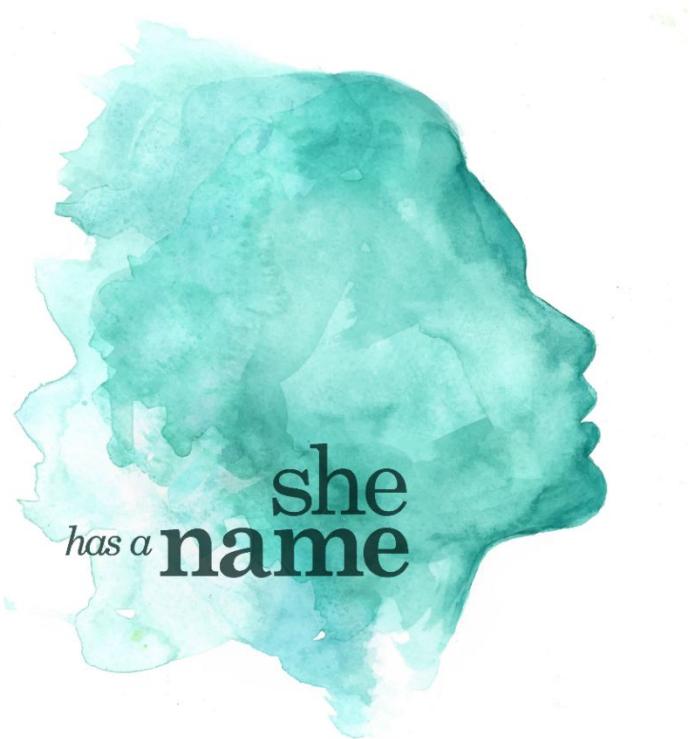


Responding To

Human Trafficking



February 13th, 2019

Introduction

Purpose of She Has A Name's Training

She Has A Name provides community education through a unique curriculum that addresses human trafficking education and awareness. Training focuses on understanding what human trafficking is and why it happens, caring for those affected, and connecting with local initiatives. Men and women are encouraged to attend.

Training Details

Title | Introduction to Human Trafficking

Duration | 90 Minutes

What is included in this training?

What is human trafficking, brief definitions and common types

How should we view human trafficking?

How can I respond to the issue?

Demand Reduction Information

She Has A Name – our mission and vision

What is not included in this training?

Mentorship & Survivor Care Training

Site-specific volunteer orientation

Reporting Trafficking

If you see something out of place, please report it. The National Hotline also has a text-in number (BEEFREE, 233733), shown to double the rate of victims reaching out. With this information, authorities can track the potential victim even if they move state to state. They can also connect you to local resources.

National Human Trafficking Hotline

1-888-373-7888

A Note on Statistics

Gathering hard data on human trafficking is a difficult task as many victims can't or won't identify as such. We try to use the most recent studies as a means of illustration, but please understand that these are estimates made to the best knowledge of those collecting information.



Training Outline

1. Effects of Trauma
 - a. Caring for Survivors
 - i. Brain Development: Neurons and Synapses
 - ii. Understanding Brain Function
 - b. Bonding
 - i. Trauma Bonding
 - ii. Post Traumatic Stress
 - c. Understanding Trauma
2. Characteristics of Survivors
 - a. Needs of Survivors
 - b. Common Struggles
 - c. Shame
3. Characteristics of Johns
 - a. Trafficking and Pornography
 - b. Why Solicit?
 - c. Counseling Resources
 - d. How can I reduce the demand for sex trafficking?
 - e. Characteristics of Solicitors
 - i. Profile of a buyer
 - ii. Reasons men solicit
 - iii. How can we reduce the demand for paid sex?
4. Characteristics of Volunteers
 - a. Understand our Lens
 - b. Good Intentions
 - c. Challenges for Care Providers
 - d. Healthy boundaries
 - e. How can I be helpful?
5. Survivor Care Journey Preview
6. Additional Resources & Further Readings

Contact Information

614-636-0421

shehasaname@veritascolumbus.com

Trigger Warning | Human trafficking is a complex issue in large part due to the trauma it's victims experience. If at any time you experience discomfort or adverse emotions



from topics discussed, please feel free to take a break or seek counsel from a staff member.

Effects of Trauma

Caring for Survivors

Human trafficking survivors are among the **most cruelly abused people encountered by professionals** (Reid and Jones 2011)

Complex trauma syndromes

Post Traumatic Stress Disorder (PTSD)

Complex PTSD (CPTSD) or disorders of extreme stress not otherwise specified (DESNOS)

{ Define the far edges of the spectrum of trauma disorders, and the frontiers of our current knowledge. }
-Wiechelt and Shdaimah, 2011

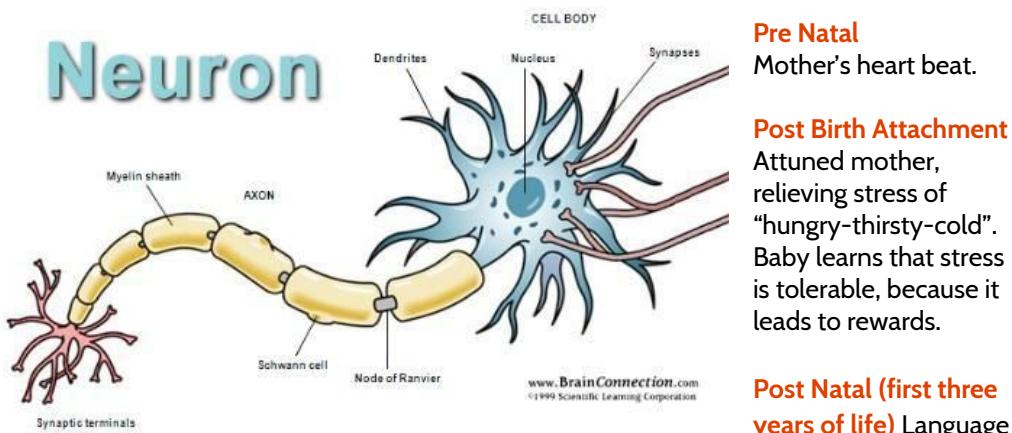
Instead of rehabilitation and trauma counseling, victims are often indicted for drug possession or solicitation and incarcerated. (Shared Hope, 2009)

Adverse Childhood Experience (ACE) Questionnaire | a list of 10 stressful or traumatic events experienced before age 18. They are strongly related to the development and prevalence of a wide range of health problems throughout a person's lifespan, including those associated with substance misuse. ACE scores can impact prevention/treatment efforts.

