understanding trauma THE EFFECTS OF SEX TRAFFICKING



SAFE HOUSE PROJECT

understanding trauma

DEFINING TRAUMA

In today's culture, trauma has become a buzzword used to describe a wide range of experiences, emotions, and misunderstandings. However, an accurate definition of trauma involves understanding the neurological and psychological effects inherent to a truly traumatic experience.

Trauma occurs when a person experiences an event or a series of events that are deeply emotionally disturbing or life-threatening or create a high degree of stress. These situations trigger an individual's survival instincts, which originate in the part of the brain called the amygdala. When a potential threat or danger is identified, the amygdala activates the sympathetic nervous system to produce stress hormones and chemicals like cortisol and adrenaline, putting the body into a state of fight, flight, or freeze. The physiological changes in the body and brain prepare an individual to successfully handle a stressful or dangerous situation. In the case of traumatic experiences, however, the body's natural ability to process stress and fear isn't always enough and the brain can become overwhelmed. Traumatic experiences are those in which an individual's brain is unable to process, respond, or understand the severity and intensity of a stressful situation as it occurs and reacts to that inability by changing the way it responds to threats or stress in the future.

A severe enough traumatic event can cause <u>neurological</u> <u>changes</u> to a person's brain that function as a protective reflex in case similar events occur in the future. These changes are centered in the amygdala, hippocampus, and prefrontal cortex and can interfere with normal and healthy responses to stress and fear, emotion regulation, and executive functions.

THE AMYGDALA

The amygdala, which is responsible for identifying threats and danger, can become overactive as a result of trauma and cause an individual to become overly sensitive to perceived threats and more prone to stress and anxiety. This is particularly true for people who experienced trauma as children while their brains were still developing. After a traumatic experience, the amygdala is more likely to activate a stress response in situations that trigger memories

of the original trauma, whether or not the danger is real. The effects of a traumatic experience on an individual's amygdala can include developing post-traumatic stress disorder (PTSD) and displaying symptoms like flashbacks, avoidance behaviors, and intense emotional responses to triggers.

• THE HIPPOCAMPUS

The hippocampus, which is responsible for emotional regulation and memory processing, can become impaired by traumatic experiences. Some studies have shown that children who experience trauma are especially susceptible to this and some may have smaller hippocampal regions than normal. The hippocampus also contributes to stress responses, which helps explain why people who have experienced trauma are more likely to struggle with mood disorders, mental illnesses, and other emotional problems. Impairments in the hippocampus can contribute to the likelihood of an individual experiencing depression, chronic stress conditions, a weakened immune system, diabetes, and heart problems. Hippocampal impairments also increase the likelihood of a person making unhealthy lifestyle choices, depending on unhealthy coping methods, and struggling with interpersonal relationships.

THE PREFRONTAL CORTEX

The prefrontal cortex, which is responsible for some complex thinking processes involving executive functions, can be suppressed by traumatic experiences. Executive functions include the ability to plan ahead, think critically, make good choices, and complete necessary actions. A suppressed prefrontal cortex can lead to impaired executive functioning, where basic survival instincts take precedence over rational thinking. Trauma-induced damage to the prefrontal cortex can result in impulsive decision-making, learning problems, trouble concentrating, and difficulty in completing normal tasks.

However, the neurological effects of emotional or psychological trauma are reversible with time and treatment. The <u>neuroplasticity</u> of the human brain means it is possible to change dysfunctional or damaged patterns of thinking, behaving, and reacting.

Neuroplasticity describes how nerve cells, or synapses, in the brain generate new connections and weaken others to respond to new or repeated experiences. Neuroplasticity is especially applicable to the hippocampus and underlies the capacity for learning, memory, and emotional regulation.

For people who have experienced trauma and the neurological changes that come with it, this is good news and brings hope. With guidance from trained and trauma-informed professionals, the effects of trauma on the brain can be lessened and rewired to promote healthier responses.

EXPERIENCING TRAUMA THROUGH TRAFFICKING

Trauma exposure occurs in a continuum of complexity, depending on the timing, duration, intensity, and type of trauma involved. For example, a single traumatic incident, such as a car accident, involving an individual who otherwise has stable factors in their life results in a certain level and type of trauma. In contrast, repeated incidents that involve a significant level of intrusion, interpersonal trauma, stigma or shame, or increased vulnerability result in a much higher level of trauma and of more complex types. Survivors of sex trafficking are most often placed on this end of the continuum.

Due to the nature of sex trafficking, survivors often experience severe and complex trauma while being exploited. The ongoing trauma they endure usually impacts their physical, emotional, and psychological well-being for years after exiting if not for the remainder of their lives. Sex trafficking is considered one of the most heinous and destructive crimes possible, which is in large part due to the complexity, severity, and comorbidity of the trauma experienced by survivors. The effects of trauma from a trafficking experience can be debilitating enough that a survivor is unable to live independently.

