

ARC-HT: An Intervention Framework for Survivors of Human Trafficking



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September 2012

What is trauma?

Traumatic experiences are those that are *overwhelming*, that tax the individual's coping resources, and that lead to initiation of biologically driven survival strategies and responses.

The Complexity of Trauma

- > Multi-layered nature of trauma:
 - Experienced or witnessed overt harm (i.e., physical assaults, early sexual abuse, sex trafficking)
 - Lack of need fulfillment (i.e., lack of love and affection)
 - Interpersonal context (i.e., betrayal, loss, abandonment)
 - Disrupted working models (I am bad. I can't trust other people.)

Adapted from Blaustein curriculum

Functions of Behavior following Developmental Trauma

- > People who have experienced developmental trauma have generally had to cope with either or both:
 - 1) Not enough attention/failure to meet basic needs (neglect)
 - 2) Too much danger (lack of safety)
- > Two primary functions of behavior:
 - Need fulfillment
 - Danger avoidance/Safety-seeking

Blaustein 2004

Need-Fulfilling Behavior

- > Function: Getting Needs Met
 - Emotional needs
 - Lack of emotional boundaries (e.g., too much sharing)
 - Emotionally demanding (dramatic, never satisfied)
 - Seeking negative attention (acting out)
 - Physical needs
 - Physical nurturance-seeking behavior (too much physical contact; sexualized behaviors)
 - Hoarding food, clothing, objects

Blaustein 2004

Danger Avoidance

- > Fight-----→Hyperarousal
 - Aggression, irritability and anger
 - Self-harm
- > Flee-----→Withdrawal
 - Avoidance of other people
 - Avoidance of traumatic reminders (PTSD symptom)
- > Freeze-----→Panic
 - Feeling stuck
 - Anxiety, panic
- > Submit-----→Shutting down
 - Numbing; shutting down of emotional expression
 - Ignoring/tuning-out other people
 - Looking dazed, "spacy", daydreaming
 - Over-compliance



Adapted from Blaustein curriculum

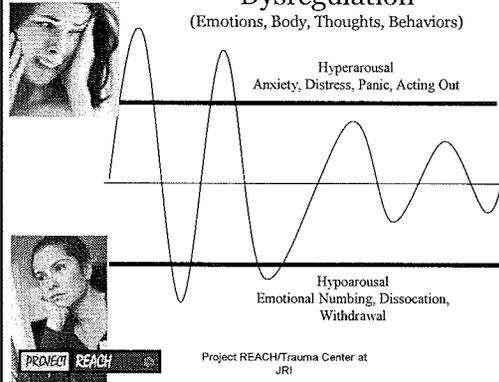
Key Triggers

- > Lack of power or control
- > Unexpected change
- > Feeling threatened or attacked
- > Feeling vulnerable or frightened
- > Feeling shame

Adapted from Blaustein curriculum

Dysregulation

(Emotions, Body, Thoughts, Behaviors)



Developmental Trauma Disorder (DTD)

- > **Exposure to traumatic maltreatment or violence and fundamental disruption of attachment bonding with primary caregivers**
- > **Affective and Physiological Dysregulation**
 - Dysregulated emotions
 - Dysregulated body functions
 - Dysregulated sensations
 - Impaired capacity to describe emotions and bodily states

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- > **Attentional and Behavioral Dysregulation**
 - Preoccupation with or impaired capacity to perceive threat
 - Risk-taking
 - Maladaptive attempts at self-soothing
 - Self-harm
 - Inability to initiate or sustain goal-directed behavior
- > **Self and Relational Dysregulation**
 - Preoccupation with safety of the caregiver or loved ones
 - Negative sense of self (helplessness, worthlessness)
 - Distrust, defiance or lack of reciprocal behavior
 - Reactive physical or verbal aggression
 - Inappropriate attempts to get intimate contact/ excessive reliance on others for safety and reassurance;
 - Problems with empathy (lack of or excessive)

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Human Trafficking and Developmental Trauma Disorder

