



Guidance on Vulnerability in Asylum and Reception

Operational standards and indicators

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May 2024

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About the guide

Why was this guide created? The mission of the European Union Agency for Asylum (EUAA) is to facilitate and support the activities of EU Member States and the Schengen associated countries (EU+ countries ⁽¹⁾) in the implementation of the Common European Asylum System (CEAS) ⁽²⁾. According to its overall aim to promote a correct and effective implementation of the CEAS and to enable convergence, the EUAA develops common operational standards and indicators, guidelines and practical tools.

How was this guide developed? This guide was created by Member State experts from Belgium, France, Germany, Luxembourg and the Netherlands and civil society organisation representatives from Nidos and Solidarity Now. In addition, the German Red Cross shared its expertise on individual topics during the development of the guidance. Valuable input was also received from the European Commission, the European Union Agency for Fundamental Rights and the United Nations High Commissioner for Refugees (UNHCR) ⁽³⁾. The development was facilitated and coordinated by the EUAA. Before its finalisation, a consultation on the guide was carried out with EU+ countries through the EUAA Vulnerability Experts Network.

Who should use this guide? This guide is primarily intended for first-contact officials, registration officers, case officers, reception officers, vulnerability experts, social workers, quality assessors / quality officers, managers, team leaders and coordinators, decision-makers, as well as policymakers in the national asylum and reception authorities. Additionally, this tool is useful for legal advisers, as well as any other person working or involved in the field of international protection in the EU context and partner third countries ⁽⁴⁾.

How does this guide relate to other EUAA tools? This guide should be used in conjunction with other available EUAA practical guides and tools. Refer to the *Quality Assurance Tool: Examining the application for international protection* ⁽⁵⁾, the *Guidance on Asylum Procedure: Operational standards and indicators* ⁽⁶⁾ and the *Guidance on the Dublin Procedure: Operational standards and indicators* ⁽⁷⁾ for general guidance on quality assurance in the asylum procedure. For general guidance on reception conditions, refer to the *Guidance*

⁽¹⁾ The 27 EU Member States and the Schengen associated countries (Iceland, Liechtenstein, Norway and Switzerland).

⁽²⁾ The CEAS in its present form is binding on all Member States with the exception of Denmark and Ireland. Denmark does not participate and is not bound by the treaty provisions or any secondary legislation relating to the CEAS. Ireland has not opted in to [Directive 2011/95/EU](#) of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted (recast), nor in to [Directive 2013/32/EU](#) of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast).

⁽³⁾ Note that the finalised guide does not necessarily reflect the positions of UNHCR.

⁽⁴⁾ EUAA, [External Cooperation Strategy](#), March 2023.

⁽⁵⁾ EUAA, [Quality Assurance Tool: Examining the application for international protection](#), May 2024.

⁽⁶⁾ EASO, [Guidance on Asylum Procedure: Operational standards and indicators](#), September 2019.

⁽⁷⁾ EASO, [Guidance on the Dublin Procedure: Operational standards and indicators](#), 2019.

on Reception – Operational standards and indicators, 2024 ⁽⁸⁾, which complements the *Guidance on Reception Conditions – Operational standards and indicators, 2016* ⁽⁹⁾ and the *Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators* ⁽¹⁰⁾ together with the *Tool for the Assessment of Reception Conditions* ⁽¹¹⁾. All EUAA practical tools are publicly available online on the EUAA website:

<https://euaa.europa.eu/practical-tools-and-guides>.

The EUAA also provides a wide range of training modules for the asylum and reception context. The European Asylum Curriculum [Training Catalogue](#) offers a detailed description of all available training modules. For further information, visit www.euaa.europa.eu/training.

How does this guide relate to national legislation and practice? This is a soft convergence tool. It is not legally binding and reflects commonly agreed standards as adopted by the EUAA Management Board on 6 May 2024.

Disclaimer

This guide was prepared without prejudice to the principle that only the Court of Justice of the European Union can give an authoritative interpretation of EU law.

⁽⁸⁾ EUAA, [Guidance on Reception – Operational standards and indicators](#), 2024.

⁽⁹⁾ EASO, [Guidance on Reception Conditions: Operational standards and indicators](#), September 2016.

⁽¹⁰⁾ EASO, [Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators](#), December 2018.

⁽¹¹⁾ EUAA, [Tool for the Assessment of Reception Conditions](#), 2022.



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List of abbreviations

| Abbreviation | Definition |
|------------------------------|---|
| APD (recast) | asylum procedures directive – Directive 2013/32/EU of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast) |
| CEAS | Common European Asylum System |
| CSOs | civil society organisations |
| Dublin III regulation | Regulation (EU) No 604/2013 of the European Parliament and of the Council of 26 June 2013 establishing the criteria and mechanisms for determining the Member State responsible for examining an application for international protection lodged in one of the Member States by a third-country national or a stateless person (recast) |
| ECtHR | European Court of Human Rights |
| EUAA | European Union Agency for Asylum |
| EUAA regulation | Regulation (EU) 2021/2303 of the European Parliament and of the Council of 15 December 2021 on the European Union Agency for Asylum and repealing Regulation (EU) No 439/2010 |
| EU Charter | Charter of Fundamental Rights of the EU |
| EU+ countries | EU Member States and the Schengen associated countries |
| FGM/C | female genital mutilation/cutting |
| GDPR | general data protection regulation – Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) |
| GBV | gender-based violence |
| LGBTIQ | lesbian, gay, bisexual, transgender, intersex and queer |
| Member States | EU Member States |





| Abbreviation | Definition |
|---------------------|--|
| QD (recast) | qualification directive — Directive 2011/95/EU of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted (recast) |
| RCD (recast) | reception conditions directive — Directive 2013/33/EU of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast) |
| THB | trafficking in human beings |
| UNHCR | United Nations High Commissioner for Refugees |





Introduction

Background

The provisions of the Common European Asylum System (CEAS) include aspects related to the special needs ⁽¹²⁾ of applicants in a vulnerable situation in asylum and reception. However, the legal instruments leave a considerable degree of discretion in the identification of applicants in a vulnerable situation and how to assess and respond to their needs. This creates a difference in the implementation of special procedural guarantees and reception conditions as well as the access to available services. Consequently, the response to the needs of applicant in a vulnerable situation can vary across Member States, causing differences in the treatment of applicants for international protection (see Section [Vulnerability in the Common European Asylum System](#)).

To achieve greater convergence, the European Union Agency for Asylum (EUAA) has developed practical guides and operational standards and indicators based on the applicable legal provisions as well as existing practices and recommendations ⁽¹³⁾. The aim is to help Member States in implementing key provisions of the asylum procedures directive (the APD (recast)) ⁽¹⁴⁾, the Dublin III regulation ⁽¹⁵⁾, the reception conditions directive (the RCD (recast)) ⁽¹⁶⁾ and the qualification directive (the QD (recast)) ⁽¹⁷⁾ with the ultimate goal of strengthening the CEAS at an operational level ⁽¹⁸⁾.

This guidance complements existing standards and indicators also in light of the new EUAA mandate entered into force in 2022, which enhanced the role of the agency in supporting the implementation of the CEAS ⁽¹⁹⁾.

⁽¹²⁾ The wording ‘special needs’ reflects the terminology used in the RCD (recast) in force at the time of writing. Nevertheless, the term ‘specific needs’ is used in the new [recast reception conditions directive](#).

⁽¹³⁾ Article 13(2) [Regulation \(EU\) 2021/2303](#) of the European Parliament and of the Council of 15 December 2021 on the European Union Agency for Asylum and repealing Regulation (EU) No 439/2010 (OJ L 468, 30.12.2021) (EUAA regulation): ‘The Agency shall, on its own initiative or at the request of the Management Board or the Commission, develop operational standards, indicators, guidelines and best practices related to the implementation of Union law on asylum.’

⁽¹⁴⁾ [Directive 2013/32/EU](#) of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast), (OJ L 180/60, 29.6.2013).

⁽¹⁵⁾ [Regulation \(EU\) No 604/2013](#) of the European Parliament and of the Council of 26 June 2013 establishing the criteria and mechanisms for determining the Member State responsible for examining an application for international protection lodged in one of the Member States by a third-country national or a stateless person (recast) (OJ L 180, 29.6.2013).

⁽¹⁶⁾ [Directive 2013/33/EU](#) of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast), (OJ L 180, 29.6.2013).

⁽¹⁷⁾ [Directive 2011/95/EU](#) of the European Parliament and of the Council of 13 December 2011 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection, for a uniform status for refugees or for persons eligible for subsidiary protection, and for the content of the protection granted (recast) (OJ L 337, 20.12.2011).

⁽¹⁸⁾ Article 13(2) EUAA regulation.

⁽¹⁹⁾ The new mandate of the EUAA, as laid out in the EUAA regulation, introduces in Articles 14 and 15, the EUAA monitoring mechanism for the operational and technical application of all aspects of the CEAS. Furthermore, in light of Article 13(6) ‘the Agency shall take into account the operational standards, indicators, guidelines and best practices ... for the purposes of the monitoring mechanism referred to in Article 14.’





These standards measure aspects that relate in particular to applicants in a vulnerable situation in reception and in the asylum procedure. The guidance can be read on its own or in conjunction with existing documents that cover aspects related to all applicants.

All standards and indicators have been developed based on the CEAS, which is the legal basis in force at the time of writing. It should be noted that the guidance has been developed in the context of the negotiations on the [New Pact on Migration and Asylum](#).

Importantly, Member States may introduce or retain provisions that are specific to applicants in a vulnerable situation that are more favourable than those included in this guidance. Under no circumstances should this document be understood as an invitation to lower existing standards but rather as an encouragement to reach, as a minimum, the benchmarks developed herein.

Purpose and scope of the guidance

The overall objective of these operational standards and indicators is to support Member States in the implementation of key provisions of the CEAS, addressing issues related to applicants in a situation of vulnerability in asylum and reception.

The guidance has been designed to serve multiple **purposes**, as follows.

- **At European policy level**, it harmonises the operational and technical application of the CEAS by promoting commonly agreed practices.
- **At national policy level**, it supports Member States in establishing fair and efficient asylum and reception systems that comply with the CEAS.
- **At operational level**, it aims to ensure that relevant procedures comply with the provisions of the CEAS. It can be used by asylum and reception authorities and practitioners to:
 - i. ensure the effective implementation of special procedural guarantees and special reception conditions;
 - ii. support the planning and running of reception facilities integrating aspects related to applicants in a vulnerable situation;
 - iii. improve vulnerability case management;
 - iv. support staff training on the identification of vulnerabilities and the assessment and response to the special needs of applicants.

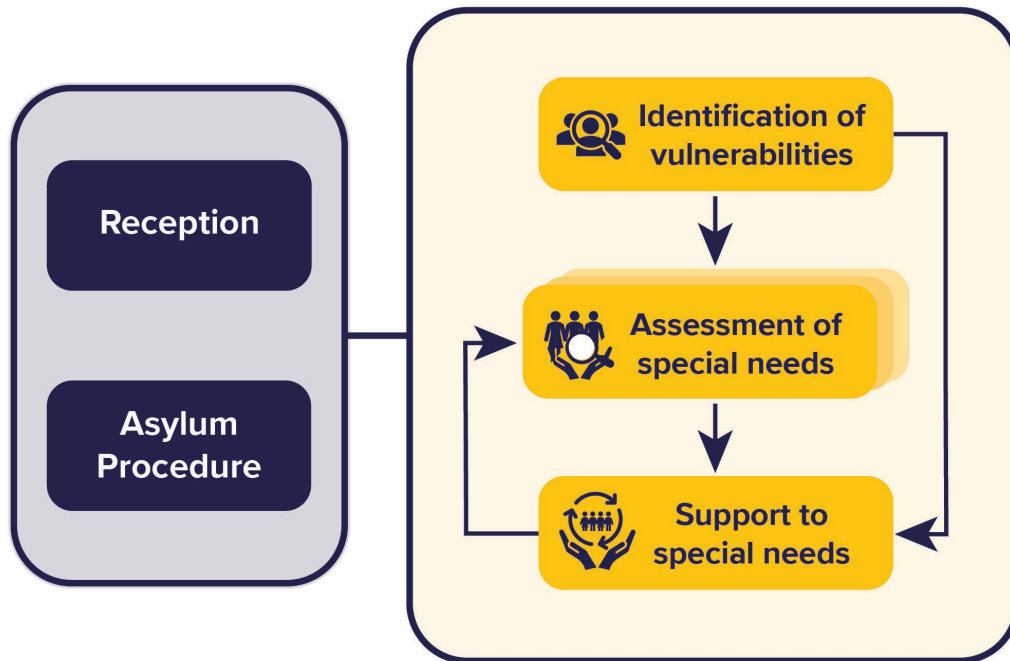
In addition, the guidance can also provide a framework for self-assessment in view of process improvement and/or quality assurance.

The topic of vulnerability is crosscutting and is relevant for the entire asylum and reception pathway. The scope of this guidance is to cover the main elements of the identification of vulnerabilities and the assessment and response to the needs of applicants in a vulnerable situation. The guidance has a general approach to applicants in a vulnerable situation and it



does not cover the specificity of each category considered at heightened risk, such as children.

Figure 1. Scope of the guidance



This guidance does not intend to create a perfect model for the identification of vulnerability, the assessment and response to special needs. It aims to compile commonly agreed standards, indicators and good practices that already apply and/or are considered achievable across Member States.

A number of different actors are often involved in the identification of vulnerability and the assessment and response to special needs. This includes, for example, other state, regional or local service providers as well as intergovernmental or non-governmental organisations. Nevertheless, the ultimate responsibility for the application of these standards lies with Member States authorities.

Structure and format of the guidance

The guidance opens with an introductory section that provides background information, defines the purpose and structure of the guidance and clarifies the concepts of a standard, indicator, additional remark and good practice, as used in this document (see Section [How to read the guidance](#)). It also gives an overview on the legal and theoretical framework on vulnerability (see Sections [Introduction to vulnerability in the context of asylum](#), [Vulnerability in the Common European Asylum System](#) and [A needs-based approach to provide adequate support](#)).



The document elaborates standards and indicators within the following sections.

| Thematic section | Brief description | Scope |
|---|---|--|
| Information provision | Provides guidance on the adaptation of the provision of information in particular circumstances and the needs of applicants in a vulnerable situation. | Crosscutting standards and indicators applicable to reception and asylum procedure |
| Identification | Provides guidance on how to set up and implement an effective identification mechanism in the context of the asylum procedure and reception. | |
| Assessment | Provides guidance on the assessment of special needs and illustrates how and in what circumstances the assessment should be conducted. | |
| Referral and coordination | Provides guidance on an efficient set up of referral procedures to adequate support for applicants in a vulnerable situation. | |
| Confidentiality | Provides guidance on essential aspects related to meeting confidentiality and data protection requirements when handling information related to applicants in a vulnerable situation and in need of special procedural guarantees and reception conditions. | |
| Prevention | Provides guidance on those measures to be taken that aim to prevent and mitigate the emergence and/or aggravating of vulnerabilities. | Standards and indicators specific to reception |
| Participation and engagement | Provides guidance on how means provided for applicants to voice their opinions are tailored to the needs and circumstances of different profiles of applicants. | |
| Complaint and response mechanism | Provides guidance on the specific arrangements in place to make complaint and response mechanisms accessible to applicants in a situation of vulnerability. | |
| Special reception conditions | Provides guidance on how to adequately respond to special needs in the context of reception. | |
| Access to the asylum procedure | Provides guidance on the special procedural guarantees to be implemented during the making, registering and lodging of the application when indicators of vulnerabilities have been identified. | Standards and indicators specific to the asylum procedure |
| Interview | Provides guidance on the special procedural guarantees and adequate support provided to applicants in a vulnerable situation during the interview. | |



| Thematic section | Brief description | Scope |
|--|---|--|
| Decision | Provides guidance on how the special needs of the applicants also need to be taken into account when the decision is drafted and notified ensuring that all arrangements are taken to ensure, on one hand, the security of the applicant, and on the other, the accessibility of the information. | |
| Staff capacity, training and well-being | Provides guidance on several aspects related to staff, such as training, mental health, critical incidents and staff well-being. | Crosscutting standards and indicators applicable to reception and asylum procedure |
| Interpreting for applicants in a vulnerable situation | Provides guidance on specific aspects of the role of the interpreter when dealing with applicants in a vulnerable situation. | |

This guidance contains four annexes:

1. [Annex 1. Vulnerability workflow](#);
2. [Annex 2. Summary table](#), which summarises all of the standards and indicators on vulnerability.
3. [Annex 3. Glossary](#).
4. [Annex 4. EUAA resources](#).

These tables should be read in conjunction with the main document, which provides additional clarifications that support the interpretation of the guidance.

How to read the guidance

This guidance includes specific standards applicable to national asylum and reception systems across all Member States.

When reading this guidance, the following aspects should be taken into account.

- Each section includes **standards, indicators, additional remarks** and **good practices** that should be read in accordance with the definitions provided in the table below.

Standard

describes a commonly agreed practice that is considered achievable by all Member States. Standards aim to ensure the establishment of fair and efficient asylum and reception systems in compliance with the provisions set out in the Common European Asylum System.

Indicator

is what can be observed and/or measured to demonstrate whether the operational standard is achieved. Indicators listed under each standard should be understood as cumulative without an order of hierarchy.



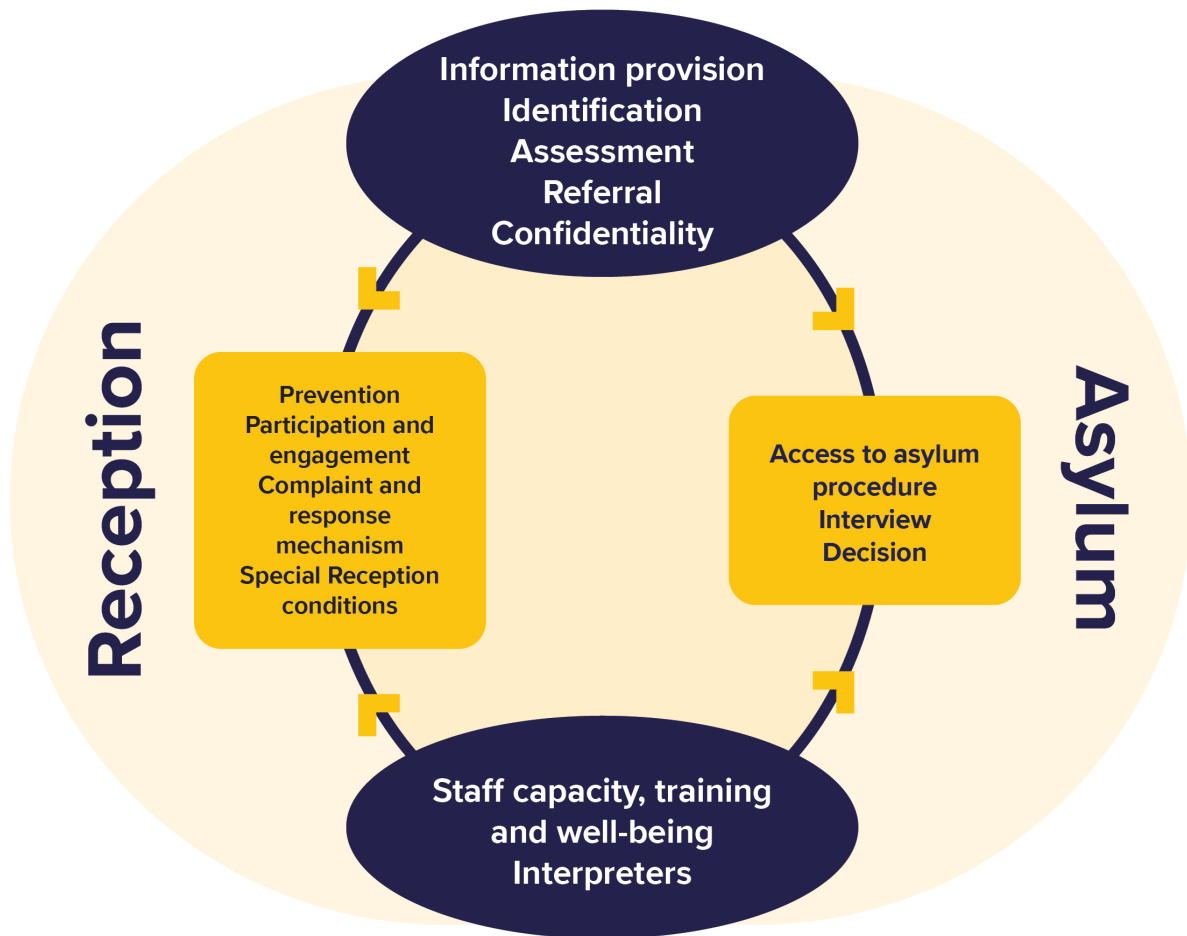
Additional remark highlights specific points of attention, particular circumstances or exceptions for applying the indicator. In light of the different national contexts, the applicability of the additional remarks might vary across Member States.

Good practice means practices that Member States are encouraged to consider adopting in their national systems, even though they do not constitute commonly agreed practices.

- Each section starts with an introductory part that defines its scope, outlining the methodological framework used to draft the standards and indicators and clarifying the terminology used in the section.
- The **Legal reference** box under each thematic section refers to the relevant articles in the APD (recast), the RCD (recast), the QD (recast) and the GDPR only when this is deemed helpful to guide the reader through the standards and indicators elaborated therein.
- An **Available EUAA resources** section complements the thematic sections for which the EUAA has resources to support Member States in meeting the standards and indicators elaborated therein.
- Since this guidance covers both asylum and reception, there are some standards and indicators applicable to both while others are only relevant for one specific context.
- The order in which thematic sections of the guidance have been organised take into account the main pillars of the vulnerability case management:
 - identification
 - assessment
 - response.

Figure 2 shows how the guidance should be read following the vulnerability case management flow and depending on the context.



Figure 2. How to read the guidance

Note on terminology

In this guidance, the preferred terms used to refer to applicants who are in need of special procedural guarantees and/or special reception conditions are ‘persons in a vulnerable situation’ or ‘person in a situation of vulnerability’ rather than ‘vulnerable persons’ to avoid the risk of stigmatisation.

In this guidance, the term staff refers to practitioners who are in direct contact with applicants for international protection in the context of the asylum procedure and reception, irrespective of their employer (e.g. state, civil society organisation, private contractor or municipality). Staff can include border guards, case officers, registration officers, social workers, education and healthcare staff, interpreters, facility managers and administration/coordination staff.

In addition, considering that the use of the terms ‘guardian’, ‘representative’ and ‘legal representative’ is inconsistent or varies across the international/EU framework, throughout the practical guide, the term ‘representative’ will be used in line with the meaning of Article 2(j) RCD (recast) and Article 2(n) APD (recast) and used in relation to unaccompanied minors but



also for adults without legal capacity. The term ‘legal representative’ will be used to refer to legal adviser or qualified lawyer/legal professional.

The other terms used in this guidance are detailed in [Annex 3. Glossary](#).

Guiding principles

The principles listed below are integral to the standards and indicators included in this document. They should be observed when dealing with applicants in a vulnerable situation.

Confidentiality. In applying the standards and indicators in this guidance, confidentiality rules provided for in national law are respected in relation to any information obtained by those working with applicants in a vulnerable situation in the course of their work ⁽²⁰⁾.

Data protection. Any processing activity (e.g. recording, storing, communicating) vis-à-vis the data related to an applicant must be in compliance with the general data protection regulation (GDPR) and in accordance with national law. It is very important to ensure that the processing of personal data is lawful, adequate, relevant and proportionate to specific purposes in the context of the work carried out ⁽²¹⁾. National rules governing the retention period of personal data should be respected.

Do no harm. When working with applicants in a vulnerable situation it is very important that actions do not expose them to further harm ⁽²²⁾.

Accountability. Authorities and staff are accountable to applicants in a situation of vulnerability and mechanisms to provide feedback in an informed manner are provided. Being accountable to the people being assisted commits those providing support to applicants in a situation of vulnerability to work within a framework of quality standards, principles, policies and guidelines, and promotes training and capacity building activities, ensuring the involvement of those assisted ⁽²³⁾.

Respect diversity. Authorities and staff working with applicants in a vulnerable situation ‘shall respect cultural, religious and linguistic diversity’ ⁽²⁴⁾.

⁽²⁰⁾ Article 48 APD (recast) and Articles 18(7), 24(4) and 25(2) RCD (recast); EUAA, [Practical Guide on Information Provision](#), 2023, Section 3.1.3 ‘Confidentiality’.

⁽²¹⁾ See Articles 5 of [Regulation \(EU\) 2016/679](#) of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) (OJ L 119, 4.5.2016) (GDPR)

⁽²²⁾ European Commission – Humanitarian Aid, [The European Consensus on humanitarian aid](#), 2008, paragraph 42; Sphere, [The Sphere Handbook – Humanitarian charter and minimum standards in humanitarian response](#), 2018 edition; International Federation of Red Cross and Red Crescent Societies, [Applying better Programming Initiative – Do no harm](#), 2016, p.10.

⁽²³⁾ European Commission – Humanitarian Aid, [The European Consensus on humanitarian aid](#), 2008, paragraphs 43-45.

⁽²⁴⁾ Article 22 of the European Union, [Charter of Fundamental Rights of the EU](#), 26 October 2012, 2012/C 326/02 (EU Charter).





Integrity. Authorities and staff working with applicants in a vulnerable situation must act with integrity by not abusing the power or the trust of the applicant and/or their family ⁽²⁵⁾.

Fundamental rights. Every human being must be valued and respected. This guidance should be applied in accordance with the United Nations Universal Declaration of Human Rights ⁽²⁶⁾ and the Charter of Fundamental Rights of the EU (EU Charter).

Fundamental rights

- **Human dignity** stipulates that a human being has an innate right to be valued, respected and to receive ethical treatment ⁽²⁷⁾.
- **Right to life** prohibits the death penalty or execution and stipulates the duty to take preventive measures in situations where there is a real and immediate risk to the life of an individual ⁽²⁸⁾.
- **Prohibition of torture** stipulates that no one can be subjected to torture or to inhuman or degrading treatment or punishment ⁽²⁹⁾.
- **Equality and non-discrimination** stipulate that '[e]very one is equal before the law' ⁽³⁰⁾ and '[a]ny discrimination based on any ground such as sex, race, colour, ethnic or social origin, genetic features, language, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age or sexual orientation shall be prohibited' ⁽³¹⁾.
- **Principle of non-refoulement** refers to the obligation of states to refrain from expelling or returning a person in any manner whatsoever to a situation where they may face persecution and/or torture, inhuman or degrading treatment or punishment ⁽³²⁾.
- **Right to asylum** lays down that everyone has the 'right to seek and enjoy protection' ⁽³³⁾ from persecution in other countries. Member States must ensure that each person, whether adult or child, has the right to make an application for international protection on their own behalf or through their relative or representative ⁽³⁴⁾.
- **Best interests of the child.** A threefold concept which includes a substantive right, a fundamental and interpretative legal principle and a rule of procedure that is aimed at ensuring the full and effective enjoyment of all the rights recognised in the United Nations Convention of the Rights of the Child and of which the primary consideration is to ensure the holistic development of the child ⁽³⁵⁾.

⁽²⁵⁾ UNHCR, [UNHCR Emergency Handbook - Protection from Sexual Exploitation and Abuse](#), 11 October 2023; UN, [Preventing Sexual Exploitation and Abuse Policies and Protocols](#); European Commission, Migration and Home Affairs, [EU strategy for a more effective fight against child sexual abuse - Child sexual abuse](#).

⁽²⁶⁾ UN General Assembly, [Universal Declaration of Human Rights](#), 10 December 1948, 217 A (III).

⁽²⁷⁾ Article 1 EU Charter.

⁽²⁸⁾ Article 2 EU Charter.

⁽²⁹⁾ Article 4 EU Charter.

⁽³⁰⁾ Article 20 EU Charter.

⁽³¹⁾ Article 21 EU Charter.

⁽³²⁾ Article 33(1) UN General Assembly, [Convention relating to the status of refugees](#), Geneva, 28 July 1951, United Nations, Treaty Series, vol. 189, p. 137.

⁽³³⁾ Article 14(1) of the UN General Assembly, [Universal Declaration of Human Rights](#), 10 December 1948, 217 A (III).

⁽³⁴⁾ Article 18 EU Charter.

⁽³⁵⁾ Recitals 9 and 22 and Articles 2, 11, 23, 24 RCD (recast) referring to the best interests of the child; European Migration Network Glossary, [Definition of 'best interests of the child'](#); Article 3 of the UN General Assembly,





Introduction to vulnerability in the context of asylum

Applicants for international protection are ‘normally in a particularly vulnerable situation’⁽³⁶⁾. They experience a situation of vulnerability that arises from the experience of flight and of the asylum system itself and is shaped by various circumstances – in the country of origin, in transit and in the country of asylum⁽³⁷⁾.

