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Sexual Assault in Human Trafficking

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Sexual Assault in Human Trafficking

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Human Trafficking Around the World: Hidden in Plain Sight
Conversation With My Daughter About Human Trafficking
Women's Roles and Statuses the World Over

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Washing The Hands

“Washing the hands” is how one South African sex trafficker described the systematic tactic he and other traffickers used to deter victims from attempting escape. It means rape and it’s what traffickers do worldwide to control victims. In Phoenix, Arizona, armed traffickers repeatedly raped a local teen and kept her in a dog kennel or hollowed out box spring when they weren’t forcing her to have sex for their commercial gain. In Mexico, traffickers recruited girls and women by promising them employment as housekeepers and waitresses in Florida. Instead, the traffickers raped them and forced them to have sex in brothels.¹

Rape is often a key step in exerting control over and instilling justifiable fear in victims that they will suffer physical harm if they disobey or attempt escape.

According to Valerie Schmitt, MSW and Advisory Services Manager at Polaris, which runs the U.S. National Human Trafficking Resource Center (NHTRC), there are many similarities between human trafficking and related crimes like sexual assault, domestic violence, and labor exploitation. In each, says Schmitt, there is a level of control, manipulation, and coercion leveled against the victim. The difference in human trafficking is that the experience includes a multiplicity of offenses—such as sexual assault, domestic violence, and visa fraud—to compel the victim to work. Meaning, she says, traffickers employ control and abuse against the victim for the *purpose* of forced labor or commercial sexual exploitation.

Traffickers often repeatedly sexual assault victims, both directly and, by forcing victims to have sex for the traffickers’ commercial gain. Repeated sexual assault alone causes trauma but in the trafficking experience it’s paired with additional layers of force, fraud, or coercion, which compounds trauma. This includes numerous short-term and long-term adverse physical, sexual and mental health effects. Victims often experience sexually transmitted diseases, unwanted pregnancies, forced abortions, sterility, miscarriage, acute fear and distrust, memory loss, flashbacks and vivid nightmares of being raped and abused, thoughts of suicide, Stockholm Syndrome, Post-Traumatic Stress Disorder (PTSD), depression, and addiction.

In the Mexico-Florida case, the girls and women victims were told that they were free to go once they paid their debts—roughly \$2,000 per person in transportation fees. The traffickers never paid the victims but told them that \$3 per forced commercial sex incident went toward their debt. That means each victim would be forced to have sex with more than 667 men before satisfying the alleged fees. That’s without including continually accruing costs like room and board that victims also allegedly owed. This is intentional. Traffickers make fees next to impossible to pay, placing victims in debt bondage. The traffickers in this case also confiscated victims’ travel documents and

¹ Hepburn, S. M. & Simon R. J. (2013). *Human Trafficking Around the World: Hidden in Plain Sight*. New York: Columbia University Press.

armed guards prevented victims from leaving the brothels. Victims who attempted escape were beaten.²

Rape and other forms of sexual assault are also commonly used in forced labor. In Thailand, 800 shrimp factory workers (most from Myanmar) were imprisoned in a labor camp monitored by armed guards. The workers—children, women and men—faced public humiliation as punishment if they complained or made an error on the factory line. Traffickers stripped victims naked, beat them, sexual molested them, thrust metal rods up their nostrils, shaved their hair and paraded them in front of other victims. It was a clear message: **If you don't follow the rules, this, or worse, will happen to you.**³

In the U.K., an employer hired a domestic worker but he didn't pay her, resulting in domestic servitude. He withheld her passport and forced her to sleep on the floor. He didn't allow her to leave the home and told her that if she attempted to do so she would be reported to police and deported. Under his close watch, the victim worked from six a.m. to midnight cleaning office buildings the employer's cleaning firm was hired to clean. One night the employer's son and his friends attempted to rape her. In this case, the attempted rape wasn't a tool to control the victim but instead a signature of the sense of ownership traffickers, and traffickers' family members, have over their victims.⁴

Traffickers believe victims to be their property. To use how they want, whenever they want. That may translate to traffickers forcing victims to have sex with border patrol as bribery or to rape them when they so desire. Yes, it's about exerting power and control, but it's also about ownership. Traffickers believe they own their victims and have the right to do what they want with them, whether that's using victims for sex at one moment or labor at another. Forced labor traffickers force victims to have sex and sex traffickers force victims to work against their will. There are no tidy boxes when it comes to human trafficking and abuse.