Brain Development | Neurons and Synapses

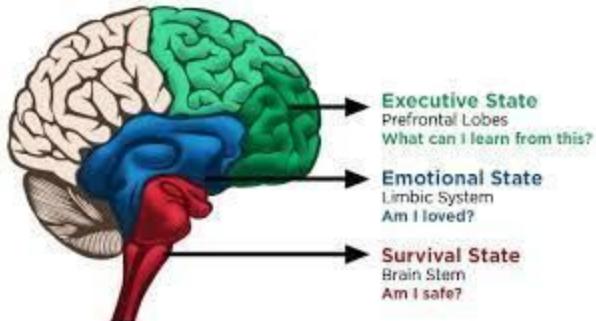
We're not scientists, why should we be studying the brain and its development?

Empathy is one of the best tools we can use to connect with those whom we serve. Due to the trauma often experienced by these individuals, it is important to study what is physically and chemically happening in their brains while we are working with them.



Understanding Brain Functions

Check out Dr. Dan Siegel's explanation of the brain and using the hand as a model.



The **executive state** manages abstract thought and future planning. Within the **limbic system**, emotions are created. Our motivation and driving behavior rests here. At the **brainstem**, the body is regulating major systems: breathing, heart functions, and responses to outside threats. Each of these systems is greatly compromised for an individual who has experienced trauma.

People with developmental trauma can start to feel so threatened that they get into a fight-flight alarm state, and the higher parts of the brain shut down,” says Perry. “First the stress chemicals shut down their frontal cortex (thinking brain). Now they physically cannot think. Ask them to think and you only make them more anxious.

Next the emotional brain (limbic brain) shuts down. They have attachment trauma, so people seem threatening; they don’t get rewards from emotional or relational interaction.

The only part of the brain left functioning is the most primitive: the brainstem and diencephalon cerebellum. If you want a person to use relational reward, or cortical thought – first those lowest parts of the brain have got to be regulated.

-Dr. Bruce Perry

Bonding

1. Both a biological and emotional process that allows people to feel important to each other.
2. Grows through experiences.
3. Experiencing extreme situations and/or feeling together tends to bond groups of people in a special way, which can be healthy or unhealthy.

Cognitive Dissonance | A person’s behavior conflicts with your beliefs about what you think he or she is like.



Trauma Bonding

A relationship that is based on terror. The victim views the perpetrator as source of hope and bonds to the individual, defending the perpetrator.

Four Conditions:

1. A perceived threat to survival that the victim believes the abuser would carry out.
2. A perceived act of kindness (small) from the perpetrator.
3. Isolation from others' perspectives.
4. A perceived inability to escape.

Source: DSM-V, Bloom (1999) and Carver (2014)

Survivors of sex trafficking form complicated bonds with their traffickers, known as trauma bonds. The U.S. Department of Health and Human Services defines trauma bonding as, “a form of coercive control in which the perpetrator instills in the victim fear as well as gratitude for being allowed to live” (Reid, 219). One trauma expert, Dr. Patrick Carnes, explains that “the victims have a certain dysfunctional attachment that occurs in the presence of danger, shame, or exploitation. There is often seduction, deception, or betrayal” (Shared Hope International, 43). **Psychologically, the survivor is convinced the trafficker cares about them.** They believe they have a special relationship and that somehow their experience of exploitation is different from other people in their situation. This special bond is confirmed by random acts of kindness and even love that the perpetrator might show. The acts of cruelty and abuse are absorbed within this overarching understanding that the trafficker truly loves them and sometimes does things that he or she may not wish to.

In classic examples of Stockholm Syndrome, the victims strongly attach to their kidnappers, in some cases refusing to testify against them. Even in such black and white cases of exploitation and abuse, a person's ability to attach and form traumatic bonds with their perpetrator is widely accepted. How much more so might this occur in instances of sex trafficking in which the entire relationship is manufactured to create false impressions of attachment? Victims of Stockholm Syndrome are not left to their own 'choices' in kidnapping situations. They are rescued and provided the full spectrum of rehabilitative services. Victims of sex trafficking suffering from trauma bonding require even more comprehensive services as their trauma is more chronic and intimate in nature.

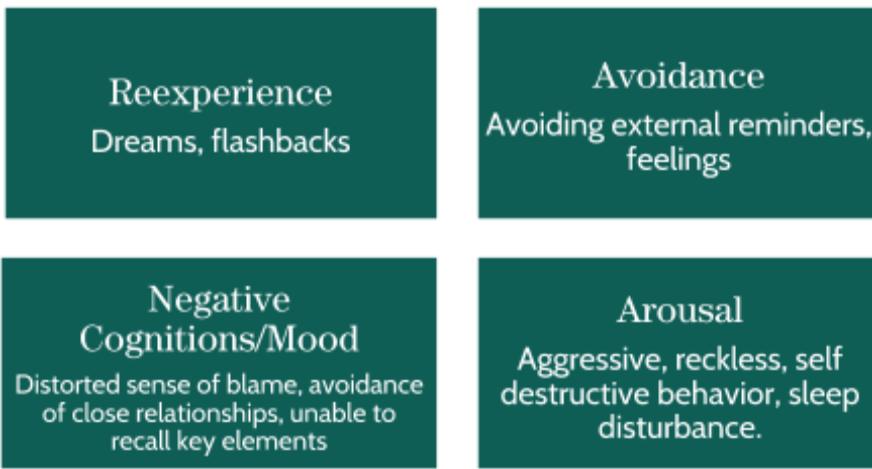
Complex Post-Traumatic Stress Disorder (DESNOS)

