



Sex Trafficking Myths and Training Opportunities For Your Center

Center Insights Blog

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Center Operations Client Care Medical Operations Medical Volunteer Training human trafficking in-service training Medical Insights online training sex trafficking trafficking volunteer training

May 23 2022

Recently, Care Net chatted with Kristi Wells, CEO and Brittany Dunn, the COO of the **Safe House Project** – an organization committed to battling the issue of sex trafficking in America. Safe House Project's mission is to increase survivor identification beyond one percent through education, provide emergency services and placement to survivors, and ensure every survivor has access to safe housing and holistic care by accelerating safe house capacity and development across America.

The Safe House Project's multi-pronged approach includes free education and training for the general public through their [OnWatch program](#). The training is led by a survivor and equips folks to identify trafficked people in their everyday lives, learn how to report it, and understand prevention strategies. It consists of 10 modules that only take one hour to complete. This would be a great curriculum for your client services staff and volunteers to complete in the effort to better recognize signs of trafficking in the clients who walk through your doors.

Recognizing that 90% of trafficked survivors report having had contact with a healthcare professional, The Safe House has developed training designed specifically for healthcare professionals called "H.O.P.E.": Healthcare Observations for the Prevention & Eradication of Human Trafficking Training.

[The H.O.P.E. Training](#) is a survivor-informed, trauma-informed, and patient-centered video-based training that equips all healthcare workers to identify potential human trafficking victims, give support, and learn how to report. It consists of eight [video modules](#), and nurses may earn continuing education credits through the Academy of Forensic Nursing.

Brittany Dunn, the COO of The Safe House Project, explains in this training the vital role that healthcare professionals play in identifying and assisting trafficked individuals. Your medical teams at your pregnancy centers can be that safe space and intervening support for trafficked individuals – we hope this training can provide you the tools and resources to know what to look for in your client interactions.

Finally, the most compelling education on this topic comes from the men and women who have lived the trafficked experience and who graciously share their stories of survival and healing. Sarah-Beth shares her story below in *Three Myths About Trafficking*:

One of the largest barriers to identification for those being trafficked are the harmful stereotypes. It is important for providing the best care possible that healthcare providers work to break through harmful stereotypes and dispel myths. But what are those stereotypes? What are the myths? While there are many, here are a few that are the most common.

Myth: All traffickers are kidnappers.

While it is true that some women being trafficked are kidnapped, it is far more common for that not to be the case. Most women and children being trafficked are groomed by someone they know, whether it is a boyfriend, a friend, or even a family member.

As a survivor of 20 years of sex trafficking, I was introduced to The Life at 3 years old by a member of my family. My second trafficker was also a member of my family. Many of the men that participated in my trafficking were

people that I knew from my community: teachers, coaches, law enforcement, and family friends.

Myth: Everyone being trafficked is on drugs.

Drugs are a common tool used by those being trafficked to numb the pain, and by traffickers to ensure compliance. However, there are also traffickers who enforce sobriety on their victims and women being trafficked who abstain from substances to ensure they maintain a clear head in order to best protect themselves.

My trafficking had been happening for 15 years before I began to self-medicate. But it would be difficult to tell that I was high because my drug of choice was prescribed to me by a doctor and I abused it. I was always put together, clean, and appeared tired or incredibly calm. I did not look like I was high, and I did not look like someone who would be doing drugs.

Myth: Americans are not trafficked.

One of the biggest myths is that some variation of Americans are not trafficked. Some people believe trafficking does not happen in America. Some people believe that Americans are only trafficked abroad. Some people believe that the only people being trafficked in America are those brought in from other countries. The fact of the matter is that there are traffickers right here in America trafficking men, women, and children that call this nation their home.

I was one of them. My trafficker was not in a gang. He was not buying women to be trafficked from other countries. He was not kidnapping women to traffic in other countries. He was my family. I was a little girl in the rural midwest. I was swept from my bed each night to be sold over and over. Then I was returned to my bed in the early hours of the morning for a few hours to clean myself up before going to school.

Myths are dangerous. They impede the chance to get help for someone who is being trafficked. The idea that trafficking only looks one way makes it easy to miss the countless other ways it can present.

(Written by Sarah-Beth Evans, [The Safe House Project](#))

About Safe House Project:

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