

# WOMEN'S REHABILITATION CENTRE: DESIGNING SPACES FOR PHYSICAL AND MENTAL RECOVERY FOR VICTIMS OF HUMAN TRAFFICKING

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## Abstract

*Women's rehabilitation centres play a crucial role in enhancing the physical and mental well-being of vulnerable women. These centres provide a safe and structured environment where women who have experienced abuse, addiction, trafficking, or social exclusion can receive care and support. In Nigeria, however, women's rehabilitation centres often face significant accommodation-related challenges that limit their effectiveness in promoting the physical and mental healing process of these vulnerable women. Generally, a large number of Women's rehabilitation centres operate in buildings not originally designed for therapeutic care, resulting in overcrowded rooms, poor ventilation, and limited privacy. Such conditions can negatively affect the recovery process by increasing stress, discomfort, and the risk of health complications among the victims of human trafficking (vulnerable women). Research was carried out through case studies, and data (primary/secondary data) were obtained through; field observations, interviews with healthcare providers, and the victims of human trafficking across selected women's rehabilitation centres. The findings/results emphasized inadequate physical infrastructure and living conditions (inadequate accommodation, overcrowded rooms, poor ventilation, insufficient counselling programs) in women's rehabilitation centres, which significantly hinder both physical healing and psychological recovery. The study, therefore, highlights the need for improved accommodation design, good sanitation, adequate space, adequate counselling programs, and supportive environments to enhance and facilitate the healing process of these victims of human trafficking.*

**Keywords:** Accommodation, adequate space, case studies, rehabilitation centres, vulnerable women

## INTRODUCTION

For years, local and international media has been awash with such terrifying stories of many women and girls across the planet trafficked for sexual and labor exploitation, and of migrants trapped in numerous countries in slavery-like conditions or dying. What these news reports often skip are the issues trafficking survivors face once they are identified internally or upon return to their various countries, where the government's efforts to safeguard and assist them too often fail to respect their rights. The government of every country, with the support of international bodies, should take responsibility to safely guide, protect and provide for these survivors. The government should build enough shelters for these survivors with standard rehabilitation services such as; adequate housing facilities, good medical aid, psychological counseling, etc. Some shelters in states like Abuja, Federal Capital Territory

(FCT), Edo state lack adequate and good accommodation or housing facilities, inadequate vocational skills training, poor medical health, etc.

The Nigerian government should take steps to combat trafficking in persons and provide survivors with good accommodation, medical aid, psychological counseling, and financial assistance they need to heal from trauma and build their lives (Decolonizing Human Trafficking, 2020). National Agency for the Prohibition of Trafficking in Persons (NAPTIP) in Nigeria has long recognized that shelters and counselling are crucial to enable women to rebuild their shattered self-esteem, to imagine a brand-new life and new self, free from control and violence

In women's rehabilitation centres, the integration of physical health spaces such as well-ventilated spaces, access to natural light, hygienic accommodation, and functional healthcare areas directly contributes to improved mental health outcomes. Studies on healing and therapeutic architecture emphasize that features like biophilic design (incorporation of nature), calming colors, and spatial flexibility can reduce stress, enhance mood, and promote faster recovery (Kara, 2010). These design strategies are particularly important for women, who often require gender-sensitive, private, and secure spaces to address trauma-related conditions.

Overall, building physical health infrastructure that intentionally supports mental well-being is essential for creating effective rehabilitation centres that empower women to heal, rebuild confidence, and reintegrate into society.

## **LITERATURE REVIEW**

### **History behind Physical and Mental Spaces in Rehabilitation Centres**

The concept of designing rehabilitation centres that address both physical and mental health needs is rooted in a combination of historical, social, and theoretical developments in healthcare and architectural design. In Nigeria, women's rehabilitation centres have evolved from basic institutional shelters to more holistic facilities that recognize the interplay between environment, physical recovery, and psychological well-being. Historically, early rehabilitation initiatives in Nigeria were largely custodial, focused on containment rather than therapeutic recovery, often providing minimal attention to the physical environment or mental health support (Mbonu & Umeora, 2025). These institutions primarily aimed at social reintegration, with limited attention to trauma-informed care or gender-specific needs. Women's rehabilitation centres must consider privacy, dignity, and security in both design and function. Research shows that environments that combine hygienic physical facilities with calming, nature-inspired spaces significantly improve mental health outcomes, reduce stress, and enhance engagement in therapy programmes (Murthy, 1998). These findings support the integration of biophilic design and wellness-focused architecture into rehabilitation centres, reinforcing the theory that physical space is inseparable from mental health outcomes.

