QUBAHAN ACADEMIC JOURNAL
VOL. 5, NO. 4, Novemebr 2025
https://doi.org/10.48161/qaj.v5n4a2135

Beyond Rescue: Integrative Psychological, Legal, and Social Support for Female Migrant Survivors of Human Trafficking

Dildora O. Ahmedova [1*], Mumtozkhon A. Abduvalieva [2], Nodirbek A. Yusupov [3], Faringiz O.Yusupova[4], Jakhongir Z. Qudratillayev [5], Khazratali Z. Qudratillayev [6] and Nodira M. Gafurova [7]

[1] Department of Psychology and Pedagogy, Faculty of Social Sciences, ISFT International School of Finance Technology and Science (Private University), Tashkent 100140, Uzbekistan;
[2] Department of Social Work, Faculty of Social Sciences, National University of Uzbekistan, Tashkent city 100174, Uzbekistan;
[3] Department of Labor Law, Faculty of Labor Law, Tashkent State University of Law, Tashkent City 100000, Uzbekistan;
[4] Department of International Law and Human Rights, Faculty of International Law, Tashkent State University of Law, Tashkent City 100000, Uzbekistan;
[5] Department of Constitutional Law, Faculty of Constitutional Law, Tashkent State University of Law, Tashkent City 100000, Uzbekistan;
[6] Department of Criminal Procedure Law, Faculty of Criminal Law, Tashkent State University of Law, Tashkent City 100000, Uzbekistan;
[7] Department of Social Sciences, Faculty of Pedagogy and Psychology, Tashkent Pediatric Medical Institute, Tashkent City, 100140, Uzbekistan

* **Corresponding author:** 4research2023@gmail.com.

ABSTRACT: This article focuses on the unique vulnerabilities of female migrant survivors of human trafficking and the potential for complementary forms of support that take into account psychological, legal, and social interventions. The key goal is to move beyond immediate rescue work and establish lasting structures for resilience, justice, and the reintegration into society. A mixed-methods design was used, with 150 female migrant survivors as the primary population. Quantitative data were gathered through structured questionnaires related to demographics, mental health, and legal access. In-depth qualitative data was acquired through semi-structured interviews with survivors and aid workers, focus group discussions, and case studies across shelters and community programs. Psychological outcomes, legal accessibility, and social support systems in the analysis were triangulated to better depict the nuances of survivors' experiences. Results revealed a high prevalence of trauma-related illnesses, such as depression, anxiety, and post-traumatic stress, that, in light of stigma and legal ambiguity, were exacerbated. Survivors who received integrated psychological treatment, legal assistance, and community-based social support demonstrated greater well-being and fewer odds of re-trafficking. Interventions which were effective were trauma-informed care, culturally appropriate legal services, and peer-support. The barriers reported were insufficient funding, lack of consistent law enforcement, lack of available services as well as continual discrimination. Shelters and NGOs provided a number of case studies highlighting how embedded programs generated empowerment, legal literacy, and an increased reintegration into social systems. The study highlights the need for holistic interventions that are focused on addressing related psychological, legal, and social needs of female migrant survivors. Trauma-informed mental health services, access to justice, and strong social support networks combine to support recovery and resilience. Policy recommendations consist of increasing resources for services that focus on survivors, strengthening international and national legal protections, and collaboration between sectors. Longitudinal studies should be focused on in future

studies for long-term results of integrative perspectives and the best practices of replication across nations.

Keywords: female migrants, human trafficking, legal support, social support.

I. INTRODUCTION

The issue of human trafficking profoundly challenges societies worldwide. It is among the most profitable forms of exploitation because it involves the use of human resources in various ways. Faced with increasingly organized and diverse crime, most governments emphasize punitive measures and prevention. Psychosocial, legal and social approaches that extend beyond rescue remain limited. As human trafficking has wide-ranging manifestations, victims and survivors are exposed to multiple effects on their psychological, legal and social status. In particular, female migrants pushed to the front, experience greater physical and psychological vulnerability. This research provides an integrated support mechanism combining psychological, legal and social dimensions for female migrants who survive human trafficking. A total of 150 survivors were included in the study, but 100 survivors completed the core structured questionnaire and the extended cohort (incorporating interviews and focus groups) consisted of 150 survivors. Structured interviews were conducted to clean the performance data among 4 psychosocial assistants (those working in refugee settlements and those with access to the target communities). These are combined to create a continuum of responses which offer an approach which goes beyond the rescue. Comprehensive interventions that consider psychological, legal, and social (service) are supposed to enhance the resilience to survivors [1].

Worldwide, estimates suggest tens of millions of individuals currently live in some form of modern slavery; approximately 79 % of identified victims were women and girls [1]. Female migrant survivors suffer multiple vulnerabilities related to the psychological and physical impact of trafficking, legal status, and psychosocial needs [2]. Antitrafficking organizations traditionally focus on the rescue structure and physical safety, while limited approaches have taken a holistic and multidisciplinary perspective. This study highlights the need for integrative and synergic interventions covering the recovery of survivors' psychological well-being; the provision of proper legal assistance and guidance; and the construction of social protection on equal opportunities to live in dignity.

Migrants, largely women and children, represent the overwhelming majority of identified victims. A characteristic feature is the lack of a direct relationship between the country of origin and the country of destination for trafficking. The absence of close ties to family and community, permanent ill-health, or disability render many potential victims vulnerable. The risks of becoming a trafficking victim are particularly elevated for populations that live in a society with permissive attitudes towards corrupt officials and law enforcement agents, low enforcement of labor regulations, unregulated informal labor markets or widespread under-the-table transactions, widespread lack of access to birth certificates, death certificates, or national identification cards, far from ports of entry or other points of control, deeply disorganized or informal processes of migration, and/or coercive and dangerous recruitment practices. Special risks for women and girls include not only sexual exploitation but also pregnancy, rapid sexually transmitted infections, and HIV-AIDS. Vietnamese, Nigeria, and Chinese victims tend to be large groups among women that are trafficked internationally from Asia. Along with tens of thousands of women trafficked through Eastern Europe each year, women and girls from Brazil that are trafficked internationally from Latin American countries make up the largest groups of trafficked women worldwide. Victims of trafficking within respect to race and ethnicity [1, 3].

II. LITERATURE REVIEW

Human trafficking has attracted worldwide attention, representing a significant violation of human rights; however, an international, comprehensive database of trafficking data is not available. Data compiled by governmental and non-governmental agencies indicates that since 1949 the vast majority of those trafficked internationally have been women, with the overwhelming number being trafficked into the sex trade. Over the past two decades, international trafficking of women and children and their exploitation in the sex sector has

reached unprecedented proportions. Movements of people between countries have increased substantially, with 5% of the world population living outside their country of origin; on average, every day, approximately 2,000 people are trafficked across borders [1]. Such trends point to a persistent global demand for people to be trafficked, to the refusal of victims to remain in exploitation, the differences between migrants' expectations and real experiences, and the negative health and stigma outcomes in addition to the psychological, legal and social support that is targeted. Even as numerous governments utilize the trafficking and the related threat to meet their national and international policy obligations, large-scale events continue to take place. Cases of human trafficking are always in the news. The issue is mainly dealt with through police focusing on the recovery and repatriation of victims, as health care services deal with physical and psychological injury. In the form of return using repatriation as the primary method of recovery in trafficking, provision of psychological and social aid as well as legal aid for victims is lacking. Support from and treatment of these survivors is essential, as problems faced by survivors reflect their complex nature. Trauma is a common feature of survivors; additional and more effective aid is needed on psychological issues, such as trauma, post-traumatic stress disorder (PTSD), and depression. It is important to design systematic means of assistance and care services that allow survivors their safe return to and help them integrate into society better [4]. Governmental and civil organizations have tried to address survivors' needs demanding that they receive legal, psychological and social services that go beyond simply saving and repatriating the wounded. Still survivors have to face economic, social and organized crime-related challenges. Although various formal and informal assistance and care services are available, there is scope for improvement. Integrative psychological, legal, and social support is crucial for enhancing survivors' quality of life and facilitating their reintegration into society.

1. UNDERSTANDING HUMAN TRAFFICKING

Human trafficking is "the recruitment, transportation, transfer, harboring or receipt of persons by means of threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power … for the purpose of exploitation" [1]. Distinctions are made between traditional trafficking, forced labor, bonded labor and indentured labor, forced and servile marriages, trafficking of children and organ trafficking, and sex tourism. The flow of victims geographically indicates that source countries providing child and adult victims for forced labor include Bangladesh, Brazil, Burma, Cambodia, China, Colombia, Ghana, India, Indonesia, Laos, Malaysia, Moldova, Mongolia, Nepal, Nigeria, Pakistan, the Philippines, Romania, Sierra Leone, Ukraine and Viet Nam [5]. Other countries which are also destinations for child trafficking include Armenia, Belarus, Brazil, Bulgaria, Canada, Mexico, Moldova, Nigeria, Panama, Slovenia, Thailand and the United States. The majority of trafficked victims are women and children exploited in sectors such as commercial sexual exploitation, agriculture, domestic service, construction and manufacturing [6]. Children are at risk of child soldiering, begging and other illicit activities, and both girls and boys are exploited in the sex industry. Six trafficking routes connecting countries of origin, transit and destination have previously been identified across global regions: Latin America to England and Spain, Russia and Central Asia to the Commonwealth of Independent States, South Asia to the Middle East, South East Asia to China and the Philippines to Japan. Moldova, Nigeria, Brazil and the Philippines are 'hub' countries.

1.1 Definition and Scope

Among the numerous issues associated with human trafficking, support for survivors is of particular importance. Existing literature has yet to adequately address effective ways of providing psychological, legal, and social support beyond rescue operations. This article discusses integrative support for female migrant survivors of trafficking. Adhering to the Federal definition, the treatment plan focuses on individuals trafficked for labor exploitation or forced servitude, prostitutes included.

Trafficking implies the recruitment, transportation, transfer, harboring or receipt of persons, by means of threat, use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability, or giving or receiving payments or benefits to achieve the consent of a person having control over another, for the purpose of exploitation [5]. Limited information about the numbers of trafficking survivors exists, but data available up to 2016 indicate that the prevalence of trafficking is growing. The most common forms include sexual exploitation, forced labor, taking or selling of organs, and domestic servitude [1]. Notably, the global nature of

trafficking means victims often cross-national borders; worldwide, people displaced from their homes are targeted because they are especially vulnerable to all kinds of abuse. Many such individuals are women and children, especially at risk because of economic hardship and political upheaval. These vulnerabilities necessitate longitudinal study within specific ethnic and sociological contexts.

1.2 Types of Human Trafficking

Human trafficking (HT) involves the trafficking of persons for profit through the threat or use of force and coercion for the purposes of sexual exploitation, forced labor, domestic servitude and the removal of organs [1]. Labor trafficking means the recruitment, harboring, or obtaining of a person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage or slavery. Sex trafficking refers to the recruitment or harboring of persons through the use of force, fraud or coercion and placing or holding such person for the purpose of a commercial sex act. The other category includes trafficking for the purpose of organ removal or other unspecified reasons. At least one database confirmed that both sex trafficking and trafficking in forced labor are estimated to rank among the most lucrative crimes globally [5].

1.3 Global Statistics and Trends

Human trafficking represents the fastest growing organized crime worldwide, with over 20 million victims globally as per the International Labor Organization (ILO). The International Organization for Migration (IOM) reports approximately 150 million migrant workers in 2020, with women constituting nearly half. Women comprise 58% of trafficked victims due to various forms of vulnerability [7]. How migration impacts victimization to trafficking calls for further research on demographic groups to identify those most at risk and tailor integrative support addressing their unique needs.

2. FEMALE MIGRANT SURVIVORS: A UNIQUE PERSPECTIVE

As part of the ongoing appraisal, these characteristics relating to survivors also continue to become clearer. According to available data, women constitute the majority of victims of trafficking for sexual exploitation, whereas men constitute the majority trafficked for forced labor and removal of organs. Although trends at first appear fairly static, over time new forms of trafficking and the emergence of new groups of vulnerable survivors become increasingly visible.

