

**Resiliency After Trauma: Helping Sex Trafficking Survivors Heal**

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In the last decade, human trafficking has become a leading and lucrative black-market industry, second only to global drug trafficking (Polaris Project, 2019). Unlike drugs, which can only be consumed once, the product, human beings, can be used over and over again (Marburger & Pickover, 2020). A September 2017 report from the International Labor Organization (ILO), found that, around the world, approximately 25 million men, women, and children have been forced into the human trafficking industry, which is worth approximately \$150 USD billion worldwide. Over four million of those trafficked victims have been forced into commercial sexual exploitation, including one million children, the majority of whom are women and girls (ILO, 2017). The business of sexual exploitation yields approximately \$90 USD billion worldwide (U.S. Department of State, 2016). Sex trafficking survivors often experience physical, sexual, and psychological abuse at the hands of traffickers and sex buyers, leading to psychological effects including symptoms associated with posttraumatic stress disorder (PTSD), depression, anxiety, trust issues, and relationship difficulties (Hopper & Gonzalez, 2018).

Within the last 10 years, studies have shown that resilience, or the ability to bounce back from traumatic experiences, is critical to the recovery process of sex trafficking survivors, who may have relied on maladaptive behaviors to cope (Hamby et al., 2017; Knight et al., 2021). The American Psychological Association (2014) defines resilience as “the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress” (p. 2). Research suggests that resilience is a process, not a personality trait, that is composed of biological, psychological, social, and cultural factors that interact together to determine how well an individual is able to recover from adversity (Southwick et al., 2014). As a result, trafficking survivors need comprehensive, integrated, and positive social, legal, and psychological services

that promote their physical, mental, and spiritual healing and build their resilience (Graham et al., 2019).

The United Nations (2000) trafficking protocol defines human trafficking as:

The recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. (p. 2)

The US-based National Human Trafficking Resource Center (NHTRS, 2016) defines sex trafficking as a subset of human trafficking, where the victim, mostly women and girls, and an estimated 12% of boys and men, are lured into the sex industry for the purposes of providing sexual services for sex buyers for money or other forms of remuneration. Sex traffickers control their victims through coercion, force, and fraud, to compel vulnerable individuals to engage in commercial sex acts (NHTRS, 2016). The pathway into the sex trafficking industry varies situationally, but often the trafficker, approximately 81% of whom are male in Canada (Conroy & Sutton, 2020), targets a young and vulnerable individual and begins to “groom” them by befriending them. He pays a significant amount of attention to them, offering gifts and compliments, and making them feel like he is their boyfriend (Thaller & Cimino, 2017).

After a while, the trafficker then turns on the victim and expects them to pay him back for the gifts and favors he has done for them, by having sex with his friends or strangers for money, which they must hand over to the trafficker (Moore et al., 2020). If the victim refuses, the trafficker will often beat, rape, or torture them until they comply. This is done to make the survivor submissive and to take away their sense of agency (Sukach et al., 2018). The sex

trafficking victim is then trapped into a cycle of performing forced sexual acts with sex buyers multiple times a day with no safe way to exit because of fear that the trafficker will severely hurt or kill them (Marburger & Pickover, 2020). However, studies show that even in these adverse conditions, sexually exploited victims, particularly child victims, possess a sense of agency and can use a variety of subtle, and sometimes overt, resistance tactics to retain even a small amount of control over their situation (West & Loeffler, 2015).

With little hope of escape or rescue, sexually exploited victims turn to alcohol, drugs, dissociation, and derealization to cope, with many survivors reporting feelings of being separated from their bodies, feeling like their experiences are not real, forgetting, or blocking the disturbed memories (McGuire, 2019). Many victims of sex trafficking do escape at some point, but frequently end up back with the trafficker. Some of the reasons include the complicated love/hate relationship with the trafficker, a lack of aftercare resources, fear for their lives, and lack of psychological help (Gagnon et al., 2018; Hagan et al., 2021). However, research indicates that survivors can exit and recover from commercial sexual exploitation with effective, holistic, culturally-sensitive, and nonjudgmental trauma-informed social, medical, and psychological services (Contreras et al., 2017; Countryman-Roswurm & DiLollo, 2017; Gagnon et al., 2018; Hickie, 2017; Knight et al., 2021; Marburger & Pickover, 2020; Pascual-Leone et al., 2017; Salami et al., 2018). Thus, an informed understanding of resiliency after trauma for sex trafficking victims is important for those in the mental health services field.

This paper will explore the factors that promote resiliency and healing in the sex-trafficked survivor who has successfully exited the industry. Background information on sex trafficking will demonstrate how prevalent the issue is and will describe what the experience is like for the survivor. Solid empirical research will be presented to inform social service

providers, mental health clinicians, and other stakeholders regarding the psychological effects of commercial sexual exploitation on survivors in the event they encounter this population. The research will be structured thematically based on the internal and external factors that promote resilience in the sex trafficking survivor. A self-positioning statement will explain how I became interested in this issue, and will outline my personal biases, and how they will be addressed. In addition, because experts have a responsibility to support the healing of traumatized sex trafficking survivors, social advocacy through educating individual citizens, businesses, and politicians about the economic, mental health, social, and political impacts on society is a critical consideration (Bouche et al., 2018; Gerassi, 2015).

### **Self-Positioning Statement**

I became interested in the subject of sex trafficking a few years ago after reading news articles about the Yazidi women in Iraq and Syria who were kidnapped by the Islamic State of Iraq and Syria (ISIS) terrorists and kept as sex slaves (Loveluck & Salim, 2019; Otten, 2017). I wondered what psychological factors had enabled them to endure the trauma they had experienced. Shortly after, I viewed a documentary entitled *Dreamcatcher* (Longinotto, 2015) that focused on the increasingly large number of sex trafficking victims in the United States, ensnared by the commercial sexual exploitation industry. I began to study the subject of sex trafficking further to understand the psychological impact on sex-trafficked survivors. I was curious to learn what the recent research had to say about the protective factors that promoted resilience after enduring the trauma of being raped and tortured by traffickers and sex buyers. I became hopeful for these individuals when I learned that with the help of effective, trauma-informed social and psychological services, it was possible for survivors to recover, heal, and move on after exiting the industry. As a result, I chose this topic for my capstone research project

because, after studying the subject of sex trafficking and empathizing with this population, I made the decision to devote a portion of my future psychological practice to helping survivors of sexual exploitation. It is my intention and hope that through this project, clinicians, social service providers, law enforcement agencies, the legal system, and others will be informed about the value and potential for social, legal, and psychological services to transform the lives of the marginalized sex-trafficked survivors.

I acknowledge that I hold several personal biases towards this subject. Firstly, I realize that I am not currently impartial. I come to this research with a preconceived notion of who the sex-trafficked victim is, what their background is, and how they were lured into the industry. I never knew much about sex trafficking before viewing the *Dreamcatcher* documentary. I always thought that all sex workers were willing prostitutes that were homeless, runaways, and drug addicts, voluntarily making a choice to sell their bodies for sex in exchange for money or drugs. Like many people, I realized that my ignorance led me to hold that judgmental belief for many years, until I became informed about the plight of sex work and commercial sexual exploitation, which allowed me to become empathetic and open-minded towards their experiences. I realized that my assumptions may have been completely wrong in many cases, so during this literature review, I must work to ensure that I intentionally follow the research. I intend to keep an open mind as I complete the literature review and avoid assumption-making and judgment.

The second bias I hold that could interfere with my review of the research is the assumption that all sex workers are victims. Some sex workers may not be sexually exploited and may have chosen it as an occupation. They may not have been coerced, beaten, forced, or kidnapped into their situations, and therefore, may not see themselves as victims or in need of rescue. Interesting, this bias is addressed in a research study I read. The author noted that many

sex workers think of their sex work as a profession (Antebi-Gruszka et al., 2019). I intend to deal with this bias by reviewing research on sex workers who voluntarily choose sex work, reading the testimonial stories detailed in the qualitative research and checking my personal bias against the literature, while remaining open-minded. Thirdly, another bias I hold is that law enforcement and sex workers tend to have an antagonistic attitude towards each other. While reviewing the literature, I expect to find a high level of mistrust of law enforcement among sexually exploited survivors (Gilligan, 2015; Rajaram & Tidball, 2018). It will be interesting to discover if this bias is accurate.

Another bias that I hold is that because I am passionate about this topic and wish to help sex trafficking survivors cope with the trauma caused by their experience, there is a part of me that has a desire to “rescue” them. However, I understand that this is not possible to do. I am one person and am not responsible for “saving” anyone, even if this was possible. Each individual is responsible for their own choices in life. Although I recognize I cannot save anyone, I do realize that I can be a support to survivors and help them heal and move forward with their lives. As much as I would like to see a happy ending to all the stories of suffering and abuse experienced by sex trafficking survivors, I understand that not every sexually exploited and abused individual will exit the industry, recover, and go on to live a happy, joyful life. As a graduate psychology student, I know healing and change may take a very long time and is often incrementally slow. It often involves confronting the past, sitting with discomfort and pain, and moving through the experience. To deal with the personal bias of wanting all sex trafficking survivors to have happy endings, I plan to be mindful when I use search terms to research articles, using broadly used language and terminology, and looking for research in other areas related to sexual exploitation such as sexual assault, interpersonal violence, and prostitution. I will also inquire into what the

research informs us about the most effective therapeutic models to use with this population and will be on the lookout for research that contradicts my assumptions.

