

Trauma-Informed Care for Survivors of Human Trafficking: A State of the Field in 2019



IASP



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All queries should be addressed to Project TRUST, ProjectTRUST@uscmail.org

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Authored by: Jessica Santos, Kaitie Chakoian-Lifvergren, and Resham Sethi

Introduction

Human trafficking is a serious problem in the United States and worldwide. Over the past five years, human trafficking cases have been reported in all 50 states and the District of Columbia.¹ Many survivors and their families experience trauma over their lives and across generations as a result of this form of violence. For the past 20+ years in the human trafficking service provider community, U.S.-based organizations have been creating trauma-informed policies and practices to establish safe and empowering environments for survivors seeking services. There are also countless examples, both historical and contemporary, of survivor-led resistance and resilience in the face of trauma. We recognize that the day-to-day pressing needs of survivors are constant and paramount, and that developing more efficient and effective service-delivery techniques can reduce additional harm and improve lives. This report recognizes and highlights trauma-informed practices from 157 service providers, puts them in context of relevant literature in the field, and identifies areas in which organizations and the field as a whole can improve.

Project TRUST is a program through the U.S. Committee for Refugees and Immigrants (USCRI) that was founded in 2018 to provide targeted training and technical assistance on trauma-informed responses and services to anti-trafficking service providers. Utilizing longstanding history and knowledge of working across provider networks, Project TRUST promotes strength-based direct service and engages survivors as essential advisers in the planning and development of resources. Training and technical assistance through Project TRUST uses a survivor-centered approach – prioritizing the rights, needs, and wishes of the survivor – and a trauma-responsive care model.

The Institute on Assets and Social Policy (IASP) is a research institute of the Heller School for Management and Social Policy at Brandeis University. The institute focuses on advancing economic opportunity and equity for individuals and families, particularly households of color and those kept out of the economic mainstream. IASP is the action research and evaluation partner with USCRI on the Specialized Human Trafficking Training and Technical Assistance grant (2018-VT-BX-K015) funded by the U.S. Office for Victims of Crime. Action research is an approach to learning and action that combines the methodological expertise of a facilitator together with the expertise of practitioners working to solve problems and implement innovations in a specific local context.

From September to December of 2019, the Institute on Assets and Social Policy at Brandeis University conducted a baseline survey to assess the current state of the field of U.S. providers who support survivors of human trafficking. The survey was distributed to service providers supporting survivors of human trafficking. Recruitment was done through the Project TRUST network, including grantees of the Office for Victims of Crime (OVC) and the Trafficking Victim Assistance Program (TVPA). The survey was completed by 157 respondents. Additionally, this report includes findings from a review of current literature in the field that situates the survey results within a broader conceptualization of trauma-informed practice that addresses human trafficking in the United States.

Summary of Key Findings

Most respondents believe they are well-informed about trauma-informed care in general, but when asked about specific topics of trauma-informed care for human trafficking survivors, **consistently 1/3 of respondents feel they have no knowledge at all of the specifics.**

Webinars are the most common resource that respondents point to as a way to learn more about trauma-informed care for trafficking survivors, followed by local in-person training and national conferences and networks. Technical assistance and local/regional partner networks are much less often cited as accessible resources. Project TRUST is poised to bridge this gap by strengthening the accessibility of technical assistance to reach more service providers.

Approximately 1/3 of respondents are implementing the skills they learn in trainings in their work with survivors very little, if at all. Implementation is a key step in the process of change that requires attention and support in order to enable busy practitioners to actually serve clients in ways that are trauma-informed.

Respondents are looking for training and resources around trauma-informed care for trafficking survivors that offer opportunities for practical application and implementation. They note that useful tools in implementing new practices would be model policies and materials, packaged trainings they can offer to their staff when convenient, trainers who will come out to their agencies, and opportunities to connect with other agencies who are engaged in trauma-informed care for trafficking survivors. While all of these tools are important, respondents note that increased funding is essential in order for them to take advantage of any of these tools.

More than 1/3 of the respondents are not aware of their agency's trauma-informed policies, if they exist. Organizational policies are essential to ensuring implementation of trauma-informed practices. Project TRUST can help agencies craft policies that align with best practices in trauma-informed care for trafficking survivors.

Language has been a barrier to meeting the needs of trafficking survivors. There is potential to improve accessibility and quality of services by Project TRUST helping organizations address language access as part of providing trauma-informed training and services.

Human Trafficking in the U.S.

Public concern over human trafficking gained attention in the 1990s, in the aftermath of the fall of the former Soviet Union, the resulting migration flows, and increasing concern over transnational criminal organizations operating globally. Initial efforts to address human trafficking focused on sex trafficking of women and girls. By 2000, the understanding of trafficking expanded to include both sex and labor trafficking.²

Human trafficking:

Human Trafficking is a crime that involves exploiting a person for labor, services, or commercial sex.