The particular vulnerability of asylum seekers⁽³⁸⁾ has also been highlighted by the European Court of Human Rights (ECtHR) in its leading case referred to as the *M.S.S. v Belgium and Greece*, where the Grand Chamber found that the applicant, an asylum seeker, was ‘particularly vulnerable because of everything he had been through during his migration and the traumatic experiences he was likely to have endured previously’⁽³⁹⁾. In this judgement, the ECtHR took the view that vulnerability is inherent in the situation of asylum seekers, who are members of ‘a particularly underprivileged and vulnerable population group in need of special protection’⁽⁴⁰⁾. As such, they require special support and protection. In this regard, the ECtHR emphasised in this judgement that there is ‘broad consensus at the international and European level’ on the need for this special protection⁽⁴¹⁾.

Vulnerability is not a permanent or fixed feature; it can change over time. A situation of vulnerability of an applicant for international protection can be shaped by various factors that may be related to both individual characteristics (such as age) or to external factors, which may coexist and intersect with each other⁽⁴²⁾. While in certain individual cases the intersection of these elements may create strengths and resilience in individuals, in other instances it may

[Convention on the Rights of the Child](#), 20 November 1989, United Nations, Treaty Series, vol. 1577, p. 3; Article 24 EU Charter.

⁽³⁶⁾ UNHCR, [Handbook and Guidelines on Procedures and Criteria for Determining Refugee Status under the 1951 Convention and the 1967 Protocol Relating to the Status of Refugees](#), December 2011, HCR/1P/4/ENG/REV. 3, paragraph 190; See also UN General Assembly, [New York Declaration for Refugees and Migrants: resolution / adopted by the General Assembly](#), 3 October 2016, A/RES/71/1, paragraph 6, according to which

Though their treatment is governed by separate legal frameworks, refugees and migrants have the same universal human rights and fundamental freedoms. They also face many common challenges and have similar vulnerabilities, including in the context of large movements.

⁽³⁷⁾ UNHCR and International Detention Coalition (IDC), [Vulnerability Screening Tool – Identifying and addressing vulnerability: a tool for asylum and migration systems](#), 2016, pp. 1 and 3. See also European Council on Refugees and Exiles, [The concept of vulnerability in European asylum procedures](#), 31 August 2017, p. 11.

⁽³⁸⁾ The [European Migration Network Glossary](#) defines ‘asylum seeker’ as ‘In the global context, a person who seeks protection from persecution or serious harm in a country other than their own and awaits a decision on the application for refugee status under relevant international and national instruments.’

⁽³⁹⁾ ECtHR [Grand Chamber], judgment of 21 January 2011, [M.S.S. v Belgium and Greece](#), 30696/09, ECLI:CE:ECHR:2011:0121JUD003069609, paragraph 232. A summary is available in the [EUAA Case Law Database](#).

⁽⁴⁰⁾ ECtHR, 2011, [M.S.S. v Belgium and Greece](#), op. cit., fn. 39, paragraph 251. The Grand Chamber also stated that ‘the applicant’s distress was accentuated by the vulnerability inherent in his situation as an asylum-seeker’, paragraph 251. A summary is available in the [EUAA Case Law Database](#).

⁽⁴¹⁾ ECtHR, 2011, [M.S.S. v Belgium and Greece](#), op. cit., fn. 39, paragraph 251. A summary is available in the [EUAA Case Law Database](#).

⁽⁴²⁾ UNHCR and IDC, [Vulnerability Screening Tool – Identifying and addressing vulnerability: a tool for asylum and migration systems](#), 2016, p. 2.





heighten risks of harm and exacerbate the inability to access services, thereby increasing protection needs ⁽⁴³⁾.

Applicants and refugees exposed to heightened risks of harm, violations and abuse are considered to be in a particularly vulnerable situation ⁽⁴⁴⁾. Further judgements of the ECtHR have in fact stressed the particular situation of vulnerability of certain applicants for international protection, while relying on its decision in *M.S.S. v Belgium and Greece* ⁽⁴⁵⁾. For instance, in the case referred to as *Tarakhel v Switzerland*, the ECtHR recognised that the requirement of special protection for asylum seekers acquires particular relevance when applicants are children, because of their ‘specific needs and their extreme vulnerability’ ⁽⁴⁶⁾.

Belonging to certain groups, or being in a certain situation, can therefore require intensified care and support to adequately address the applicant’s needs. The challenging life circumstances many applicants are confronted with can trigger new violence towards groups already considered at risk of heightened vulnerability, such as children, especially those that are unaccompanied and separated ⁽⁴⁷⁾, women, the elderly, lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) applicants or those living with disabilities.

States therefore have to provide special protection and assistance based on international and European provisions as well as their national legislation. This includes identification of vulnerabilities and, where necessary, information, assistance, referral and protection ⁽⁴⁸⁾.

⁽⁴³⁾ UNHCR and IDC, [Vulnerability Screening Tool - Identifying and addressing vulnerability: a tool for asylum and migration systems](#), 2016, p. 2; UNHCR, ‘[Age, Gender and Diversity \(AGD\) and Intersectionality](#)’, 2023.

⁽⁴⁴⁾ UNHCR and IDC, [Vulnerability Screening Tool – Identifying and addressing vulnerability: a tool for asylum and migration systems](#), 2016; OHCHR, [Principles and Guidelines, supported by practical guidance, on the human rights protection of migrants in vulnerable situations](#), 2018; IOM, [IOM Handbook on Protection and Assistance for Migrants Vulnerable to Violence, Exploitation and Abuse](#), 2020.

⁽⁴⁵⁾ See, for example, ECtHR, judgment of 21 October 2014, [Sharifi and Others v Italy and Greece](#), 16643/09, paragraph 172 (in French). A summary in English is available in the [EUAA Case Law Database](#).

⁽⁴⁶⁾ ECtHR [Grand Chamber], judgment of 4 November 2014, [Tarakhel v Switzerland](#), 29217/2012, ECLI:CE:ECHR:2014:1104JUD002921712, paragraph 119. A summary is available in the [EUAA Case Law Database](#). In another case concerning instead an adult asylum seeker, the ECtHR underlined the applicant’s vulnerability because of his belonging to a vulnerable group in his country of origin (as a gay man from Iran), as well as because of the particular context where he had been placed in detention: ECtHR, judgment of 5 July 2016, [O.M. v Hungary](#), 9912/2015, ECLI:CE:ECHR:2016:0705JUD000991215, paragraph 53. A summary is available in the [EUAA Case Law Database](#).

⁽⁴⁷⁾ UNICEF, [Child Protection – webpage](#), 2024.

⁽⁴⁸⁾ Council of Europe, [Council of Europe Action Plan on Protecting Vulnerable Persons in the Context of Migration and Asylum in Europe \(2021-2025\)](#), August 2021, in particular pp. 7-8.





Vulnerability in the Common European Asylum System

The EU asylum *acquis* recognises that applicants for international protection may have particular needs. The approach of EU law and policy to vulnerability is rooted in the principle of equality before the law ⁽⁴⁹⁾. In addition to the principle of equality, the concept of vulnerability is also based on the principle of non-discrimination ⁽⁵⁰⁾. Therefore, applicants in a vulnerable situation should be able to benefit from the rights and comply with the obligations provided for in the instruments of the CEAS on an equal footing with applicants who are unhindered by such vulnerabilities ⁽⁵¹⁾.

The CEAS instruments use different concepts: ‘vulnerability’, ‘special needs’, ‘special reception needs’ and ‘special procedural guarantees’. For example, Article 2(d) APD (recast) provides the definition of ‘applicant in need of special procedural guarantees’ as meaning ‘an applicant whose ability to benefit from the rights and comply with the obligations provided for in this Directive is limited due to individual circumstances’. Article 2(k) RCD (recast) defines ‘applicant with special reception needs’ as ‘a vulnerable person, in accordance with Article 21, who is in need of special guarantees in order to benefit from the rights and comply with the obligations provided for in this Directive’.

Despite not defining vulnerability or applicants with special needs, the Dublin III regulation should apply the same definitions as laid down in the APD (recast), in addition and without prejudice to the provisions concerning the procedural safeguards laid down in the Dublin III regulation.

All these terms refer to the key scope of ensuring that all applicants, with the exception of specific situations, are able to access effectively and equally the rights laid down in the RCD (recast), to participate in the asylum procedures and to have their need for protection assessed on the basis of their specific situation.

The table below lists the references to vulnerabilities or special needs in CEAS instruments ⁽⁵²⁾.

| CEAS instrument | Provisions |
|---------------------|---|
| RCD (recast) | recital 14, Article 2(k), Article 11, Article 17(2), Articles 18(3) and (5), Article 19(2) and Articles 21–25 |
| APD (recast) | recitals 29 and 30, Article 2(d), Article 15(3)(a), Articles 24 and 25 and Article 31(7), point (b) |

⁽⁴⁹⁾ Article 2 of the Consolidated Version of the [Treaty on European Union](#), (OJ C 202, 7.6.2016); Article 20 EU Charter.

⁽⁵⁰⁾ Article 21(1) EU Charter.

⁽⁵¹⁾ EASO, [Vulnerability in the context of applications for international protection – Judicial analysis](#), 2020.

⁽⁵²⁾ This table builds on the overview of references compiled in EASO, [Vulnerability in the context of applications for international protection – Judicial analysis](#), 2020, p. 23 ‘Table 5: References to vulnerabilities or special needs in CEAS instruments’.





| | |
|------------------------------|---|
| QD (recast) | recitals 19, 28 and 41, Articles 4(3)(c), 9(2)(f), Articles 20(3) and (4), 30(2) and Article 31 |
| Dublin III regulation | recital 13, Articles 6, 8, 16, Article 17(2), Articles 31 and 32 |
| Eurodac | recital 35 |
| EUAA regulation | recital 41, recital 42, Article 8(4), point (l), Article 14, Article 16 |

The RCD (recast) ⁽⁵³⁾ and the QD (recast) ⁽⁵⁴⁾ include a non-exhaustive list of categories indicating that applicants falling within these profiles are more likely to have special needs. For example, Article 21 RCD (recast) includes:

minors, unaccompanied minors, disabled people, elderly people, pregnant women, single parents with minor children, victims of human trafficking, persons with serious illnesses, persons with mental disorders and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, such as victims of female genital mutilation ⁽⁵⁵⁾.

The APD (recast) focuses more on a non-exhaustive list of indicators such as:

age, gender, sexual orientation, gender identity, disability, serious illness, mental disorders or as a consequence of torture, rape, other serious forms of psychological, physical or sexual violence. ⁽⁵⁶⁾

These lists are not exhaustive and, as such, do not exclude the possibility that other or additional categories may be considered vulnerable, or that there may be other possible indicators of vulnerability. A person may display more than one indicator of special needs or will seem to be part of more than one 'category' of vulnerability.

Neither do they exclude the possibility that individuals who are not part of one of the stated vulnerable categories may have special needs that need to be addressed.

It can also be the case that being an applicant in a vulnerable situation does not automatically result in special needs that need to be addressed during the asylum procedures and/or in the reception context. Some applicants may, due to protective factors, be able to participate in the whole asylum process, or otherwise in some stages, without any dedicated support.

Therefore, it is important to proceed on a case-by-case basis with the ultimate aim of identifying applicants with special needs and providing them with adequate support ⁽⁵⁷⁾.

In accordance with the RCD (recast) and the APD (recast), the Member State must conduct an individual assessment of whether the applicant has special reception needs and/or is in need

⁽⁵³⁾ Article 21 RCD (recast).

⁽⁵⁴⁾ Article 20(3) QD (recast).

⁽⁵⁵⁾ Article 21 RCD (recast).

⁽⁵⁶⁾ Recital 29 APD (recast).

⁽⁵⁷⁾ EASO, [Vulnerability in the context of applications for international protection – Judicial analysis](#), 2020





of special procedural guarantees. Identification and assessment of special needs as well as provision of adequate support to applicants in a situation of vulnerability is an obligation for Member States. In particular, under the EU asylum *acquis*, this includes:

- the identification and the assessment of the special needs of the applicants have to be within a reasonable period after an application for international protection is made and should be ongoing ⁽⁵⁸⁾;
- Member States must ensure that where applicants have been identified with special needs, they are provided adequate support ⁽⁵⁹⁾;
- Member States must take into account the specific situation of applicants in need of special reception support and special procedural guarantees ⁽⁶⁰⁾.

A needs-based approach to provide adequate support

In the context of this guidance, ‘response’ refers to the broad array of adequate and prompt support actions once special needs have been identified and assessed in an applicant. The support provided should take into account the special needs in order to guarantee that every applicant can benefit from the rights and comply with the obligations laid down in the CEAS on an equal footing with applicants who are unhindered by such vulnerabilities. The aim of the response is also to prevent any possible aggravation of the identified vulnerabilities, assessed special needs and pre-existing conditions. In the absence of a response, the applicant’s situation could potentially deteriorate with severe consequences on their mental and physical health, thus necessitating more complex and costly future interventions. To a certain extent, response actions also aim to prevent the emergence of new vulnerabilities and related special reception needs.

A needs-based approach ⁽⁶¹⁾ should be adopted to develop an individual response that takes into account the personal situation of the applicant. Response strategies can support in the definition of tailored special reception conditions and special procedural guarantees.

Together, the four response strategies of intensification, prioritisation, differentiation and specialisation offer the scope of possible responses to special needs. Once vulnerabilities are identified, and individual needs assessed, response actions should adapt reception conditions and procedural guarantees taking into consideration several aspects. In terms of capacity, to be able to provide adequate support to applicants with special needs, an investment of more resources might be needed (**intensification**). In terms of time, the response to the needs of the applicant might require accelerated access to the procedure and to the support needed due to the gravity of the needs or because there is a heightened risk of deterioration of the individual situation if services are accessed too late (**prioritisation**). It is important that distinct, yet equivalent, options of reception provision and procedural guarantees are available to

⁽⁵⁸⁾ Article 22 RCD (recast); Article 24 APD (recast).

⁽⁵⁹⁾ Article 22 RCD (recast); recital 29 APD and Article 24(3) APD (recast).

⁽⁶⁰⁾ Article 21 RCD (recast); recital 29 APD (recast).

⁽⁶¹⁾ The EUAA has developed this needs-based approach to providing adequate support in the context of the development of this guidance.



applicants with special needs (**differentiation**) and that services and staff are specifically qualified and trained to respond to vulnerabilities (**specialisation**).

| RESPONSE STRATEGY | DEFINITION |
|--------------------------|---|
| Intensification | ensuring the allocation of more resources to provide adequate support to applicants with special needs. |
| Prioritisation | ensuring faster access to necessary services for applicants with special needs, if a prolonged waiting period might seriously aggravate their vulnerable situation and future well-being. |
| Differentiation | ensuring that distinct, yet equivalent, options of material reception conditions and related services and procedural guarantees are available to applicants with special needs. |
| Specialisation | referring applicants to internal or external services that have distinct knowledge and competences to respond to certain special needs. |

Source: The EUAA's needs-based approach to provide adequate support to applicants in a vulnerable situation.

Several response strategies may apply, sometimes interchangeably, depending on the thematic area of response. The strategies provide a sense of direction for the area of information provision, which is treated in a separate chapter of this guidance because of the transversal scope.



Crosscutting standards and indicators on vulnerability applicable to reception and asylum procedure

Information provision

The right to information is one of the core guarantees provided in the CEAS to ensure a fair and effective asylum procedure. Information provision primarily aims to enable applicants to fully access and understand the asylum procedure and reception system.

The APD (recast) and the RCD (recast) lays down the duty of Member States to provide information to applicants and the right of applicants to receive information. The legal instruments define the content of the information that needs to be provided as a minimum to the applicant regarding the asylum procedure and the reception system, in a language they understand⁽⁶²⁾. The applicant needs to be continuously informed and they have the right to be informed in a timely manner⁽⁶³⁾. The RCD (recast), in particular, establishes that information should be provided to the applicant within a reasonable time not exceeding 15 days after they have lodged the application⁽⁶⁴⁾. The APD (recast) further specifies that this information should be provided free of charge and according to the particular circumstances of the applicant⁽⁶⁵⁾.

Applicants in a vulnerable situation may experience barriers to effectively access this information (e.g. illiteracy, hearing impairments, vision impairments, etc.). They may need to receive relevant content adapted to and targeting their special needs to ensure that adequate support is provided (e.g. attestation of medical documentation, support to victims of gender-based violence (GBV), etc.)

Adapting information provision to applicants in a vulnerable situation might also have a preventive effect. It helps guarantee that vulnerabilities are identified and reduces the risk of exacerbating vulnerabilities due to a lack of information on available support options.

⁽⁶²⁾ In particular, Article 12(1)(a) APD (recast) indicates that, at minimum, the following information should be provided: description of the procedure to be followed; description of the applicant's rights and obligations during the procedure; possible consequences of not complying with the obligations and not cooperating with the authorities; time frame of the procedure; description of the means at the applicant's disposal for fulfilling the obligation to submit elements under Article 4 QD (recast) (e.g. personal interview, shared burden of proof); possible consequences of an explicit and implicit withdrawal of the application. Article 5 RCD (recast) establishes that applicants are provided at least with information about any established benefits and the obligations with which applicants must comply relating to reception conditions. It also covers information about organisations or groups of persons that provide specific legal assistance and organisations that might be able to help or inform them concerning the available reception conditions, including healthcare.

⁽⁶³⁾ For more information, see ECtHR, 2011, *M.S.S. v Belgium and Greece*, op. cit., fn. 39, paragraph 304. A summary is available in the [EUAA Case Law Database](#).

⁽⁶⁴⁾ Article 5(1) RCD (recast).

⁽⁶⁵⁾ Article 19 APD (recast) and recital 22 APD (recast).



In this section, the standards and indicators provide guidance to those actors involved in the provision of information to applicants on how to adapt communication channels, messages and content to the particular circumstances.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators, 2016:*
 - Section 6. [Provision of information and counselling](#), Standard 30–31.
- *Guidance on Asylum Procedure: Operational standards and indicators, 2019.*
 - Section 10. Provision of information and counselling, Standards 20–22.

Legal reference



RCD (recast)

Article 5 – Information

Articles 18(2)(b) and (c) – Modalities for material reception conditions



APD (recast)

Recital 22

Article 12(1), point (a) – Guarantees for applicant

Article 19(1) – Provision of legal and procedural information free of charge in procedures at first instance



Standards and indicators

Standard 1. Adapted information provision

Standard 1. The information provision is adapted to the particular circumstances and needs of applicants in a vulnerable situation.

| | |
|--------------------------|---|
| <p>Indicators</p> | <p>Indicator 1. A process to determine the information and communication needs is in place and it considers the needs of applicants in a vulnerable situation.</p> <ul style="list-style-type: none"> • Additional remarks: <i>this process aims to understand the information and communication preferences, habits and needs of different profiles of applicants. It facilitates building trusted sources of accurate, timely and consistent information. It is an instrument that helps in understanding the information that is most needed, the information gaps, the preferred methods of communication with the target group, and the best channels to transmit valid information.</i> • <i>The process should be continuous and integrated in other regular activities to ensure an adequate response to changes in information needs. The process can be carried out in different ways including through surveys targeting applicants directly or staff in direct contact with them.</i> |
| | <p>Indicator 2. Targeted information relevant to the particular circumstances of applicants is provided.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the content of the information is adapted to the messages the applicant needs to receive. This takes into consideration their special needs and the specificity of the asylum and reception phases. Some examples of tailored information content include:</i> <ul style="list-style-type: none"> ▪ <i>(un)accompanied children: guardianship, the Dublin procedure;</i> ▪ <i>young women and persons with gender-related needs: access to sexual and reproductive health, access to services for victims of GBV;</i> ▪ <i>dependent adults: social welfare and legal capacity, medical facilities;</i> ▪ <i>potential victims of trafficking in human beings (THB): the referral mechanism, the role of law enforcement and safety and security.</i> |



Indicator 3. Information is provided using a variety of communication channels to ensure the applicant's understanding.

- **Additional remarks:** *information is more accessible when it is made available via several channels that can suit the personal circumstances of each applicant, including varying degrees of literacy, education, cognitive capacity and maturity.*
- *The combination of oral information, printed materials, digital and audiovisual communication enables access to information for applicants in a vulnerable situation. For example, printed information materials can illustrate core messages using visual aids to communicate limited content to applicants who are illiterate or have poor reading skills.*

Indicator 4. In person and oral information is provided on a regular basis, taking into consideration the special needs of the applicant.

- **Additional remarks:** *information can be provided either in individual or group sessions depending on needs. When groups sessions are organised, the composition of the group should take into consideration what is needed for an applicant to feel safe to raise questions. For example, women may not speak or ask questions that are personally relevant for them while in the presence of men. In addition, groups need to be homogeneous. This means that participants in the session should speak the same language to avoid having two interpreters interpreting into different languages at the same time, or they should share other common characteristics and backgrounds so that the transmission of information is effective.*
- *Special attention should be paid to the gender of the person providing information and the interpreter, if possible. When working with an interpreter, the terminology used for the information provision is explained to the interpreter. A sign language interpreter is available, if needed and possible.*
- *Timing of the provision of information (when and for how long) also needs to be adapted. The information is provided according to a phase approach to avoid overwhelming applicants, especially applicants with special needs.*
- *It is important to ask feedback from applicants after providing information to make sure the applicant has fully understood the information. The feedback from applicants on information sessions can be carried out, for example, by having a simple evaluation after each session.*
- *Staff is responsible for ensuring that adequate information regularly reaches applicants in a vulnerable situation.*



| | |
|--|--|
| | <p>Indicator 5. Information provision sessions to applicants in a vulnerable situation ensure privacy and the confidentiality of the information shared during these sessions.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the space identified for carrying out the information session ensures confidentiality. Questions and concerns raised by the applicant may be particularly sensitive and personal, thus requiring confidentiality and spaces that can ensure it. During information provision in a group setting, applicants are informed explicitly that they can also ask questions privately and in a confidential manner.</i> |
|--|--|

Standard 2. Information provision on the support provided by other actors

Standard 2. Applicants in a vulnerable situation are informed about organisations or other service providers that support or provide targeted information to applicants concerning their particular circumstances.

| | |
|--|---|
| Indicators | <p>Indicator 1. Up-to-date information with the area of expertise and contact details of relevant organisations or other service providers is available.</p> <ul style="list-style-type: none"> • Additional remarks: <i>up-to-date information of organisations or other service providers that support applicants in a vulnerable situation according to their specific circumstances should be as comprehensive as possible. This information caters for any possible needs or multiple vulnerabilities, for example organisations working with persons with disabilities, victims of violence, single parents with small children, unaccompanied children, drug abuse, THB victims, applicants with diverse sexual orientations, gender identities, gender expressions and sex characteristics, etc.</i> |
| | <p>Indicator 2. Applicants in a vulnerable situation are enabled to contact relevant organisations or other service providers.</p> <ul style="list-style-type: none"> • Additional remarks: <i>this can involve, for example, facilitating the first contact between the organisation and the person in need, booking appointments, providing support with transportation, accompanying the applicant to their first meeting, etc.</i> |
| | <p>Indicator 3. Information on relevant organisations or other service providers is provided as soon as vulnerabilities are identified or special needs assessed.</p> |
| <p>Good practice</p> <p>Information sessions are periodically organised with the involvement of key local actors, such as healthcare service providers and relevant civil society organisations (CSOs).</p> | |





Available EUAA resources



[*Let's Speak Asylum Portal on Information Provision*](#)



[*Practical Guide on Information Provision – Access to the asylum procedure*](#)
[*Practical Guide on Information Provision in the Dublin Procedure*](#)





Identification of applicants in a vulnerable situation

The first step to provide applicants with adequate support for their special needs is the identification of those in a vulnerable situation. The identification of vulnerabilities is a continuous process that should begin as soon as possible and continue throughout all the stages of the asylum procedure and reception pathway.

The identification process detects indicators and factors that can lead to a situation of vulnerability. Vulnerability indicators (e.g. age, medical or mental health difficulties, changes in behaviour, signs related to domestic violence, social isolation, etc.) can be detected in multiple ways in compliance with confidentiality and data protection requirements. For example, through direct interaction with persons and observation of these external signs; their own declaration (self-identification) or declarations from their relatives or other persons and residents of the centre. They can also be detected through information provided by other professionals (medical diagnosis, psychosocial report, knowledge of an ongoing investigation, etc.). Other means can be the documentation available in the file or in the possession of the person, or in other available databases as well as through activities that may lead to the identification such as individual interviews, group talks, briefings, etc.

In some circumstances, the identification mechanism includes a pre-identification exercise (e.g. in contingency situations where there can be a lack of capacity, time and adequate response and referral mechanisms). This step usually detects persons with urgent needs or priority cases, for instance people with severe and urgent medical issues or people in an unsafe situation. The pre-identification can be done through the immediate detection of key indicators, through the self-identification by the person, or through the documents or evidence certifying the vulnerability or its indicators. The pre-identification cannot be considered as a sufficient nor standalone step to identify situations of vulnerability.

There are specific authorities or actors with exclusive competence for the identification of certain vulnerable situations (GBV, THB, unaccompanied minors with a disputed age, etc.). In these cases, the formal identification of these situations will fall exclusively on those authorities or actors (police, GBV focal points, child protection officers, public prosecutor, etc.). Therefore, the action of the reception or asylum staff is limited to the detection or pre-identification and communication of those indicators to the competent authorities. This can be done through the focal points or referent persons, in compliance with confidentiality and personal data protection requirements.





Self-identification and disclosure

Self-identification and disclosure focus on an individual's personal motivation, capability and opportunity to reveal specific conditions, experiences or needs. It is not the sole responsibility of the applicant to declare that they have special needs. Applicants in a vulnerable situation often do not feel comfortable in disclosing their needs. Their needs might be linked to traumatic experiences, or they might feel unable or refuse to recognise themselves as victims. In other cases, they might fear repercussions against their family. The decision not to self-identify should also be respected, as it is critical for many applicants with special needs to feel in control of their situation and to choose if, when and how to seek assistance.

To enable self-identification and disclosure, it is important to build trust, provide information, create safe spaces and organise awareness activities on different vulnerabilities for applicants. It is also important to organise activities and specific training for staff on topics such as cultural backgrounds and how to engage with victims of GBV or THB, for example.

A package of information materials (a poster and a brochure) is available in the EUAA's Let's Speak Asylum Portal, which can support the self-identification of vulnerabilities and special needs:

- [Poster on self-identification of vulnerabilities and special needs](#) accompanied by a guide on [how to use the poster](#).
- Brochure to support self-identification of vulnerabilities and special needs [Are you or do you know someone in one or more of these situations?](#) accompanied by a guide on [how to use the brochure](#).

While the poster can be hung in common areas, it is strongly advised to use the brochure only in the context of an information session as explained in the relevant 'how to use' guides.

Another important process linked to the identification is the medical screening. The grounds for medical screening on public health grounds is laid down in Article 13 RCD (recast). Member States can set up a medical screening, for instance for people with contagious diseases. The results of a medical screening should feed into the identification process of applicants in a vulnerable situation in respect of confidentiality and personal data protection requirements. Medical screening usually takes place upon entry to the country or upon entry to the reception facility. It might take place under medical isolation precautions or in quarantine.

It is essential that, when an identification mechanism is defined and applied, the appropriate response and follow-up of the identified cases are envisaged. Therefore, specific responsibilities and realistic response timelines should be assigned based on the resources allocated. This is crucial as it generally creates an expectation on the part of the person concerned once they are identified as a person in a vulnerable situation. Lack of response to that expectation, which may be in the form of receiving appropriate treatment, will most likely



be liable to worsen the person's mental state. Moreover, it may also lead to the staff involved in the identification feeling a sense of powerlessness.

Every person working in direct contact with applicants plays a valuable role in detecting and/or identifying vulnerability indicators and in communicating them to relevant staff. They need to be communicated to vulnerability focal points and/or to specialised staff (psychologists, social workers, doctors, lawyers, etc.) for further assessment or follow-up.

The standards and indicators presented in this section provide guidance on how to set up and implement an effective identification mechanism in the context of the asylum procedure and reception. In particular, they first focus on the definition of the mechanism, including the elements that constitute the identification mechanism. They follow covering the implementation aspect and the main characteristics of the identification (timely and continuous).

In this section, the standards and indicators can be adopted to both the context of the asylum procedure and reception.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators*, 2016:
 - Section 7. [Identification, assessment and response to special needs](#), Standards 34 – 36.
- *Guidance on Asylum Procedure: Operational standards and indicators*, 2019:
 - Section 9. Procedural guarantees for special needs, Standards 18 and 19.