## **Benefits of Physical and Mental Spaces in Women's Rehabilitation Centres**

Well-designed physical and mental spaces in women's rehabilitation centres play a vital role in promoting holistic recovery. These environments go beyond basic shelter, actively supporting both physical health and psychological well-being. Physically, clean, well-ventilated, and hygienic spaces reduce the risk of illness and support recovery from injuries, addiction, or chronic conditions. Access to exercise areas, therapy rooms, and healthcare facilities further enhances physical rehabilitation outcomes. Mentally, spaces that incorporate trauma-informed and healing design principles such as private rooms, natural light, greenery, and quiet reflection areas help reduce stress, anxiety, and emotional distress. Such environments foster a sense of safety, autonomy, and dignity, which are crucial for women recovering from trauma, abuse, or social marginalization. Communal spaces encourage social interaction, peer support, and participation in therapeutic programmes, which improves mental resilience and social reintegration.

Overall, integrating thoughtfully designed physical and mental spaces ensures a holistic approach to rehabilitation, supporting not only recovery of the body but also the mind. Research shows that these spaces enhance engagement in therapy, improve emotional stability, and promote long-term well-being, making them essential components of effective women's rehabilitation centres (Akinola & Ini-Ukim, 2025; Afzhoor & Akçay, 2025).

## **Established Standards Regulation and Laws Guiding Design**

Design standards for women's rehabilitation centres aim to create environments that support both physical recovery and mental well-being. These standards focus on safety, accessibility, hygiene, and therapeutic spatial arrangements to ensure that the facilities meet the complex needs of women recovering from trauma, addiction, or social marginalization.

Physical health standards emphasize clean and ventilated accommodation, safe and functional healthcare spaces, exercise areas. Proper lighting, temperature control, and ergonomically designed spaces reduce physical stress and support healing. Access to outdoor areas and recreational spaces is encouraged to promote physical activity, which is linked to improved overall health (Akinola & Ini-Ukim, 2025).

Mental health-focused standards integrate principles of trauma-informed and healing architecture. Key design elements include private rooms for personal reflection, communal therapy areas that promote social support, calming interior design with natural colours and materials, and access to nature through gardens or courtyards (Woodman & McCaw, 2008). These features help reduce anxiety, foster a sense of security, and promote emotional resilience.

In summary, adhering to design standards in women's rehabilitation centres ensures a holistic recovery environment where physical spaces and mental health considerations are seamlessly integrated, improving therapy outcomes, social reintegration, and long-term well-being.

## **RESEARCH METHODOLOGY**

### **Research design**

This study adopted descriptive research design. The study is descriptive in the sense that it will partly be concerned with identifying, interpreting and describing what already exists. Thus, to that extent, it will concern itself with the conditions and relationships that are already existing. The descriptive nature of this study was reflected through presenting the conditions as they are without any influence from the researcher.

The study analyzed three (3) women's rehabilitation centres, two (2) within Nigeria and one (1) in India; Committee for the Support of the Dignity of Women (COSUDOW), Benin, Nigeria, Daughters of Abraham foundation (DOAF), Abuja FCT, Nigeria, Women Rehabilitation Shelter Bengaluru, Karnataka, India. These facilities were selected due to their importance in rehabilitating women which main concern were in their physical and mental recovery.

### **Methods of Data Collection**

Information was obtained through the following means:

- i. Field study: case studies on both local and foreign.
- ii. Oral interviews

### **Data sources**

#### *Primary data*

- i. *Case Studies*: These were carried out in existing rehabilitation Centre through interviews and personal observations. During the study, the architectural features, mode of operations and associated problem were studied.
- ii. *Oral interview*: some knowledgeable persons were interviewed on information relating to the project.

#### *Secondary Data*

This includes information from internet facilities, published materials and unpublished materials, Records, documents, diaries, and biographies. Size of facilities, number of workers, climatic data among others were sourced from there.