I believe that to conduct a thorough literature review on the resiliency factors that help sex trafficking survivors heal, I must keep a personal reflections journal to capture the emotional feelings that come up for me. I recognize that emotional reactivity could potentially cloud my judgment and cause my research findings to be skewed during the process. Staying mindful about my reactions to the literature will also keep me grounded and objective, preventing me from getting too close and invested in the research. I must constantly remind myself not to become too empathetic with the stories, which I recognize have the capacity to create a vicarious traumatization effect on me. Practicing self-care, engaging with my family and friends, and remaining impartial in my research are all factors that will help me separate from the content of the research as well as increase my ability to find ways to limit how these biases cloud my judgement when working with this vulnerable population.

### **The Literature Review**

This literature review begins with a general discussion and broad overview by providing a definition of trauma and the elements that are common to survivors, no matter the population or the type of traumatic experience. This will provide the reader with an understanding of the complexity and subjectivity involved in any individual's encounter with trauma. It is important to provide this overview prior to the literature specific to survivors of sexual trafficking as this population experiences the same elements of trauma as other survivors, but with the unique and complex layer of a trauma bond with their trafficker, making their recovery more complicated (Hagan et al., 2021; Woehler & Akers, 2021).



The *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; DSM-5; American Psychiatric Association, 2013) defines trauma as:

Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways: (1) directly experiencing the traumatic event(s); (2) witnessing, in person, the event(s) as it occurred to others; (3) learning that the traumatic event(s) occurred to a close family member or close friend. In the cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental; (4) experiencing repeated or extreme exposure to adverse details of the traumatic event(s) (e.g., first responders collecting human remains; police officers repeatedly exposed to details of child abuse). (p. 271)

The Substance Abuse and Mental Health Services Administration (SAMHSA; 2014) categorizes traumatic events by natural traumas, such as hurricanes, tornados, floods, earthquakes, and fires, and human-caused traumas, defined as murder, suicide, assault, and sexual assault or abuse. Further human-caused traumas include child abuse, interpersonal violence, human trafficking, and terrorist attacks (SAMHSA, 2014). Briere and Scott (2015a) reveal that complex trauma is the result of experiencing multiple traumatic events, over an extended period, over a life span, usually beginning in childhood. Past traumas are significant risk factors for future revictimization (Briere & Scott, 2015a). Survivors' immediate reactions to adverse events are often based on their personal experiences, history, social, and cultural practices and accessibility to positive supports (SAMHSA, 2014). Not all individuals who experience trauma develop psychological disorders. However, distress during or after the trauma is an additional risk factor that increases the potential for developing psychological disturbances, particularly if the event

induces feelings of horror, fear, or helplessness in the individual affected (Briere & Scott, 2015b).

### **Common Trauma Responses**

Briere and Scott (2015b) list the common immediate responses to traumatic events including fear, anger, shame, guilt, flashbacks, sleep disturbances, hypervigilance, activated startle response, and lowered stress tolerance. In most cases, these symptoms tend to subside within a short period of time after the event (Briere & Scott, 2015b). The reactions to traumatic experiences most common to survivors can typically be categorized by emotional reactions, neurobiological responses, cognitive distortions, and behavioral outcomes (SAMHSA, 2014). Emotional dysregulation is a common feature of trauma, as traumatic events can trigger a range of emotions, and trauma survivors often exhibit symptoms such as extreme sadness or dysphoria, insomnia, loss of interest in formerly enjoyable events, inability to concentrate, and difficulty rising out of bed (Briere & Scott, 2015b). Individuals who have experienced traumatic events may turn to temporary self-medication, self-harming behaviors, or compulsive behaviors such as gambling, sex, and overworking to cope or repress overwhelming feelings associated with depression (SAMHSA, 2014).

Some trauma survivors may experience panic attacks, characterized by symptoms such as palpitations, difficulty breathing, sweating, and feelings of impending doom, triggered by the distressing event (Briere & Scott, 2015b). Complicated or traumatic grief often accompanies trauma responses, particularly when a loved one dies or is violently killed or injured, and symptoms include persistent, frequent, intrusive, and distressing thoughts, profound sadness, and loss of interest in normally enjoyable activities (Briere & Scott, 2015b). Survivors may experience guilt, shame, and self-blame after witnessing a gruesome injury or death, but in the

majority of survivors, these symptoms generally subside within a few weeks (Briere & Scott, 2015b).

### ***Neurological Responses to Trauma***

Neuroscientific research on brain function has discovered that trauma survivors, particularly those who suffer from complex trauma, undergo changes in the brain that alter the neuropathways and neurotransmitter transmission associated with emotional regulation, memory function, and cognitive processing (Ben-Zion et al., 2019). Changes to the brain most affected by traumatic events include the limbic system functioning, particularly the amygdala, and the hippocampus, the hypothalamic-pituitary-adrenal axis, modulating cortisol levels and neurotransmitters regulating arousal and endogenous hormonal systems (SAMHSA, 2014; Wang et al., 2016). This means that a trauma survivor is likely to experience memory lapses, flashbacks, nightmares, hypervigilance, and emotional dysregulation (Ben-Zion et al., 2019). Other neural circuits damaged as a result of trauma include ventromedial prefrontal cortex and the dorsal anterior cingulate cortex, which coordinate cognitive and motor control (Ben-Zion et al., 2019). Other areas of the brain that change after experiencing trauma include the neural systems that modulate learning, threat detection, decision-making, and the uncinate fasciculus, white matter that connects the prefrontal cortex to the temporal cortex, allowing for cognitive processing of spatial and contextual processing (Ben-Zion et al., 2019; Wang et al., 2016).

### ***Common Cognitive and Behavioral Elements of PTSD After Experiencing Trauma***

When trauma symptoms do not dissipate after within 2 weeks, or become increasingly problematic, individuals may develop PTSD, a psychological disorder often marked by experiencing or witnessing one or more traumas, and is characterized by symptoms such as experiencing flashbacks of the event(s), sleep disturbances, numbing, fear, exaggerated startle

response, lack of interest in daily activities, loss of hope, hypervigilance, and alcohol and substance abuse (American Psychiatric Association, 2013, pp. 271–280). An element of PTSD common to trauma survivors involves changes in cognition and behavior immediately after a traumatic event (SAMHSA, 2014). One of the most prevalent cognitive changes that occur after the event is cognitive distortions, most notably catastrophizing, all-or-nothing thinking, overgeneralization, and negative mental filtering (SAMHSA, 2014). Persistent negative beliefs about oneself are associated with impulsivity, reckless behavior, and self-destructive behavior, particularly for those who have experienced multiple childhood traumas and interpersonal violence (Cloitre, 2015). For the trauma survivor this might present as hyperarousal, characterized by sleep disturbances, hypervigilance, muscle tension, and a high startle response. Many war veterans have reported behaviors such as sitting against the wall in restaurants to prepare in case an attack occurs or securing the perimeter of a building before loved ones enter, suggesting a substantive response to fear of threat of PTSD (Briere & Scott, 2015b).

Disassociation and derealization are common symptoms experienced by trauma survivors, used as coping mechanisms for fear caused by the traumatic event. Dissociation occurs when an individual feels a sense of detachment from oneself, as though life experiences are happening to someone else and not themselves (Briere & Scott, 2015b). Derealization occurs when an individual who has experienced trauma feels as though life experiences and events are not real (Briere & Scott, 2015a). Individuals who suffer from PTSD often report a sense of “spacing out” or cognitive-emotional disengagement, and amnesia or missing time, side effects from the lack of ability to process the traumatic event (Briere & Scott, 2015b).

This discussion on the elements of PTSD is meant to provide the reader with a basic understanding of how trauma can impact the survivor, no matter the circumstances or the nature

of the distressing event. Trauma associated with sex-trafficked survivors is unique because it involves many complicated and nuanced factors, including shame, low self-esteem, coercion, trauma-bonding, and hopelessness to change the situation. The following sections of the literature review will expand upon the effects and impact of trauma specific to survivors of sex trafficking, focusing on the psycho-social and legal factors that promote resiliency in the sex trafficking survivor who has exited the industry and is attempting to reintegrate into mainstream society. The major finding of this comprehensive literature review is that the research is clear, that despite the physical and psychological challenges faced by commercially sexually exploited individuals, their inner strength, and resiliency to recover from adversity can enable them to create a new, healthier life for themselves. While not all sexually exploited individuals manage to exit the sex industry, it is clear from the literature that often, with the help of social agencies, law enforcement, and other resources, survivors are able to pull through the experience of trafficking.