Coercion and Trauma Bonding

Traffickers may not only use sexual assault but also the children produced from it to manipulate victims. In Israel, a husband drugged, beat and raped his wife and forced her to have sex for commercial profit. He threatened to harm their children and her family members if she did not comply. The trafficker used rape to reinforce the statement he told his wife each day, **“You're mine. I control you. You are not yours. You do not belong to yourself.”**⁵

² Hepburn, S. M. & Simon R. J. (2013). *Human Trafficking Around the World: Hidden in Plain Sight*. New York: Columbia University Press.

³ Ibid, 17.

⁴ Ibid, 77.

⁵ Ibid, 318.

In other cases, the traffickers tell victims they won't get to see their children if they don't comply. This is exactly what happened in a Mexico-New York case where men in a family-run sex trafficking syndicate courted girls—some as young as 14—and when the traffickers had gained the victims' trust, they raped them to force them into submission. The traffickers next isolated and psychologically degraded the victims before forcing them to have sex in New York brothels. The traffickers' systematic rape of victims produced children; the traffickers then took the children to Mexico and told victims they would never see their children again if they didn't cooperate.⁶

Another form of coercion that makes it challenging for victims to leave, if they discover an opportunity, is trauma bonding. In trafficking situations, says Schmitt, there may be a number of victims involved in any one case. In forced labor, the victims have likely worked long hours together without breaks, safety equipment, or resources. They are often completely isolated from their greater community and the traffickers threaten to not only harm them, but also their family members. This creates a strong bond between victims, where they look out for each other. In sex trafficking, says Schmitt, victims may also feel very connected with one another and feel compelled to provide commercial sex or meet a quota so that everyone in the group is safe and has access to housing and food. There is a sense in both trafficking experiences, she says, that if the victim messes up someone from the group will get hurt and vice versa. "There is an interconnected sense of reliance and concern that can be very powerful and prevent someone from speaking up against her/his trafficker," says Schmitt.

Sex trafficking victims not only develop a sense of family with other victims—they often develop a similar, if not stronger, bond with the perpetrator. This too complicates a victim's perspective because they have a deep, emotional bond with their trafficker, which the trafficker carefully curates during the grooming process. "It's similar to what happens in domestic violence cases," says Schmitt. "There is a sense of reliance and dependence between the perpetrator and victim, and victims have a sense of hope that it will get better because it has before. The cycle of abuse compels victims to stay."

In other cases, says Schmitt, the bond isn't romantic but instead the trafficker is a part of the victim's family—such as a parent or a close relative, which can obscure the victim's understanding of the situation. "This is someone who should have been protecting the victim, who is supposed to love and provide for her/him—yet the relative is doing the opposite," says Schmitt. It's important that service providers don't assume family members should be included in the victim's therapy. The family members may have been part of the trafficking.

Victims may also be concerned about the trafficker's family. This may seem unusual, but in domestic servitude situations, victims often want to make sure that there will be someone to watch the children or elders they have been caring for during their trafficking experience. They often feel an intense sense of responsibility, says Schmitt, because they have been providing round the clock care for the family for so long. "There is a

⁶ Ibid, 376.

connection there,” says Schmitt. “It doesn’t negate that they don’t want to be exploited, but it makes it difficult when they consider attempting escape.” In order to address their concerns, NHTRC call specialists, says Schmitt, talk victims through ways to arrange care, how to pack without the trafficker noticing, and will arrange for law enforcement to come at a time the employer is set to leave the house.

Trauma bonding in the trafficking experience, whether between victims and perpetrators and/or their family members, or other victims, can shape each victim’s readiness for change and seeking assistance to leave. The result is that some victims in a group may be ready, while others are not. What we see when people call the NHTRC hotline, says Schmitt, is sometimes a reluctance to involve law enforcement because the retribution may not just happen to the victim calling but also to other victims that don’t yet have plans to leave. The goal is to be victim-led, says Schmitt, and to keep the caller’s autonomy in mind while determining if there are immediate safety risks, opportunities to connect with other involved victims, and working with the caller to come up with an exit plan that minimizes potential harm to all involved.