The Trafficking Victims Protection Act of 2000 and its subsequent reauthorizations define human trafficking as:

- a) Sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
- b) The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for subjection to involuntary servitude, peonage, debt bondage, or slavery. (22 U.S.C. § 7102(9)).

In 2000 the Trafficking Victims Protection Act (TVPA) was signed into law by President Clinton, criminalizing human trafficking in the United States. Its goals are to protect trafficking victim/survivors, prosecute traffickers, and prevent trafficking from occurring. The Act recognizes sex trafficking and different forms of labor trafficking (such as, involuntary servitude and debt bondage) as crimes and creates a legal pathway to prosecute these criminal activities. This new legal framework applies not only to individuals who are transported from one location to another for the purposes of sex trafficking or labor trafficking,³ but also those who are exploited in their own communities. The TVPA requires annual reports of worldwide governmental efforts to combat trafficking in persons (human trafficking).⁴

Despite efforts to understand the scope of human trafficking, it is difficult to obtain accurate data in the United States and globally, due to the clandestine nature of the crime, underdeveloped data and methodologies for estimating prevalence,⁵ and underreporting.⁶ According to the U.S. National Human Trafficking Hotline, there were 59,963 individuals with high likelihood of trafficking victimization reported to the hotline since 2007. This number is not reflective of all cases in the United States, but rather of likely instances of trafficking reported to the hotline.⁷ Existing data is not sufficient to fully identify the extent of human trafficking within the United States.⁸

Human trafficking in the United States includes U.S.-born and foreign-born victims. Individuals in the United States who are trafficked include those who are children in the child welfare and juvenile justice systems, American Indians and Alaskan Natives – particularly women and girls, individuals who misuse substances, persons with limited English proficiency, persons with disabilities, LGBTQIA+ individuals, and victim/survivors of intimate partner violence or domestic violence. People exploited by traffickers who are foreign nationals may have entered the country with or without legal documentation, from any region of the world. The top three countries of origin of federally-identified victims between October 2018-September 2019 were the United States, Mexico, and Honduras.⁹ Immigrants to the U.S. experience both sex and labor

trafficking.¹⁰ Traffickers exploit immigrant vulnerabilities including language barriers, legal status, lack of education and understanding of the U.S. labor law protections.¹¹

Trafficked people work in both legal and illegal sectors.¹² Domestic work has consistently been the top industry reported to the national hotline for labor trafficking in the US since 2015, followed by agriculture, traveling & sales crew,¹ restaurants/food services, and health & beauty services. The top industries for sex trafficking reported to the national hotline are illicit massage parlors/spas, pornography, residence-based and hotel/motel-based commercial sex, online adds where the venues are unknown, street-based prostitution, and escort services.¹³

Human trafficking epitomizes the racial and gender-based violence that are structural features of U.S. and global society. Historically and today, a large majority of victims of labor and sexual exploitation are people of color.¹⁴ The most common ethnicity of individuals whose cases were reported to the National Human Trafficking Hotline in 2018 was Latinx, followed by Asian and African American/Black. The majority of these cases involved individuals identifying as female.¹⁵

Trauma-Informed Care for Survivors of Human Trafficking

“The core experiences of psychological trauma are disempowerment and disconnection from others. Recovery, therefore, is based upon the empowerment of the survivor and the creation of new connections” (Judith Herman, *Trauma and Recovery*, 1992 p.133)

The experience of human trafficking includes profound, prolonged, often repeated trauma for the person being trafficked. The experience of dehumanization and of physical, emotional, sexual, and economic violence over time cause significant impacts on the personal development and well-being of survivors. Survivors may experience post-traumatic stress disorder, anxiety, suicidal ideation, Stockholm syndrome, substance abuse, depression, and difficulty forming trusting relationships and reintegrating into society.^{16, 17, 18,}
¹⁹

At the same time, survivors are incredibly resilient and resourceful. Many survivors find strength and support through connecting with one another.²⁰ Some have become leaders in the movement and agencies working to end human trafficking.²¹ Developing agency and empowerment is a key tool to overcoming

Trauma:

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being. (2014, SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach.)

1. According to the National Human Trafficking Hotline, Sales crews, including “begging rings”, typically consist of between three and 40 youth under the direction of a manager. The crew is moved from city to city every few weeks soliciting money or selling products such as magazine subscriptions, trinkets, or cleaning products. Crew members receive a small daily stipend (\$8-\$15 or less). Violence, sexual assault, sexual harassment, pressure tactics, and abandonment in unfamiliar cities are common.