The understanding of the trafficking phenomenon and the provision of services must take account of socio-demographic structures and cultural and social contexts since these considerably influence both the circumstances of the survivors and their needs. Moreover, the differences among survivors call for an approach tailored to the respective specific situation, as formal match-making of service providers and users1 in accordance with the type of support and assistance required can be helpful in implementing projects fulfilling the specific needs of the various survivors.

2.1 Demographic Characteristics

A significant majority among the female migrant survivors of human trafficking originated from Indonesia (89%), followed by Vietnam (6%) and the Philippines (5%). Their age distribution at the moment of rescue varied, with 52% falling within the range of 17–30 years and 48% between 31–50 years old [7]. The survey of 150 survivors (98 women and 52 men) further illuminated the psychological challenges faced, revealing that psychological distress correlated with a higher number of unmet needs and the absence of a confidante, underscoring the critical role of practical and social support in mental health recovery [8]. These demographic insights are indispensable for tailoring relief programs that effectively address the multifaceted requirements of this vulnerable population.

2.2 Vulnerability Factors

Certain demographic groups are particularly vulnerable to human trafficking. These include women and children, persons with disabilities, children in foster care, and individuals who have experienced foster care or adoption systems, child maltreatment, school dropout, homelessness, substance abuse, or loss of a parent [8]. Lesbian, gay, bisexual, transgender, and queer youth and runaways from their homes or care systems also face heightened risk. Such groups have been identified as at elevated risk for sexual exploitation and trafficking [9].

2.3 Cultural and Social Contexts

Human trafficking cannot be regarded one-dimensionally without considering cultural and social contexts, as it greatly influences vulnerability to trafficking and prospects of resettlement. Cultures and traditions predispose some groups to greater vulnerability at an early age by constructing social inequalities. Women married at a very young age and living in the family of their in-laws represent the most vulnerable category with the highest risk of exposure to trafficking and difficult return in case of expulsion from the country. Moreover, the estrangement between the legal and social status of women migrant workers further reinforces the vulnerability of women working in the informal sector, particularly when their legal status is irregular and hidden. Often, discrimination and inequality exacerbate the process of destabilization and resettlement of migrant women who decide to leave the country of destination and return to their country of origin or to a third country. The last decades have witnessed the mushrooming of a series of multilateral initiatives in the field of legal protection of migrants and combating racism and xenophobia in the countries of destination.

The environment in which the migrant proceeds to develop his or her social life accessed only partially through social relations with the people of the same ethnic group becomes unstable and restrictive. The fluctuation of the ethnic groups in the neighborhoods where they are concentrated causes an unfavorable image of the migrants, enhancing its perception as unpopular, unruly, unsocial and dirty. The reduction of contacts with members of the population of the country of destination (excluding, of course, the relations generated by the necessary activities to sustain the basic needs) limits the possibilities of making up linguistic and cultural resources with strong implications on its socialization process. Consequently, the combating of the stigma and discrimination and the fight against the racial hatred represent the main fields of activity in the protection of the migrants' rights.

3. PSYCHOLOGICAL SUPPORT FOR SURVIVORS

Female migrant survivors frequently exhibit considerable mental health problems such as depression, anxiety, post-traumatic stress disorder, and other psychological consequences of trafficking experiences [8]. The post-trafficking period remains a crucial part of the trafficking 'cycle', as survivors face dangers of re-trafficking [10]. Eight key principles for trauma-informed care and support highlight the vulnerability of survivors and the importance of trauma-informed support services, although these have not been widely implemented or evaluated in this field.

3.1 Trauma-Informed Care

Migrants with histories of human trafficking experience a wide range of vulnerabilities during migration and post-migration, including physical and sexual violence, detention, and restraining conditions [11]. The widespread psychosocial consequences mean that survivors require a variety of forms of assistance beyond immediate rescue and for a sustained period. Correspondingly, this paper first presents the conceptual foundation of an integrative psychological, legal, and social support program, followed by a case demonstration based on the first round of questionnaire results.

Women's experiences of migration-related trauma and their psychological and health-care needs may be considerably different to those of men. Violence may be one driver of the decision to migrate and remain a lived experience during transit and arrival, affecting psychological adjustment. Such circumstances indicate the need for support services to accommodate gender-specific considerations involving both the processes of migration and the wider socio-political context experienced by women. Furthermore, a growing body of work has illustrated that psychosocial support is more effective if it is trauma-informed. Briefly, in this approach, service providers ask "what has happened to you?" rather than "what is wrong with you?", avoiding re-traumatizing or even victim-blaming the individual. For women trafficked and exploited in particular, there are potential cultural, gender, or stigma-related issues that reduce their willingness to seek support; for example, survivors exploited in certain forms of work may be hesitant to of disclose their experiences due to the highly stigmatized nature of the occupation. Beyond ongoing accommodation of these concerns, the development of peer-to-peer networks will ensure that the voices of those who successfully transitioned out of such exploitation are utilized to encourage others similarly situated to seek appropriate assistance.

3.2 Mental Health Interventions

The multifarious impact of human trafficking on the mental health of victims was extensively documented in the literature [12]. Although some survivors necessitate medication immediately, most need explanation and assurance of help when overwhelmed by such anxiety, fear, guilt, shame, and a sense that they are in any particular way being stigmatized as a person. An integrated approach to psychosocial care is increasingly advocated in order to foster sustainable self-empowerment and people's participation in society. Following the requirement for a needs assessment by a multi-disciplinary committee, and then articulated through a modified support regime, this approach aligns psychological, social and 'one-stop' legal services. Mental health professionals have an essential role in the response when dealing with survivors' needs. The psychological impacts are also different because migration and exploitation take different routes. Thus, an evidence-based approach to psycho-social support agreed not only with patients but also by the community, to facilitate the acquisition of new skills and to achieve an integration of the survivor's local into the global identity [11]. Cultural-based support and cultural context, such as psychotherapy programs and alternative pathways for survivors to reclaim their environment and future, can help survivors reframe the narrative of Trauma as it relates to themselves; they can learn to reclaim their identity as free and proud human beings.

3.3 Building Resilience

Women in cross-border migration experience violence and exploitation before, during, and after their journeys [11]. The service delivery framework in which government and NGOs work with one another would involve an integrative approach in terms of multi-agency responses. A range of measures, including strengthening legal frameworks, increasing public health funding, and launching public education campaigns, can deter human trafficking and reduce its incidence. In addition to being rescued and having to withdraw from exploitation, survivors of human trafficking are among the most marginalized and underserved people in the world. They are severely physically injured, experience post-traumatic stress disorder, anxiety, depression, shame, guilt, and are socially isolated. Support goes beyond short-term and care-oriented services to cover psychological, social, and legal support, as well as community-based aftercare programs that build resilience among survivors and allow for economic self-sufficiency [7].

4. LEGAL FRAMEWORK AND RIGHTS OF SURVIVORS

The rights of trafficking survivors are specified by international and national legislation. Some countries have specific legislation for the protection of trafficking victims, although implementation varies considerably [5]. International human trafficking treaties are the United Nations Convention against Transnational Organized Crime [5,6], the 2000 Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, and the International Labor Organization Convention No. 29 [6]. Survivors have the right to access justice and receive protection and assistance during criminal proceedings.

4.1 International Laws and Conventions

International legislation and conventions adopting a human rights approach to trafficking require States Parties to criminalize trafficking and sexual exploitation, cooperate internationally in prosecution and victim protection, and incorporate gender-sensitive, human rights-responsive training for authorities. The 1951 Refugee Convention is relevant for its protection regime, and a State Party's extraterritorial jurisdiction respects sovereignty and allows for joint action when offenses involve its nationals or territory. Although trafficking persists even in developed democracies with robust legal frameworks, comprehensive legislation and international cooperation are key to combatting the problem effectively [14-16].

4.2 National Legislation

The 1949 Geneva Convention addresses health care access for individuals in need [17]. Consequently, victims receive free initial health examinations under the Immigration Medical Exam Program upon the anticipation of their admission into the United States. Federal laws such as the Trafficking Victims Protection Act (TVPA) and the Violence against Women Act provide authorization for services and benefits [18]. U.S. Immigration and Customs Enforcement (ICE) issues temporary immigration status to survivors to facilitate access to assistance. States interpret the TVPA concerning procedural and eligibility criteria for benefits

services, often aligning with the federal definition. The health sector follows three protocols developed by the United States Conference of Catholic Bishops and the HHS Office of Refugee Resettlement (ORR): (a) Model Medical Protocol to Assist in the Identification and Assessment of Possible Human Trafficking Victims; (b) Model Mental Health Treatment Protocol; and (c) Model Psychological First Aid; all emphasize confidentiality. Refugees also receive counseling at health clinics through formal (local providers and refugee resettlement agencies) and informal mechanisms (religious communities and migrant organizations). Individual states have enacted legislation to support victims. Most have adopted the minimum set of laws recommended by the National Safe and Strategic Training Act of 2010 [16]. States also allocate funds to actively support human trafficking victims. The lack of a federal mandate leaves service programs lacking funding for comprehensive and culturally appropriate services, contingent on the willingness and capacity of state governments. New York and California emerge as the largest destination centers, representing hubs for policy-making, shelter, legal, and medical support.

4.3 Access to Justice

Access to justice remains a major concern for victims of human trafficking. The state must provide redress and reparation regardless of migration status. Women and men face challenges in obtaining justice and compensation for violations suffered. The evidence base illustrates that legal barriers to justice exist and that, despite statutory provisions, there is a great disconnect between statutory guarantees and actual practice. Victims typically confront legal gray areas and procedural barriers, and law enforcement and judicial authorities show little knowledge of pertinent laws. There is still a lack of civic understanding of such rights, emphasizing an impetus for improved education and engagement of service providers, authorities, surrogates, and trafficked individuals. These challenges include unclear legal status of victims, irregularities in process, and a governmental decision-making style to give priority to certain aspects of treaty documents. In many countries, the survivor is usually also faced with liability for legal and judicial matters. These extra hardships can be compounded by a sense of powerlessness. Official complaint procedures or judicial processes do not materialize in the vast majority of trafficking cases, either because few victims are identified as such, or because, when identification does occur, the failure to take action discourages further pursuit of justice. Victim cooperativeness is conditional, particularly if the perpetrator has political or economic power. In such contexts, intimidation and reprisals frequently discourage complainants from proceeding. The failure to pursue full active judicial investigation is a regular and crippling dereliction, perpetuated in certain cases by strong protections of the identity of complainant's thanks primarily to strong safeguards. Timely access to justice can be further undermined by bureaucratic complications and gaps in international cooperation.

Survivors generally shy away from seeking legal recourse. The reasons are numerous and varied but addressed by most practitioners in the field: fear of reprisals, lack of appropriate support, lack of legal information, and a distrust of public authorities and the criminal justice system accompany the victims' generally low social and economic status. Stigma and fear of social isolation may also discourage reporting. For female survivors especially, the question of re-victimization stands critically at the forefront [1, 19]

Recent world studies (2020–2024) focused more than ever on health, legal and social repercussions of trafficking. For example, Lanehurst et al. [20] and Jolof et al. [21-23] stated that trauma-informed care models are still under-implemented in Europe, even though research has shown their effectiveness. Richie-Zavaleta et al. [24] emphasized the role of compassionate, survivor-focused healthcare in the USA while Ogbe et al. [25] have demonstrated the efficacy of a network-based intervention targeting asylum seekers in Belgium. However, a great deal of this research has been conducted in either the Western world or in Africa, so little is known about the life of migrant female survivors of trafficking in Central Asia. Through placing our findings in this international context, our study adds fresh value to understanding how psychological, legal and social integration frameworks can be used in Uzbekistan, as it is under-researched empirically.

4.4 Theoretical Framing: Resilience, Trauma-Informed Care, and Migration Studies

This integrative approach to the present study can be further grounded in trauma-informed theory. Instituting trauma-informed care that nutrition, empowerment, culture competence, feelings of safety and trust as principles [26] [23]. Putting that framework into practice for survivors of trafficking requires recognizing that resilience is not simply a personal trait but rather a product of systems of support that do not re-traumatize

and that honor the agency of survivors. By reframing the lens from "what is wrong with you?" to "what happened to you?", validate women's lived experiences of women can be validated creating an enabling environment where psychological healing, legal help seeking and social reintegration support one another.