The findings from this comprehensive literature review have been synthesized into several themes. Four major factors are identified that contribute to building resiliency in the sex trafficking survivor. These include a) inner strength, hope, and resistance; b) positive social networks; c) positive experience with law enforcement, the court system, and social services; and d) access to effective, evidence-based psychological therapy. Most of the literature examined made it clear that access to these services, combined with the inner resources the survivor already possesses, work together to build resiliency in the sex-trafficking survivor (Gagnon et al., 2018; Gilligan, 2015; Hamby et al., 2017; Hickie, 2017; Moore et al., 2020; Pascual-Leone et al., 2017; West & Loeffler, 2015). However, other research points to the fact that some of these services are currently lacking, underfunded, or are not trauma-informed, which provide hinderances to resilience of the survivor (Duncan & DeHart, 2016; Rajaram & Tidball, 2018;

Twigg, 2016). There is much work to be done to improve access to legal, medical, social, and mental health services that are nonjudgmental, trauma-informed and victim-centred (Duncan & DeHart, 2016; Gagnon et al., 2018; Rajaram & Tidball, 2018).

### **Inner Strength, Hope, Spirituality, and Emotional Self-Control**

The relationship between the trafficker and the trafficking survivor is a complicated one, often marked by violence, intimidation, and coercion, but also by dependence, love, and enmeshment as the trafficker alternates between demonstrating sweetness, affection, and kindness, and then showing a violent, angry, and controlling side (Reid, 2016). This dichotomous behavior entraps the sex trafficking victim into a trauma bonding relationship (Casassa et al., 2021). It is clear from the literature examined that there is a strong correlation between possessing inner strength and self-control, and recovery from sexual violence. Several studies reviewed indicated that victims, who were in intimate partner violence (IPV) relationships with their traffickers at the time, depended on their inner strength and emotional self-control to retain at least some of their self-identity as well as protect their emotional, mental, and physical safety during their experience (Davis, 2002; Hamby et al., 2017; Puente-Martinez et al., 2019; Thaller & Cimino, 2017; Verhoeven et al., 2015; Viuhko, 2019).

This inner strength empowered them to regulate their emotions and stay calm when confronted with violent and frightening circumstances while being trafficked (Balemba & Beauregard, 2019; Davis, 2002; Delker et al., 2019; Puente-Martinez et al., 2019; Verhoeven et al., 2015; Viuhko, 2019). One quantitative study conducted by Puente-Martinez et al. (2019) found that victims of sexual violence need to be able to navigate through and regulate their emotions, particularly negative ones, during the sex-trafficking experience, to cope with difficult situations and find effective solutions. The study discovered that, the greater the amount of stress

and violence the sex-trafficked victim was exposed to, the greater the negative affectivity. Therefore, to cope, they needed to rely on their inner-strength and resolve, most often found using self-rewards and self-control (Puente-Martinez et al., 2019). In her research study, Ruth Davis (2002) discovered, while interviewing the participants about their inner resources, that they used functional coping strategies that protected the self, optimized survival, and summoned up their courage to survive the experience. One participant in Davis' study described how she dug deep inside herself and found the strength to activate her common sense. Yet another study found that multiple strengths, such as the ability to think under stress, remain calm, have a sense of purpose, and the ability to make meaning out of the experience, predicts higher levels of resiliency (Hamby et al., 2017).

### **Positive Social Relationships/Networks**

Another common finding in the research reviewed was that developing positive, supportive, and nurturing relationships is a key resiliency factor that allowed sex trafficking survivors to exit the industry and heal. All the studies reviewed stated that developing and reunifying positive relationships with family, friends, and other sex trafficking survivors promoted resiliency in the individuals (Finigan-Carr et al., 2019; Gilligan, 2015; Marburger & Pickover, 2020; Moore et al., 2020; Pascual-Leone et al., 2017; Sukach et al., 2018). Sukach et al. (2018) stated that survivors of commercial sexual exploitation found it easier to leave the sex trafficking industry when they were able to build connection with other individuals and organizations due to positive support, encouragement, and role modeling. Another study found that when survivors were treated with dignity, respect, and equality, they felt supported and taken seriously due to the warmth and friendliness of their support system (Gilligan, 2015).

Two studies reviewed found that loving, positive, family support was a strong contributor to building resiliency in sex trafficking survivors. The studies found that reconnecting with family, particularly when family members were supportive and nonjudgmental, increased the likelihood the survivor would remain out of the sex trafficking industry (Hickle, 2017; Marburger & Pickover, 2020). However, Antonio Pascual-Leone et al. (2017) found that non-supportive family and friends can be detrimental to healing. They discovered that inadequate support systems can stigmatize the survivor's experience and promote victim-blaming and rejection (Pascual-Leone et al., 2017). Often, sex trafficking survivors, who may already feel a sense of shame and guilt, did not want to return home because they feared being rejected instead of receiving a warm welcome or support (Pandey et al., 2018). Evidence concerning the value of a family support system as a resiliency factor appears to favor positive family support in creating optimistic outcomes. When survivors who have managed to escape their sex trafficking situation are able to develop networks of support with other survivors, it increases their ability to overcome obstacles, develop trusting relationships, and verbalize their traumatic experiences. Peer support is also an important factor in reducing shame, providing a shared experience, as well as preventing the survivor from returning to her trafficker (Countryman-Roswurm & DiLollo, 2017; Delker et al., 2019; Hickle, 2017; Marburger & Pickover, 2020; Pascual-Leone et al., 2017; Suckach et al., 2018).

### **Positive Experiences With Law Enforcement, the Court System, and Social Services**

In the literature reviewed, it was apparent that positive experiences with law enforcement, the court system, and social services were resiliency factors for sex trafficking victims. Most of the research pointed to increased resiliency in survivors when they engaged with police officers who were patient, and took the time to offer them some coffee, and who listened to their stories



(Hickle, 2017; Kulig & Butler, 2019; Preble & Black, 2020). Prosecutors who kept in regular contact with the sex trafficking survivor about the legal case against those who had exploited them and social service workers who provided them with resources like housing, employment, and counselling services also promoted resiliency (Gagnon et al., 2018; Gilligan, 2015; Hickle, 2017; Pascual-Leone et al., 2017).

However, positive police interactions are not always prevalent and prejudice against sex trafficking survivors remains. One qualitative study mentioned that the women they interviewed had negative experiences with policing services, either during arrest, while reporting their trafficking situation to the police, or reporting a sexual assault from a sex buyer or trafficker (Contreras et al., 2017). Many sex trafficking survivors reported they held a lot of mistrust and frustration with the police, who they perceived to respond negatively and non-caring to the women (Gilligan, 2015). This is partly because in countries where prostitution is illegal, law enforcement officers view sexually exploited victims as criminal offenders, sometimes brutalizing them further through rape and other forms of violence (Contreras et al., 2017).

In Canada, a disproportionate number of sex trafficking victims are Indigenous women, girls, and two-spirit and transgender women (Olson-Pitawanakwat & Baskin, 2021). According to the Public Safety Canada's (2016) *National Forum on Human Trafficking Summary Report*, despite Indigenous women accounting for 4% of the Canadian population, they make up 50% of trafficking victims. It is difficult to determine the accuracy of this statistic as identifying and supporting Indigenous survivors of commercial sexual exploitation is complicated by a lack of coordination among the federal and provincial government agencies (Native Women's Association of Canada, 2018). However, sex traffickers target Indigenous women and girls who are vulnerable in large part due to poor housing and living conditions, unstable or nonexistent

family life, lack of access to social and economic resources, and, in many cases, prior physical and sexual abuse (Ontario Native Women's Association [ONWA], 2016).

Many Indigenous women and girls, who have tried to reach out to police for assistance, report that they do not believe law enforcement takes their requests for assistance seriously, properly investigate their claims, and think the police discriminate against them (Bourgeois, 2015; Chartrand, 2019; ONWA, 2016). In 2019, CBC News reporter, Rhiannon Johnson, featured a story on sex trafficking and spoke to survivor and anti-sex trafficking lobbyist Bridget Perrier, who called for the sexual exploitation of Indigenous women and girls to be a national priority. She added that police forces should be held accountable for poor policing and for strategies to protect Indigenous people from sexual exploitation (Johnson, 2019). Contrastingly, in one research article reviewed, the researchers had asked sexually exploited survivors from all cultural backgrounds to rate the services that they found helpful. The study's participants pointed to positive encounters with police, based on respect, dignity, patience, and warmth (Gagnon et al., 2018). In contrast, a study found that participants felt belittled and stigmatized by police officers, who made them feel more like the perpetrator than the victim (Gillian, 2015).

Researchers interviewing sexually exploited survivors found that when the court system maintained contact with survivors to update them on pending legal cases against their traffickers or sexual assault perpetrators, it increased their resilience (Gagnon et al., 2018). In her research study, Kristine Hickle (2017) interviewed sex trafficking survivors about their experiences. Several of the participants recalled how probation officers, judges, police officers, and correction officers had been part of their support network. One participant mentioned that she had regular conversations with a police officer who, during her sex trafficking experience, would wait on the street for her to see how she was doing, and eventually helped her exit out of the industry and

into an alcohol rehabilitation centre (Hickle, 2017). This research study was consistent with other literature reviewed that demonstrate how the criminal justice system can help identify this population's immediate needs and provide tangible and emotional support (Gagnon et al., 2018; Hickle, 2017).