Trauma-informed care:

A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization. (2014, SAMHSA's *Concept of Trauma and Guidance for a Trauma-Informed Approach*.)

the impacts of trauma.²² There is potential to harness the power of collective action for both the healing of individual survivors and community-level social change. Studies have demonstrated the empowerment effects of collective action,^{23, 24} specifically for individuals who experience gender-based violence as a pervasive form of discrimination.²⁵ Engaging survivors in collective action builds their own agency and empowerment and simultaneously can work to dismantle social factors that enable human trafficking.

The use of trauma-informed care for the survivors of human trafficking is relatively new.²⁶ The roots of trauma-informed care, however, are much older than term itself, and many practitioners have been engaged in this practice for decades without naming it as such. Dating back to the feminist movement of the 1970s and the growth of interdisciplinary responses to child abuse in the 1980s, service providers have done their work in ways that were trauma-informed. Beginning in the 1980s and 1990s empirical research on trauma began to integrate the body's response to traumatic events with best practices for working with survivors. In the past 25 years, recommendations for trauma-informed care have been empirically supported and disseminated across many fields of human services.²⁷

Trauma-informed practices are those through which agency staff, systems, and policies recognize and accommodate the impact of trauma in the lives of survivors. According to the Substance Abuse Mental Health Services Administration (SAMHSA) with the U.S. Department of Health and Human Services, "individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual wellbeing"²⁸ Trauma-informed practice engages survivors as active participants in the accessing of services and, in doing so, builds empowerment and agency. Incorporating a trauma-informed approach entails building an organizational culture that emphasizes understanding, respecting, and suitably responding to the effects of trauma at all levels of the organization.²⁹ When organizations implement trauma-informed care into their work supporting human trafficking survivors, survivors feel safe, respected, and confident about themselves and their ability to return to their community of choice and live independently.³⁰ Without an intentional focus on trauma-informed practices, the very organizations and systems that are set up to support survivors can instead re-traumatize them.³¹ For a full framework of a trauma-informed approach see SAMHSA's *Concept of Trauma and Guidance for a Trauma-informed Approach*.³²

Given the long historical roots of dehumanization and trauma and the prevalence of contemporary trafficking, it is clear that addressing the needs of the survivors is of utmost importance. Service providers in the field are interacting with survivors in ways

that work to meet their needs in sensitive and caring ways. Many service providers are engaging in practices that include aspects of trauma-informed care, whether or not they are labeled as such. Many more are looking for ways to implement the best possible care for those they serve. This survey represents the current state of the field of service providers that work with survivors of human trafficking. It demonstrates the need for additional training and technical assistance around integrating trauma-informed care into the every day practices of these agencies and calls for the specific types of resources needed to do this successfully.

Survey Results

Who Responded to the Survey?

Nearly half (47.14%) of the 157 survey respondents work directly with survivors of human trafficking in roles such as case managers, victim advocates, and social workers. Just under 30% (28.57%) are directors or leaders of organizations providing services to trafficking survivors. One fifth (20%) of respondents manage staff who provide direct services to survivors. Under 5% of respondents (4.29%) occupy roles that do not directly assist survivors (such as grant writers and development professionals). While respondents did not report the location of their agencies, when listing regional resources, coalitions from 16 states were included.²

Sixty-five percent of respondents affirmed that their agency has trauma-informed organizational policies. A full fifth (20%) of respondents indicated that they have no written policies around trauma-informed responses to trafficking survivors, and an additional 16% percent were unsure about their agency's policies. This means that more than one-third of respondents in our national sample are not connected to or aware of organizational policies around trauma-informed responses, if they exist.

Who Do Respondents' Agencies Serve?

Total Clients

Nearly two-thirds (63%) of the agencies in our sample worked with fewer than 1000 total clients in 2018, with 47% working with fewer than 500 clients. These clients are not specifically survivors of human trafficking.

Client Types

The majority of agencies in our sample serve relatively few trafficking survivors annually. In 2018, 55% of respondent's agencies served between 1-50 survivors of labor trafficking and 55% served between 1-50 survivors of sex trafficking in 2018.

More agencies worked with survivors of labor trafficking than sex trafficking. Eight percent of respondents indicated that their agencies worked with more than 50 labor trafficking survivors and 22% indicated working with more than 50 sex trafficking survivors. While 13% of respondents indicated their agencies not working with any labor

2. States that were identified are: Arizona, California, Colorado, Indiana, Kansas, Louisiana, Maryland, Minnesota, New Jersey, New York, Ohio, Oregon, Texas, Virginia, Vermont, and West Virginia.

trafficking survivors in 2018, only 6% indicated not working with any sex trafficking survivors.