The complex physical and emotional needs of survivors often overwhelms the resources of the agencies seeking to help them. Choi et al (2009) showed that these “additional symptoms in response to a repeated and prolonged interpersonal traumatic stressor have been characterized as a variant of PTSD termed complex PTSD, also known as disorders of extreme stress not otherwise specified (DESNOS)” (p.934)

The individual experienced trauma (directly, through witnessing, learning from a close family/friend of event, or through extreme exposure to aversive details) that is causing clinically significant impact on social interactions and capacity to work (or complete appropriate/necessary tasks). There are two types of trauma: Single incident trauma which only happens once (e.g. car accident, natural disaster, etc), and complex PTSD that occurs as a result of repetitive, prolonged trauma involving sustained abuse or abandonment by the caregiver or other interpersonal relationship with uneven power dynamic (e.g. survivors of human trafficking, children raised by neglectful parents).



The patient may experience PTSD symptoms through four forms:



Those individuals most at risk for developing C-PTSD are victims of an intimate or interpersonal crime, such as rape, child abuse, and physical assault. PTSD results when an individual's ability to make sense of their world is overwhelmed by extreme stress.

Non-interpersonal traumas, such as car accidents, can result in PTSD, but the extent of the disorder is often less severe and more easily treated. Cooper et al. (2004) state that "rates of PTSD specific to sexual assault are higher than rates produced by other events" (p. 53). Survivors of sex trafficking and individuals involved in the sex industry report a higher incidence of physical violence and rape than the rest of the population.

The exploitative nature of prostitution combined with the high risk of rape and other forms of assault put individuals involved in prostitution at an increased risk of developing C-PTSD. A woman involved in prostitution has no guarantee of safety and protection from violence in her work, even in regulated brothels with emergency call buttons, as we can see from the research conducted in Amsterdam (Farley, 2003, p 35). In countries where prostitution is legal, many women in prostitution still report forced sexual encounters. A survey conducted by Farley et al. (2003) found that 59% of participants (women involved in prostitution) in Germany (where prostitution is legalized) did not think legalization protected them from rape and physical assault. It is not possible to create structures that eliminate this risk for women and men involved in prostitution. **This unpredictable environment creates chronic instability and fear**, often forcing the individuals to develop maladaptive coping mechanisms, such as drug and alcohol abuse, mental dissociation, and a perceived complicity in their trafficking. It is a high-risk activity, with potentially devastating consequences, physically, emotionally, and mentally.

Trigger | Instinctive response based on learned fight, flight, or freeze experience. An external factor that results in subconscious reactive behaviors.

Flashback | Intrusive memory of trauma accessed unconsciously. An internal factor. We are hardwired to remember trauma in order to help us avoid it again in the future.

The amygdala is responsible for emotional regulation in the face of danger and also in creating the memory of the trauma. We are hardwired to remember trauma in order to help us avoid it again in the future. Different areas of the brain release a combination of



stress hormones (cortisol, opioids, oxytocin, etc.) into the blood stream to trigger the body to respond to stress accordingly.

Dr. Campbell uses a brilliant example of a post it note for memory storage. Sometimes you have a small post it note, sometimes you have a big one, but the size and location are random and even more chaotic than the world's messiest desk. The "post-it" memory of a rape is in a person's brain, but might not be stored under "painful conscious memories". It might be stored under the memory of the smell of the assailant's cologne, so the next time the victim smells that cologne, the whole memory comes flooding back.

Source: Dr. Rebecca Campbell, 2015 Lecture

Understanding Trauma

The biggest question you may be asking yourself is this: **Why wouldn't they leave?**

It's a complex issue, but the women will have experienced trauma bonding: the tension of loving and hating their abuser, feeling that the person who can rescue you is the person who abused you (similar to Stockholm syndrome). **Traffickers are strategic in how they recruit potential victims.** In the US, young victims of domestic violence are often targeted because they do not have a support system and often have a very poor sense of self. They are desperate for the kind of attention they are getting from their trafficker, and are willing to make incredible allowances in order to hold onto the belief that "he loves me."

The services available are inadequate to meet the demanding needs of these individuals, especially because they often do not self-identify as victims. A sense of potential or real rejection may seep into their self-concept as well. If the rest of the world sees them as a prostitute, as a drain on society, as worthless, then perhaps they really are. With no messages to the contrary, these subliminal messages can take hold and create a new framework for how they see themselves. This insidious shift in self-perception is what keeps people involved in prostitution and able to be controlled by their pimps and traffickers. Traffickers use special gifts and treatment as a means of control. They use seduction and acts of kindness to convince their victims of the romantic or intimate nature of their relationship in order to ensure their devotion and absolute obedience.



Characteristics of Survivors

Needs of Survivors

Remember, they are among the **most cruelly abused people encountered by professionals** (Reid and Jones 2011)

The chart below outlines the needs experienced by survivors of human trafficking. There are obvious physical and medical needs as well as psychological and social needs. **The question of how to begin addressing these needs is complex and difficult to answer.** Current best practices are still in development, but many experts agree that care should be “whole person” centered, seeking to address the real physical needs, while also emphasizing appropriate processing of the survivor’s traumatic experiences.

Psychological	Physical	Social	Spiritual
Specialized Rehabilitative Services	Secure housing	Life skills/Mentorship	Belief in Higher Power
Trauma-Focused Counseling	Substance Abuse Rehabilitation	Conflict Management	Faith tradition
Often resist help and deny abuse	Mental Illness	Educational services	Mistrust unconditional love
Emotional Regulation	Relaxation skills	Job skills training	Spiritual community

Common Struggles

Survivors are in the process of a journey toward healing, just like we all are. Because of their experiences, they have learned different coping mechanisms and behaviors along the way that have contributed to their survival. **It is easy to view some of these behaviors as negative or ‘maladaptive’, but in reality, they are life-saving traits for these individuals.** It is important to recognize the benefit that the traits have offered the men and women, and help them find new ways to secure those benefits and to redirect their unique skills in a healthy and beneficial way.