## **Social Services Support**

### ***Housing, Food, Employment, and Access to Victim Services***

When women have access to adequate and affordable housing, food, employment, and engagement with victim services and compensation, they are more likely to develop the resiliency needed to leave the sex trafficking industry. However, when these services are lacking, overwhelmed, underfunded, and appear uncaring, these resources hinder the exit process and victims feel less inclined to ask for help (Gagnon et al., 2018; Gilligan, 2015; Hickle, 2017; Moore et al., 2020; Pascual-Leone et al., 2017; West & Loeffler, 2015). Research has shown that the immediate needs of the sex trafficking survivor include safety, adequate housing, food, medical and dental care, clothing, identification, employment, legal and immigration services, if the survivor has been trafficked to another country, education, and counselling (Bryant-Davis & Gobin, 2019; Marburger & Pickover, 2020). Access to these basic needs is essential because once the survivor has decided to leave her trafficker, she often is left with nothing but the clothes she is wearing (Marburger & Pickover, 2020).

West and Loeffler (2015) found that because survivors of sex trafficking have been betrayed by their traffickers and sex buyers, the ability for service providers to build trust with the women was important to creating resiliency. Service providers often found it difficult and time consuming, but necessary to build trust with sexually exploited survivors in order to provide the essential services. However, the time it takes and the lack of funding resources available to

these service agencies have been barriers (West & Loeffler, 2015). It is important for social service providers to listen in a nonjudgmental way, be open and available, and provide support in a warm and friendly way (Gilligan, 2015). One study emphasized that it is imperative that social workers believe and not blame survivors, while demonstrating care and compassion (Gagnon et al., 2018).

Social service providers and mental health clinicians may not be knowledgeable about the signs of sex trafficking and may miss an opportunity to help the victim, who may not be able to disclose their situation for fear of retribution from their trafficker (Burt, 2019). As a result, social workers and therapists should be trained on all aspects of sex trafficking, including the tactics traffickers use to lure women and girls into the industry, and the complicated trauma bond that forms between the trafficker and the victim (Burt, 2019). Analysis of sex trafficking research shows that when clinicians are not informed about the pervasiveness of commercial sexual exploitation in our society and are not well versed in the complexities of the issue, then they can miss the opportunity to detect sex trafficking and offer therapeutic services (Global Alliance Against Traffic in Women, 2015). Sometimes, sex trafficking victims are not aware themselves that they are being sexually exploited because of the complicated nurturing, but violent, nature of the relationship they have with their trafficker, and debt bondage, which keeps victims indebted to their trafficker until their obligation has been worked off (Kempadoo, 2015). Other social support needs that promote resilience include access to alcohol and drug detox and rehabilitation centres, residential treatment facilities that assist with reintegration into mainstream society, legal services, assistance in regaining custody of children, and protection from the trafficker or abusive partner (Hickle, 2017). The research makes it clear that effective, positive, and caring social services can make it easier to build resilience in sex trafficking survivors who are attempting to

exit the industry and recover. This increases the possibility that sex workers can feel hopeful about their future.

### ***Psychological Counselling and Therapy***

All of the literature materials examined pointed to effective, evidence-based therapy as a key factor to building resiliency in sex trafficking survivors. Much of the research discussed how complex trauma, PTSD symptoms, depression, anxiety, disassociation, hopelessness, suicidal ideation, guilt, self-blame, and lack of control over one's life, can be debilitating and physically and emotionally crippling to the victim. A strong therapeutic alliance is critical and trauma-informed care is essential (Bryant-Davis & Gobin, 2019; Burt, 2019; Contreras et al., 2017; Marburger & Pickover, 2020; Pascual-Leone et al., 2017; Salami et al., 2018; Sukach et al., 2018; Thompson & Haley, 2018). Most of the research discussed the need for clinicians to be trained in and knowledgeable about the uniqueness of the sex-trafficking situation, including how traffickers target and lure their victims, the risks posed to individuals who are recruited into trafficking, signs that an individual has been trafficked, and indications that they are in need of assistance (Bryant-Davis & Gobin, 2019; Burt, 2019; Contreras et al., 2017; Marburger & Pickover, 2020; Pascual-Leone et al., 2017; Salami et al., 2018; Sukach et al., 2018; Thompson & Haley, 2018). Trauma-informed care should place a priority on survivor safety and empowerment and create an understanding of the impact and effect of multiple traumas over time (Salami et al., 2018). Clinicians should receive trauma-informed training to understand how the client makes meaning of the traumatic experience and how it impacts their core beliefs about themselves and their worldview, as well as the short-term and long-term effects of the traumatic experiences (Knight, 2019). It is possible that a therapist working in homeless shelters, domestic violence shelters, crisis centers, or in private practice will come across a sexually exploited

victim without realizing it, so it is imperative that they know the signs of sex trafficking (Burt, 2019).

According to the literature, the most commonly recommended therapeutic modalities for this population included trauma-focused cognitive behavioral therapy (TF-CBT), cognitive processing therapy (CPT), prolonged exposure (PE), narrative therapy, and narrative exposure therapy (Bryant-Davis & Gobin, 2019; Burt, 2019; Contreras et al., 2017; Countryman-Roswurm & DiLollo, 2017; Hargreaves-Cormany & Patterson, 2016; Hendriks et al., 2018; Kenny et al., 2019; Marburger & Pickover, 2020; Pascual-Leone et al., 2017; Salami et al., 2018; Sukach et al., 2018; Thompson & Haley, 2018). Researchers seem to disagree on which modality is preferable, but what the literature makes clear is that the therapeutic alliance is the main healing factor (Burt, 2019; Marburger & Pickover, 2020; Salami et al., 2018). Working with a professional who is caring, empathetic, and a good, nonjudgmental listener is highly reassuring and therapeutic for victims of sexual violence and IPV. Because sexually exploited survivors feel a significant amount of shame, they tend to conceal their experiences or omit details, even from their therapists, leaving the client feeling even more isolated (Blanchard & Farber, 2015; Contreras et al., 2017). One article reviewed stated that between 20%–46% of participants interviewed admitted to keeping secrets from their therapists and suggested that clinicians keep this in mind while providing a safe, open, and transparent space to disclose uncomfortable information (Blanchard & Faber, 2015).

TF-CBT has been endorsed by many studies examined because of its evidence-based manualized treatment and its focus on identifying and reframing maladaptive cognitions that create anxiety and depression in the sexually exploited client (Burt, 2019; Casassa et al., 2021; Mumey et al., 2021; Salami et al., 2018; Sukach et al., 2018; Woehler & Akers, 2021).

According to Burt (2019), TF-CBT has shown high effectiveness with trauma victims, particularly when used as a system called PRACTICE, an acronym providing clients with psychoeducational skills (P), teaching relaxation skills (R), affective change skills (A), effective cognitive managing skills (C), trauma narration and processing (T), in-vivo experimentation and practice dealing with traumatic memories (I), conjoint family/spousal sessions (C) and enhancing safety skills (E). This system is designed to instill empowerment, resiliency, and self-efficacy in the client. In his research, Burt asserts that TF-CBT is effective with children, adolescents, and adults with complex trauma.

Survivors of commercial sexual exploitation often experience memory confusion and cognitive distortions when recalling traumatic events during their experience (Le, 2017). When a survivor's trafficker originally presented himself as a boyfriend, the victim often has difficulty reconciling feelings of love and affection with feelings of resentment, fear and betrayal, and often experiences emotional confusion (Casassa et al., 2021; Mumey et al., 2021; Sukach et al., 2018). TF-CBT interventions help the client to express and process more accurate memories and emotions associated with the trauma, as well as challenge obstructive labels and defeatist self-blame that often arises from stigmatization of the sexually exploited (Burt, 2019; Dell et al., 2019; Hargreaves-Corman & Patterson, 2016; Kenny et al., 2019; Litam, 2017; Pascual-Leone et al., 2017; Stotts & Ramey, 2009; Sukach et al., 2018).

Interventions aimed at behavioral adjustments worked to assist the client in making behavioral changes that promote resiliency, survival, and personal functioning, providing a buffer against emotional and behavioral problems (Burt, 2019; Pascual-Leone et al., 2017). Cognitive reframing helps the client identify maladaptive cognitions, reorient core beliefs and values, and develop goals and expectations that may have been disrupted or never formed by the

traumatic experience (Burt, 2019). Some studies suggest that CBT and prolonged exposure (PE) are effective in treating issues of guilt and shame by reframing cognitive distortions, and preconceived beliefs about the experience of being sexually traumatized (Dell et al., 2019; Hargreaves-Corman & Patterson, 2016; Hendriks et al., 2018;). Another study asserted that CBT has been shown to be effective in treating IPV, for victims who experience violence during the trauma bonding with their trafficker, because of its emphasis on the interconnected relationship between the thoughts, feelings, and behaviors (Arroyo et al., 2017).