Every trafficking experience involves a different combination of factors and types of trauma. However, most survivors experience at least one of the following types of trauma, and often multiple, during exploitation.

PHYSICAL TRAUMA

<u>Physical trauma</u> most often refers to serious injury to the body, which can generally be classified as blunt force trauma or penetrating trauma. Blunt force trauma occurs when an object or force strikes

the body and often results in concussions, internal bleeding, or broken bones. Penetrating trauma occurs when an object pierces the skin or body and creates an open wound.

In the context of sex trafficking, however, the longterm effects of physical trauma on survivors usually refer to the secondary effects of fear, stress, and physical pain on their minds. For survivors, physical trauma generally occurs in conjunction with psychological trauma or sexual trauma.

More than 90% of survivors of sex trafficking report experiencing physical violence while being exploited and 70% say they were injured through physical violence, most often to the head or the face. In one study, survivors were asked about the violence or abuse they experienced, listing twelve possible forms including being threatened with a weapon, shot, strangled, burned, kicked, punched, beaten, stabbed, raped, or penetrated with a foreign object. On average, survivors reported experiencing 6.25 forms of violence and abuse. Eight of the twelve forms were reported by more than half of the respondents and many other abuses were described by survivors that were not included in the list.

Physical violence, abuse, and trauma are nearly universal experiences for survivors of sex trafficking. While some injuries may heal over time, survivors often report dealing with the mental effects of physical trauma for years after exiting trafficking.

PSYCHOLOGICAL TRAUMA

Psychological trauma, also known as emotional trauma, refers to the mental effects of experiencing danger or risk to one's lifestyle, well-being, or health. This type of trauma typically follows highly stressful events or dangerous situations and may lead to strong emotions, recurring memories or flashbacks, and high levels of anxiety. Psychological trauma can be overwhelming and negatively impact a person's ability to cope with normal daily activities or events.

Three types of psychological trauma include:

- Acute trauma, which results from a single, isolated incident.
- Chronic trauma, which results from repeated exposure to dangerous or stressful situations, such as frequent domestic abuse, continued violence, or other prolonged experiences.



 Complex trauma, which results from prolonged exposure to varied and multiple traumatic events that are often of an invasive, interpersonal nature. Complex trauma has wide-ranging, long-term effects and is often related to other psychological conditions.

Survivors of sex trafficking universally experience severe trauma and often over long periods of time. For the vast majority of survivors, the abuse suffered creates ongoing psychological conditions and commonly takes advantage of existing mental instability. On average, survivors report experiencing more than twelve separate psychological issues while being trafficked and 10.5 issues even after exiting. The most frequently reported problems include depression, anxiety, nightmares, flashbacks, and intense feelings of shame. Survivors also reported psychological problems such as bipolar, borderline personality, and dissociative identify disorders at much higher rates than the general population. More than half of survivors suffer from PTSD and more than 40% have attempted suicide at least once.

Unfortunately, even successfully exiting sex trafficking does not mean a survivor's psychological suffering is over. Rather, survivors continue to report high rates of psychological issues for years to come, which testifies to the immense mental and emotional strain and abuse they endured during exploitation.

SEXUAL TRAUMA

<u>Sexual trauma</u> refers to the mental and physical effects of a sexual experience involving force, violence, manipulation, coercion, or a lack of consent. Sexual trauma can occur from a single event or an ongoing experience and does not necessarily involve rape.

The effects of sexual trauma may include mental health challenges, physical injury, and problems with sexual and reproductive health. For example, more than two-thirds of female survivors of sex trafficking in one study had contracted a sexually transmitted disease or infection and over half reported at least one gynecological problem other than STDs/STIs. 71% of female sex trafficking survivors report becoming pregnant at least once from a buyer or trafficker with unusually high rates of miscarriages and forced abortions. Many survivors report being

forced to perform sexual acts, often unprotected, and strangled, beaten, or threatened with a weapon while being raped. Overwhelmingly, survivors in the study were the victims of repeated and extreme sexual and physical violence.

For survivors of sex trafficking, sexual trauma is highly likely to be interconnected with the other types of trauma they have experienced. On average, survivors report being sold for sex to thirteen buyers every day, with some reporting typical days of thirty to fifty buyers. The severity, regularity, and variety of the abuse inherent to sex trafficking make it unsurprising that most survivors continue to struggle with their mental, physical, emotional, and sexual health for the remainder of their lives.

