

Flygtningenævnets baggrundsmateriale

Bilagsnr.:	362
Land:	Diverse emner
Kilde:	EUAA
Titel:	Operational Standards and Indicators on Vulnerability-related Aspects in the Asylum Procedure
Udgivet:	november 2025
Optaget på baggrundsmaterialet:	21. januar 2026

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November 2025

On 19 January 2022, the European Asylum Support Office (EASO) became the European Union Agency for Asylum (EUAA). All references to EASO, EASO products and bodies should be understood as references to the EUAA.



Manuscript completed in October 2025

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Luxembourg: Publications Office of the European Union, 2025

Print ISBN 978-92-9418-318-7 doi: 10.2847/1877738 BZ-01-25-065-EN-C

PDF ISBN 978-92-9418-317-0 doi: 10.2847/3677745 BZ-01-25-065-EN-N

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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? The ‘*Operational Standards and Indicators on Vulnerability-related Aspects in the Asylum Procedure*’ are an excerpt from the 2024 ‘*Guidance on Vulnerability in Asylum and Reception*’ ⁽³⁾. The vulnerability standards and indicators contained in that guide and relevant for the asylum procedure are reproposed in this publication, which constitutes Part 2 of the ‘*Operational Standards and Indicators on the Asylum Procedure-Part 1*’ ⁽⁴⁾.

Part 1 provides standards and indicators on the asylum procedure in general in accordance with the Pact on Asylum and Migration ⁽⁵⁾.

Part 2 complements the content with standards and indicators relevant for the vulnerability-related aspects of the asylum procedure. Such standards and indicators are sourced from the 2024 *Guidance on Vulnerability in Asylum and Reception* ⁽⁶⁾.

The structure and format of this Part 2 are similar to the 2024 guidance, with the necessary adjustments to ensure best alignment with Part 1 of the guide.

The 2024 guidance 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

⁽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⁾ EUAA, *Guidance on Vulnerability in Asylum and Reception: Operational standards and indicators*, May 2024, <https://euaa.europa.eu/publications/guidance-vulnerability-operational-standards-and-indicators>.

⁽⁴⁾ EUAA, *Operational Standards and Indicators on the Asylum procedure*, 2025, <https://euaa.europa.eu/publications/operational-standards-indicators-asylum-procedure>.

⁽⁵⁾ European Commission: Directorate-General for Migration and Home Affairs, ‘Pact on Migration and Asylum’, European Commission website, 21 May 2024, https://home-affairs.ec.europa.eu/policies/migration-and-asylum/pact-migration-and-asylum_en

⁽⁶⁾ EUAA, *Guidance on Vulnerability in Asylum and Reception: Operational standards and indicators*, May 2024, <https://euaa.europa.eu/publications/guidance-vulnerability-operational-standards-and-indicators>.

topics during the development of the guidance. Valuable input was also received from the European Commission, the European Union Agency for Fundamental Rights ⁷ (EU). 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 decision and policymakers of national asylum authorities, managers, case officers and first-contact officials. Additionally, this tool is useful for quality officers and legal advisers, as well as any other person working or involved in the field of international protection in the EU context.

How does this guide relate to other EUAA tools? This guide should be primarily used in conjunction with its Part 1, that it complements with vulnerability-related standards and indicators. Other relevant EUAA 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 insofar as they are relevant for the vulnerability-related aspects of the asylum procedure under the new CEAS.

The EUAA practical guides and tools to which this practical guide refers will be progressively updated between 2025 and 2028. The updates will align these publications with the legislative instruments of the Pact on Migration and Asylum. Once published, the updated publications will also be available online at the EUAA website.

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.

⁷ Note that the finalised guide does not necessarily reflect the positions of UNHCR.



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List of abbreviations

Abbreviation	Definition
APR	Asylum Procedure Regulation — Regulation (EU) 2024/1348 of the European Parliament and of the Council of 14 May 2024 establishing a common procedure for international protection in the Union and repealing Directive 2013/32/EU
CEAS	Common European Asylum System
COI	country of origin information
ECtHR	European Court of Human Rights
EU Charter	Charter of Fundamental Rights of the EU
EU+ countries	EU Member States and the Schengen associated countries
EUAA	European Union Agency for Asylum
FGM/C	female genital mutilation/cutting
GBV	gender-based violence
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)
LGBTIQ	lesbian, gay, bisexual, transgender, intersex and queer
Member States	EU Member States
RCD (2024)	Reception Conditions Directive — Directive (EU) 2024/1346 of the European Parliament and of the Council of 14 May 2024 laying down standards for the reception of applicants for international protection.
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 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 ⁽⁸⁾.

These standards measure aspects that relate in particular to applicants in a vulnerable situation 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.

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.