Cognitive processing therapy (CPT) and PE have been comparable in their ability to restructure maladaptive thoughts of hopelessness, dysfunctional cognitions about oneself and the world, and reduce feelings of apathy and disinterest in activities (Bryan-Davis & Gobin, 2019; Salami et al., 2018). However, one study suggested that only CPT was effective in treating shame and guilt, possibly because CPT typically involves a slower pace and less flooding operations than PE (Salami et al., 2018). One research article examined focused on the use of intensive prolonged exposure (IPE) to treat PTSD symptoms in 73 child and adolescent sex trafficked participants who had experienced multiple traumas during to their sexual exploitation. It found that there was a demonstrable decrease in PTSD symptoms that persisted after 3-month and 6-month follow-ups with large effect sizes (Hendriks et al., 2018). The authors stated that previous treatments attempts were unsuccessful in the same patients, suggesting that a replication study needs to be conducted (Hendriks et al., 2018). However, 71% of participants did experience partial or complete response to the IPE treatment and, therefore, researchers have found that PE can be an effective treatment for PTSD in sex trafficking victims (Hendriks et al., 2018).

Narrative therapy and narrative exposure therapy (NET) are two other therapeutic modalities that the research points to having potential benefit for the treatment of complex



trauma and PTSD in sex trafficking survivors. Narrative therapy has proven effective in treating this population as it asks the survivor to recount the problem-saturated sex trafficking experience in story form and then through the intervention of re-storying an alternative, happier life, allows the survivor to recreate and reconstruct their self-image, self-identity, and a healthier future (Countryman-Roswurm & DiLollo, 2017; Jani, 2018). In their research study, Robjant et al. (2017) explain NET as an evidence-based, short-term intervention specifically designed for individuals that have experienced multiple traumas. It involves the clinician taking the client through their entire life autobiography, while exploring both the traumatic events and positive experiences in a chronological and detailed manner. The therapist manages exposure to the traumatic experiences in a more directive manner than other modalities so the client is not retraumatized. The clinician and the client spend time exploring, understanding, and monitoring the emotional, physiological, and behavioral reactions the client has during the NET experience and the therapist reflects these experiences back to the client in a conversational manner (Robjant et al., 2017). The therapist then transcribes the autobiography and gives it to the client as a testimony that the therapist “bears witness” to, acknowledging the traumatic events as a part of the client’s life (Robjant et al., 2017).

Research provides further support that NET can be effective in treating trauma, anxiety, and depression in sex trafficking victims (Iglesias-Rios et al., 2018; Lely et al., 2019; Robjant et al., 2017). Narrative therapy appears to be a good fit for treating sex trafficking victims. The therapy can help destigmatize the client’s experience of sexual exploitation, support clients to restore the problem-saturated narrative of self created by the trafficker and the sex buyers, and help the client find a new alternative to the narrative (Countryman-Roswurm & DiLollo, 2017). This treatment modality enables the client to express their feelings of disappointment, anger, and

disgust towards the trafficker and the buyers (Sukach et al., 2018). Narrative therapy allows the client to let go of the old narrative of repeated abuse and low self-worth by externalizing the problem-saturated story in order to separate the trafficked victim from the traumatic experience (Countryman-Roswurm & DiLollo, 2017). The therapist listens for moments where the client displayed resilience, resisted, and dealt with the problem effectively, even if for a moment, which is the first step towards building a more empowering, resilient story (Countryman-Roswurm & DiLollo, 2017).

### **Summary**

This literature review has demonstrated that sex trafficking has negative consequences on the sexually exploited victim, who is subjected to physical, verbal, emotional, spiritual, and financial abuse by the trafficker and the sex buyers. Victims of sex trafficking, who are beaten, raped and tortured multiple times a day, treated like used property with little rest, often feel hopeless and isolated. But as the research demonstrated, with a composite of caring resources, in terms of social supports, including food, shelter, access to legal and financial resources, peer support, networking, and counselling, the sexually exploited victim can become a resilient survivor, able to exit the industry. It is not an easy process for these survivors, but a number of evidence-based, empirically supported therapeutic modalities, such as TF-CBT, cognitive processing, PE, narrative therapy, and EMDR, among other orientations, prove effective in treating this population, allowing them to move forward and integrate these experiences into their lives.

### **Resiliency and Trauma: Implications for Therapists and Service Providers**

The research literature reviewed indicates that although sex trafficking survivors have undergone traumatic experiences, they have enormous strengths and capabilities to endure and

recover from distressing situations (Gagnon et al., 2018; Gilligan, 2015; Hickle, 2017; Kulig & Butler, 2019; Pascual-Leone et al., 2017; Preble & Black, 2020). According to the research reviewed, counselling psychologists, social workers, social service agencies, and law enforcement have a significant impact on the lives of sex trafficking survivors, and if they are poorly trained and ill equipped to work with this vulnerable population, survivors can be revictimized and marginalized (Thompson & Haley, 2018). Most of the research reviewed points to positive experiences with counselling psychologists, social workers, service providers, and law enforcement, leading to successful exit outcomes for sex trafficking survivors (Gagnon et al., 2018; Gilligan, 2015; Hickle, 2017; Kulig & Butler, 2019; Moore et al., 2020; Mumey et al., 2021; Pascual-Leone et al., 2017; Preble & Black, 2020). However, other research suggests that when these helping professionals lack knowledge, understanding, empathy, patience and time, it can cause sexually exploited individuals to feel a sense of mistrust and disillusionment, steering them away from help (Contreras et al., 2017; Gagnon et al., 2018; Gilligan, 2015; Hickle, 2017).

Therefore, the literature review provides numerous implications for care that will inform psychologists, counsellors, social workers, social agencies, and law enforcement in providing valuable and helpful assistance to this population. It is important for these groups to understand the complicated nature of sex trafficking and the complex and dysfunctional relationship between the trafficker and those trafficked (Casassa et al., 2021; Walsh, 2016). Practitioners must be aware of the conflicting feelings of love and hate that the survivor has towards their trafficker. This may explain some survivor's unwillingness to turn their perpetrator in to authorities and does not mean that the sex worker is a willing participant (Casassa et al., 2021; Walsh, 2016). Instead, it could be a possible indication that they are terrorized by the perpetrator and confused by the mix of feelings for them (Casassa et al., 2021; Walsh, 2016).

This section outlines the implications for practice for psychologists, other helping professionals, such as social workers and social agencies, and law enforcement. These occupations work directly with sex trafficking survivors and, because the research literature reviewed demonstrates that positive interactions with these resources promotes resilience in survivors, the information that follows will provide valuable insight into helping the sex trafficking survivor recover from the experience of sexual exploitation.

### **Implications for Counselling Psychologists**

The reviewed research suggests that counselling psychologists may encounter sex trafficking survivors in their work, without even knowing it. This is partly because the client may not self-identify as an unwilling victim of a crime and may believe that they have been complicit in engaging in prostitution, especially if they have been told repeatedly this message by their trafficker (Hickle, 2017). Another reason for the lack of self-disclosure during therapy is often cloaked in guilt, shame, and fear of being judged by the therapist or a wish to forget the experience (Hickle, 2017). Given that exploited individuals have experienced repeated verbal and psychological abuse at the hands of their trafficker and violations of their trust, this population may not be ready to disclose their situation to a counsellor, and the therapist must be acutely aware of this and be willing to patiently wait for the client to take the lead, which empowers the survivor and gives them a sense of agency over their own decisions (Burt, 2019; Thompson & Haley, 2018). Counsellors can increase the therapeutic alliance with their client by demonstrating genuine concern and empathy, while speaking plainly and directly to them about matters, which builds honesty and trust (Burt, 2019). The relationship should be built on a nonjudgmental positive regard, coupled with patience as the client explores their experience in

their own time (Bryant-Davis & Gobin, 2019; Marburger & Pickover, 2020; Pascual-Leone et al., 2017).

The research literature reviewed suggests that a lack of knowledge about sex trafficking and little to no experience recognizing the signs of a commercially sexually exploited victim and working with this population, can create missed opportunities to help them heal and safely exit the industry (Burt, 2019). Counselling psychologists must educate themselves about the entry points into the industry, the trauma bond between trafficker and trafficking victim, resilience factors that promote recovery from their experiences and the role of counsellors in healing (Contreras et al., 2017). When counsellors lack knowledge of sex trafficking and they encounter a survivor, the client may become frustrated by having to stop the therapeutic process to explain things the counsellor does not understand (Mumey et al., 2021). Formal trauma training and knowledge about sex trafficking can help counsellors identify sexually exploited survivors, use trauma-informed, evidence-based therapeutic care to treat them, while being cognizant of the ethical and legal issues present when working with this population, particularly regarding confidentiality and safety concerns (Thompson & Haley, 2018).