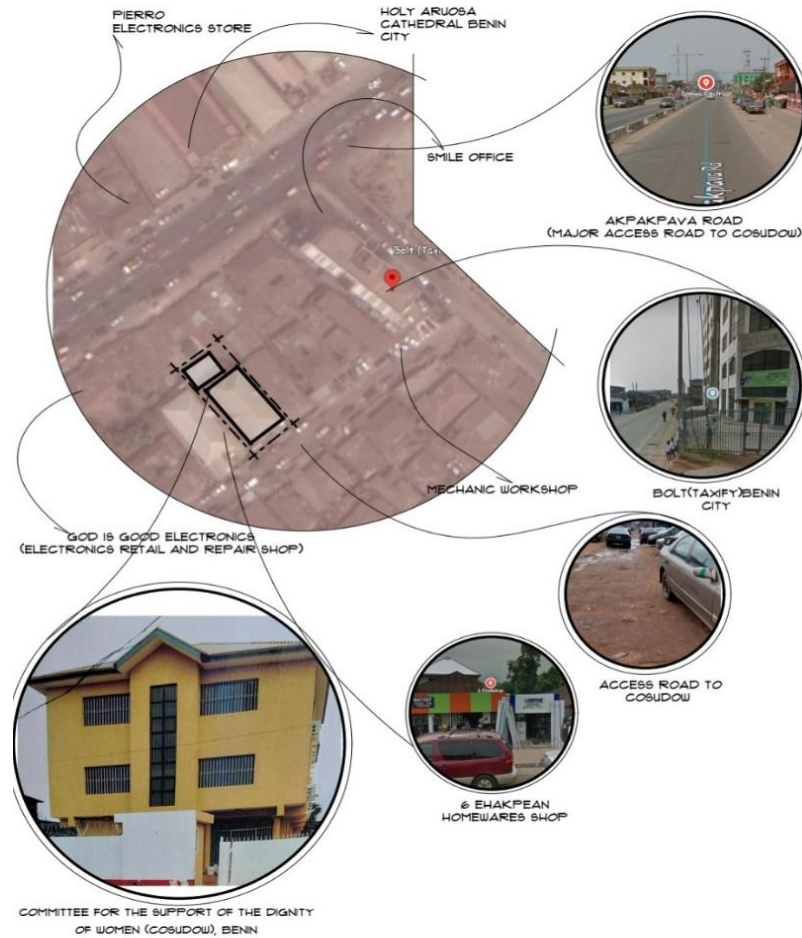
## **DATA PRESENTATION AND ANALYSIS**

### **Case Study Overview**

#### **CASE STUDY 1**

*Name*: Committee for the Support of the Dignity of Women (COSUDOW), Benin

*Location:* 6A Ehaekpen Street, off Igbesanmwan Street, Off Akpakpava Road, Benin City Edo state, Nigeria. The Figure 1 shows the location of the facility



**Figure 1: Image showing an over-view site and site layout of the existing Facility**  
*Source: Google earth (2021)*

*Brief history:* The institution was founded in 1998 by the inspiration of Major Superiors of Nigeria, under the umbrella of Nigeria Conference of Women Religious (NCWR). Rev. Sisters Blandina Ryan, MMM, Rev. Sr. Florence Nwaonuma SSH, were the first to bring together all the responsibilities and activities of the early life of Committee for the Support of the Dignity of Women (COSUDOW). They were assisted by two (2) devoted Catholics (Barrister Eric Okojie and Barrister Victor Ehizogie) who had the passion to join in the fight against human trafficking. On the 18th of April 1999, the institution got its recognition with this name Committee for the Support of the Dignity of Women (COSUDOW).

#### *Aim and objectives*

- i. To rehabilitate and reintegrates those young women who may be repatriated or who wish to pull out of prostitution irrespective of tribe and religious affiliations.

- ii. To educate families and young people on the hazards involved in traveling to Europe or elsewhere for prostitution. This is done through seminars, media, church, enlightenment campaign to; churches, schools using handbills and other necessary awareness means.
- iii. To provide security for those young women and their families after they have opted out of prostitution.
- iv. To find a way of giving them marketable skills and help them to set up ventures that will give them self-financial support.
- v. To have a “welcoming and safe home” where these young women will be accommodated and helped regain themselves through counseling and spiritual direction.

#### *Utility and space analysis*

Functional spaces present at the facility during the time of survey includes the following as shown in Table 1.