With the entry into force of the Pact on Migration and Asylum ⁽⁹⁾, the EUAA has been mandated to develop new practical tools, as well as to review, update and align the content of its operational standards, indicators, guidelines and training modules to ensure their compliance with the reformed CEAS.

⁽⁸⁾ 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): '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.'

⁽⁹⁾ European Commission: Directorate-General for Migration and Home Affairs, 'Pact on Migration and Asylum', European Commission website, 21 May 2024, accessed 4 December 2024, https://home-affairs.ec.europa.eu/policies/migration-and-asylum/pact-migration-and-asylum_en.

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.

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 support Member States in establishing and/or assessing whether their practices are in line with the provisions of the CEAS.

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.

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
Information provision	Provides guidance on the adaptation of the provision of information in particular circumstances and the needs of applicants in a vulnerable situation.
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.
Interview	Provides guidance on the special procedural guarantees and adequate support provided to applicants in a vulnerable situation during the interview.
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.
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.
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.
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 [Annex 1. Vulnerability workflow](#).

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.
<ul style="list-style-type: none"> • 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. 	

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, 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 23 Asylum Procedure Regulation (APR) and in relation to unaccompanied minors but also for adults without legal capacity. The term ‘legal representative’ will be used to refer to legal adviser who represents the applicant or qualified lawyer/legal professional.



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 (¹⁰).

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 (¹¹) (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 (¹²). 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 (¹³).

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 (¹⁴).

Respect diversity. Authorities and staff working with applicants in a vulnerable situation ‘shall respect cultural, religious and linguistic diversity’ (¹⁵).

(¹⁰) 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’.

(¹¹) [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) (Text with EEA relevance) (OJ L 119, 4.5.2016)

(¹²) 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)

(¹³) 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.

(¹⁴) European Commission – Humanitarian Aid, [The European Consensus on humanitarian aid](#), 2008, paragraphs 43-45.

(¹⁵) 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 (16).

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 (17) 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 (18).
- **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 (19).
- **Prohibition of torture** stipulates that no one can be subjected to torture or to inhuman or degrading treatment or punishment (20).
- **Equality and non-discrimination** stipulate that '[e]very one is equal before the law' (21) 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' (22).
- **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 (23).
- **Right to asylum** lays down that everyone has the 'right to seek and enjoy protection' (24) 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 (25).
- **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 (26).

(16) 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](#).

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

(18) Article 1 EU Charter.

(19) Article 2 EU Charter.

(20) Article 4 EU Charter.

(21) Article 20 EU Charter.

(22) Article 21 EU Charter.

(23) 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.

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

(25) Article 18 EU Charter.

(26) 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’⁽²⁷⁾. 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⁽²⁸⁾.

The particular vulnerability of asylum seekers⁽²⁹⁾ 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’⁽³⁰⁾. 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’⁽³¹⁾. 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⁽³²⁾.

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⁽³³⁾. 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.

⁽²⁷⁾ 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.

⁽²⁸⁾ 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.

⁽²⁹⁾ 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.’

⁽³⁰⁾ 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](#).

⁽³¹⁾ ECtHR, 2011, [M.S.S. v Belgium and Greece](#), op. cit., fn. 30, 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](#).

⁽³²⁾ ECtHR, 2011, [M.S.S. v Belgium and Greece](#), op. cit., fn. 30, paragraph 251. A summary is available in the [EUAA Case Law Database](#).

⁽³³⁾ 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 (34).

Applicants and refugees exposed to heightened risks of harm, violations and abuse are considered to be in a particularly vulnerable situation (35). 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* (36). 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' (37).

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 (38), 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 (39).

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 (40). In addition to the principle of equality, the concept of vulnerability is also based on the principle of non-discrimination (41). Therefore, applicants in a vulnerable situation should be able to benefit from the rights and comply with the obligations

(34) 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.

(35) 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.

(36) 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](#).

(37) 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:2016:0705JUD0000991215, paragraph 53. A summary is available in the [EUAA Case Law Database](#).

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

(39) 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.

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

(41) Article 21(1) EU Charter.



provided for in the instruments of the CEAS on an equal footing with applicants who are unhindered by such vulnerabilities (42).

The CEAS instruments use different concepts: 'vulnerability', 'special needs', 'specific vulnerabilities/needs' 'special reception needs' and 'special procedural guarantees'. 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 Reception Conditions Directive RCD (2024) (43), to participate in the asylum procedures and to have their need for protection assessed on the basis of their specific situation.

The legal instruments of the CEAS include a non-exhaustive list of categories of persons, indicating that applicants falling within these profiles are more likely to have special needs.

The RCD (2024) mentions the following:

minors, unaccompanied minors, persons with disabilities, elderly persons, pregnant women, lesbian, gay, bisexual, trans and intersex persons, single parents with minor children, victims of trafficking in human beings, persons with serious illnesses, persons with mental disorders including post-traumatic stress disorder and persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, for example victims of gender-based violence, of female genital mutilation, of child or forced marriage, or violence committed with a sexual, gender, racist or religious motive (44).