- > Developmental trauma as a precursor to trafficking
- > Separation from caregivers during trafficking as developmental trauma
- > Minor sex trafficking as developmental trauma
- > Labor trafficking of children as developmental trauma

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Common Elements Between Child Sexual Abuse and Minor Sex Trafficking

- > Relational trauma
- > Developmental trauma
- > Unequal power dynamics of perpetrator and victim
- > Use of relationship (Stockholm syndrome)
- > Coercive elements (love, compliments, money, gifts)
- > Secrecy from potential supports

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Unique factors to Minor Sex Trafficking

- Commercial element- the "public-ness" (and no one did anything)
- Financial element- money paid by Johns, money earned by pimp, money given to child
- Rejection by society (friends, family, teachers, law enforcement)
- Gang involvement/ drug trafficking
- Substance use/ abuse
- The normalization of "The Life" (multiple victims, peer involvement, recruitment by peers, openly discussed, viewed as means of control)
- Pop culture influence (glorification)
- Media influence (devaluation)
- Made to witness violence/ coerce others
- Poverty/lack of resources/need ("survival sex"), lack of supports
- Frequent movement (how to offer services?)
- Sense of alienation from mainstream society
- Issues of race, gender, sexual preference, gender identity



Challenges

- Running
- Self-injury
- Substance abuse
- Relationships
- Revictimization/reenactments
- Relationship with family



ARC-HT*: A Trauma-Informed Framework for Working with Trafficking Survivors

Consideration of Developmental Issues and Culture Throughout

- Attachment
- Regulation
- Competency
- Narrative

*Adapted from the Attachment, Self-Regulation and Competency (ARC) framework, developed by Margaret Blaustein, Ph.D. and Kristine Kinniburgh, LICSW of the Trauma Center at JRI

Developmental Issues

- What is developmentally normative for this age?
- What developmental competencies were impacted?
- Current dependency needs
- History of early attachments
- Boundaries
- Core beliefs about others and the world



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Normative Developmental Issues in Adolescence

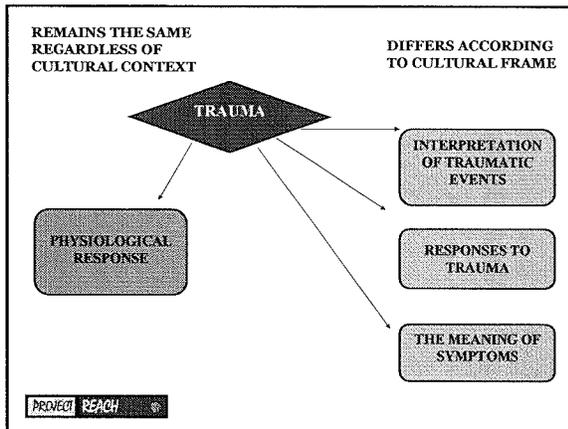
- Emotional intensity of adolescence
- Cognitive
 - Frontal lobe development (not complete until mid 20's)/ impulse control
 - Able to see future but less able to see consequences
 - Black-and-white view; extremes, judgments
- Self
 - Striving for independence
 - Body image, sexual image, self-image all important
 - Strong need for privacy
 - Belief in self as focus of attention
- Relationships
 - Development of romantic & sexual relationships
 - Peer group prominent source of support, information, and reference



Developmental issues in the Trafficking of Minors

- Peers and relationships of central importance: facilitates recruitment
- Impulsivity, trouble seeing consequences (motivated by immediate consequence—e.g., \$; use of substances for immediate coping)
- Identity development in minor sex trafficking
 - Earlier trauma may have negatively impacted sense of self
 - Identity becomes based on external factors: what you have (money, jewelry, clothes), appearance, romantic relationships ("getting a man")
 - Sexual identity is external/cosmetic: being a commodity, being attractive/enticing (not related to internal experience)
 - Negative impact on identity development is cyclical- maintaining or repeating victimization
- Black and white thinking: Social service and law enforcement are bad





