, involving all stages of migration, with respect to the root causes of migration, entry and admission policies, and integration and return policies. This approach was also underlined by the preceding UK Presidency during the second half of 2005. The Finnish Presidency’s objective is to provide further guidance to the Hague Program and to reinforce justice and home affairs cooperation in the spirit of Tampere.

In the light of the European Council decisions, the 2006 Finnish Presidency and the need for harmonization and cooperation in the field of the counselling of vulnerable groups throughout Europe, the project Coping with Return has published this manual and overview to provide tools for the counselling of returnees and methods of offering voluntary return assistance. Since many countries are involved each of which employ different approaches and which have learned different lessons, the handbook does not offer a single methodology or best practice. Each best practice approach can have flaws and may not be applicable in a different setting or country. Due to the mixed set of ‘old’ and ‘new’ Member States with different AVR programs and constraints to tackle, no individual return counselling can be nominated as the best practice. Extensive pre-departure counselling components have been elaborated on and will be put forward as recommendations and guidelines in this handbook.
I  Coping with Return: project information, terminology and methodology

To inform the reader on the conditions and setting of the project which resulted in this handbook it is useful to first explain the methodology, definitions and institutional framework used within the scope of the project.

1.1  Project description and methodology

The project *Coping with Return* aimed to contribute to the joint efforts by the enlarged EU in facilitating the sustainable return of asylum seekers through an integrated approach to voluntary return, with particular emphasis on vulnerable groups of asylum seekers. Building on, and corresponding to, efforts and initiatives at a national level, the project facilitated a well-structured exchange of best practices in return counselling, the development of a methodology tested by a specialized format and applied research based on 120 return cases. The concrete results of the project included this handbook on voluntary return counselling and service provisions with specific emphasis on vulnerable groups. Particular attentions were placed on the development and harmonization of practices and methodologies between the old and new EU Member States participating in this project. The project was implemented thanks to close cooperation with the relevant national authorities and partners who work with asylum seekers and aimed to strengthen their capacity for Assisted Voluntary Return counselling and practices. This publication is based on the outcome of the working conference, the exchange of best practices in return counselling through the applied research based on 120 return cases and information shared on the website of *Coping with Return*.

The project coping with return consisted of the following activities:

- The working conference which was held on the 7 and 8 November 2005 in Amsterdam, the Netherlands which brought together over 70 return counsellors, delegates from ministries and NGOs from 19 different European countries. The agenda of the working conference was composed in such a way that it served as an incentive for dialogue on best practices in the countries present at the conference. The conference was a starting point for providing details on each other’s skills and experiences in dealing with the specific bottlenecks or return-related problems of asylum seeker methodologies. The working conference produced a compilation of examples and recommendations on best practices and lessons learned in relation to AVR and the counselling of vulnerable groups. This compilation of examples and recommendations constituted the basis for this practitioner’s handbook;
- The website was launched at the conference and it was created in such a way that participants could share advice and information on AVR and counselling using its forum;  
- During the research phase, 120 case studies were performed to compare AVR approaches in ‘old’ and ‘new’ EU Member States;
- The handbook is a compilation of the abovementioned details.

The varied mix of participating countries was, on the one hand, a refreshing and stimulating bonus, whilst at the same time presenting a challenge when it came to discussing pioneering approaches

3 Austria, Belgium, Czech Republic, Cyprus, Estonia, Finland, France, Hungary, Ireland, Latvia, Lithuania, Malta, Norway, Poland, Switzerland, Slovenia, Slovakia, United Kingdom and the Netherlands.
4 The website or extranet of *Coping with Return*: www.iom-nederland.nl/extranet with a username and password
in the field of return, which are not employed or even discussed in all the participating countries. The combination of over 70 representatives from 19 different countries, some with the oldest return programs in Europe and representatives of new EU Member States with return programs, which may be relatively new, produced an inspiring and fruitful meeting replete with discussion and dialog. However, from a strictly methodological point of view, this variety of experience partially limited the scope for comparison and the extraction of overall conclusions on best practice. Workshops were held to develop recommendations on how to improve assistance to and the approach to assisted voluntary return counselling for specific vulnerable groups, such as unaccompanied minors, victims of trafficking and returnees with health problems. A workshop was also held on equipping third parties to cope with return, how to initiate the discussion on AVR and how to instruct third parties on return counselling of vulnerable groups. The workshop recommendations will be highlighted in Chapter III.

It should be kept in mind that there is a great variety of experience which is influenced by diverse national policies, AVR programs and the cooperation of actors in the field of migration per country. This publication, ‘Coping with Return’, should therefore be regarded as but one of many steps to be taken by governments and NGOs towards finding common ground and learning from one another in the field of AVR.

1.2 Institutional framework

IOM, as the executing agency, was responsible for overall project management. Within the network of IOM offices, IOM the Netherlands was the main party managing the project and it coordinated all the project activities in close cooperation with the IOM offices in the participating countries. These were in charge of coordinating activities with partner agencies and ministries at a national level. Partner agencies such as NGOs, IGOs and the relevant authorities in the participating countries, provided their expertise and experiences. They were involved in the working conference, the applied research and participated in the active and continuous information exchanges through the website dedicated to the project.

1.2.1 Coping with Return project partners

- The Netherlands: NIDOS (Legal Guardianship Office for Minor Asylum Seekers & Refugees)
  - COA (Central Organ for the Reception of Asylum seekers)
- Belgium: CAW, Adviescentrum Allochtonen, Oostende
  - Solidarité Socialiste, Brussels
  - FEDASIL
- Austria: Caritas Vienna
- Ireland: Department of Justice, Equality and Law Reform, Dublin
  - Sir Patrick Dunn’s Hospital Team for Separated Children Seeking Asylum
    - Health Service Executive
- Hungary: Menedék Hungarian Association for Migrants, Budapest
- Czech Republic: Ministry of the Interior, Asylum and Migration Department, Prague
- Slovakia: Migration Office of Ministry of Interior of the Slovak Republic
- Slovenia: Ministry of the Interior, Migration’s Directorate, Asylum section
- Cyprus: Ministry of the Interior, Asylum Service, Cyprus
- Malta: Emigrant’s Commission, NGO, Valetta

Geographical coverage: Austria, Belgium, Cyprus, the Czech Republic, Estonia, Finland, France, Hungary, Ireland, Latvia, Lithuania, Malta, Poland, Slovakia, Slovenia, the United Kingdom and the Netherlands. Switzerland and Norway (participated but were not funded by the Commission).
The research phase was carried out in Austria, Belgium, the Czech Republic, Hungary, Ireland, Slovakia and the Netherlands and, alongside information sharing at the conference and on the website, entailed the actual testing of return counselling approaches over a 10 month period.

1.3 Terminology and definitions

Before discussing the return counselling activities and the institutional frameworks of AVR in the participating countries, the underlying terminology will be defined in order to clarify the common ground and points of departure.

1.3.1 Assisted voluntary return (AVR)

The IOM definition of AVR reads as follows: Assisted voluntary return can generally be described as the assistance (such as finance, transport, travel documents, reintegration) offered to a returnee for the voluntary return, by a Member State and carried out by a third party such as an international organization. AVR is always based on the returnee’s voluntary decision. This voluntary decision consists of two elements: first of all, freedom of choice, which is defined by the absence of any psychological, physical or material pressure. Secondly, it is an informed decision which comprises the concept of having sufficient, correct information available on which to base the decision to return. AVR also offers host countries an alternative to costly and unpopular forced repatriation operations.

IOM policy directions on the implementation of voluntary return are enshrined in three IOM Council documents to ensure humane and orderly movement of migrants.5

1.3.2 Return counselling

Return counselling is a relationship between the returnee and those who provide return counselling which normally begins with the returnee exploring the way he/she feels about return, the pre-departure process and reintegration. The returnee determines and declares to the return counsellor and visa versa which steps need to be taken to carry out the return process. Return counselling is performed by means of conversations based on posing questions and making statements, but also through the sharing of information on return. Both aspects are essential to provide returnees with the tools required to make a decision. This makes counselling a communication/conversation method that enables returnees to gain insight into their situation and which tries to avoid imposing constraints on the making of an independent and realistic choice whether or not to return.

The definition of return counselling during AVR in this manual does not refer to therapeutic or health counselling. Return counsellors should avoid becoming involved in those types of therapy during AVR counselling. It also does not include legal counselling.

The return counsellor helps the returnee to set the goals that pave the way for return and reintegration, provides information on available return assistance and return-related information on the countries of origin. If needed targeted assistance can be offered since unaccompanied minors, the victims of trafficking, single parents and returnees with health problems often need additional support for a sustainable return. It should also be noted that in considering their options for return assistance, VoTs need to first undergo a full risk assessment before details of assistance are discussed. The best interest of the child should also be considered for UAMs. The return counselling

process cannot be successful if any of the available options were not discussed with the potential returnees. It should imply counselling on AVR. It is better for return counsellors to focus on return than it is for them to justify the potential returnee’s staying on in the host country.

1.3.3 Vulnerable groups

For the purpose of this project, among many possible vulnerable groups, the following groups were focused on; unaccompanied minors, victims of trafficking, elderly people, persons with health problems and single parents. All these migrants are perceived as vulnerable groups.

1.3.4 Best practice

Best practice is the method that has shown, through applied research, evaluation and implementation, to be successful and sustainable. These approaches also provide good, appropriate results that can be adapted to different situations and case studies. No model or approach can be entirely copied or shared as a result of different national settings, such as relevant regulations, policies, caseload of vulnerable groups and sponsors. Each approach or model of best practice can have weaknesses and may not be applicable in a different setting or country. Due to the mixed set of various AVR programs and constraints to address, no return counselling approach can be singled out for a best practice. As a result extensive components and context of pre-departure counselling were therefore elaborated on, together with some case studies, before recommendations are put forward in this manual.

1.4 Background

The question of how to prepare and provide return counselling to asylum seekers in order to facilitate their sustainable voluntary return is of significant concern for all actors involved with asylum seekers as part of their daily work. This is particularly true for those who work with vulnerable asylum seekers. Experience shows that the earlier information and counselling on return opportunities is provided, the better voluntary return assistance can be, since it helps asylum seekers to make informed decisions on return and prepares them for it, as recommended by the relevant Communication on a Community Return Policy on Illegal Residents (COM, 2002). Return can be a difficult step to take for asylum seekers. Moreover, returning home after a sometimes long asylum process is not an easy step to take.

PHASES IN RETURNING:
Generally asylum seekers go through the following phases in returning to their countries of origin:
I. At a certain point, the lack of future perspectives of the (often already rejected) asylum seeker in the host country are discussed;
II. The returnee then realizes and considers that returning to his/her country of origin is the most feasible option and many of them will contact actors in the field of migration;
III. The pre-departure process will be set up by the return counsellor. The returnee will talk about his or her wishes and circumstances. Potential constraints to return will be discussed and tackled. Solutions and advice will be shared and implemented as much as possible, in particular for vulnerable groups;
IV. Actual return takes place.

The process that precedes actual return i.e. the discussions on the future perspectives in the host country, the analysis of specific problems in the context of return, concrete preparations for return and the prospects for sustainable reintegration in the country of origin pose an additional challenge

to return counsellors assisting asylum seekers. This handbook will mainly focus on the first three phases.

Many EU Member States, along with neighbouring European countries, have policies and programs in place under which asylum seekers receive financial and organizational assistance in order to return voluntarily to their country of origin. In some countries, further assistance is provided in the shape of help with the first reintegration steps after return. These return assistance programs are carried out by various organizations, including IOM, in the countries concerned. These organizations provide transportation arrangements, departure assistance and documentation assistance as well as return counselling activities. Non-governmental organizations are also often involved or are in close contact with the asylum seekers. The report published recently entitled ‘Return Migration - Policies & Practices in Europe’ (2004) provides an overview of the existing programs in all 25 EU Member States, Norway and Switzerland\(^7\) and the various actors involved in the process of managing returns. In this context it is important to emphasize the essential nature of cooperation between the relevant authorities, international organizations, NGOs, local entities, return counsellors and others (e.g. lawyers, interpreters) involved in assisting asylum seekers in both the host nation and the country of origin.