Litam (2017) describes elements of a trauma-informed approach to counselling as ensuring the client's physical and emotional stability and safety, making sure they have access to adequate and safe housing, food, water, medication, and money, decreasing the likelihood of returning to the dangerous situation they were in. Once the client is stable and safe, the psychologist may choose to begin to explore the circumstances that increased the risk for sexual exploitation, in a slow and safe manner, to develop a maintenance prevention plan, decreasing the client's chances of going back to the trafficking situation. This should be done in a manner that respects the client's tolerance level to maintain safety (Litam, 2017).

Counselling psychologists need to be aware of how traffickers lure their victims in, including the tactics they use to attract the targeted individual, who they traffic, and how and when the intimidation and manipulation begins because this knowledge can increase therapeutic effectiveness (Thompson & Haley, 2018). Using a trauma-informed approach allows counsellors to encourage clients to build agency in their own recovery process (Pascual-Leone et al., 2017). Counsellors need to be patient, particularly when working with this population and need to recognize that healing and positive change can be a slow process that takes time. This process helps clients feel respected and understood, increasing their sense of agency (Gilligan, 2015). The research reviewed pointed out that strength-based interventions help the client build a sense of self-efficacy and bolstering confidence, needed to increase resilience (Knight et al., 2021).

One of the most significant implications for practice is for counselling psychologists to promote positive relationships between survivors of sexual exploitation and other social service providers (Knight et al., 2021). In addition, survivors should be encouraged to develop positive relationships with their peers, particularly those who have been trafficked before and can relate to and speak about their own experiences of sex trafficking (Knight et al., 2021). Networking and developing positive relationships with caring individuals helps to combat the isolation previously imposed by the trafficker, which promotes resilience (Knight et al., 2021; Pascual-Leone et al., 2017; Thompson & Haley, 2018). In terms of therapeutic modalities, the research reviewed suggests that the well-researched, evidence-based orientations will work well with this population, particularly CBT, narrative therapy, EMDR, PE, and CPT because of their standardized intervention processes (Burt, 2019; Casassa et al., 2021; Mumey et al., 2021, Salami et al., 2018; Sukach et al., 2018; Thompson & Haley, 2018; Woehler & Akers, 2021). One study suggested that the cognitive, affective, and behavioral effects of sex work be explored

in therapy, and how the experience affected the client's body image, worldview, and self-esteem (Antebi-Gruszka et al., 2019). The biggest implication for counselling psychologists is to incorporate a trauma-focused, strength-based, and culturally sensitive approach, combined with a strong therapeutic alliance, based on unconditional positive regard, openness, transparency, empathy, and attentiveness to whatever modality they use most regularly in their daily practice (Burt, 2019; Casassa et al., 2021; Mumey et al., 2021; Salami et al., 2018; Sukach et al., 2018; Thompson & Haley, 2018; Woehler & Akers, 2021).

### **Implications for Social Agencies**

The themes pointed out in the literature review may be useful for professionals who work with this population, helping survivors to exit commercial sexual exploitation, and assisting them to reintegrate into society. One implication for counselling professionals and social service agencies is that helping professionals must examine their own perceptions and assumptions about sex trafficking victims (Sukach et al., 2018). The research reviewed is clear that perceptions are indeed slowly changing (Gagnon et al., 2018). With continuing education, more professionals are beginning to realize that sexually exploited individuals are often unwittingly lured into the industry (Pascual-Leone et al., 2017). Social workers must be continually monitoring their beliefs, perceptions, and feelings about this population and recognize how these biases may impact the therapeutic relationship with the client and cause potential harm to the individuals they are trying to serve (Gagnon et al., 2018; Mumey et al., 2021; Pascual-Leone et al., 2017; Sukach et al., 2018; Rajaram & Tidball, 2018). Helping professionals should also be aware that not all sex workers are victims of sex trafficking, and some choose the industry willingly, without coercion (Curtis et al., 2018). There are implications for all many helpers who work with

this population, including being aware that some sex workers are there willingly, and to not make assumptions or jump to conclusions (Curtis et al., 2018).

Individuals who have been exploited for commercial sex may avoid accessing medical, social, and psychological help if they perceive stigmatization and discrimination from those who purport to help (Sukach et al., 2018). One study reviewed reported that some sex trafficking survivors had trouble working with service providers because they felt that the professionals were impersonal, dismissive, or seemed like they were trying too hard to pretend they understood the experience of being sexually exploited (Mumey et al., 2021). Another study reported that some commercially sexually exploited survivors perceived the service providers to be victim blaming, by asking questions that appeared to be blaming, such as asking the client how much they had to drink that night or what they were wearing (Gagnon et al., 2018). The same study stated that some sex trafficking survivors felt like the service agencies were overwhelmed, understaffed, and overloaded, rushing the survivor through the provided services, not attending to their emotional state, and, in many cases, it took weeks or months to get an appointment to see a social worker due to staff shortages (Gagnon et al., 2018). These reports suggest that there is an opportunity for counselling psychologists and social service providers, who provide emergency shelter, food, financial, and employment assistance to sex trafficking survivors, to listen more attentively and compassionately to them and learn more about their experiences, to advocate for more funding for increased research and staffing, so that the sex trafficking survivors receive more supportive services (Gagnon et al., 2018).

The research literature reviewed pointed to another implication for counsellors and other helping professionals, which is to ensure they are trained to provide support using a trauma-informed approach (Pascual-Leone et al., 2017; Rajaram & Tidball, 2018; Sukach et al., 2018).



Building a therapeutic alliance with the client allows counselling professionals, social workers, and service agencies to create a nonjudgmental atmosphere, which if it remains consistent over time, facilitates a more trusting relationship between the service provider and client (Pascual-Leone et al., 2017). A trauma-sensitive approach will also allow the client to take the lead on the types of services they need, empowering them to make independent decisions, something they were deprived of during the sex-trafficking experience (Sukach et al., 2018). The research pointed to the importance of understanding the impact that the trauma has on the survivor's relationships with men in particular, as, after being mistreated by their perpetrators, who were mostly men, some survivors view men as dangerous, deceiving, violent, and exploitative (Sukach et al., 2018). One study reported that when there is little attention to the problem of sex trafficking and a lack of a trauma-informed approach, survivors feel even more isolated and alienated, allowing buyers and traffickers to continue exploiting them with impunity (Rajaram & Tidball, 2018).

The research reviewed pointed to a third implication for psychologists, counsellors, social workers, and other helping professionals. The articles reviewed suggested that wraparound and inclusive services for sex trafficking survivors are critical, particularly services such as finding housing and developing job and skills training, because poverty and inability to maintain financial stability are key reasons that survivors end up reentering the sex industry (Gagnon et al., 2018; Rajaram & Tidball, 2018). Collaboration between therapists, social service agencies, law enforcement, and other helping professionals is an important element to wraparound services (Gagnon et al., 2018). When therapists coordinate information and resources with police and the court system as well as with other helping professionals, the survivor is more likely to feel supported and heard (Gagnon et al., 2018). Finally, because many counsellors have access to the

latest research studies through their professional associations, they can learn about the plight of the sex trafficking survivor (Edwards & Mika, 2017). Possessing knowledge about the prevalence of sex trafficking, the entry points into the system, strategies for exiting the industry and the effects of the traumatic sexual exploitation experience can assist them to act as social justice advocates to create public awareness, change the stigma around the sexually exploited sex worker, and advocate to change policy legislation (Edwards & Mika, 2017). Psychologists, counsellors, social workers, and social service providers can identify barriers to care that prevent sex trafficking survivors from accessing health care and social services and contribute to the development of health services that are trauma-sensitive, emotionally safe to trauma survivors, culturally sensitive, and client-centered (Price et al., 2021).

The research reviewed makes it clear that helping professionals can be advocates for change in the struggle survivors find themselves in when facing poverty and an inability to make a living outside the sex trafficking industry (Dinse & Rice, 2021; Edwards & Mika, 2017; Preble & Black, 2020). Helping professionals, especially social workers, who often work with clients to access social and economic services, can encourage policy makers to improve the issue of fair wages to reduce barriers from exiting the sex industry. According to one study, financial pressure and inadequate wages were the two main barriers to exiting the sex industry (Dinse & Rice, 2021). Counsellors and social workers should advocate for policies that address the pay gap and to provide job opportunities for those who exit the sex industries with wages that could meet a family's basic needs (Dinse & Rice, 2021). Helping professionals can inform and influence policy makers and legislators to create policy that addresses these barriers (Price et al., 2021). They can also advocate for strength-based policies that promote resilience in sex trafficking survivors, including providing access to education for sexually exploited victims, destigmatizing

sex trafficking, creating policies that promote a sense of belonging in one's community, research to support victim services, outreach and awareness efforts, and developing opportunities that build self-worth (Knight et al., 2021). Counselling psychologists, social workers, and social agencies should be involved in the development of social policies and legislation that promote resilience and self-efficacy in sex trafficking survivors because of the wealth of knowledge and experience they possess as well as the ability to bear witness to the traumatic experiences this population undergoes (Edwards & Mika, 2017).