Of the survivors served by the agencies in this survey in 2018, labor trafficking survivors were much more often foreign nationals than sex trafficking survivors were. Forty agencies indicated that more than 50% of the labor trafficking survivors they worked with were foreign nationals (compared to 16 agencies with less than 50% of labor trafficking survivors being foreign nationals). Only 6 agencies indicated that more 50% of the sex trafficking survivors were foreign nationals (compared to 46 agencies with less than 50% of sex trafficking survivors being foreign nationals).

Language

Survivors of human trafficking require services in a variety of languages. Nearly 8% of respondents (7.69%) indicated that all of the trafficking survivors their agency supported in 2018 received services in a language other than English, and nearly $\frac{3}{4}$ of all respondents (74.35%) had at least some trafficking survivors who received services in languages other than English. Additionally, 7.69% of respondents indicated that their agency had to turn away survivors due to inability to communicate through a language barrier, including due to lack of availability of translation and interpreter resources. Languages turned away from agencies in 2018 include Amharic, Cantonese, Chinese (not otherwise listed), French, Korean, Mandarin, Spanish, Spanish sign language, Tagalong, Thai, and Vietnamese.

Perceived Client Satisfaction

The vast majority of respondents believe that clients are satisfied with how services are delivered at their agencies. Over 90% (92.24%) indicated that clients are either “extremely satisfied” or “somewhat satisfied” and only 1.72% indicated clients are somewhat dissatisfied. None indicated clients being extremely dissatisfied. This positive perception of respondents represents only the perspective of staff themselves and does not address actual client satisfaction. It does, however, indicate that staff think they are doing right by their clients, which could contribute to a lack of motivation to change the way they work.

What Baseline Knowledge Do Respondents Have?

Most respondents believe that they, themselves, are very well informed about trauma-informed care and responses, in general, and believe that other staff at their agency are slightly less so. Ninety-eight percent of respondents believe they have a great deal of knowledge on the topic, while only 76% believe that their colleagues do. It is likely that many if not most direct service providers do have a wealth of knowledge about working with survivors of trauma. They have on the ground experience in crisis management with individuals who have experienced, and in many cases are still experiencing, acute and ongoing trauma. The knowledge, skills, and expertise of these providers may or may not align with a specific shared or cohesive framework. When looking at specific content, approximately one-third of respondents indicated a great deal of knowledge about each

of the topics included in the survey. A similar split was found when respondents rated their colleagues' (other staff at their agency) level of knowledge on these topics. This demonstrates that while respondents initially feel they are well informed regarding trauma-informed care and responses in general, when it comes to applying these principles to the experiences and needs of survivors of both labor and sex trafficking, respondents indicate much less specific knowledge. Across all six topic areas, a full third of respondents indicated no personal knowledge on the topic, while another third indicated only a little knowledge. As such, training in each of the six topics listed in Figures 1 & 2 below will be useful.

Figure 1: Respondents Personally Feel Knowledgeable About...