This project addresses the need for exchange of experiences and existing methodologies on voluntary return counselling and preparation, particularly with regard to vulnerable groups. Several EU Member States already have considerable experience with this. There have been efforts and initiatives to strengthen cooperation among the partners involved in support of country specific returns or case-load specific returns. In parallel, much attention has been paid to return counselling and information activities as a way of facilitating more humane, effective and sustainable returns. Many of such initiatives have - in recent years - also been supported by the ERF National programs. Some exchange visits and good practice exchange have taken place at a bilateral level.

In many of those initiatives IOM has been working in close cooperation with NGOs, legal guardian organizations and refugee councils in order to deal with return in the best interest of the individual asylum seeker who may find him/herself in a difficult situation. The cooperation methods differ from one country to the other, but the problem – particularly with regard to unaccompanied minors - is widely recognized and cooperation considered essential. The stock taking and lessons learned in some of the EU Member States have to be translated into advice on best practices and methodologies. This consolidation is of importance for both the further development of return counselling as well as for countries and organizations only just starting out with AVR programs. New EU Member States have been making an effort to start voluntary return programs or strengthen them, especially as several of the new Member States expect an increase in asylum applications. Many of them are also keen to improve and expand the existing programs through an integrated approach.

THE EUROPEAN COUNCIL AND AVR
As outlined in the introduction to this handbook, AVR and counselling were important topics at the Council Meeting of Justice and Home Affairs in Luxembourg on 12 October 2005:

‘Voluntary return is an important component of a balanced, effective and sustainable approach to the return and, where applicable, reintegration of unsuccessful asylum seekers, individuals currently in the asylum or international protection system but wishing to return, and other migrants. Such a balanced approach needs to include the prospect, where appropriate, of enforced return. More broadly, effective immigration and asylum policies which are compatible and complementary to applicable capacity building and development assistance programmes in countries of return can help strengthen the sustainability of voluntary returns operated by Member States. Further-

\(^7\) “Return Migration - Policies & Practices in Europe” (2004), The International Organization for Migration and the Advisory Committee on Aliens Affairs, the Netherlands, commissioned and co-funded by the Advisory Committee on Aliens Affairs, the Netherlands, published by IOM, Geneva.
more, strengthened cooperation between the host country and the country of return, as well as with relevant international organizations and nongovernmental organizations, where considered appropriate by Member States, can contribute substantially to the success of voluntary return programs. Voluntary return, carried out in conformity with obligations deriving from applicable international instruments, is the assisted or independent departure to the country of return based on the will of the returnee and his/her informed decision to return. Voluntary return can be most effective where its scope covers a wide range of third country nationals wishing to return home. This may include, without prejudice to the applicable rules under national legislation, unsuccessful asylum seekers or those awaiting a final decision, those with a temporary protection status and, where applicable, illegally staying third country nationals and/or legal migrants. In addition to general voluntary return programmes, there can be significant added value in establishing programmes tailored to the circumstances and needs of specific categories of persons, in particular those who are deemed to be more vulnerable or with other special needs. Tailor-made programmes might also be envisaged for certain destination countries. Programmes that assist the voluntary return of qualified and skilled persons, as well as those which include labour market oriented training for unskilled persons immediately following their return, can contribute to the development and reconstruction of countries.

Given the importance of these issues to the operation of effective policies on return at national and EU level, as well as in respect of immigration and asylum more generally, the Council invites the appropriate bodies to further examine these matters, in particular with a view to: facilitating the exchange of best practice between Member States, including the promotion and effective implementation of voluntary return programmes as a suitable alternative to forced return. Secondly to identify opportunities to strengthen practical cooperation between Member States and relevant third countries, international organizations and non-governmental organizations, where considered appropriate by Member States, including through joint projects, research and evaluation; and thirdly to make maximum use of the possibilities afforded under appropriate Community funding programmes in support of the above.”

The European Council underlines the fact that there is a need to create effective policies on AVR at a national and EU level. Indirectly this will also entail harmonization of return programs and counselling structures, as well as synchronized cooperation between actors in the field of migration.

The project Coping with Return presents a compilation of the existing return counselling approaches in ‘old’ and ‘new’ EU Member States. It also highlights several AVR best practices from the Member States participating in this project as an example for information sharing with the actors involved with vulnerable migrants in their daily work.
II Coping with Return: return counselling and vulnerable groups

Chapter II elaborates on pre-departure counselling. This chapter touches on the role of the return counsellor, types of return counselling situations as well as the push and pull factors for return the return counsellor should be aware of. The chapter also describes in further detail the return counselling of unaccompanied minors, returnees with health problems and victims of trafficking.

2.1 Pre-departure return counselling

Pre-departure orientation often begins at the moment the returnee has developed to an extent an idea to return to his/her country of origin. Counselling is performed through personal interviews and general information seminars. Both aspects are important to help assist potential returnees. One could define return counselling as a methodology for interviewing and assisting a returnee to envisage his or her situation. It should help the returnee to overcome difficulties or obstacles in this process.

This way returnees can make realistic and independent decisions before their return. The return counsellor can contribute to alleviating the difficult conditions facing the returnee who may be unable to reside in the host country and wishes to return home. Furthermore, the return counsellor tries to assure that the returnees’ human rights are respected throughout the return process. However, IOM for example is not able to provide legal or health counselling and this should not be expected. This should be done by other actors in the field of migration that play an important role during the pre-departure process.

There are different phases during pre-departure counselling, which were identified during the research period:

- Getting acquainted/first impression;
- Make someone feel at ease by informing the returnee of the role of return counsellors (e.g. NGO or intergovernmental organization and setting the potential returnees at ease);
- Providing information on actual assistance (e.g. travel documents), the actual return and reintegration options, etc.;
- The clarification of the constraints on and options for return or resettlement.

As discussed at the working conference, the return counsellor may need to address the following questions during the return counselling: What is the exact role of return counselling and what are the potential constraints of return counselling? How do you get people to trust you? How do you ensure that you draw your limits and boundaries in the return counselling process, ensuring appropriate onward referrals if necessary? What are the reasons for the returnee to actually decide to return voluntarily? Should the return counsellor think of special push factors we can elaborate on or are there any special benefits which the returnee can be offered? How actively should possible returnees be approached? The role of the return counsellor needs to be outlined to answer to these questions.
2.2 The return counsellor’s perspective

During the pre-departure counselling period a return counsellor tries to lead the conversation in such a way that he/she obtains as much information as possible on the returnee’s current situation. During this phase the return counsellor will also share information that could address obstacles to return for the potential returnee. Furthermore the return counsellor could also refer the person to other organizations that deal with vulnerable returnees to address specific needs of the person as identified during the counselling. Counselling is better provided according to the current situation of the potential returnees, as well as by the competences of the return counsellor in this specific situation.

While informing persons about their return, a return counsellor should treat the returnees with dignity and without prejudice, no matter what their background or religion is. The most efficient return counsellors are often people who, next to the knowledge and competences in the field of migration, are also aware of their own principles and values. To have knowledge of several cultures, languages and religions and to master several interviewing techniques is of little value if the return counsellor does not explore his or her own attitudes and expectations and is not aware of the influence these elements have on their counselling. The return counsellor should not use his own references to understand the client. The return counsellor has competences, attitudes, knowledge and skills that are influenced by a person’s character.

THE FOLLOWING CHARACTERISTICS ARE IMPORTANT AND OF INFLUENCE DURING RETURN COUNSELLING:
- The return counsellor’s consciousness of his/her own presumptions, principles, values and preconceptions, which might differ from the returnee’s;
- The return counsellor’s acceptance that possible returnees have a point of view different to their’s;
- The skill to apply return counselling strategies and techniques during return counselling, to obtain as much information as possible from the returnee and to keep the counselling effective.

THE FOLLOWING RETURN COUNSELLOR COMPETENCES WERE FOUND TO BE IMPORTANT DURING THE COPING WITH RETURN RESEARCH PHASE:
- To explain what kind of assistance the return counsellor can provide to each individual returnee;
- To be realistic and transparent, and to explain the framework of the organization the return counsellor works for;
- To be informed on the general situation in the home country;
- To speak foreign languages and to decide when to ask for a translator;
- To have skills to provide topics of conversation that play a role in return;
- The competence to put aside their own prejudices;
- To interpret body language, but also to interpret fears and anger;
- To show general respect to the client and respect the choices the client makes;
- To build a climate of trust with the client;
- It is important that the return counsellor is aware of the actors in the field of migration and the options as outlined in Paragraph 2.3. Proper knowledge of the other actors in the field enables the return counsellor to provide better information and assistance to the returnee.

The return counsellor competences, attitudes, knowledge and skills are of great influence during the return counselling sessions. This enables reasons for return, push and pulls factors and constraints to be conveyed thoroughly and efficiently in order to arrange a sustainable return through AVR.
2.3 Counselling situations: four examples

There are four types of return counselling situations as outlined in illustration 1.8

I. INSTRUCTIONAL PHASE
First of all there is the directive situation when a person does not want to return and cannot return. Still the return counsellor could discuss why a person does not wish to return home. In this case a return counsellor may provide some guidance regarding potential assistance—how constraints and obstacles during the pre-departure stage could be addressed and provide general information on AVR, without employing any form of persuasion.

II. CONSULTATION PHASE
The second counselling situation occurs when a person would like to return but is unable to do so, for example due to a lack of travel documents. A person can also belong to a vulnerable group and therefore require extra help in advance, during the trip or upon arrival. A return counsellor will first try to find out why the returnee cannot return and how they can cope with the constraints that prevent their return. Listening, advising and helping the returnee to understand the options for a quicker return.

III. MOTIVATIONAL PHASE
The third situation might occur when people are able to return, but prefer to stay in the host country. This situation often occurs when a person receives a negative asylum decision after residing in the host country for many years. During this phase the return counsellor may discuss potential assistance and provide general information on AVR. Some people who do not want to return to their country of origin might however see a return counsellor and decide to return after all.

IV. DELEGATION AND SUPPORT PHASE
The fourth situation may be relatively easier vis-à-vis provision of return counselling. The returnee is motivated to start the pre-departure phase without further major obstacles to delay the return. The return counsellor can on the whole help to organise the return and support the returnee with the best reintegration options.

Coping with Return focused on the consultation phase and delegation phase, as the project only concerns voluntary return. However, people in the first or third situation might visit a return counsellor due to pressure from people around them. Although a person does not consider returning, he/she might want advice on voluntary return and visit one of the actors in the field of return counselling.

Illustration 1

Return counsellors in the participating countries drew attention to the fact that there are important considerations and elements that can influence referrals and return counselling during the consultation phase and support phase which the return counsellor should keep in mind:

- The motive for return;
- The number of family members (individual, group or family);
- Consensus or lack of it within the family about the decision to return;
- Length of stay in the host country;
- Level of integration [employment situation, relations with local population, etc.];
- The emotional connections and relationships formed before and during the departure;
- The perceptions or attitudes of the host societies toward migrants;
- The migration policy of the host country;
- Special assistance that can be offered to returnees and vulnerable groups in particular;
- Linguistic and cultural familiarity of the return counsellor with the client's background.

During the pre-departure phase return counsellors try to clarify the needs of the returnee and their families, depending on which counselling situation they are in, especially if a person belongs to a vulnerable group. Expectations can be clarified by outlining Specific Measurable Achievable Realistic and Timely Goals to clearly indicate what the return counsellor can offer and what the returnee can expect.

Furthermore the current reintegration options in the home country should also be analyzed. During pre-departure counselling the return counsellor will have to provide objective and accurate information on the situation in the home country which provides the beneficiary with best informed choices possible with regard to return. However, it may be a difficult objective for a return counsellor to have up to date information on the country. It is especially risky to try to guarantee that the information shared is correct for countries undergoing instabilities. Naturally, international organizations, such as Caritas, Cordaid, the Red Cross and IOM which are involved in counselling should strive to exploit their network of foreign missions to provide general country information. Return counsellors from different organizations involved in pre-departure counselling could also benefit from sharing country information and reintegration options with one another to provide as many reintegration options as possible to the returnee. Nevertheless, a returnee can derive no rights from this information as far as the safety of their return is concerned. For example many NGOs involved in the return process do not provide protection.