Legal reference



RCD (recast)

Article 13 – Medical screening

Article 21 – General principle

Article 22 – Assessment of the special reception needs of vulnerable persons



APD (recast)

recital 29

Article 24 – Applicants in need of special procedural guarantees



Standards and indicators

Standard 3. Definition of the identification mechanism

Standard 3. The mechanism to identify applicants in a vulnerable situation is defined.

| Indicator | <p data-bbox="371 421 1374 524">Indicator 1. The identification mechanism outlines a non-exhaustive list of physical, psychosocial and environmental indicators to identify applicants in a vulnerable situation.</p> <ul data-bbox="421 546 1362 1854" style="list-style-type: none"><li data-bbox="421 546 1362 680">• Additional remarks: <i>the list of indicators should be comprehensive but not exhaustive. As a benchmark, the indicators listed in the EUAA’s Tool for the Identification of Persons with Special Needs should be considered.</i><ul data-bbox="469 703 1362 1509" style="list-style-type: none"><li data-bbox="469 703 1362 739">▪ <i>Personal factors are linked to age, gender and family status.</i><li data-bbox="469 748 1362 958">▪ <i>Physical indicators refer to visible measurements, manifestations and observations. These include, among others, physical appearance (e.g. physical signs, injuries, poor hygiene and personal care, etc.), health conditions (e.g. diagnosed illness, treatment and medications, etc.), disabilities, sexual and reproductive health and pregnancy.</i><li data-bbox="469 972 1362 1182">▪ <i>Psychosocial indicators include signs and symptoms linked to behaviour, mood, attitude, self-perception and relations with others. These include, among others, diagnosed disorders, impulsive or erratic behaviour, substance use, self-harm or thoughts of death and suicide, illogical or broken reasoning and thoughts, feeling of guilt, shame or distrust of others.</i><li data-bbox="469 1196 1362 1509">▪ <i>Environmental indicators refer to situations linked to the surroundings and external conditions and their effects on the applicant. These include, among others, specific circumstances linked to the country of origin (e.g. the applicant originating from a country where torture, violence and/or GBV is known to occur), to the country of transit (e.g. exposure to situations of conflict, torture, violence and THB) and to the host country (e.g. long asylum procedures, debt of the person and/or their family to finance the journey).</i><li data-bbox="421 1532 1362 1854">• <i>Taking into consideration these vulnerability indicators, certain categories are more likely to have special needs, for example those included in the non-exhaustive list of Article 21 RCD (recast):</i><p data-bbox="517 1644 1362 1854">[m]inors, unaccompanied minors, disabled people, elderly people, pregnant women, single parents with minor children, victims of human trafficking, persons with serious illnesses, persons with mental disorders and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, such as victims of female genital mutilation.</p> |
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Indicator 2. The identification mechanism outlines a specific list of indicators and the definition of cases that require an immediate assessment and response.

- **Additional remarks:** *if national law indicates categories that need to be prioritised, the mechanism needs to take those categories into account. Examples of priority categories includes applicants with serious health concerns (including serious mental health problems), pregnant/nursing women, victims of THB at immediate risk and unaccompanied and separated children. Applicants identified as priority cases based on these indicators may require special attention and need to be referred for immediate follow-up in the scenarios such as those listed below.*
 - *Immediate safety concerns. Contact law enforcement authorities immediately if you have acute concerns that the applicant may harm themselves or be a danger to people around them, including to their family members.*
 - *Acute medical needs. Call an ambulance immediately if there are acute needs related to the physical or mental health of the applicant.*
- *Response to these situations can also take the form of a referral to a specialised officer to avoid that less experienced staff might take the wrong actions. This will depend on the urgency and characteristics of the needs.*
- *For this indicator, see also [Standard 10. Referral to further assessment and/or adequate support](#).*

Indicator 3. The identification mechanism provides a clear definition of the roles and responsibilities of staff when indicators of vulnerability are detected.

- **Additional remarks:** *this includes the responsibility of the staff members and designated services to record indicators of vulnerability and identified vulnerabilities. For example, every staff member that comes into contact with an applicant and discovers or receives information that may be relevant in the identification are encouraged to note this information in the applicant's file (consideration should be given to confidentiality issues and personal data protection). This information will then be crucial to the staff member in charge of identification, assessment and referral (i.e. social workers or vulnerability experts).*
- *For this indicator, see also [Standard 13. Confidentiality and data protection](#).*

Indicator 4. The identification mechanism prescribes how applicants can inform authorities on their vulnerabilities and if necessary, how to provide medical documentation/attestation.

Indicator 5. The identification mechanism prescribes procedures and communication pathways on how representatives, lawyers and other actors can inform the authorities on vulnerabilities that an applicant may have.



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| | <p>Indicator 6. When a medical screening is provided by national law, the identification mechanism establishes how the outcome is taken into consideration in the identification, assessment and response to the special needs.</p> <ul style="list-style-type: none"> • Additional remarks: for this indicator, see also Standard 5. ‘Medical screening’ in the Guidance on Reception – Operational standards and indicators, 2024. |
| | <p>Indicator 7. The identification mechanism describes the conditions for the pre-identification of vulnerability.</p> <ul style="list-style-type: none"> • Additional remarks: the description of the conditions for a vulnerability pre-identification should include at least a description of the circumstances in which a pre-identification can be carried out (e.g. situations of high influx), guidance on the timeframes for the pre-identification and for a timely response, a non-exhaustive list of urgent cases that need immediate response and the training necessary for staff carrying out the vulnerability pre-identification. |

Standard 4. Implementation of the identification mechanism

Standard 4. The mechanism to identify applicants in a vulnerable situation is implemented effectively by relevant staff.

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| <p>Indicators</p> | <p>Indicator 1. Guidelines and tools to identify applicants in a vulnerable situation are disseminated among staff.</p> <ul style="list-style-type: none"> • Additional remarks: tools include checklists, report templates, questionnaires and a system for flagging cases according to severity. Tools are also used to report systematically on the outcome of the identification process. <p>Indicator 2. Criteria to identify priority cases are applied.</p> <ul style="list-style-type: none"> • Additional remarks: priority cases are given immediate access to the services needed. <p>Indicator 3. A confidential and private environment is created to allow the disclosure and identification of applicants in a vulnerable situation, including self-identification.</p> <ul style="list-style-type: none"> • Additional remarks: a private environment can be a separate office or room where other people cannot listen in or see who is inside or where special settings are in place. In addition, information regarding vulnerabilities and special needs is available and targets applicants in a vulnerable situation, for example in the form of posters or audio/written messages. |
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Indicator 4. Applicants are informed about the aim of the identification mechanism.

- **Additional remarks:** the aim is to identify vulnerabilities in order to provide further support and to implement special reception conditions and procedural guarantees.
- For this indicator, see also [Standard 1. Adapted information provision](#) and [Standard 13. Confidentiality and data protection](#).

Indicator 5. Capacity building, training and professional development sessions on how to identify applicants in a vulnerable situation are regularly provided to staff.

- **Additional remarks:** the identification mechanism should not only define a training curriculum, but to be effective, training sessions need to be provided and attended by the targeted staff.
- All staff coming into contact with applicants in a potentially vulnerable situation receive relevant training on the identification of applicants in a situation of vulnerability. These might include staff working in external health services, other service providers, security or cleaning personnel in the reception facilities.
- To measure this indicator, it is not enough to assess how many sessions are organised, but to review the level of attendance of participants targeted by the session. The purpose of professional development sessions is not to become specialised, but to gain more experience on a certain topic.
- For this indicator, see also [Standard 47. Training curriculum on vulnerability-related issues](#).

Indicator 6. Applicants and staff have access to interpreters to support in the identification process, including self-identification, if necessary.

Indicator 7. When a medical screening is provided by national law, a screening report is produced and taken into account in the identification mechanism.

- **Additional remarks:** for this indicator, see also [Standard 13. Confidentiality and data protection](#).

Good practice

The elaboration and use of questionnaires and checklists are established by mental health professionals together with asylum professionals. They aim to detect trauma and/or mental health problems at the earliest possible stage.

The gender of the staff involved in the identification process is appropriate to the circumstances of the applicant.



Standard 5. Continuous and timely identification

Standard 5. The identification of applicants in a vulnerable situation takes place in a continuous and timely manner.

Indicators

Indicator 1. The identification mechanism is applied as early as possible from the first moment of contact between the applicant and the authorities and other entities working in the asylum procedure and reception.

- **Additional remarks:** *each applicant has a first personal meeting/session with designated staff as soon as possible. This meeting, among other purposes, should aim to identify potential indicators of vulnerabilities with staff that is adequately qualified and trained to perform this task.*
- *In the asylum context, for example, first-contact officials are adequately trained on the identification of situations of vulnerability. They are aware of the identification mechanism and they know how to implement it.*
- *In the reception context, the first meeting takes place within a maximum of three days after arrival in a reception facility. It can take place during the intake interview, for instance. The relevant staff are those responsible for conducting the intake interview or those responsible for welcoming applicants according to Member State practice.*
- *It is crucial to underline that identification is a daily duty by all staff and requires care, observation and the proper sharing of information according to the relevant procedure.*

Indicator 2. The identification mechanism applies continuously and, in addition, regular intervals are defined for its verification.

- **Additional remarks:** *several elements can lead to the continuous implementation of the identification mechanism. These elements include, for example, adequate settings for meeting the applicants, adequate time devoted to observation of indicators, qualified and multi-disciplinary staff, periodic multi-disciplinary internal meetings, etc.*
- *In the asylum context, identification can happen throughout the whole asylum procedure: making, registering, lodging and the personal interview until the decision is issued.*
- *The same considerations are relevant for the reception context, where identification of vulnerable situations can happen at any point of the reception process which includes arrival in the reception system, stay and end of reception. In particular and when necessary, each applicant should have the possibility to have a personal meeting/session with a qualified staff member.*



Standard 6. Reporting system: record indicators of vulnerability and vulnerable situations

Standard 6. There is an effective system to record when vulnerability indicators are detected and applicants are identified as being in a vulnerable situation.

Indicators

Indicator 1. A document is produced when vulnerability indicators are detected and when an applicant is identified as being in a vulnerable situation.

- **Additional remarks:** *the format of the document recording the identification can include a non-exhaustive list of categories of persons considered more likely to be in a vulnerable situation. This non-exhaustive list can include the categories listed in Article 21 RCD (recast) as well as any additional profile considered more likely to have special needs.*
- *For this indicator, see also [Standard 13. Confidentiality and data protection](#).*

Indicator 2. The document where this information is recorded is available to the applicant.

Indicator 3. Where national law allows, information on the identification of applicants in a vulnerable situation is gathered and analysed.

- **Additional remarks:** *this indicator does not cover any personal data. It covers the collection and analysis of data for statistical purposes in order to improve allocation of resources and the response.*

Available EUAA resources



[Tool for the Identification of Persons with Special Needs](#)

Vulnerability Pre-identification Tool (forthcoming)



Assessment of special needs

In this guidance, assessment is intended as the evaluation of the situation of the applicants. The purpose of this evaluation is to identify any need for special reception conditions and/or procedural guarantees and to refer the applicant for the provision of adequate support. This is done in accordance with Article 22 RCD (recast) and recital 29 and Article 24 APD (recast).

The assessment should be considered as a follow-up to the identification of vulnerabilities. It evaluates characteristics or circumstances that make individuals more susceptible to harm or difficulties (e.g. age, gender, health conditions) as well as circumstances or conditions that can cause physical, psychological or emotional harm, such as violence, discrimination and threats to the applicant's well-being (harm and risks factors). It also evaluates factors that contribute to creating a supportive environment such as family set-up, the education of the person and their value system (protective factors) as well as the strategies and processes that the individual employs to manage stress, adversity or challenges (coping mechanisms).

It is important that the assessment is conducted on an individual level, in a timely and continuous manner and should be comprehensive to ensure an adequate response to meet the needs of each applicant. However, it should be taken into account that the initial assessment cannot be exhaustive. It is therefore important to run further assessments (follow-ups) at later stages in the procedure.

The way in which the assessment is carried out can vary depending on the context. In reception, the assessment usually takes the form of in-person meetings that are regularly scheduled with experienced staff according to the needs. In the asylum procedure, the assessment can be done by experienced staff when they encounter the applicant or based on the information already available in the case file of the applicant. When needed, the applicants can be referred for further assessments to specialised actors or other authorities.

In this section, the standards and indicators provide guidance on the assessment of special needs and illustrate how and in which circumstances the assessment should be conducted. The assessment serves to identify the areas of support the applicant needs in light of their situation. A coherent approach between assessment and response capacities should be put in place.



Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators*, 2016:
 - Section 7. [Identification, assessment and response to special needs](#), Standards 34 - 36.
- [Guidance on Asylum Procedure: Operational standards and indicators](#), 2019:
 - Section 9. Procedural guarantees for special needs, Standards 18 and 19.



Legal reference

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|  RCD (recast) |
| <p>Article 19 – Health care</p> <p>Article 22 – Assessment of the special reception needs of vulnerable persons</p> <p>Article 25 – Victims of torture and violence</p> |
|  APD (recast) |
| <p>recital 29</p> <p>Article 24 – Applicants in need of special procedural guarantees</p> |

Standards and indicators

Standard 7. Individual assessment

Standard 7. The assessment of the situation of the applicant is carried out to determine the need of special reception conditions and procedural guarantees and the area for individual response.

| Indicators | |
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| | <p>Indicator 1. A standardised assessment is carried out.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the assessment is a follow-up to the identification of applicants in a vulnerable situation. A standardised assessment ensures harmonisation in the response to the identified and assessed needs.</i> • <i>A standardised assessment can include the use of common tools (e.g. the EUAA's SNVA tool).</i> • <i>The assessment can take place in the form of a semi-structured interview, which includes predetermined questions and topics while allowing a certain degree of flexibility through open questions and follow-up questions that can and/or should be adapted according to the responses to the previous questions.</i> |
| | <p>Indicator 2. The roles and responsibilities of staff conducting the assessment are clearly defined.</p> <ul style="list-style-type: none"> • Additional remarks: <i>several actors can be involved in the assessment depending on the vulnerabilities that have been identified. These actors can include medical staff, psychologists and social workers.</i> |
| | <p>Indicator 3. Staff carrying out the assessment have received specific training and have specific expertise on how to assess special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>staff involved in vulnerability assessments have the necessary knowledge and skills to carry out the assessment with due regard for all the applicable rules and principles of their profession. The training courses provided include the relevant parts of the European Asylum Curriculum.</i> • <i>For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues.</i> |



Indicator 4. The assessment evaluates the following areas as a minimum: vulnerabilities, risks, harm factors as well as protective factors and coping mechanisms.

- **Additional remarks:** *during the assessment, needs related to physical and mental health are assessed. This includes needs emerging from the applicant's family situation and cultural background. The assessment of special needs should not solely be aimed at identifying vulnerabilities and assessing needs. It should also concentrate on the applicant's resources, objectives and protective factors. These resources, objectives and protective factors should be taken into account and further strengthened during the response.*
- *When the assessment is done by a case officer considering the information in the applicant's case file without further contact with the applicant, the assessment can be limited to the evaluation of whether the applicant can fully participate in the procedure.*

Indicator 5. The applicant receives written and oral information about the assessment.

- **Additional remarks:** *information includes the purpose, scope and use of the information recorded during the assessment as well as rights and responsibilities. It is important for applicants to have written information on the assessment to be able to understand how data of the assessment can be used further. The applicant should have the possibility to opt out or request the postponement of the assessment.*
- *This does not apply when the assessment is conducted by the case officer based on the information in the applicant's file without meeting with the applicant.*
- *For this indicator, see also [Standard 1. Adapted information provision](#) and [Standard 13. Confidentiality and data protection](#).*



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| | <p>Indicator 6. The assessment is always conducted in a language that the applicant understands or is reasonably supposed to understand.</p> <ul style="list-style-type: none"> • Additional remarks: <i>if the applicant does not understand the language spoken by the assessor, an interpreter should be provided.</i> • <i>This does not apply when the assessment is conducted by the case officer based on the information in the applicant's file without meeting with the applicant.</i> |
| | <p>Indicator 7. The applicant is informed about and given the possibility to request a specific gender of the assessor and interpreter.</p> <ul style="list-style-type: none"> • Additional remarks: <i>this does not apply when the assessment is conducted by the case officer based on the information in the applicant's file without meeting with the applicant.</i> |
| | <p>Indicator 8. The applicant is informed about and given the possibility to request to be accompanied by a support person and/or legal representative.</p> <ul style="list-style-type: none"> • Additional remarks: <i>careful consideration is paid to the appropriateness of the accompanying support person when a risk of domestic violence or female genital mutilation/cutting (FGM/C) has been identified.</i> • <i>This does not apply when the assessment is conducted by the case officer based on the information in the applicant's file without meeting with the applicant.</i> |
| | <p>Indicator 9. The assessment is conducted in a safe and confidential environment.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the assessment is conducted in a private space where confidentiality is assured. A private space can be a separate office or room where other people cannot listen in or see who is inside, or where special settings are in place. The applicant and the other participants, such as the interpreter and other support persons, are thoroughly informed about the principle of confidentiality.</i> • <i>This does not apply when the assessment is conducted by the case officer based on the information in the applicant's file without meeting with the applicant.</i> |



Standard 8. Periodic and timely assessment

Standard 8. The assessment is conducted in a timely manner and periodic follow-up of the case is established.

| Indicators | |
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| | <p>Indicator 1. The assessment takes place as soon as vulnerabilities are identified.</p> <ul style="list-style-type: none">• Additional remarks: <i>the first assessment report should be provided within a maximum of 30 days from the making of the application. If there are safety and severe health issues, the assessment and follow-up need to be carried out immediately.</i> |
| | <p>Indicator 2. Follow-ups are regularly scheduled according to the needs of the applicant.</p> <ul style="list-style-type: none">• Additional remarks: <i>a case manager ensures follow-up depending on the severity and urgency of the case and keeps the record of the action taken in the applicant's file.</i> |

Standard 9. Reporting system: record the assessment of special needs

Standard 9. There is an effective system to record the assessment of the special needs of applicants in a vulnerable situation.

| Indicators | |
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| | <p>Indicator 1. The conclusions of the assessment are recorded in the applicant's file.</p> <ul style="list-style-type: none">• Additional remarks: <i>recording the information in the applicant's file ensures the follow-up of the case and monitoring of the evolving needs. It includes observations regarding the situation of the applicant and their special needs as well as the measures that have been identified to respond to them and the authorities responsible for such a response. The applicant can request access to the file and therefore it needs to be formulated in a clear and appropriate manner.</i> |
| | <p>Indicator 2. The document where this information is recorded is available to the applicant.</p> |
| | <p>Indicator 3. Where national law allows, information on the assessment of the needs of applicants in a vulnerable situation is gathered and analysed.</p> <ul style="list-style-type: none">• Additional remarks: <i>this information does not include any personal data. It can include information about the support needed, the urgency of the referral, the type of special reception conditions and procedural safeguards implemented, etc. This indicator covers the collection and analysis of data for statistical purposes to improve the allocation of resources and response.</i> |



Available EUAA resources



[*Special Needs and Vulnerability Assessment Tool*](#)

Referral and coordination

To ensure adequate response and follow-up to the needs of an applicant in a vulnerable situation, a referral to other authorities, organisations or support professionals can be activated. This is done after the applicant is informed and has given their consent or, in the case of children, taking into account the principle of the best interests of the child.

Referral to adequate support and/or further assessment can imply the need to involve other actors and services beyond the scope of the asylum and reception authorities, for example medical support, psychological support and other legal pathways.

Coordination is essential to ensure that applicants receive the assistance that they need. Therefore, mechanisms should be set up together with standard procedures to address the needs of applicants and to ensure follow-up. Specific mechanisms can be developed to support the needs of different groups who might find themselves in vulnerable situations (e.g. victims of THB, GBV).

For an effective implementation of the referral and coordination mechanisms, clear lines of communication between the different stakeholders involved in the case management of vulnerable cases should be drafted and communicated to all staff. It is important that staff is aware of all the people involved in the management of vulnerable cases to proceed with the provision of adequate support in an efficient manner.

In this section, the standards and indicators provide guidance on an efficient set up of referral procedures to adequately support for applicants in a vulnerable situation.



Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [*Guidance on Asylum Procedure: Operational standards and indicators*](#), 2019:
 - Section 13. Examination of the application, Standards 28–37.
- [*Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators*](#), 2019:
 - Section 1. Information, participation and representation of unaccompanied children, Standard 4.



Legal reference

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|  RCD (recast) |
| <p>Article 2(j) – Definitions</p> <p>Article 22 – Assessment of the special reception needs of vulnerable persons</p> <p>Article 23 – Minors</p> <p>Article 24 – Unaccompanied minors</p> <p>Article 25 – Victims of torture and violence</p> |
|  APD (recast) |
| <p>Recital 29</p> <p>Article 24 – Applicants in need of special procedural guarantees</p> <p>Article 25 – Guarantees for unaccompanied minors</p> |

Standards and indicators

Standard 10. Referral to further assessment and/or adequate support

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| <p>Standard 10. Applicants in a vulnerable situation and with special needs are referred for further assessment and/or adequate support.</p> | |
| <p>Indicators</p> | <p>Indicator 1. If necessary and with the consent of the applicant, the applicant is referred to the relevant authorities and/or available assistance.</p> <ul style="list-style-type: none"> • Additional remarks: <i>if information about the applicant is communicated to relevant actors to ensure adequate support for the applicant, the shared information is limited in scope.</i> • <i>The scope is limited to the information necessary for these parties to carry out their functions related to the special needs of the applicant. Information is shared on a need-to-know basis and with the consent of the applicant, following confidentiality rules. There are cases where sharing information might not be relevant for the purpose of providing support but it is required by law.</i> <p>Indicator 2. If applicable, the applicant is referred to the national referral mechanisms and procedure according to their needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>for example in cases of potential victims of THB, the applicant is referred to the national referral mechanism for victims of THB by strictly observing the national guidelines.</i> <p>Indicator 3. A workflow is in place that guarantees the appointment of a representative for applicants without legal capacity in a timely manner when national law requires it.</p> <ul style="list-style-type: none"> • Additional remarks: <i>indications regarding the applicant’s capability to act and their ability to hold and exercise their rights, which lead to serious doubts concerning the legal capacity, require immediate</i> |



clarification as to whether the process to assess their legal capacity has been initiated or whether it should be initiated through a referral to the relevant authorities. This should be done according to the national procedure. This can arise, for example, in the case of intellectual disabilities or other health-related conditions, such as serious mental illness. Measures should be taken as soon as possible to ensure that a representative is appointed by a competent body.

- *The appointment of a representative to assist and represent an unaccompanied child should happen as soon as possible but no later than 15 working days after the application for international protection was made. The representative ensures the best interests of the child and exercises legal capacity for the child, when necessary.*

Indicator 4. Immediate follow-up and special attention are provided to urgent cases.

- **Additional remarks:** *for example, in cases of immediate safety concerns, including for victims of THB and GBV, acute medical needs and acute child protection needs.*

Indicator 5. Logistical support is provided to the applicant in a vulnerable situation to facilitate the immediate next steps of the procedure.

- **Additional remarks:** *this includes arranging a secure space for them to wait for the relevant authorities to arrive, a private space to receive urgent medical support, transportation as well as support with administrative procedures.*

Indicator 6. Up-to-date information on the authorities or available services to which an applicant can be referred for further assessment and/or adequate support is available and staff are informed.

- **Additional remarks:** *the awareness of the availability of services in the territory depends on the competence of the authority. This is also relevant to effectively set up coordination mechanisms and communication channels with authorities and service providers. Therefore, referral pathways should also be available and staff are informed.*
- *For this indicator, see also [Standard 2. Information provision on the support provided by other actors](#) and [Standard 11. Exchange of information between authorities](#).*

Good practice

When registering their application, every applicant fills in a formalised questionnaire regarding the vulnerabilities and special needs they may have during the procedure. This questionnaire is shared with the whole case file to the determining authorities. The determining authority must take these elements into account.

Reporting documents are available in both the determining authority and the reception centres. These documents can be filled in and shared on a need-to-know basis and with the



consent of the applicant when vulnerabilities are detected so as to inform the other authority/entity.

Good practice

For potential victims of THB, the case officer contacts a specialised counselling centre at the end of the personal interview, with the applicant's consent. These specialised counselling centres provide psychological care and support for victims of THB and can arrange placement in a safe shelter, if necessary. The case officer can also inform the residence facility.

Standard 11. Exchange of information between authorities

Standard 11. A mechanism defines how to exchange information on individual cases between the responsible authorities or entities involved in the asylum procedure and in reception.

Indicators

Indicator 1. There are guidelines on how information is exchanged between the different authorities and other entities involved in the asylum procedure and in reception.

- **Additional remarks:** *the guidelines include how information is shared and how to identify the appropriate legal basis for the processing of the personal data.*

Good practice

The drafting of a document by an inter-ministerial working group including several actors, such as Ministry of Interior, the Ministry of Health, European agencies, international organisations and civil society organisations. The document aims to provide standardised guidelines for each actor involved in the asylum system at national level, tackling how to identify, refer and respond to specific needs. The document, which aims to strengthen the governance system, provides stakeholders with guidance on uniform procedures to be adopted at all stages of reception and operational instructions to facilitate communication among the actors involved.



Standard 12. Coordination between authorities and service providers

Standard 12. A mechanism defines coordination and cooperation between authorities and service providers.

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| Indicators | <p>Indicator 1. There are guidelines on how information on individual cases is exchanged between the different authorities and service providers.</p> <ul style="list-style-type: none"> • Additional remarks: <i>information is shared on a need-to-know basis and with the consent of the applicant. Service providers include those tasked to provide adequate support to the applicant in order to address their needs.</i> |
| | <p>Indicator 2. Collaboration agreements are established between the competent authority and the service providers to allow referral to specialised support if needed.</p> <ul style="list-style-type: none"> • Additional remarks: <i>in line with the national system, Member States can either appoint their own staff to provide specialised support or establish collaboration agreements with external organisations to allow referrals, or both. The agreements can be bilateral or multi-lateral and they can coexist, depending on the need to address. Service providers can include CSOs and international organisations.</i> |
| | <p>Indicator 3. Multidisciplinary meetings are organised on a regular basis with relevant service providers to keep up to date on needs.</p> |

Available EUAA resources



Referral Toolkit (forthcoming)



Confidentiality

The principle of confidentiality underlies the whole asylum procedure. Information provided by the applicant is not disclosed to any party beyond the competent authorities without the permission of the applicant ⁽⁶⁶⁾. In practice it means that data provided by the applicant is not shared with anyone who does not have the right to access it, that the case management system is ruled by appropriate data protection rules and that the facilities where the applicant is heard ensure adequate privacy.

It is important to clarify that confidentiality can be limited when security issues are identified and there is a need to contact other service providers for assistance (e.g. healthcare workers) or due to a legal requirement to report crimes.

The processing of the applicant's data must be lawful. This requires that every processing operation involving personal data has a legal basis. There are six legal grounds listed in Article 6(1) GDPR for making the processing of personal data lawful. These grounds include the consent of the data subject to the processing for one or more specific purposes as well as processing that is necessary for the performance of a task carried out in the public interest or in the exercise of public authority, or when it protects the vital interests of the data subject ⁽⁶⁷⁾.

For consent to be valid it must be freely given, specific, informed and unambiguous (Article 4(11) GDPR). In the context of processing of personal data concerning health, an additional requirement is to have explicit consent (Article 9(2), point (a) GDPR).

In this section, the standards and indicators provide guidance on the essential aspects related to meeting the confidentiality and data protection requirements when handling information related to applicants in a vulnerable situation and in need of special procedural guarantees and reception conditions. They are applicable to identification, assessment and response mechanisms.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on Asylum Procedure: Operational standards and indicators](#), 2019:
 - Section 13. Examination of the application, Standard 37.

Legal reference



GDPR

Article 5 – Principles relating to processing of personal data

Article 6 – Lawfulness of processing

Article 7 – Conditions for consent

⁽⁶⁶⁾ Article 48 APD (recast) and Articles 18(7), 24(4) and 25(2) RCD (recast).

⁽⁶⁷⁾ In the context of the present guidance, the term 'data subject' is meant to be understood as referring to an applicant.



GDPR

Article 8 – Conditions applicable to child’s consent in relation to information society services

Article 9 – Processing of special categories of personal data

Article 10 – Processing of personal data relating to criminal convictions and offences

Article 11 – Processing which does not require identification

Standards and indicators

Standard 13. Confidentiality and data protection

Standard 13. Confidentiality and data protection requirements of all recorded, processed, stored and communicated data related to the applicant are respected.