INTERPERSONAL TRAUMA

Interpersonal trauma refers to the mental and physical effects of a stressful or dangerous experience involving another person or multiple other people. Interpersonal trauma can occur from experiencing emotional abuse, emotional neglect, physical abuse, physical neglect, or sexual abuse, or any combination thereof.

Severe mental illness and interpersonal trauma are closely linked. Although intensive research on both subjects is relatively recent, studies show that experiencing interpersonal trauma makes an individual more likely to develop severe mental illness and also negatively affects their ability to overcome mental health challenges. Psychological conditions linked to interpersonal trauma include PTSD and complex PTSD, as well as dissociative and borderline personality disorders.

The term "interpersonal trauma" encompasses a wide variety of experiences, many of which can also be identified as physical, psychological, or sexual trauma. Similar to psychological trauma, interpersonal trauma does not necessarily involve physical or sexual violence, coercion, or assault; rather, many people experience interpersonal trauma through neglect, mistreatment, manipulation, social stigma or rejection, or other negative social or relational interactions.

Experiencing interpersonal trauma can have longlasting and severe relational effects on an individual's ability to form and keep healthy relationships. The most common effects of interpersonal trauma include an inability to trust others and developing dysfunctional attachment styles. Secure attachment empowers people to be self-sufficient, maintain a strong inner sense of security, and attune to and understand the thoughts, feelings, and behaviors of other people. When individuals experience interpersonal trauma, their ability to self-regulate is disrupted and they are far more likely to develop dysfunctional attachment styles. While the symptoms of dysfunctional attachment vary from type to type, most people find it difficult to trust others, be vulnerable, and believe that other people will not hurt or betray them.

Due to the nature of sex trafficking, interpersonal trauma is a universal experience for survivors. Tragically, most survivors report extensive and severe interpersonal trauma for the duration of a trafficking experience, which can last for years. For some, interpersonal trauma experienced earlier in life may contribute to the initial vulnerability to being trafficked, such as survivors who also experienced childhood sexual abuse, sexual assault, or other abusive relationships. Studies show that at least half of all sex trafficking survivors experienced childhood sexual abuse. Children who spent time in the juvenile justice or foster care system were even more susceptible to sexual abuse and much more likely to be trafficked in the future. Research also shows that women and girls are both more likely to experience trauma and more likely to develop mental health problems as a result of trauma.

Unfortunately, survivors of trafficking report severe and ongoing interpersonal trauma almost without exception. Overcoming interpersonal trauma is one of the greatest challenges of a survivor's healing journey and requires intensive therapy and support from trained professionals. This process often includes working with survivors to establish protective factors in their relationships, regaining the ability to trust other people, and building a foundation of self-worth, self-forgiveness, and compassion for themselves to prevent abuse and exploitation in the future.

THE HEALING JOURNEY

For survivors of sex trafficking, the word "trauma" encompasses a vast collection of abuses and mistreatments. The very nature of this type of exploitation involves severe interpersonal, sexual, and

psychological traumatic experiences, often compounded through physical violence. The average survivor spends nearly a year in exploitation, meaning that these traumatic experiences continue day after day and multiply the psychological damage done.

In addition, much of the physical, psychological, sexual, and interpersonal damage from a trafficking experience contributes to the comorbidity of the challenges a survivor faces on their healing journey. For example, a survivor who suffered beatings by her trafficker as a punishment is likely to develop anxiety about her physical safety and other people's emotions. This anxiety can be amplified by other interpersonal traumas and lead to physical health conditions or mental illnesses, such as heart conditions, gastrointestinal disorders, PTSD, or dissociative disorders. For survivors, overcoming their trauma may also involve treating physical health conditions and severe psychiatric disorders.

The healing journey for trafficking survivors must involve a comprehensive and holistic approach to adequately account for the complexity, comorbidity, and severity of their trauma. Many survivors simply have no hope of overcoming the weight of their experiences and become overwhelmed. Without expert support and trafficking-specific resources, at least 80% of trafficking survivors will be revictimized by the same or a new trafficker.

This is why safe house programs are an integral piece in supporting trafficking survivors as they heal and rebuild their lives. The purpose of a safe house program is to provide for survivors' basic needs such as housing, food, clothing, and safety so that they have the mental capacity and space to focus on healing. Safe house programs also provide opportunities for various types of therapy, life skills classes, and education to help survivors move beyond their experiences and prepare for the future.

Safe house programs walk alongside survivors of sex trafficking as they work through a healing journey. Because the effects of sex trafficking last a lifetime, the ultimate goal of a survivor's journey is to understand and accept the factors that made them vulnerable to trafficking and build protective factors, self-worth, and independence to protect them from exploitation in the future. Reaching this goal requires facing the trauma they have experienced, which is best done through therapy and support from trained industry experts. The types of therapy and curriculums offered by safe house

programs are generally not available outside of them. Because a sex trafficking experience is almost always more severe, complex, and invasive than other kinds of trauma, the types of therapy and resources used to address experiences like domestic violence or childhood sexual abuse are often not adequate for trafficking survivors. It is vitally important that every survivor has access to the trafficking-specific therapy and curriculums they need to successfully heal and build lasting freedom.