Concerning information sharing, IOM has a network of 291 field locations in over 120 countries around the world which enable it to collect data regarding socio-economic conditions in countries of origin, as well as realistic options for education or employment assistance. This information should be shared with return counsellors. Understanding these factors allows return counsellors to find out the individual's level of decision making capacity so as to assess the reasons pushing the applicant to return. In the Netherlands, IOM is implementing a return project involving so-called native return counsellors. These return counsellors share a similar background as the returnees.
The advantages of native return counsellors include the ability to:
- overcome language barriers;
- overcome cultural barriers;
- try to create a climate of trust and understanding.

The information on assisted voluntary return options should be made available to migrants as early as possible in the process. The discussion on the future as an individual project can be used as initial contact. It should be followed-up by more concrete information on the AVR option and the possible reintegration assistance schemes. A large number of counterparts are directly or indirectly active in the process of voluntary return counselling, and so the counselling process does not belong to a specific counterpart. Cooperation between the organizations involved is of vital importance to provide consistent approaches to facilitate voluntary and sustainable returns. Examples from IOM district officers in the Netherlands or NGO partners in Belgium highlighted the various possible approaches.

Illustration 2 indicates the various actors in the field of the pre-departure phase that are of assistance to and influence the returnee. This illustration is in random order and some of the actors mentioned who are involved could influence the pre-departure phase in different kinds of ways per potential returnee. Therefore cooperation between the different actors is vital when it comes to information sharing and providing the assistance the returnee needs, to maximize an integrated approach to facilitate sustainable return.

The workshop at the Coping with Return conference also underlined that besides return counselling it is also worthwhile informing return counsellors who work for other NGOs about your work. Throughout the discussion with other parties active in the return process the reality of illegality should be underlined as well as the positive aspects of return to the country of origin. Instead of working separately it is better for the various organizations to gather and discuss ways in which to deal with pre-departure counselling. Returnees are influenced by many factors in their environment as outlined in illustration 2. For the group of actors involved it is important to know which factors influence the decision making of vulnerable returnees. Cooperation is therefore important to provide a single coherent signal. It is also important to discuss all the advantages and disadvantages with the returnee. The latter should be discussed from the returnee’s point of view as well as from
the return counsellor’s point of view. Of course, all participants should opt for voluntary return in an orderly and humane way within the best interest of the returnee in mind, especially when they belong to a vulnerable group.

2.4 Push and pull factors that could influence the returnee’s decision making and counselling methods

After the research phase, the following topics were found to be common push factors within the participating Member States, and pull factors in the countries of origin which could influence the counselling sessions and methods for approaching returnees. It is important to stress that the decision to return to the country of origin can be determined by a combination of various push and pull factors. Some examples of each category distilled from the research phase include:

**PUSH FACTORS**
- Returnees often visit return counsellors to file an application for Assisted Voluntary Return, after they have already received a denial of refugee status and their reception facilities come to an end;
- The prolonged waiting period for asylum requests leads many people to file requests for Assisted Voluntary Return when their status has not yet been decided by the authorities. Long periods of uncertainty create mistrust and a feeling of depression which can eventually lead to a voluntary return application. The responsibility of return counsellors is to analyze the applicant’s situation;
- The political climate of the host country can also cause returnees to decide to return;
- Returnees may feel lonely in the host country. They may lack social contacts with people from the same culture and with people from the host country (e.g. due to language barriers);
- Sometimes voluntary return requests come from recognized refugees or persons with residence permits issued on humanitarian grounds, who do not have problems with legal residency and have the right to live and work in the host country. The return counsellor in this case should be careful to make sure that the migrant has made a properly informed choice. These are generally individuals experiencing serious integration problems in their neighbourhood or at work;
- Difficulties with integration in the host country can lead individuals to think about return even shortly after immigration. This can be caused by the failure to integrate, the lack of work and a fear of disappointment, loneliness and the insecurities they may face. The disparity between reality in host country and their expectations prior to arrival are often too great;
- Push factors may also include lack of access to services in host country such as healthcare. Sometimes (I)NGOs have already been able to rectify this problem during pre-departure counselling. The push factor then disappears and the person no longer wishes to return home. Lack of access to services, which can be rectified, should not lead to an AVR in and of itself.

**PULL FACTORS:**
- The concrete change of the situation in the country of origin. An enduring war may have ended and a new political climate may have been introduced;
- Family circumstances can constitute a pull factor such as family reunification, ill or deceased family members or marriage in the country of origin;
- There can also be a desire to start over in the country of origin. Some returnees are eager to start a new life in their country of origin and have already worked out a plan for their return. These returnees often integrated and enjoyed education in the host country;
• The latter factor might be triggered by reintegration in the country of origin providing better economic perspectives;
• Special reintegration assistance offered by the governments and organizations in the country of origin;
• Longing for their habitual environment and culture, feeling homesick.

### 2.5 Counselling of vulnerable groups

Although return counselling should be provided with great care to those who would like to return to their country of origin, several groups require special attention. This concerns people who are clearly vulnerable such as UAMs, VoTs and returnees with health problems. These groups require special assistance throughout the pre-departure stage, the actual return and during their reintegration process. This does not mean that everyone who belongs to one of the groups mentioned above is vulnerable by definition.

#### 2.5.1 Unaccompanied minors

Unaccompanied minors are children, who are under the age of eighteen and arrive in a host country, or areas outside their habitual residence, unaccompanied from either parents or other adults, who are by law or custom their primary care takers. Unaccompanied minors seeking asylum are especially vulnerable and require special care and safeguards. UAMs can also be single parents themselves (normally mothers).

AVR assistance applies where an unaccompanied minor, regardless of status, expresses a wish or agrees freely with the recommendation of a guardian, to be assisted in returning home. Returning a child to the country of origin is not an option if it would lead to the violation of fundamental human rights of the child.

Return to the country of origin must only be arranged if family or other adequate care is available in the country of origin. Unaccompanied minors seeking asylum that arrive in the Europe Union on their own can be especially vulnerable asylum seekers. They are outsiders in a foreign culture with language barriers to tackle without the guidance of their parents or child carers. This situation occurs while they are going through an important stage in their development towards maturity. Their sudden separation from home, family and friends can cause confusion concerning their identity and may lead to a lack of self-esteem. This experience of separation can cause traumas which can influence their development. In the case of refugee minors, it is necessary to define psychological what type of trauma, if any, was suffered by the individual returnees in their home countries or in refugee camps.

#### THE RETURN COUNSELLOR

Asylum seeking minors are entitled to stay in the host country until they turn 18 years old. They have a legal guardian appointed in the host country. The guardian has a responsibility in ensuring the best interest of child including considerations towards return of the minor, and as such, return counsellors should create close cooperation. For counsellors and guardians the counselling of unaccompanied minors consists of two approaches: First of all there is a daily support offering them a balanced life and providing education. Secondly a counsellor also needs to address the return process of the unaccompanied minor if she or he wishes so. During these conversations the possibilities how to return with the aid of other actors can be discussed, for example, on the services offered such as educational possibilities in the home country. The counsellor should facilitate as comprehensive information as possible, in cooperation with the guardians and/or other care-takers.

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10 If there are proper facilities in the country of origin, a person could be sent back.
when a minor would like to return, such as child protection, family tracing and care services in order for the guardians or other care-takers to assess the best interest of child, and if voluntary return deemed preferable, to help preparing for the AVR within their framework and contact other actors involved.

THE UNACCOMPANIED MINOR

Some asylum seeking minors would like to return before they turn 18 years old, with the approval of the guardian, since they do not see any options or future in the host country. For some of them, family reunification is possible and deemed preferable, and for others, alternative solutions need to be found in terms of adequate care. These options need to be approved by their guardians in the host country before they can return with the aid of organisations.

Nevertheless, a number of minors will postpone their return until they turn eighteen years old, since they do not want to go back to their home country, for example, due to traumatic experiences. Others try to put off their eventual return to enjoy as much education as possible. Having a European education may provide families with certain level of status and opportunities in their country of origin.

For this type of return counselling the following stages often occur with unaccompanied minors whose status in the host country has been rejected:

- When this bad news is addressed to the minor about their eventual return the emotional shock can be immense and can cause confusion;
- The security created by the mentors and return counsellors over the year[s] will be lost and once again this returnee might feel vulnerable. It also happens that a person will deny that they have to return or refuse to return;
- This may also be the case as quite often minors declare that they are orphans during their asylum process and return might reveal the truth that they have family members that are still alive. The ‘the missing parent’ comes into play again. Respect plays an important role to the unaccompanied minors since they were often sent away by their parents to a better life in Europe. To discuss voluntary return with a return counsellor and eventually with their parents might be difficult and might cause feelings of shame and failure.

However, by sharing the positive side of reintegration instead of only focusing on the bad news, the end of the procedure does not mean the end of the world. Feelings of resistance and frustration may eventually be replaced by feelings of acceptance. Although the process in which the person accepts his/her situation has started, he/she can still be disappointed in the host country’s system. At the request of the minor and his or her guardian, a return counsellor can discuss the options in the pre-departure process, can offer the person AVR and provide information on all the reintegration options provided by other organizations and reintegration programs. If a person, together with the legal guardian decides that he/she can return and wished to do so, the return counsellor can contact all the actors in the pre-departure process to make preparations for the actual return.

During the conference and throughout the applied research phase topics such as how to inform unaccompanied minors about AVR, networking, support towards family assessment and reintegration were analysed.
THE FOLLOWING RECOMMENDATIONS WERE MADE FOR UNACCOMPANIED MINORS:

• Information about AVR should be provided to unaccompanied minors (rejected on their asylum claim) at an early stage, in an appropriate way, by their legal guardians or return counsellors. The positive aspects of AVR should be stressed, so that AVR is not only taken up once they turn 18 and forced return may become an option, but is actually seen as a positive alternative for young people to build up their lives and look to the future. The steps to be taken should be discussed in order to address reintegration needs;

• The caretakers, legal guardians and return counsellors need to have information on the country of return, with regard to child protection, childcare services or educational opportunities in order to prepare the AVR within their framework. IOM, NGOs and governmental organisations should liaise on how best to present good quality information and to see if specific training for return counsellors is required to this end;

• Share information on potential opportunities regarding care-takers in countries of origin or ways family tracing is organised. Furthermore it is useful to create tailored reintegration packages for unaccompanied minors within the existing programmes or with additional programmes, bearing in mind the gap between the local situation and host country conditions and the issue of not creating significant differences for assistance within the local communities. This should be discussed at an early stage during the counselling sessions.

2.5.2 Returnees with health problems

The definition of health this handbook refers to a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. (WHO 1948)

Sustainable return of migrants is the common interest of all Member States of EU. It is also evident that sustainable voluntary return could be only achieved when conditions inducing secondary movements could be prevented. Access to adequate health care in the sending country, during the movement and in the return country is a fundamental human right. The Treaty Establishing a Constitution for Europe in 2004, highlights that the European Union is founded on the values of respect for human rights and reaffirms the European Convention for the Protection of Human Rights and Fundamental Freedoms.11 The Social Charters adopted by the European Union and by the Council of Europe recognises that everyone has the right of access to preventive health care, the right to benefit from medical treatment and the right to a high level of human health protection. Furthermore, access to health services in the country of return is one of the leading factors when migrants are considering whether they will take part in the return process. Within the frame of IOM Humanitarian Return Assistance program in Kosovo an information centre has been established. The most frequent questions raised by returnees and sending authorities were related to the quality/availability of specialized health services and medicines.12

The European Council called on for “the establishment of an effective removal and repatriation policies based on common standards for persons to be returned in a humane manner and with the full respect for their human rights and dignity”.13 All these facts and statements call for an EU Member States level harmonized standard protocol and the capacity for proper health assistance of the return movement, keeping and respecting both the health safety of the movement and the interest and dignity of the assisted returnee(s).