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| Indicators | Indicator 1. Information regarding applicant’s special needs is recorded, processed, stored and communicated with the consent of the applicant, unless national law provides for cases in which reporting is compulsory. |
| | Indicator 2. The applicant receives written and oral information on: <ul style="list-style-type: none"> • the objective of recording, processing, storing and communicating personal data and data concerning health; • potential recipients of personal data and data concerning health; • how long the data will be kept; • how to access data and rectify it; • how to delete data; • how to withdraw consent at any time. |
| | Indicator 3. Appropriate safeguards are put in place and applied regarding the confidential handling of information about special needs. |

Good practice

A thorough data protection impact assessment on the collection, processing, storing and communication of personal data and medical information is conducted.

In gender-specific cases, communication to the competent counselling centre may be required. This could be done with the aim of accommodating the applicant in separate accommodation due to their gender identity, for example. Otherwise, it could be with the aim of accommodating the applicant with persons of a certain gender, if the person concerned is transsexual or intersexual. This information may only be disclosed with the consent of the applicant.

In certain circumstances, applicants do not want to be accommodated separately so that they do not stand out as ‘different’ in the reception centre. Forced or involuntary exposure of an applicant’s sexual identity must always be avoided.



Standards and indicators on vulnerability specific to reception

Prevention

In this guidance, prevention refers to activities aiming to stop the emergence of new situations of vulnerability, the deterioration of existing ones and reducing the exposure to risks. These activities can be carried out throughout the entire asylum and reception pathways with the aim of improving safety and security and promoting the resilience of applicants. The term security, as referred to in this section, relates to the protection from deliberate threats or acts of violence. The term safety relates to accidental hazards such as road accidents, fire, diseases and natural disasters. Prevention is transversal. It inherently strengthens the different processes of the identification, assessment and response that are at the core of this guidance.

This approach has been further developed when applied to preventing GBV in the context of humanitarian intervention where a distinction is made between prevention and mitigation. Prevention generally refers to action to stop GBV from first occurring (e.g. scaling up activities that promote gender equality or working with communities to address practices that contribute to GBV). Mitigation refers to reducing the risk of exposure to GBV (e.g. ensuring that sufficient lighting and security patrols are in place from the onset of establishing displacement camps)⁽⁶⁸⁾. Article 18(4) RCD (recast) also directly refers to the need of taking ‘appropriate measures to prevent assault and gender-based violence, including sexual assault and harassment, within the premises and accommodation centres’.

In this section, the standards and indicators take into consideration the situation of all applicants. The implementation of prevention measures would avoid that applicants who were not in a situation of vulnerability when they arrived in the host country develop special needs due to factors and risks related to the stay in the host country.

The implementation of prevention measures throughout the reception pathway can:

- facilitate the identification and self-identification of applicants in a situation of vulnerability avoiding that they remain unnoticed;
- limit the extent to which applicants develop new or additional special needs that would require a targeted response;
- avoid that the applicant’s vulnerable situation deteriorates.

⁽⁶⁸⁾ IASC, [IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action](#), 28 August 2015; UNHCR, [Gender-based Violence](#), 2023; UNHCR, [UNHCR Policy on the Prevention of, Risk Mitigation and Response to Gender-based Violence](#), UNHCR/HCP/2020/01, 2020; European Commission Directorate-General for Humanitarian Aid and Civil Protection, [Thematic Policy No 8. Humanitarian Protection: Improving protection outcomes to reduce the risks for people in humanitarian crises](#), April 2017.





Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators, 2016:*
 - Section 1.4. [Security](#), Standard 11.

Legal reference



RCD (recast)

Article 18(4) – Modalities for material reception conditions

Standards and indicators

Standard 14. Measures to prevent and mitigate the emergence and/or aggravation of vulnerabilities

Standard 14. Measures to prevent and mitigate the emergence and/or aggravation of vulnerabilities are implemented.

| Indicators | |
|------------|---|
| | <p>Indicator 1. Adequate safety and security measures for applicants in a vulnerable situation are in place.</p> <ul style="list-style-type: none"> • Additional remarks: <i>for example, these measures can address:</i> <ul style="list-style-type: none"> ▪ <i>the location of the facility, which should have safe access, be well lit and should not be in an isolated location;</i> ▪ <i>the creation of safe areas for women, children and persons with diverse sexual orientation, gender identity and expression, and sex characteristics, which are run by experienced staff or by the applicants in cooperation with the staff.</i> • <i>These measures should be designed taking into consideration all information available, including the information coming from the complaint and response mechanism.</i> |
| | <p>Indicator 2. Health prevention measures are implemented to prevent the emergence of vulnerability or the deterioration of the situation of vulnerability.</p> <ul style="list-style-type: none"> • Additional remarks: <i>health prevention measures can include the provision of relevant and adapted information to ensure health literacy of applicants. This information can cover topics such as personal hygiene, vaccines, family planning, healthcare services, contagious diseases, sexual and reproductive health, etc.</i> • <i>In addition, the reception facility should follow relevant national or regional medical guidelines and health protocols related to prevention and response in the event of an outbreak of a contagious disease.</i> |



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| | <p>Indicator 3. Measures to prevent the emergence and/or the aggravation of mental health-related issues are implemented.</p> <ul style="list-style-type: none"> • Additional remarks: <i>psycho-educational workshops or activities are organised on a regular basis by experienced personnel for all applicants according to their age, gender or any other significant condition (e.g. awareness of different feelings and how to cope with them, stress management techniques, etc).</i> • <i>In some circumstances, these activities might not be sufficient. The applicant may need professional support and to be referred to specialised services. Staff should pursue dedicated efforts to reach applicants experiencing mental health issues and ensure their inclusion in the abovementioned activities.</i> |
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Standard 15. Support the applicant’s well-being

Standard 15. The general well-being of all applicants, in particular those in a vulnerable situation, is supported.

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| Indicators | <p>Indicator 1. Resilience-building, leisure and group activities are regularly offered and promoted to all applicants, particularly for those in a vulnerable situation.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the availability of tailored spaces and activities is a crosscutting feature to facilitate the support of all applicants and particularly those with special needs. These spaces and activities can be used to raise awareness on different topics related to well-being, empowerment, strengthen resilience, give structure to everyday life and provide educational opportunities. Importantly, they can also be an opportunity for the early identification of special needs.</i> |
| | <p>Indicator 2. Community engagement activities take place, facilitated by specialised or trained personnel.</p> |
| | <p>Indicator 3. Appropriate common areas for indoor and outdoor activities are provided according to the needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>common areas should be culturally sensitive and should take into consideration gender, age and diversity.</i> |



Good practice

When activities are led by CSOs and charity organisations, a reporting system is available. This strengthens the communication with reception staff and allows for proper actions when vulnerabilities are detected during these activities. All CSOs and charity organisations working with applicants for international protection are aware of referral pathways. They are able to appropriately and systematically refer applicants in a vulnerable situation to ensure their access to appropriate services.

There are many different activities to enhance resilience according to gender, age and special needs. For example, community engagement personnel can run workshops with men on topics such as GBV; female staff can organise workshops to raise awareness on GBV for female applicants. The presence of a female facilitator and interpreter might also be needed for the facilitation of other targeted sessions (e.g. group activities for women such as yoga and other relaxation techniques).

Other examples of hands-on activities include:

- Creating symbolic 'self-portraits'. Every applicant is asked to present themselves. They can include aspects such as their hobbies, dreams, personal motto, things that make them feel proud of themselves, personal achievements or aspects they would like to improve.
- A personal 'security map'. Every applicant is asked to create a map with places where they feel safe. This could include places in the facility or otherwise people that they can ask for help or reach out to if they feel unsafe.

Available EUAA resources



[*A set of self-help tools for parents, children and peer support*](#)

[*Psychological First Aid: A brief guide for those working in the first line*](#)

[*Instructions for professionals on how to use the animation to educate on the concept of PFA*](#)

Participation and engagement in areas that affect the daily life in the reception facility of applicants in a vulnerable situation

In line with Article 18(8) RCD (recast), reception authorities are strongly encouraged to facilitate the participation and engagement of all applicants, including children, in the management of material and non-material aspects of reception conditions.

While recognising the optional nature of the RCD (recast) provision, Member States have put in place several practices to give shape to the participatory approach in areas that affect the applicant's daily life in the reception facilities. Participation can, for example, take the form of advisory boards or councils (e.g. composed of community representatives elected by the



residents), to contribute to specific aspects linked to the residence in housing facilities. This can include the composition of meals or the calendar of activities as well as allocation of resources and the management of the facility.

This section focuses on two different elements: to enable applicants to express their opinions and views and to actively engage in the facility activities. These elements can increase the applicant's sense of ownership in the process by giving them the opportunity to constructively propose improvements or changes. In this sense, participation and engagement differs from lodging a complaint, which could be considered as an expression of dissatisfaction only.

Participation and engagement play important functions as they prevent a possible deterioration of the reception environment caused by a sense of frustration and lack of ownership. At the same time, they encourage and empower applicants to become active actors in proposing and finding solutions. This can lead, in turn, to create a safer reception environment for all.

Persons in a vulnerable situation may experience barriers to participating on an equal footing to others. This could mean that their views and needs are not considered to the same extent, producing potentially exclusionary effects. The voice and opinions of persons in vulnerable situations are often the most difficult to include in participation. Potential barriers range from not being able to voice your opinion due to illiteracy or physical handicaps, including hearing or speech impairments, to participatory activities being scheduled at a time unsuitable to applicants in a vulnerable position, such as single parents.

In this section, standards and indicators provide guidance on how means provided for applicants to voice their opinions are tailored to the needs and circumstances of different profiles of applicants, including those with special needs.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on Reception: Operational standards and indicators](#), 2024.
 - Section 11. Applicants' participation and engagement in areas that affect their daily life in the reception facility, Standard 26.

Legal reference

 **RCD (recast)**

Article 18(8) – Modalities for material reception conditions



Standards and indicators

Standard 16. Involvement of applicants in a vulnerable situation

Standard 16. Necessary procedures are in place to ensure that applicants in a vulnerable situation are regularly involved in areas that affect their daily life in the reception facility.

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| <p>Indicators</p> | <p>Indicator 1. Actions are taken to ensure that applicants in a vulnerable situation are enabled to voice their views on a regular basis.</p> <ul style="list-style-type: none"> • Additional remarks: applicants are enabled to voice their opinions and views through different means. This could be done through: <ul style="list-style-type: none"> ▪ surveys or questionnaires on proposals to improve everyday life in the reception facility (e.g. on food, services, activities); ▪ creation of an advisory group inclusive and representative of applicants with different profiles (e.g. nationality, age and gender); ▪ group discussions (e.g. focus group discussions with members that are part of specific groups); ▪ meetings between the representatives of the residents and site managers / all actors. • The management team should consider input from applicants to the extent possible and provide feedback on if and how it has been taken into account. These actions can be carried out by the facility managers on their own initiative and/or upon specific requests of applicants (e.g. as a response to complaints). |
| | <p>Indicator 2. All means provided to applicants to voice their views ensure the inclusion and representation of different profiles of applicants.</p> <ul style="list-style-type: none"> • Additional remarks: for example, if surveys are carried out, it needs to be ensured that they reach applicants in a vulnerable situation to collect their feedback. When applicants are grouped together to participate in activities, applicants representing different profiles and needs are invited to join. |



| | |
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| | <p>Indicator 3. The means used to ensure that applicants voice their views are tailored to special needs and circumstances.</p> <ul style="list-style-type: none"> • Additional remarks: <i>considerations related to age, gender and diversity are taken into account to tailor the means to the needs of applicants. Modalities to ensure the participation of applicants with special needs include, for example, having a sign language interpreter available to explain what an applicant with a hearing and/or speech impairment would like to say, or the need to find ways to adapt the written surveys for residents who are illiterate or have a low literacy level.</i> • <i>Depending on the activities organised to enable applicants to voice their opinions, additional time and flexibility might be granted according to the needs of the applicants. It is important that applicants with special needs are invited to participate in these activities and that they feel safe and secure in expressing their views.</i> |
| | <p>Indicator 4. Actions are taken to ensure that applicants in a vulnerable situation engage in activities carried out in the reception facility.</p> <ul style="list-style-type: none"> • Additional remarks: <i>applicants are enabled to engage on a voluntary basis in the reception facility activities, such as cooking or the organisation of leisure and group activities.</i> |
| <p>Good practice</p> <ul style="list-style-type: none"> • Staff in the reception facility is assigned the responsibility of facilitating the involvement of persons in a vulnerable situation on areas that affect their daily life in the centre. • An IT application that can be downloaded on an applicant’s phone or accessed through electronic devices is developed to collect feedback from the applicants. • An advisory group representing different profiles is created. For example, the creation of youth councils is an opportunity to create a communication channel between children and mentors. | |

Available EUAA resources



EUAA–OECD, [Surveys on Arriving Migrants from Ukraine](#)

Though not specifically designed for applicants for international protection, the EUAA-OECD (Organisation for Economic Co-operation and Development) Surveys of Arriving Migrants from Ukraine is an example of a mechanism that allows applicants to voice their views in a voluntary and anonymous manner. See for example [Tell Us Your Story \(2023\)](#).



Complaint and response mechanism

In this section, the term complaint refers to an expression of dissatisfaction or a specific grievance that may be related to any aspect of the applicant's daily life in the reception facility, falling within the competences of the reception authorities, including access to services, material reception conditions, collective life and treatment by staff ⁽⁶⁹⁾.

A complaint and its follow-up should be seen as an opportunity to improve the reception conditions at individual level (applicant), at local level (reception facility) and at national level (reception system). From this perspective, the complaint and response mechanism is to be considered an integral part of a quality system (in line with Article 28 RCD (recast)) as well as a way to promote the well-being of applicants and the respect of their rights. Indeed, a high number of complaints is not necessarily to be interpreted in a negative way. It can be also considered as an indicator of a well-functioning and participatory system in which applicants' voices are heard and their concerns taken into account. In addition, an efficient complaint and response mechanism could strengthen the accountability of the reception agencies/authorities towards applicants, including applicants of international protection.

The possibility to submit a complaint is only meaningful if it is carefully analysed, investigated and a response is provided. Complaints should be handled in an objective way and justifiable feedback should be provided to the applicant who made the complaint within a reasonable period of time.

Developing a complaint and response mechanism needs to take into account several elements, including informing residents (as well as reception officers) about its existence and the modalities to activate it, defining who is responsible to manage complaints and to follow them up as well as defining an appropriate time for a response and putting in place a recording and reporting system.

This section focuses on a complaint and response mechanism at the level of reception facilities. However, Member States should also grant access to such a mechanism to applicants entitled to material reception conditions who are not accommodated in reception facilities (such as when housing is provided through financial allowance).

In this section, the standards and indicators provide guidance on ensuring that the complaint and response mechanisms are also made accessible to applicants in a situation of vulnerability by putting specific arrangements in place and informing applicants about the existence of such mechanisms.

⁽⁶⁹⁾ The focus of this guidance is on applicants for international protection. However, this section can extensively refer to 'residents', considering that, on the basis of the principle of non-discrimination, the complaint and response mechanism is applicable and should be accessible by all those accommodated in the reception facility, irrespective of their status.



Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on Reception: Operational standards and indicators](#), 2024.
 - Section 10. Complaint and response mechanism, Standards 22–25.

Legal reference

 RCD (recast)

Article 28 – Guidance, monitoring and control system

Standards and indicators

Standard 17. Accessibility to the complaint and response mechanism

Standard 17. The complaint and response mechanism is accessible to applicants in a vulnerable situation.

| | |
|-------------------|---|
| Indicators | <p>Indicator 1. Specific arrangements ensure that applicants in a situation of vulnerability can lodge a complaint.</p> <ul style="list-style-type: none"> • Additional remarks: <i>modalities are tailored to specific needs, for example applicants that are illiterate or applicants with disabilities.</i> |
| | <p>Indicator 2. Information materials and sessions on the existence and functioning of the complaint mechanism takes into consideration age, gender and any other characteristics or vulnerability of the applicant.</p> <ul style="list-style-type: none"> • Additional remarks: <i>staff in the reception facility are responsible for ensuring adequate information about the complaint mechanism regularly reaches applicants in a situation of vulnerability.</i> • <i>For this indicator, see also Standard 1. Adapted information provision.</i> |
| | <p>Indicator 3. Legal or other representatives are adequately informed on the complaint and response mechanism, according to national law.</p> |

Good practice

- A specific focal point on vulnerability support and facilitate access to the mechanism.
- When the complaint and response mechanism needs to be accessible to children, information is provided with a leaflet available in multiple languages and with infographics. The template for complaints is drafted in a child-friendly manner.
- Complement existing complaint and response mechanisms with user-friendly IT applications or online forms to make access to the complaint mechanism easier.



Standard 18. Response to the complaints dealing with situation of increased or heightened risk of vulnerability

Standard 18. Complaints dealing with situations of increased vulnerability or exposure to the heightened risk of vulnerability are examined and responded to with priority.

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| Indicators | <p>Indicator 1. Criteria are in place to define priority situations.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the criteria define situations to prioritise, for example when an immediate intervention is required to stop a situation of imminent harm/risk as well as a clear timeframe for the response.</i> |
| | <p>Indicator 2. Staff are aware of which cases need to be prioritised.</p> <ul style="list-style-type: none"> • Additional remarks: <i>staff receive information about the complaints and response mechanisms and the priority criteria on a regular basis.</i> |
| <p>Good practice</p> <p>A focal point on vulnerability explains to the applicant in an appropriate manner the outcome and follow-up of the complaint.</p> | |

Standard 19. Information on complaints and responses that deal with vulnerabilities and special needs

Standard 19. Information on complaints and responses that deal with vulnerabilities and special needs are available.

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|-------------------|---|
| Indicators | <p>Indicator 1. Disaggregated information on complaints and responses that deal with vulnerabilities and special needs are recorded and collected.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the purpose is to identify trends and improve services. This information can cover aspects related to safety and security, aspects related to risk of increased vulnerabilities and aspects related to special needs that were not timely addressed. This information does not include personal data.</i> • <i>For this indicator, see also Standard 14. Measures to prevent and mitigate the emergence and/or aggravation of vulnerabilities.</i> |
| | <p>Good practice</p> <ul style="list-style-type: none"> • The database allows for the running of anonymous reports to analyse weak aspects of the reception facility or repeated themes. • Information on complaints and the response is publicly available. |



Special reception conditions

General reception conditions are often inadequate for addressing special reception needs. Therefore, reception conditions need to be adapted to respond adequately. A tailored response strategy is often necessary.

The range of response actions to special needs is potentially as wide as the different topics covered by the reception conditions. It can include material conditions (such as housing, food, clothing and other non-food items, and the daily expenses allowance) as well as service provision (such as healthcare and social counselling). Although the EUAA's 2016 guidance on reception conditions includes general standards and indicators that specify that special needs should be taken into account in several areas, it does not systematically explain in detail how Member States should adequately respond the special needs. This guidance further elaborates how this can be done.

Once a vulnerability or special need is identified, specific measures linked to accommodation may include moving the person internally to an individual room or to a room better suited to their needs; the immediate transfer of the person to a protected shelter (e.g. in the case of potential victims of THB); increased surveillance rounds for the protection of the person; and the provision of sanitary facilities close to the room for applicants in a vulnerable situation (such as single women).

In this section, the standards and indicators are not organised according to specific categories considered more vulnerable. The focus is a needs-based approach, paying particular attention to not stigmatise applicants with special needs as a separate group.

Member States require a general mechanism to ensure that different identified special reception needs are responded in a timely manner.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators*, 2016:
 - Section 1. [Housing](#), Standards 1–10.
 - Section 5. [Healthcare](#), Standards 28–29.
 - Section 7. [Identification, assessment and response to special needs](#), Standards 34–38.
- *[Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators](#)*, 2018:
 - Section 7. Education – Preparatory classes and vocational training, Standards 31–32.
- *[Guidance on Reception: Operational standards and indicators](#)*, 2024.
 - Section 9. Reduction or withdrawal of material reception conditions, Standard 19.
 - Section 13. Data collection, Standards 29–30.



Legal reference

RCD (recast)

Article 22(1) – Assessment of the special reception needs of vulnerable persons

Article 23(1) – Minors

Article 24(1) – Unaccompanied minors

Article 25(1) – Victims of torture and violence

Standards and indicators

Standard 20. Effective and timely response mechanism.

Standard 20. An effective mechanism to respond to special needs in a timely manner is in place.

Indicators

Indicator 1. Written guidelines on how to respond to the most common special needs are provided to all staff and regularly updated.

- **Additional remarks:** *guidelines include, at a minimum, the responsibilities of staff to take adequate and prompt action; the timeline to respond to special needs after the assessment, in accordance with the urgency of the needs; and the list of available service providers (e.g. for GBV and THB cases).*

Indicator 2. A system estimates and anticipates the resources needed to respond to special needs.

- **Additional remarks:** *in line with the national system, Member States designate specific budget and funding to respond to special needs. Monitoring of budgetary expenses ensures reliable future estimations.*
- *For this indicator, see also [Standard 45. Staff capacity to provide support to applicants in a vulnerable situation](#).*

Indicator 3. The mechanism to respond to special needs is regularly evaluated and updated accordingly.

- **Additional remarks:** *an overview of the responses to persons with special needs (such as the number of transfers or referrals to expert organisations) is available.*
- *The evaluation can be done regarding the collaboration with specific service providers. The evaluation could be done by rolling out a survey with applicants or holding meetings with all service providers involved in the response.*
- *The evaluation can be done internally through an internal audit.*

Good practice

A vulnerability plan that provides a comprehensive overview of the general approach to respond to special needs is developed, including budgetary estimations and financial commitments.



Standard 21. Multidisciplinary case-management to respond to special reception needs**Standard 21. Special reception needs are responded to in a holistic manner.**

| | |
|----------------------|--|
| Indicator | <p>Indicator 1. A case manager is appointed to ensure follow-up and that a consistent approach is used in the response.</p> <ul style="list-style-type: none">• Additional remarks: <i>the number of cases allocated to each case manager needs to take into account the complexity of the cases as well as the circumstances of the applicant, including age.</i> <p>Indicator 2. Staff members with specialised expertise are available for consultation by the case manager when needed to ensure that the response covers all the relevant areas.</p> <ul style="list-style-type: none">• Additional remarks: <i>relevant areas can include housing, health, education, security, medical, legal and social. Information is shared on a need-to-know basis and with the consent of the applicant who should be aware with whom the information is shared and why.</i>• <i>When needed, the experts should meet regularly to ensure follow-up of specific cases. Where relevant, specialised actors are invited to join multidisciplinary meetings and are involved in the management of special needs.</i>• <i>For this indicator, see also Standard 13. Confidentiality and data protection.</i> <p>Indicator 3. A document covering all the relevant areas of response is produced.</p> <ul style="list-style-type: none">• Additional remarks: <i>the document could be an individual file, a personal care plan, etc. An updated document covering all response areas ensures monitoring and follow-up of the applicant's situation.</i> |
| Good practice | Multidisciplinary meetings on individual cases are held at least every month. |



Standard 22. Consideration of special needs in the (re)allocation process

Standard 22. The (re)allocation process takes into account the needs of applicants.

| Indicators | |
|------------|---|
| | <p>Indicator 1. Data on the availability of reception places suitable for applicants with special needs is available at central or local level.</p> <ul style="list-style-type: none"> • Additional remarks: data on reception facilities should include information on the number, location and typology of accommodation facilities, as well as indication on the target group that can be accommodated therein (e.g. families, single men, single women, unaccompanied children) according to national law. |
| | <p>Indicator 2. Guidelines and criteria are in place to determine the most suitable accommodation in respect of the special needs and individual situation.</p> <ul style="list-style-type: none"> • Additional remarks: in addition to age and gender considerations, the (re)allocation process should also take into consideration the special needs of applicants. • For this indicator, see also Standard 24. Suitable accommodation for applicants with special needs. |
| | <p>Indicator 3. The outcome of the assessment of special needs is taken into account in the (re)allocation process.</p> <ul style="list-style-type: none"> • Additional remarks: Member States can use standardised templates to transfer information on the special needs in respect of confidentiality and data protection requirements. • For this indicator, see also Standard 9. Reporting system: record the assessment of special needs. |
| | <p>Indicator 4. Reception facilities receive information on the (re)allocation of persons with special needs before the arrival of the applicant.</p> <ul style="list-style-type: none"> • Additional remarks: receiving information in advance allows the reception facility to adequately prepare for the arrival and the accommodation of applicants with special needs. |



| | |
|--|---|
| | <p>Indicator 5. When an applicant is reallocated to a more suitable reception facility, the individual file of persons with special needs is transferred to ensure the continuity of treatment with respect of data protection and confidentiality requirements.</p> <ul style="list-style-type: none">• Additional remarks: for this indicator, see also Standard 13. Confidentiality and data protection. |
| | <p>Indicator 6. Transportation to the reception facility is adapted to the special needs of the applicant.</p> <ul style="list-style-type: none">• Additional remarks: examples include the provision of special transportation (social and medical escort).• For this indicator, see also Standard 4. ‘Transportation’ in the Guidance on Reception: Operational standards and indicators, 2024. |
| <p>Good practice</p> <ul style="list-style-type: none">• A multidisciplinary team composed of at least one social worker and one medical professional determine the most suitable accommodation.• Transfers are limited as much as possible to avoid discontinuity in care provision and ensure that applicants with special needs benefit from a stable reception trajectory. | |



Standard 23. Prioritisation of the (re)allocation of applicants with special needs

Standard 23. An effective mechanism to prioritise the (re)allocation of applicants with special needs is in place.

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| <p>Indicators</p> | <p>Indicator 1. Criteria on the basis of safety and health considerations define priority cases for (re)allocation.</p> <ul style="list-style-type: none"> • Additional remarks: <i>safety considerations that necessitate priority allocation should not be restricted to – but can occur in cases of – domestic violence, victims of THB, GBV, torture or other serious forms of psychological and physical violence.</i> <p>Indicator 2. (Re)allocation of priority cases is done as early as possible and in line with national law.</p> <ul style="list-style-type: none"> • Additional remarks: <i>immediate (re)allocation implies that the procedure for the (re)allocation starts once special needs related to the safety and health considerations have been assessed and decided upon.</i> • <i>Depending on the national system, the delay for the (re)allocation can take several days. Member States should regulate the maximum duration to minimise risks and to prevent life-threatening situations from occurring.</i> |
| <p>Good practice</p> <p>A number of reception places remain vacant to allow for immediate allocation of applicants in a vulnerable situation in specific circumstances.</p> | |



Standard 24. Suitable accommodation for applicants with special needs**Standard 24. Suitable accommodation is available to provide response to the special needs of the applicants**

| Indicators | |
|-------------------|--|
| | <p>Indicator 1. Infrastructure conditions meet the applicant’s special needs.</p> <ul style="list-style-type: none">• Additional remarks: <i>infrastructure conditions can include, but should not be restricted to:</i><ul style="list-style-type: none">▪ <i>minimum space (more square meters or less persons per bedroom), privacy (curtains/blinds);</i>▪ <i>accessibility (visual or acoustic guidance systems that allow barrier-free mobility for people with visual or hearing impairments);</i>▪ <i>furniture (additional wardrobes), private refrigerator (for storing medicine), baby beds, changing table, children’s highchairs, child-friendly furniture);</i>▪ <i>sanitary infrastructure (baby bath, medical bed, walk-in shower, grab rails, sinks and toilets at an appropriate height for wheelchair users, appropriate flooring for the bathroom that is suitable for wheelchairs, short distance to sanitary provisions).</i> |
| | <p>Indicator 2. A separate accommodation area within the reception facility is provided according to the special needs of the applicants.</p> <ul style="list-style-type: none">• Additional remarks: <i>for example, organise separate accommodation for pregnant girls and young mothers. Preparing for childbirth and creating a bond between the baby and the young mother requires specific expertise, a particular set up (nursery) and a calming environment.</i> |
| | <p>Indicator 3. A protected area within the reception facility is available for applicants waiting to be transferred to a specialised facility.</p> <ul style="list-style-type: none">• Additional remarks: <i>for example, for potential victims of THB while waiting a transfer to a specialised facility. This should be established, however, in a way that avoids stigmatising or identifying/disclosing special needs.</i> |



Indicator 4. Alternatives to collective accommodation are available to allocate applicants according to their special needs.

- **Additional remarks:** *Depending on the individual circumstances, in particular, where there are security, personal integrity and privacy concerns, collective accommodation might not be suitable for applicants with special needs. Alternatives to collective accommodation can include single rooms or individual housing, for example.*
- *Single rooms can be provided in collective housing facilities, where applicants share other facilities and amenities (such as sanitary area(s) and the kitchen) or they can be part of individual housing. A minimum number of single bedrooms is ensured for persons with special needs. The assignment of single bedrooms should usually prioritise applicants with severe physical or mental illnesses; severe disabilities; LGBTIQ applicants; and pregnant women, for instance.*
- *Individual housing can be provided in kind or cash allowances to cover accommodation costs, according to national law. Criteria to accommodate applicants with special needs in individual housing can include security concerns related to collective housing. The location of the housing should be determined with the purpose of accommodating applicants in the longer term with a view to enabling a continuity of the response to special needs.*

Indicator 5. Secure accommodation and safe shelters are offered when there are safety and security concerns.