Impact of Sexual Assault in Human Trafficking

For some victims, forced sex may not be their most immediate concern. They may have experienced sexual assault since they were children, says Schmitt, by different individuals and with increasing severity. The trafficker, she says, may provide food and shelter and the victim’s life during the trafficking experience may be an improvement to what she/he experienced before. “When sexual assault is experienced over time, it becomes normalized,” says Schmitt. “It may be difficult for a victim to imagine a world where sex is always consensual, where she/he doesn’t have to do anything to get food that day, and where she/he can walk around in any room she/he wants.”

The duration or frequency in which the victim experiences trauma complicates recovery. As a result, says Schmitt, victims don’t often self-identify as human trafficking victims. Furthermore, she says, the term human trafficking is a nebulous label and most victims aren’t going to identify with it. Schmitt suggests that mental health providers pick up on the way the victim describes herself/himself and let the experience be victim-led. It’s essential, she says, that every mental health provider be trained on the red flags of human trafficking because her/his contact with the victim may be the first where trust develops and the nuances of the victim’s experience are revealed. For example, the mental health provider may first come into contact with the victim at a drug rehabilitation or juvenile detention facility. The person may not yet have been identified as at-risk for trafficking or as a trafficking victim and the mental health provider may be the first to put it together, if adequately trained.

There are [numerous risk factors](#) at the individual, relationship, community, and society levels that increase a minor’s vulnerability to Commercial Sexual Exploitation of

Children (CSEC), including human trafficking. Risks include sexual or physical abuse, maltreatment, mental health issues, poverty, system-involvement—i.e. child welfare or juvenile justice, gender bias, gender identification, sexual orientation, if the child is a runaway, and homelessness.⁷ While gender bias against girls and women is an issue worldwide and increases their marginalization and vulnerability to exploitation, including human trafficking, boys and men too are victims of human trafficking but less likely to be identified as at-risk or as a victim of commercial sexual exploitation. In a New York study, researchers Ric Curtis, Karen Terry, Meredith Dank, Kirk Dombrowski, and Bilal Khan⁸ found that of the total estimated CSEC population in New York City, 53.5% are male, 42% are female and 4.5% are transgender. The transgender sample was small (n=19), so it's likely, say the researchers, that 4.5% is an under-estimate of transgender CSEC in NYC.

Mary U. Vicario, LPCC-S Certified Trauma Specialist and co-founder of Finding Hope Consulting, LLC, says that the higher a person's Adverse Childhood Experiences (ACEs) score, the more vulnerable she/he is to human trafficking. These traumatic childhood experiences include abuse, neglect, witnessing domestic violence, or growing up with alcohol or other substance abuse, mental illness, parental discord, or crime in the home. There is a direct correlation between a person's ACE score and their susceptibility not only to human trafficking but also to chronic depression, suicide, and alcoholism or addiction. Repeated trauma in childhood, says Vicario, results in repeated fight or flight chemicals that adversely affect the amygdala, hippocampus, brainstem, and cortexes. Among other issues, she says this hinders a person's ability to recognize danger, regulate emotions and plan, organize, and execute actions. This neurological damage increases a person's vulnerability to exploitation and also makes she/he less likely to recognize that she/he is a victim, during and after the trafficking experience.

Vincent J. Felitti, M.D., an internist at Kaiser Permanente and Clinical Professor of Medicine at University of California, San Diego and co-principal investigators of the Adverse Childhood Experiences (ACE) Study, writes in [Cancer inCYTES Magazine](#)⁹ that while more than 70 journal or book publications have resulted from the ACE Study, few discuss the application to children sold into slavery. Emotional and physical abuse, says Felitti, is "part and parcel to being trafficked". This is compounded, he says, by the fact that sexual abuse is inherent to trafficking for the purpose of commercial sexual exploitation.

⁷ IOM (Institute of Medicine) and NRC (National Research Council). 2013. *Confronting Commercial Sexual Exploitation and Sex Trafficking of Minors in the United States*. Washington, D.C.: The National Academies Press.; Bryan, Courtney. 2014. "What Judges Need to Know About Human Sex Trafficking: Screening and Assessment and Matching to Empirically Based Treatment." Presented at the NCJFCJ Annual Conference July 14, 2014, Chicago, Ill.