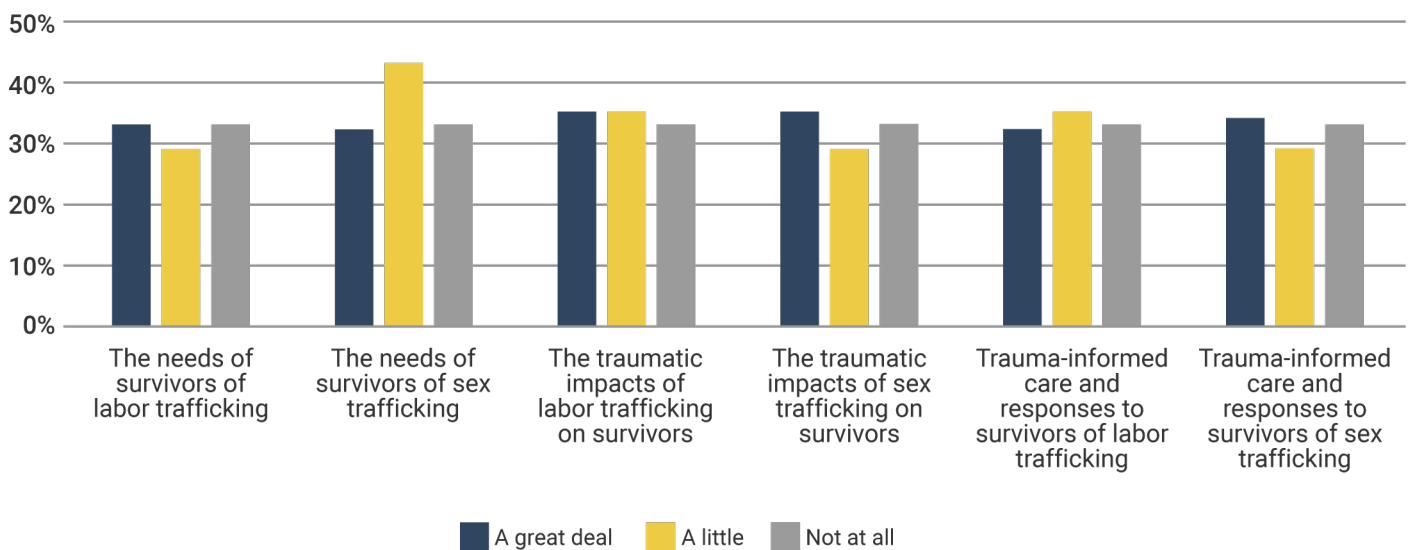
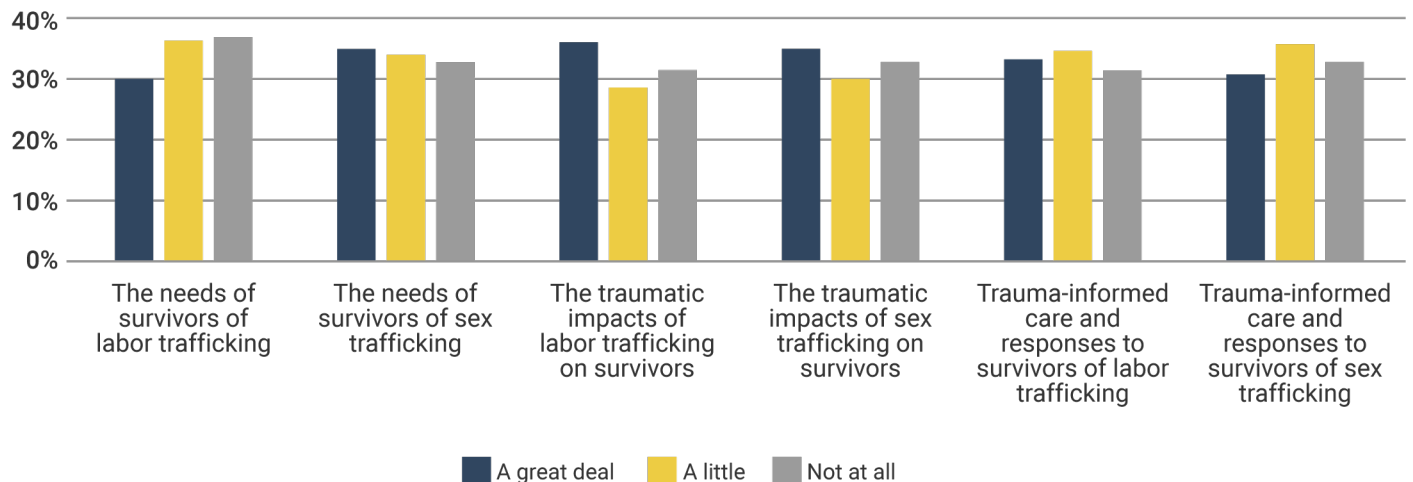


Figure 2: Respondents Think Other Agency Staff Are Knowledgeable About...

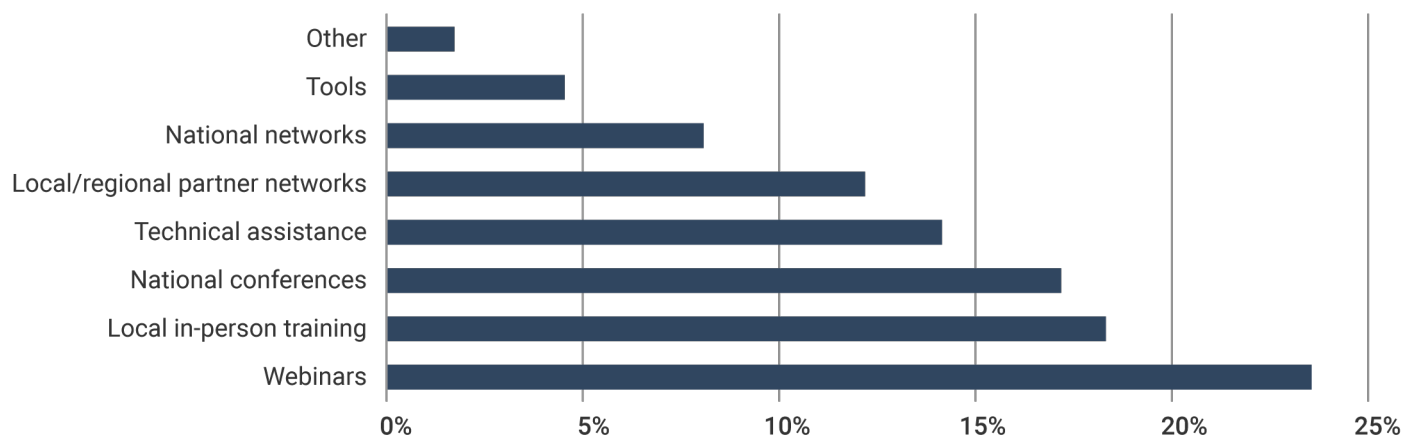


What Kinds of Existing Trainings & Resources Do Respondents Know About?