The APR mentions the following non-exhaustive list of indicators:

age, gender, sexual orientation, gender identity, disability, serious physical or mental illness or disorders, including when these are a consequence of torture, rape or other serious forms of psychological, physical, sexual or gender-based violence. (45)

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.

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

(43) [Directive \(EU\) 2024/1346](#) of the European Parliament and of the Council of 14 May 2024 laying down standards for the reception of applicants for international protection (OJ L, 2024/1346, 22.5.2024).

(44) Article 24 RCD (2024).

(45) Recital 17 APR.

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 (46).

In accordance with the RCD (2024) and the APR, the Member State must conduct an individual assessment of whether the applicant has special reception needs and/or is in need 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.

A needs-based approach to provide adequate support

This guide incorporates a needs-based approach (47) aimed 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. 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.

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 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.

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

(47) The EUAA has developed the needs-based approach to provide adequate support in the context of the development of this guide.



RESPONSE STRATEGY	DEFINITION
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.

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 APR 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 ⁽⁴⁸⁾. The applicant needs to be continuously informed and they have the right to be informed in a timely manner ⁽⁴⁹⁾. The APR establishes that the information must be provided as soon as possible at the latest when the application for international protection is registered ⁽⁵⁰⁾.

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.

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.



Asylum Procedure Regulation (APR)

Article 8 – General Guarantees for applicant

Article 21 – Applicants in need of special procedural guarantees

⁽⁴⁸⁾ In particular, Article 8(2) APR indicates that, at minimum, the following information must be provided: (a) the right to lodge an individual application; (b) the time limits and stages of the procedure to be followed; (c) their rights and obligations during the procedure, including those under Regulation (EU) 2024/1351, and the consequences of not complying with those obligations, in particular as regards the explicit or implicit withdrawal of an application; (d) the right to free legal counselling for the lodging of the individual application and to legal assistance and representation at all stages of the procedure pursuant to Section III of this Chapter and in accordance with Articles 15, 16, 17, 18 and 19; (e) the means by which they can fulfil the obligation to submit the elements as referred to in Article 4 of Regulation (EU) 2024/1347; (f) the decision of the determining authority in accordance with Article 36.

⁽⁴⁹⁾ For more information, see ECtHR, 2011, *M.S.S. v Belgium and Greece*, op. cit., fn. [30](#), paragraph 304. A summary is available in the [EUAA Case Law Database](#).

⁽⁵⁰⁾ Article 8(2)(f) APR.



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.

- **Additional remarks:** *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.*
- *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.*

Indicator 2. Targeted information relevant to the particular circumstances of applicants is provided.

- **Additional remarks:** *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:*
 - *(un)accompanied children: guardianship, Asylum and Migration Management Regulation;*
 - *young women and persons with gender-related needs: access to sexual and reproductive health, access to services for victims of GBV;*
 - *dependent adults: social welfare and legal capacity, medical facilities;*
 - *potential victims of trafficking in human beings (THB): the referral mechanism, the role of law enforcement and safety and security.*

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.*

Indicator 5. Information provision sessions to applicants in a vulnerable situation ensure privacy and the confidentiality of the information shared during these sessions.

- **Additional remarks:** *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.*

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.

- **Additional remarks:** *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.*

Indicator 2. Applicants in a vulnerable situation are enabled to contact relevant organisations or other service providers.



- **Additional remarks:** 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.

Indicator 3. Information on relevant organisations or other service providers is provided as soon as vulnerabilities are identified or special needs assessed.

Good practice

Information sessions are periodically organised with the involvement of key local actors, such as healthcare service providers and relevant civil society organisations.



[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](#)



Access to the asylum procedure

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.



Asylum Procedure Regulation (APR)

Recital 13

Recital 16

Article 26 – Making an application for international protection

Article 27 – Registering applications for international protection

Article 28 – Lodging an application for international protection

Article 32 – Applications on behalf of accompanied minors

Article 34(5), point (b) – Examination of applications

Article 42 – Accelerated examination procedure

Article 43 – Conditions for applying the asylum border procedure

Standard 3. 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.

- **Additional remarks:** training courses include elements from the European Asylum Curriculum.
- For this indicator, see also [Standard 4](#) on adequate support and [Standard 31](#) on training.

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.

- **Additional remarks:** depending on the national practice, criteria for prioritisation are defined in a law, guidance, etc.

Standard 4. 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.

- **Additional remarks:** 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.
- For this indicator, see also [Standard 31](#) on training.

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.

- **Additional remarks:** 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 female genital mutilation/cutting (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.
- For this indicator, see also [Standard 31](#) on training and [Standard 35](#) on interpretation.

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.

- **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. 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.

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.

- **Additional remarks:** for this indicator, see also [Standard 25](#) on referral.