⁸ Curtis, R., Terry, K., Dank, M., Dombrowski, K., & Khan, B. 2008. *The Commercial Sexual Exploitation of Children in New York City, Volume One, The CSEC Population in New York City: Size, Characteristics, and Needs*. New York: Center for Court Innovation and John Jay College of Criminal Justice. Available at: www.ncjrs.gov/pdffiles1/nij/grants/225083.pdf. Accessed May, 2016.

⁹ Felitti V. J. Childhood Trauma Linked to Chronic Diseases in Adulthood. *Cancer In-Cytes* 2013; Vol. 2, Issue 1. Available at: www.CancerInCytes.org. Accessed May, 2016.

Children are tricked into slavery by adults who pretend to be in love with them; using this relationship to coerce them into selling sex. But once enticed, there are few routes of escape because of the emotional manipulation that can be accompanied by physical assault and the threat of violence to family members.

Researchers Rachel Naramore, Melissa A. Bright, Nathan Epps, and Nancy S. Hardt¹⁰ compared the prevalence of individual and cumulative ACEs reported by youth who were arrested for trading sex to youth arrested for other crimes—such as violent crimes, burglary, truancy, and under age drinking. What the researchers found was that minors arrested for prostitution-related offenses had higher rates for each ACE as well as number of ACEs, *particularly sexual abuse and physical neglect*.

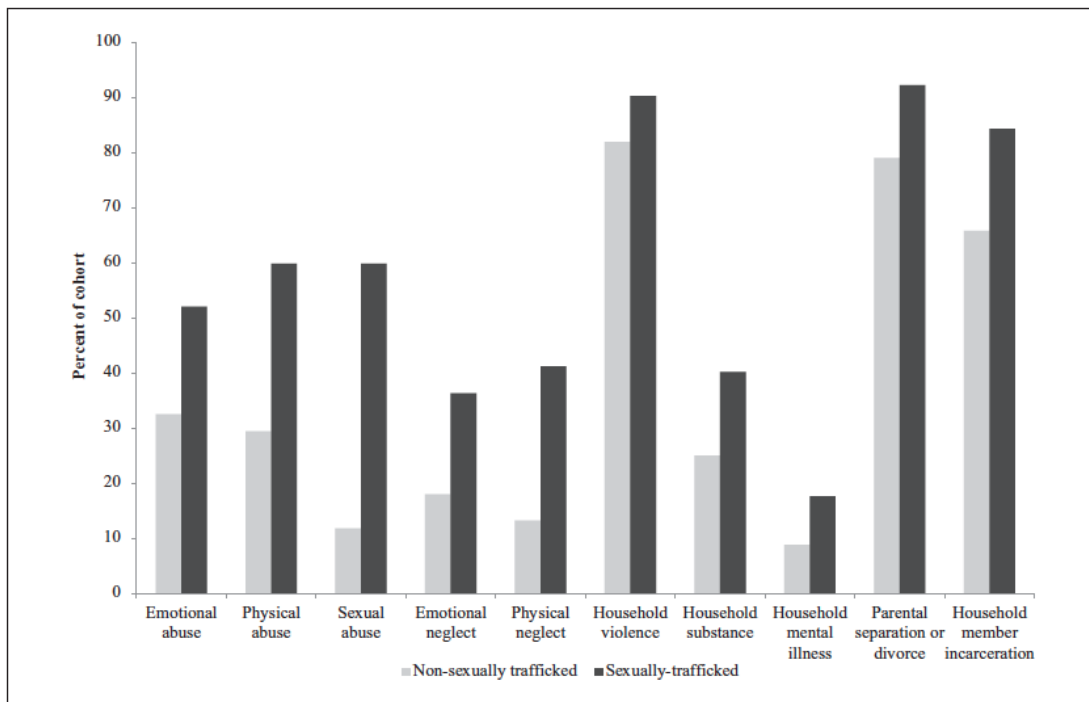


Figure 1. **Prevalence of adverse childhood experiences among sexually trafficked and non-sexually trafficked offending juveniles.**

In fact, each of the 10 ACEs was more prevalent (see Figure 2.). This suggests, state the researchers, that minors with childhood adversities of maltreatment¹¹ and household dysfunction¹² are “extraordinarily vulnerable to sexual predation and re-victimization by

¹⁰ Naramore R., Bright M. A., Epps N., et al. Youth Arrested for Trading Sex Have the Highest Rates of Childhood Adversity: A Statewide Study of Juvenile Offenders. Sex Abuse 2015. Available at: <http://sax.sagepub.com/content/early/2015/09/03/1079063215603064.abstract>. Accessed May, 2016.