- **Additional remarks:** *this is usually small-scale accommodation with a confidential address. Applicants at risk or victims of, for example, violence or THB should be referred to these specialised facilities.*

Good practice

- The reception conditions are periodically and regularly assessed to check if the accommodation provided is suitable for the specific needs of the person.
- Minimal infrastructure conditions for each room are defined and stock supplies for commonly requested infrastructure amendments to allow for an easy and fast response are provided.



Standard 25. Suitable areas for the location of reception facilities for applicants with special needs

Standard 25. The reception facility where applicants with special needs are accommodated is located in a suitable area.

Indicators

Indicator 1. Information about the local environment and services in the vicinity of the reception facility is available and used to determine the suitability of the location where applicants with special needs are accommodated.

- **Additional remarks:** *the available information can cover, for example, information concerning relevant services (e.g. education and healthcare), information on public infrastructure (e.g. pavements and playgrounds) and neighbourhood characteristics (e.g. the natural environment, industrial activity, community support and education).*

Indicator 2. Specialised services are accessible according to the special needs of the applicants.

- **Additional remarks:** *specialised services can be provided within the reception facility. However, due to the specialised characteristics of the services provided, these might be only available outside of the facility. In such cases, they should be at walking distance or accessible by public transport. Applicants with substantially reduced mobility should not be expected to access relevant services on foot.*
- *It is important to check whether the public transportation is barrier-free and can be used in cases where applicants with substantially reduced mobility cannot reach relevant services by walking.*
- *For this indicator, see also [Section 1 'Housing', Standard 1](#), of the *Guidance on Reception Conditions: Operational standards and indicators, 2016*.*

Good practice

- Reception facilities are classified according to the levels of suitability to accommodate persons with special needs.
- Reception options are provided to allocate persons to a residential environment in accordance with their special needs.
- Alternative arrangements within the reception facility are provided when the allocated reception accommodation is insufficiently suited for persons with special needs.



Standard 26. Access to healthcare for applicants with special needs

Standard 26. Access to the necessary and adequate healthcare is ensured according to the needs of the applicants.

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| Indicators | <p>Indicator 1. Applicants with special needs have access to specialised services, available either inside or outside the reception facilities at a reasonable distance.</p> <ul style="list-style-type: none"> • Additional remarks: ensure the applicant has access to mental health specialists (psychiatrist, psychologists, etc.), a paediatrician, gynaecologist or prenatal healthcare. The services also include health services provided to victims of THB and (GB) violence as well as victims of torture or other forms of psychological and physical violence. • For this indicator, see also Section 11 'Location', Standard 1 and Section 4. 'Daily expenses allowance', Standard 28 in the <i>Guidance on Reception Conditions: Operational standards and indicators, 2016</i>. |
| | <p>Indicator 2. A specific list of specialised medical care providers is available.</p> <ul style="list-style-type: none"> • Additional remarks: for this indicator, see also Standard 10. Referral to further assessment and/or adequate support. |
| | <p>Indicator 3. Referral systems between reception facilities and specialised medical care providers are in place.</p> <ul style="list-style-type: none"> • Additional remarks: for this indicator, see also Standard 11. Exchange of information between authorities and Standard 12. Coordination between authorities and service providers. |
| | <p>Indicator 4. The necessary healthcare, including prescribed medication, is provided free of charge or is economically compensated according to national law.</p> |
| | <p>Indicator 5. Arrangements for the safe storage and distribution of prescribed medication are in place within the reception facility, when needed.</p> <ul style="list-style-type: none"> • Additional remarks: when persons with special needs are not able to keep their own medication, guidelines are in place to determine the safe distribution. |
| | <p>Indicator 6. Specific arrangements ensure effective communication between persons with special needs and the medical staff.</p> <ul style="list-style-type: none"> • Additional remarks: for example a trained interpreter is provided (free of charge) where necessary. This may include remote connection. Translated documents should be available to applicants. |



Standard 27. Access to necessary social care for applicants with special needs**Standard 27. Access to the necessary social care for applicants with special needs, including social counselling and day-to-day care is provided, if needed.**

| Indicators | |
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| | <p>Indicator 1. Applicants with special needs have access to necessary social services, available either inside or outside the reception facilities at a reasonable distance.</p> <ul style="list-style-type: none">• Additional remarks: <i>included in social care are services such as parental counselling and family planning (for single parents or large families), specific household services (for applicants who require assistance to cook or clean), drug and addiction support and specific support groups (including for minority social groups, such as LGBTIQ applicants).</i>• <i>Information about the available services should be given to applicants with special needs at an early stage of the reception process. See also Standard 1. Adapted information provision and Standard 2. Information provision on the support provided by other actors</i>• <i>For this indicator, see also Section 11. 'Location', Standard 1 and Section 4. 'Daily expenses allowance', Standard 28 in the <i>Guidance on Reception Conditions: Operational standards and indicators</i>, 2016.</i> |
| | <p>Indicator 2. Access to specialised care facilities is provided to applicants with special needs, if needed.</p> <ul style="list-style-type: none">• Additional remarks: <i>this refers to problems that require expert care that cannot be provided within the context of general reception facilities. It refers to institutionalised care provisions, such as that provided in safe shelters or elderly homes.</i>• <i>Specific arrangements are in place to allow reception facilities to follow up on the medical situation of applicants that receive specialised social care.</i> |
| | <p>Indicator 3. The necessary social care is provided free of charge or economically compensated according to national law.</p> |
| | <p>Indicator 4. Specific arrangements ensure effective communication between persons with special needs and social care providers.</p> <ul style="list-style-type: none">• Additional remarks: <i>for example, a trained interpreter is provided (free of charge) where necessary. This may include remote connection. Translated documents should be available to applicants.</i> |



Indicator 5. The social development of persons with special needs is continuously monitored and supported.

- **Additional remarks:** *social development means the ability to communicate; going to school; self-care (washing, getting dressed); being responsible for taking own medication; ability to take care of children, etc. This is why it is important the individual file includes information on social development, including skills related to autonomy.*

Good practice

Reception authorities reserve a minimum capacity among specialised social care providers to avoid waiting lists.



Standard 28. Access to the education system

Standard 28. Access to education is facilitated for child applicants.

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| <p>Indicators</p> | <p>Indicator 1. All children have access to preparatory classes, including language classes to facilitate enrolment into mainstream education.</p> <ul style="list-style-type: none"> • Additional remarks: <i>mainstream education is the regular public or private education, which is not specialised. Preparatory classes are specified in Article 14(2) RCD. The RCD provides that Member States must grant child applicants access to the education system after 3 months ⁽⁷⁰⁾ from the moment of applying for international protection. Access must be granted under similar conditions to their own nationals for as long as an expulsion measure against them is not enforced. These preparatory classes should adequately consider the special needs of children seeking international protection.</i> |
| | <p>Indicator 2. Specific arrangements are in place within the accommodation facilities or other suitable locations when access to the mainstream education is exceptionally and temporarily not possible.</p> <ul style="list-style-type: none"> • Additional remarks: <i>sufficient and adequate infrastructure, curriculum and trained staff for education activities are provided, for exceptional circumstances while the child prepares to enter the mainstream education. The curriculum should be designed to facilitate and prepare for participation in the national mainstream education system.</i> |
| | <p>Indicator 3. School materials, school transportation and internet connection are provided to support access to education.</p> <ul style="list-style-type: none"> • Additional remarks: <i>authorities should ensure children have access to social schemes where children apply for support in purchasing school materials (computer, books, etc). If school is not easily accessible using public transport, authorities should support the child to cover travel costs or to arrange travel logistics.</i> |
| <p>Good practice</p> <p>The provision of interpretation services, as well as the possible provision of cultural mediators, facilitates access to education and promotes participation. In the event of a high influx of arrivals, teachers or assistant teachers are hired in mainstream education with a similar background and who speak the same language as the applicants to facilitate integration.</p> | |

⁽⁷⁰⁾ The three-month period is shortened to two months in the new [recast reception conditions directive](#).



Standard 29. Access to the labour market

Standard 29. Employability services include applicants with special needs.

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| Indicators | <p>Indicator 1. Services that increase the ability to be employed are available and accessible to applicants with special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>these services can include language courses, seminars and vocational training courses, for example.</i> <hr/> <p>Indicator 2. Special adaptations or initiatives for applicants with special needs are in place to support them in accessing the labour market.</p> <ul style="list-style-type: none"> • Additional remarks: <i>in several Member States, employment bodies may play a more prominent role than reception authorities in ensuring access to employment. This indicator looks at the support that reception authorities can provide in line with RCD (recast) and applicable national legislation, for example, awareness raising meetings related to special legal working rights for applicants in a vulnerable situation (e.g. children and women); empowering workshops or career orientation sessions for young women; support in drafting a CV, interview preparation and searching for employment on the internet.</i> |
| <p>Good practice</p> <ul style="list-style-type: none"> • Guidelines using images and infographics help people that are illiterate and have limited skills to find their own way to sites for jobseekers. • Collect job advertisements related to remote jobs for applicants that have difficulty working physically demanding jobs. | |

Available EUAA resources



[**Special Needs and Vulnerability Assessment Tool**](#)

Referral Toolkit (forthcoming)



Standards and indicators on vulnerability specific to the asylum procedure

Access to the asylum procedure

The APD (recast) describes three separate steps of the access to procedure, clearly distinguishing between the making, registering and lodging of an application for international protection. Making an application for international protection means the act of expressing, in any way and to any authority, one's wish to apply for international protection. Anyone who has expressed their intention to apply for international protection is considered an applicant, with all the rights and obligations attached to this status. If the application is made to an authority not responsible for registration under national law, that authority must send the file to the competent authority for the purposes of registering the application, so that the applicant can benefit from the material reception conditions set out in Article 17 RCD (recast).

After an application for international protection has been made, it must be registered by the competent authorities within the given timeframe ⁽⁷¹⁾. Lodging an application for international protection means for the applicant to provide information and documents when available to complete the file created at the time of registering the application. Lodging of the application triggers the start of the first-instance examination. Depending on the national practice the registering and the lodging can coincide.

Special procedural guarantees need to be in place and adequate support provided to create the conditions necessary for applicants in a vulnerable situation to have equal and effective access to the asylum procedure and to present the elements needed for substantiating their application. In most scenarios, the first moment in which vulnerabilities might be detected is during access to the procedure. When special needs are identified at this stage, immediate support needs to be provided.

In this section, the standards and indicators provide guidance on the special procedural guarantees to be implemented during the making, registering and lodging of the application when indicators of vulnerabilities have been identified.

Related standards and indicators in other EUAA guidance


This section needs to be read in conjunction with:

- [Guidance on Asylum Procedure: Operational standards and indicators](#), 2019:
 - Section 6. Access to procedure, Standards 1–17.
 - Section 13. Personal Interview, Standard 31.

⁽⁷¹⁾ Article 6(1) APD (recast).



Legal reference

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|  APD (recast) |
| <p>recital 26 recital 27 Article 6 – Access to the procedure Article 7 – Applications made on behalf of dependants or minors Article 31(7), point (b) and Article 31(8) – Examination procedure Article 43 – Border procedures</p> |

Standards and indicators

Standard 30. Adequate support at the early stage of the procedure

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| Standard 30. Conditions are in place to ensure that adequate support is available at the early stage of the procedure. | |
| Indicators | <p>Indicator 1. Staff of any authority that might receive an application for international protection are trained on how to detect indicators of vulnerabilities and on how to refer the applicant to the appropriate authorities and services.</p> <ul style="list-style-type: none"> • Additional remarks: training courses include elements from the <i>European Asylum Curriculum</i>. • For this indicator, see also Standard 4. Implementation of the identification mechanism and Standard 47. Training curriculum on vulnerability-related issues. |
| | <p>Indicator 2. Staff is available to provide extra support to applicants in a vulnerable situation with the making of their application.</p> |
| | <p>Indicator 3. If vulnerabilities are identified, the registration and lodging of the application for international protection are prioritised when necessary.</p> <ul style="list-style-type: none"> • Additional remarks: depending on the national practice, criteria for prioritisation are defined in a law, guidance, etc. |

Standard 31. Adequate support at the registration and lodging

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| Standard 31. Adequate support is provided for registering and lodging the application of applicants in a vulnerable situation. | |
| Indicators | <p>Indicator 1. Where national law requires an interview for registering and lodging an application, the interview of the applicant in a vulnerable situation is carried out by officers trained in dealing with such cases.</p> |



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| | <ul style="list-style-type: none">• Additional remarks: <i>the cases of applicants in a vulnerable situation should be allocated to officers adequately trained on vulnerability-related issues, including on communication techniques with children and applicants in a vulnerable situation. The training courses provided include relevant parts of the European Asylum Curriculum.</i>• For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues. |
| | <p>Indicator 2. Where national law requires an interview for registering and lodging the application, interpreters experienced and/or trained in communicating with applicants in a vulnerable situation are preferred.</p> <ul style="list-style-type: none">• Additional remarks: <i>when applicable, the interpreter is informed before the interview of any known vulnerability. In cases of persons with special needs, whenever possible, it is beneficial to select an experienced interpreter who is specially trained, including on interpreting for applicants with hearing impairments or with limited speaking capacities. For sensitive cases, such as those concerning FGM/C, THB and LGBTIQ applicants or applicants subjected to sexual violence, attention should be paid to the gender of the interpreter. The authority ensures that the interpreter declares any potential conflict of interest or any situation that may hinder their neutrality – that they may be aware of before, during or after the interview – as and when they become aware of it.</i>• For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues and Standard 51. The interpreter’s professional expertise and training to work with applicants with special needs. |
| | <p>Indicator 3. Where national law requires an interview for registering and lodging the application, whenever possible, the officer and the interpreter are the gender preferred by the applicant.</p> <ul style="list-style-type: none">• Additional remarks: <i>particular attention is paid, for example, to cases where the applicant’s claim involves GBV or religious or cultural sensitivities related to gender. Even without the expressed preference of the applicant, considerations related to the more suitable gender of the case officer and interpreter can be made actively by staff if vulnerabilities are already identified, for example for cases of victims of GBV or LGBTIQ applicants.</i> |
| | <p>Indicator 4. Representatives are appointed as soon as possible to allow unaccompanied minors and adults without legal capacity to be assisted during the lodging interview.</p> <ul style="list-style-type: none">• Additional remarks: <i>for this indicator, see also Standard 10. Referral to further assessment and/or adequate support.</i> |
| | <p>Indicator 5. Where national law requires an interview for registering and lodging the application, the time allocated for the registration and lodging interview takes into consideration the needs of the applicant.</p> |



Indicator 6. Criteria to establish which cases need to be flagged to the relevant authority for prioritisation of the examination procedure are defined and applied.

- **Additional remarks:** *depending on the national practice, criteria are defined in a law, guidance, etc. Informing the relevant authority about the need of prioritising the examination procedure will enable them to better prepare for the personal interview, for example scheduling adequate time for the personal interview, the need for an experienced case officer and/or interpreter, the need for the presence of specific personnel (e.g. representative, medical staff).*
- *Despite prioritising it at the registration level, depending on the national practices and individual circumstances, the asylum determining authorities might decide to prioritise the scheduling of the personal interview or instead to postpone it to a later stage, for instance in cases in which the applicant needs time to recover from a trauma or physical disease, to be fit for the interview.*

Indicator 7. Dependent adults with legal capacity for whom indicators of vulnerabilities have been detected are informed of the possibility to lodge a separate application in a manner adapted to their specific circumstances.

- **Additional remarks:** *this is particularly relevant when there are indicators of violence and abuse, mental health issues or physical disabilities. Information should be provided in private and in a dedicated safe space.*
- *For this indicator, see also Section 8. 'Lodging of the application', Standard 16 in the [Guidance on Asylum Procedure: Operational standards and indicators](#), 2019.*

Good practice

- A specific unit is created and tasked with screening all applicants upon registration on their potential vulnerability. The unit should be composed of officials who have had specific training and are more sensitive to the implications vulnerability might have on the interview.
- Children must be heard in a manner appropriate to their age, including the provision of non-verbal aids (e.g. drawing utensils) if necessary.
- In some cases, there is also an option to register the application for international protection in writing. This can apply, for example, if the applicant resides in a youth care facility, in a hospital or foster care facility. The application can also be submitted through their legal representative if the applicant arrived as an unaccompanied child.



Standard 32. Suitable rooms for the registration and lodging

Standard 32. Suitable rooms for the registration and lodging of applications are available according to the applicant's special needs.

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| Indicators | <p>Indicator 1. The location for the registration and lodging of the application is accessible to the applicant according to their particular special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>elements that needs to be taken into account can include accessibility for people with disabilities, easy access to separate sanitation facilities for women and men, separate child-friendly play areas, etc.</i> |
| | <p>Indicator 2. Rooms ensure confidentiality and are free from disturbances.</p> |
| | <p>Indicator 3. In cases where the applicant needs the assistance of an authorised support person during the registration and lodging of the application, the room is big enough to accommodate the presence of additional people.</p> |
| | <p>Indicator 4. Rooms have a friendly and welcoming environment.</p> <ul style="list-style-type: none"> • Additional remarks: <i>attention should be paid to the room setup, for example consider a counselling session seating arrangement (seating in a triangle formation), consider security factors, let the support person sit next to the applicant, make sure the computer does not obstruct the applicant or the support person's line of sight or view of each other and the case officer etc. Internal guidelines are established for the setup of the room, in particular taking into account those applicants in a vulnerable situation. Provide dedicated interview rooms with decorations and other child-friendly materials.</i> |

Standard 33. Adequate support in the border/accelerated procedure

Standard 33. A mechanism to assess whether adequate support can be provided to an applicant in a vulnerable situation in the framework of the border/accelerated procedure is in place.

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| Indicators | <p>Indicator 1. An individual assessment of the support available is carried out and recorded.</p> <ul style="list-style-type: none"> • Additional remarks: <i>usually national policies and/or laws regulate which groups are exempted from the border and accelerated procedures. However, the assessment of the support available will depend on the needs of the applicants and can vary according to the individual situation.</i> |
| | <p>Indicator 2. The applicant is informed about the result of the assessment and the procedure to which they are channelled.</p> |



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| | <ul style="list-style-type: none"> • Additional remarks: for this indicator, see also Standard 1. Adapted information provision. |
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Standard 34. Exemption from the border/accelerated procedure

Standard 34. When adequate support and/or special procedural guarantees cannot be provided in accelerated/border procedures, the applicant is exempted and channelled to the regular procedure.

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| Indicators | <p>Indicator 1. The exemption from the accelerated/border procedures is done as soon as it is clear that support to special needs cannot be provided.</p> <ul style="list-style-type: none"> • Additional remarks: applicants can be exempted from the accelerated/border procedures at the beginning or at a later stage. In this case, the applicants have to be channelled to the regular procedure. |
| | <p>Indicator 2. When border procedures are no longer applicable, the applicant is allowed to enter the territory.</p> |

Good practice

The authorities involved in the process (border authority, migration authority and reception centre) conduct early reporting of potential cases of applicants in a vulnerable situation between them.

Available EUAA resources



[Let's Speak Asylum Portal](#)

[Video on Access to the asylum procedure](#)



EUAA–IGC, [Practical Guide on Interpretation in the Asylum Procedure](#)

[Practical Guide on Registration](#)

[Practical recommendations on conducting remote/online registration \(lodging\)](#)

The EUAA-Frontex, *Practical tools for first-contact officials*, which consists of the following components:

- [practical guide](#);
- [leaflet on Frequently Asked Questions](#);
- [pocketbook](#);
- [poster](#).



Interview

Every applicant should have a fair and effective opportunity to access and participate in the asylum procedure. The personal interview is a key component in this process. In the case of applicants with special needs, special procedural guarantees may have to be put in place in order to ensure this right.

Applicants in a vulnerable situation, may, for a variety of reasons, have an impaired ability to present their case, and they may have special needs in the interview situation. Giving all applicants an equal opportunity to present their claims therefore means having sufficient knowledge to take into account the personal and general circumstances of the applicant. It also means having the ability and willingness to make special adjustments in the interview situation.

In this section, the standards and indicators provide guidance on the special procedural guarantees and adequate support provided to applicants in vulnerable situation during the interview.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on asylum procedure: operational standards and indicators](#), 2019:
 - Sections 13. Personal interview and 14. Case file management system, Standards 28–37.

Legal reference



APD (recast)

recital 32

Article 14 – Personal interview

Article 15 – Requirements for a personal interview

Article 16 – Content of a personal interview

Article 17 – Report and recording of personal interviews

Article 23 – Scope of legal assistance and representation

Article 31 – Examination procedure



QD (recast)

Article 4 – Assessment of facts and circumstances



Standards and indicators

Standard 35. Participation of representatives, legal representatives and other authorised support persons

Standard 35. Representatives, legal representatives and other authorised support persons are able to take part in the procedure at all relevant stages.

| Indicators | |
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| | <p>Indicator 1. Legal and other representatives can access the files according to national law and are allowed to attend the personal interview.</p> <ul style="list-style-type: none"> • Additional remarks: <i>a representative and/or legal representative needs to be present during the personal interview in case of unaccompanied children.</i> |
| | <p>Indicator 2. When an applicant requests for a family member or other authorised support person to be present during the interview, the request is assessed according to the needs of the applicant ensuring that there are no conflicts of interest.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the presence of a family member can be necessary when the person has health issues that require a family member's support or when applicants bring their young child along to the interview out of necessity.</i> • <i>In cases of particular circumstances and needs, the applicant can also request the presence of a person of trust, for example a social worker, medical expert, nurse, psychologist. Other third parties can refer to civil society organisations and United Nations High Commissioner for Refugees (UNHCR).</i> |
| | <p>Indicator 3. When there are indicators that the presence of family members may affect the ability of the applicant to substantiate their claim, measures are taken to avoid their involvement in the procedure.</p> <ul style="list-style-type: none"> • Additional remarks: <i>this may apply, for instance, when it is in the best interest of the child not to have their parent present during the personal interview, because of the pressure that a parent can put on the child or because the parent might be the actor of persecution/serious harm. This could also be the case when a child or a dependent adult with legal capacity has personal grounds for persecution or serious harm that they may not want to disclose at the presence of their family member. Measures taken should also be clearly documented.</i> |



Standard 36. Scheduling and invitation to the interview

Standard 36. The scheduling and invitation to the personal interview take into consideration the special needs of the applicant.

Indicators

Indicator 1. If special needs are known at the time of the preparation of the personal interview, the personal interview is allocated to case officers trained to address vulnerabilities.

- **Additional remarks:** *adequate training includes communication techniques for children and applicants in a vulnerable situation. The training courses provided include relevant parts of the European Asylum Curriculum.*
- *For this indicator, see also [Standard 47. Training curriculum on vulnerability-related issues](#).*

Indicator 2. If special needs are known at the time of the preparation of the personal interview, the personal interview is allocated to interpreters experienced and or/trained in communicating with applicants in a vulnerable situation.

- **Additional remarks:** *the interpreter facilitates the communication between the case officer and the applicant. Interpreters should be trained on how to communicate with persons in a situation of vulnerability.*
- *In cases of persons with special needs, whenever possible, it is beneficial to select an experienced interpreter who is specially trained, including on interpreting for applicants with hearing impairments or with limited speaking capacities. The authority ensures that the interpreter expresses any potential conflict of interest or situation that may hinder their neutrality that they may be aware of before, during or after the interview. The training courses provided includes relevant parts of the European Asylum Curriculum.*
- *For this indicator, see also [Standard 47. Training curriculum on vulnerability-related issues](#), [Standard 50. Interpretation capacity to provide support to applicants in a vulnerable situation](#) and [Standard 51. The interpreter's professional expertise and training to work with applicants with special needs](#).*

Indicator 3. Whenever possible, the assigned case officer and the interpreter are the gender preferred by the applicant.

- **Additional remarks:** *particular attention is paid, for example, to cases where the applicant's claim involves GBV or religious or cultural sensitivities related to gender. Depending on national practice, the applicant's preference for the gender of the case officer and interpreter can be asked during the registration or lodging and then taken into account by the case officer.*
- *Even without the expressed preference of the applicant, considerations related to the more suitable gender of the case officer and interpreter can be made actively by staff at the stage of the*



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| | <p>scheduling, for example for cases of victims of GBV or LGBTIQ applicants.</p> <p>Indicator 4. The time slot allocated for the interview is adapted according to the special needs of the applicant.</p> <ul style="list-style-type: none"> • Additional remarks: <i>it is important that the applicant is given an opportunity to explain any problematic issues that the interviewer has identified. Some applicants may not be able to sit through a standard-length interview and therefore will need more interviews that are shorter in length. For other applicants, a second interview might enhance the rapport and trust in the interviewer.</i> <p>Indicator 5. Criteria to prioritise or postpone the interview are in place.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the interview should be prioritised when needed and in the best interests of the applicant. In some cases, such as when the applicant requests more time to prepare, it is beneficial to assess if the interview may be postponed.</i> <p>Indicator 6. Remote interview options are available if the individual special needs allow for it.</p> <ul style="list-style-type: none"> • Additional remarks: <i>it is important to note that for certain applicants in a vulnerable situation, such as victims of torture, cases of LGBTIQ applicants or highly traumatised applicants, for whom an extended and detailed interview would be needed, a videoconferencing setting may not be appropriate. In other cases, a remote personal interview can be beneficial for applicants that find it easier to present sensitive information remotely or for those facing issues travelling and commuting.</i> • <i>A case-by-case assessment is recommended for cases of applicants in a vulnerable situation.</i> <p>Indicator 7. A mechanism is in place to ensure that the applicant and the relevant participants are effectively and timely informed about the date and place of the personal interview and to ensure that the applicant is able to attend.</p> <ul style="list-style-type: none"> • Additional remarks: <i>other participants could include the legal representatives or other counsellors. Appropriate means for communicating the invitation to the interview include, for example, direct notification by hand of the invitation to ensure that it reaches the person or an online invitation with confirmation. The mechanism allows the applicant to inform the authorities if and why they are not able to attend.</i> |
| <p>Good practice</p> | <ul style="list-style-type: none"> • Training is provided to administrative staff tasked with scheduling the interviews. This ensures the correct allocation of time for the interview according to the applicant's special needs. • In cases of single parents, arrangements for children are in place so that parents are not required to give an account of personal victimisation if their children are present. |



When the applicant has no means of placing their child in appropriate childcare, this will necessarily involve scheduling the interview at a time and place where childcare is available.

Standard 37. Suitable rooms for the personal interview

Standard 37. Suitable rooms for the personal interview are available according to the applicant's special needs.

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| Indicators | <p>Indicator 1. The facility where the personal interview takes place is accessible to the applicant according to their particular special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>elements that need to be taken into account include accessibility for people with disabilities, easy access to separate sanitation facilities for women and men and separate child-friendly play areas, etc.</i> |
| | <p>Indicator 2. Rooms ensure confidentiality and are free from disturbances.</p> |
| | <p>Indicator 3. In cases where the applicant needs the assistance of a third party during the personal interview, the room is big enough to accommodate the presence of additional people.</p> |
| | <p>Indicator 4. Rooms have a friendly and welcoming environment.</p> <ul style="list-style-type: none"> • Additional remarks: <i>Attention should be given to the room set-up, e.g. consider counselling session seating arrangement (seated in triangle), consider security, let the support person sit next to the applicant, make sure the computer is not obstructing the view, etc. Internal guidelines are established for the setup of the room, in particular taking into account those applicants in a vulnerable situation. Provide dedicated interview rooms with decoration and other child-friendly materials.</i> |

Standard 38. Information available to the case officer for the preparation of the interview

Standard 38. Information on the situation of the applicant and their needs is available to the case officer for the preparation of the case.