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.

- **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.

Good practices

- 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.



Standard 5. 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.

- **Additional remarks:** 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.

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.

- **Additional remarks:** 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.

Standard 6. 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.

- **Additional remarks:** 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.

Indicator 2. The applicant is informed about the result of the assessment and the procedure to which they are channelled.

- **Additional remarks:** for this indicator, see also [Standard 1](#) on information provision.

Standard 7. 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.

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.

- **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.*

Indicator 2. When border procedures are no longer applicable, the applicant is allowed to enter the territory.

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.



[Let's Speak Asylum Portal](#)

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



[Practical Guide on Interpretation in the Asylum Procedure](#)

[Practical Guide on Registration](#)

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

EUAA-Frontex, Practical tools for first-contact officials, which consists of:

- [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.



Asylum Procedure Regulation (APR)

Recital 14

Recital 15

Article 11 – Admissibility interview

Article 12 – Substantive interview

Article 13 – Requirements for personal interviews

Article 14 – Report and recording of personal interviews

Article 18 – Scope of legal counselling and legal assistance and representation

Article 34 – Examination of applications



Qualification Regulation (51)

Article 4 – Submission of information and assessment of facts and circumstances

⁽⁵¹⁾ [Regulation \(EU\) 2024/1347](#) of the European Parliament and of the Council of 14 May 2024 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, amending Council Directive 2003/109/EC and repealing Directive 2011/95/EU of the European Parliament and of the Council (OJ L, 2024/1347, 22.5.2024).

Standard 8. Representatives, legal representatives and other authorised support persons are able to take part in the procedure at all relevant stages.

Indicator 1. Legal and other representatives can access the files according to national law and are allowed to attend the personal interview.

- **Additional remarks:** *a representative and/or legal representative needs to be present during the personal interview in case of unaccompanied children.*

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.

- **Additional remarks:** *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.*
- *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).*

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.

- **Additional remarks:** *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.*

Standard 9. The scheduling and invitation to the personal interview take into consideration the special needs of the applicant.

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 31](#) on training.*

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 31](#) on training and [Standard 34](#) and [Standard 35](#) on interpretation.

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 scheduling, for example for cases of victims of GBV or LGBTIQ applicants.

Indicator 4. The time slot allocated for the interview is adapted according to the special needs of the applicant.

- **Additional remarks:** 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.

Indicator 5. Criteria to prioritise or postpone the interview are in place.

- **Additional remarks:** 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.

Indicator 6. Remote interview options are available if the individual special needs allow for it.

- **Additional remarks:** 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.
- A case-by-case assessment is recommended for cases of applicants in a vulnerable situation.

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.

- **Additional remarks:** 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.

Good practice

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

Indicator 1. The facility where the personal interview takes place is accessible to the applicant according to their particular special needs.

- **Additional remarks:** 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.

Indicator 2. Rooms ensure confidentiality and are free from disturbances.

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.

Indicator 4. Rooms have a friendly and welcoming environment.

- **Additional remarks:** 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.



Standard 11. Information on the situation of the applicant and their needs is available to the case officer for the preparation of the case.

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.

- **Additional remarks:** *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.*
- *For this indicator, see also [Standard 28](#) on confidentiality and data protection*

Indicator 2. Guidelines and other instruments on interviewing applicants with special needs are available and accessible to case officers.

- **Additional remarks:** *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.*

Indicator 3. Country of origin information on groups at risk is available and taken into account.

- **Additional remarks:** *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.*
- *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.*

Standard 12. The preparation of the interview is done in accordance with the special needs of the applicant on a case-by-case basis.

Indicator 1. Special arrangements are made in accordance with the special needs of the applicant.

- **Additional remarks:** *for example, special assistance can be provided to help applicants if they have limited mobility.*

Indicator 2. If needed, arrangements are made to allow any support persons accompanying the applicant to be present during the interview.

- **Additional remarks:** *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.

Indicator 3. The interpreter is briefed and prepared on the nature and sensitivity of the case.

Standard 13. When conducting the interview, adequate support is provided to applicants in need of special procedural guarantee.

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.

- **Additional remarks:** *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.*
- *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.*
- *For this indicator, see also [Standard 1](#) on information provision.*

Indicator 2. Interviewing techniques appropriate for the special needs of the applicant are applied.

- **Additional remarks:** *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.*
- *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.*
- *It is important to build trust and maintain it during the interview.*

Indicator 3. The duration of the interview and breaks are adapted based on the special needs of the applicant.

- **Additional remarks:** *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.*
- *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 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.

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.