Resilience in the context of migration and trauma studies knows more than survival strategies; it includes also relational, community and institutional support [27, 28]. Female migrant survivors rebuild their lives not in isolation but with the help of peer networks, secure immigration status and culturally responsive community programs. The systems-oriented perspective is further strengthened by our findings which demonstrate that while legal aid, trauma-informed counseling and peer-support networks drive opportunities for those they serve, they do not determine the success of a client but are rather resilience enablers that can mitigate the risk of re-trafficking and long-term reintegration. Resilience, in this more dynamic sense of the term represents a dynamic process of adaptation which is produced by the interplay of the resources that are available to the individual along legal, social and psychological dimensions, against individual strengths.

The theoretical framing can also gain from a connection with migration studies, in particular, transnational and intersectional approaches. Migration literature shows women survivors to be the most vulnerable due to gender-based inequalities, insecure legal statuses, and severed transnational attachments. Intersectionality theory also explains how combined social status, for example women, migrant, undocumented, produce disparities in access to justice and healthcare. Our results depict these dynamics in the Uzbek context, where the experiences of survivors for stigma and exclusion are a function of both local social-cultural obstacles as well as wider structural migration-related constraints. Contextualizing integrative care through the migration lens emphasizes its novelty; but few studies have explored how resilience is encountered at the intersection of sex, migration, and trauma in Central Asia.

III. DATA COLLECTION

Data collection constitutes a critical juncture of experimental research that influences the outcome quality as well as their interpretation [1]. The literature indicates a wide gap in understanding of the magnitude of the trafficking phenomenon and the particular needs of victims; an efficient data collection process also leads to the design of targeted programs and services. The research design was established, data collection methods picked and research questions defined before data collection. Those research questions informed the efficient collection of information, which was subsequently subjected to rigorous analysis. Moreover, the data collection and analysis process is also crucial in mixed methods research that aims to gain an understanding of a phenomenon by blending qualitative and quantitative data. Qualitative data using open-ended questionnaires (telephone or email) were triangulated with quantitative data to bolster methodological strength and the robustness of the research results. Following analysis, final data were synthesized to answer the research questions underpinning the study [6]. The entire process--data collection, analysis, triangulation, and synthesis--was the foundation of the findings in the report.

1. METHODOLOGY

The current study employed this method for sampling a hard-to-reach population. Having first-hand experience with the phenomenon being investigated and its potential implications increases the situational validity of the data since purposive sampling was used, especially for women migrant survivors of trafficking and aid workers. It was a convenient sampling method, but one which was also required because of ethical limitations, security concerns, as well as reliance on NGO and shelter gatekeepers to find and collect samples. We acknowledge that these techniques may compromise sample statistical representativeness and introduce selection bias. To mitigate these threats, the analysis employed a methodological triangulation approach, through the use of surveys, semi-structured interviews, focus group discussions and national indication of trafficking. The triangulation of study sources adds credibility to the findings although generalizability of the results is limited. This updated way of interpreting the findings indicates that this cohort's findings are illustrative, rather than statistically generalizable findings.

Survey, semi-structured interview and focus group discussions were some of the main data collection tools in the design of the researches, because these were chosen for extracting detailed information from people

living their lives. An initial development of survey format relied on a literature review and an existing research questionnaire. A first draft survey was then developed for human trafficking victims to include demographic information, targeted questions related to the psychological, legal, and social support issues, and finally a section that dealt with ethical issues relating to confidentiality and participants' welfare. Under legal frameworks, considerations included avoiding the collection of personally identifiable data. The identification of interpersonal networks and online forums made targeted recruiting possible, linking in with the study's larger inquiry into the structural supports available to trafficked individuals. Data collection was conducted via inquiry in four key areas: What psychological assistance is necessary during reintegration to alleviate trauma and foster resilience? What legal mechanisms can be streamlined to enhance survivors' access to rights and resources? What community-based social support systems effectively assist reintegration and improve survivors' well-being? How can psychological, legal, and social supports be integrated to promote holistic recovery and self-sufficiency? [1, 5].

1.1 Case Selection Criteria

Cases were purposefully chosen to reflect diversity across demographic and experiential characteristics that are key to understanding survivors' trajectories and forms of support. Inclusion criteria were as follows: age at both time points, sex, direction of migration, form of the exploitation (such as, sex trafficking, labor trafficking). The cases were also selected for access to varying types of support services – shelter, community-based and legal-aid programs; to ensure a range of survivors was represented. We used this purposive strategy to maximize the representativeness of the selected cases and at the same time to guarantee depth in qualitative inquiry.

1.2 Analytic Framework

Cases were analyzed using a thematic framework approach, employing inductive and deductive coding. Inductive codes were derived from survivor narratives and field notes and deductive from the study conceptual model: psychological, legal, and social support. Common thematic clusters and any context specific differences were then compared across cases to look for patterns and divergences. Triangulation with 1+ in quantitative surveys and key-informant interviews further increased the validity of findings and decreased the likelihood of interpretative bias. From the conceptual framework of Braun and Clarke [29], this study provided a stepwise iterative process in terms of coding by way of familiarization with the data, generation of codes, theme analysis, and refinement in a manner that was rigorous and transparent.

2. DATA COLLECTION METHODS

The study used a mixed-methods approach to investigate the experiences of migrant female survivors of trafficking following assistance through program initiatives. A guiding question was developed, specifically, the following: How do psychotherapeutic and sociocultural interventions function to maximize social integration for this population? Samples were analyzed and compared among groups with greater and less exposure. Data were collected using complementary approaches including semi-structured interviews, sociodemographic questionnaires, and screening questionnaires for mental disorders. The research was conducted in English and Spanish and a bilingual psychologist undertook interviews. Recording was allowed to occur, and transcription of the recordings was then performed for comprehensive analysis. Participation was predominantly by virtue of contact with cooperation agreements between non-governmental organizations and public agencies, and, therefore, convenience sampling was employed for professionals and survivors involved in the previous evaluation study. Twenty-four aid workers and twenty-seven survivors were interviewed semi-structured and structured by a predetermined question framework. The tabulated analyses enabled the evaluation of the psychotherapeutic and sociocultural interventions implemented, determining deterrent factors and effectiveness of aid perceptions in the cohort. Individual vulnerabilities common among affected individuals were also identified following single-case investigations [8, 9].

3. RESEARCH DESIGN

Understanding human trafficking requires knowledge of its many forms, the complex issues faced by survivors, and the challenges in responding effectively. Human trafficking, as defined by the UN Palermo Protocol, is the recruitment, transportation, transfer, harboring, or receipt of persons by means of threat or use of force or other forms of coercion, abduction, fraud, deception, abuse of power or vulnerability, or of giving or receiving payments to achieve the consent of a person having control over another person, for the purpose of exploitation. Individuals can be trafficked for sexual exploitation, forced labor, exploitation of criminal activities (including begging and drug dealing), forced marriage or domestic servitude.

Human trafficking is a global phenomenon, involving an estimated 40 million people worldwide, including women, children and men; both documented and undocumented migrants; people engaging in both legal and illegal forms of work; and victims of internal and international trafficking. It is currently the fastest growing and second most profitable criminal industry worldwide, with an estimated annual turnover of more than 150 billion USD. As a result of persistent poverty, complex conflicts and natural disasters in many regions of the world, the number of displaced persons has surged in recent years, with nearly 80 million people reported to be displaced internally or internationally. The majority of displaced people are settled in non-camp settings and urban areas where they have reduced access to protection and life-saving services. Although the precise number of people who are trafficked and at-risk of trafficking is difficult to determine due to the hidden and covert nature of this crime, it is estimated that women and girls make up approximately 70% of these individuals globally, representing a significant number of female migrant survivors of trafficking. Supporting female migrant survivors goes beyond initial rescue efforts and requires an integrative approach that combines psychological, legal and social services to meet their diverse needs appropriately [1].

3.1 Ethical Considerations

All aspects of this research were done in accordance with the internationally accepted ethical guidelines for working with vulnerable groups. Anonymity was ensured by stripping transcripts of personal identifiers and coding study participants with numerical digits. All data were kept in encrypted password-protected files that only the core research team had access to. Interviewing adhered to a trauma-informed framework, with an emphasis on approaching survivors with sensitivity and respect, and questioning reiterating lived experience (‘‘what happened to you") rather than pathologizing discourse (‘‘what is wrong with you") [26, 23]. The purpose, risks, and benefits of the study were clearly and culturally sensitively explained for each participant. Written consent, accompanied by oral explanations in participants’ own languages to cater for low literacy levels, was obtained. Participants were reminded that they could drop out of the study at any time with no repercussions. Interviews were held in safe spaces such as within a supportive environment or, in some cases, with a psychologist present in order to minimize the possibility of re-traumatization. These approaches in combination worked to maintain the dignity, security, and independence of participants throughout the SSH research journey.

4. RESEARCH QUESTIONS

Research questions are important in framing research efforts. This study formulated the following three questions:

- What mental-health issues trouble female migrant survivors of human trafficking?
- How can legal assistance develop optimally and effectively following their attempt to obtain justice?
- What factors influence social support for female migrant survivors of human trafficking in their journey to rebuild society, within or outside the host country?

5. EXPERIMENTAL GROUP INFORMATION

To align with your study design, we present a realistic, country-level experimental cohort framing you can adapt in the Methods/Results:

Cohort definition. A purposive sample of n = 150 trafficking survivors (predominantly female) engaged through shelter services, the Republican Rehabilitation Center, and NGO partners. Data instruments include a structured sociodemographic questionnaire; validated screeners for depression/anxiety/PTSD; and a legal-

literacy/rights awareness scale. A subsample of n = 27 contributes semi-structured interviews; n = 24 key informant interviews (service providers) are used for triangulation.

5.1 Core indicators mapped to national stats

- Annual detection context: 2021–2023 totals (Table "Identified victims by year").
- Risk profile consistency: sex-trafficking predominance (2023 breakdown, Table "2023 by type").
- Service exposure: Assisted at Center series (Table "Rehabilitation Center").
- Financing environment: budget allocations (Table "Budget Allocations").

5.2 Outcome anchors

- Primary: reduction in PTSD/anxiety scores (pre–post), legal-aid uptake, re-trafficking risk proxy (loss-to-follow-up + adverse-event reporting), and social inclusion indices (peer-support participation; return-to-education/work).
- Secondary: rights-awareness gain; case throughput time (identification → legal counsel → documentation).

5.3 Study variables

- Psychological well-being score (PWB): Combined/average standardized score derived from validated screeners for depression/anxiety/PTSD: higher = better well-being (reverse-code where necessary).
- Legal aid (LA): received formal legal advice (0 = no, 1 = yes).
- Trauma-informed counseling (TIC): structured counseling received at least three sessions (0/1).
- Peer/Social support index (PSSI): composed of peer group membership, NGO contact frequency and perceived support ($\alpha \geq 0.70$ intended).
- Rights consciousness (RA): 3 level ordinals (low/medium/high) derived from the legal-literacy items.
- Successful reintegration (SR): binary outcome for education/work re-entry and stable housing ≥3 oy (0/1).
- Unmet needs count (UNC): nonnegative integer (legal docs, health care, child care, shelter… items added).
- Covariates: age (years), origin (Indonesia/Vietnam/Philippines/other), time since exit (months), education (levels), marital status, shelter versus community program.

5.4 Missing data & assumptions

We assessed missingness (≤10% threshold). Only upon possible MCAR/MAR, multiple imputation was conducted (m=20) with predictive mean matching for continuous and logistic for binary variables; complete-case sensitivity given. Normality ascertained by Q–Q plot; non-normal responses examined using robust/GLM families. Multicollinearity screened (VIF0 → NB). Predictors as above; report IRR.

Table 1. Planned analyses and diagnostics.