More than half (52%) of respondents confirmed that their agency requires training in trauma-informed care for survivors of human trafficking. An additional 38% are moving in that direction.

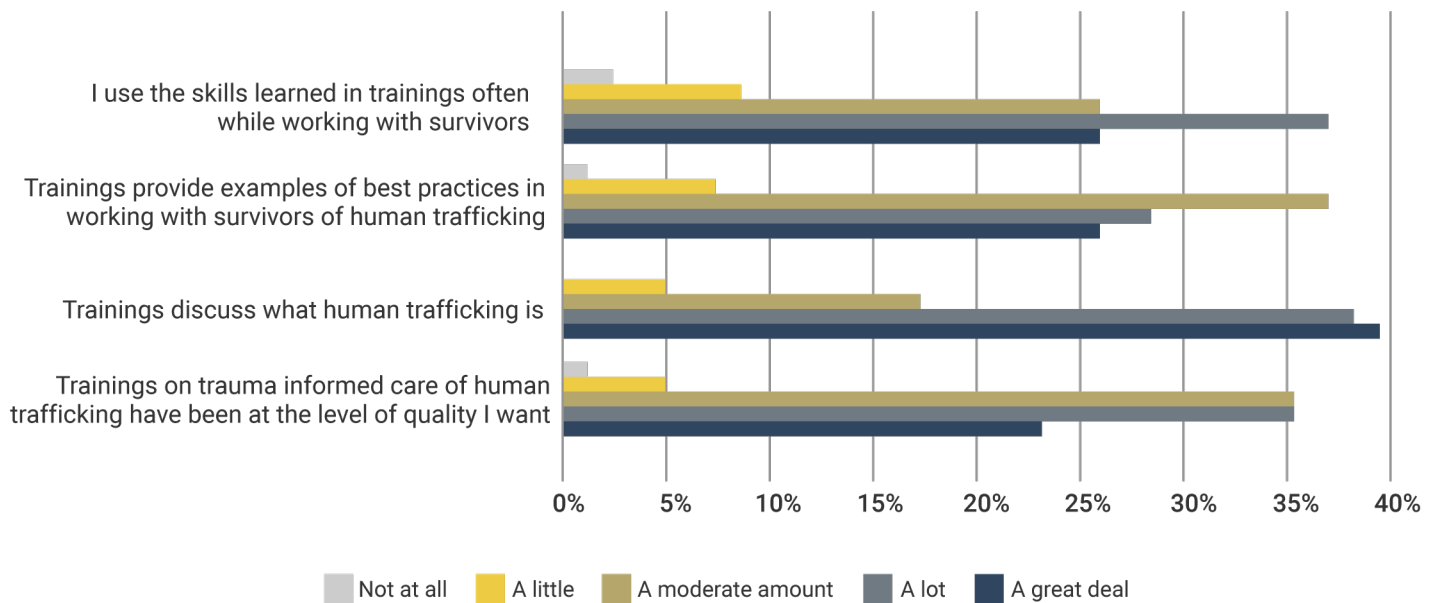
Sixty-one percent of respondents indicated that they are personally aware of the available resources to learn more about trauma-informed care for survivors of human trafficking. This means that 39% have moderate to no knowledge about resources available to them, demonstrating a major demand for training for service providers. Webinars are the most common resource that respondents point to as a way to learn more, followed by local in-person training and national conferences and networks to provide training or awareness on trauma-informed care for survivors. Technical assistance and local/regional partner networks are much less often cited as accessible resources. (See Figure 3). Project TRUST is poised to bridge this gap by strengthening the accessibility of technical assistance to reach more service providers. Additionally, Project TRUST can explore the potential utility of a resource repository to be shared by partners. Respondents indicate that they learn about these resources through listservs (48.41%), supervisors (24.20%), and other sources. This information can be used to help Project TRUST advertise its varied offerings.

Figure 3: Available Resources to Learn about Trauma informed Care for Human Trafficking Survivors



The majority of respondents report that existing trainings on trauma-informed care for survivors of human trafficking are at the level of quality they want. However, there is a lack of emphasis on the practical aspects of the content. Existing training has a theoretical focus. There is a need to build materials that provide practical use of trauma-informed care while working directly with survivors. Additionally, respondents are indicating that at least one-third are implementing the skills they learn in trainings in their work with survivors very little, if at all. (See Figure 4 for full distribution of survey questions regarding existing trainings).