11 Constitution for Europe, adopted on 17 and 18 June 2004
13 Brussels European Council, 4-5 November 2004 - Presidency conclusions
14 The project Return Migration and Health by IOM the Netherlands focuses on the assistance of voluntary returnees with medical problems.
   RMH I had a running time of 1 December 2002 until 31 December 2003. During the follow-up project RMH II that finished 31 December 2005, a special check list was developed for health care providers, with special focus on returnees with schizophrenic diseases.
15 Migration Health Services Medical Manual, IOM 2001 Geneva
In IOM current policy there are already good practices to follow. For example in the Return Migration and Health project in the Netherlands, procedures were established where a permission is provided in writing by the returnee to share the medical information with IOM. With this permission IOM could contact actors in the health care in the host and receiving countries to provide the returnee with the proper information on the possibilities and constraints during return.

IOM has established strict protocols in place to serve beneficiaries well. On assisting in a movement, the IOM Migration Health Department (MHD) looks at the interaction of the following four factors, associated with travel/transport of individuals and populations, in determining “health risks”:

1. The pre-existing health condition of the traveller;
2. The duration and stress of the journey;
3. The mode of transportation; and
4. Access to health services during travel and at the final destination.

Additional steps need to be taken during the pre-departure stage in close cooperation with doctors, social workers and NGO’s who focus on health care. With the input of different actors the decision will be made if a person is healthy enough to return and how to proceed during the journey and upon arrival. Still it is not always easy to provide return counselling for those with medical issues - especially if the healthcare workers are not strongly involved in return assistance or when the home country lacks suitable healthcare infrastructure.

As part of sharing of a good practice within the RMH project, a checklist was developed together with the healthcare providers who participated in the project. The list was designed to help healthcare workers discuss the option of AVR with migrants with health problems during counselling. The list can be applied to different types of health problems which could help (mental) health workers discuss return migration with their clients.
THE FOLLOWING CONSIDERATIONS PLAY A ROLE DURING THE COUNSELLING OF PEOPLE WITH HEALTH PROBLEMS:

• Is there any support available and which support should be available before departure, during the journey and in the country of origin and, if so, what kind?
• Where do returnees get information to help them decide about their return?
• Is their health situation the reason for starting the return process or not?
• Does the returnee express a persistent wish to return? (especially relevant for returnees with mental health problems);
• Is the client capable of making an informed and rational decision about return, particularly in mental health cases?
• What are the responsibilities of the health workers involved and what is the return counsellor’s role in general? Do they play a role during the pre-departure phase or also after return? To which extent?

Sometimes the following problems could occur during the counselling of returnees with health problems. This should be tackled at an early stage as they could end up postponing the return:

• In some countries of origin, the support from authorities for adequate assistance can be slow or their healthcare system might not be appropriate for swift referrals;
• It can also happen that the family of a returnee with, for example, (mental) health problems initially accepts him/her back and then change their mind afterwards;
• Stigma could be an issue for certain illnesses in some societies;
• How do you keep returnees informed on the conditions of the return process and how do you safeguard the available assistance back home? (Even if it means the available healthcare is not up to the level of care they have been receiving in the host country;
• The logistics of return transportation should also be discussed during pre-departure counselling. For example, the option of travelling with medical escorts and how this escort is to be financed. In some countries, the language barriers facing the accompanying medical escorts can be problematic;
• There are often extra costs involved in a medical case when it concerns a stretcher case or a direct flight to the country of origin. Who will pay the extra costs involved?

With a view to the above, the time span required to arrange assistance should be taken into consideration by all parties involved in assisting the applicant. This could be a complicated process depending on the health of the returnee and the return journey itself. Furthermore, while reintegration assistance and healthcare assistance are important, the issue of where the host country’s responsibility ends should be considered on a best practice basis.

2.5.3 Victims of trafficking (VoT)

Trafficking is defined by The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, Supplementing the UN Convention Against Organized Crime as: (a) The recruitment, transportation, transfer, harbouring, or receipt of persons by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.16

As many organisations and authorities are involved in the pre-departure counselling of victims of trafficking, close cooperation between actors in this field of migration is important. The EU Plan on best practices, standards and procedures for combating and preventing trafficking in human beings, adopted by the Council on 1 December 2005 and based on the Commission Communication, sets the agenda in this field. The Action Plan faces a range of issues such as measures to prevent trafficking, more efficient investigation and prosecution, protection and support of victims, safe return and reintegration and also issues linked to anti-trafficking in third countries. The Action Plan explicitly requires that this should include prevention strategies specific to vulnerable groups such as women and children.\textsuperscript{17}

**PROTECTION AND PROVISION OF ASSISTANCE**

IOM generally provides assistance to trafficked persons through government institutions and NGOs. Where there is insufficient local capacity, IOM provides training to its partners to ensure long-term sustainability. After the screening and security assessment by government institutions the return counsellor can offer the following assistance as outlined in the IOM Handbook on direct assistance to VoTs and the UNICEF Guidelines that set out standards for good practice in the protection of and assistance to child victims of trafficking.

- Protect victims by ensuring their individual rights are respected and their physical safety guaranteed;
- Provide for immediate needs through shelter, along with medical, psychological, social, and legal assistance;
- Voluntary return assistance where this is considered the best option;
- Reintegration support tailored to the individual’s situation.

The return counsellor could offer all services explained above for a humane and orderly return. The difficult question remains for the return counsellor: when does the counselling process stop after return? When should the temporary guidance and accommodation at shelter facilities cease for the trafficked victim? What would the returnee consider necessary for building a future after his/her return and to avoid re-victimization?

**THE VICTIM OF TRAFFICKING**

- Victims of trafficking are frequently afraid to return, since the traffickers could harm them and their relatives. Family members often know the traffickers or even cooperated in the trafficking;
- Victims of trafficking are often traumatized by their trafficking experiences and frequently find themselves in different circumstances to that of ‘normal’ returnees. During the counselling sessions with victims of trafficking it is important to envisage the special needs of this vulnerable group and to consider what would be useful for sustainable return per individual case;
- For African returnees the role of voodoo might also be important. The victims undergo voodoo rituals so that they will not leave their traffickers.

**SEVERAL RECOMMENDATIONS WERE MADE DURING THE WORKSHOPS AT THE COPING WITH RETURN CONFERENCE AS TO HOW TO GUIDE VICTIMS OF TRAFFICKING AND HOW TO COUNSEL THEM. THESE ARE OUTLINED BELOW:**

- Trafficking is viewed as a serious violation of human rights and therefore human rights based approach is vital during counselling with the right to adequate support and solutions;
- Respect individual decisions and safeguard confidentiality, safety, non-victimization and non-discrimination.
- The return counsellor should learn about the risks and problems linked to trafficking in general and try to get as much information as possible on the returnee. This could be done with great

confidentiality in cooperation with other actors in this field before proceeding with an interview. This makes information sharing about appropriate legal advice, social support and security services with the returnee more efficient. Confidentiality and the consent of the returnee to share information should be underlined during the pre-departure process. Trust should be developed on a mutual basis;

• A return counsellor should discuss the future instead of the past by highlighting the positive elements such as benefits the returnee might receive and should outline options for reintegration to avoid re-trafficking;

• During the counselling phase it is important to collect information from the trafficked person about family backgrounds and whether any support at home, in the village or elsewhere can be guaranteed in the near future, since shelters are not always available;

• With regard to victims of trafficking with health problems, governments and organisations working with this target group should increase cooperation between them and across borders by organizing and integrating the healthcare available in the country of origin. Sharing medical data, subject to the informed consent of the victim, and with the assurance of confidentiality and protection of information, is essential to guarantee the continuity of care, effective case management and reintegration.
After the overview of several factors that can influence the pre-departure stage in general, such as the situation the returnee finds him/herself in, as well as the characteristics of the return counsellor, push and pull factors and the counselling of vulnerable groups, Chapter III will focus on the outcome of and recommendations from the working conference of *Coping with Return* and the outcome of the applied research phase.

### 3.1 Recommendations from the working conference

During the *Coping with Return* working conference and workshops, the following recommendations were made in relation to return counselling and the development of a methodology:

- Cooperation with all involved in return counselling should be enhanced. For example, training of return counsellors can be one way to improve overall effectiveness of return counselling. Every return counsellor reacts in a different way during a pre-departure counselling period as do the returnees;
- Organisation of group counselling sessions can also be another way of starting individual discussions at a later stage;
- Return counsellors should maintain his or her neutrality. The migrant should not be made feel that he or she is being pushed to return;
- Group counselling about return seems to be very difficult for some nationalities as the returnees feel ashamed of talking about return as it may represent a failure. As a rule, the return counsellor should then try to provide individual counselling. The return counsellor should give as much accurate information as possible concerning the AVR option. This can include referring to existing reintegration initiatives in the country of origin. The use of “native-language speaking” return counsellors can also be an asset as they are likely better able to listen to and understand the complexity of the migrants’ situation;
- The counselling on return should not be conducted only as a ‘bad news’ conversation. Voluntary return can bring positive experiences and success stories can be used during the counselling process;
- A neutral position on the return counsellor’s part towards the migrant’s situation is more positive than a strong ‘caring’ attitude. An honest attitude will help migrants to make real choices. A realistic approach from return counsellors tends to be more helpful as it does not lead to disillusionment and allows the migrants to start working on a new individual ‘life project’.

### 3.2 The research phase

Proper return counselling helps to address the returnee’s worries and uncertainties, and reinforces self-confidence in the preparation for a sustainable reintegration process. During the research phase IOM staff and caseworkers from partner organisations were responsible for establishing a relationship of trust from the first appointment onwards. It is important to underline that during meetings with potential returnees, the role of the return counsellor and IOM was to provide information about the return process and the type of assistance, as well as to evaluate the circumstances of the (vulnerable) returnee. However, counselling has its limits when it comes to actually defining...
the vulnerability of the returnee, since return counsellors are not trained or skilled enough to tag someone as vulnerable, especially in case of vulnerabilities such as health issues and victims of trafficking. AVR is one of the many migration management services IOM offers to migrants and governments. It aims to provide the orderly, humane and cost effective return and reintegration of asylum seekers, unsuccessful asylum seekers and other migrants, residing or stranded in host countries, who are willing to return voluntarily to their countries of origin.18

3.2.1 Forms of assistance provided in the participating states

Within the assisted voluntary return program in Europe carried out by IOM in close cooperation with other NGO’s, the main aim is to facilitate return to the country of origin, thereby guaranteeing the returnee economic and logistics assistance that can be summarized as follows:

• Arranging travel documents;
• Provision of airline ticket;
• Arranging travel within the host country;
• Provision of travel allowance;
• Logistics assistance from IOM from the departure from the host country to the arrival in the country of origin and during transit;
• Upon request, and based on specific needs, other services can be offered such as escorts during travel for unaccompanied minors or persons who are in need of constant medical attention;
• IOM missions in EU Member States can offer of a reintegration grant, which varies per country. This grant can be provided as a cash grant or through individual mediation where the returnee can use the financial support for study purposes or to finance their business plan. Individual support during the reintegration process is evaluated on a case-by-case basis (whether the returnee meets the criteria). The returnee may be asked to write a document detailing the likelihood of his/her reintegration during the counselling sessions with the return counsellors and/or IOM staff.

This overview is applicable to all case studies discussed in Chapter IV.

3.2.2 Vulnerable groups and special attention in the participating countries

In the participating countries no official definition of vulnerable groups is applied. Some return counsellors see nearly all asylum seekers as vulnerable and therefore define their work with vulnerable groups on a broader basis than discussed and agreed during the ‘Coping with Return’ kick-off Conference in Amsterdam which earmarked unaccompanied minors, victims of trafficking, returnees with health problems, single parents and the elderly as vulnerable groups.

As a special group, migrants with language and cultural barriers could be vulnerable in the counselling process. Inability of communication with the surrounding environment, gathering information and confronting them with the lies they have been told by traffickers, makes them utterly dependent and therefore vulnerable. It is very important to interview potential returnees very carefully so the return counsellor can detect and predict possible complications during return. This is especially true for people with language barriers where problems might not be detected by the return counsellor or health cases where extra complications might occur due changes of their health problems.

For the purpose of this project the selection of eligible cases has been made in close collaboration with IOM according to the categories given in the detailed, distributed questionnaire.

18 For up to date information per Member State, in Norway and Switzerland, visit www.iom.int that will lead the visitor to the country websites.
3.2.3 Cooperation with partners in the host country: NGOs/Governments

For the mechanism of voluntary return assistance to be effective, close cooperation is critical among those involved- governments and other actors providing return counselling to (unsuccessful) asylum seekers.