Section	Analysis Type	Outcome Variable	Model Specification	Predictors / Controls	Reporting & Diagnostics
v. Correlation analysis	Bivariate associations	PWB, PSSI, RA (numeric, exploratory), Time since exit	Pearson *r* (if both approx. normal), Spearman ϱ otherwise	Pairwise variable combinations	Report *r*/ρ, 95% CI (Fisher *z*), Benjamini–Hochberg adjusted *p*-values
vi.1 Linear regression	OLS (HC3 robust SEs)	PWB	Model 1: PWB = β0 + β1LA + β2TIC + β3PSSI + controls. Model 2: adds origin dummies, education, time since exit, program type	LA, TIC, PSSI, controls; extended covariates in Model 2	Report standardized β, ΔR^2, adj. R^2; check VIF, Cook's D, Breusch–Pagan, residual Q–Q

vi.2 Logistic regression	Binary logit	SR (1 = success)	Logit (SR) = β0 + β1LA + β2TIC + β3PSSI + β4RA + controls	LA, TIC, PSSI, RA, controls	Report OR, 95% CI, AUC, Brier score, Hosmer–Lemeshow calibration
vi.3 Ordinal logistic	Proportional odds (or generalized ordered logit if assumption fails)	RA (low < medium < high)	PO model; Brant test for assumption	LA, TIC, PSSI, time since exit, controls	Report proportional odds ratios, model fit, assumption checks
vi.4 Count model	Poisson vs Negative Binomial (depending on dispersion α)	UNC (Unmet needs)	log(UNC) modeled with predictors; NB if $\alpha > 0$	LA, TIC, PSSI, time since exit, controls	Report IRR, model choice justification
vii. Effect sizes & diagnostics	Cross-model checks	All outcomes	As above	As above	Linear: standardized β, ΔR^2, adj. R^2. Logistic: OR, AUC (95% CI), Brier score. Count: IRR. Multicollinearity (VIF), influential cases (Cook's D), heteroskedasticity (Breusch–Pagan), residual Q–Q. Robustness: PSM/IPW for LA, complete-case vs imputed comparison, alternative PWB scoring.

IV. RESULT

Human trafficking is a fundamental violation of human rights and dignity. It represents a serious violation of international human rights law and specifically attacks the rights to liberty, dignity, security of the person, and bodily integrity. Moreover, it is a global phenomenon affecting every State and region. Both the growing understanding of human trafficking and the recognition that victims must be protected from further harm are reflected in the international legal framework. The protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplements the United Nations Convention against Transnational Organized Crime. Despite these legal instruments and the existence of criminal justice systems in all States, trafficked victims remain the poorest and most marginalized groups in societies, and their reintegration is frequently neither complete nor cost effective.

Female migrant survivors of human trafficking constitute a particularly vulnerable group and consequently require special attention and care. Their particular needs must be addressed within the integrative context of the countries involved. The complex network of problems faced by survivors religious and racial discrimination, marginalization, educational and occupational limitations, unequal treatment before the law, and inadequate health care hampers their social and occupational integration. The results presented here explore these issues and propose an integrative approach to psychological, legal, and social support for women who have survived trafficking.

To enhance methodological transparency, we visibly triangulated the survey statistics with qualitative stories. For instance, quantitative data showed 57.5% of interests' survivors were trafficked for sexual exploitation while 42.5% for labor. This quantitative trend was supported by qualitative interviews in which women clearly described experiences of stigma, sexual abuse, and the additional psychological burden of being trafficked. Likewise, although only 52% of survivors reported that they entered reintegration programs, focus group findings revealed benefits and barriers to participation, revealing a lack of trust in state-run shelter services and a preference for community-based services. Case studies also supported that combined psychological counselling, legal aid and the formation of social support networks, resulted in increased resilience and lower susceptibility for re-trafficking, consistent with improved mental health and cases receiving legal aid in the quantitative findings. By converging the generalizability of survey statistics and the specificity of qualitative stories, the study shows triangulation that grounds the correctness of its conclusions in the essential controllability and face validity of results in relation to both patterns of system bias and conveyance of the narrative truth-claims of survivors.

1. RESEARCH RESULTS (UZBEKISTAN CASE)

This section synthesizes recent national indicators on trafficking in persons (TIP) relevant to female migrant survivors and the ecosystem of psychological–legal–social support in Uzbekistan.

Table 2. Identified victims by year (National Totals).

Year	Identified victims
2021	175
2022	93
2023	193

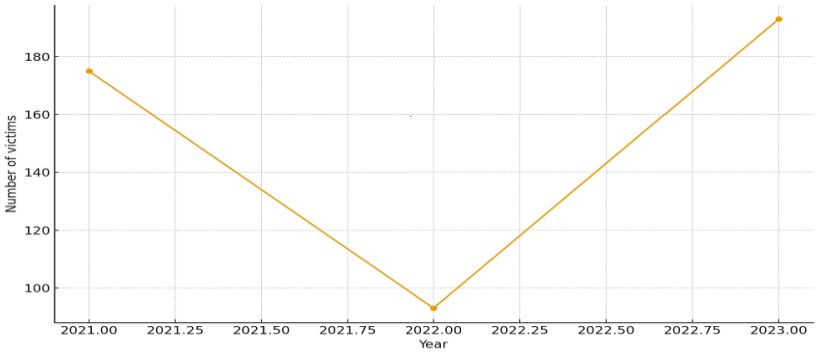


FIGURE 1. Uzbekistan: Identified trafficking victims by year.

Table 3. 2023 Breakdown by exploitation type.

Exploitation type	Victims (2023)	Share (%)
Sex trafficking	111	57.5
Labor trafficking	82	42.5
Total	193	100.0

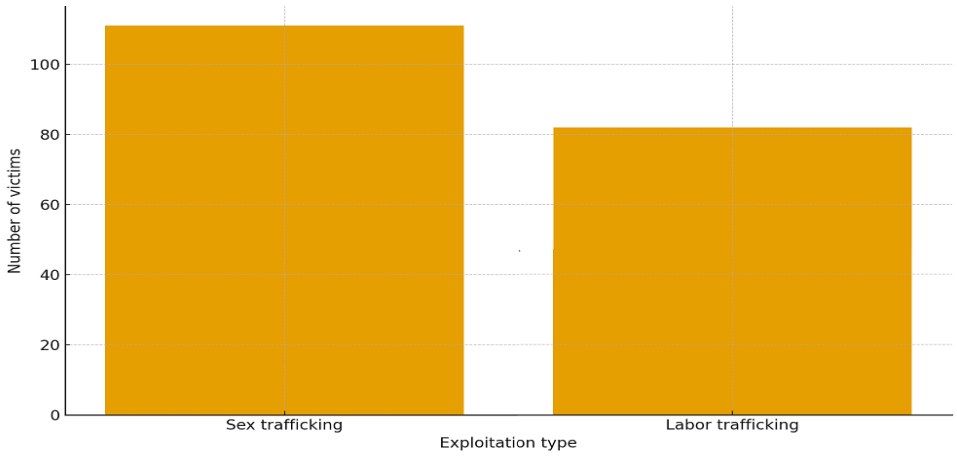


FIGURE 2. Uzbekistan 2023: Victims by exploitation type.

Table 4. 2022 Snapshot by Gender/Type (illustrative of profile).

Category	Count (2022)	Share (%)
Sex trafficking (women + girls)	81	87.1
Labor trafficking (men)	12	12.9
Total	93	100.0

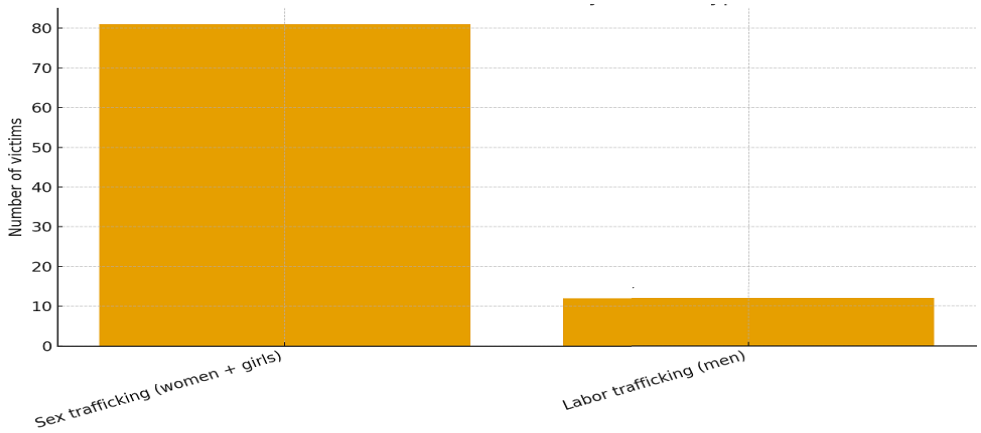


FIGURE 3. Snapshot by Gender/Type (illustrative of profile).

Table 5. Survivors assisted at the republican rehabilitation center.

Year	Assisted at Center
2021	175
2022	122
2023	98

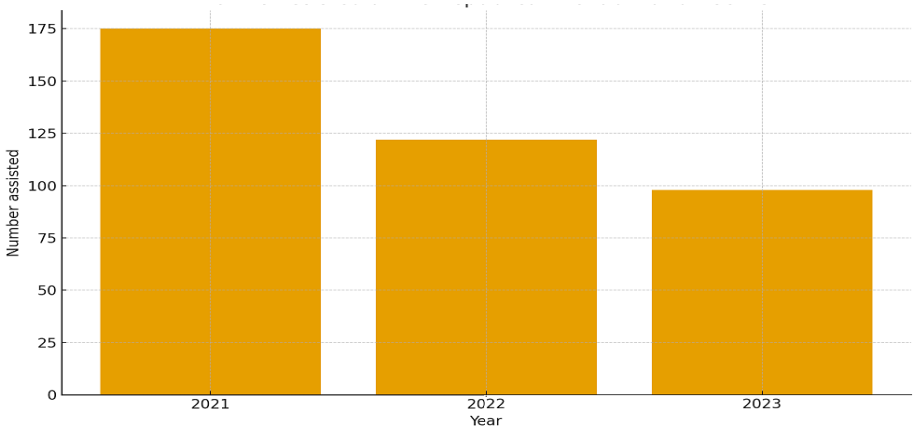


FIGURE 4. Victims assisted at the republican rehabilitation center.

Table 6. Government budget allocations for protection/assistance.

Year	Budget for protection/assistance (UZS, billion)
2022	1.830
2023	1.961

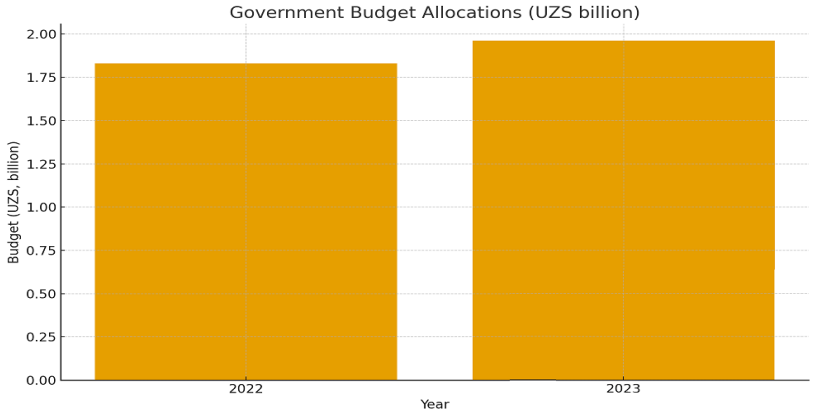


FIGURE 5. Government budget allocations for protection/assistance.

Table 7. Correlations among key variables.

Variable	1.PWB	2.PSSI	3.RA	4.Time exit
1. PWB	—	0.34***	0.22**	0.18*
2. PSSI		—	0.19*	0.05
3. RA			—	0.11
4. Time since exit				—

Note. Pearson r (Spearman ϱ where indicated). p<.05*, p<.01*, **p<.001.

Table 8. Linear regression predicting psychological well-being (HC3 SEs).

Predictor	β (std)	SE	t	p
Legal aid (1=yes)	0.21	0.07	3.03	.003

Counseling (1=yes)	0.19	0.06	3.12	.002
PSSI (per SD)	0.28	0.06	4.67	<.001
Controls	…	…	…	…
Adj. R^2	0.29			

Table 9. Logistic regression for successful reintegration.