**Table 1: Functional spaces present at the facility**

S/N	SPACES	NUMBER OF UNITS
1	Administrative Offices	7
2	Victims Sleeping Accommodation	10
3	Conference Room	1
4	Common Dining	1
5	Kitchen	1
6	Chapel	1
7	Gathering Room	1
8	Security House	1
9	Generator House	1
10	Reverend Sisters Sleeping Accommodation	4

*Source: Field study (2023)*

Plates 1, 2, 3 and 4 show the various spaces in the facility



**Plate 1: showing typical victims' bedroom**  
*Source: Field study (2023)*



**Plate 2: showing the conference room**  
*Source: Field study (2023)*



**Plate 3: showing typical victims' bathroom and wc**  
*Source: Field study (2023)*



**Plate 4: showing the Secretary's office**  
*Source: Field study (2023)*

### Site planning and Landscaping

Perimeter Measurement of mapped out boundary encompassing site:

*Area of Site:*

The existing landscape is not planned, as it lacks pedestrian and vehicular considerations.

*Merits*

- i. The Facility has comfortable/spacious Sleeping rooms for the victims.
- ii. Well define access road to the site
- iii. Provision of a Gathering Room for interaction
- iv. The facility is well secured
- v. Provision of a laundry facility

*Demerits*

Of which includes;

- i. Poor zoning of spaces
- ii. Insufficient Office spaces for the number of staff contained
- iii. Inadequate Parking space and drop-off on site.
- iv. Lack of support facilities example; skill acquisition program, relaxation spot etc.
- v. No area for sake of future expansion
- vi. Lack of Psychological Clinic and Healthcare Clinic
- vii. No visiting hall for incoming visitors
- viii. Lack of heat treatment room for treating pest infestation on both in the building and within the site

*Deductions*

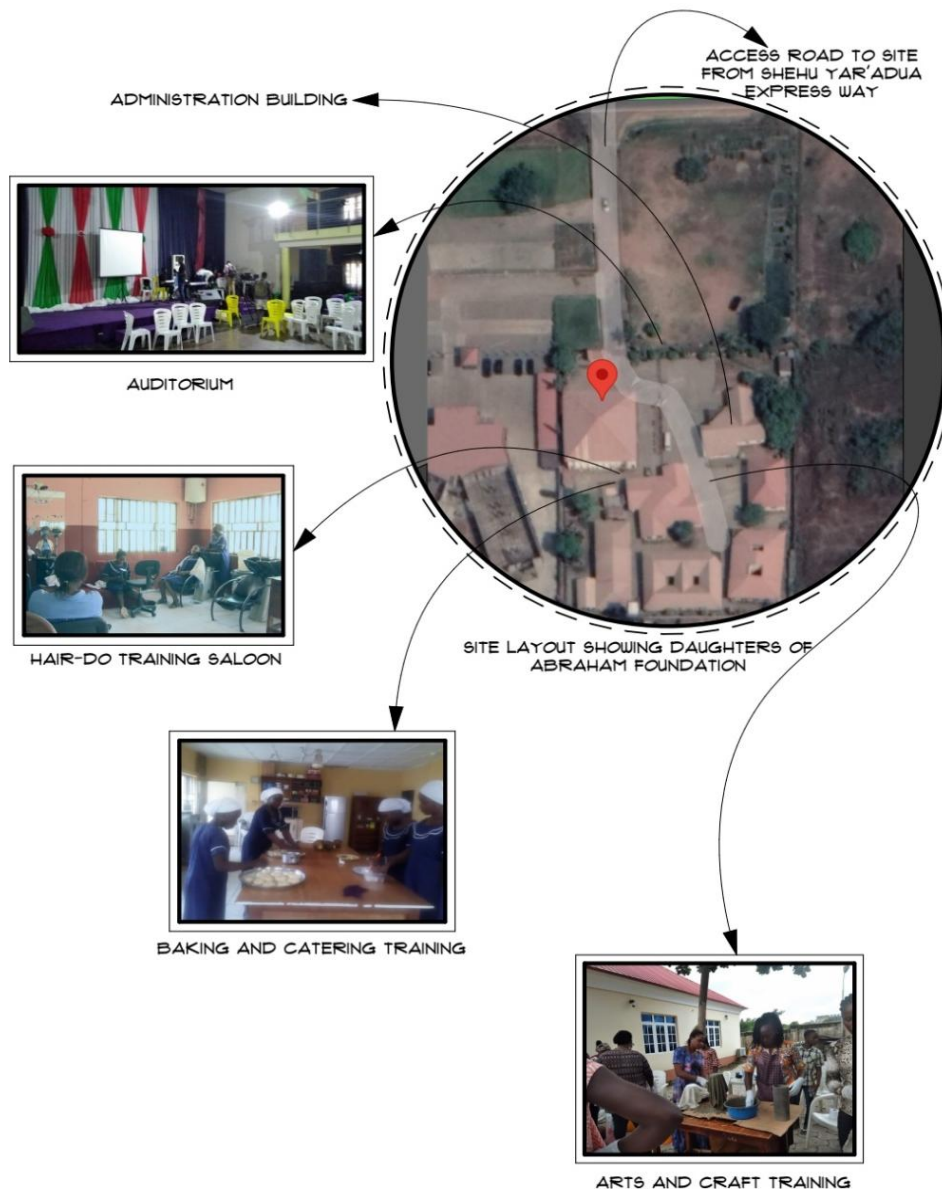
- i. Provision of quality and good housing or accommodation facility
- ii. Provision of Adequate parking space and car drop-off
- iii. Provision of Adequate support facilities example; skill acquisition program, relaxation spot
- iv. Proper zoning of spaces on site and within the building
- v. Provision of Psychological Clinic and Healthcare Clinic
- vi. Provision of laundry space, storage space, gathering room etc.
- vii. Provision of heat treatment room to control pest infestation