Figure 4: Assessment of Quality and Depth of Trainings on Trauma-Informed Care for Trafficking Survivors



How Can Existing Trainings & Resources Be Improved?

What’s missing from existing trainings and resources ?

Respondents identified a plethora of content that is missing from existing resources that they would find useful. Most commonly cited were opportunities for practical application and implementation of trauma-informed practice in their work, incorporation of the voices of survivors, and application of local context. Frequently respondents note that many available resources are introductory or surface level and they are looking for more advanced, in-depth trainings. They also note a desire to learn from one another.

“It’s one thing to list the needs of people receiving services, or what the services are, it’s another thing to talk about HOW to deliver the services and integrate them into programming for an individual person.”

“How to build trust and follow through when working with survivors. How to utilize the wisdom of survivors in the movement to deepen your impact and understanding. How not to re-exploit survivors while providing care/services”

“How to apply knowledge at national networks into local context”

“In-depth training sessions are missing, webinars may be cost effective but miss a lot of the human side - especially when dealing with trauma-informed care for survivors.”

“I believe that we could learn from other service providers and perhaps a focus or a webinar solely on case studies could be helpful.”

What are the barriers to implementing lessons learned from trainings & resources ?

The most common barriers to implementing lessons that respondents identified were cost and staff time, exacerbated by the high staff turnover experienced in this field. Given the many hats that providers wear and the constant crises they navigate with survivors, it is not surprising that dedicating time to training and implanting new practices is difficult. Front-line staff time is valuable. Implementing new policies and practices represents a huge commitment on the part of individual staff and agencies. Other common barriers identified by respondents are a hesitancy to change the way the work is currently done and lack of face -time with clients.

“Shortage of staff amidst endless crisis”

“Staff turnover makes keeping staff training up to date difficult.”

“Being willing to change the way things have ‘always been done’ amidst budget restraints”

What tools would be useful to aid in this implementation ?

Respondents are looking for model policies and materials, packaged trainings they can offer to their staff when convenient, trainers who will come out to their agencies, and opportunities to connect with other agencies who are engaged in trauma-informed care for trafficking survivors. While all of these tools are important, respondents also note that increased funding is essential in order for them to continue to take advantage of any of these tools. They see these as tools that will enable them to not just engage in trainings about trauma-informed care, but actually implement the lessons they are learning in their work.

“Model policies and procedures”

“Concise, packaged training for direct services providers that separates labor and sex trafficking.”

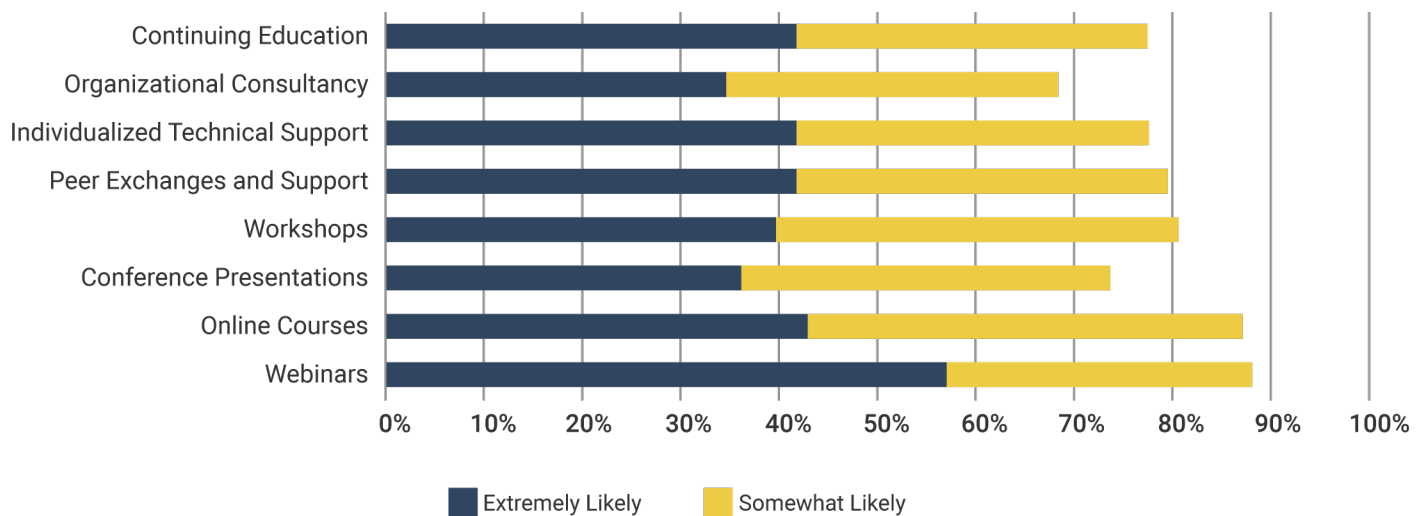
“Someone to come assess our agency and how we can improve”

“A forum where we could concentrate resources, narrative experiences, policies that have helped or hurt our clients, etc.”