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| Indicators | <p>Indicator 1. A mechanism is in place to ensure that information from other organisations and authorities on existing or potentially existing vulnerabilities are shared and recorded in the applicant's file.</p> <ul style="list-style-type: none"> • Additional remarks: <i>when receiving a new case, it is not always evident whether the applicant is a person with special needs. If the applicant's special needs are known, preparation should focus on how to effectively elicit the facts of the application during the interview while taking into consideration such special needs.</i> • <i>For this indicator, see also Standard 13. Confidentiality and data protection, Standard 14. Measures to prevent and mitigate the</i> |
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| | <p>emergence and/or aggravation of vulnerabilities and Standard 13. Confidentiality and data protection.</p> |
| | <p>Indicator 2. Guidelines and other instruments on interviewing applicants with special needs are available and accessible to case officers.</p> <ul style="list-style-type: none"> • Additional remarks: <i>national guidelines and procedures can cover aspects related to how to put in place the necessary support framework for the interview setting, such as the presence of a representative during the interview in the case of unaccompanied children. They can also cover interviewing techniques for children and applicants in a vulnerable situation, for example.</i> |
| | <p>Indicator 3. Country of origin information on groups at risk is available and taken into account.</p> <ul style="list-style-type: none"> • Additional remarks: <i>if information is not already available, the case officer may need to request or research information relevant to the vulnerabilities of the application. The lack of country of origin information should not prejudice the examination of the case.</i> • <i>The fact an individual does not belong to groups identified in the country of origin information as facing certain risks should not preclude the possibility that the person has special needs during the preparation of the interview.</i> |

Standard 39. Preparation of the interview for applicants with special needs

Standard 39. The preparation of the interview is done in accordance with the special needs of the applicant on a case-by-case basis.

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| Indicators | <p>Indicator 1. Special arrangements are made in accordance with the special needs of the applicant.</p> <ul style="list-style-type: none"> • Additional remarks: <i>for example, special assistance can be provided to help applicants if they have limited mobility.</i> |
| | <p>Indicator 2. If needed, arrangements are made to allow any support persons accompanying the applicant to be present during the interview.</p> <ul style="list-style-type: none"> • Additional remarks: <i>in the case of mental and severe physical disabilities, an accompanying person can be a great support for the communication between the case officer and the person with disabilities. They are more familiar with the person's verbal behaviour and abilities. In some cases, the support persons are specified by law.</i> |
| | <p>Indicator 3. The interpreter is briefed and prepared on the nature and sensitivity of the case.</p> |



Standard 40. Conducting the interview for applicants in need of special procedural guarantees

Standard 40. When conducting the interview, adequate support is provided to applicants in need of special procedural guarantee.

| Indicators | |
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| | <p>Indicator 1. The confidentiality, purpose and procedure of the interview, and the role of the interpreter and of everybody present during the interview, are explained in a manner that is targeted to the particular needs of the applicant.</p> <ul style="list-style-type: none">• Additional remarks: <i>it is important to stress that the confidentiality of the content of the interview is respected also by the interpreter present. The understanding between the interpreter and the applicant is verified.</i>• <i>The case officer is vigilant at all times whether or not the applicant's narrative and the answers to the questions are coherent with the facts presented. Incoherence might indicate problems in comprehension or might indicate restrictions in the applicant's ability to express themselves that are due to the applicant's special needs.</i>• <i>For this indicator, see also Standard 1. Adapted information provision.</i> <p>Indicator 2. Interviewing techniques appropriate for the special needs of the applicant are applied.</p> <ul style="list-style-type: none">• Additional remarks: <i>basic interviewing techniques will not always be sufficient in interviews with an applicant in a vulnerable situation. For example, when the interview is carried out with an applicant who has survived sexual violence, the interview techniques especially suitable in this context include asking for context without directly mentioning a specific issue and evoking sensory memories while being careful not to trigger any flashbacks.</i>• <i>Other useful techniques when discussing traumatic events include summarising the conversation, considering the applicant's nonverbal signals, probing from an element of memory that has already been mentioned, using visual means and accepting fragmentation and perspective changes.</i>• <i>It is important to build trust and maintain it during the interview.</i> <p>Indicator 3. The duration of the interview and breaks are adapted based on the special needs of the applicant.</p> <ul style="list-style-type: none">• Additional remarks: <i>breaks are taken either at the request of the applicant, the interpreter or the interviewer or otherwise at regular intervals. Some applicants may not be able to sit through a standard-length interview and therefore will need more interviews that are shorter in length.</i>• <i>In the case of persons in a vulnerable situation, it is quite common to find contradictions or gaps in the applicant's narrative during the interview. In such cases, it is important that the applicant is given an opportunity to explain any issues the interviewer has identified. In</i> |



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| | <p><i>some cases, conducting several interviews may result in the applicant becoming upset and/or frustrated. It can therefore compromise the quality of the information obtained during the interviews.</i></p> |
| | <p>Indicator 4. If the applicant appears not to be fit to be interviewed, the interview is postponed, their personal condition reassessed and the interview is rescheduled or omitted accordingly.</p> <ul style="list-style-type: none"> • Additional remarks: <i>when an interview is postponed, sufficient time before rescheduling is allowed. In accordance with Article 14 APD (recast), the personal interview can be omitted in two situations: the evidence available to the asylum authority suffices to confirm the applicant should be recognised as a refugee and when the applicant is considered unable or unfit to be interviewed due to enduring circumstances beyond their control.</i> |
| | <p>Indicator 5. If other special needs appear at any stage of the interview, these needs are responded to accordingly.</p> <ul style="list-style-type: none"> • Additional remarks: <i>different interview techniques may be applied such as allowing for additional breaks.</i> |
| | <p>Indicator 6. The case officer is proactive in supporting the applicant in substantiating the application.</p> <ul style="list-style-type: none"> • Additional remarks: <i>when the applicant provides an overview on the reason(s) for applying, it is important to protect an applicant in a vulnerable situation from unnecessary further traumatisation while further exploring the different elements of the claim.</i> • <i>When the case officer identifies more potential risks not mentioned by the applicant, the applicant is encouraged in an appropriate manner to disclose such potential risks and grounds for international protection.</i> • <i>Children are heard in a manner appropriate to their age, including the provision of non-verbal aids (e.g. drawing utensils). Persons who are only able to articulate themselves to a limited extent due to physical, intellectual or psychological causes must be provided with aids.</i> |
| | <p>Indicator 7. Guidelines, training and other capacity building activities are in place to support case officers in conducting interviews with applicants with special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the training courses provided include relevant parts of the European Asylum Curriculum.</i> |



Standard 41. Provision of adequate support to applicants with special needs to present their claim

Standard 41. Adequate support is provided to applicants with special needs to present all aspects related to their application.

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| Indicators | <p>Indicator 1. The case officer ensures that the applicant was able to sufficiently substantiate their claim, taking into account their particular circumstances.</p> |
| | <p>Indicator 2. When additional elements are needed from the applicant to substantiate the case, information and support on how to collect these elements and how to share them with the determining authority is provided.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the case officer informs the applicant of the contact details of the determining authority and informs them until when they can send the required information to the authority.</i> |
| | <p>Indicator 3. Information on the available support services is provided based on the needs that emerged during the interview.</p> <ul style="list-style-type: none"> • Additional remarks: <i>special circumstances may require further protective or support measures. When needed, follow-up is ensured by contacting other authorities and service providers with the consent of the applicant. Adequate follow-up can include referring the applicant to medical doctors, psychologists or social workers or to support organisations as well as potentially referring them to senior case officers or specialists. For this indicator, see also Standard 10. Referral to further assessment and/or adequate support.</i> |
| | <p>Indicator 4. The interview transcript accurately records questions, answers and other events that occurred during the interview.</p> <ul style="list-style-type: none"> • Additional remarks: <i>reactions, silence and interruptions should also be noted in the report.</i> |
| <p>Good practice</p> <p>Alternative means of gathering information from an applicant when they are not capable of being interviewed can include answering a written questionnaire to provide all facts relevant to the application, providing a written testimony, etc.</p> | |



Available EUAA resources



[*Quality Assurance Tool: Examining the application for international protection*](#)



[*Practical Guide: Personal Interview*](#)

[*Practical Guide on Political Opinion*](#)

[*Quality Matrix Synthesis Report on Personal Interview, Evidence Assessment and Qualification*](#)

[*Practical Guide on Interviewing Applicants with Religion-based Asylum Claims*](#)

[*Practical Guide on Subsequent Applications*](#)

[*Practical Guide on the Application Cessation Clauses*](#)

[*Practical Guide on the Application of the Internal Protection Alternative*](#)

[*Practical guide on the use of country of origin information by case officers for the examination of asylum applications*](#)

[*Practical Recommendations on Conducting the Personal Interview Remotely*](#)

[*Guidance on Membership of a Particular Social Group*](#)



Decision

When dealing with a case of an applicant in a vulnerable situation, the special needs of the applicant should be considered when assessing elements for the decision and throughout the decision-making process.

In this section, the standards and indicators provide guidance on how the special needs of the applicants also need to be taken into account when the decision is drafted and notified. All arrangements are made to ensure, on one hand the security of the applicant and on the other the accessibility of the information.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on asylum procedure: operational standards and indicators](#), 2019:
 - Section 19. Decision, Standard 46.

Legal reference



APD (recast)

Article 11 – Requirements for a decision by the determining authority

Article 18(1) – Medical Examination

Article 31(2) to (5) – Examination procedure



APD (recast)

Article 4(5) – Assessment of facts and circumstances



Standards and indicators

Standard 42. Vulnerability in the decision-making process

Standard 42. Situations of vulnerability and special needs are taken into account in the decision-making process.

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| Indicators | <p>Indicator 1. When vulnerabilities are identified, the case is assessed and the decision is made by officers with expertise in vulnerabilities.</p> |
| | <p>Indicator 2. Guidelines, training and other capacity building activities are in place to support case officers with assessing information and evidence in relation to vulnerability in the credibility and risk assessments and the decision drafting.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the training courses provided includes relevant parts of the European Asylum Curriculum.</i> • <i>Guidance and capacity building activities on the decision-making process should include specific recommendations related to the consequences of mental or physical disorders that are likely to generate or aggravate risks of persecution or serious harm upon return to the country of origin.</i> • <i>Guidance and capacity building activities on the probative value of medical certificates produced as medical evidence of alleged past persecution or serious harm should be (systematically) available to all case officers. Attention should be paid to the medical evidence of mental and/or physical disorders.</i> |
| | <p>Indicator 3. The applicant's circumstances related to vulnerabilities are duly considered when assessing whether they have made a genuine effort to substantiate their claim.</p> <ul style="list-style-type: none"> • Additional remarks: <i>in particular, age and mental or physical disorders or disabilities are considered. Case officers take into account medical evidence related to mental or physical sequelae when assessing the capacity of the applicant with special needs to substantiate the claim.</i> • <i>If deficiencies in the applicant's declarations and/or supporting evidence are satisfactorily explained by age, trauma, mental or physical disorders or disabilities or other vulnerabilities, it should be considered that applicants in a vulnerable situation have complied with their duty of cooperation.</i> • <i>Certain situations of vulnerability may justify a delay in making the application or in fulfilling the duty of cooperation, for example situations of THB, etc.</i> |



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| <p>Indicator 4. When applying the credibility indicators, all evidence related to the vulnerabilities and special needs of the applicant and the possible factors of distortion are taken into account.</p> <ul style="list-style-type: none">• Additional remarks: <i>factors of distortion may include memory, trauma age, gender, mental or physical disorders or disabilities.</i> |
| <p>Indicator 5. Vulnerabilities are taken into account whenever likely to generate or aggravate risks of persecution or serious harm upon return to the country of origin.</p> <ul style="list-style-type: none">• Additional remarks: <i>for instance, in cases of mental or physical disorders or disabilities supported by medical evidence, the use of medical country of origin information can be of support to assess these circumstances.</i> |
| <p>Indicator 6. Medical examinations of specific vulnerabilities required in order to assess the application are paid for out of public funds and a system is in place to facilitate the applicant's access to the examination.</p> <ul style="list-style-type: none">• Additional remarks: <i>criteria are defined to determine which cases require a medical examination. Criteria can be defined in national law, internal guidance, standard operation procedures, etc. This indicator should be read in line with Article 18(1) APD (recast).</i> |

Good practice

A list of doctors who are trained on specific cases, such as FGM/C and torture on the basis of the Istanbul Protocol ⁽⁷²⁾, is available. The list is made available to applicants when needed. In any case, applicants are still free to go to any doctor they choose. The list can be composed of doctors from the public healthcare system as well as those made available through secondment arrangements or cooperation modalities.

Good practice

A quality assurance system on decision-making includes a dedicated area on vulnerability issues.

⁽⁷²⁾ UN Office of the High Commissioner for Human Rights, [Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment \('Istanbul Protocol'\)](#), 2004, HR/P/PT/8/Rev.1.



Standard 43. Reference to vulnerability in the written decision

Standard 43. Unless granting refugee status, the written decision refers to identified and assessed vulnerabilities.

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| Indicators | <p>Indicator 1. The decision mentions the procedural safeguards regarding the applicant's special needs implemented throughout the examination process.</p> |
| | <p>Indicator 2. The reasoning of the decision includes the assessment of medical evidence and other relevant elements related to the special needs.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the written decision mentions the full profile of the applicant including their specific needs in a clear manner. It clearly refers to the relevant documentation in relation to the needs and other relevant elements. The written decision also indicates and describes the documentation acquired by, or submitted to, the determining authority, for example medical reports relevant to the assessment of persecution/harm suffered, expert opinions, etc.</i> |
| | <p>Indicator 3. If the personal interview has been omitted or waived, the reasons and the methods that have been used to gather the information regarding the claim are stated in the decision.</p> |



Standard 44. Drafting and notification of the decision

Standard 44. The decision is drafted and notified in a timely manner and taking into consideration the applicant’s special needs.

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| Indicators | <p>Indicator 1. The decision is drafted considering the personal circumstances of the applicant with special needs and their capacities.</p> <ul style="list-style-type: none"> • Additional remarks: <i>particular attention should be paid to language and aspects related to safety.</i> |
| | <p>Indicator 2. The notification of the decision to the applicant with special needs is prioritised.</p> <ul style="list-style-type: none"> • Additional remarks: <i>exceptions to this principle can be implemented in particular circumstances, for example where a special need requires the notification to be postponed.</i> |
| | <p>Indicator 3. The determining authorities ensure that the notification of the decision preserves the safety of the applicant in a vulnerable situation.</p> <ul style="list-style-type: none"> • Additional remarks: <i>this applies in cases such as victims of domestic violence or THB that are accommodated together with, or within reach of, the agent(s) of persecution or the alleged offender. To that effect, with the consent of the applicant, the determining authority may contact the reception facility.</i> • <i>Guidance and a case-by-case support mechanism with recommendations on dealing with safety issues related to the applicant’s special needs are available.</i> |
| | <p>Indicator 4. The decision is notified to the legally required actors, including legal and other representatives.</p> |
| | <p>Indicator 5. Adapted information on access to effective remedies is provided.</p> <ul style="list-style-type: none"> • Additional remarks: <i>for this indicator, see also Standard 1. Adapted information provision.</i> |

Available EUAA resources



[Quality Assurance Tool: Examining the application for international protection](#)



Crosscutting standards and indicators on vulnerability applicable to reception and asylum procedure

Staff capacity, training and well-being

In this guidance, the term staff refers to practitioners who are in direct contact with applicants for international protection in the context of the asylum procedure and reception, irrespective of their employer (e.g. state, civil society organisation, private contractor or municipality). Staff can include border guards, case officers, registration officers, social workers, education and healthcare staff, interpreters, facility managers and administration/coordination staff.

Having sufficient and adequately trained staff is a necessary precondition to enable the processes of prevention, identification, assessment and response to vulnerabilities and special needs. It requires special attention, specific training and dedicated resources to guarantee that special needs are taken into account in an appropriate way. This section addresses the obligation of Member States to provide the necessary resources for staff to be able to perform their duties.

In this framework, it is crucial for Member States to guarantee staff well-being. The welfare of staff is regarded as a holistic concept that contains physical, mental and safety dimensions. It is important to acknowledge that working with people in a vulnerable situation can put additional stress on the welfare of staff. Therefore, measures should be implemented to avoid burnout and high turnover of staff.

In order to support the well-being of the staff, it is important to have mechanisms to manage critical incidents. Incidents, including critical ones (which can be defined as sudden, unexpected and overwhelming events, beyond the realm of expected experiences) may occur in reception facilities and during the asylum procedure. They can take different forms, such as threats or harm to the physical safety and mental health of applicants and/or staff, including to life; material damage; disruption of daily life; acts of aggression, harassment or abuse; conflict situations; and violence (verbal or physical).

In this section, the standards and indicators should be understood as applying to all levels of staff (including middle and top management).



Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- *Guidance on Reception Conditions: Operational standards and indicators*, 2016:
 - Section 8. [Staff training](#), Standard 37.
- ***Guidance on Reception: Operational standards and indicators, 2024.***
 - Section 6. Security and safety, Standard 12.
 - Section 7. Staff, Standard 13.
- [Guidance on Asylum Procedure: Operational standards and indicators](#), 2019:
 - Section 12. Training and support, Standard 26.

Legal reference



RCD (recast)

Article 18(7) – Modalities for reception conditions

Article 24(4) – Unaccompanied minors

Article 25(2) – Victims of torture and violence

Article 29 – Staff and resources



APD (recast)

Article 4(3) - Responsible authorities

Article 14 - Personal interview

Article 15 – Requirements for a personal interview



Standards and indicators

Standard 45. Staff capacity to provide support to applicants in a vulnerable situation

Standard 45. An adequate number of staff members is allocated to provide equal and sufficient support to applicants in a vulnerable situation, including in emergency situations.

| Indicators | Indicator 1. The number of staff responsible for handling cases of applicants in a vulnerable situation is defined and implemented by the competent authorities. |
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| | <ul style="list-style-type: none"> • Additional remarks: <i>the number of allocated staff will take into account different parameters, for example, the predicted number of applicants in a vulnerable situation, the range of services to be provided and/or the working hours per day guaranteed for the services to be provided in an effective manner.</i> • <i>The number of allocated staff also includes interpreters that are specifically trained on interpreting for applicants in a vulnerable situation.</i> • <i>For this indicator, see also Section 7. ‘Staff’, Standard 13 in the Guidance on Reception – Operational standards and indicators, 2024.</i> |
| | <p>Indicator 2. Gender composition is considered among staff members allocated to support applicants in a vulnerable situation.</p> <ul style="list-style-type: none"> • Additional remarks: <i>it is important to ensure the gender composition of the staff, including interpreters, to be able to respond to the needs of the applicants. For example, female victims of GBV may find it more difficult to tell their story to a man. Female applicants should therefore have the possibility to be interviewed by a female case officer and interpreter.</i> |
| | <p>Indicator 3. Focal points are appointed to support the case managers in their response to the special needs of the applicants.</p> <ul style="list-style-type: none"> • Additional remarks: <i>focal points specialised on certain special needs of applicants, for example on sexual orientations, gender identities, gender expressions and sex characteristics, domestic violence and THB have a coaching role. The focal points keep up to date with relevant developments in terms of law, policies and the available services.</i> |
| | <p>Indicator 4. A plan is developed to ensure the deployment of additional staff in case the number of applicants for international protection rises to ensure the adequate support is available for applicants in a situation of vulnerability.</p> <ul style="list-style-type: none"> • Additional remarks: <i>in emergency situations, it is important not only to ensure the deployment of additional staff, including interpreters, but also that each staff member knows their area(s) of responsibility.</i> |



Standard 46. Professional requirements to work with applicants with special needs**Standard 46. Staff are sufficiently qualified to provide adequate support to applicants with special needs.**

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| Indicators | Indicator 1. Minimum qualifications for each position are clearly defined. |
| | Indicator 2. Each staff member allocated to work with applicants in a vulnerable situation meets the necessary qualifications as specified in their job description to undertake their role, according to the national law. <ul style="list-style-type: none">• Additional remarks: every job description and vacancy notice should indicate educational and professional requirements and the years of experience relevant for the post. Personal aptitude and disposition for working with applicants in a vulnerable situation may also be a requirement or an advantageous element in the vacancy notice.• Roles and responsibilities are regularly reviewed and assessed to see if there are any additional need that emerged. |

Standard 47. Training curriculum on vulnerability-related issues**Standard 47. An appropriate and up-to-date training curriculum on how to identify applicants in a situation of vulnerability and how to assess and respond to the most common special needs is defined.**

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| Indicators | Indicator 1. A training curriculum for staff lists the minimum training requirements regarding vulnerability according to the roles and responsibilities of staff. <ul style="list-style-type: none">• Additional remarks: the training curriculum includes relevant parts of the European Asylum Curriculum. It specifies the training objectives, which, among others, includes the ability to detect indicators of vulnerability. This objective can be the outcome of more comprehensive training courses.• The training curriculum is regularly updated if the population and profiles change. Some training courses might be more relevant than others depending on the context.• For this indicator, see also Standard 4. Implementation of the identification mechanism and Standard 7. Individual assessment. |
| | Indicator 2. Staff receive adequate training courses on vulnerability-related issues according to their roles and responsibilities. <ul style="list-style-type: none">• Additional remarks: for this indicator, see also Standard 4. Implementation of the identification mechanism and Standard 7. Individual assessment. |



Indicator 3. A formal attestation of having completed the training courses on vulnerability and special needs is provided.

Good practice

- An accreditation system provides formal attestation of having completed the training courses on vulnerability and special needs.
- Asylum authorities benefit from external expert input when establishing the training curriculum and developing the training materials, as the necessary psychological and medical knowledge might not be available inside the authority.
- Information for interpreters about minimum requirements for training are publicly available on the national website(s) of asylum and reception authorities.
- Training is delivered for focal persons specialised in the response to certain special needs, for example for survivors of THB, domestic violence, etc. These training courses cover the specific situation of the target group, the targeted response for these specific persons, the role of reception staff and which other stakeholders are involved as well as the coaching/guidance of reception staff in their response.

Standard 48. Support available to staff working with applicants with special needs

Standard 48. Specific support is provided to staff working with applicants in a vulnerable situation whose own well-being is affected.

Indicators

Indicator 1. Information and training courses are provided on how to request and access support.

- **Additional remarks:** training courses aim to develop skills on how to identify signs of stress and how to prevent it. Training courses should also target staff in managerial positions.

Indicator 2. Specific support activities are provided to staff to promote and protect mental and physical well-being.

- **Additional remarks:** these support activities may take different formats such as individual or group counselling or sessions with a specialist (e.g. psychotherapist, psychologist). Specific activities can be provided to staff exposed, for example, to vicarious trauma and burnout. This support can be provided by professionals working within the facility or by external service providers.

Indicator 3. Peer support structures are in place to provide advice and information.

Indicator 4. Trained focal points or team leaders are appointed and provide additional assistance and coaching to staff dealing with persons with special needs.



Good practice

- Focus group sessions are organised with case officers in groups of around five people, where difficult cases or situations are analysed and advice is provided on how to handle them.
- Develop a staff welfare strategy and communicate it through the relevant channels to all staff. The strategy should prescribe the supporting measures and indicate who is responsible for their implementation. It should be updated according to the risks and needs identified. The participation of staff with different functions in this process is recommended. The EUAA guidance on staff welfare provides a practical solution for EU Member States and the Schengen associated countries (EU+ countries) to design and build a welfare strategy at national level ⁽⁷³⁾.
- Mainstream resilience, ways of coping in stressful situations and self-care throughout the duration of employment of the staff member, with particular attention paid to the selection process and the onboarding of new staff.

Standard 49. Support available to staff who have experienced critical incidents

Standard 49. Specific support is provided to staff who have experienced a critical incident.

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| Indicators | Indicator 1. An independent, trained focal person (or team) is appointed and can be consulted after critical incidents. |
| | Indicator 2. Clear guidance is in place for managers on how to follow up after a critical incident. |
| | Indicator 3. Staff and their managers know how to request and access specific support after a critical incident has occurred. |

Available EUAA resources



[*Critical Incident Management in the Field of Asylum and Reception*](#)

[*Practical Guide on the Welfare of Asylum and Reception Staff – Part II. Toolbox*](#)

[*Video Animation: Early identification of signs of stress*](#)

⁽⁷³⁾ EASO, [*Practical Guide on the Welfare of Asylum and Reception Staff – Part II. Toolbox*](#), September 2021.



Interpreting for applicants in a vulnerable situation

It is important that interpreters are prepared to communicate with applicants in a vulnerable situation ⁽⁷⁴⁾. The interpreters contribute to creating a safe and respectful environment for the applicants during their stay in reception and during their personal interview and any other steps of the procedure in which they might participate.

In this section, the standards and indicators provide guidance on specific aspects of the role of the interpreter when dealing with applicants in a vulnerable situation. They have an essential role in order to carry out an effective identification, assessment and response to special needs.

Related standards and indicators in other EUAA guidance

This section needs to be read in conjunction with:

- [Guidance on asylum procedure: operational standards and indicators](#), 2019:
 - Section 6. Making the application, Standard 4.
 - Section 8. Lodging of the application, Standards 14 and 16.
 - Section 13. Personal interview, Standards 29–30.
 - Section 18. Concluding the examination as soon as possible, Standard 44.

Legal reference



APD (recast)

Article 15 – Requirements for a personal interview

Standards and indicators

Standard 50. Interpretation capacity to provide support to applicants in a vulnerable situation

Standard 50. Adequate interpreter support is available to respond to the needs of applicants in a vulnerable situation.

| Indicators | Indicator 1. Interpreter support is provided for at least all common languages. |
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| | <ul style="list-style-type: none"> • Additional remarks: to determine the common languages, elements such as population and country of origin should be taken into |

⁽⁷⁴⁾ See UNHCR, [Handbook for Interpreters in the Asylum Procedure](#), Vienna, 2022. The handbook provides a comprehensive theoretical overview of the field. It provides activities and exercises enabling experiential and interactive learning. It can be used by interpreters who wish to gain a deeper insight into the complexities of interpreting in asylum contexts and find out more about what knowledge and skills are needed for successful performance.



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| | <p><i>consideration. Interpretation support should also include international sign language. Interpretation can be provided remotely or in situ. However, in the case of remote interpretation, an assessment should be conducted to ensure that it is a suitable option in light of the needs of the applicant.</i></p> |
| | <p>Indicator 2. The timeline to find an interpreter is determined.</p> <ul style="list-style-type: none"> • Additional remarks: <i>a timeline indicates the maximum time in which to find an interpreter either in situ or remotely. In the case of rare languages, if an interpreter cannot be found in the established timeline, other solutions should be provided.</i> |

Standard 51. The interpreter’s professional expertise and training to work with applicants with special needs

Standard 51. Interpreters are prepared for communicating with applicants in a vulnerable situation.

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| Indicators | <p>Indicator 1. Interpreters receive induction training or information sessions on asylum and the role of the interpreter.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the training courses provided include relevant parts of the European Asylum Curriculum. Depending on national circumstances, interpreters can be hired externally, however they still need to meet certain requirements, including training.</i> • <i>For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues.</i> |
| | <p>Indicator 2. Interpreters receive adequate training on vulnerability-related issues.</p> <ul style="list-style-type: none"> • Additional remarks: <i>the training courses should cover at least aspects related to translating terminology related to vulnerability. Interpreters can receive refresher training courses. The training courses provided include relevant parts of the European Asylum Curriculum.</i> • <i>For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues.</i> |
| | <p>Indicator 3. Interpreters receive training courses on ethical standards and on the code of conduct.</p> <ul style="list-style-type: none"> • Additional remarks: <i>ethical standards or codes of conduct for interpreters describe the standards that interpreters are expected to uphold in the exercise of their functions. The training courses provided include relevant parts of the European Asylum Curriculum.</i> • <i>For this indicator, see also Standard 47. Training curriculum on vulnerability-related issues.</i> |



Indicator 4. Glossaries on common terminology related to medical terms, vulnerability and special needs and support services are available for interpreters.

Standard 52. Evaluation of the interpreters

Standard 52. The performance of the interpreters is systematically evaluated.

Indicators

Indicator 1. The feedback of applicants and/or staff on the performance of the interpreters is regularly collected.

- **Additional remarks:** *it is important to give the possibility to both the applicant and staff to evaluate the work of the interpreter. The feedback can be collected every time an applicant has benefitted from the interpretation of a given interpreter. Feedback can be periodically collected through samples.*
- *When forms are provided to applicants in a vulnerable situation for collecting their feedback, the forms need to be adapted to their needs. The evaluation, when negative, should also be accompanied by proposed measures to improve future performances, including, for example, further training.*

Indicator 2. A procedure exists to address poor performance and/or breaches of the code of conduct's ethical and professional standards.