¹¹ Maltreatment: Physical abuse, emotional abuse, sexual abuse, and physical and emotional neglect.

¹² Household dysfunction: Criminal history of household members, mental illness of household members, parental separation or divorce, household substance abuse, and violent treatment of mother in the household.

traffickers; they are more likely to be re-victimized in this way than the general population of offenders.”

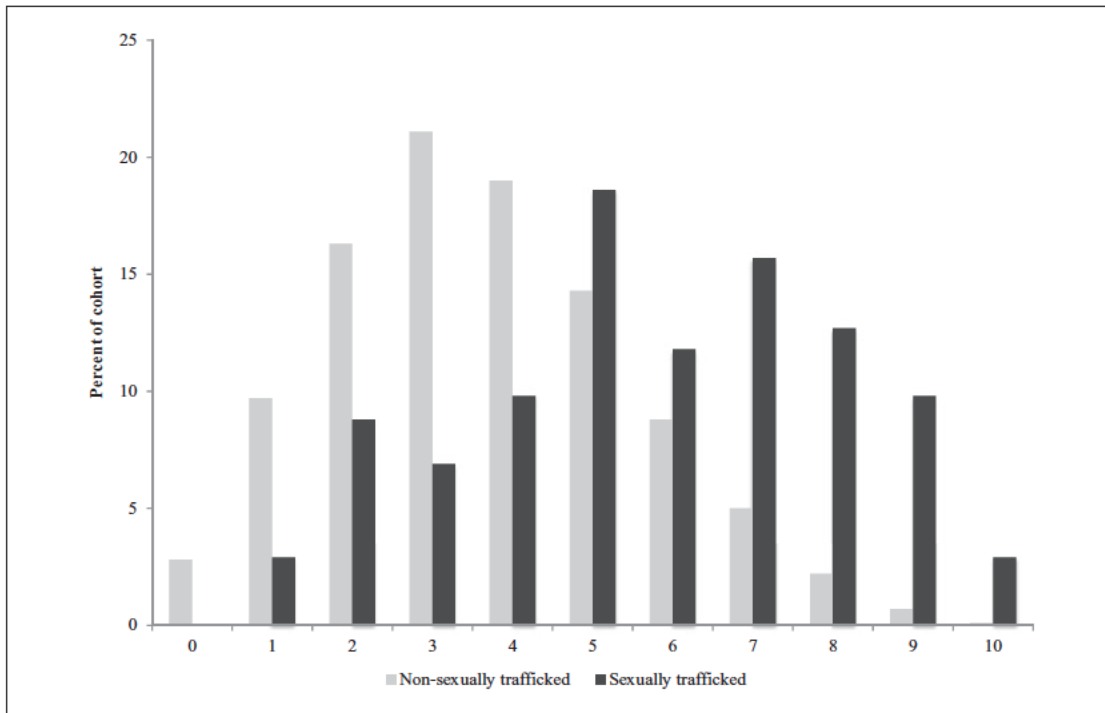


Figure 2. **Prevalence of ACE scores among sexually trafficked and non-sexually trafficked offending juveniles.** *Note:* ACE = adverse childhood experience.

It’s important to note here that, under federal law, anyone under the age of 18 should not be arrested for engaging in commercial sex. “There’s no need to prove force, fraud or coercion,” says Schmitt. “People under 18 should not be arrested for prostitution-related crimes, yet we continue to see it across the country.”

Screening Tools and Communicating with Victims

There are [screening tools](#) that can help during the intake process or for program enrollment. For instance, the [Vera Institute of Justice](#) developed the statistically validated Human Trafficking Identification Tool, which is able to differentiate human trafficking from other crimes and between labor and sex trafficking victims. It also encompasses adult and child victims, and foreign nationals and U.S. citizens. It comes in long or short form and is available in Spanish. Here are some sample questions from the tool:

- ❖ *Q. Did anyone where you worked [or did other activities] ever hurt you or threaten to hurt you?*

- ❖ *Q. Did anyone where you worked [or did other activities] ever harm or threaten to harm people close to you, like family or friends?*
- ❖ *Q. Did anyone ever pressure you to touch someone or have any unwanted physical [or sexual] contact with another person?*
- ❖ *Q. Did you ever have sex for things of value (for example money, housing, food, gifts, or favors)?*