Initially, care providers may identify the traits on the left as maladaptive and negative behaviors. With a slight change in perspective, we can begin to appreciate how those traits that we identify as negative were very functional in helping the individual survive life on the streets. Their ability to survive on the street can limit their ability to survive outside of that world. **The skills which allow them to sustain life in the midst of so much chaos are also the skills which may alienate them from those in other parts of society.** Life on the streets and engaged in prostitution is extremely dangerous and requires constant attention to survival. Self-preservation is of utmost importance, and this survival requires finesse and strategy. This skill can be manipulative at times, but it is critical for survival. These men and women develop new coping skills that are highly valuable for survival on the streets but can cause serious problems in other life situations. As they try to transition out of prostitution and drug use, they often need to develop new coping skills for conflict, pain, and boredom. Boredom is considered one of the primary triggers for drug relapse because a person addicted to drugs has always had an immediate source of stimulus in their drugs. They must now find new ways to occupy their time and thoughts. Conflict on the streets is frequently resolved with violence or verbal aggression. This visceral reaction is normal but not conducive to work or personal relationships

Shame

The women will experience shame. They will carry around the feeling like past trauma or current circumstances are their fault. **The manipulation and trauma has altered their brain chemistry.** Their bodies have adjusted to coping with high levels of stress and fear. They are used to the anxiety of being arrested or dealing with consequences that a pimp has threatened if they attempt escape. The recovery process is long and difficult.

“Shame is the deep sense that you are unacceptable because of something you did, something done to you, or something associated with you. You feel exposed and humiliated.

Or, to strengthen the language, You are disgraced because you acted less than human, you were treated as if you were less than human, or you were associated with something less than human, and there are witnesses.”

- Edward T. Welch, *Shame Interrupted*



How can we help them use those skills and strengths in a way that society would view as healthy and productive?

For many people, the abuse and pain they have experienced limits their hope for a different reality in their future. Physiologically, they are accustomed to adrenaline and high stress levels, so they may seek out dangerous situations or conflict because that is where they function best. They experience hyperarousal due to their trauma and the influence of drugs leads them to engage in other high risk behaviors, some of which may lead to criminal charges. Our job as partners in their journey toward restoration is to help them identify these traits within themselves and develop them for positive outcomes.

Key Traits			
Strong	Independent	Passionate	Visionaries

Survivors of human trafficking are still vulnerable in all the same ways that lead them to be trafficked in the first place. This training is focused on being *informed* about trauma. If you wish to work directly with survivors of human trafficking, you will need to seek further training around *responding* to trauma. As you begin to work within the cause, please seek to serve alongside a professional counselor. Further resources and training are available to specifically equip you to work with those impacted by human trafficking.



How to Reduce the Demand

By Christopher Stollar

Human trafficking is a business. Like any business, trafficking relies on the law of supply and demand.

Many factors fuel the demand for this business

No national, scientific research exists on the factors that fuel the demand for sex trafficking, but some studies have explored the connection between issues like pornography and prostitution.

Trafficking and Pornography

Pornography is prostitution
for mass consumption

-Lisa Thompson

Pornography is *commercial sex exploitation*
Porn and the sexualization of our culture fuel prostitution

A 2007 study by Dr. Melissa Farley with Prostitution Research & Education conducted interviews with 854 women in prostitution in nine countries:

86%

of trafficking victims report
pimps show them porn

49%

had porn made of them
while in prostitution

47%

were harmed by men
who forced them to
do things seen in
pornography

Farley, M. (2007)

But porn isn't the only problem. In many ways, it's a symptom of larger issues going on behind the scenes — especially for men who end up soliciting prostitutes.



Characteristics of Solicitors

Broken people hurting broken people

As we care deeply for those who have been hurt by the criminal enterprise of human trafficking, it is easy to seek out a villain. We challenge ourselves to show mercy (and invite you to do the same) to every person involved in the issue, and that includes those fueling the demand. At She Has A Name, our vision is to see all those impacted by human trafficking restored into society and thriving in their community.

Why care about the men involved?

The fight against human trafficking isn't solely about rescuing victims and supporting survivors of trafficking. We will never end modern day slavery until we reduce the demand that's driving it in the first place. It's easy to think of human trafficking as a social justice problem, but we must always remember that it is first and foremost a business. Like any business, trafficking relies on the law of supply and demand; while some women pay for sex, the fact is that most of that demand is coming from men who struggle with multiple, complex issues.

Profile of a Buyer

Who is fueling the demand for trafficking? What does a buyer actually look like? The short answer is that it could be anybody. **Studies of male consumers of commercial sex find that buyers are similar to the general population in most regards, and quite unlike most populations of criminal offenders**, according to 2012 report funded by the U.S. Department of Justice that provides a comprehensive and national overview of demand reduction efforts.

- A substantial portion of men in the U.S. admits to having purchased sex at some point in their lives, with most surveys finding between **10% and 20% admit to this crime**
- A comparison of men who had been arrested for purchasing sex to nationally representative samples of men found that those who had purchased sex were more likely to have attended college, and were just **15% less likely to be married**
- **The average age is 42.5**, according to Shared Hope International 2014 Demanding Justice Report that reviewed 407 cases of individuals found to have purchased or attempted to purchase sex from a minor
- 18.9% of the buyers' **professions involved working with children**, such as a teacher, sports coach, military recruiter and Boy Scouts leaders
- **21.6% involved a position of authority or trust**, such as an attorney, law enforcement, military or minister
- These men represent all types of race demographics, including those who are white, black, Asian and more, according to interviews of 700 men from six different countries