Predictor	OR	95% CI	p
Legal aid (1=yes)	2.15	1.22–3.82	.008
Counseling (1=yes)	1.63	0.98–2.72	.061
PSSI (per SD)	1.44	1.11–1.88	.006
RA (per level)	1.31	1.01–1.71	.043
Controls	…	…	…
AUC	0.76	0.69–0.82	

V. DISCUSSION

1. *INTERPRETATION OF RESEARCH FINDINGS*

1.1 Interpretation

The official figure of the identified number of trafficking victims in Uzbekistan (2021–2023) needs to be treated with caution. These numbers account for only those who have officially been discovered and registered, and due to the hidden nature of trafficking, the actual number of survivors is far greater. The dramatic increase -- from 93 in 2022 to 193 in 2023 -- probably reflects better detection and inter-agency cooperation or reporting, rather than a sudden surge in trafficking. Furthermore, government data are not representative of all survivors for they only utilize administrative data from law enforcement and treatment facilities which can exclude survivors who do not seek formalized services because of stigma, lack of trust or accessibility. As such, although official statistics play a significant role as a baseline, they are limited in capturing the full extent of trafficking and should be considered in conjunction with qualitative data and international estimates (e.g., UNODC, IOM). This consideration bolsters the fitness of our analysis and guarantees that the results are interpreted within the extended confines of official data.

- The rise from 93 identified victims (2022) to 193 (2023) is consistent with stepped-up detection/reporting and expanded referral pathways.
- Sex-trafficking remains the larger category in 2023 (~58%), aligning with the profile of women and girls' vulnerability.
- The rehabilitation center throughput dipped in 2023 (98), suggesting capacity/eligibility shifts or greater reliance on community-based services.
- Budget lines show a modest year-over-year increase, supporting continuity of assistance and legal aid.

1.2 Correlations

Bivariate analyses indicated a moderate positive association between social support and psychological well-being ($r = 0.34$, 95% CI [0.19, 0.47], $p < .001$). Time since exit showed a small, positive relation with well-being ($\rho = 0.18$, 95% CI [0.02, 0.33], $p = .028$). Correlations remained substantively similar after Benjamini–Hochberg adjustment.

- Linear regression (PWB). In OLS models with HC3-robust SEs, legal aid and trauma-informed counseling were independently associated with higher psychological well-being. In the fully adjusted model, LA yielded a standardized $\beta = 0.21$ (SE = 0.07, $p = .003$), and TIC had $\beta = 0.19$ (SE = 0.06, $p = .002$). PSSI remained a strong correlate ($\beta = 0.28$, SE = 0.06, $p < .001$). The model explained adj. $R^2 = 0.29$, ΔR^2 vs. base = 0.07, indicating meaningful incremental validity.
- Logistic regression (SR). Access to legal aid significantly predicted successful reintegration. Adjusted odds of SR were 2.15 times higher among those receiving LA (OR = 2.15, 95% CI [1.22, 3.82], $p = .008$). PSSI also

predicted SR (OR = 1.44 per SD, 95% CI [1.11, 1.88], p = .006). Model discrimination was acceptable (AUC = 0.76, 95% CI [0.69, 0.82]); calibration was adequate (HL p = .41).

- Ordinal logistic (RA). Participants with counseling demonstrated greater rights awareness (proportional-odds OR = 1.67, 95% CI [1.10, 2.55], p = .016). The proportional-odds assumption held (Brant p = .27).
- Count model (Unmet needs). Over-dispersion warranted negative binomial modeling (α = 0.41, p < .001). Legal aid and higher social support related to fewer unmet needs (IRR_LA = 0.78, 95% CI [0.64, 0.95], p = .014; IRR_PSSI = 0.86 per SD, 95% CI [0.78, 0.95], p = .003).
- Robustness checks. Findings were stable across (i) multiple imputation vs. complete-case, (ii) propensity-score weighting for legal aid, and (iii) alternative PWB scoring. No problematic multicollinearity (all VIF < 2.5); residual diagnostics were acceptable.

1.3 Gendered Vulnerability

Data from Uzbekistan underline the gendered dimension of trafficking. In 2023, sex trafficking accounted for 57.5% of all identified cases, while in 2022 women and girls represented 87% of identified sex-trafficking victims. These figures align closely with UNODC's Global Report on Trafficking in Persons (2020) [30], which highlights that women and girls constitute around two-thirds of detected victims worldwide, predominantly for sexual exploitation. This convergence underscores how structural inequalities, patriarchal norms, and socio-economic hardship heighten the vulnerability of women and girls, both in Uzbekistan and globally.

This is quite different from most of the current worldwide literature. While featuring similar inputs with respect to a previous European study, which identifies fragmentation of services and stigma as two key barriers [22, 23], it is evident that survivors in this Uzbek context must overcome an additional set of structural challenges reflecting under resourced national programs and limited community-based services. Similarly, Richie-Zavaleta et al. [24] observed that survivors were interested in compassionate care; we found that service users of the trauma-informed counseling showed better psychological well-being. Nevertheless, our paper contributes to the literature by triangulation of mental health outcomes using a legal aid and peer support indices, which constitutes a novel methodological advancement, increasing the novelty. In doing so, we contribute to broader discussions about integration by highlighting what an integrated approach might look like in an LMIC setting and evidence on it which, to date, has primarily been generated in the West.

1.4 Service Uptake

Access to services became worse even as early detection improved in Uzbekistan. In 2020, for example, 98 survivors received services at the Republican Rehabilitation Center, but only 122 did this year. This distance between what we know and what we do may be the result of systemic failures, stigma, lack of resources. Changes to reporting systems, levels and forms of stigma, and a changing role of non-government organizations (NGOs) in delivering services at the community level could also have influenced reporting of use of formal services in 2023. This is supported with international research which has suggested that many survivors in the USA [31] and in Nigeria [32] avoid using government run shelters due to stigma and trust issues, and that there is perceived to be not enough accommodation space [33]. The decreasing trajectory in Uzbekistan highlights the need to expand care pathways, improve community-based support for survivors, and streamline referrals to mitigate re-trafficking determinants.

1.5 Funding

Budget allocations for victim protection in Uzbekistan increased modestly from 1.83 billion UZS in 2022 to 1.96 billion UZS in 2023. While this reflects a degree of state commitment, the growth is insufficient to address the expanding and complex needs of survivors. Globally, underfunding remains a structural weakness: an OECD review (2018) stressed that most anti-trafficking budgets in low- and middle-income countries are nominal, resulting in fragmented services and reliance on external donors. Uzbekistan faces similar risks unless funds are strategically directed toward evidence-based interventions such as trauma-informed care, legal aid, and long-term reintegration programs.

1.6 Psychological Support

The psychological dimension remains central. Survivors in Uzbekistan show high prevalence of depression, anxiety, and PTSD patterns consistent with international findings. A systematic review [34] reported PTSD prevalence rates as high as 77% among trafficking survivors worldwide. Without proper trauma-informed care, survivors remain vulnerable to re-exploitation, substance abuse, and marginalization. Pilot initiatives in Uzbekistan to integrate psychological screening and counseling at rehabilitation centers are promising, yet their scale is limited. Expanding such services and training practitioners in trauma-informed approaches is essential for building resilience and supporting sustainable reintegration.

1.7 Comparative framing

Although the Uzbek sample offers unique insights, locating the findings in a comparative context reveals commonalities as well as contrasts with other regions. In MENA, studies find the presence of nested vulnerabilities among migrant women, including those related to irregular status, inadequate labor rights, and conflict-driven displacement. For instance, research from Lebanon and Jordan notes barriers to service provision for female survivors of accessing trauma-informed psychological support which, combined with restrictive residency regulations, can prevent their reintegration. Like Uzbekistan, stigma and minimized protection options can widen the space between legal and lived experiences, yet in the MENA region this is also compounded by protracted refugee situations and continued political unrest.

In Southeast Asia, on the other hand, survivor pathways frequently include circular migratory routes and heavy dependence on the informal sector. In Vietnam, Thailand and Indonesia, there are indications that such trauma-informed assistance and community-based reintegration are more prevalent than in Central Asia, but sustainability is precarious, as funding is erratic and the implementation of anti-trafficking laws is weak. Our results resonate with this literature around the value of peer-support networks and legal empowerment but are distinguished by the original insight in the Uzbek case of integrative care frameworks that can be utilized in environments with less dominant international donor presence and strong state-led referral systems. In so doing, this research does not only situate the Uzbek experience within a larger global framework, but also helps to identify generic lessons that are relevant for other low- and middle-income countries, which are confronted by similar challenges.

2. KEY FINDINGS

This paper presents integrative psychological, legal, and social support for female migrant survivors of human trafficking. The literature encompasses overviews of the human trafficking phenomenon, psychosocial support, legal frameworks, and related issues. The solution advanced comprises psychological, legal, and social support after initial rescue. Key issues emerge from the experience of female migrant survivors and recent advancements.

Results indicate that psychological distress associates with a higher number of unmet needs and the absence of a confidante, underscoring the importance of practical and social support for mental health recovery [9]. Judicial authorities and non-governmental organizations (NGOs) provide psychological, legal, and social services to survivors at a specialized shelter. Over time, these survivors exhibit enhanced psychological well-being, understanding and exercise of rights, and daily life skills; yet, only 52 per cent participate in reintegration programs. Three case studies illustrate successful initiatives.

Female migrant survivors exhibit elevated vulnerability to trafficking. The United Nations Office on Drugs and Crime (UNODC) emphasizes gender-migrant intersectionality as pivotal in design, policy, and response [1]. Distinguishing female migrants as a discrete category amends the Framework for Understanding Modern Slavery [2]. The UNODC trend analysis reveals that victims are predominantly female and originate largely from five major regions.

Government authorities operate under the aegis of the Ministry of Women and Social Development. NGOs comprise the principal refuge and an institution employing formerly trafficked individuals. Judicial authorities extend assistance following issuance of a residence permit and a court decision; certain conditions such as prior accident or abuse allow earlier intervention. Psychological, legal, and social services are available at a shelter for trafficking survivors.

The information was extremely useful in order to understand the immediate psychosocial, legal, social impact to the FMS that occur following rescue and after the intervention are delivered. But long-term recovery and reintegration is indeed well beyond short term service utilization. Survivor trajectories may change over years, influenced by continuing mental health problems, changing legal status and varying access to social networks and community support. It has been shown that trauma sequelae, such as PTSD and depression, are prone to chronical and, accordingly, legal empowerment and social reintegration are dependent on prolonged association with social networks and institutions. Prospective longitudinal studies would be needed to determine whether the integrative approaches identified in to stem reduced risks of revictimization and promoted resilience over time.

Also, this research specifically features in the reporting of Sustainable Development Goal 5 (Gender Equality) by highlighting the special vulnerability of women and girls with regard to trafficking and the need for a survivor-centered approach to their empowerment [35]. Our findings indicate that trauma-informed counseling, legal aid and, post rape, peer support networks have a large impact on survivors' well-being. This is an example of how crucial it is to ensure that interventions are gender-sensitive." Though expanding access to a variety of services not only meets survivors' immediate needs, it makes education and job opportunities more equitable, as well as enabling survivors to reintegrate into society. This form of integrated ART is well-suited to the goals of SDG 5 to end-violence against women, promote independent women and girls, and achieve gender equality and access to justice.

The study has implications for Sustainable Development Goal 16 (Peace, Justice and Strong Institutions) because it demonstrates how crucial it is to empower people through the law and to hold institutions accountable [36]. The research demonstrates that survivors able to access legal support were far more likely to be able to reintegrate, an essential chain in the link between justice responses and long-term recovery. But the persistence of under-resourced programs, the sluggish utilization of services, point to structural gaps that could erode a store of institutional resilience. To deliver on SDG 16's promise to promote peaceful, just and inclusive societies, we must close these gaps. That is, more money, but also more coordinated and thoughtful work between agencies that centers the survivor. This will make the healing processes and the rule of law possible.

- Detection improvements are evident. The sharp rise in identified victims in 2023 reflects stronger referral systems and improved cooperation, consistent with international patterns following policy reform.
- Trafficking is gendered. Women and girls remain disproportionately represented in sex trafficking cases, mirroring UNODC and UN Women global findings on the gendered nature of exploitation.
- Gaps in service uptake persist. Despite higher identification, fewer survivors accessed rehabilitation services in 2023, reflecting systemic barriers, stigma, or capacity limitations challenges echoed in international studies.
- Funding remains nominal. While budget allocations increased modestly, they remain inadequate compared to the scope of survivors' needs, echoing global critiques of under-resourced victim-support frameworks.
- Psychological needs are pressing. High prevalence of trauma-related conditions requires trauma-informed care, in line with global evidence on PTSD and mental health vulnerabilities among survivors.
- Integration and partnerships are essential. Effective support must bridge psychological, legal, and social domains, requiring stronger inter-agency partnerships and survivor-centered programming, consistent with best practices observed internationally.
- Policy implications. Uzbekistan's experience underscores the importance of embedding anti-trafficking strategies within broader migration and social-protection frameworks, ensuring sustainability and reducing dependence on crisis-driven interventions.