During the research phase it was clear that in Austria, Belgium, Czech Republic, Hungary, Ireland, the Netherlands and Slovakia close cooperation exists between (I)NGOs and the government. The government offers financial support for AVR programs thereby cooperating with immigration services and relevant authorities to exchange information.

The financial benefits and AVR programmes and offered assistance might differ per Member State, but the basic framework also shows some overall similarities. Specialized NGOs, such as Caritas, la Strada, the Red Cross in close cooperation with healthcare workers, Reception Centres for Asylum seekers and guardians contact IOM to finalize the pre-departure phase. In the Netherlands a decentralized IOM counselling system with district officers strengthens this cooperation. They contact the returnee at an early stage during the pre-departure phase. In other Member States, IOM joins the counselling procedure during the pre-departure stage later on to support return arrangements.

3.2.4 Cooperation with country of return

As mentioned above, cooperation with the country of origin is often limited to airport assistance, temporary shelter or small-scale aid provided for reintegration (provided by IOM Missions or other NGOs). Still there are also specific country return programs or programs created especially for vulnerable groups. For example IOM implements such tailored assistance involving its network of offices in the country of origin for in case of unaccompanied minors, victims of trafficking and seriously ill returnees. With regard to unaccompanied minors, IOM staff in the country of origin may support family tracing or other services before, during and after the minor returns- including identifying and arranging appropriate in cooperation with authorities and local entities. Vulnerable cases with health problems need specific assistance upon arrival as well as appropriate follow-up through health care or psycho social-support. It was identified that a comprehensive approach is important to assist vulnerable persons returning to their country of origin to benefit from a whole range of assistance: local transportation, rehabilitation, physiotherapy, temporary accommodation, medical treatment and social follow-up.
IV Case studies on vulnerable groups

During the research period Austria, Belgium, the Czech Republic, Hungary, Ireland, Slovakia and the Netherlands counselled 120 vulnerable people in close cooperation with actors in the field of migration. The following case studies outline different Member States’ approaches to counselling.

- **AUSTRIA**
  The Austrian Return Counselling system is based on a clear distribution of tasks between IOM, governmental (Ministry of Interior [MoI] and non governmental) [various NGOs] project partners during the different stages of the return process: MoI funds the different return projects by giving its consent that the respective migrant is allowed to leave the country and by declaring its willingness to bear the costs for the returnee in advance. The NGOs are responsible for providing the counselling. For *Coping with Return* this task has been carried out by Caritas Vienna. After the returnee has expressed his/her willingness to return home the NGO refers the case to IOM in order to organise voluntary return arrangements for the applicant. Some practical constraints are based on the lack of country-specific return programs which enable the effectiveness of reintegration measures in country of origin to be monitored.

  Caritas contacts returnees and provides social and legal advice, and material aid from the very beginning of their residence in Austria (Caritas social service at the airport, Caritas asylum centre, Caritas refugee houses and so on), which helps to build trust between vulnerable groups and the aid organisation - even on the “sensitive” topic of return. IOM receives information about returnees only after the client has decided to return, the application has been lodged and the Ministry has already given its approval to reimburse the cost of return. Time to incorporate the returnee’s special needs is therefore sometimes limited as the returnee wishes to return as quickly as possible. In order to avoid this and in order to provide the returnee with a realistic perspective of what can be done for them in the country of origin, IOM has suggested that the application forms be submitted in advance, even prior to the returnee’s final return decision, as travel arrangements are generally not a problem and can be made quite quickly. The general humanitarian return program is open to all immigrants without means, asylum seekers and refugees in Austria, who wish to return to their home countries or to third- countries where they have a residence permit. Immigrants are made aware of this at the reception centres and referred to Caritas and later on to IOM.

  The following contact options exist:
  1. Migrants contacting IOM office;
  2. Migrants contacting IOM through NGOs;
  3. IOM provides counselling in reception centres.

**CASE I**

<table>
<thead>
<tr>
<th>Gender</th>
<th>female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nationality</td>
<td>Guinea Bissau</td>
</tr>
<tr>
<td>Family composition</td>
<td>single, Mother in Country of origin</td>
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<tr>
<td>Length of stay at the time of start of counseling</td>
<td>30 months</td>
</tr>
<tr>
<td>Age upon entry this country</td>
<td>23 years</td>
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<tr>
<td>Partners/actors involved</td>
<td>Red Cross, Vienna Health Insurance Company [WGKK], Diakonie</td>
</tr>
<tr>
<td>Running time</td>
<td>61 days</td>
</tr>
</tbody>
</table>
In two months of intensive care Caritas Vienna managed to organize the return of a female returnee of Guinea-Bissau with psychopathic problems and AIDS. She applied for asylum in Austria in 2004, due to serious psychiatric problems she had to stay in psychiatric hospital after one year (against her will) and asked the return counsellors of the hospital for voluntary return.

During the counselling process the returnee has been visited twice with an interpreter. Furthermore the treating physician has been contacted in order to provide us with an update about the health condition of the woman. Based on this update it has been decided to assign an escort for the movement. Due to several counselling interviews and other activities - done by Caritas Vienna Voluntary Return Department, the staff of the hospital and a colleague from Caritas Asylum Centre it was possible to stabilise her, to organize the travel document from the embassy in Belgium, to get the confirmation from the Austrian Minister of Interior to cover the costs for and to book the flight in cooperation with IOM.

She had to be accompanied by a Portuguese speaking Caritas employee, to Guinea-Bissau, but finally she was very happy to be in her home country at last and she is in a rather good condition. Once arrived in Guinea Bissau, Caritas contacted the IOM office in Bissau in order to further discuss possibilities for the returnee to get access to HIV treatment in country of origin. In a joint effort of IOM, Caritas and the hospital's social service it has been possible to provide the returnee with medication for one year from the stocks of the hospital.

Caritas Vienna paid € 370 reintegration assistance.

CASE II

Gender : male
Nationality : Bangladeshi
Family composition : married, separated from his family in Bangladesh
Length of stay at the time of start of counseling : 7 years
Age upon entry this country : 22
Partners/actors involved : Austrian Red Cross, IOM in Austria, treating physician, ACCORD Austria
Running time : 33 days

A male returnee applied for asylum in Austria in 1999. In the beginning of 2006 his asylum was negotiated by the asylum office at first instance. His father passed away in 2003, his wife became ill in the end of 2005, and the returnee himself became diabetic during his stay in Austria, so he did not see any perspectives in Austria anymore and decided to return to Bangladesh in the beginning of 2006.

He was in possession of a valid passport, so Caritas could organise the covering of the costs for the return and the flight in cooperation with IOM - after having performed a lot of counselling interviews regarding his legal perspectives in Austria (which would have been promising) and his physical situation (his doctor estimated his situation as perilous without the correct pharmaceuticals). In cooperation with Red Cross Vienna and IOM it was possible to provide the pharmaceuticals for several months and reintegration assistance of € 370 by Caritas at the airport prior to departure.
Prior to departure IOM in Bangladesh has been informed about the return of the client and were asked to provide detailed information about health facilities, able to treat diabetes mellitus type1. IOM in Austria provided the returnee with the contact details of IOM in Dhaka and contact details of several health centres offering treatment of diabetes mellitus Type1 in Dhaka.

**BELGIUM**

Since 1984, on the basis of an agreement with the Belgian Ministry for Social Integration, IOM has been implementing a program for assisted voluntary return which targets various categories of migrants and asylum seekers in Belgium (REAB). In order to ensure that migrants can easily access program assistance at each stage of their stay in Belgium, the IOM mission in Belgium has developed an extensive network of partners throughout Belgium. The REAB network consists of a combination of NGOs, local authorities (towns and local council), governmental structures for asylum seeker reception (FEDASIL and Red Cross reception centres).

With the financial contribution of the European Refugee Fund (ERF) National Part, IOM works towards contributing to the Belgian Government’s efforts to promote the option of voluntary return to countries of origin for asylum seekers. Furthermore, IOM provides assistance for voluntary return and the reintegration of minors in their countries of origin. In the 2002/2003 pilot project for the ‘Return and Reintegration assistance to victims of trafficking, including minors’ an efficient coordination mechanism was developed involving IOM and NGOs in the countries of origin and operational partners in Belgium, such as the Aliens Office and return counsellors in the specialized reception centres. This mechanism ensures that return is in the child’s best interest. To enhance the quality of counselling to UAMs, IOM developed training for return counsellors, teaching them how to counsel minors on voluntary return, in the framework of the project ‘Return and Reintegration assistance to unaccompanied minor asylum seekers from Belgium’.

The REAB system is based on the principle that voluntary return is an option to be offered to the three categories of migrants identified by the REAB convention. The three categories include asylum seekers in and outside the procedure, and stranded migrants. In order to adequately serve these different categories of beneficiaries, it is necessary to set up a flexible system whereby each migrant is given the opportunity to access the program in the most suitable way. Starting from this assumption, IOM has organized a network of partners the various categories of migrants can refer to in order to access the program.

- In order to provide asylum seekers in different stages of the procedure (migrants are generally hosted in the Federal Reception Centres) the opportunity to enter the REAB, IOM cooperates with the Reception centres (Fedasil, Red Cross etc);
- In order to favour the access to the program of stranded migrants (people generally not at the Federal Centres), IOM has established a network of partners involving various agencies that are in contact with these people such as NGOs, social welfare offices, etc.

This REAB system is very flexible in the sense that, apart from the Federal Reception Centres who only process the migrants who reside at their facilities, all other partners are ready to assist and process all the categories of migrants. Moreover, all migrants can be referred for assistance and access the program through the IOM office in Belgium. In medical cases, IOM has strengthened its relationship with the social services of several hospitals in Belgium providing direct counselling to return counsellors and to the families of returnees who reside in hospital. Thanks to these activities,

19 See http://www.belgium.iom.int/reab/english/default.shtml
20 See Trafficking in Unaccompanied Minors in the European Union, IOM, December 2002; IOM Project on the “Compilation and dissemination of information on return and integration assistance to victims of trafficking, including minors from Belgium”; IOM Pilot Project for the “Return and Reintegration assistance to victims of trafficking, including minors”.
these medical cases have been able to return to their country of origin in the framework of specific reintegration assistance for vulnerable cases. IOM has also strengthened its cooperation with embassies with regard to the return of the vulnerable cases. The IOM mission in Belgium has visited several consular services, offering them direct counselling and explaining the REAB program and its specific assistance to vulnerable groups.

CASE III

Gender : female
Nationality : Romania
Family composition : boyfriend
Length of stay at the time of start of counseling : 14 months
Age upon entry this country : 16
Partners/actors involved : Caritas, Guardianship Service, Fedasil
Running time : 359 days

Victim of trafficking

An unaccompanied minor/victim of trafficking, originating from Romania, was referred to IOM for voluntary return and reintegration assistance. She wished to return to her home country to be reunited with her mother.

She arrived in Belgium with her boyfriend (adult age). In the beginning, they both pretended to be brother and sister. As victims of trafficking, they were hosted together in the same centre in Brussels. When it appeared that they were not siblings, she was sent to another specialised reception centre for unaccompanied minors. She went to school and was doing well. She started the procedure for victims of trafficking, together with her boyfriend. The returnee said she expected a lot from Belgium. She thought she would be able to earn some money. However, following what happened with her abuser and her stay in the shelter centre, she lost a lot of her illusions. She expressed her will to return to her mother in Romania.

The returnee had no passport anymore. She didn’t have any documents at all to prove her identity. In the framework of the VoTs-procedure, the Immigration Office gave her temporary documents. She received a first “Declaration of Arrival” that was prolonged once and then a “Certificate of Registration as a Foreigner” (known as a White Card). Finally, to be able to travel home, she submitted a request to the embassy of Romania in order to obtain a travel document. After having identified her parents, with the assistance of the IOM mission in Romania, IOM was able to collect all required documents including a travel authorisation from the parents and their engagement to take their child in charge once returned. Moreover, travel documents had to be obtained from the embassy; and in Romania, an investigation had to be led in order to make sure that she would not face any further danger of trafficking.