Reasons Men Solicit

According to a John School

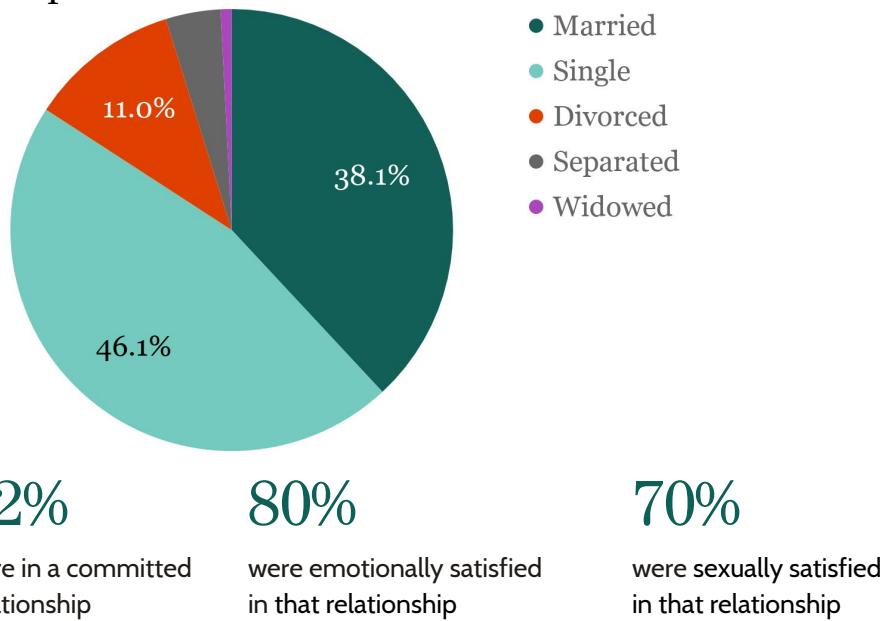
Led by the Columbus City Attorney's Office, The John School is an all-day class is taught by licensed counselors, survivors of sex trafficking and other members of the community. It targets men who are mostly first-time offenders in Central Ohio with no record of violence.



Since 2005, more than 850 men have completed this specific John School. The goal of this class and similar programs is to “decrease the demand for prostitution, and hence, reduce the amount of human trafficking and sexual exploitation that occurs,” according to the Ohio Department of Public Safety’s John Schools Report. As of 2013, 50 cities in the United States were operating some form of a john school — including four in Ohio.

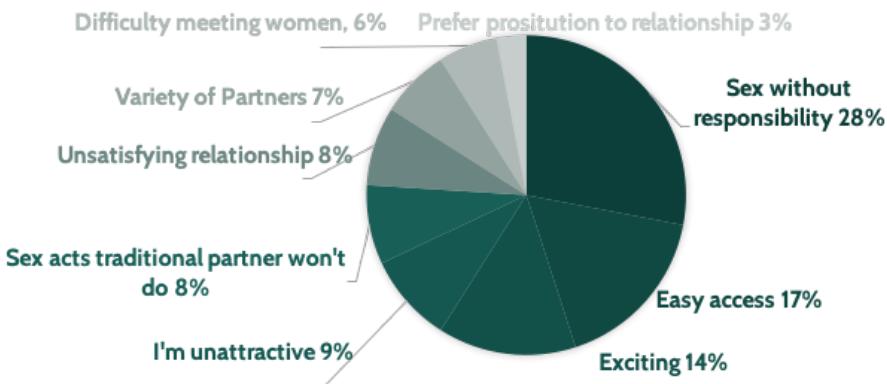
We acknowledge the seriousness of their crimes, but we don’t exist to judge, and we know that the reasons men solicit are complex. In 2016 She Has A Name started analyzing over 10 years worth of data. This augments our understanding of the complex issues men wrestle with, and informs intervention and care strategy. The following data comes from more than 400 men who have voluntarily filled out surveys at the end of each John School. Each survey has 23 questions; some are open ended, while others have a list of specific answers people can select.

Relationship Status



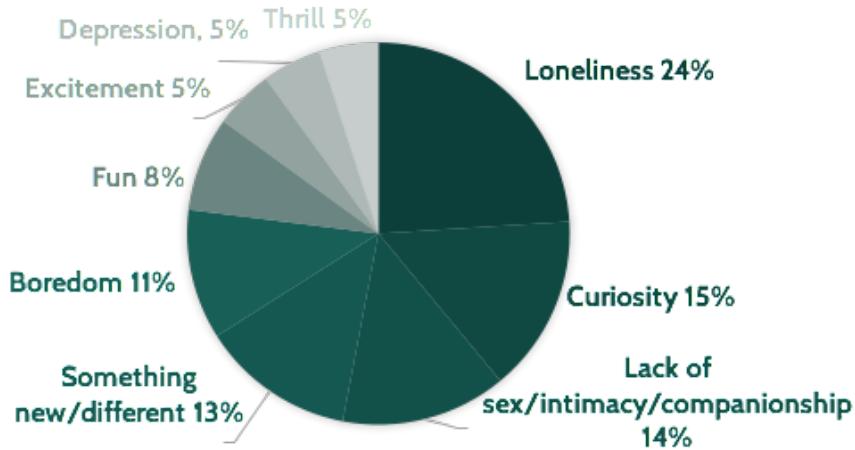
Which of the following factors influenced your decision to seek sex from a prostitute?

This included a list of specific answers respondents could select



In your own words, why did you first seek to engage in activities with a prostitute?

This was an open-ended question



How can we reduce the demand for paid sex?

It is easy to become overwhelmed by the sheer magnitude of what it takes to reduce the demand for trafficking, but change is possible. From the John School responses, around 80% of respondents affirmed **they would change their mind about paying for sex if they knew about the reality of early trauma**, violence, and abuse that those involved in human trafficking face.

Over the past few years I've been battling loneliness and depression. A few months ago, I found myself at rock bottom and made the decision to solicit. Thankfully, I was arrested and stopped short of making a horrible mistake. I knew going into the [John School] that I wanted to get involved in the fight against human trafficking, but after participating in the program I knew I had to...I wish more than anything I could take back my mistake but in a strange way it's made me a better person. I now know I can move forward and raise awareness with dreams of ending this horrible issue.

Ryan, 2016 John School Graduate, 2017 SHAN Training participant, SHAN advocate

Change is Possible

It's easy to become overwhelmed by the magnitude of what it takes to reduce the demand for human trafficking, but change is possible. From the John School Surveys, solicitors would change their mind about paying for sex if they knew that the majority of prostitutes are...