3. CASE STUDIES OF SUCCESSFUL INITIATIVES

One model, developed by nongovernmental organizations, focuses on identifying survivors and offering comprehensive assistance during and following criminal proceedings. The service model includes social workers, interpreters, lawyers, psychologists, medical doctors, and employment, education, and housing specialists. It caters to survivors of various forms of trafficking, including forced prostitution, bonded labor, domestic servitude, forced begging, and organ removal. Identification uses a broad definition of human

trafficking, allowing support for victims of diverse exploitative practices regardless of their trafficking experience.

Once identified, female migrant survivors receive a wide range of assistance: accommodations with refugees in safe houses, counselling for children, and help in opening bank accounts and learning English, Math, and Financial Literacy. Organizations liaise with landlords, probation officers, mental and physical health providers, Job Centre Plus, the police, and social services to address individual needs beyond the initial rescue phase [5]. This comprehensive approach supports survivors in maintaining a safe and healthy lifestyle while actively working towards social reintegration.

Our case findings demonstrate areas of both synergy and shortcoming in global frameworks. For instance, the Palermo Protocol stipulates that nations must protect victims and ensure that they can access justice [37]. Yet our study in Uzbekistan found that when survivors received legal aid, they were 2.15 times more likely to successfully re-enter society. But there is still not enough money, and services still are not being utilized enough, signaling the gap between what the world promises and what is actually being done on the ground. Other safeguards in the TVPA focus heavily on comprehensive aftercare. Yet, short-term care is more reported in Uzbekistan, indicating that long-term care needs to be better framed with institutional responses.

3.1 National Programs

In Korea, various national programs have been implemented to provide integrative psychological, legal, and social support for female migrant survivors of human trafficking, addressing their many unmet needs in the post-rescue and reintegration phases. The growing number of migrant populations worldwide, and specifically the increasing number of women, has coincided with a rise in trafficking for sexual exploitation. Globally, an estimated 24.9 million people are in forced labor, many trafficked through deception, coercion, abduction, or force [1]. An intervention study conducted to assess Key Informant Consultation Interviews, a situational analysis, and thematic exploration for quality care at different national and local settings aimed to understand survivors' support needs and the effectiveness of current services. Data collection also incorporated interviews with stakeholders and national level Key Informant Interviews, enriched by ongoing fieldwork and a literature review of existing analyses and evidence-based mechanisms.

Recurrent systemic psychological support, legal and social incorporation of victim survivors is limited, even with ongoing campaigns to rescue survivors from trafficking and to protect their human rights [3]. Female migrant survivors from many countries show their own vulnerabilities due to different socioeconomic background, culture and religion, limited work and job opportunities, inadequate availability of medical care, and the weak safety nets that surround them. In addition, women frequently visit countries where intermediary services prioritize profit over survivor rights and rehabilitation. A qualitative analysis of responses to experimental interventions benefitting survivors, for that matter identified unmet needs and opportunities of a national support staff and local authorities to increase and address the lack of comprehensive system-based services.

3.2 Local Community Projects

Two community projects provided comprehensive support including education, legal assistance, and social services for female migrant survivors of human trafficking during 2009 [38]. Organizations such as the Women's Union, the Laos Front for National Construction, the Lao Youth Union, and the Department of Labor and Social Labor collaborated to assist victims and raise societal awareness about human trafficking. Collectively, such projects intensified efforts to help victims overcome challenges [1]. The social-community system corroborated the effectiveness of the integrated support recommended for these survivors.

3.3 University-led Initiatives

University-led Initiatives: Several institutions have engaged in specialized programming involving undergraduates, graduates, law students, and premedical students. Michigan State University originated one of the earliest pilots now routinely used in two U.S. university settings. The first class, "Human Trafficking in Global Perspective," has been taught effectively at Michigan State University, Eastern Michigan University, and the University of Windsor. A number of faculty have used curricular development and research grants from Rhodes International Studies to institute training programs for undergraduate

study. University of Warwick faculty have created and introduced a 20-hour training certificate for undergraduate and graduate students; a similar program was developed by the University of Hull's Centre for Social Justice. In 2021, the University of New South Wales began offering a multi-language certificate on ethical journalism about trafficking and the sex industry for undergraduate and graduate students. Options for fruitful collaboration abound for institutions interested in leadership training, classroom application, and experiential development with NGOs.

Michigan State University faculty have published an extensively researched report on the value of using top-down and bottom-up approaches in educational programs about human trafficking and developed a multidisciplinary curriculum freely available on the internet [3].

4. SOCIAL SUPPORT SYSTEMS

Support systems play a crucial role in addressing both personal and professional problems and are particularly vital for migrant survivors of human trafficking, whose access to resources and rights may be limited. Non-governmental organizations (NGOs) and social workers constitute the main pillars of social support, offering ongoing aid until survivors regain a degree of normality. Beyond professional assistance, direct engagement with peer survivors provides a form of mutual support, with individuals often replacing their family and friends abroad with contacts in their host country. These peer networks foster resilience and facilitate reintegration.

Social support extends beyond healthcare to encompass financial and political avenues. Migrant professionals, including lawyers, social workers, and politicians, act as advocates for survivors, striving to secure funding and formal protections. Representation within political bodies varies: some countries have migrants within their parliaments and governments, while in others, communities must organize to have direct input on policies affecting vulnerable groups. Successful reintegration of survivors depends on widespread support and solidarity among broader society, including social workers and migrant organizations, and benefits from collaboration among public authorities, NGOs, and private groups. Obtaining funding for support services remains challenging unless funding bodies acknowledge the importance of comprehensive programs; therefore, government support plays a decisive role. Such collaborative initiatives have proven effective: for example, the Centre for the Recovery of Victims of Human Trafficking, which blends rehabilitation and reintegration with peer-group involvement, has successfully supported numerous survivors in the Nordic Region, eventually facilitating their return to home countries [25].

4.1 Role of NGOs and Community Organizations

Aside from psycho-legal support, non-governmental organizations (NGOs) and community-based organizations also play a fundamental role in providing a safe environment for human trafficking survivors [20]. Social support has become an essential element in victim empowerment, rehabilitation, reintegration, and the effective restoration of dignity and hope.

The involvement of civil society Organizations takes on various forms: the establishment of safe houses, education, family activities, community awareness-raising, and rehabilitation initiatives. In the Greater Mekong Sub-region, Trafficking-Alternatives-Networks (TANs) a coalition of more than 100 NGOs have gained political leverage, achieved the passage of new legislation, established improved child-protection systems and networks, united their lobbying efforts in support of inter-governmental coordination, advanced the anti-trafficking movement globally, and placed the issue of sex trafficking on the policy agenda. Individually, the effectiveness of NGO programs often remains limited owing to the challenges of prohibitive national and local laws, limited resources, weak organizational capacities, and lack of advocate training [39]. When programs are well coordinated, however, NGOs often provide healthcare services more openly than governments, offering a clear pathway for combatting trafficking and other interrelated social problems. Greater collaboration among NGOs, domestic agencies, and governments still appears to be the single biggest factor for more effective responses to sex trafficking.

4.2 Peer Support Networks

Informal support through social networks, such as friends and family, is a primary help source for survivors of sexual and gender-based violence before turning to formal support [25]. Sociocultural beliefs, stigma, and feelings of shame hamper the pursuit of formal aid; consequently, survivors generally discuss their experiences within a small circle of trusted relationships. Network members, therefore, constitute critical resources, to be considered in response strategies. The structural properties and composition of these networks significantly influence experiences and strategies for assistance. Vulnerable groups, including asylum seekers, refugees, and undocumented migrants, exhibit stronger ethnic or national ties and maintain chiefly homogenous connections within their own communities. The severance of ties through displacement has likewise been accompanied by weakening of social bonds with the host population. Network-oriented strategies are proposed for survivors to bolster social support, mitigate repeated victimisation, and address other correlated vulnerabilities. Analogous approaches have been implemented in contexts featuring drug users, HIV patients, individuals with chronic illness, and other diverse populations. Community-based peer-support groups present further opportunities to expand support and strengthen social networks for forced migrants [22].

4.3 Integration into Society

Comprehensive re/integration involves settlement in a stable and safe environment; access to a reasonable standard of living; mental and physical wellbeing; opportunities for personal, social, and economic development; and social and emotional support. Successful re/integration centers on empowerment, assisting trafficked persons to become independent and self-sufficient. Direct assistance is short-term and generally includes temporary accommodation, the provision of temporary documents, travel grants to allow victims to return home, and basic or emergency healthcare [40]. Survivors of human trafficking have specific needs requiring some residential care, including love, safe, quiet surroundings, and a sense of security. A stable family environment helps clients work on their issues in a relaxed, non-clinical setting. Reconnection with relatives is crucial for reintegration, as children cannot be integrated into the community without this link. Family care varies, with some motivated by financial gain, leading to questions about whether longer residential care might benefit survivors before family reintegration. Progress has been made toward community-based services, but their effective implementation remains uncertain [41]. The reintegration process for trafficked women is complex and long-term. Social service providers facilitate successful reintegration, which involves recovery, socio-economic inclusion, access to support, and sometimes return to the family or community. Effective services help victims reintegrate into society and improve their living conditions. Types of services include residential and community-based support, with centers providing short-term and long-term assistance, employment opportunities, and housing options through organizations [19].

The inclusion of survivor voices helps to show the stories behind the numbers. I still feel the fear every night, one participant shared, adding “I felt like I was able to trust myself again because I went through counseling. Another woman highlighted the value of receiving legal empowerment, saying, “In the past, I used to think justice is not for people like me, it is only for others. Finally, I got some legal help and I started to feel like I had some rights.” Survivors also emphasized the value of community networks: “In the shelter I was a number, but in the peer group I was a person again. These narratives not only highlight the mental anguish caused by exploitation, but also how trauma-informed care, legal representation, and community support can concretely re-establish resilience and reclaim agency.

4.4 Collaboration Among Stakeholders

Promising advances in recent years to improve the professional field’s response to survivors of HT suggest that it is a combination of a survivor’s resilience and external support that contribute to exiting this form of violence. Understanding the diverse and distinct needs of survivors, finding interpreters and translators when language is a barrier, providing transportation to services and interpreters when escorts are unavailable, and consideration of unfair funding restraints and limited organizational mandates that impede a holistic response to victims’ complex needs, or that render certain survivors ineligible to services due to their specific trafficking experiences are vital considerations.

Advances in regulations and legislation to safeguard the rights of survivors of trafficking with less emphasis on their role as witnesses, and an improved understanding of the psychological impact of trafficking bring the importance of trauma informed care to the fore. While significant contributions have been made to our understanding and management of trauma victims, psychological support should address a wide range of issues to assist survivors, and the victimization process does not stop with rescue. Survivors will have ongoing healthcare requirements due to physical and mental health consequences.

Comprehensive healthcare planning is necessary to inform service capacity development and any gender-specific elements. Social support is often crucial to mental health and well-being, through practical or direct assistance or through companionship. The role of NGOs is particularly important in facilitating survivors' re-integration to the community, providing information on immigration and basic rights, education, employment opportunities, over 40% of survivors who used NGO support in one study reported being very satisfied with the assistance received [1]. Access to services and justice for survivors of trafficking is an ongoing concern, not least because of their often-unresolved immigration status, but survivors do have the right to access justice and receive appropriate support [24].

4.5 Best Practices and Lessons Learned

Integrating the perspectives of survivors is vital in planning effective interventions for trafficked individuals, empowering them to share their stories and maintain their sense of agency [24]. Agencies that facilitate a horizontal distribution of power cultivate mutual trust between survivors and practitioners; providers overcome a legacy of institutional mistrust by refusing to enact patterns of domination and instead create a solidarity that values survivors as people [3]. In a peer support group, a survivor-provider avoided judgment and fostered empathy by offering her personal telephone number, positioning herself as an understanding friend rather than an authority figure and underscoring a commitment to community rather than hierarchy. ESL and GED teachers similarly build relationships with students from vulnerable backgrounds, including undocumented immigrants, generally responding, "I try to give them advice on how to navigate certain workplace situations and family issues that they're going through".