The institute discusses that it’s imperative—perhaps as important as the questions, the authors say—to develop trust, demonstrate respect, and create a safe setting before victims “divulge experiences that may revive fears and feelings of distress, or place themselves or their families in further jeopardy”. In order to do so, the institute recommends the following techniques (see the full screen tool [here](#)):

- Fulfill basic needs—such as providing food, clothing, medical care or assurance of at least temporary shelter, if necessary. Victims may find it difficult to engage in an interview unless their basic needs for physical comfort and safety are met.
- Hold the interview in a non-threatening and comfortable location, and provide food, drink, tissues, and space where the victim can take a break.
- If the victim arrives with a person exhibiting controlling behavior, make sure to speak with the victim in private. *Note:* This includes family members.
- Present a professional and friendly demeanor, and dress in casual clothing. Uniforms and formal attire may make the victim fearful that the interviewer works for an enforcement agency.
- Be honest about the screening objective, duration, the victim’s rights, the interview process, and everyone’s roles.
- If an interpreter is needed, provide one that is competent and trustworthy.
- Be sensitive to gender issues and ask the victim whether she/he would be more comfortable working with same gender individuals. Apply this to the interpreter, if possible.
- Be aware that the victim may be uncomfortable discussing certain topics, such as sex and mental health.
- The victim may have an emotional reaction to the questions. If so, ask if the interviewee wishes to suspend the interview until she/he feels willing and able to continue.

Along with any screening tool, it’s important that mental health professionals adequately prepare for working with at-risk persons or trafficking victims. Megan K. Mattimoe, Executive Director and Senior Staff Attorney at Advocating Opportunity, in conjunction with the Lucas County Juvenile Court, FBI, the National Center for Missing and Exploited Children, trauma specialists Mary Vicario and Carol Hudgins-Mitchell, and with contributions from the University of Michigan Law School¹³ created the *Working*

¹³ Megan K. Mattimoe, JD, AO: Advocating Opportunity; Attorney and guardian ad litem, Lucas County Common Pleas Court, 2012-updated 2015; with contributions from: the FBI Innocence Lost Task Force and the Northwest Ohio Violent Crimes Against Children Task Force, Toledo, Ohio; the National Center for Missing and Exploited Children, Child Sex Trafficking, 2014; Mary Vicario, LPCC-S,

With Human Trafficking Victims tool that includes a comprehensive background on human trafficking—including red flags—along with best practices for communicating with victims. Mattimoe and her colleagues state that helping victims establish resilience factors: autonomy, self-esteem, affiliation or being part of a group, and positive experiences with people in a position of authority outside the abuse environment (i.e. mental health providers, legal advocates, and law enforcement) can help to break the trauma bond and allow victims to feel safe.

Mental health professionals may want to have a general session with a potential victim before administering a screening. In these discussions, Mattimoe suggests service providers first let the victim “speak, unprompted, about the victim’s situation”. This can be achieved, says Mattimoe and co-authors, by the provider listening, providing verbal affirmation, and asking strategic open-ended questions. How questions are asked, says Mattimoe and her co-authors, can aid or detriment a victim and the future case against her/his trafficker.

Asking leading questions or prompting the person, even unintentionally, could damage both the victim and any later prosecution. When available, a trained forensic interviewer who also understands the dynamics of trafficking should ask any detailed or specific questions.

Body language also affects trust and rapport, say the authors, so it’s important that service providers engage in “open and positive body language”. Along the same lines, it’s essential that service providers mirror or repeat what the victim says back to her/him, and acknowledge that she/he is courageous for sharing what happened, and for surviving the experience. In essence, service providers should acknowledge that the victim has taken a risk.