78%

Homeless

81%

victims of violence

81%

start at a young age



Demand Reduction Techniques

Educate

Equipping **young people** to be aware of the realities of pornography, consensual sex, and alternatives is paramount. At least 70 U.S. cities have launched some form of public education effort. **Parents** who are aware of where their children are online can provide a comfortable, non-judgmental space to talk about what kids are seeing and who they are interacting with online. **Men who inform their male counterparts** about the realities of explicit materials and paid sex can be an approachable source of alternative social standards. More than 60 U.S. cities have sent "**Dear John**" letters to solicitors, citations around the health risks and the harm of commercial sex.

Ask your school, place of work, or community organizations to host a training

Strengthen Legal implications

When a person decides to purchase sex, there should be consequences for explicitly illegal activity. **Reverse stings** are used in over 1,350 cities nationwide: law enforcement officers deploy officers posing as women engaged in prostitution, awaiting approaches by people who are attempting to purchase sex. **Web stings** (police posting online decoy ads) are used in 725 cities in the U.S. since 1995. **Public shaming** is frequent: the majority of cities with a reverse-sting program publicize offender identities online or on billboards. Smaller initiatives include auto seizures, community service requirements, and license suspension. *Contact She Has A Name to join local community initiatives*

Offer Recovery Alternatives

As the above statistics demonstrate, those purchasing sex often struggle with deeper issues of loneliness, depression, and lack of community. There is no excuse for illegal behavior, but **restorative justice models that care for all perpetrators have proven to be the most effective.** Licensed counselors, support groups, and church ministries can all provide men and women struggling with sexual addiction and brokenness.

Visit shehasaname.org/blog/demand-reduction-resources-for-recovery-options

The only way to reduce the demand is to address the root issues

That's why She Has A Name is developing a comprehensive list of licensed counselors, support groups and other resources in Central Ohio that can help men:

Elizabeth Miller, LISW, LLC, and teacher at the Reduce Demand class: Elizabeth is a graduate of the Gestalt Institute of Cleveland. She specializes in relationship-based therapy and invests the time to resolve past trauma and understand its impact on current circumstances. Contact Elizabeth at 614-844-6886, Ext. 202, or learn more at <http://elizabethmcounseling.com>.

Bela Koe-Krompecher, LISW-S, LICDC, and teacher at the Reduce Demand class: Bela is a clinical director at the Downtown YMCA, where he works with homeless and at-risk homeless males. He has helped men and women with addictions and mental illnesses for 10 years. Bela is a graduate of Case Western Reserve University and Capital University and is a guest lecturer at the College of Social Work at The Ohio State University. Contact Bela at belakoe@anyway-records.com.

Joel Franck, LPC, and She Has A Name volunteer: Joel received his Masters in Clinical Counseling from Ashland Theological Seminary. He works with individuals who are



struggling with identity issues, life transitions, ADHD, self-worth, addictions, relationship issues, abuse, anger, anxiety, commitment issues, communication problems and spiritual issues. Contact Joel at jfranck@c-roads.com.

Lucinda Bolinger, LPCC-S, and Certified Sexual Addictions Counselor: Lucinda has spent more than 10 years helping individuals and couples address issues related to relationships damaged by sexual infidelity, sexual compulsions and other non-chemical addictions. She offers group education and group psychotherapy to adults either struggling with a sexual addiction or adults in a relationship with someone battling a sexual addiction. Contact Lucinda at bolinger@c-roads.com or learn more at <http://www.crossroadscounselinggroup.com/>.

Tim Stauffer, MA, LPCC and Certified Sexual Recovery Therapist: Tim counsels people in the Columbus area who are struggling with a wide range of mental, emotional, behavioral and spiritual issues, including sexual addictions, couples' issues, diagnosis and treatment of mental and emotional disorders, anxiety and depression, family issues, communication issues, anger and stress management. Contact Tim at 614-949-6227, or learn more at <http://www.timstauffercounseling.com/>.

Mark McCarthy, LPCC-S and MA in Biblical Counseling from Grace Theological Seminary: Mark has 25 years of experience as a Christian therapist, who also brings the value of his own transformation from sexual brokenness to integrity and freedom. He was married for 28 years before sexual addiction ended his marriage and career. For three years Mark worked hard on recovery, and God brought both transformation in his life and restoration with his family. Mark and his wife have since remarried, his children have worked through a process of forgiveness, and his counseling license has been reinstated. He works with all men's issues, but specializes in sexual integrity. Contact Mark or learn more at his website: nathanscry.com

180 Recover: John Doyel founded 180 Recover in 2009 as a ministry of Vineyard Church of Columbus. It exists to help men who struggle with sexual addictions find healing through Jesus and the Holy Spirit. This group is for those who make attending a priority, participate in the teachings, openly share in the small groups and do the assigned work during the week. Contact John at doyel53@gmail.com, or learn more at <https://www.18orecover.com/>.

How can I reduce the demand for sex trafficking?

If you're interested in joining the fight against sex trafficking, here are three practical ways you can get involved:

Drive a van The Salvation Army in Central Ohio needs male drivers for a nightly street outreach program that delivers gift bags to victims of sex trafficking on the streets of Columbus; visit salvationarmycolumbus.volunteerhub.com for more details

Deliver bars of soap Save Our Adolescents from Prostitution needs volunteers to help deliver bars of soap with The National Human Trafficking Hotline during major sporting events to local hotels that may have victims of sex trafficking; visit soaproject.org for more details

Join a committee Central Ohio Rescue and Restore Coalition needs men to join its anti-trafficking committees, especially for Demand Reduction; visit centralohiorescueandrestore.org for more details

For more information, please contact She Has A Name Demand Reduction Coordinator Christopher Stollar at 541-206-2245 or stollar.chris@gmail.com. You can also contact former Franklin County Municipal Court Judge Scott VanDerKarr at 614-579-8708 or svdk95@gmail.com.