She was finally able to return to Romania. Everything went well, and she was reunited with her mother who was very happy to meet with her. She was included in the IOM Hungary’s reintegration program for victims of trafficking. She was referred for provision of reintegration assistance to a local partner NGO. The IOM mission in Romania keeps contact with her to monitor her return.
## CASE IV

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Details</th>
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<tr>
<td>Gender</td>
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<tr>
<td>Nationality</td>
<td>Indian</td>
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<tr>
<td>Family composition</td>
<td>single</td>
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<tr>
<td>Length of stay at the time of start of counseling</td>
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<tr>
<td>Age upon entry this country</td>
<td>20</td>
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<tr>
<td>Partners/actors involved</td>
<td>Fedasil, IOM Brussels</td>
</tr>
<tr>
<td>Running time</td>
<td>209 days</td>
</tr>
</tbody>
</table>

### Returnee with health problems

The returnee applied for voluntary return, through the Fedasil reception centre in Ekeren. He moved with a wheelchair as a consequence of a spinal cord lesion due to a car accident that occurred in Belgium. The returnee had gone through one year of physiotherapy and was followed up by a nurse during his two years at the Ekeren Reception Centre. He is now able to stand and to cover short distances with somebody’s assistance or with a walking support system.

He had only a copy of his passport; IOM made contacts with the consular section of the Indian Embassy in Brussels and helped him in obtaining an Emergency Certificate. IOM Brussels contacted his parents several times, through their neighbours, about the possible return of their son and about his specific health situation. The first reaction of the family was to highlight that they did not have the capacities to welcome him upon return. IOM received (from Ekeren centre) a letter from his mother asking for the return of their son.

Prior to departure, IOM also contacted the Executive Director of the Oxford hospital in Jalandhar, not far from his village. Due to the specificities of this medical case, it was agreed that two escorts would assist him. He travelled from Brussels to Amritsar with his own wheelchair provided by the Ekeren Reception Centre. The close collaboration with the Medical department of travel companies prior to departure allowed for the best medical assistance on board the aircraft used.

With the agreement of the IOM mission in Belgium, IOM and Fedasil escorted the returnee’s needs and quantified the services required for an appropriate follow-up of this health case: physiotherapy, replacement of catheter, medicines, appropriate toilet seat and a walking support system. A reintegration scheme was signed between IOM and Janta Hospital in May 2006. IOM was providing financial assistance in several instalments in order to further guarantee that health support is efficiently implemented and that proper reports are sent to IOM in Brussels to assess the latest developments of the health situation this returnee.

### CZECH REPUBLIC

In the Czech Republic the AVR program of rejected asylum seekers is run by IOM. While cooperation is established with involved authorities and NGO’s, improved cooperation is under construction for some social workers and other NGOs who may not have a full understanding of AVR support. The counselling in the Czech Republic has been performed in the IOM office and in reception centres. Dissemination of information is organised in groups by nationality. Special emphasis is laid on individual interviews which follow the group sessions. IOM Prague has very positive experience with a method of providing wide and comprehensive information of the migrant current situation at first. During the counselling period no standard guidelines of counselling have been applied yet. The methodology doesn’t differ much per target group, but assistance is tailored, including those vulnerable groups as targeted under the project.
CASE V

Gender: Female  
Nationality: Georgian  
Family composition: single with two children  
Length of stay at the time of start of counseling: 3.5 years  
Age upon entry this country: 29  
Partners/actors involved: None  
Running time: 18 days

Single mother/ possible victim of trafficking

This case concerns a single mother with children being refused asylum seekers. After a negative decision they stayed in the country illegally, living on occasional jobs. She was unable to earn enough money for the return tickets and she was afraid to contact the police. Recently, she was offered to earn money by prostitution.

Through IOM she benefited from pre-departure counselling, assistance at the airport, assistance upon arrival to the country of origin and reintegration. Furthermore she could join a reintegration program for returnees to Georgia.

Refused asylum seekers, by the Czech immigration law are allowed to apply for repatriation within 24 hours from the delivery of negative decision. IOM as well as respective NGOs considers this rule as a serious problem. Refused asylum seekers who do not meet this requirement become not eligible for any return program and get stranded on the territory. The most unfortunate aspect of this practice is that happens quite often.

HUNGARY

In Hungary, IOM implements a voluntary return programme (HARP) in close cooperation with the local authorities. Return counselling is provided to where potential returnee is located - for example if the Hungarian Border Police or the Office of Immigration and Nationality all over Hungary had a big group of migrants stranded, counselling is performed at that location. In most of the cases the personal counselling proved to be successful. Telephone counselling or counselling performed by Hungarian Border Police or Office of Immigration and Nationality staff proved to be less affective.

Hungary specified two vulnerable target groups, where special NGO assistance is required during counselling: the unaccompanied minors and victims of trafficking. For the first group the IOM mission in Hungary gets help from the Oltalom Charity Society Refugee Children’s Home. For the latter group the staff of the CORDELIA Foundation for the Rehabilitation of Torture Victims provides assistance.

The efficiency of the AVR programme in Hungary depends on the close level of cooperation between IOM and the Hungarian authorities. In relation to making migrant more aware of the programs and benefits provided by IOM, it is considered worthwhile to cooperate with the Border Police and sharing information at reception centres. The Hungarian Border Police and the Office of Immigration and Nationality of The Ministry of Justice and Law-enforcement have all necessary licenses to deal with the migration’s procedures in Hungary. IOM is working in close cooperation with them, and thus has stronger influence on the way return counselling is conducted. Information on AVR is shared through of information materials, leaflets, individual or telephone counselling.
CASE VI

Returnee with health problems

This person and her family arrived at the Békéscsaba Reception Centre at the end of June 2006. When interviewed for the first time, it turned out that they had provided false data and the 4 year-old was not their daughter but their sister. They claimed to have left Serbia because the economic hardships, her mother was ill and is not capable of taking care of her daughter. The Asylum Department appointed the girl’s sister, to be her guardian. The girl’s mental condition gradually deteriorated. While in the facility, she was dejected, sad and reserved. She was not willing to attend school. When talked to in private she revealed that she was very much missing her mother and wanted to see her again. After repeated sessions IOM could only achieve that she opened up to her sister and shared her concerns with her. Her condition was discussed in detail in late August and IOM managed to convince her sister to withdraw the asylum claim on behalf of the girl as her guardian and let her return to her mother to prevent her mental condition from deteriorating further.

Unfortunately, this case encountered some administrative problems for the issuance of the travel document. The sister renounced her rights as the guardian of the girl. The appointing of a new guardian is in progress right now at the Békéscsaba Family Assistance Service, but no decision has so far been made.

IRELAND

In relation to vulnerable groups, IOM Dublin always considered the option of onward referral to specialized agencies to ensure that all immediate needs were met prior to either the application process commencing or prior to return. Methodology and approach differ mainly in relation to unaccompanied minors, when IOM staff does not counsel directly, but works in partnership with the Health Service Executive and the children’s return counsellors. This is also the case with victims of trafficking where the IOM mission in Ireland works very closely with a Dublin based NGO thereby discussing return options. The Ministry of Justice, Equality and Law Reform, funds several NGOs and IOM, and actively supports them in their activities. The IOM mission in Ireland has an active outreach and information strategy, both including printed material which is frequently and widely distributed, as well as a regular schedule of outreach meetings and events, which are coordinated by a full time, dedicated information and outreach coordinator. This strategy focuses on a variety of agencies, (NGO and Statutory) as well as on migrant accommodation centres, etc. Potential applicants can drop in to the IOM offices during office hours and therefore do not require appointments, which allows IOM Dublin to be as flexible as possible in meeting clients time and travel schedules. IOM Dublin can also provide initial advice by phone and receive applications by fax.

The IOM mission in Ireland has an active counselling role, however it does not seek to influence the decision of the migrant in relation to return, neither advising a client that return is or is not in their best interest. IOM strives to provide comprehensive objective information and onward referrals which allow the client to make an informed decision themselves, as to whether return is the best option for them or not. As mentioned above, IOM ensures that all key information on the AVR programs...
is clearly explained by IOM staff, to ensure that any information which may have been provided generally by an NGO or other person previously, is correct and that there are no misunderstandings or incorrect information. IOM does not have formal counselling partnerships with NGOs and does not promote or encourage counselling on IOM programs by anyone other than the qualified and appropriate IOM staff. The IOM mission in Ireland believes in the concept of informed choice and strongly encourages applicants to gather as much information on all issues which they feel may affect a return decision, e.g. medical advice, legal advice, etc. It is felt that this complete information picture is key to a voluntary, informed and sustainable return. As long as the NGOs cooperate well together and clearly remain within their own remit of information provision, then all the services should complement one another.

CASE VII

<table>
<thead>
<tr>
<th>Gender</th>
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<tbody>
<tr>
<td>Nationality</td>
<td>Iraqi</td>
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<tr>
<td>Family composition</td>
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<tr>
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<td>Age upon entry this country</td>
<td>32 years</td>
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<tr>
<td>Which partners</td>
<td>St. Brendan’s Hospital (approx 5); IOM mission in Ireland, IOM in Jordan, Refugee Legal Services</td>
</tr>
<tr>
<td>Running time</td>
<td>21 days</td>
</tr>
</tbody>
</table>

Migrants with health problems

This case was chosen for two reasons. The first reason is the clients’ informed decision to return to his home country Iraq, despite all the security and safety issues that this country has been experiencing in the past few years. The decision to return home had also included the concept of having enough available, accurate and objective information about his family, workplace and the city where he was returning to.

Unable to work and practice medicine in Ireland, the client felt useless, unable to contribute to society, and very concerned about his life in general while living here in Ireland. Therefore, the clients desire to start over in Iraq and be of help to his own people, assisted him in overcoming the psychologically challenging situation and reach a decision to return.

The second reason is that the nature of this case that is twofold. That it is based on a return of a vulnerable individual choosing to return to a vulnerable and fragile society, Iraq, and assist the Iraqi population by purchasing medical equipments and medicine before returning to his country to continue to practice medicine. IOM Reintegration assistance covered the purchase costs of the medical equipment which he brought back to Iraq with him.

In this context, we identified three lessons learned:

1. Return as the most feasible option, and the option that the client wished for, despite all the events happening in the client’s home country, and the turbulent nature of Iraqi society at present.
2. Clients return preparation, in particular the decision to use reintegration assistance that can be of help and use to the people in need in his own hometown
3. The input of other agencies, in this case, a psychological unit and Refugee Legal Services, have helped to overcome obstacles and exchange information that served in the best interest of our returnee.
CASE VIII

Gender : female
Nationality : Malaysian
Family composition : single
In this country since : 16-04-2005
Age upon entry this country : 47
Which partners : Homeless persons Unit, IOM Bangkok, IOM Jakarta
Running time : 43 days

Victim of trafficking

When this client first contacted IOM and until her eventual departure from Ireland, she was staying in a homeless shelter. She informed IOM that she had been brought to Ireland by a “friend” to work in her house, but that once she got here she was treated very badly. This form of trafficking for domestic labour exploitation is common in Ireland according to a 2004 report by an Irish NGO- the Migrant Rights Centre of Ireland. The IOM mission in Ireland has encountered other cases of this kind since this woman returned. However, because it takes place in the family home it often remains hidden and is very difficult to detect. She became emotional when discussing what had happened to her in Ireland. IOM chose this case because as VoTs of this kind she goes unnoticed in Ireland and while trafficking for sexual prostitution has had a certain amount of attention in national media of late very little is being done to combat this type of exploitation. She struck IOM as vulnerable, both because of her experience and because of her age as it can be difficult for someone in her late forties with no skills to access employment legally or illegally. IOM was able to provide counselling and offer the client a number of services, including assessing her needs on arrival in Malaysia in terms of shelter, counselling and a grant to help her to engage in some kind of reintegration activity. In the end, while she did not avail of any of these services following return, the fact that they were available to her, reassured the client, and contributed to her feeling secure that there were people working to assist her and for her benefit. As it turned out the most useful form of assistance in this case was return assistance itself.