Systemic Challenges

Once identified, it can be overwhelming for victims to suddenly be engaged with multiple different service systems. This makes it crucial, says Schmitt, that mental health providers working with a trafficking victim develop a strong rapport with legal advocates. “These advocates accompany victims to law enforcement interviews and can help create a strong basis for continuity of trauma-informed care across systems,” says Schmitt. One hurdle, says Schmitt, is that not all service providers and law enforcement view human trafficking victims as victims. Under the U.S. Trafficking Victims Protection Act of 2000 (TVPA), “any commercial sex act if the person is under 18 years of age,

Certified Trauma Specialist, and Carol Hudgins-Mitchell, M.Ed., LSW, NBCCH, Certified Trauma Specialist, with Finding Hope Consulting; and the University of Michigan Law School, Human Trafficking Clinic, 2011-2012.

regardless of whether any form of coercion is involved, is defined as human trafficking”.¹⁴ In 2000, this was a significant legal shift in conceptualization—children in commercial sexual exploitation perceived not as offenders but, instead, as victims of repeated child abuse for profit. Yet, more than a decade later, child sex trafficking victims continue to face arrests and detention for prostitution and prostitution-related crimes.

Law enforcement, in particular, says Schmitt, can be inconsistent in how they perceive victims—sometimes viewing victims as perpetuating the crime of prostitution or immigration violations instead as a trafficking victim. Mental health providers and legal advocates, along with adequate training, can help law enforcement understand that a victim they perceive to be an uncooperative witness may in fact be experiencing a physiological response to trauma. “This can cause a critical mind shift,” says Schmitt. “Mental health providers and legal advocates can help them really understand the connection between trafficking and trauma.” Once law enforcement understands that the victim may be experiencing extreme forms of PTSD, depression, anxiety, psychosis or other mental health concerns, it creates a basis for understanding responses and then changing the environment so that it’s more victim-centered. For example, those in contact with the victim would avoid negative statements and provide a safe place for victim interviews.

Another issue is differences between federal and state laws regarding prostitution and human trafficking. States should implement Safe Harbor laws, says Schmitt, to reconcile the differences, provide immunity for minors, divert them from the criminal justice system and offer specialized treatment and services. As of fall 2015, there are [34 states](#) that have Safe Harbor laws, with differing degrees of protection. Some states’ Safe Harbor laws, says Schmitt, offer diversion programs where minors complete services (like therapy) in order to have charges removed from their record. “These programs are intended to be trauma-informed, victim-centered safe spaces for victims to seek recovery and services,” says Schmitt. Oddly, according to the Office of Juvenile Justice and Delinquency Prevention, most states that have Safe Harbor laws focus on [decriminalization or specialized treatment and services](#), not both. Even in states that do decriminalize, victims under age 18 continue to face arrest for prostitution.

“The effect on a victim in detention can be highly adverse,” says Schmitt. “Victims have had so many of their freedoms taken away and quite possibly faced physical confinement and/or were under such extreme coercion and psychological manipulation that they felt they could not leave. “Locked facilities can trigger or retrigger trauma,” says Schmitt. “The concept of arresting and/or holding a youth in detention—or any confined facility—

¹⁴ U.S. Department of State. 2011. *Trafficking in Persons Report 2011*. Washington, D.C.: U.S. Department of State. Available at: <http://www.state.gov/j/tip/rls/tiprpt/2011/index.htm>. Accessed May, 2016.

when a victim is coming out of a traumatic confined situation because of their trafficking experience, is wildly counterintuitive.”

Adequate Safe Harbor laws don't bar the reality that a number of unidentified human trafficking victims will be in detention facilities for offenses unrelated to their trafficking experience, such as petty theft or running away from a rehabilitation facility. This makes it essential, says Schmitt, for detention facilities to adequately screen for human trafficking. For example, screening tools like Florida's Positive Achievement Change Tool (PACT) highlighted in *Youth Arrested for Trading Sex Have the Highest Rates of Childhood Adversity: A Statewide Study of Juvenile Offenders* can help juvenile justice systems identify youth offenders with histories of maltreatment. In this case ACE scores were drawn from any and all PACT screenings, accounting for accumulation of ACEs as the child gets older and increased disclosure by the victim over time. Naramore and her co-authors state that services for maltreated youth offenders should be tailored to first meet their most basic needs—safety and security—and then assist them in “identifying appropriate relationships with adults”.

A trauma-informed approach, says Schmitt, is crucial to helping human trafficking victims; it puts the individual's autonomy at the forefront. Programs should be focusing on helping all victims recover and effectively integrate back into their community, she says, so that they can stand on their own two feet. It may mean building out foster care programs with foster care families that are in the community, says Schmitt, or building mentorship programs with victims and other people in the community. “What happens *next* for victims is an important aspect we have not dedicated enough resources toward.”