### **Implications for Law Enforcement**

The research literature reviewed outlines the important role that police and other criminal justice personnel play in the lives of sex trafficking survivors. The one research article suggested that police who interacted with sex workers in a negative, demeaning way, complicated the situation for sex trafficking survivors by shaming them and providing a barrier to getting help (Duncan & DeHart, 2016). In contrast, when law enforcement provides positive support to survivors wanting to exit the industry, it empowers them to seek change (Duncan & DeHart, 2016). For example, some studies pointed to the negative view police hold towards sex trafficking survivors, who are often still viewed by police as offenders, are arrested, and verbally, physically, and sometimes sexually attacked and demeaned, causing retraumatization and revictimization to occur (Duncan & DeHart, 2016; Sherman et al., 2015). Finn et al. (2015) found, that in a study of female sex workers, one quarter of them had been paid for sex by police officers, and one fifth of them had been blackmailed or coerced into having sex with police officers in exchange for more lenient treatment. Another article stated that in Baltimore, MD, a small number of female sex workers participating in the study were solicited for sex by police officers, and although they were paid for their services, they felt coerced because of police

intimidation and abuse of power (Sherman et al., 2015). However, another study reported that positive interactions with police who believed the survivors' stories, and provided social resources, were extremely helpful in helping them exit the sex industry (Hickle, 2017).

According to the research literature reviewed, when police understand the nature of sex trafficking, particularly the reasons why victims end up engaging in sex work, the complicated relationship between the trafficker and trafficked, and the damage done to individuals in this population, and when police are trained to identify the signs of sex trafficking and reframe their perceptions from prostitutes to victims, law enforcement personnel can be a very useful resource to survivors trying to exit the industry (Duncan & Dehart, 2016; Hickle, 2017; Sherman et al., 2015). In a study focused on Canadian Indigenous girls and women and sex trafficking, several of the participants shared that law enforcement placed a role in their escape from the sex trade, when they intervened after the girls had been arrested (Olson-Pitawanakwat & Baskin, 2021). Police officers can interrupt the cycle of arrest and reentry into sex work, by distinguishing between sex worker and sex trafficking victim, identifying those who need help and intervening to help the survivor exit the industry or, if they are not ready, prepare to leave and find safety (Duncan & Dehart, 2016; Hickle, 2017; Olson-Pitawanakwat & Baskin, 2021; Sherman et al., 2015).

### **Fundamental Next Steps for Research**

The literature reviewed has demonstrated that research on the needs and outcomes of sex trafficking survivors has increased in the last 7 years. However, the literature review conducted in this paper makes it known that there are some significant gaps in the literature regarding the identified sex trafficking issue that need to be addressed, primarily the need for larger samples in studies since current quantitative studies tend to use smaller samples and results are somewhat

limited as a result (Cockbain & Bowers, 2019; Gerassi et al., 2017; Moore et al., 2020). The literature review conducted stated that focus is needed on a comprehensive view of the reasons why people enter the commercial sex exploitation industry, how traffickers target specific individuals, and what vulnerabilities exist that make some people more likely to be lured into the sex trade, particularly those under the age of 18, who are particularly susceptible (Cockbain & Bowers, 2019; Gerassi et al., 2017; Moore et al., 2020). Developing and using research instruments, measurements, and data-collection methods that are easy and reliable for a range of services such as nongovernmental organizations, medical services, and community organizations to use will help researchers to address this population's diverse backgrounds, vulnerabilities, and needs (Gerassi et al., 2017; Graham et al., 2019). Including sex trafficking survivors in the research design and implementation process, especially the voices of subgroups of survivors, such as boys and men, members of the LGBTQ community, and rural residents, can be important to ensure their voices are heard and that research measures are appropriate and relevant to this population (Cecchet & Thoburn, 2014; Graham et al., 2019).

Casassa et al. (2021) identified that research on understanding the trauma bond between the trafficker and the survivor and how to sever that bond is an important area for further study as it has implications for psychologists, medical personnel, and service providers. Often, because the survivor does not self-identify as being trafficked, opportunities for others to intervene are missed. Verhoeven et al. (2015) likened the relationship between trafficker and survivor to domestic violence. They found that many survivors who have escaped the industry end up returning to their trafficker for many reasons, but chiefly because the trauma bond is so strong. The trafficked individual is confused and ambivalent about the conflicting behavior of affection and attachment and violence and intimidation on the part of the trafficker (Casassa et al., 2021;

Verhoeven et al., 2015). Further study in this area will arm counselling psychologists and service providers with a clearer understanding of the hold the trafficker has on the sexually exploited individual.

According to the literature reviewed, there appears to be limited research on the use and effectiveness of culturally sensitive approaches for sex trafficking survivors (Bryant-Davis & Gobin, 2019; Dell et al., 2019; Hershberger, 2021). Bryant-Davis and Gobin (2019) found that because sex trafficking survivors come from a myriad of ethnic, cultural, economic, and linguistic backgrounds, there no clearcut way of identifying them or their individual needs. In fact, many victims are trafficked from different countries or regions and may not speak the language of the new country. Therefore, more research is needed to develop culturally sensitive care for this diverse population (Bryant-Davis & Gobin, 2019).

Another opportunity for future research surrounds the effects of post-exit interventions as there are not many studies done in this area, perhaps given that focus on domestic sex trafficking has only gained attention primarily within the last 5 years (Dell et al., 2019). The evaluation of social and mental health interventions after the survivor has been rescued is important to gauge the effectiveness of solutions in the long term (Dell et al., 2019). Although the research reviewed pointed to the success of various modalities combined with a trauma-informed, client-centered approach in treating a variety of populations who experience traumas, there appears to be scant research on an evidence-based theoretical treatment program designed specifically for sex trafficking victims (Dell et al., 2017; Herrington & McEachern, 2018; Sukach et al., 2018; Thompson & Haley, 2018). More research is needed to identify the specific treatments that are effective for this specific population and create a targeted treatment program designed for the many issues they face (Dell et al., 2017; Herrington & McEachern, 2018; Sukach et al., 2018;

Thompson & Haley, 2018). This may be difficult though due to the individual differences in survivors.

One study found that because of the traumatic events endured by survivors, narrative therapy may be an effective modality for treatment, particularly for deconstructing the trauma bond between the trafficker and trafficked as recounting the problem saturated story and then building an alternative story may be a useful way of reorienting problematic thinking (Sukach et al., 2018). But further research that categorizes the types of trauma responses that survivors may experience and testing them with various modalities may be warranted (Dell et al., 2017; Dworkin & Schumacher, 2018). There is need for future research to investigate and evaluate the efficacy of evidence-based treatments typically used to treat trauma for the unique needs of this special population (Herrington & McEachern, 2018; Thompson & Haley, 2018).

Finally, future research should concentrate on exploring effective ways in which protective factors can promote resilience in commercially sexually exploited individuals, relying on larger and diverse samples, to help clinicians and service providers develop and implement programs to build resilience and self confidence in this population (Hickle, 2017). Further study can help to identify the most important strengths and factors that help trafficking survivors recover from trauma (Hamby et al., 2017).

### **Recommendations for Practice**

The research literature reviewed for this paper indicates there are many recommendations for clinicians working with this population. Most of the research reviewed suggest that the particular therapeutic modality used matters less than relationship building with the client (Bryant-Davis & Gobin, 2019). The chief recommendation suggested that clinicians take their time and proceed slowly with the client to build a strong therapeutic alliance, based on trust,

empathy, and nonjudgement (Bryant-Davis & Gobin, 2019; Casassa et al., 2021; Dell et al., 2019; Gagnon et al., 2018; Hagan et al., 2021; Hamby et al., 2017; Kenny et al., 2019; Knight et al., 2021; Preble & Black, 2020; Rajaram & Tidball, 2018; Sukach et al., 2018; Thompson & Haley, 2018). Connecting personally to the client and getting to know them is important to help the client develop trust and open up (Kenny et al., 2019).

First, according to Rajaram and Tidball (2018), it is important for all professionals working with sexually exploited survivors, whether its counselling psychologists, social workers, service providers, medical personnel, or police, to advocate on behalf of this population, by educating the public through awareness campaigns in order to reduce the stigma, shame, and embarrassment as well as strategies preventing further exploitation to others. Professionals should be encouraged to screen early and learn to identify sex trafficking victims, as they may encounter survivors in their professional role without being overtly alerted to it (Rajaram & Tidball, 2018). Practitioners need adequate special training and resources to help them understand and help victims who may not be ready to exit the sex industry immediately and be available when survivors are ready (Casassa et al., 2021; Thompson & Haley, 2018).

Professionals working with this population should receive training to understand how the survivor may perceive the world as threatening and dangerous because of the pain, coercion, isolation, and brainwashing from their traffickers (Hagan et al., 2021). Medical personnel, service providers, law enforcement, counselling psychologists, and social workers should collaborate and communicate together to provide a trauma-informed, comprehensive continuum of care for these individuals (Dell et al., 2019) and wrap-around services that provide food, shelter, financial support, childcare, life and vocational skills, and psychological services should



be coordinated between agencies to ensure quality care (Bryant-Davis & Gobin, 2019; Dell et al., 2019; Gagnon et al., 2018).