Cultural Factors

- Importance of family
- Respect
- Relationship to authority
- Privacy
- Shame
- Role of women
- Communication patterns

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Thinking Broadly About Culture

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The role of culture in trafficking

- > Rejection by community for earlier trauma exposure or for trauma-related symptoms ("She's the town slut.")
- > GLBTQ in a family or community that rejects this identity: Made to feel bad about self, higher incidence of abuse, runaway/homelessness
- > Living in conditions of poverty/ high community violence
 - Kids living in these neighborhoods have a higher threshold for violence
 - Elements of threat and coercion quickly come into play (insular neighborhood, small microcosms, easy to find. Pimp knows where they go to school, where their mother/ aunt/ cousin lives, can park outside and watch them.)

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Attachment

- > Attachments with primary caregivers form the template for all relationships in life.
- > In normative development, the caregiving system provides the safe container for children to cope with new experiences, explore their worlds and to develop a range of skills
- > Secure attachments also help mitigate the impact of overwhelming stressors and support healing and recovery when children are exposed to distressing experiences.
- > However, attachment systems themselves may be compromised or distressed and thus be unable to provide the safe container a child needs OR the attachment system may be the source of the distress for the child.

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Attachment: The Problem

- > Early caregiving system not intact
 - Attachment issues (lack of attachment figures, lack of response from caregivers, attachment disruptions or losses)
- > Longing, unmet needs for love and affection
- > Withdrawal into fantasy
- > Attachment to perpetrator/ trauma bonds
- > Impaired trust
- > Difficulty with boundaries and identifying unsafe situations (radar broken)
- > Reenactments & revictimization
- > Linking love, sex, and abuse

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Attachment: What to Do

- Routines, Rituals
- Structure and Consistent Responses:
 - Offering predictability/control (e.g, Behavior Modification Plan)
- Caregiver Affect Management



Trauma Behaviors that Challenge Staff Affect Management

- Triggered responses
- Anger/opposition (i.e., attempts for control)
- Demand for attention
- Patterns of approach and rejection
- Extreme emotional responses to stressors



Adapted from Blaustein curriculum

- Common Caregiver Responses:
 - Reduced sense of efficacy in role
 - Personalization of rejection
 - Demoralization and burn-out
 - Anger and blame of client – “Why can’t she just try harder?”
 - Reminder/trigger of own difficult experiences
- Caregivers may cope by:
 - Shutting down/ constricting/ withdrawing (defending against emotion)
 - Over-reacting
 - Being overly permissive
 - Trying to “fix it”

Adapted from Blaustein curriculum

A Parallel Process

	Survivor	Provider
Situation	Client chronically misses sessions	“I’ve told you too many times. This is your last warning.”
The Cycle	“I’m being controlled; I have to fight harder.”	“She keeps fighting me; I better dig my heels in.”
Cognitive	I am bad, unlovable, damaged. I can’t trust anyone.	I am ineffective. This person is rejecting me.
Emotional	Shame, Anger, Fear, Hopelessness	Helplessness, Frustration, Resentment
Behavior	Avoidance, aggression, pre-emptive rejection, self-protection	Over-reacting, Controlling, Shutting down

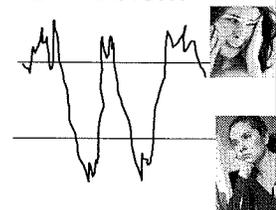
Provider Regulation and Attachment

- Knowing yourself/ your triggers
- Counter-transference reactions
 - Hearing stories about traumatic experiences.
 - Reaction to client’s emotions (intense grief, anxiety, helplessness, anger).
 - Doubt or suspicion (Could this be true?)
 - Wanting to save or fix your client. Wanting things to change.
 - Reactions to client refusing help, disappearing, or going back into a dangerous situation.
- What influence do these reactions have on your work?