- **Additional remarks:** *depending on the gravity of the breach, this can also bring to the end of the collaboration with the interpreter in question.*

Available EUAA resources



EUAA-IGC, [Practical Guide on Interpretation in the Asylum Procedure](#)

[Practical Recommendations on Conducting the Personal Interview Remotely](#)

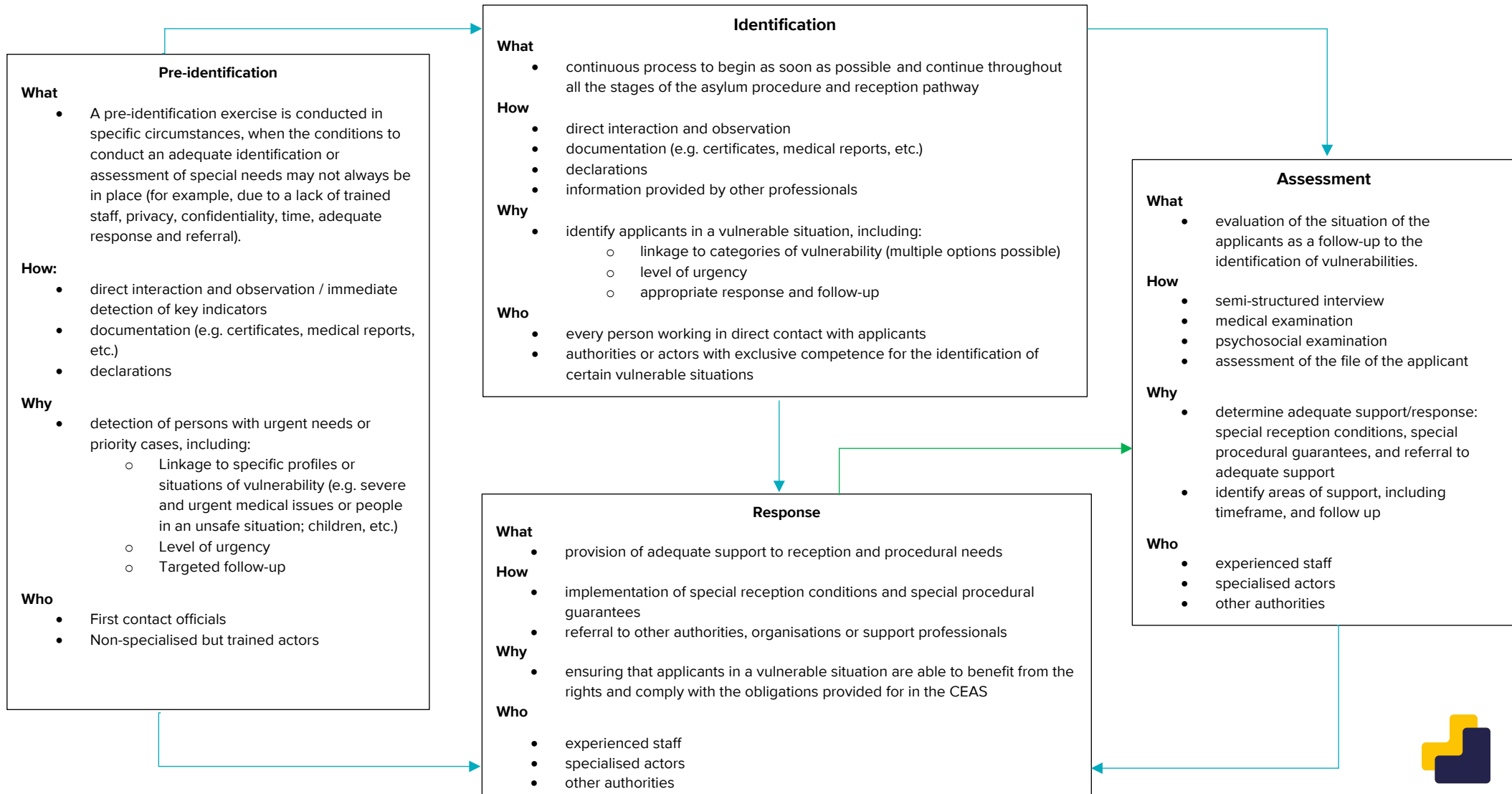




Annex 1. Vulnerability workflow

At arrival when there are specific circumstances

Throughout the asylum trajectory





Annex 2. Summary table

| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
|--|---|--|
| Section | Standards | Indicators |
| Information provision | Standard 1. The information provision is adapted to the particular circumstances and needs of applicants in a vulnerable situation. | Indicator 1. A process to determine the information and communication needs is in place and it considers the needs of applicants in a vulnerable situation. |
| | | Indicator 2. Targeted information relevant to the particular circumstances of applicants is provided. |
| | | Indicator 3. Information is provided using a variety of communication channels to ensure the applicant's understanding. |
| | | Indicator 4. In person and oral information is provided on a regular basis, taking into consideration the special needs of the applicant. |
| | | Indicator 5. Information provision sessions to applicants in a vulnerable situation ensure privacy and the confidentiality of the information shared during these sessions. |
| | Standard 2. Applicants in a vulnerable situation are informed about organisations or other service providers that support or provide targeted information to applicants concerning their particular circumstances. | Indicator 1. Up-to-date information with the area of expertise and contact details of relevant organisations or other service providers is available. |
| | | Indicator 2. Applicants in a vulnerable situation are enabled to contact relevant organisations or other service providers. |
| | | Indicator 3. Information on relevant organisations or other service providers is provided as soon as vulnerabilities are identified or special needs assessed. |
| Identification of applicants in a | Standard 3. The mechanism to identify applicants in a | Indicator 1. The identification mechanism outlines a non-exhaustive list of physical, psychosocial and environmental indicators to identify applicants in a vulnerable situation. |



| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
|---|---|---|
| vulnerable situation | vulnerable situation is defined. | Indicator 2. The identification mechanism outlines a specific list of indicators and the definition of cases that require an immediate assessment and response. |
| | | Indicator 3. The identification mechanism provides a clear definition of the roles and responsibilities of staff when indicators of vulnerability are detected. |
| | | Indicator 4. The identification mechanism prescribes how applicants can inform authorities on their vulnerabilities and if necessary, how to provide medical documentation/attestation. |
| | | Indicator 5. The identification mechanism prescribes procedures and communication pathways on how representatives, lawyers and other actors can inform the authorities on vulnerabilities that an applicant may have. |
| | | Indicator 6. When a medical screening is provided by national law, the identification mechanism establishes how the outcome is taken into consideration in the identification, assessment and response to the special needs. |
| | | Indicator 7. The identification mechanism describes the conditions of for the pre-identification of vulnerability. |
| | Standard 4. The mechanism to identify applicants in a vulnerable situation is implemented effectively by relevant staff. | Indicator 1. Guidelines and tools to identify applicants in a vulnerable situation are disseminated among staff. |
| | | Indicator 2. Criteria to identify priority cases are applied. |
| | | Indicator 3. A confidential and private environment is created to allow the disclosure and identification of applicants in a vulnerable situation, including self-identification. |
| | | Indicator 4. Applicants are informed about the aim of the identification mechanism. |



| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| | | Indicator 5. Capacity building, training and professional development sessions on how to identify applicants in a vulnerable situation are regularly provided to staff. |
| | | Indicator 6. Applicants and staff have access to interpreters to support in the identification process, including self-identification, if necessary. |
| | | Indicator 7. When a medical screening is provided by national law, a screening report is produced and taken into account in the identification mechanism. |
| | Standard 5. The identification of applicants in a vulnerable situation takes place in a continuous and timely manner | Indicator 1. The identification mechanism is applied as early as possible from the first moment of contact between the applicant and the authorities and other entities working in the asylum procedure and reception. |
| | | Indicator 2. The identification mechanism applies continuously and, in addition, regular intervals are defined for its verification. |
| | Standard 6. There is an effective system to record when vulnerability indicators are detected and applicants are identified as being in a vulnerable situation. | Indicator 1. A document is produced when vulnerability indicators are detected and when an applicant is identified as being in a vulnerable situation. |
| | | Indicator 2. The document where this information is recorded is available to the applicant. |
| | | Indicator 3. Where national law allows, information on the identification of applicants in a vulnerable situation is gathered and analysed. |
| | Assessment of special needs | Standard 7. The assessment of the situation of the applicant is carried out to determine the |
| Indicator 2. The roles and responsibilities of staff conducting the assessment are clearly defined. | | |



| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | |
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| <p>need of special reception conditions and procedural guarantees and the area for individual response</p> | <p>Indicator 3. Staff carrying out the assessment have received specific training and have specific expertise on how to assess special needs.</p> |
| | <p>Indicator 4. The assessment evaluates the following areas as a minimum: vulnerabilities, risks, harm factors as well as protective factors and coping mechanisms.</p> |
| | <p>Indicator 5. The applicant receives written and oral information about the assessment.</p> |
| | <p>Indicator 6. The assessment is always conducted in a language that the applicant understands or is reasonably supposed to understand.</p> |
| | <p>Indicator 7. The applicant is informed about and given the possibility to request a specific gender of the assessor and interpreter.</p> |
| | <p>Indicator 8. The applicant is informed about and given the possibility to request to be accompanied by a support person and/or legal representative.</p> |
| | <p>Indicator 9. The assessment is conducted in a safe and confidential environment.</p> |
| <p>Standard 8. The assessment is conducted in a timely manner and periodic follow-up of the case is established</p> | <p>Indicator 1. The assessment takes place as soon as vulnerabilities are identified.</p> |
| | <p>Indicator 2. Follow-ups are regularly scheduled according to the needs of the applicant.</p> |
| <p>Standard 9. There is an effective system to record the assessment of the special needs of applicants in a vulnerable situation.</p> | <p>Indicator 1. The conclusions of the assessment are recorded in the applicant's file.</p> |
| | <p>Indicator 2. The document where this information is recorded is available to the applicant.</p> |
| | <p>Indicator 3. Where national law allows, information on the assessment of the needs of applicants in a vulnerable situation is gathered and analysed.</p> |



| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| Referral and coordination | Standard 10. Applicants in a vulnerable situation and with special needs are referred for further assessment and/or adequate support. | Indicator 1. If necessary and with the consent of the applicant, the applicant is referred to the relevant authorities and/or available assistance. |
| | | Indicator 2. If applicable, the applicant is referred to the national referral mechanisms and procedure according to their needs. |
| | | Indicator 3. A workflow is in place that guarantees the appointment of a representative for applicants without legal capacity in a timely manner when national law requires it. |
| | | Indicator 4. Immediate follow-up and special attention are provided to urgent cases. |
| | | Indicator 5. Logistical support is provided to the applicant in a vulnerable situation to facilitate the immediate next steps of the procedure |
| | | Indicator 6. Up-to-date information on the authorities or available services to which an applicant can be referred for further assessment and/or adequate support is available and staff are informed. |
| | Standard 11. A mechanism defines how to exchange information on individual cases between the responsible authorities or entities involved in the asylum procedure and in reception. | Indicator 1. There are guidelines on how information is exchanged between the different authorities and other entities involved in the asylum procedure and in reception. |
| | Standard 12. A mechanism defines coordination and cooperation between authorities and service providers | Indicator 1. There are guidelines on how information on individual cases is exchanged between the different authorities and service providers. |
| | | Indicator 2. Collaboration agreements are established between the competent authority |



| Cross-cutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| | | and the service providers to allow referral to specialised support if needed. |
| | | Indicator 3. Multidisciplinary meetings are organised on a regular basis with relevant service providers to keep up to date on needs. |
| Confidentiality | Standard 13. Confidentiality and data protection requirements of all recorded, processed, stored and communicated data related to the applicant are respected. | Indicator 1. Information regarding applicant's special needs is recorded, processed, stored and communicated with the consent of the applicant, unless national law provides for cases in which reporting is compulsory. |
| | | <p>Indicator 2. The applicant receives written and oral information on:</p> <ul style="list-style-type: none"> • the objective of recording, processing, storing and communicating personal data and data concerning health; • potential recipients of personal data and data concerning health; • how long the data will be kept; • how to access data and rectify it; • how to delete data; <p>how to withdraw consent at any time.</p> |
| | | Indicator 3. Appropriate safeguards are put in place and applied regarding the confidential handling of information about special needs. |



| Standards and indicators on vulnerability specific to reception | | |
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| Prevention | Standard 14. Measures to prevent and mitigate the emergence and/or aggravation of vulnerabilities are implemented. | Indicator 1. Adequate safety and security measures for applicants in a vulnerable situation are in place. |
| | | Indicator 2. Health prevention measures are implemented to prevent the emergence of vulnerability or the deterioration of the situation of vulnerability. |
| | | Indicator 3. Measures to prevent the appearance and/or the aggravation of mental health-related issues are implemented. |
| | Standard 15. The general well-being of all applicants, in particular those in a vulnerable situation, is supported. | Indicator 1. Resilience-building, leisure and group activities are regularly offered and promoted to all applicants, particularly for those in a vulnerable situation. |
| | | Indicator 2. Community engagement activities take place, facilitated by specialised or trained personnel. |
| | | Indicator 3. Appropriate common areas for indoor and outdoor activities are provided according to the needs. |
| Participation and engagement in areas that affect the daily life in the reception facility of applicants in a vulnerable situation | Standard 16. Necessary procedures are in place to ensure that applicants in a vulnerable situation are regularly involved in areas that affect their daily life in the reception facility. | Indicator 1. Actions are taken to ensure that applicants in a vulnerable situation are enabled to voice their views on a regular basis. |
| | | Indicator 2. All means provided to applicants to voice their views ensure the inclusion and representation of different profiles of applicants. |
| | | Indicator 3. The means used to ensure that applicants voice their views are tailored to special needs and circumstances. |
| | | Indicator 4. Actions are taken to ensure that applicants in a vulnerable situation engage in activities carried out in the reception facility. |
| Complaint and response mechanism | Standard 17. The complaint and response mechanism | Indicator 1. Specific arrangements ensure that applicants in a situation of vulnerability can lodge a complaint. |



| Standards and indicators on vulnerability specific to reception | | |
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| | is accessible to applicants in a vulnerable situation | Indicator 2. Information materials and sessions on the existence and functioning of the complaint mechanism takes into consideration age, gender and any other characteristics or vulnerability of the applicant. |
| | | Indicator 3. Legal or other representatives are adequately informed on the complaint and response mechanism, according to national law. |
| | Standard 18. Complaints dealing with situations of increased vulnerability or exposure to the heightened risk of vulnerability are examined and responded to with priority. | Indicator 1. Criteria are in place to define priority situations. |
| | | Indicator 2. Staff are aware of which cases need to be prioritised. |
| | Standard 19. Information on complaints and responses that deal with vulnerabilities and special needs are available. | Indicator 1. Disaggregated information on complaints and responses that deal with vulnerabilities and special needs are recorded and collected. |
| Special reception conditions | Standard 20. An effective mechanism to respond to special needs in a timely manner is in place. | Indicator 1. Written guidelines on how to respond to the most common special needs are provided to all staff and regularly updated. |
| | | Indicator 2. A system estimates and anticipates the resources needed to respond to special needs. |
| | | Indicator 3. The mechanism to respond to special needs is regularly evaluated and updated accordingly. |
| | Standard 21. Special reception needs are | Indicator 1. A case manager is appointed to ensure follow-up and that a consistent approach is used in the response. |



| Standards and indicators on vulnerability specific to reception | | |
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| | <p>responded to in a holistic manner.</p> | <p>Indicator 2. Staff members with specialised expertise are available for consultation by the case manager when needed to ensure that the response covers all the relevant areas.</p> |
| | | <p>Indicator 3. A document covering all the relevant areas of response is produced.</p> |
| <p>Standard 22. The (re)allocation process takes into account the needs of applicants.</p> | | <p>Indicator 1. Data on the availability of reception places suitable for applicants with special needs is available at central or local level.</p> |
| | | <p>Indicator 2. Guidelines and criteria are in place to determine the most suitable accommodation in respect of the special needs and individual situation.</p> |
| | | <p>Indicator 3. The outcome of the assessment of special needs is taken into account in the (re)allocation process.</p> |
| | | <p>Indicator 4. Reception facilities receive information on the (re)allocation of persons with special needs before the arrival of the applicant.</p> |
| | | <p>Indicator 5. When an applicant is reallocated to a more suitable reception facility, the individual file of persons with special needs is transferred to ensure the continuity of treatment with respect of data protection and confidentiality requirements.</p> |
| | | <p>Indicator 6. Transportation to the reception facility is adapted to the special needs of the applicant.</p> |
| <p>Standard 23. An effective mechanism to prioritise the (re)allocation of applicants with special needs is in place.</p> | | <p>Indicator 1. Criteria on the basis of safety and health considerations define priority cases for (re)allocation.</p> |
| | | <p>Indicator 2. (Re)allocation of priority cases is done as early as possible and in line with national law.</p> |



| Standards and indicators on vulnerability specific to reception | |
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| <p>Standard 24. Suitable accommodation is available to provide response to the special needs of the applicants</p> | <p>Indicator 1. Infrastructure conditions meet the applicant’s special needs.</p> |
| | <p>Indicator 2. A separate accommodation area within the reception facility is provided according to the special needs of the applicants.</p> |
| | <p>Indicator 3. A protected area within the reception facility is available for applicants waiting to be transferred to a specialised facility.</p> |
| | <p>Indicator 4. Alternatives to collective accommodation are available to allocate applicants according to their special needs.</p> |
| | <p>Indicator 5. Secure accommodation and safe shelters are offered when there are safety and security concerns.</p> |
| <p>Standard 25. The reception facility where applicants with special needs are accommodated is located in a suitable area.</p> | <p>Indicator 1. Information about the local environment and services in the vicinity of the reception facility is available and used to determine the suitability of the location where applicants with special needs are accommodated.</p> |
| | <p>Indicator 2. Specialised services are accessible according to the special needs of the applicants.</p> |
| <p>Standard 26. Access to the necessary and adequate healthcare is ensured according to the needs of the applicants.</p> | <p>Indicator 1. Applicants with special needs have access to specialised services, available either inside or outside the reception facilities at a reasonable distance.</p> |
| | <p>Indicator 2. A specific list of specialised medical care providers is available.</p> |
| | <p>Indicator 3. Referral systems between reception facilities and specialised medical care providers are in place.</p> |
| | <p>Indicator 4. The necessary healthcare, including prescribed medication, is provided free of charge or is economically compensated according to national law.</p> |



| Standards and indicators on vulnerability specific to reception | | |
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| | | <p>Indicator 5. Arrangements for the safe storage and distribution of prescribed medication are in place within the reception facility, when needed.</p> |
| | | <p>Indicator 6. Specific arrangements ensure effective communication between persons with special needs and the medical staff.</p> |
| | <p>Standard 27. Access to the necessary social care for applicants with special needs, including social counselling and day-to-day care is provided, if needed.</p> | <p>Indicator 1. Applicants with special needs have access to necessary social services, available either inside or outside the reception facilities at a reasonable distance.</p> |
| | | <p>Indicator 2. Access to specialised care facilities is provided to applicants with special needs, if needed.</p> |
| | | <p>Indicator 3. The necessary social care is provided free of charge or economically compensated according to national law.</p> |
| | | <p>Indicator 4. Specific arrangements ensure effective communication between persons with special needs and social care providers.</p> |
| | | <p>Indicator 5. The social development of persons with special needs is continuously monitored and supported.</p> |
| | | <p>Standard 28. Access to education is facilitated for child applicants.</p> |
| | <p>Indicator 2. Specific arrangements are in place within the accommodation facilities or other suitable locations when access to the mainstream education is exceptionally and temporarily not possible.</p> | |
| | <p>Indicator 3. School materials, school transportation and internet connection are provided to support access to education.</p> | |



| Standards and indicators on vulnerability specific to reception | | |
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| | Standard 29. Employability services include applicants with special needs. | Indicator 1. Services that increase the ability to be employed are available and accessible to applicants with special needs. |
| | | Indicator 2. Special adaptations or initiatives for applicants with special needs are in place to support them in accessing the labour market. |

| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| Access to the asylum procedure | Standard 30. Conditions are in place to ensure that adequate support is available at the early stage of the procedure. | Indicator 1. Staff of any authority that might receive an application for international protection are trained on how to detect indicators of vulnerabilities and on how to refer the applicant to the appropriate authorities and services. |
| | | Indicator 2. Staff is available to provide extra support to applicants in a vulnerable situation with the making of their application. |
| | | Indicator 3. If vulnerabilities are identified, the registration and lodging of the application for international protection are prioritised when necessary. |
| | Standard 31. Adequate support is provided for registering and lodging the application of applicants in a vulnerable situation. | Indicator 1. Where national law requires an interview for registering and lodging an application, the interview of the applicant in a vulnerable situation is carried out by officers trained in dealing with such cases. |
| | | Indicator 2. Where national law requires an interview for registering and lodging the application, interpreters experienced and/or trained in communicating with applicants in a vulnerable situation are preferred. |
| | | Indicator 3. Where national law requires an interview for registering and lodging the application, whenever possible, the officer and the interpreter are the gender preferred by the applicant. |
| | | Indicator 4. Representatives are appointed as soon as possible to allow unaccompanied minors |



| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| | | and adults without legal capacity to be assisted during the lodging interview. |
| | | Indicator 5. Where national law requires an interview for registering and lodging the application, the time allocated for the registration and lodging interview takes into consideration the needs of the applicant. |
| | | Indicator 6. Criteria to establish which cases need to be flagged to the relevant authority for prioritisation of the examination procedure are defined and applied. |
| | | Indicator 7. Dependent adults with legal capacity for whom indicators of vulnerabilities have been detected are informed of the possibility to lodge a separate application in a manner adapted to their specific circumstances. |
| | Standard 32. Suitable rooms for the registration and lodging of applications are available according to the applicant's special needs. | Indicator 1. The location for the registration and lodging of the application is accessible to the applicant according to their particular special needs. |
| | | Indicator 2. Rooms ensure confidentiality and are free from disturbances. |
| | | Indicator 3. In cases where the applicant needs the assistance of an authorised support person during the registration and lodging of the application, the room is big enough to accommodate the presence of additional people. |
| | | Indicator 4. Rooms have a friendly and welcoming environment. |
| | Standard 33. A mechanism to assess whether adequate support can be provided to an applicant in a vulnerable situation in the framework of the border/accelerated procedure is in place. | Indicator 1. An individual assessment of the support available is carried out and recorded. |
| | | Indicator 2. The applicant is informed about the result of the assessment and the procedure to which they are channelled. |



| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| | <p>Standard 34. When adequate support and/or special procedural guarantees cannot be provided in accelerated/border procedures, the applicant is exempted and channelled to the regular procedure.</p> | <p>Indicator 1. The exemption from the accelerated/border procedures is done as soon as it is clear that support to special needs cannot be provided.</p> |
| | | <p>Indicator 2. When border procedures are no longer applicable, the applicant is allowed to enter the territory.</p> |
| Interview | <p>Standard 35. Representatives, legal representatives and other authorised support persons are able to take part in the procedure at all relevant stages.</p> | <p>Indicator 1. Legal and other representatives can access the files according to national law and are allowed to attend the personal interview.</p> |
| | | <p>Indicator 2. When an applicant requests for a family member or other authorised support person to be present during the interview, the request is assessed according to the needs of the applicant ensuring that there are no conflicts of interest.</p> |
| | | <p>Indicator 3. When there are indicators that the presence of family members may affect the ability of the applicant to substantiate their claim, measures are taken to avoid their involvement in the procedure.</p> |
| | <p>Standard 36. The scheduling and invitation to the personal interview take into consideration the special needs of the applicant.</p> | <p>Indicator 1. If special needs are known at the time of the preparation of the personal interview, the personal interview is allocated to case officers trained to address vulnerabilities.</p> |
| | | <p>Indicator 2. If special needs are known at the time of the preparation of the personal interview, the personal interview is allocated to interpreters experienced and or/trained in communicating with applicants in a vulnerable situation.</p> |
| | | <p>Indicator 3. Whenever possible, the assigned case officer and the interpreter are the gender preferred by the applicant.</p> |



| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| | | <p>Indicator 4. The time slot allocated for the interview is adapted according to the special needs of the applicant.</p> |
| | | <p>Indicator 5. Criteria to prioritise or postpone the interview are in place.</p> |
| | | <p>Indicator 6. Remote interview options are available if the individual special needs allow for it.</p> |
| | | <p>Indicator 7. A mechanism is in place to ensure that the applicant and the relevant participants are effectively and timely informed about the date and place of the personal interview and to ensure that the applicant is able to attend.</p> |
| | <p>Standard 37. Suitable rooms for the personal interview are available according to the applicant's special needs.</p> | <p>Indicator 1. The facility where the personal interview takes place is accessible to the applicant according to their particular special needs.</p> |
| | | <p>Indicator 2. Rooms ensure confidentiality and are free from disturbances.</p> |
| | | <p>Indicator 3. In cases where the applicant needs the assistance of a third party during the personal interview, the room is big enough to accommodate the presence of additional people.</p> |
| | | <p>Indicator 4. Rooms have a friendly and welcoming environment.</p> |
| | <p>Standard 38. Information on the situation of the applicant and their needs is available to the case officer for the preparation of the case.</p> | <p>Indicator 1. A mechanism is in place to ensure that information from other organisations and authorities on existing or potentially existing vulnerabilities are shared and recorded in the applicant's file.</p> |
| | | <p>Indicator 2. Guidelines and other instruments on interviewing applicants with special needs are available and accessible to case officers.</p> |
| | | <p>Indicator 3. Country of origin information on groups at risk is available and taken into account.</p> |



| Standards and indicators on vulnerability specific to the asylum procedure | |
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| <p>Standard 39. The preparation of the interview is done in accordance with the special needs of the applicant on a case-by-case basis.</p> | <p>Indicator 1. Special arrangements are made in accordance with the special needs of the applicant.</p> |
| | <p>Indicator 2. If needed, arrangements are made to allow any support persons accompanying the applicant to be present during the interview.</p> |
| | <p>Indicator 3. The interpreter is briefed and prepared on the nature and sensitivity of the case.</p> |
| <p>Standard 40. When conducting the interview, adequate support is provided to applicants in need of special procedural guarantee.</p> | <p>Indicator 1. The confidentiality, purpose and procedure of the interview, and the role of the interpreter and of everybody present during the interview, are explained in a manner that is targeted to the particular needs of the applicant.</p> |
| | <p>Indicator 2. Interviewing techniques appropriate for the special needs of the applicant are applied.</p> |
| | <p>Indicator 3. The duration of the interview and breaks are adapted based on the special needs of the applicant.</p> |
| | <p>Indicator 4. If the applicant appears not to be fit to be interviewed, the interview is postponed, their personal condition reassessed and the interview is rescheduled or omitted accordingly.</p> |
| | <p>Indicator 5. If other special needs appear at any stage of the interview, these needs are responded to accordingly.</p> |
| | <p>Indicator 6. The case officer is proactive in supporting the applicant in substantiating the application.</p> |
| | <p>Indicator 7. Guidelines, training and other capacity building activities are in place to support case officers in conducting interviews with applicants with special needs.</p> |
| <p>Standard 41. Adequate support is</p> | <p>Indicator 1. The case officer ensures that the applicant was able to sufficiently substantiate</p> |



| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| | <p>provided to applicants with special needs to present all aspects related to their application.</p> | <p>their claim, taking into account their particular circumstances.</p> |
| | | <p>Indicator 2. When additional elements are needed from the applicant to substantiate the case, information and support on how to collect these elements and how to share them with the determining authority is provided.</p> |
| | | <p>Indicator 3. Information on the available support services is provided based on the needs that emerged during the interview.</p> |
| | | <p>Indicator 4. The interview transcript accurately records questions, answers and other events that occurred during the interview.</p> |
| Decision | <p>Standard 42. Situations of vulnerability and special needs are taken into account in the decision-making process.</p> | <p>Indicator 1. When vulnerabilities are identified, the case is assessed and the decision is made by officers with expertise in vulnerabilities.</p> |
| | | <p>Indicator 2. Guidelines, training and other capacity building activities are in place to support case officers with assessing information and evidence in relation to vulnerability in the credibility and risk assessments and the decision drafting.</p> |
| | | <p>Indicator 3. The applicant's circumstances related to vulnerabilities are duly considered when assessing whether they have made a genuine effort to substantiate their claim.</p> |
| | | <p>Indicator 4. When applying the credibility indicators, all evidence related to the vulnerabilities and special needs of the applicant and the possible factors of distortion are taken into account.</p> |
| | | <p>Indicator 5. Vulnerabilities are taken into account whenever likely to generate or aggravate risks of persecution or serious harm upon return to the country of origin.</p> |
| | | <p>Indicator 6. Medical examinations of specific vulnerabilities required in order to assess the</p> |



| Standards and indicators on vulnerability specific to the asylum procedure | | |
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| | | application are paid for out of public funds and a system is in place to facilitate the applicant's access to the examination. |
| | Standard 43. Unless granting refugee status, the written decision refers to identified and assessed vulnerabilities. | Indicator 1. The decision mentions the procedural safeguards regarding the applicant's special needs implemented throughout the examination process. |
| | | Indicator 2. The reasoning of the decision includes the assessment of medical evidence and other relevant elements related to the special needs. |
| | | Indicator 3. If the personal interview has been omitted or waived, the reasons and the methods that have been used to gather the information regarding the claim are stated in the decision. |
| | Standard 44. The decision is drafted and notified in a timely manner and taking into consideration the applicant's special needs. | Indicator 1. The decision is drafted considering the personal circumstances of the applicant with special needs and their capacities. |
| | | Indicator 2. The notification of the decision to the applicant with special needs is prioritised. |
| | | Indicator 3. The determining authorities ensure that the notification of the decision preserves the safety of the applicant in a vulnerable situation. |
| | | Indicator 4. The decision is notified to the legally required actors, including legal and other representatives. |

| Crosscutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| Staff capacity, training and well-being | Standard 45. An adequate number of staff members is allocated to provide equal and sufficient support to applicants in a vulnerable | Indicator 1. The number of staff responsible for handling cases of applicants in a vulnerable situation is defined and implemented by the competent authorities. |
| | | Indicator 2. Gender composition is considered among staff members allocated to support applicants in a vulnerable situation. |



| Crosscutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| | <p>situation, including in emergency situations.</p> | <p>Indicator 3. Focal points are appointed to support the case managers in their response to the special needs of the applicants.</p> |
| | | <p>Indicator 4. A plan is developed to ensure the deployment of additional staff in case the number of applicants for international protection rises to ensure the adequate support is available for applicants in a situation of vulnerability.</p> |
| | <p>Standard 46. Staff are sufficiently qualified to provide adequate support to applicants with special needs.</p> | <p>Indicator 1. Minimum qualifications for each position are clearly defined.</p> |
| | | <p>Indicator 2. Each staff member allocated to work with applicants in a vulnerable situation meets the necessary qualifications as specified in their job description to undertake their role, according to the national law.</p> |
| | <p>Standard 47. An appropriate and up-to-date training curriculum on how to identify applicants in a situation of vulnerability and how to assess and respond to the most common special needs is defined.</p> | <p>Indicator 1. A training curriculum for staff lists the minimum training requirements regarding vulnerability according to the roles and responsibilities of staff.</p> |
| | | <p>Indicator 2. Staff receive adequate training courses on vulnerability-related issues according to their roles and responsibilities.</p> |
| | | <p>Indicator 3. A formal attestation of having completed the training courses on vulnerability and special needs is provided.</p> |
| | <p>Standard 48. Specific support is provided to staff working with applicants in a vulnerable situation whose own well-being is affected.</p> | <p>Indicator 1. Information and training courses are provided on how to request and access support.</p> |
| | | <p>Indicator 2. Specific support activities are provided to staff to promote and protect mental and physical well-being.</p> |
| | | <p>Indicator 3. Peer support structures are in place to provide advice and information.</p> |
| | | <p>Indicator 4. Trained focal points or team leaders are appointed and provide additional assistance</p> |



| Crosscutting standards and indicators on vulnerability applicable to reception and asylum procedure | | |
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| | | and coaching to staff dealing with persons with special needs. |
| | Standard 49. Specific support is provided to staff who have experienced a critical incident. | Indicator 1. An independent, trained focal person (or team) is appointed and can be consulted after critical incidents. |
| | | Indicator 2. Clear guidance is in place for managers on how to follow up after a critical incident. |
| | | Indicator 3. Staff and their managers know how to request and access specific support after a critical incident has occurred. |
| Interpreting for applicants in a vulnerable situation | Standard 50. Adequate interpreter support is available to respond to the needs of applicants in a vulnerable situation. | Indicator 1. Interpreter support is provided for at least all common languages. |
| | | Indicator 2. The timeline to find an interpreter is determined. |
| | Standard 51. Interpreters are prepared for communicating with applicants in a vulnerable situation. | Indicator 1. Interpreters receive induction training or information sessions on asylum and the role of the interpreter. |
| | | Indicator 2. Interpreters receive adequate training on vulnerability-related issues. |
| | | Indicator 3. Interpreters receive training courses on ethical standards and on the code of conduct. |
| | | Indicator 4. Glossaries on common terminology related to medical terms, vulnerability and special needs and support services are available for interpreters. |
| | Standard 52. The performance of the interpreters is systematically evaluated. | Indicator 1. The feedback of applicants and/or staff on the performance of the interpreters is regularly collected. |
| | | Indicator 2. A procedure exists to address poor performance and/or breaches of the code of conduct's ethical and professional standards. |