- **Additional remarks:** *when an interview is postponed, sufficient time before rescheduling is allowed. In accordance with Article 13(11)(c) APR, when the personal interview is omitted because the applicant is considered unable or unfit to be interviewed due to enduring circumstances beyond their control, this must not adversely affect the decision of the determining authority. Where the personal interview is omitted for this reason, the determining authority must give the applicant an effective opportunity to submit further information in writing. When in doubt as to the fitness or ability of the applicant to be interviewed, the determining authority must consult a medical professional to establish whether the applicant is temporarily unfit or unable to be interviewed or whether their situation is of an enduring nature.*

Indicator 5. If other special needs appear at any stage of the interview, these needs are responded to accordingly.

- **Additional remarks:** *different interview techniques may be applied such as allowing for additional breaks.*

Indicator 6. The case officer is proactive in supporting the applicant in substantiating the application.

- **Additional remarks:** *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.*
- *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.*
- *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.*

Indicator 7. Guidelines, training and other capacity building activities are in place to support case officers in conducting interviews with applicants with special needs.

- **Additional remarks:** *the training courses provided include relevant parts of the European Asylum Curriculum.*

Standard 14. Adequate support is provided to applicants with special needs to present all aspects related to their application.

Indicator 1. The case officer ensures that the applicant was able to sufficiently substantiate their claim, taking into account their particular circumstances.

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.

- **Additional remarks:** *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.*

Indicator 3. Information on the available support services is provided based on the needs that emerged during the interview.

- **Additional remarks:** *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 25](#) on referral.*

Indicator 4. The interview transcript accurately records questions, answers and other events that occurred during the interview.

- **Additional remarks:** *reactions, silence and interruptions should also be noted in the report.*

Good practice

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.





[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](#)

[Guidance on Remote Interviews](#)

[Practical Guide 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.



Asylum Procedure Regulation (APR)

Article 8(2)(f) and Article 8(6) and (7) - General guarantees for applicants

Article 24 – Medical examination

Article 35 – Duration of the examination procedure

Article 36 – Decisions on applications



Qualification Regulation ⁽⁵²⁾

Article 4(5) – Submission of information and assessment of facts and circumstances

Standard 15. Situations of vulnerability and special needs are taken into account in the decision-making process.

Indicator 1. When vulnerabilities are identified, the case is assessed and the decision is made by officers with expertise in vulnerabilities.

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.

- **Additional remarks:** the training courses provided includes relevant parts of the European Asylum Curriculum.
- 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.

⁽⁵²⁾ [Regulation \(EU\) 2024/1347](#) of the European Parliament and of the Council of 14 May 2024 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, amending Council Directive 2003/109/EC and repealing Directive 2011/95/EU of the European Parliament and of the Council (OJ L, 2024/1347, 22.5.2024).



- *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.*

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.

- **Additional remarks:** *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.*
- *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.*
- *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.*

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.

- **Additional remarks:** *factors of distortion may include memory, trauma age, gender, mental or physical disorders or disabilities.*

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.

- **Additional remarks:** *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.*

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.

- **Additional remarks:** *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 24 APR. Where applicable, the health and vulnerability checks referred to in Article 12 of Regulation (EU) 2024/1356⁽⁵³⁾ may be taken into account for the medical examination.*

⁽⁵³⁾ 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.

Good practices

- A list of doctors who are trained on specific cases, such as FGM/C and torture on the basis of the Istanbul Protocol (), 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.
- A quality assurance system on decision-making includes a dedicated area on vulnerability issues.

Standard 16. 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.

- ***Additional remarks:*** *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.*

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 17. 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.

- ***Additional remarks:*** *particular attention should be paid to language and aspects related to safety.*

Indicator 2. The notification of the decision to the applicant with special needs is prioritised.

- ***Additional remarks:*** *exceptions to this principle can be implemented in particular circumstances, for example where a special need requires the notification to be postponed.*





Indicator 3. The determining authorities ensure that the notification of the decision preserves the safety of the applicant in a vulnerable situation.

- **Additional remarks:** *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.*
- *Guidance and a case-by-case support mechanism with recommendations on dealing with safety issues related to the applicant's special needs are available.*

Indicator 4. The decision is notified to the legally required actors, including legal and other representatives.

Indicator 5. Adapted information on access to effective remedies is provided.

- **Additional remarks:** *for this indicator, see also [Standard 1](#) on information provision.*



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



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.



Asylum Procedure Regulation (APR)

Recital 17

Recital 20

Article 20 - Assessment of the need for special procedural guarantees

Article 21 – Applicants in need of special procedural guarantees

Standard 18. The mechanism to identify applicants in a vulnerable situation is defined.

Indicator 1. The identification mechanism outlines a non-exhaustive list of physical, psychosocial and environmental indicators to identify applicants in a vulnerable situation.

- **Additional remarks:** 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.
 - Personal factors are linked to age, gender and family status.
 - 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.
 - 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.