Recommendations gathered in this literature review suggest that counselling psychologists first conduct a self-inspection inventory to identify any biases and misconceptions they hold toward sex trafficking victims and create a plan for how to deal with them (Sukach et al., 2018). This is in keeping with the code of ethics that govern psychologists' behavior and practice. For example, in the *Canadian Code of Ethics for Psychologists* (4th ed.; Canadian Psychological Association, 2017), one of the ethical standards states that psychologists must respect the knowledge and values of others, even when they are different from their own and therapists should treat everyone fairly. Ethical standard III.9 in the *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2017) states that therapists must self-evaluate and reflect on how their own experiences, attitudes, culture, and values can affect and influence their perceptions of others and put those assumptions aside to fully serve the client.

Sukach et al. (2018) suggests that as part of their case conceptualization process, counselling psychologists pose questions to themselves such as “what are the factors that put individuals at risk for becoming victims of sex trafficking?” Additional questions to ask: “What vulnerabilities exist in this client that the trafficker preyed upon?” “What challenges do sex trafficking victims face when exiting the industry?” “What are some of the challenges and experiences this population have in common?” Posing these questions will help clinicians understand their client's vulnerabilities, needs, and develop a plan to address them (Sukach et al., 2018).

Culturally sensitive interventions must be utilized to empower, build resilience, and treat ethnically and racially diverse sex trafficking survivors with dignity and respect, honoring their

beliefs, customs, and values (Bryant-Davis & Gobin, 2019). A culturally sensitive approach will also help clinicians understand how the trafficker influences victims' perceptions of the power imbalance between them and the cultural influences that may keep a trafficked individual from exiting the industry (Preble & Black, 2020). Counselling psychologists can help to build resilience in trafficking survivors by understanding ways that resilience can be manifested in unexpected ways as an adaptation or coping mechanism, especially when survivors use covert resistance methods to exert some kind of control over their situation, such as hiding some of the money procured during a sexual encounter with a buyer, without the trafficker's knowledge (Knight et al., 2021).

Gagnon et al. (2018) interviewed 224 sexual assault survivors between the ages of 18 and 62 about their experiences with service providers and counselling professionals. Even though the participants included in this study were not sex trafficking survivors, this study has been included here because of relevancy as commercially sexually exploited survivors have been sexually assaulted and coerced into sex by force, intimidation, violence, or threats. The researchers reported that the sexually assaulted participants in the study made the following recommendations to service providers. The participants suggested that a female police officer be present during interviews, questioning, and other encounters to minimize the chances of police abuse of power and to make the sexually exploited individuals feel more comfortable to tell their stories. If the sex trafficking victim is male, then an officer of the same sex should be present. The study's participants recommended that there should be improved communication with victim services and that phone calls and emails should be returned promptly so the victim could be updated on their case (Gagnon et al., 2018).

Secondly, the participants in Gagnon et al.'s (2018) study suggested that community organizations should make an effort to follow up and stay in touch with survivors so the survivor feels heard and believed. From the very first contact with medical personnel, law enforcement, and other service providers, the study participants recommended that service providers provide information about what they can expect from these services, such as proceedings with the criminal justice system, what social services are available, and what psychological supports are accessible. This would allow survivors to feel more understood, believed, and listened to, providing them with support and care, instead of making them feel responsible for their situation and ashamed (Gagnon et al., 2018).

Thirdly, 40% of the sexually assaulted participants in the Gagnon et al. (2018) study said they needed help obtaining resources, such as safe housing, victim's compensation, as well as access to mental health services. They recommend that all service providers including medical personnel, social workers, rape crisis centers, and other providers have compiled resource lists available when needed. The fourth recommendation that participants stated in the study was that anyone in the helping professional, as well as law enforcement, believe them. They stated that it was unhelpful and damaging when others blamed the victim or made them responsible for what happened or used the individual's history as a reason for the assault (Gagnon et al., 2018).

Another recommendation included in the Gagnon et al. (2018) study was the suggestion that service providers and counselling psychologists be patient with them and give the survivor autonomy in talking about their experiences and display compassion, care, and respect to the victim. Since memory disruptions can occur after one or more sexual assaults, understanding the effects of trauma can inform the counsellor, police, or other service providers on how to listen empathetically and let the story unfold organically (Gagnon et al., 2018). Finally, the study's

authors recommended that counselling be offered to sexual assault survivors on a long-term basis as needed in order to treat more severe psychological disturbances such as PTSD, anxiety, depression, and other mood disorders (Gagnon et al., 2018). Although this study focused on sexual assault survivors, the recommendations can easily be transferred over to commercially sexually exploited survivors.

### **Reflexive Statement**

I have learned a tremendous amount about the resilience, strength, and capability that humans possess. Even when faced with what must be incredibly horrifying circumstances, many people find the strength and courage to exit the sex industry, seek psychological support, and gradually heal from their traumatic experiences, especially when they receive positive and coordinated support and counselling. Before conducting this literature review, I came into the process with several biases, including the notion that sex trade workers were primarily victims that were kidnapped in the middle of the night and sold into slavery, and that they all wanted to be rescued.

As I began to read the literature, I realized that this bias was oversimplified, and there are many entry points into sexual exploitation. For example, I was alarmed to learn that many victims were lured into sex trafficking by people they knew and trusted, that they considered to be boyfriends (Casassa et al., 2021). I was surprised to learn that traffickers targeted their victims and deliberately deceived them into thinking they were special and loved. I was already aware that sex trafficking was a crime that affected many innocent victims lured into a dangerous and seedy industry (Reid, 2016). I also held another bias belief that all sex trafficking survivors are all victims, needing and wanting to be rescued, although I did not really want to admit this bias to myself, because as a counselling psychology student, I knew better that it is impossible to

“rescue” anyone, and even if it was possible, I would be robbing another individual of their life experiences. But I was not aware until the research process, that it may take sex trafficking survivors many attempts to escape before they are able to leave for good, like many domestic violence cases (Burt, 2019; Delker et al., 2019).

To manage my biases and maintain awareness of my biases when they threatened to interfere with my work, I stopped reading the material and writing, took a break from the project and returned when my thoughts were clear. I wrote about my thoughts and feelings in a journal during the research process, which I found to be a cathartic process because it gave me the space to have feelings about the trauma faced by the sex trafficking survivor and process the anger I felt towards the trafficker, so when I returned to the research process, I was able to distance myself from the material and objectively approach the topic. I specifically searched for material that challenged my biases and my expectations. For example, one of my pre-held biases was that law enforcement would mistreat sex trade workers and treat them like they were criminals, not victims. I was pleased to find reports that contradicted that bias, after finding studies where police had believed the victim, provided her with resources, and helped her find supports. It was those positive interactions with law enforcement that helped them leave the industry (Duncan & Dehart, 2016; Hickle, 2017; Sherman et al., 2015). I recognize that my biases were there during the research process, but they were largely challenged, and my understanding and viewpoint has been changed as a result. I am even more determined than before conducting this project to become a counselling psychologist, devoting a portion of my practice to working with and treating sex trafficking survivors professionally and helping them to build resilience to recover and move on to a fulfilling life.

## Conclusion

Sex trafficking is the process where women, girls, boys, and men are lured into the sex industry to provide sexual services for sex buyers in exchange for money, which is turned over to the trafficker (NHTRS, 2016). It is part of the larger human trafficking black-market industry, and second only to global drug trafficking in terms of profitability and resources (Polaris Project, 2019). Over four million trafficked victims have been forced into commercial sexual exploitation, including one million children, the majority of whom are women and girls, for a \$90 million illegal industry (ILO, 2017). The trauma bond between trafficker and trafficking victim is complicated and difficult to break because of the combination of love, affection, intimidation, threat, and violence, which leaves the trafficked individual confused, conflicted, and vulnerable (Casassa et al., 2021). The research literature reviewed revealed that dealings with law enforcement usually follow arrest and can be difficult, with many negative interactions involving distrust, abuse of power, and disbelief, leading to retraumatization and revictimization of the survivor (Duncan & DeHart, 2016; Sherman et al., 2015). However, there is also research literature pointing to positive interactions with police being a protective factor that can help survivors exit the industry (Duncan & Dehart, 2016; Hickle, 2017; Olson-Pitawanakwat & Baskin, 2021; Sherman et al., 2015).

Fortunately, there are protective factors that can build resilience in sex trafficking survivors that include positive interactions with law enforcement, when they are believed, given resources, and taken to social services, caring, empathetic and supportive social workers, trained in identifying sex trafficking victims and supporting them to escape the industry, and evidence-based counselling with a caring therapist willing to listen (Antebi-Gruszka et al., 2019; Burt, 2019; Cecchet & Thoburn, 2014; Cockbain & Bowers, 2019; Contreras et al., 2017; Gagnon et

al., 2018; Pascual-Leone et al., 2017; Rajaram & Tidball, 2018; Sukach et al., 2018). The process of recovery takes time and is not easy, but with the proper support and treatment, sex trafficking survivors can build resilience through positive, caring, and empathetic support and psychological treatment to go on to lead productive and happy lives.

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