## CASE STUDY 2

*Name:* Daughters of Abraham foundation (DOAF)

*Location:* Plot 680, Shehu Musa Yar'adua Way, Opposite Setraco Head Office, Kado Express, Abuja, Nigeria.

Figure 2 shows the Google earth image showing an over-view site and site layout of the existing Facility



**Figure 2:** Image showing an over-view site and site layout of the existing Facility

*Source:* Google earth (2021).

*Brief history:* Daughter of Abraham foundation (DOAF) is a faith-based organisation established in Abuja, Nigeria founded in 29th October 1994. Since 1994, Daughter of Abraham foundation (DOAF) works to support vulnerable girls and women through educative training programs. The organisation's main goals are to educate extreme poverty

through their foundations skill acquisition program, advocate for gender equality and women's empowerment, and combat HIV/AIDS, malaria and other diseases.

### *Mission*

Daughter of Abraham foundation (DOAF) is a Christian faith based charitable organisation that is committed to the transformation of girls/women with low self-esteem (abused, mistreated, misused, rejected and dejected) societal misfits who are either at the point of or are fully involved in sexual promiscuity as a means of self-sustenance. Daughter of Abraham foundation (DOAF) does these through her planned programs of regeneration, restoration, recreation and rehabilitation. Daughter of Abraham foundation (DOAF) seeks to reform the societal outcast, traffic girls, delinquent girls, abused girls and women with low self-esteem.

There are concern with formation of Godly Christian values, issues of moral decadence especially prostitution and sex slavery, reproduction health issues especially the prevalence of STD/HIV/AIDS, creates awareness on human trafficking, awareness creation on gender base violence, elimination of poverty through vocational skills or training. Table 2 shows the number of spaces and their availability.

**Table 2: Number of spaces and their availability**

S/N	SPACES	NUMBERS OF UNITS
1	Administrative Offices	9
2	Victims Sleeping Accommodation	20
3	Conference Room	1
4	Common Dining	1
5	Kitchen	1
6	Chapel	1
7	Gathering Room	1
8	Security House	1
9	Skill acquisition/vocational programs	Not specified
10	Generator House	1
11	Auditorium/ Seminar Hall	1
12	Parking Lots	Not specified

*Source: Field study (2023)*

### *Administrative Offices*

Provisions were made for different offices that will help in managing, running and controlling the affairs of this facility.

Available offices in the facility include

- i. Coordinator office
- ii. Director office
- iii. Investment and physical development office
- iv. Guidance and counseling office
- v. Finance and mobilisation office

- vi. Vocational training office
- vii. Welfare office
- viii. Secretary office
- ix. Conference room
- x. Reception

Plates 5 and 6 show different units of the facility



**Plate 5: showing a typical hair-do training saloon**  
*Source: Field study (2023)*



**Plate 6: showing a typical interior perspective of the auditorium**  
*Source: Field study (2023)*

### **Site planning and Landscaping**

The existing landscape was fairly planned, pedestrian and vehicular movement were considered.