NETHERLANDS

In 1992, IOM started to implement an AVR Programme (REAN) with the Dutch Government. The program began with a small-scale central return office, but since 2000, there are 30 mobile district officers at work, who cooperate intensively with the Dutch refugee council, the COA, municipalities and various NGOs in the field. IOM the Netherlands implemented several programs that focus on vulnerable groups, such as the Return Migration and Health Program, The Randstad Return Program (for the 4 major cities which concentrates on long-term rejected asylum seekers and works with native speaking return counsellors). IOM has covenants with NIDOS, the legal guardian organisation for unaccompanied minors and with the COA, the central organisation for the housing of asylum seekers. IOM The Hague’s office provides courses on how to cope with return for guardians, teachers and return counsellors. Many of these initiatives received financial contributions from the ERF national program. Using its own return counsellors at district level, IOM the Netherlands tries to help returnees in an orderly and humane way. The return counsellors work closely with vulnerable groups during visiting hours at several refugee council locations to be as available as possible for the provision of information and guidance during the pre-departure process. This return counselling works are closely coordinated with the other staff who arranges and assists with return transportation, travel documents and reintegration assistance.

Additionally there is close cooperation with the actors mentioned above. This has partially to do with the strict asylum laws in the Netherlands as well as the advanced insight that it might be of importance to an asylum seeker to consider return. They are of great influence to the target groups.
since these organisations work directly with the target groups on a confidential basis and could influence the pre-departure process and decision making on whether to return or not. As actors they influence the options stated in illustration 2.

The return programs in the Netherlands primarily focus on:
- The importance of assisting people willing to return, including target group AVR programs;
- The significance of individually tailored support, especially for vulnerable groups, in order to complement international target group-oriented AVR programs;
- The importance of securing collaboration with the countries of origin through return-related information facilitating individual assistance.

CASE IX

Gender : Female  
Nationality : Lithuanian  
Family composition : single  
In this country since : January 2006  
Age upon entry this country : 17  
Which partners? : Police, Bureau Jeugdzorg, Rentray, IOM  
Running time : 19 days

Unaccompanied minor  Victim of trafficking

IOM the Netherlands has a special program for victims of trafficking; otherwise this person would not have been eligible for REAN since she is a European citizen. For victims of trafficking extra guidance during their return and reintegration is offered for safety reasons. In many countries shelter is provided as well as psycho-social aid. When it comes to victims of trafficking IOM the Netherlands has intensive contact with several organisations both in the Netherlands and abroad who ensure the protection of this target group. As a return counsellor it is important to determine where to find the necessary information. For example dealing with this target group the return counsellor does not want to ask the client to tell her story all over again, because this would be a great burden for her. Instead the police officer who had filed the report was approached to fill in the necessary information. In the end she filled in part of the information and the girl’s guardian completed the form. Co-operation with these organisations is very important, they can, if they want to, refuse permission. The aftercare is organised by IOM in the country of origin, in this case they personally contacted the girl to clarify her request for help.

The only thing that could have gone better is the moment when IOM was asked to help this girl. The girl had stayed in a closed institution for several months but had since the beginning of her stay there wished to return to her parents. The organisation now knows what IOM can offer and in the future will contact IOM sooner.

CASE X

(10 minors left under almost the same circumstances to Angola)

Gender : male  
Nationality : Angola  
Family composition : single  
Length of stay at the time of start of counseling : 6 years  
Age upon entry this country : 12
Which partners? : Nidos, the legal guardian organisation for unaccompanied minors IOM Angola
Running time : 60 days

The returnee at first did not want to return, but visited the office hour of IOM. The return counsellor discussed several options upon return. Furthermore the problems to encounter staying illegally in the Netherlands were outlined as well. During the 60 days of counselling and contacting the district officer 5 times, the returnee decided to return. He returned under a program specialized for minors that return to Angola. The Mulemba orphanage provides education and health care services to the minor.

Minors listen to their guards, friends and Dutch voluntaries about their situation in the Netherlands. Even when the asylum procedure has come to an end they are sometimes told to stay in the Netherlands. They are influenced by their surroundings and hope for the political situation to change and the permission to stay. It is very important that the return counsellors who are involved in working with this group provide the same message to the (ex) minors.

If the minor is returning to the home country it is very important that he/she has finished school in the Netherlands. With a certificate it is easier to find a job or a new school.

In addition the minor has to think what he/she will do with the reintegration grant that IOM will give to the returnee. The reintegration grant can vary from €200 to €2320. The reintegration grant is paid upon departure at the airport with a debit card. The debit card is a safe technique to issue the grant. In 2006 onwards IOM encourages about 85/90 % of the target group to make use of their debit card at the final destination. For the other part of the target group it is possible to also withdraw the money at Schiphol Airport or during transit, if the banking system at the final point of destination is not working properly or does not support the debit card.

• SLOVAKIA

The IOM mission in Slovakia has an active role in counselling process. In 2004 IOM established cooperation with three NGO’s on contractual basis in the framework of the first phase project Capacity Building and Implementation of Assisted Voluntary Returns (information campaign and registering to the program). Field monitoring of NGO’s showed limits in communication with potential applicants, what was likely to be caused by their lack of AVR counselling experiences. In the framework of the second phase of the project, IOM Bratislava started to provide directly the target group with regular AVR counselling. Currently two IOM operational workers visit on regular basis running asylum facilities. Established cooperation with NGO’s continues through informing IOM about potential applicants for the programme residing in asylum facilities. The IOM mission in Slovakia also set up an exchange information platform with NGO’s working with the target group. The aim of the platform is the exchange of the information between IOM and NGO’s on migrants who may wish to return home.

Asylum facilities (asylum facilities of the Migration office of MoI) employs social workers who work with migrants on daily basis. Since the AVR program started to be implemented in Slovakia, IOM Bratislava involved social workers in common/informal cooperation related to informing migrants about the possibility to join the program. The cooperation showed to be productive and continues to grow. In order to provide its partners with relevant information about AVR procedures, IOM Bratislava prepared a manual which is also used by return counsellors. The manual contains basic information about the AVR program, its principles, the role of partners in the program, AVR procedure, examples of registration forms and case studies. The manual is in Slovakian. Nevertheless no manual can advise or provide an answer to every situation that a return counsellor may encounter. Return counsellors should therefore be people who possess empathy, intuition and the ability to work with information.
The IOM mission in Slovakia used standard counselling procedures during the Coping with Return implementation. These entailed information meetings with groups of single-nationality migrants (different nationalities participating in the same meeting might cause tension in communication between migrants). Migrants are informed of the possibility of posing their questions related to return at one-on-one meetings with AVR return counsellors (experience has shown that mostly women use the opportunity to discuss the issue of return in private). The return counsellor explains the options available to the possible returnee for their individual situation.

IOM does not provide legal advice related to asylum application. In such cases IOM refers migrants to an NGO at the asylum facility. Repeated contact with potential applicants proved to create trust between the return counsellor and the migrant. This ultimately facilitates open communication so the migrant can make the decision whether to return or not without feeling pressured by time constraints.

CASE XI
(8 family members from Turkey)

<table>
<thead>
<tr>
<th>Gender</th>
<th>male and female</th>
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<tr>
<td>Nationality</td>
<td>Kurd</td>
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<tr>
<td>Family composition</td>
<td>parents and five children + one uncle</td>
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<td>Length of stay at the time of start of counseling</td>
<td>6 months</td>
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<tr>
<td>Age upon entry this country</td>
<td>mother 28, father 25</td>
</tr>
<tr>
<td>Which partners?</td>
<td>-</td>
</tr>
<tr>
<td>Running time</td>
<td>36 days</td>
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The father of the family contacted IOM in asylum facility during regular AVR information meeting with the residents of the asylum facility. The family travelled four years through Europe and have been returned from Germany to Slovakia within the Dublin Convention. The family declared their wanted to return home as soon as possible, however none of the family members had valid travel document. IOM explained the process of voluntary return and made necessary administrative measures to register them into the AVR programme.

Later it was necessary to repeat the visit in order to get supporting documentation for the issuing of the substitute travel documents for all family members. The father visited IOM in Bratislava in order to find out further details of the return procedure and he was also concerned how the family could get from Istanbul to Batman - their final destination (about 1200 km from Istanbul), as they were without any financial means. IOM provided detailed information about the return procedure as well as about the financial support upon departure. After receiving travel documents from the embassy, IOM immediately organized their return to country of origin and provided the family with financial support.

As outlined above, cases differ as far as throughput time and vulnerable group are concerned, but all cases reveal cooperation with several other actors in the field of migration and touch upon the activities described in 3.2.1 Forms of assistance provided in the participating states. Differences occurred per country with regard to the amount of the financial assistance and the number of AVR programs in the Member State. This is influenced by various national policies on AVR. Nevertheless, both the `old` and `new` Member States (represented by the case studies above) have a solid framework and methodologies for the pre-departure stage and their best practices on AVR, which are good examples for other Member States. Although there were several constraints per case study that could hamper the return, 10 cases were able to return.
Confidence in the organisations and return counsellors, the competence and dedication of the return counsellors, individual financial help, as well as no pressure in the decision making process were pointed out as key success factors. Every case emphasized the close cooperation between actors in the field of return migration, safeguarding the human rights of the returnee. Although every returnee was counselled with great care and attention during the pre-departure phase, it is mainly the victims of trafficking and returnees with health problems who are seen as most vulnerable, during the research phase.
The decision to return is influenced by various pressures or incentives. These push and pull factors have been described in this manual. It is therefore necessary to provide the returnee with objective and thorough information, in such a way that returnees can make a well-informed decision about their future. Vulnerable groups will need more detailed information and additional attention when making this decision.

It is essential that individual solutions are possible for all potential returnees which respect and safeguard their human rights. Each returnee has his/her individual problems and has to be seen as an individual, with certain needs. The individual aid and the financial assistance provided for it should be based on a concrete assessment by return counsellors and those involved in providing the support. Counselling is conducted through personal interviews. Important methodologies are the anamnesis of return counsellors and the explanation of prospects in the host country and the country of return (legal and social prospects). Less successful is to force a choice on potential returnees as this might destroy trust between return counsellor and client.

During the research phase, it was demonstrated that repeated contacts with the potential applicant proved to build trust between the return counsellor and the migrant which ultimately facilitated open communication. This enabled migrants to decide whether to return or not without feelings of pressure from time constraints. Reliable information and counselling on the basis of experience of a counsellor in the asylum and return fields are vital for the returnee to make a well informed decision.

THE PROJECT IDENTIFIED THE FOLLOWING RECOMMENDATIONS WITH REGARD TO COUNSELLING

**DO’S**

- assure respect for the dignity of people assisted;
- safeguard the family unit, giving particular attention to the special needs of women and children;
- Build up trust with potential returnees (help them even if they do not return!) instead of forcing a choice to return;
- Listen carefully and address all the questions and uncertainties/fears the migrant may have in as far as IOM responsibility allows, whilst at the same time clearly outlining the scope of the assistance offered by IOM or others in terms of return and reintegration assistance;
- Ensure that the migrant can speak directly to a qualified return counsellors and IOM staff members, preferably in their own language or if this is not possible, ensure that they have a clear understanding and can communicate well in a second language;
- Circulate reliable and up to date information to all beneficiaries on conditions in the areas of return, especially with regard to the factors that provoked their original flight from the country and collect data related to the socio-economic and cultural contexts of certain countries of origin;
- Stimulate and facilitate the use of the Internet to let the returnee acquire additional information relation to their return and home country;
- Assist in organizing and planning, every activity associated with return such as travel documents, provide counselling and orientation services, tend to unstable health situations;
- Ensure that when counselling UAMs, there is also a legal guardian (and caretaker) present for the minor;
- Provide clear information about the return process so that the migrant is aware of all steps that must be taken;
- Provide realistic time frames in the return planning process;
• Provide details about return travel- flight information, transit assistance, reception or other further assistance in the country of origin;
• Discuss the dangers connected to illegally staying in the host country;
• If possible, provide a reintegration package in close cooperation with other entities providing such assistance.

DON'TS
Try to avoid the following situations during counselling:
• Do not step over professional boundaries with applicants or aim to resolve issues which are not within its responsibility or capacity;
• Do not be pressured by aggressive/bullying behaviour. Return counsellors have a right to work in a calm and mutually respectful environment;
• Do not breach client confidentiality. This endangers the relationship with the client. Where needed a system could be worked out where the potential returnees permit the counsellor to share information of importance to safe return arrangement or reintegration (e.g. persons with health problems);
• Do not promise anything that is not verifiable (exact date of return, etc.).
• Never push migrants to decide quickly or force the migrant to return if he or she is not willing;
• Do not end the return counselling without providing all necessary and relevant information.