<u>Types of therapy</u> commonly offered by safe house programs include the following.

COGNITIVE-BEHAVIORAL THERAPY

Cognitive-behavioral therapy (CBT) combines cognitive therapy with behavioral interventions such as exposure therapy, thought stopping, or breathing techniques. CBT and cognitive therapy are effective for a range of problems including depression, anxiety disorders, alcohol and drug use problems, eating disorders, and severe mental illness.

CBT is based on the core principles that:

- Psychological problems are based, in part, on faulty or unhelpful ways of thinking.
- Psychological problems are based, in part, on learned patterns of unhelpful behavior.
- People suffering from psychological problems can learn better ways of coping with them, thereby relieving their symptoms and become more effective in their lives.

CBT treatment helps individuals to develop healthier thought and behavior patterns to address the neurological and psychological effects of trauma. For survivors of sex trafficking, CBT is highly effective in recognizing problematic thinking patterns, accurately understanding other people's behavior and motivations, developing self-confidence and the ability to face fears, and learning to calm their minds and body in stressful situations.

• EXPOSURE THERAPY

Exposure therapy aims to reduce anxiety and fear through the confrontation of thoughts (imaginal exposure) or actual situations (in vivo exposure) related to the trauma. Through exposure therapy, survivors confront anxiety- or fear-inducing stimuli over time to build more healthy responses and coping mechanisms.

NARRATIVE EXPOSURE THERAPY

Narrative exposure therapy (NET) aims to treat PTSD relating to multiple or prolonged traumatic events. Through detailed narration, NET processes and contextualizes traumatic memories and helps individuals establish a coherent autobiographical narrative of their experiences, which helps survivors of trafficking to accept and understand their experiences.

NEUROFEEDBACK

Neurofeedback is a type of biofeedback that involves learning to control and optimize brain function. Neurofeedback refers to obtaining information and metrics about physiological functions, such as heart rate and blood pressure, to understand and change existing brain activity. Neurofeedback can help treat many psychological conditions, including insomnia, anxiety, depression, PTSD, and behavior disorders. For survivors of sex trafficking, neurofeedback can be helpful in learning to regulate their physiological reactions and alleviate symptoms of mental health conditions.

EYE MOVEMENT DESENSITIZATION & REPROCESSING

Eye movement desensitization and reprocessing (EMDR) combines general clinical practice with brief imaginal exposure and cognitive restructuring. EMDR focuses on processing memories and decreasing the vividness or negative emotions associated with those traumatic experiences. EMDR is particularly effective in helping survivors of sex trafficking reduce the effects of PTSD and speed recovery processes.

In safe house programs, survivors often have access to trafficking-specific curriculums as well as specialized therapy. Effective trafficking-specific curriculums are materials used by programs to help trafficking survivors understand what they experienced, the methods their trafficker used to control them, and how to rebuild their sense of identity, power, and independence. For many survivors, this process is complex, and traumatic experiences may have compounded their vulnerability to other traumas. Survivors who have experienced multiple types of trauma throughout their life may need to spend more time working through curriculum to fully understand it.

Most trafficking-specific curriculums help survivors walk through a process of rediscovering their identity,

reclaiming their agency, finding compassion for themselves, understanding their vulnerability, and building the relationships, boundaries, and self-worth to achieve their goals and establish fulfilled lives. Curriculums often address harmful thought patterns, perspectives, habits, relationships, or ideals. Because so many trafficking experiences involve relationships with traffickers, such as family members, friends, or significant others, it is critical for survivors to form healthy habits and boundaries to protect themselves in future relationships. Having access to therapy and trafficking-specific curriculums is critical to help survivors build the coping skills to address the lasting effects of trauma.

The process of healing and gaining the habits and resources necessary to live an independent life takes time and expert guidance, which is why safe house programs are so important. In restorative care, survivors are provided with the opportunity to focus fully on their healing and given access to the support and guidance they need to navigate the extent of their traumatic experiences. If survivors leave a program without addressing the lasting effects of their trauma or their current vulnerabilities, the chances of being exploited again are very high.

Safe house programs bring hope to the overwhelming weight of a survivor's healing journey and commit to walking alongside them. Safe house programs are powerful pieces in the fight against trafficking and provide a light at the end of the tunnel for many survivors leaving exploitation. With the right resources, guidance, and support, survivors of sex trafficking have and can continue to move beyond their past and look forward to lasting freedom.