#### *Merits*

- i. Well defined access road to the site
- ii. Adequate Parking space for staff and visitors
- iii. Adequate sleeping accommodation with hygienic conveniences
- iv. Adequate skill acquisition programs
- v. The facility is located in a secured environment.
- vi. It was gender based (only female victims)

#### *Demerits*

Of which includes;

- i. It was a closed shelter (that is; visitors weren't allowed) and looked more like a prison
- ii. Poor zoning of spaces or building within the site
- iii. Lack of Outdoor Spaces example; courtyards, sport facilities and therapeutic garden for leisure and to relieve stress
- iv. Inadequate space for easy circulation and accessibility within the site

### Deductions

- i. The rehabilitation Centre is going to be an Open shelter (that is, it will allow victim's relative/family to visit, which will pave way for possible reconciliation between both parties).
- ii. Provision of adequate support facilities; skill acquisition program, sport facilities, relaxation spot etc. to help them heal effectively.
- iii. Proper zoning of spaces and buildings within the Site.
- iv. Provision of adequate space for easy circulation within the site.
- v. Proper site location for the safety of the victims.

### CASE STUDY 3

*Name:* Women Rehabilitation Shelter

*Location:* Bengaluru, Karnataka, India

**Shelter home for rescued Sex workers**



**Figure 3: Google earth image showing an over-view site and site layout of the existing Facility**  
*Source: Google earth (2021)*

**Table 3: Spaces and the number of available spaces**

S/N	SPACES	NUMBERS OF UNITS
1	Counsellor's office	2
2	Accounts office	1
3	Conference Room	1
4	Security office	1
5	Common room	1
6	Principal's office	1
7	Waiting and Reception area	1
8	Group discussion room	1
9	Seminar hall	1
10	Therapy room	2
11	Occupational therapy	2
12	Exhibition hall	1
13	ICT room	1
14	Practical Base Art	1
15	Paper craft and stationery	
16	Basic Computer Applications	1
17	Practical Base Food	1
18	General teaching classrooms	4
19	Candle making	1
20	Music/dance studio	1
21	Director's office	1
22	Parking Lots	No clearly defined parking area

*Source: Field study (2023)*

### **Conceptual Zoning of the Vocational and Occupational Therapy Section**

The front block of the building is occupied by clinical diagnostic and administrative areas full filling the necessity of quicker and easier access. Except the frontal portion of the building block all other sides are allocated for vocational areas.

The recreational facilities i.e. the multipurpose hall (Ashwini hall) is suited just in front of the reception lobby, which is centrally located and has direct access to the entry providing the easy circulation.at the time of special occasion. The outside crowd comes in and go outs without interfering the regular functions of other parts of the building

#### *Vocational rooms*

Vocational rooms are located across the court yard and adjacent to one another providing an ease of access and circulation all along with the scenic view of the courtyard giving an impression of calmness, peace and belonging to the nature. These rooms are connected by a circulation spine, corridor around the courtyard and have a scope of spilling out to the courtyard.

There are total 10 (ten) vocational rooms in total which are Bakery,Mat weaving , Painting, Basket weaving, Pottery, Candle making, Typing, Leather work, Tailoring, Sewing

### *Courtyard*

Courtyard also provides a common space to work together and freely without any restriction of boundaries encouraging the interaction between patients helping them to stand with the society. Courtyard also acts as a buffer space to stop and minimise the noise generated from the work areas like printing etc.

There is no standard Idea used for the placement of these work stations however the rooms with heavy equipment machinery like printing are placed on the ground floor while sections of crafting, candle making, leather work, weaving, typing sections are on the first floor. Pottery workshop is installed at the outdoors with store inside to store the good products.

### *Residential activity areas*

All patients are encourage to participate or engage in different outdoor and indoor recreational activities going outside which involves active interaction ad participation between residents. Beside the time, they involve themselves in the vocational work, residents get together in groups for interaction walks appreciating the scenic routes, landscaped gardens or sit around in the courtyards, platforms enjoying evening tea, yoga morning breeze. The patients attends occupational therapy in the morning, spend their day in department and come back to their respective accommodation.

### *Multipurpose hall (Ashwini hall)*

The multipurpose hall is being used for holding cultural evening organised by residents, conducting lectures by staff, for watching television, movie shows. Besides the main activity it also provides hub for the indoor gaming activities, informal talk's etc. outdoor games and activities are also being held time to time. Plates 7 and 8 show spaces used for group meetings.



**Plate 7: showing an image of Meeting or group discussion rooms**  
*Source: Field study (2023)*



**Plate 8: showing an image of a Semi-open counselling area**  
*Source: field study (2023)*

### **Site planning and Landscaping**

Total built Area of Site: 156 m<sup>2</sup> (square meters)

The existing landscape is planned, pedestrian and vehicular were fairly considered.