Characteristics of Volunteers

Understand Our Lens

Just as survivors of trauma and solicitors approach recovery options with a certain perspective, we as care providers must be aware of what we bring to any care setting. Whether we are conscious or not, each of us brings unique perspective and experience.

We live in a society that attaches privilege to being white and male and heterosexual and nondisabled regardless of social class.

Alan G. Johnson

Privilege | Any advantage that is not earned, exclusive, and socially conferred (in the US, these include male, white, heterosexual, affluent, young, able-bodied, and/or Christian). Many in the prominent group may not realize the power that they have. E.g. White versus Non-White.

Power | Access to resources and to those making decisions. Power to complete tasks, influence decisions, and define circumstances for yourself and potentially others. Power can be visible or invisible and can show up as power over others, with others, and/or internal power.

Summarized from Privilege, Power, & Difference

Good Intentions

Volunteers and providers also come to relationships with survivors with a set of skills that have been useful in other parts of their lives, but which may prove to be a hindrance to developing relationships with survivors if they are not careful and aware.



The traits on the left are ones that many volunteers and providers can relate to. In some contexts, they may actually be perceived or experienced by survivors as the traits on the right. It is important to have self-awareness about how our actions are being perceived by those we serve. It is not possible (or necessary) to change those traits completely. They can be assets for us, but it is helpful to keep this in mind when others respond to us in unexpected ways.



Challenges for Care Providers

Many people become involved with working with survivors because of the dreams that WE have for their lives (ourselves included). **It is important to see potential in them beyond what they see in themselves, but to also allow the survivor to be in control of their own journey to freedom.** The danger of loving the success story more than the survivor is very real. It takes years for a survivor to move toward true freedom and wholeness. Their minds are neurologically altered by their trauma. In many ways, they are programmed to seek out danger, pain, and adrenaline. They may sabotage relationships and jobs, even years after coming out of prostitution and trafficking.

When they were trafficked, victims were used for their body. Now that they're survivors, we want to be careful not to use them for their stories.

That's why we are very hesitant to hold up a survivor as a "Success Story". Eventually they will achieve freedom, but we need to allow it to be in their own timing. Our expectations should be in tension of always going back into old habits and yet hoping for freedom from a former life. Note that this is not a defeatist mentality. There is a way to think realistically that offers grace and understanding. It is possible for these individuals to go on to lead lives full of meaning and beauty (as they define those), but they need to have grace and patience with themselves as well.

The minute we are invested in a survivor primarily to see (and use) their success story is the minute we begin contributing to their further exploitation. Imagine only being valued for your body and for the things you can do with it, and all the pain and torture that came along with that. And now, your identity and value come from surviving that life.

Listening is a magnetic and strange thing, a creative force. The friends who listen to us are the ones we move toward. When we are listened to, it creates us, makes us unfold and expand.

Karl A. Menniger, Psychiatrist and Author

All that being said, unconditional love is a must. Don't love them for being sweet, for their heart-wrenching story, or for the way they say the right things to make you feel valued. The survivors need to just be seen for who they are. This is a challenging mindset and no one can love perfectly, but this is our aim in working with these individuals. This is where we are limited in our ability to love out of our own strength.



Maintain Healthy Boundaries

The best thing to happen to a dysregulated person, are interactions with a regulated one.

Perry, B.D. (2015)

In spite of the challenges a survivors of complex trauma presents, change is possible. Those who are able to model positive relationships and healthy lifestyles, have a profound impact on the restoration journey.



"Something is better than nothing" is an easy myth to believe because it often is true, or seems true. People who have worked in volunteers capacities before can relate to being given more responsibility than they probably felt comfortable with. When there truly is no one else to do it, **we are tempted to step in and offer whatever level of skill we can to the situation.** When working with survivors, the urgency is especially compelling. Even though it may come down to a volunteer filling a role that should be help by a trained provider, it is very important to maintain appropriate boundaries. In the case of counseling or therapy, something is not better than nothing. The survivors we serve need specialized care, trauma informed care. Offer care and support, but **do not try to fill a role for which you are not trained.**

Redirect to available resources | In order to maintain boundaries, you need to know that the survivor has access to the appropriate resources. It is important for you to know what they are and how they can get connected. Ask representative from the organization that you're working with for therapist referrals and other resources. If they don't know, contact She Has A Name. Often a survivor might pose a need to a volunteer that is actually met by the organization (new clothes, hygiene products, etc) in order to exercise a certain level of control.

Pursue longevity but recognize immediate needs | There will be real, tangible, critical needs, especially if you are providing direct care. You will not fix all the problems in a day or a night. Bringing them back to your house is not a solution. Being aware of available resources will help ease that process and help them get long term access to support.



How can I be helpful?

Explore what currently exists | Central Ohio hosts a plethora of anti-human trafficking initiatives. Check out the Central Ohio Rescue and Restore Coalition's monthly gathering to regularly connect with local initiatives. Before starting a creative alternative to care, ask around and see if this is already being offered through an existing program or organization.

Set realistic expectations | A passion for justice draws many of us toward caring for those impacted by human trafficking. The longer we serve in this area, the more problems surface, hurdles appear, and frustration encroaches. Patience is key to identify an avenue to invest and to connect with the right people. It might take days to hear back from a voicemail, weeks to get a response from an email, or months to finally find your place within an organization: just as those impacted are on a journey toward recovery, you too are on a journey!

Take Care of Yourself | We can be eager to find a meaningful investment when something else in our life proves frustrating. While service can be therapeutic, nothing replaces an honest self-assessment of personal challenges and time with a professional counselor. Human trafficking is a dark issue, and this reality can manifest itself in many ways after serving with the cause. Surround yourself with positive community who knows you are serving the cause. Take a break from intense seasons of service when physical or logistical challenges arise.

Consider Your Role

1. Where do you as an individual see your skills line up with this structure?
2. Where does your church, community, non-profit, or business fit into this structure?
3. How can you personally invest in combating human trafficking in our city?



Survivor Care Journey

There is no single path toward safe and sober living, but there are a few key areas of care that most survivors of human trafficking will experience. Intentionally developed programming is needed at each point of contact with a survivor. With time, their physical and medical needs will become less acute, but their chronic need for trauma informed care is still present. Ongoing support for sobriety and trauma focused therapy are key components of successful programs.