- *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).*
- *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 24 RCD (2024): (a) minors; (b) unaccompanied minors; (c) persons with disabilities; (d) elderly persons; (e) pregnant women; (f) lesbian, gay, bisexual, trans and intersex persons; (g) single parents with minor children; (h) victims of trafficking in human beings; (i) persons with serious illnesses; (j) persons with mental disorders including post-traumatic stress disorder; (k) persons who have been subjected to torture, rape or other serious forms of psychological, physical or sexual violence, for example victims of GBV, of female genital mutilation, of child or forced marriage, or violence committed with a sexual, gender, racist or religious motive.*

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 25](#) on referral.*

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 28](#) on 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.

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.

- **Additional remarks:** *for this indicator, see also Standard 5. ‘Medical screening’ in the [Guidance on Reception – Operational standards and indicators](#), 2024.*

Indicator 7. The identification mechanism describes the conditions for the pre-identification of vulnerability.

- **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 19. 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.

- **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.

Indicator 2. Criteria to identify priority cases are applied.

- **Additional remarks:** priority cases are given immediate access to the services needed.

Indicator 3. A confidential and private environment is created to allow the disclosure and identification of applicants in a vulnerable situation, including self-identification.

- **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.

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](#) on information provision and [Standard 28](#) on 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 31](#) on training.

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 28](#) on confidentiality and data protection.

Good practices

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 20. 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.

- **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 21. 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.

- ***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. For this indicator, see also [Standard 28](#) on 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.*



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. Article 20 APR mentions that the competent authorities are responsible to individually assess whether the applicant is in need of special procedural guarantees, with the assistance of an interpreter where needed. That assessment may be integrated into existing national procedures or into the assessment referred to in Article 25 RCD (2024) and need not take the form of an administrative procedure. Where required by national law, the assessment may be made available, and the results of the assessment may be transmitted, to the determining authority, subject to the applicant's consent.

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.



Asylum Procedure Regulation (APR)

Recital 17



Article 20 - Assessment of the need for special procedural guarantees

Article 21 – Applicants in need of special procedural guarantees

Standard 22. 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.

Indicator 1. A standardised assessment is carried out.

- **Additional remarks:** 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.
- A standardised assessment can include the use of common tools (e.g. the EUAA's SNVA tool).
- 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.

Indicator 2. The roles and responsibilities of staff conducting the assessment are clearly defined.

- **Additional remarks:** 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.

Indicator 3. Staff carrying out the assessment have received specific training and have specific expertise on how to assess special needs.

- **Additional remarks:** 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.
- For this indicator, see also [Standard 31](#) on training.

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](#) on information provision and [Standard 28](#) on confidentiality and data protection.*

Indicator 6. The assessment is always conducted in a language that the applicant understands or is reasonably supposed to understand.

- **Additional remarks:** *if the applicant does not understand the language spoken by the assessor, an interpreter should be provided.*
- *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.*

Indicator 7. The applicant is informed about and given the possibility to request a specific gender of the assessor and interpreter.

- **Additional remarks:** *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.*

Indicator 8. The applicant is informed about and given the possibility to request to be accompanied by a support person and/or legal representative.

- **Additional remarks:** *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.*
- *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.*

Indicator 9. The assessment is conducted in a safe and confidential environment.

- **Additional remarks:** *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.*
- *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.*



Standard 23 The assessment is conducted in a timely manner and periodic follow-up of the case is established.

Indicator 1. The assessment takes place as soon as vulnerabilities are identified and no later than 30 days from the making of the application.

- **Additional remarks:** *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.*

Indicator 2. Follow-ups are regularly scheduled according to the needs of the applicant.

- **Additional remarks:** *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.*

Standard 24. There is an effective system to record the assessment of the special needs of applicants in a vulnerable situation.

Indicator 1. The conclusions of the assessment are recorded in the applicant's file.

- **Additional remarks:** *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.*

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

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

- **Additional remarks:** *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.*



[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.



Asylum Procedure Regulation (APR)

Recital 17

Recital 18

Recital 20

Article 20 - Assessment of the need for special procedural guarantees

Article 21 – Applicants in need of special procedural guarantees

Standard 25. 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.

- **Additional remarks:** if information about the applicant is communicated to relevant actors to ensure adequate support for the applicant, the shared information is limited in scope.



- *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.*

Indicator 2. If necessary and with the consent of the applicant, the applicant is referred to the appropriate medical practitioner or psychologist for further assessment of their psychological and physical state.

Indicator 2. If applicable, the applicant is referred to the national referral mechanisms and procedure according to their needs.

- **Additional remarks:** *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.*

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.

- **Additional remarks:** *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 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](#) on information provision on the support provided by other actors, and [Standard 26](#) on 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 26. 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.

- **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 27. 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.

- **Additional remarks:** *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.*

Indicator 2. Collaboration agreements are established between the competent authority and the service providers to allow referral to specialised support if needed.