EUROPEAN PERSPECTIVE
To accomplish a humane and sustainable return for asylum seekers through an integrated approach, with special emphasis on vulnerable groups the project set the following goals: a working conference aimed at setting up and enhancing an EU-wide operational network. The integrated approach was also stimulated by the website which enabled the exchange to continue after the project’s finalization and facilitated the distribution of the project results to all 25 EU Member States. The website was launched at the conference and incorporated a forum which participants could use to share advice and information. This compilation is intended to facilitate and support a well-prepared return through recommendations for the target group and enhanced cooperation among the actors involved in the preparation of the return of asylum seekers from the European Continent to their country of origin. This manual and its recommendations is the result of the abovementioned activities and is one of many steps to be taken by governments and NGOs towards finding common ground and learning from one another in the field of AVR.
The UK Home Office represented by Sarah Bailyn and Andrew Jones provided a presentation on ‘Assisted Voluntary Return within the EU & the UK Presidency’s agenda’

The first part of the presentation highlighted AVR within the EU context. This is the first time that AVR is a separate issue on the EU Council’s agenda (October 2005). The council decisions were presented thereby emphasizing the importance of components such as a balanced, effective and sustainable approach to return with the added value of tailor-made packages. These packages should be available for vulnerable groups, skilled groups and for returnees to specific destination countries. Pre-return information and counselling pertaining to conditions in the country of return would also be important for a sustainable return. Now there is an opportunity to focus on return: more budget is available for return because less is needed for reception. The facilitation of the exchange of best practices between Member States and the support of voluntary return as a sustainable alternative to forced return was recommended. Prospects should be identified to strengthen practical cooperation between the EU, third countries and NGOs through multi-party projects, research and evaluation. With maximum use being made of community funding to support the abovementioned activities and developments. Opinions were split as to whether reintegration funding should be given cash or in kind.

The second part of the presentation outlined the AVR in the United Kingdom with special emphasis on unaccompanied minors, those who have impaired health or mobility and the victims of trafficking.

IOM Brussels, represented by Pascal Reyntjens and Peter Neelen working for Fedasil, Department of Reception presented ‘The REAB programme: a multilateral approach’

The presentation of IOM Brussels focused on several aspects of the REAB programme and AVR in Belgium. The Fedasil presentation focused on REAB versus the reception network. The plenary was informed on a survey conducted among return counsellors and their practical experience in Belgium with AVR. It appears that the return counsellors are not primarily oriented towards AVR. Their counselling pertains to the legal procedure and discusses AVR only when considered appropriate. There are plans to change this method of counselling- so that return counselling is available before an asylum seeker has received a final negative decision. AVR units consisting of return consultants will be established at all centres. The presentation was concluded with two important remarks: “what is necessary to consider return as an option? Trying to integrate these elements into return programs focused on individuals or specific groups will only be effective if the product is of high quality”.

Karl Bader of Caritas Vienna and Peter Zimmermann representing IOM Austria elaborated on ‘Unaccompanied minors in Austria and AVR’ and ‘Voluntary Return a New Beginning’

Caritas is not only an actor in return counselling, but also consults on the subject of the asylum procedure and social problems. The presentation held by Caritas explained the facts and figures in Austria in general. Caritas Austria’s target group was also reported by gender and age. Furthermore counselling procedures and several ways of assisting voluntary return were also mentioned. Confidence in the organisation and return counsellors, the competence and dedication of the return counsellors, individual financial help, as well as no pressure in the decision making process were
pointed out as key success factors. At the end about 60% of all clients who are counseled about AVR returned. The returnees do not all receive financial assistance, because not all of them really need the financial assistance. IOM Vienna held a presentation explaining AVR in relation to unaccompanied minors with special emphasis on returns to Romania and Bulgaria (most of the 18 returnees during 2005 originated from these countries). The root causes, the current caseload as well as problems and points for improvement were discussed. 55% of the unaccompanied minors are the victims of trafficking. After arrival in Austria many of them end up in the petty crime scene rather than being sexually exploited. As many unaccompanied minors disappear shortly before departure it has been concluded that cooperation between all actors is essential, mainly between the host and home country. Standardized and harmonized procedures are the key factors to the successful implementation of AVR for unaccompanied minors. Both presentations were published on the website.

NORWAY

Elin Nordtug working for the Norwegian Directorate of Immigration and William Paintsil of IOM Oslo discussed ‘Preparing for a humane return, the Norwegian Perspective’ The Norwegian delegation provided the plenary with a presentation on Voluntary Against Forced Return. Their VARP program is justified since it is cost effective which is beneficial to the government and it represents a humane and dignified return which is beneficial to the returnees. The plenary was informed of the target group in Norway such as rejected/unsuccessful asylum seekers, asylum seekers with pending asylum claims. The target groups are similar to other countries’ target groups. Their vulnerable/special groups include unaccompanied minors, people who have resided in Norway for a long period of time, un-returnable persons, the stateless (Palestinians), returnees with mental health conditions and mixed couples (e.g. Afghani + Pakistani).

INSTITUTIONAL FRAMEWORK

The program is funded by the National Police Immigration Service (PU) and it is implemented by IOM Oslo. Other collaborating partners include UDI, the embassies of the countries of origin, the Norwegian Refugee Council (NRC) and the Norwegian Association for Asylum Seekers (NOAS).

TARGET GROUP

The target groups for VARP include:
1. Asylum seekers who have received their final negative decision;
2. Asylum seekers with pending cases, who wish to withdraw their asylum application;

SERVICES PROVIDED AND ACTIVITIES

Through VARP IOM provides return information and counselling to willing clients. Undocumented potential returnees are assisted in acquiring valid travel documents from their embassies and given airport assistance on departure. As an executing agency, IOM organizes VARP information/counselling sessions for asylum seekers residing in over 70 reception centres (RCs) all over the country, disseminates information materials and runs a telephone hotline for the target groups. Return seminars/workshops are organized for reception centre employees, immigrant and other non-governmental organisations. IOM Oslo coordinates meetings with the authorities involved in asylum issues. Embassies of the countries of origin are called upon to issue travel documents for undocumented returnees. Under VARP, all voluntary returnees receive a travel allowance of either $30.00 (when journey takes less than 8 hours) or $60.00 (more than 8 hours).
RETURN INFORMATION AND COUNSELLING PRACTICE

Under the VARP agreement all asylum reception centres should be visited at least twice a year by IOM VARP information assistants to provide return information and counselling to all asylum seekers, both new and old. The information assistants speak some of the main languages spoken by people from the top 10 countries of origin. This reduces the use of interpreters. When there is a need for an interpreter, IOM Oslo ensures that only professional interpreters are used. The use of an asylum seeker as an interpreter is always avoided. During return counselling (information), the applicant is usually informed about IOM’s mandate in Norway and its limitation in helping asylum seekers to get asylum or refugee status in Norway. Potential returnees who allege that they have not been treated fairly by the responsible asylum processing institutions are advised to contact a lawyer or the Norwegian Organisation for Asylum Seekers (IOM cannot help the target group change their illegal status to a legal one in Norway). Applicants are also informed that they may travel with IOM only after they have been approved and accepted by the Norwegian government (the National Police Immigration Service (PU) and Norwegian Directorate of Immigration (UDI)). This information was published on the Coping with Return website.

SWITZERLAND

Grégoire Crettaz of the Federal office for Migration and Annette Raillard, Office for Migration-Canton Basel held a presentation on ‘Return assistance policy in Switzerland’. During the presentation on the AVR situation in Switzerland the target groups as well as return programs were illustrated at a federal level. Currently the return program only applies to asylum seekers. Within the return program a return dynamic should be created as should more adequate individual measures. Partners should be involved, a dialog with the country of origin should be started and concluded with structural aid projects. At cantonal level, the importance of consultation and networking was underlined. Lobbying and information provision through workshops and fact sheets plays an important role. The Swiss delegation gave clear examples on how to inform the returnees and provided case studies. It was interesting to note that the Federal Office develops projects to be implemented by IOM. The presentation was also published on the website.

IRELAND

Siobhan O’Hegarty working for IOM Dublin and Sinead Crowley of Team for Separated Children Seeking Asylum shared with the plenary an ‘Overview of best practices and methods currently used for counselling of unaccompanied minors in Ireland’. The Irish delegation concentrated on unaccompanied minors, having implemented two specific AVR programs for UAMs, and explained how to define the best interests of the child through an inter-agency approach. Experience with regard to AVR and unaccompanied minors has been shared by several NGOs. Several constraints and limitations posed in the process of return counselling were discussed such as: having difficulties in verifying information provided by the children, the lack of clear procedures for social work assessments in the countries of origin or the disappearance of children from care (16%). Last year, 69 referrals of unaccompanied minors were arranged by return counsellors. However, during the last 2 years only 13 actually returned; in general to Nigeria and Romania. In order to trigger the unaccompanied minor to think about return, the return counsellors discuss their future prospects and the reasons why they left their home country at the earliest opportunity with the unaccompanied minors. It was recommended if unaccompanied minors return to their country of origin, a professional who has a confidential relation with the UMA should escort them back home. Furthermore, contact should be established with the country representative and information should be gathered about childcare laws in the country of origin, with the issue of alternative care of UAMs also being one for consideration.
THE NETHERLANDS:
Mariska Heijs, Central Agency for the Reception of Asylum Seekers and Ton Pai Lau IOM the Netherlands gave an ‘Overview of best practices on counselling and AVR in the Netherlands’

During the first part of the presentation the work of COA and its relationship with Dutch return policy and the aliens act was clarified. Currently the COA manages 90 reception centres in the Netherlands of which 85 are return oriented and 5 integration oriented. About 32,000 asylum seekers are housed in these 90 centres. Mrs Heijs elaborated on the role of the case manager/return counsellor within the counselling process how to discuss the possibilities of returning to his/her country of origin. The case manager/return counsellor classifies the asylum seekers into one of the following categories: (1) Unwilling - (2) Influenceable and (3) Willing. Efforts are made to remove possible obstacles for return. In this context 9 categories of obstacles were identified. IOM the Netherlands elaborated further on this theme of counselling approaches and made a distinction between asylum seekers that cannot and do not want to return. In this way 4 categories were identified, each with its own counselling approach. Counselling was defined as ‘helping asylum seekers to make up their mind’. The question was raised as to what can be stipulated as a vulnerable group and in particular why? What makes them vulnerable? Above all from which perspective: from that of the host country or from the perspective of their own country?

DELEGATES PRESENT AT THE CONFERENCE OF COPING WITH RETURN
7&8 NOVEMBER 2005 AMSTERDAM
(70 persons in total)

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ANNEX II

LIST OF ABBREVIATIONS

AVR Assisted voluntary return
CAW Advisory Centre for migrants
COA Central Organ for the Reception of Asylum seekers
ERF European Refugee Fund
EU European Union
FEDASIL Federal Agency for the Reception of Asylum Seekers
IOM International Organization for Migration
MHD Migration and Health department
MOI Ministry of Interior
NGO non-governmental organisation
NIDOS Legal Guardianship office for minor asylum seekers & Refugees
UMA Unaccompanied minor asylum seeker
UNICEF United Nations Children’s Fund
VoT Victims of Trafficking
WHO World Health Organisation

ANNEX III

FURTHER READING:

• Conroy, P., (2003), Trafficking in Unaccompanied Minors in Ireland, International Organization for Migration, Dublin
• Council of the European Union, [2005], 2683rd Council Meeting Luxembourg, Justice and Home
Affairs, Council of the European Union, Brussels

- Green, E. (2000), Unaccompanied Children in the Danish Asylum Process: Experiences from Legal Counselling of and Assistance to Children, Danish Refugee Council, Copenhagen
- IOM (1996) IOM Policy Concerning its Assistance to Unsuccessful Asylum Seekers and Irregular Migrants Returning to their Country of Origin, MC/EX/INF/51;

Also visit the Coping with Return website: www.iom-nederland.nl/extranet to visit the project library.