Awareness

Training and educating the public about human trafficking

Examples: Central Ohio Rescue and Restore Coalition, S.O.A.P.. Businesses and social enterprises who sell products to raise funds toward survivor care like Eleventh Candle Co., The Roosevelt Coffee House.

Outreach

Meeting individuals where they are and providing immediate relief

Examples: The Salvation Army's The Well, Reach for the Shining Starz, 1DivineLine2Health

Short-Term Housing

Initial formal care providing connections to necessary programming

Examples: Out of Darkness, CATCH Court

Long-Term Care

Safe, sober living providing rigorous programming to care for full spectrum needs

Examples: The Refuge for Women, Safe Harbor

Transitional Employment

A supportive work environment recognizing the unique challenges of trauma survivors

Examples: Freedom A La Cart, Women Crafting Change



References

View additional resources with links on our website, www.shehasaname.org/blog

Adverse Childhood Experiences. Retrieved from:

<https://www.samhsa.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences> Accessed May 9th, 2017.

Bloom, S.L. (1999). *Trauma Theory Abbreviated.* Retrieved from: <http://www.dhs.vic.gov.au>

Carver, J.M. *Love and Stockholm Syndrome: The Mystery of Loving an Abuser.*(2014).

Retrieved from: <http://counsellingresource.com>

Choi, H., Klein, C., Shin, M. S., & Lee, H. J. (2009). Posttraumatic stress disorder (PTSD) and disorders of extreme stress (DESNOS) symptoms following prostitution and childhood abuse. *Violence Against Women.* 15(8), 933-951.

Cooper, B. S., Kennedy, M. A., & Yuille, J. C. (2004). Traumatic stress in prostitutes: A within-subject comparison of PTSD symptom levels across sexual and non-sexual traumatic experiences. *Journal of Trauma Practice,* 3(1), 51-70.

Deshpande, N. A., & Nour, N. M. (2013). Sex trafficking of women and girls. *Reviews in Obstetrics and Gynecology,* 6, 1, 22-7.

Farley, M. (2007). Renting an Organ for Ten Minutes: What Tricks Tell Us about Prostitution, Pornography, and Trafficking. In D. E. Guinn and J. DiCaro (Eds.) *Pornography: Driving the Demand in International Sex Trafficking* (p. 145).

Farley, M., Cotton, A., Lynne, J., Zumbeck, S., Spiwak, F., Reyes, M., Alvarez, D., Sezgin, U. (2003). Prostitution and trafficking in nine countries: an update on violence and posttraumatic stress disorder. *Journal of Trauma Practice,* 2(3-4), 33-74.

Farley, M. (2003). Prostitution and the invisibility of harm. *Women & Therapy,* 26(3-4), 247-280.

Gajic-Veljanoski, O., & Stewart, D. E. (2007). Women trafficked into prostitution: determinants, human rights and health needs. *Transcultural Psychiatry,* 44,3, 338-58.

Hardy, V. L., Compton, K. D., & McPhatter, V. S. (2013). Domestic Minor Sex Trafficking: Practice Implications for Mental Health Professionals. *Affilia,* 28(1), 8-18.

Hope Ranch Ministries (2015). *Web Resources.* Retrieved from www.hoperanchministries.com

Lederer, L. J., & Wetzel, C. A. (2014). The Health Consequences of Sex Trafficking and Their Implications for Identifying Victims in Healthcare Facilities. *Annals Health L.*, 23, 61.

Perry, B.D. (2015). Franklin County Family and Children First Council: Building Better Lives: Changing the Cycle of Child Abuse and Family Violence [Power Point Slides and Presentation]. Presented on April 15th, 2015.

Perry, B.D. (2006) *The Neurosequential Model of Therapeutics: Applying principles of neuroscience to clinical work with traumatized and maltreated children* In: *Working with Traumatized Youth in Child Welfare* (Ed. Nancy Boyd Webb), The Guilford Press, New York, NY, pp. 27-52

Perry, B.D. & Dobson, C.D. (2009) Surviving childhood trauma: the role of relationships in prevention of, and recovery from, trauma-related problems. *Counselling Children and Young People: Journal of CCYP, a division of British Association for Counseling and Psychotherapy,* March, 2009 28-31

Perry, B.D. and Hambrick, E. (2008) *The Neurosequential Model of Therapeutics.* Reclaiming Children and Youth, 17 (3) 38-43

Perry, B.D. (2009) *Examining child maltreatment through a neurodevelopmental lens: clinical application of the Neurosequential Model of Therapeutics.* *Journal of Loss and Trauma* 14: 240-255

Real Escape from the Sex Trade (REST). (2014). *Mentor Volunteer Training* [Powerpoint Slides and Presentation]. Presented in Spring of 2014. Additional info at www.iwantrest.com.

Reid, J.A. & Jones, S. (2011). *Exploited Vulnerability: Legal and Psychological Perspective on Child Sex Trafficking Victims.* *Victims and Offenders,* 6: 207-231

Rytwinski, N. K., Scur, M. D., Feeny, N. C., & Youngstrom, E. A. (2013). The co-occurrence of major depressive disorder among individuals with posttraumatic stress disorder: a meta-analysis. *Journal of Traumatic Stress,* 26, 3 Sustainable Communication: www.sustainablecommunication.org

Taylor, O. D. (2011). The sexual victimization of women: Substance abuse, HIV, prostitution, and intimate partner violence as underlying correlates. *Journal Of Human Behavior In The Social Environment,* 21(7), 834-848. doi:10.1080/10911359.2011.615682

Tracy, S.R. and Tracy, C.G. (2011). *Mending the Soul Student Edition: Understanding and Healing Abuse.* Zondervan. Wiechelt, S. A., & Shdaimah, C. S. (2011). Trauma and substance abuse among women in prostitution: Implications for a specialized diversion program. *Journal of Forensic Social Work,* 1(2), 159-184.