- **Additional remarks:** *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 civil society organisations and international organisations.*

Indicator 3. Multidisciplinary meetings are organised on a regular basis with relevant service providers to keep up to date on needs.



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 (⁵⁴). 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 (⁵⁵).

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.



General Data Protection Regulation (GDPR)

Article 5 – Principles relating to processing of personal data

Article 6 – Lawfulness of processing

Article 7 – Conditions for consent

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

(⁵⁴) Article 7 APR.

(⁵⁵) In the context of the present guidance, the term 'data subject' is meant to be understood as referring to an applicant.





Standard 28. 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.

Indicator 2. The applicant receives written and oral information on:

- 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.



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. Staff can include border guards, case officers, registration officers, interpreters, 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 a 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).



Asylum Procedure Regulation (APR)

Article 4(8) - Competent authorities

Article 13 – Requirements for a personal interviews



Standard 29. An adequate number of staff members is allocated to provide equal and sufficient support to applicants in a vulnerable situation, including in emergency situations.

Indicator 1. The number of staff responsible for handling cases of applicants in a vulnerable situation is defined and implemented by the competent authorities.

- **Additional remarks:** *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.*
- *The number of allocated staff also includes interpreters that are specifically trained on interpreting for applicants in a vulnerable situation.*

Indicator 2. Gender composition is considered among staff members allocated to support applicants in a vulnerable situation.

- **Additional remarks:** *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.*

Indicator 3. Focal points are appointed to support the case managers in their response to the special needs of the applicants.

- **Additional remarks:** *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.*

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.

- **Additional remarks:** *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.*

Standard 30. Staff are sufficiently qualified to provide adequate support to applicants with special needs.

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.

- **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 31. 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.

Indicator 1. A training curriculum for staff lists the minimum training requirements regarding vulnerability according to the roles and responsibilities of staff.

- **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 19](#) on the implementation of the identification mechanism and [Standard 21](#) on the individual assessment.

Indicator 2. Staff receive adequate training courses on vulnerability-related issues according to their roles and responsibilities.

- **Additional remarks:** for this indicator, see also [Standard 19](#) on the implementation of the identification mechanism and [Standard 21](#) on the individual assessment.

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



Good practices

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

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 practices

- 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 (56).

- 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 33. 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.



[*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*](#)

(56) 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⁽⁵⁷⁾. 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.



Asylum Procedure Regulation (APR)

Article 13 – Requirements for personal interviews

Standard 34. 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.

- **Additional remarks:** to determine the common languages, elements such as population and country of origin should be taken into 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.

Indicator 2. The timeline to find an interpreter is determined.

- **Additional remarks:** 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.

⁽⁵⁷⁾ 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.

Standard 35. 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.

- **Additional remarks:** 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.
- For this indicator, see also [Standard 31](#) on training.

Indicator 2. Interpreters receive adequate training on vulnerability-related issues.

- **Additional remarks:** 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.
- For this indicator, see also [Standard 31](#) on training.

Indicator 3. Interpreters receive training courses on ethical standards and on the code of conduct.

- **Additional remarks:** 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.
- For this indicator, see also [Standard 31](#) on training.

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

Standard 36. 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.

- **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.

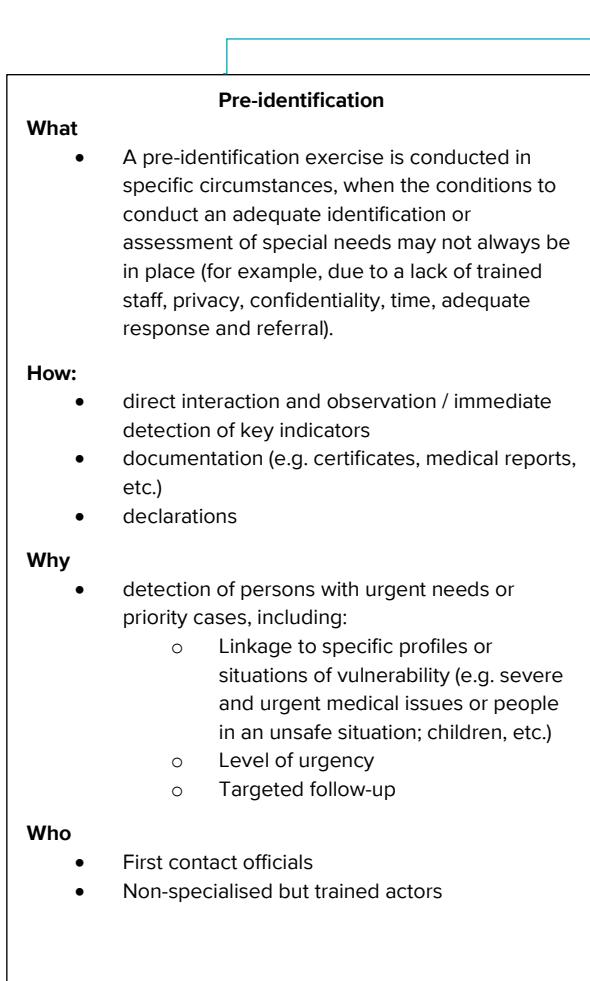


[Practical Guide on Interpretation in the Asylum Procedure](#)