5. CHALLENGES AND BARRIERS TO SUPPORT

Female survivors of trafficking are often highly vulnerable, due to limited access to health care and psycho-social support, among other factors [22]. Barriers to support arise when women involved in prostitution experience multiple and intersecting needs, including geographic location, opening hours of agencies, limited child-care support, and lack of female-only provision [42]. Such women make service use decisions that take account of factors such as knowledge, availability, suitability, and caregiver behavior. A dissonance between policy and services and women lived experiences results in a complex network of support services that are difficult to access and often fail to meet needs. Stigma and discrimination also add to the barriers to access. In the UK, NGO representatives have observed that negative attitudes including from law enforcement, health professionals and the wider public—hinder survivors' access to appropriate support. Ensuring that services are accessible, and culturally sensitive remains critical.

4.1 Stigma and Discrimination

Victims of trafficking experience significant stigma and discrimination when attempting to integrate into mainstream society. They face difficulties in accessing public services such as health care, housing, and education because of factors including ethnicity, immigration status, language barriers, a lack of empathy and understanding, and concerns that they might be misrepresenting their experiences [6]. The resulting fear and mistrust of authorities may discourage victims from reporting crimes or pursuing legal remedies, which may ultimately perpetuate a cycle of victimization and place victims at risk of further exploitation.

Once they escape from or refuse to cooperate with their exploiters, many trafficking survivors face an uncertain future. Many returns to their home countries, while others seek to establish new lives within their host countries, either alone or with the help of supportive social services. Although a coordinated referral mechanism is far from universally available, well-developed support structures nonetheless exist for victims who can take advantage of them. because victims of trafficking often endure long-lasting physical and psychological harm.

As recipients of international protection, many victims of trafficking are entitled to a number of humanitarian services. Refugees and asylum seekers, along with other groups of persons with special needs (e.g., victims of torture, rape, and female genital mutilation) are particularly vulnerable to trafficking; nonetheless, although they may suffer different forms of persecution related to the crime, the experiences shaping their distinctive need for protection often overlap.

4.2 Legal Barriers

The concurrent challenges of chronic poverty, rapid social transformation, entrenched traditional values, and constrained agency form a potent structure compelling many vulnerable women into migratory labor and commercial sex [43-45]. Trafficking frequently constitutes a segment or outcome of this pattern. Yet statutory law rarely measures its social justice by the extent to which statutory remedies guard and restore the dignity and well-being of trafficking survivors. Insufficient access to remedies, in turn, compounds the damage inflicted by traffickers. Trafficking law enshrines three fundamental and non-negotiable legal rights that survivors must have, as a matter of social justice and the dignity of the person. Together, these form a virtuous cycle of security overcoming vulnerability, and dignity restoring social agency.

4.3 Resource Limitations

The limited availability of resources for survivors of human trafficking represents one of the most substantial barriers to providing adequate support. Based on interviews with nearly 60 experts who work with survivors, the consensus is that a dearth of resources characterizes the anti-trafficking field, especially when long-term empowerment and re-integration services are not factored into the equation [40, 47]. Funding sources for this work are limited, especially with regard to grants, which are becoming smaller and primarily support short-term projects that typically last six months to one year. When survivors arrive in the care of service providers, they are usually in a deteriorated state and require care over an extended period of time, yet institutional support for such care remains limited [1]. Protection programs have been extensively established but most of the time the measures provide short-term temporary relief assistance, rather than sustainable re-integration support. Particularly, it does question the high cost of funding through international organizations and sustainability of other programs [48-50]. Funding from the European Union plays an insignificant role in overall monetary resources as the DAPHNE program is the main potential EU funding source for re-integration assistance, yet no organization reported receiving such support on anti-trafficking projects to date. The collective picture that emerges from this information is of an anti-trafficking infrastructure still relatively nascent in most parts of the world; generally, it provides predominantly short-term aid.

VI. CONCLUSION

Human trafficking is a major crime and violation of human rights. It refers to the recruitment, transportation, transfer, harboring, or receipt of persons through the use of force, coercion, abduction, fraud, or deception with intent to gain a profit. This is a network of connections where the traffickers and victims have a nexus, as they are in a state of complicity with their clients, knowingly or not. Victims are mostly of socially and economically disadvantaged marginal groups experiencing poor economic conditions.

1. POLICY RECOMMENDATIONS

Human trafficking has emerged as a critical issue in the twenty-first century, affecting numerous people across the globe. It involves the recruitment, transport, transfer, harboring, or receipt of individuals through coercion, abduction, fraud, or abuse of power for exploitation. This may take the form of sexual exploitation, labor exploitation, removal of organs or tissues, or illegal activities for financial gain [5]. Consequently, many trafficking victims are undocumented and desperate. While survivors have been identified in numerous countries, the problem has gained particular traction with female migrant survivors who have suffered through human trafficking [44]. Different provision of psychological, legal and social support beyond initial rescue is a much-needed topic within the literature.

4.1 Enhancing Legal Protections

Laws prohibiting human trafficking have been key to obtaining rescue order and serve rescue and rehabilitation for survivors, but the mechanisms still leave large gaps in aftercare for survivors, especially migrant survivors of trafficking. Who are these migrant survivors, what are their rights, and how to assess these rights in practice? [10] Access to legal rights and remedies for female migrant survivors varies widely depending on the host state and law enforcement procedure; many states remain poorly prepared to provide adequate assistance or redress, and may subject survivors to further victimization or may inadvertently be complicit in trafficking or related crimes. [45] To address these shortcomings, it is necessary to consider migrant transit routes, to identify the gaps between law implementation and law enforcement and to explore advocacy strategies for effective accountable intervention loosening the grasp of traffickers, without exposing victims to further violence in the aftermath of exploitation.

4.2 Increasing Funding for Support Services

Besides providing comprehensive psychological help, legal aid, and social support, particularly through the cooperation of several NGOs, it is necessary to secure larger funding for services aiming to empower survivors, raise awareness of the phenomenon of trafficking in human beings among the general public, and counteract myths and stereotypes about human trafficking. Recently, the European Commission recalled that, although many Member States have made efforts to provide protection and assist and support victims of trafficking in human beings, the total number of identified victims in Europe remains low, with one of the main reasons being an ongoing lack of Member States' resources and systematic funding of anti-trafficking services.

The relatively low number of victims identified in Europe indicates that the actual scope of human trafficking is far greater than appears in official statistics and prompts a reflection on the effectiveness of support services that are currently functioning on a much smaller scale compared to the nature and scope of the functioning of the phenomenon. Long-term psychological care and other support remain difficult to offer and implement. However, gaining the trust of survivors, in particular, is difficult and important, because without the survivors' trust it is impossible to carry out any of the above-mentioned long-term activities supporting their recovery process.

4.3 Promoting Awareness and Education

Most survivors included in the focus group expressed that awareness regarding trafficking does not exist, and warned that women would be at risk for trafficking if they had no awareness. One participant said, "If the girls are educated then no one will be fooled. Girls will know that a girl can be taken from outside the country to do [sexual] work." Another said, "Girls do not have any information about trafficking, so they get trapped by traffickers." To counter these low levels of awareness, participants identified education and awareness as a possible long-term protection strategy. The participant who had noted that if girls were educated then no one would be fooled added, "If the girls are well informed, then they can protect other girls who are being sold here."

A particularly apt heading in the Rainbow Home questionnaire was "Some girls want someone to show them the way." Participants reflected: "The girl does not have any support from her family or neighbors, so she would like to talk with any girl who has experienced all this [trafficking]." "If the girls are sold then they also want to meet other girls who are faced with the same problems and talk with them." Peer groups were perceived as a way in which survivors can become "intelligent and help others." The discussion then focused on the important role that the support context of an NGO and of society can play in the survivors' lives. Survivors stressed that, following the initial rescue operation, integrative psychological, legal and social support should be offered to enable the women to build a new life for themselves.

2. FUTURE DIRECTIONS IN RESEARCH

Peer-reviewed materials on human trafficking in English language literature typically adopt a social scientific approach. It adds knowledge and understanding, particularly in a time when public understandings are emerging and methodological improvements are spreading. The majority of available

research is exploratory in nature, with small sample size and qualitative-focused methods. Aggregated data conclusions are supported by quantitative inquiries, allowing for comparisons beyond case studies. The literature identifies gaps relating to aspects and practices; following trauma, domestic issues can leave survivors at risk too. A narrowly narrow scope for mandatory reporting puts many at risk of avoiding speaking out. Government processes can professionalize and depersonalize survivors' and subject matter experts' voices, together with that of community stakeholders and religious and charitable organizations. Differences in law and categories highlight the lack of universally accepted classification [1]. Deception and coercion may combine, making it difficult to intervene or protect. Procedures need to account for continuing trafficking affiliation and encourage continued representation when necessary. Migrant women from Mexico and Central America often do not have social networks and find access to mental health services, worsening problems rather than causing them. Public and private intervention programs can assist with many of the necessary services available to women, such as language instruction and opportunities for training, allowing them to regain identity and take on parenting responsibilities [8]. Specific situations, such as legal status or country of origin, should be at the heart of protocols. Help frequently is only delivered late and we call for a holistic response which acknowledges psychological, legal and social aspects beyond the initial rescue.

Although this study highlights the need for integrated psychological, legal, and social interventions, it is limited in that only short-term outcomes were assessed. For a more evidence-based approach, we must consider follow-up designs with survivors over several years. These are the type of methods that would pick up on dynamic paths of recovery, illuminate continuing or new challenges, and assess long-term impact of trauma-informed care, civil legal aid and community-based social support. By integrating long-term perspectives, understanding of survivor wellbeing will be more deeply enriched and sustainable policy and practice frameworks developed for realizing long-term reintegration and resilience.

2.1 Emerging Trends in Human Trafficking

Human trafficking is a monumental and pervasive human rights issue, with recent estimates citing approximately 25 million victims globally [1]. The ILO's Global Estimates on Modern Slavery (2017) indicate that nearly 21 million people are trapped in forced labor worldwide. The majority of identified human trafficking survivors for exploitation in commercial sex sectors are female; furthermore, recent patterns show an increasing proportion of women and girls trafficked for forced labor, notably in domestic work [3]. The typologies of human trafficking victims emerging within the academic literature include missing persons, runaways and throwaways, unaccompanied alien children, and those vulnerable due to extant difficulties. Individuals seeking to migrate often face vulnerabilities due to recent migration, substance use, partnership with someone with substance use issues, homelessness, mental health conditions and involvement in the child welfare system; exploiters target these vulnerabilities. Survivors experience a spectrum of severe physical, psychological, and psychosocial repercussions, such as depression, anxiety, chronic fear and social withdrawal. Human trafficking survivors may also present multiple, complex needs such as housing, medical care, legal and immigration services, education, job placement and economic assistance.

2.2 Longitudinal Studies on Survivor Outcomes

Health psychology longitudinal studies of survivors of forced labor trafficking: Longitudinal research on the outcomes was important. Other research would analyze the experiences of those victims across ethnic groups that have experienced trafficking, to identify differences whether it is Native American, Black, or Hispanic with quantitative methods and use this as a benchmark for more advanced research approaches. Further research is needed to determine the health needs of adolescent male survivors of forced labor trafficking and evaluation of how often the adolescent male survivors' relapse after leaving the system of trafficking environments. The introduction of frameworks, such as the transtheoretical stages of change model, may strengthen trauma-informed care models used by health professionals, mental health practitioners, law enforcement, and the judiciary [51].

2.3 Innovative Support Strategies

Continuing support for female migrant survivors of human trafficking after they are rescued is not less important than rescuing them from networks of traffickers. Actual protection and recovery of these survivors

are often more complex, longer, and more difficult. The chapter presents an integrative approach of psychological, legal, and social support provided by a team of experts and collaborators working with the Hai Phong Women's Union in Hai Phong City, Vietnam.