Annex 3. Glossary

This glossary includes working definitions used by the EUAA in the drafting of this guidance as well as drawing on a wide range of legal and other relevant sources in the field of asylum and migration.

| Term | Definition | Source |
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| Access to the asylum procedure | The obligation of the Member States to ensure that persons who are in need of international protection are given an effective opportunity to make such an application to the respective authority. | EUAA terminology |
| Accommodation facility (or reception facility) | Any place for the housing of applicants, collective or not. It encompasses accommodation centres as well as private houses, flats, hotels or other premises adapted for housing applicants (in accordance with Article 18(1), point (c) RCD (recast)). | EUAA working definition used for the purpose of this guide |
| Applicant for international protection | A third-country national or a stateless person who has made an application for international protection in respect of which a final decision has not yet been taken. | Article 2(i) QD (recast)) |
| Applicant in a vulnerable situation | An applicant whose ability to understand and effectively present their case or fully participate in the process and/or benefit from the reception conditions is limited due to their individual circumstances. | EUAA Vulnerability Strategy |
| Applicant in need of special procedural guarantees | An applicant whose ability to benefit from the rights and comply with the obligations provided for in the APD (recast) is limited due to individual circumstances. | Article 2(d) APD (recast) |
| Asylum officer | A member of the staff of the national competent bodies, authorised to process asylum applications, by conducting personal interviews, gathering, analysing and assessing facts and documentation and drafting a proposal for the decision on asylum. | EUAA terminology |
| Asylum seeker | In the global context, a person who seeks protection from persecution or serious harm in a country other than their own and awaits a decision on their application for refugee status under relevant international and national instruments. | European Migration Network glossary |



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| Applicant with special reception needs ⁽⁷⁵⁾ | A vulnerable person, in accordance with Article 21 RCD (recast), who is in need of special guarantees in order to benefit from the rights and comply with the obligations provided for in aforementioned directive. | Article 2(k) RCD (recast) |
| Case officer | A person who conducts parts of the asylum procedure with applicants for international protection, such as the personal and/or other interviews. | EUAA terminology |
| Conditions for the reception of applicants for international protection | The full set of measures granted to applicants for international protection by Member States under the RCD (recast). | EUAA terminology |
| Effective access to international protection | Procedures in place in Member States to ensure that persons in need of international protection are able to make such an application, by providing them with information about their rights and obligations and referring them to the appropriate authority. | EUAA terminology |
| Examination of an application for international protection | Any examination of, or decision or ruling concerning, an application for international protection by the competent authorities in accordance with APD (recast) and the QD (recast), except for procedures for determining the Member State responsible in accordance with the Dublin III regulation. | Dublin III regulation |
| First-contact official | Border guards, police, immigration authorities and personnel of detention facilities that play a key initial role in identifying, providing information to and referring persons who may be in need of protection and access to the asylum procedure. | EUAA terminology |
| Gender-based violence against women | Acts recognised as a form of persecution and/or serious harm, directed against women or affecting women disproportionately, that give rise to refugee status or complementary/subsidiary protection. | EUAA terminology |
| Guardian | An independent person who safeguards a child's best interests and general well-being, and to this effect complements the limited legal capacity of the child. The guardian acts as a statutory representative of the child in all | United Nations Committee on the Rights of the Child Committee, General comment No 6 ⁽⁷⁶⁾ ; UN General Assembly |

⁽⁷⁵⁾ On 'special needs' v. 'specific needs' see fn. 12.

⁽⁷⁶⁾ United Nations Committee on the Rights of the Child, [General comment No. 6 \(2005\): Treatment of Unaccompanied and Separated Children Outside their Country of Origin](#), 1 September 2005, CRC/GC/2005/6;



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| | proceedings in the same way that a parent represents his or her child. | resolution A/RES/64/142 ⁽⁷⁷⁾ ; European Union Agency for Fundamental Rights (FRA) handbook ⁽⁷⁸⁾ |
| Individual file | File (hard copy or electronic file) compiling all the information about a resident and their family members, relevant for the reception officers to assess the resident's needs and profile. The file has to be regularly updated. It is confidential and should follow the person in case of transfer to another reception facility. | EUAA working definition used for the purpose of this guide |
| Intake | Formal or informal procedure implemented by the reception officers upon arrival of an applicant in a reception facility. | EUAA working definition used for the purpose of this guide |
| Legal representative | Legal adviser or qualified lawyer/legal professional 'who provides legal assistance, speaks on behalf of the child and legally represents them in written statements and in person before asylum or other legal proceedings as provided in national law. | FRA handbook |
| Lodging an application | Act of formalising the application for international protection with the determining authority or any other body charged with lodging as per national practice. | European Migration Network glossary |
| Making an application | Act of expressing, in any way and to any authority, one's wish to obtain international protection. | EUAA terminology |
| Quality assessor | In the context of migration, a professional conducting specific assessments to determine whether the quality standards regarding the examination of applications for international protection have been met. | EUAA terminology |
| Reception capacity | Number of existing places in national reception facilities, regardless of the types of places (collective, individual reception places, other). | EUAA working definition used for the purpose of this guide |
| Reception facility (or accommodation facility) | Any place for the housing of applicants, collective or not. It encompasses accommodation centres as well as private houses, flats, hotels or other premises adapted for housing applicants (in accordance with Article 18(1), point (c) RCD (recast)). | EUAA working definition used for the purpose of this guide |

⁽⁷⁷⁾ UN General Assembly, [Guidelines for the Alternative Care of Children: resolution/adopted by the General Assembly](#), 24 February 2010, A/RES/64/142

⁽⁷⁸⁾ FRA, [Handbook on Guardianship for children deprived of parental care](#), June 2014.



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| Reception officers | Practitioners who are in direct contact with applicants for international protection in a reception context, irrespective of their employer (the state, a non-governmental organisation, a private contractor, etc.). These practitioners may include social workers, education and health care staff, registration officers, interpreters, facility managers, administration/coordination staff, etc. | EUAA terminology |
| Reception system | The collective infrastructure consisting of facilities, equipment, services, human resources, including legal framework and funding, used for to provide adequate reception conditions for applicants for international protection during the asylum process. | EUAA terminology |
| Referral mechanism | In the context of migration, cooperative action aimed at identifying, protecting and assisting persons in need of international protection and persons in a vulnerable situation, by referring them to the relevant public authorities | EUAA terminology |
| Registration of an application for international protection | Procedure by which an authority competent under national law makes an official record of an application for international protection, submitted to this authority by a third-country national or stateless person. | EUAA terminology |
| Registration officer | Member of the staff of national competent authorities, involved in any stage of the registration and lodging of applications for international protection. | EUAA terminology |
| Representative | A person or an organisation appointed by the competent bodies in order to assist and represent an unaccompanied [child] in [international protection] procedures ... with a view to ensuring the best interests of the child and exercising legal capacity for the [child] where necessary. | Article 2(n) APD (recast); Article 2(j) RCD (recast) |
| Resident | Any person who is entitled to stay in a reception facility and is accommodated therein, irrespective of their legal status. | EUAA working definition used for the purpose of this guide |
| Response | The response to the special needs of a person in a situation of vulnerability aims at providing adequate support. It is key to preventing the aggravation of the applicant's pre-existing condition or the emergence of new risk factors or vulnerabilities. | EUAA working definition used for the purpose of this guide |



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| Special procedural guarantee | A specific support measure put in place in order to create the conditions that allows applicants for international protection with special needs to benefit from all their rights and comply with all the obligations throughout the duration of the asylum procedure. | EUAA terminology |
| Vulnerability | In the context of migration and international protection, a characteristic or situation of a person or group of persons in need of special reception conditions and/or additional procedural guarantees, which may also affect their qualification for international protection. | EUAA terminology |
| Vulnerability assessment | A specific examination of an applicant for international protection for the purpose of identifying any need for special reception conditions and/or procedural guarantees and referring them to the appropriate authorities and services for adequate support. | EUAA terminology |
| Vulnerability expert | Staff involved in the asylum procedure and/or in reception, with specific knowledge, expertise or responsibility for identifying special needs and providing advice relating to reception conditions and procedural guarantees for applicants to adequately respond to and support these needs. | EUAA terminology |
| Vulnerability identification | A continuous exercise aimed at detecting indicators, signs or manifestations of a vulnerability or vulnerabilities present in the person. To ease the identification, professionals in contact with the person should be knowledgeable of indicators and signs of symptoms commonly present in cases of previously identified applicants in a vulnerable situation. | EUAA working definition used for the purpose of this guide |
| Vulnerability indicator | A manifestation of factors and/or circumstances which may lead to the identification of vulnerability, special procedural needs and/or an applicant's needs of additional social, material or medical assistance. | EUAA terminology |
| Vulnerability pre-identification | This step includes the observations of the officer of vulnerability indicators, the self-identification of the person, or the documents or evidence certifying the vulnerability or its indicators. This step is in contrast with a fully-fledged identification or assessment of special needs. This exercise does not entail an in-depth interview nor an evaluation of the impact of the experiences of such as violence and trauma. | EUAA working definition used for the purpose of this guide |



Annex 4. EUAA resources

| Resource | Description | Type |
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| Assessment of Reception Conditions (ARC) | <p>The Assessment of Reception Conditions tool aims to support national authorities and operators working within reception facilities to assess that reception conditions are in line with the standards and indicators elaborated in EASO, Guidance on Reception Conditions: Operational standards and indicators, 2016 and EASO, Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators, 2018.</p> <p>Developed by the EUAA in close cooperation with a working group of experts from national reception authorities, the tool is available on mobile and in a desktop version. It is an offline tool that does not require an internet connection once loaded. The tool has several functionalities: it can generate a report as well as statistics and graphs of all the sections that have been assessed, summarising how the centre performs against the standards.</p> | IT tool |
| Case Law Database | <p>The EUAA Case Law Database is an online public platform developed to manage, store and share case-law concerning the implementation of the CEAS at national and European level, as well as information on new asylum jurisprudence issued by national and international courts (covering both the Court of Justice of the European Union and the European Court of Human Rights).</p> | Online database |
| Critical Incident Management in the field of Asylum and Reception | <p>This report presents the results of a survey on the topic of incident management conducted in 2021 across EU+ countries. The survey was designed for first-line officers working in reception facilities and those conducting personal interviews. It focuses on the types of critical incidents observed in reception and the personal interview situation; understanding how incidents are currently documented, reported and responded to; and where and what the main gaps are. The findings will facilitate the design of tailored EUAA support to Member States.</p> | Guide |
| Guidance on Contingency Planning in the Context of Reception | <p>Published in 2018, the guidance is addressed to reception officers, policy makers and managers of national reception authorities. It aims to assist reception authorities in their preparedness and ability to cope with situations of mass influx or unexpected events, by providing detailed guidance on contingency planning on reception to facilitate early</p> | Guide |



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| | action, manage future uncertainty and help anticipate and solve problems related to potential high-influx situations. | |
| Let's Speak Asylum | Let's Speak Asylum is the portal of reference for information providers and professionals designing communication and information provision activities in the field of asylum and reception. It aims to support the harmonised implementation of the Common European Asylum System (CEAS) in EU+ countries. Developed by the EUAA, it offers methodological guidance and practical tools on the provision of information in the context of asylum, Dublin procedure, reception and resettlement. | Portal |
| Modular Approach to Reception: Container site designs | <p>Developed by the EUAA in close collaboration with experts from national reception authorities of EU+ countries, the guide intends to support primarily reception authorities by offering operational and practical solutions for the design and management of modular accommodation centres, in accordance with the EUAA standards and principles, as contained in the EASO, Guidance on Reception Conditions: Operational standards and indicators, 2016 and EASO, Guidance on Reception Conditions for Unaccompanied Children: Operational standards and indicators, 2018.</p> <p>The guide promotes a model to design accommodation centres built from containers based on nine key principles (organic design, functions and locations of services, target groups, uniform layout, community-centre approach, modular units based on EUAA standards, safety and security, perspective of the resident, internal and external communication and coordination).</p> | Guide |
| Practical Guide on Information Provision – Access to the asylum procedure | This practical guide was developed to support information providers during the access to the asylum procedure. The guide describes information topics that need to be covered in the context of access to the procedure and provides methodological guidance in order to ensure efficient information provision. This practical guide was developed in the context of the EUAA Let's Speak Asylum project, which provides a standardised set of practical tools for the implementation of information provision activities during the asylum procedures, the Dublin procedure, reception and resettlement. For more information visit the EUAA 'Let's speak asylum' portal . | Guide |
| EUAA– Intergovernmental Consultations on Migration, Practical Guide on Interpretation | This practical guide targets interpreters working in the asylum procedure. It starts with key information on the asylum procedure and a focus on the personal interview. It continues with considerations on key attitudes that any interpreter working in the asylum procedure must uphold. It then provides specific guidance on how to interpret during an asylum interview, including in case of remote | |



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| <p><u>in the Asylum Procedure</u></p> | <p>interpretation. Furthermore, the guide presents considerations relating to applicants in vulnerable situations and strategies to interpret for them. Finally, it includes a focus on how interpreters can take care of their well-being.</p> | |
| <p><u>Practical Guide on Registration</u></p> | <p>This practical tool presents a comprehensive approach for the lodging of applications for international protection. The tool is based on the relevant EU legal provisions and good practices gathered from Member States. It provides practical guidance to registration officers in their daily work and supports managers in strengthening the national registration process. The tool provides structured guidance on registration procedures, including procedures related to special needs and Dublin considerations.</p> | <p>Guide</p> |
| <p><u>Practical Recommendations on Conducting Remote/Online Registration (Lodging)</u></p> | <p>This document was developed in the context of the COVID-19 emergency situation. The document focuses on alternative solutions for registration (lodging) of an application for international protection. It provides practical recommendations on how to introduce remote, online or IT elements into the registration process in order to render the overall process more efficient and better organised. The guidance has been developed as a result of thematic meetings held by the EASO Asylum Processes Network and builds on information provided by EU+ countries, good practices, as well as EASO practical tools. Furthermore, this document elaborates procedural safeguards and practical recommendations that asylum authorities may want to consider when facilitating the lodging of applications for international protection online/remotely.</p> | <p>Guide</p> |
| <p><u>EUAA–Frontex, Practical Tools for First-Contact Officials</u></p> | <p>As a first point of contact for third-country nationals reaching the EU, the first-contact officials play a crucial role in guaranteeing effective access to international protection.</p> <p>The main aim of these tools is to support them in fulfilling their obligations to ensure access to the asylum procedure for those who may be in need of international protection. The tools can help to identify persons who may wish to apply for protection and give guidance on follow-up assistance and procedural guarantees that should be provided to such persons (provision of information, registration, referral and other assistance and procedural guarantees).</p> | <p>Guide, poster, pocket book, leaflet, video</p> |
| <p><u>Practical Guide: Personal Interview</u></p> | <p>Being the first practical tool developed within the Agency Quality Matrix process, this practical guide is designed to assist case officers across the EU and beyond in their daily work by providing a practical checklist and brief guidance in five stages relating to the conduct of the personal interview. This includes preparation for the personal interview (Section 1), opening the interview and providing information (Section 2), conducting the interview (Section 3), including guidance</p> | <p>Guide</p> |



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| | regarding the substance of the application which needs to be explored during the interview (Section 4), and closing the interview and post-interview actions (Section 5). | |
| <u>Practical Guide on Political Opinion</u> | This practical guide aims to provide case officers with a framework for the examination of applications for international protection based on political opinion. | Guide |
| <u>Practical Guide – Interviewing Applicants with Religion-based Asylum Claims</u> | This practical guide aims to help case officers conduct fairer and more efficient interviews in view of the complexity and challenges posed by religion-based asylum claims. The guidance provided seeks to improve case officers' understanding of the concept of religion in the context of international protection and to support the creation of appropriate conditions for the personal interview. Finally, guidance is offered on the elements that should be explored during the personal interview, tailored to specific types of commonly encountered religion-based asylum claims, i.e. conversion to another religion, leaving one's religion to adhere to atheistic, agnostic or non-religious systems of belief, religious minorities, conscientious objectors to military service for reasons of religion and gender-based religious persecution. | Guide |
| <u>Practical Guide on Subsequent Applications</u> | The aim of this tool is to provide guidance to case officers on the examination process and the special procedural rules for assessing subsequent applications. To this end, the tool is focusing on three main aspects: specific rules of procedure applied for the assessment of subsequent applications; interpretation and application of relevant concepts related to subsequent applications; exploration of the specific situations in which a subsequent application could be submitted. | Guide |
| <u>Practical Guide on the Application Cessation Clauses</u> | This practical guide aims to provide guidance to case officers when examining the application of cessation clauses and to policy officers as well when implementing national workflows in the context of the cessation process. Guidance is provided on the substance of the assessment of the cessation provisions: individual behaviour of the beneficiaries leading to cessation; change of circumstances in the country of nationality / habitual residence; exemptions; legal consequences of cessation; special circumstances when examining cessation. Guidance is also provided on the implementation of the cessation process in practice: workflows; procedural considerations; checklists, points to consider and practical examples in the context of personal interviews on cessation, application of the burden of proof, legal analysis of cessation decisions. The guide also reflects on practical challenges encountered when communicating | Guide |



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| | with beneficiaries and on the organisation of large-scale cessation exercises. | |
| <u>Practical Guide on the Application of the Internal Protection Alternative</u> | This practical tool aims at providing guidance to case officers and decision makers on the internal protection alternative (IPA) and its application. The guide reflects on relevant case law, national practices and provides practical examples for when case officers explore and assess the IPA during all steps of the procedure, such as during the interview and decision-making. The guide outlines the parameters that need to be taken into consideration by case officers when identifying a potential IPA location and when assessing the IPA criteria in order to decide on its application. This includes the examination of safety; travel and admittance; and the reasonableness to settle in the IPA location. This practical guide is complemented by commonly encountered profiles of applicants and points to consider when case officers assess the IPA criteria, as well as with specific considerations regarding the application of IPA in relation to cessation clauses and subsequent applications. | Guide |
| <u>Practical guide on the use of country of origin information by case officers for the examination of asylum applications</u> | This practical tool provides guidance to case officers on the practical use of country of origin information (COI) at different stages of the asylum procedure when preparing and conducting the personal interview and when carrying out the credibility assessment and the risk assessment of the application for international protection. The practical guide is complemented with information about COI sources and practical tips for basic COI research. | Guide |
| <u>Guidance on Membership of a Particular Social Group</u> | This practical tool aims to support Member States in applying the concept of membership of particular social group (MPSG) as one of the 1951 Geneva Convention grounds of persecution in the examination process of applications for international protection. This soft convergence tool provides guidance in applying the same legal criteria and common standards when determining who qualifies for international protection. The guide provides a set of principles and their application, structured in four main parts: legal basis of the concept of MPSG; legal analysis of the MPSG definition; the nexus between MPSG and presence or absence of persecution; commonly encountered profiles for which MPSG might be considered. | Guide |
| <u>Quality Assurance Tool: Examining the application for international protection</u> | The Quality Assurance Tool app offers quality assessors a method to assess systematically the quality of asylum interviews and decisions based on common EU standards. The assessments are carried out through interactive electronic forms. Based on the assessments the tool gives you access to reporting functions which allow you to gain insights in the overall quality of the interviewing and decision-making processes in your office and to identify | Interactive online tool |

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| | possible weaker points for which follow-up actions may be needed. | |
| Information Provision in the Dublin Procedure | Providing information on the Dublin procedure to applicants for international protection is an integral part of the procedure itself. This practical guide was developed to support all officials tasked with providing such information in an effective manner. | Guide |
| Practical Guide on the Welfare of Asylum and Reception Staff | <p>The guide addresses managers, team leaders and coordinators as well as first-line staff working in asylum and reception. It provides methods, tools and a roadmap to support staff well-being and ensure a safe and healthy working environment for asylum and reception professionals working with applicants of international protection. The guide comprises three stand-alone parts:</p> <ul style="list-style-type: none"> - Part I: ‘Standards and policy’ focuses on how authorities could develop a staff welfare strategy, based on suggested standards and indicators. - Part II: ‘Staff welfare toolbox’ details all the practical tools identified as good practices implemented in some EU+ countries. - Part III: ‘Monitoring and evaluation’ supports authorities with designing mechanisms and tools to assess progress made. | Guide |
| Practical Guide on Setting Up and Managing an Arrival or Accommodation Centre (Software) – forthcoming | <p>The guide addresses national and local authorities as well as civil society organisations involved in the set-up and management of arrival centres and accommodation centres. It defines necessary processes and workflows in the main areas of the reception pathway: first entry; registration; medical screening; reception process and organisation of services; accommodation; and ongoing healthcare.</p> <p>The practical guide has been developed by the EUAA together with a dedicated working group of experts from national reception authorities of EU+ countries. The guide is complemented with design principles and examples of layouts developed by an EUAA working group composed by technical experts in site design, infrastructure and planning.</p> | Guide |
| Practical Recommendations on the Provision of Emergency Placement in Private Accommodation for Persons Displaced from Ukraine | <p>The guide was developed in the aftermath of the massive displacement following the Russian invasion in Ukraine in February 2022, with the aim of providing practical recommendations to guide national and local authorities as well as civil society organisations in matching displaced persons with available private accommodation.</p> <p>The practical recommendations complement functioning and existing procedures within EU+ countries, ensuring that safeguards for persons in need of emergency shelter and for</p> | Guide |

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| | those providing such accommodation are put in place in a coordinated, safe, effective and systematic manner. | |
| Referral Toolkit – forthcoming | <p>The toolkit addresses authorities and personnel working directly with applicants for international protection to facilitate the referral of applicants with special needs to adequate support.</p> <p>The tool is composed of three main parts: a) a standardised referral form aimed at facilitating the communication between actors involved in the referral of the applicant, b) a searching tool helping users in finding the services providing needed support, c) a guidance to orientate users on how to adequately conduct a referral.</p> | IT tool |
| Site Assessment/ Building Assessment Tool – forthcoming | <p>The tool aims to support national reception authorities, relevant stakeholders and technical practitioners (e.g. engineers, architects, reception experts, etc.) in assessing whether identified empty sites or existing buildings are suitable to be used as (or transformed into) accommodation centres to host applicants for international protection, based on predefined criteria.</p> <p>Developed by the EUAA in close collaboration with experts from national reception authorities of EU+ countries, the tool has several functionalities: it can generate an assessment report, as well as statistics and graphs related to areas that have been assessed.</p> | IT tool |
| <u>Special Needs and Vulnerability Assessment (SNVA)</u> | The SNVA is an offline application, designed to support Member State authorities in assessing of the needs of persons in a vulnerable situation and facilitating the access to adequate support in view of the particular circumstances of each case. | IT tool |
| <u>Tool for Identification of Persons with Special Needs (IPSN)</u> | The IPSN is an interactive online tool developed to support personnel working directly with applicants for international protection (including non-specialised personnel) to timely identify persons with potential special procedural and/or reception needs. It may be used at any stage of the asylum and reception procedure. | Interactive online tool |
| Vulnerability Pre-identification Tool – forthcoming | This tool is designed to support Member States during the pre-identification phase. It will be integrated into the EUAA Vulnerability Toolkit. | IT tool |
| A set of self-help tools for parents, children and peer support | This set of tools is composed of three pocketbooks and is complemented by <u>instructions</u> to be used by first-line officers directly when working with applicants. The instructions support first line officers in rolling out the psychoeducational material created with a focus on how to manage psychological distress with applicants who might be illiterate | Pocketbooks |



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| | <p>or otherwise benefit from a guided discussion, such as with youth and children.</p> <p>How can I support my child during difficult times? – A self-help tool for parents</p> <p>How can I deal with situations in which my parents seem sad, worried, or angry? – A self-help tool for children</p> <p>How to handle situations when my friend or sibling is sad, angry or does dangerous things? – A self-help tool for peer-support</p> | |
| <p>Psychological First Aid: A brief guide for those working in the first line</p> | <p>This animation explains the concept of Psychological First Aid (PFA) to first line officers by emphasising 5 basic principles: promoting safety, calm, self- and collected efficacy, connectedness and hope. Observing these principles, applicants can be helped to re-establish a sense of safety and calm and to stabilise. Approaching applicants with empathy is crucial for their wellbeing.</p> <p>The animation is complemented by instructions on how to use the animation to create awareness on PFA in first line officers interested in the topic, new recruits and volunteers.</p> | Video animation |
| <p>Early Identification of Signs of Stress</p> | <p>This animation highlights the importance of integrating staff welfare measures within asylum and reception authorities. The animation aims at addressing stress in first-line officers as soon as possible by encouraging staff to actively participate in services offered by their employer.</p> | Video animation |
| <p>EUAA training modules</p> | <p>The EUAA provides a wide range of training modules for the asylum and reception context. The European Asylum Curriculum Training Catalogue offers a detailed description of all available training modules. For further information, visit www.euaa.europa.eu/training.</p> | Training offer |





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