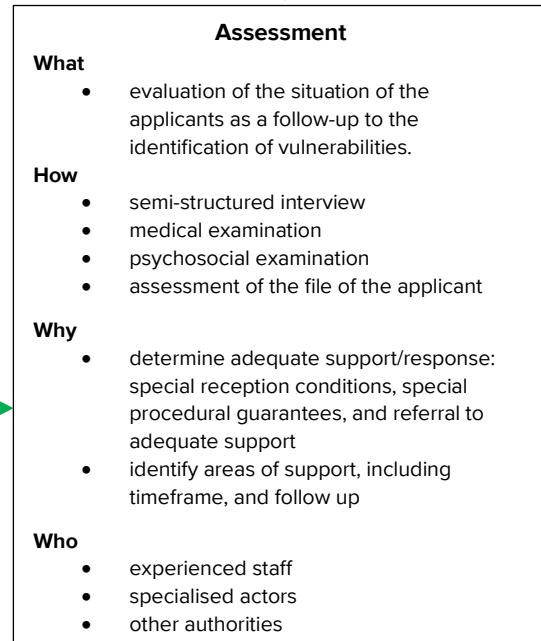
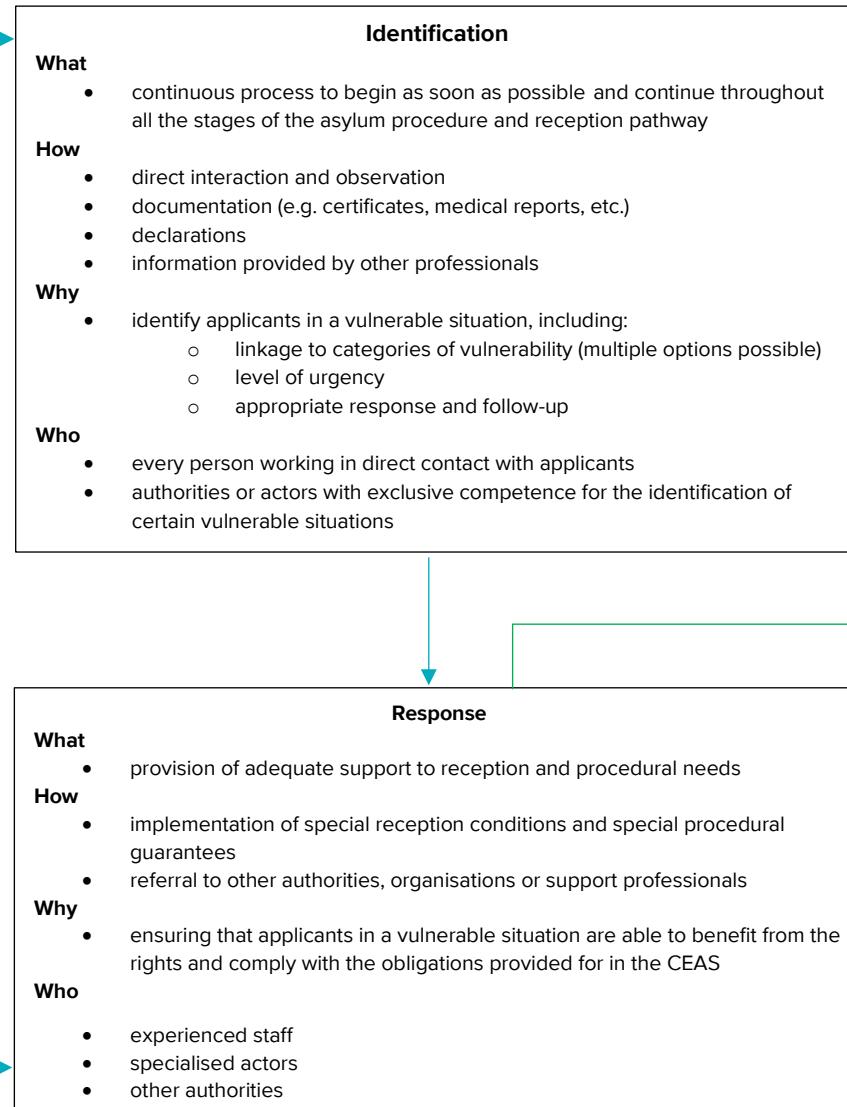
[Practical Recommendations on Conducting the Personal Interview Remotely](#)

Annex 1. Vulnerability workflow

At arrival when there are specific circumstances



Throughout the asylum trajectory



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Publications Office
of the European Union