#### *Merits*

- i. The facility is located in a secured area
- ii. Provision of a Gathering Room for interaction
- iii. Present of support facilities example; skill acquisition program, relaxation spot etc.
- iv. The existing landscape is fairly planned, as it has pedestrian and vehicular considerations

#### *Demerits*

- i. Poor sleeping accommodation and in fairly maintained
- ii. Inadequate Parking space staff and visitors
- iii. Lack of enough space within the site for easy circulation
- iv. Lack of visiting hall for incoming visitors
- v. Lack of heat treatment room for pest control

#### *Deductions*

- i. Proper zoning of spaces within the site
- ii. Provision of Adequate parking space for staff and visitors
- iii. Provision of Psychological Clinic and Healthcare Clinic
- iv. Provision of adequate Office for staff
- v. Provision of visiting hall

### **Summary of Data Collection**

Data analysis / presentation of field works (case studies) were presented in pictures, tables and were critically analyzed in getting information for the proposed design. Useful findings were properly scrutinized and the deductions carefully considered during the design conceptualization, development, planning and designing of the proposed Women Rehabilitation Centre.

## **DISCUSSION**

### **Discussion of key findings**

Findings from this study highlight the critical role of the built environment as a therapeutic tool. Evidence consistently shows that well-designed physical spaces directly influence mental health outcomes, reinforcing the connection between environmental quality and total recovery. One major finding is that therapeutic architecture significantly enhances recovery. Features such as natural lighting, proper ventilation, access to greenery, and calming interior elements help reduce stress, anxiety, and depression while promoting physical comfort and faster healing. These elements create restorative environments that support both physiological and psychological well-being (Akinola & Ini-Ukim, 2025).

Another important finding is, Women in rehabilitation often have histories of abuse or trauma, and spaces that prioritize safety, privacy, and user control are essential. Private rooms, clear spatial organization, and non-institutional layouts help reduce re-traumatization and foster a sense of dignity and empowerment (Afzhoor & Akçay, 2025).

Overall, effective design in women's rehabilitation centres must adopt psychological safety, social support systems. Such environments significantly improve recovery outcomes and contribute to long-term well-being and successful reintegration into society.

### **Recommendations**

Having done the background study on research topic "Women Rehabilitation Centre" by carrying out literature and physical surveys on the subject matter which in turn has broadened my knowledge for better understanding. The following recommendations are put forward;

- i. Provision of support facilities.
- ii. Proper zoning of the various activities in terms of space requirement and allocation for the essence of achieving better functionality.
- iii. Provision of spaces such as psychological health facility, auditoria, gathering rooms, skill acquisition or vocational training facility, cafeteria, counselling halls, library etc. is imperative to the design of a Rehabilitation Centre.
- iv. The accommodations should be properly designed so as to allow for adequate natural lighting and ventilation
- v. Health care facility (clinic) should be present at the Centre to cater for first aid operations when the users (patients) fall sick or are injured.

### **CONCLUSION**

From the research and literature works done, the research was mainly focused on the conditions of existing Women Rehabilitation Centres in Nigeria and around the world. However, a large number of those existing Rehabilitation Centres failed to provide enough rehabilitation services such as; good housing facilities, good medical facilities, good psychological health care facilities, good security, etc, for trafficked survivors (women and young girls).

The research was also aimed at getting a standard Rehabilitation Centre with enough rehabilitation services which will help them (trafficked women and young girls) to recover and heal rapidly. This proposed Centre will be gender based and will be located in Benin City, Edo State, Nigeria. The Rehabilitation Centre will help trafficked survivors (women and young girls) get rid of their past, abusive/ traumatising life and pave the way for a better/brighter future ahead.

The Rehabilitation Centre will be well planned and the trafficked survivors will have access to good housing facilities, good health care facilities, good psychological health care facilities, good skill acquisition facilities where these women and young girls will be taught different skills which will be useful in revenue generation when they finally complete their healing process and are ready to leave the Centre.

After healing comes Reintegration, which is the Reintegration of trafficked survivors back into the society. Reintegration often comes with a lot of challenges and discriminations from our society. The trafficked survivors get to cope with the challenges / discriminations and end up being accepted or rejected by people in society.

This Rehabilitation Centre will help reduce the number of women and young girls who plan on travelling abroad in search of greener pasture.

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