“Increased budgets specific to this work, specifically for compensating survivor voices into policy making.”

Respondents are most likely to participate in webinars and online courses, followed by workshops, peer exchanges, continuing education, and individualized technical support. They indicate they are less likely to participate in organizational consultancy and conference presentations. (See Figure 5).

Figure 5: Likelihood to Participate in TTA Offered by Project TRUST



Implications for Research and Practice:

The Project TRUST baseline survey, conducted in fall 2019, illuminates a disconnect between the expertise that practitioners feel they have in trauma-informed care for human trafficking survivors and their ability to implement trauma-informed strategies and practices. Practitioners do have a wealth of on-the-ground knowledge about supporting survivors, whether or not it falls into a specific shared or cohesive framework of trauma-informed care. The need for a focus on implementation becomes starkly clear when reviewing these survey results. These findings indicate the following implications for the practice of providing training and technical assistance to agencies that support survivors of human trafficking:

- Training and technical assistance around trauma-informed care must go beyond surface-level definitions. Practitioners understand the broad concepts, but many lack specific knowledge about the implementation of trauma-informed care for survivors of human trafficking. There are myriad barriers to implementation, from lack of funding or appetite for change to limited face time with survivors. In order to move from theoretical discussions of trauma-informed practice to real implementation in the daily workings of these agencies, time and commitment must go into identifying and addressing these barriers.

- Currently, most providers are accessing webinars to learn about trauma-informed care. There are opportunities to provide more hands-on support through training and technical assistance. Respondents suggested the provision of model policies and materials, packaged trainings for staff to engage with at their convenience, trainers who come out to work individually with agencies, and opportunities to connect with other agencies who are already overcoming the barriers to implementation. Incorporating a convening role as part of training and technical assistance allows practitioners to learn from one another and to share best practices.
- Simultaneously, the need for increased funding and staffing is paramount. Underfunded agencies struggle to devote staff time to training and the work of implementing new practices.

Additionally, these results suggest the following implications for further research:

- Staff and agencies who work to support survivors have a depth of knowledge from their on-the-ground experience. Research can illuminate the already existing practices that enhance agency and are empowering to survivors but may not be labeled “trauma-informed”. Understanding these practices may unleash the potential of expanded options for doing work that recognizes and accommodates the impact of trauma in the lives of survivors.
- While the implication for practitioners of training and technical assistance is to convene agencies that are doing trauma-informed work well, research can help to identify those agencies as well as the tactics they have used to be successful. Knowledge exists within the network of service providers, and research can help to illuminate that knowledge so that practitioners can learn from one another.
- Fields adjacent to that of anti-trafficking (such as gender-based violence crisis centers) have created frameworks within which they both provide high-quality trauma-informed services to survivors as well as engage in mobilization and systems change work.³³ Research can illuminate the ways this type of framework could be adapted and applied to expand the work of survivor support agencies through training and technical assistance for agencies that work to support survivors of human trafficking.
- Research that is participatory and liberating places survivors at the center of new knowledge generation. This type of work both gleans new insights by engaging survivors in research question development and the meaning-making process, but also promotes survivor agency at every step of the way. Survivor voice and engagement in all levels of organizational functioning is a key value of a trauma-informed approach.³⁴ Participatory research is one way to incorporate the perspective of survivors and is necessary in this field.

Conclusion

Practitioners who support trafficking survivors strive to do this work in ever more efficient, effective, and compassionate ways. Trauma-informed care is critical to supporting survivor recovery and resiliency. The findings from this survey of providers demonstrate that while there is a baseline understanding of the need for trauma-informed practice in this work, there are critical challenges to implementation. Training and technical assistance can meet those challenges by going deeper than defining the approach to specifically address the needs of trafficking survivors, providing new types and formats of training and technical assistance that increase accessibility and customizability to agencies, and creating opportunities for agencies to learn from one another in the work of implementation.

Despite promising approaches, human trafficking continues in our communities. We note that trauma-informed care is vital yet insufficient to interrupt the structures and systems that enable and perpetuate human trafficking. It is clear that to create safer communities, we need strong tools and even stronger policies and practices. As a community that supports survivors, we can scale what works and simultaneously update our constructs to include policies and systems work that will eradicate human trafficking and the conditions that enable it.

Endnotes

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