Adapted from Blaustein curriculum

Regulation: The Problem

- Dysregulation in:
 - Emotions
 - Somatic states
 - Thoughts
 - Behaviors
 - Relationships
- Substance use for regulation
- Other maladaptive coping strategies



Substance Use/Abuse and Trauma

- > What is the function of the substance?
 - Marijuana- calming
 - Alcohol- dysinhibition initially, calming or disconnection
 - Heroin/opiates (pain meds)- disconnecting, distance from emotional pain
 - Cocaine/crack- increase activation
- > Can't take away the coping strategy without offering alternatives
- > Often traumatic memories emerge as a person is getting clean



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Other Coping Strategies that People Use for Regulation?

- > Self-injurious behavior (cutting, burning)
- > Eating disorders
- > Suicidality
- > Sensation-seeking behaviors
- > Sexual behavior (excessive or avoidance)
- > Creating ongoing crisis
- > Relationship enmeshment

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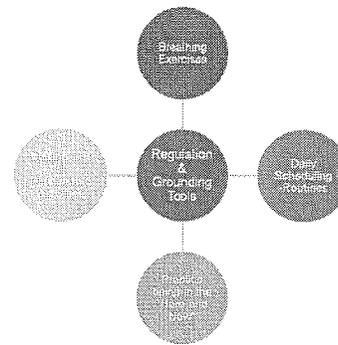


Regulation: What to Do

- > Psychoeducation
- > Build Self-awareness
 - Recognizing and naming emotions
 - Identifying triggers
- > Build Alternative Coping Skills
 - To manage intrusions
 - Sleep hygiene
 - Anxiety management
 - Anger management
- > Types of Interventions
 - Seeking Safety Intervention
 - Dialectical Behavior Therapy



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Competency: The Problem

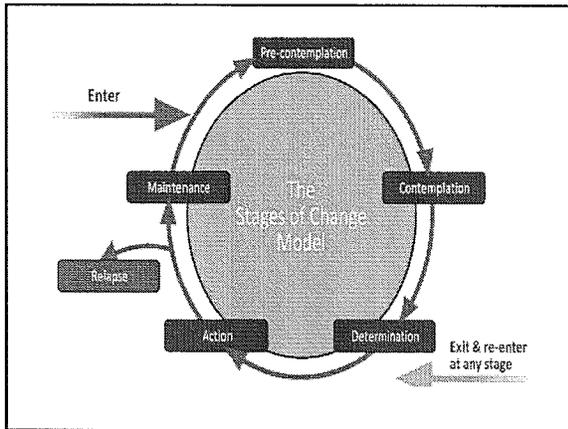
- > Self-narrative
 - Doesn't want to leave (Stages of Change)
- > Identity
 - Feels identified with the identity the pimp gave her
- > Needs
 - Has needs that her pimp had been fulfilling

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Competency: What to Do

- > Problem-solving and decision-making
 - Motivational Interviewing
 - Pro's/ con's lists
- > Identifying strengths
- > Developing positive sense of self
- > Future-focus
 - Short-term and long-term goals & steps to get there

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Competency/Identity

- Positive aspects of self
- What are you good at?
- Engagement
- Future

I don't have any photos of my family. I couldn't find any souvenirs of my parents or of my brothers and sisters. I like volley ball and films. These two things give me courage. I also like to read autobiographical books about people who have suffered in their lives. It is a consolation to me. Prayer is also important to me.

Bernard, 16



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Narrative: The Problem

- Identity as a bad person, worthless, unlovable ("It was my fault")
- Intrusive traumatic memories vs. lack of acknowledgment ("I can't remember anything" or "It wasn't that bad.")
- Lack of self-development, lack of future



Narrative: What to Do

- "Trauma processing" should only be done when some stability has been established and regulation skills have been developed
 - Interventions for trauma processing: EMDR, Narrative therapy, somatic processing therapies, exposure therapies
 - Trauma processing can be particularly helpful for intrusive symptoms like distressing memories, flashbacks, & nightmares
- Other means of building narrative:
 - Building a life narrative
 - Developing sense of self
- Moving from self-blame to victim to survivor to person



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Thank you!
Q&A

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