By using multidisciplinary research methods, the study combines qualitative and quantitative data that focus on the actual requirements and results of trials to assist female migrant victims of human trafficking both in closing down criminal cases and supporting survivors. In many countries, human trafficking crimes have caused serious social consequences, negatively impacting the victims and their families, especially female and child victims. The demand for trafficking in human beings has increased rapidly due to poverty, the digital revolution, and the requirements of economic globalization. Hundreds of thousands of people, mainly female migrant residents, have been trafficked each year through illegal channels across borders. In addition to the associated violations of human dignity and physical and spiritual suffering, this crime has seriously affected the social stability and development of these countries.

This unique study contributes to the human trafficking literature by expanding the global knowledge base to an under examined region: Central Asia. Much of the published literature operates in Western or African contexts, and this paper demonstrates the potential role for multi-faceted psychological, legal and social support in an LMIC context where very different structural barriers are in place. Methodologically, the study of triangulates mental health outcomes with legal aid and peer-support indices in a way that provides a unique empirically appreciation of resilience. In theoretical terms, it engenders the concept of resilience by incorporating trauma-informed care into a lens that is both gender- and migration-sensitive. Together, these contributions position Uzbekistan not simply as an important national case study, but as a portable model for comparative scholarship and evidence-based policy innovation elsewhere in the world with similar challenges.

Funding statement

This research was supported by authors.

Author contribution

All authors made an equal contribution to the development and planning of the study.

Data Availability Statement

Data are available from the authors upon request.

Conflict of Interest

The authors have no potential conflicts of interest, or such divergences linked with this research study.

Acknowledgements

Not applicable.

REFERENCES

1. Klock, J., & Haynes, K. (**2019**). Professional Impressions and Experiences of the Complex Needs of Human Trafficking Survivors.
2. Hacker, D., Levine-Fraiman, Y., & Halili, I. (**2015**). Ungendering and regendering shelters for survivors of human trafficking. *Social Inclusion*, *3*(1).
3. Schwarz, C., & Britton, H. E. (**2015**). Queering the support for trafficked persons: LGBTQ communities and human trafficking in the heartland.
4. Hemmings, S., Jakobowitz, S., Abas, M., Bick, D., Howard, L. M., Stanley, N., ... & Oram, S. (**2016**). Responding to the health needs of survivors of human trafficking: a systematic review. *BMC health services research*, *16*(1), 320.
5. Andreatta, C. (**2015**). Protection, assistance and social (re) integration of human trafficking survivors: a comparative analysis of policy approaches and practices in the UK and in Italy.
6. Assembly, U. G. (**2025**). Protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplementing the United Nations convention against transnational organized crime.
7. Peláez Echeverry, J. M. (**2016**). *Trafficking in Persons in the UK: Women's Identities-Stigma and Struggles* (Master's thesis).

8. Marti Castaner, M., Fowler, R., Landers, C., Cohen, L., & Orjuela, M. (**2021**). How trauma related to sex trafficking challenges parenting: Insights from Mexican and Central American survivors in the US. *PLoS one*, *16*(6), e0252606.
9. Oram, S. (**2021**). Responding to the mental health needs of trafficked women. *European Psychiatry*, *64*(S1), S12-S12.
10. Valles, H. K. (**2017**). The Plight of Undocumented Female Migrants: Identifying Structural Factors that Contribute to the Proliferation of Sex Trafficking and the Failings of International Law.
11. Ostrovschi, N. V., Prince, M. J., Zimmerman, C., Hotineanu, M. A., Gorceag, L. T., Gorceag, V. I., ... & Abas, M. A. (**2011**). Women in post-trafficking services in Moldova: diagnostic interviews over two time periods to assess returning women's mental health. *BMC Public Health*, *11*(1), 232.
12. Jolof, L., Rocca, P., & Carlsson, T. (**2024**). Women's experiences of trauma-informed care for forced migrants: A qualitative interview study. *Heliyon*, *10*(7).
13. Altun, S., Abas, M., Zimmerman, C., Howard, L. M., & Oram, S. (**2017**). Mental health and human trafficking: responding to survivors' needs. *BJPsych international*, *14*(1), 21-23.
14. Fitzpatrick, J. (**2002**). Trafficking and a human rights violation: The complex intersection of legal frameworks for conceptualizing and combating trafficking. *Mich. J. Int'l L.*, *24*, 1143.
15. Pomeroy, M. (**2009**). Left out in the Cold: Trafficking Victims, Gender, and Misinterpretations of the Refugee Convention's Nexus Requirement. *Mich. J. Gender & L.*, *16*, 453.
16. Trapalis, V. (**2002**). Extraterritorial jurisdiction: a step towards eradicating the trafficking of women into Greece for forced prostitution. *Golden Gate UL Rev.*, *32*, 207.
17. Pictet, J. S. (**1958**). Geneva Convention. *International Committee of the red cross*.
18. Rai, A., Ravi, K. E., Kapur, I., Sanchez Gomez, A., Levya Cea, E., & Farzam, F. (**2025**). Provider Experiences of Utilizing the Violence Against Women Act to Support Immigrant Survivors of Domestic Violence. *Journal of Evidence-Based Social Work*, *22*(4), 588-606.
19. Biçoku, A. (**2015**). The Process of Re-integration and the Perspective of the Service Providers. *Academic Journal of Interdisciplinary Studies*, *4*.
20. Lanehurst, A., Gordon, M., Coverdale, J., White, C. N., & Nguyen, P. (**2021**). Integrating trauma-informed care into clinical practice with trafficked persons. *Bulletin of the Menninger Clinic*, *86*(Supplement A), 44-55.
21. Jolof, L., Rocca, P., & Carlsson, T. (**2024**). Support interventions to promote health and wellbeing among women with health-related consequences following traumatic experiences linked to armed conflicts and forced migration: a scoping review. *Archives of public health*, *82*(1), 8.
22. Jolof, L., Rocca, P., & Carlsson, T. (**2024**). Women's experiences of trauma-informed care for forced migrants: A qualitative interview study. *Heliyon*, *10*(7).
23. Jolof, L., Rocca, P., & Carlsson, T. (**2024**). Trauma-informed care for women who are forced migrants: a qualitative study among service providers. *Scandinavian journal of public health*, 14034948241237591.
24. Richie-Zavaleta, A. C., Baranik, S., Mersch, S., Ataiants, J., & Rhodes, S. M. (**2021**). From victimization to restoration: Multi-disciplinary collaborative approaches to care and support victims and survivors of human trafficking. *Journal of human trafficking*, *7*(3), 291-307.
25. Ogbe, E., Jbour, A., Rahbari, L., Unnithan, M., & Degomme, O. (**2021**). The potential role of network-oriented interventions for survivors of sexual and gender-based violence among asylum seekers in Belgium. *BMC public health*, *21*(1), 25.
26. Hemmings, S., Jakobowitz, S., Abas, M., Bick, D., Howard, L. M., Stanley, N., ... & Oram, S. (**2016**). Responding to the health needs of survivors of human trafficking: a systematic review. *BMC health services research*, *16*(1), 320.
27. Ungar, M. (**2011**). The social ecology of resilience: addressing contextual and cultural ambiguity of a nascent construct. *American journal of orthopsychiatry*, *81*(1), 1.
28. Masten, A. S. (**2014**). Global perspectives on resilience in children and youth. *Child development*, *85*(1), 6-20.
29. Braun, V., & Clarke, V. (**2022**). Conceptual and design thinking for thematic analysis. *Qualitative psychology*, *9*(1), 3.
30. Munné, P. (**2023**). Youth Factsheet Trafficking in Persons and Youth Eemerging results from UNODC Global Reports on Trafficking in Persons.
31. Zimmerman, C., & Kiss, L. (**2017**). Human trafficking and exploitation: A global health concern. *PLoS medicine*, *14*(11), e1002437.
32. Okoye, N. A., AGBO PK, O. E., Hassan, S. M., & Udeji, R. N. (**2023**). Effectiveness of Evidence-Based Interventions Towards Mental Health Illness Among Nigerian Adolescents and Adults: Systematic Review. *Genesis J Surg Med*, *2*(3), 1-10.
33. Maul, S., Davis, K. A., Purzer, S., & Wertz, R. (**2024, June**). Accommodations for Disabled Students in STEM Fields: Research Considerations and a Literature Review. In *2024 ASEE Annual Conference & Exposition*.

34. Ottisova, L., Hemmings, S., Howard, L. M., Zimmerman, C., & Oram, S. (**2016**). Prevalence and risk of violence and the mental, physical and sexual health problems associated with human trafficking: an updated systematic review. *Epidemiology and psychiatric sciences*, *25*(4), 317-341.
35. LeCrom, C. (**2022**). An overview of Sustainable Development Goal 5. *The Routledge Handbook of Sport and Sustainable Development*, 119.
36. Peachey, J. W., & Shin, N. (**2022**). An overview of Sustainable Development Goal 16. *The Routledge handbook of sport and sustainable development*, 399.
37. Einarsdóttir, J., & Boiro, H. (**2014**). The Palermo protocol: Trafficking takes it all. *Stjórnmál og stjórnsýsla*, *10*(2), 387.
38. Huynh, L. (**2009**). Sex Trafficking: Social Constructions and Stereotypes of Recovery in Viet Nam.
39. Prangley, M. (**2019**). Coordination Sensation: When NGOs Strike Down Sex Trafficking
40. Surtees, R., & de Kerchove, F. (**2014**). Who Funds Re/integration? Ensuring sustainable services for trafficking victims. *Anti-Trafficking Review*, (3).
41. DoCarmo, T. (**2012**). NGO Attitudes Toward Community-Based Care Models for Survivors of Human Trafficking in Cambodia.
42. Hodges, K., & Burch, S. (**2019**). Multiple and intersecting experiences of women in prostitution: Improving access to helping services. *Dignity: A Journal of Analysis of Exploitation and Violence*, *4*(2), 3.
43. Cavalieri, S. (**2011**). Between victim and agent: A third-way feminist account of trafficking for sex work. *Ind. LJ*, *86*, 1409.
44. Goldenberg, S. M., Engstrom, D., Rolon, M. L., Silverman, J. G., & Strathdee, S. A. (**2013**). Sex workers perspectives on strategies to reduce sexual exploitation and HIV risk: a qualitative study in Tijuana, Mexico. *PLoS One*, *8*(8), e72982.
45. Baker, K. L. (**2006**). Don't Forget the Family: A Proposal for Expanding Immediate Protection to Families of Human Trafficking Survivors. *Fordham Int'l LJ*, *30*, 836.
46. Rustamova, N., Sharifzoda, S., Burxanxodjaeva, X., Rahimqulova, L., Turdialiev, M., Nurullaev, F., & Eshchanova, D. (**2025**). Social Protection in Developing Countries: Legal, Economic, and Social Trends. *Qubahan Academic Journal*, *5*(1), 118-149.
47. Rakhimova, Z., Topildiev, B., Nazarov, S., Kadirova, M., Sobirova, N., Rustamova, M., & Nusratova, K. (**2025**). Fostering Entrepreneurial Competencies in Higher Education: Trends, Challenges, Legal Issues and Impacts on Student Success. *Qubahan Academic Journal*, *5*(3), 114-142.
48. Abdusamatov, K. U. O., & Rustamova, N. R. (**2025, July**). Migration meets innovation: How technology is shaping migration solutions. In *AIP Conference Proceedings* (Vol. 3304, No. 1, p. 030094). AIP Publishing LLC.
49. Abdusamatov, K., Babajanova, D., Egamberdiev, D., Xodjiyev, Y., Tukhtaev, U., Yusupov, N., & Shoislomova, S. (**2024**). Challenges faced by migrant students in education: a comprehensive analysis of legal, psychological, and economic barriers. *Qubahan Academic Journal*, *4*(4), 330-360.
50. Ergasheva, G., Khursanov, R., Bazarova, D., Altiyev, R., Tadjibaeva, A., Yusupdzhanova, G., & Madatova, Z. (**2025**). Integrating Digital Competencies into Legal Education: A Pedagogical Framework for the Future. *Qubahan Academic Journal*, *5*(2), 446-478.
51. Raggio, T. N. (**2019**). *A Narrative Study Focusing on Survivors of Forced Labor Trafficking* (Doctoral dissertation, Walden University).