

Moving to restoration: How can service providers better help women in the
“sex industry”?

by

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Abstract

The purpose of this thesis is to learn from human trafficking survivors about how service providers can better help female victims of human trafficking. The paper is guided by two theories, i.e., Attention Restoration Theory (Hartig, Evans, Jamner, Davis, & Galing, 2003) and The Holistic Process Theory of Healing (Ventegodt, Andersen, & Merrick, 2003). In this paper, I refer to the participants in my research as survivors and individuals who have been or currently are victims of human trafficking as victims. To utilize the common language used by the participants of this study, sex trafficking will be referred to as the “sex industry”. The purpose of the study was to gain the perspectives of women in the process of exiting from the sex industry to answer the overarching questions of how service providers can better help women who are on the path to restoration and recovery, as well as to help service providers better identify female victims and their needs. A combined approach of Braun and Clarke’s (2006) thematic analysis and Gilligan, Spencer, Weinberg and Bertsch’s (n.d.) Listening Guide was used to analyze the transcribed interviews for a better understanding of the narratives of the participants and the themes that emerged from their narratives.

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Dedication

This paper is dedicated to all those professionally and personally who have helped and supported me to complete such a strong and important paper to continue the fight against human trafficking.

Chapter 1 - Introduction

As the secrets of human trafficking come to light, the world has watched the issue grow from solely a human rights issue that only affected women in a certain part of world, into a criminal and national security issue that affects every part of the world. People are having their human rights of safety, security, and good health, taken from them and then made to work in order to receive pieces of it back. This is done in plain sight, while at the same time it is very hidden. Human trafficking is a crime against humanity that is very complicated to understand, control, and end. However, many efforts are being put forth to stop and end human trafficking by many nations all over the world, including our own. In this study, three women living at a local restoration facility which serves women who have exited the sex industry, were interviewed. The purpose of the study was to learn from survivors of human trafficking about how service providers can better help female victims of human trafficking.

The U.S. has passed the Trafficking Victims Protection Act of 2000 (TVPA), which was reauthorized in 2003, 2005, 2008, and 2013 as an amendment to the Violence Against Women Act (Countryman-Roswurm & Brackin, 2014; Logan, Walker, & Hunt, 2009; Wilson & Dalton, 2008). Logan, et al., (2009) states that the:

“...TVPA defines human trafficking as the recruitment, harboring, transporting, supplying, or obtaining a person for labor or services through the use of force, fraud, or coercion for the purpose of involuntary servitude or slavery; or sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which a person induced to perform sex acts is under 18 years of age “

The TVPA was created to be in line with the U.N. Protocol to protect women and children, to promote collaboration among agencies, to develop educational campaigns, and to issue reports of

detailed progress made in combating trafficking in the U.S. and foreign countries (Countryman-Roswurm, & Brackin, 2014). It was and is currently intended to offer statutory protection to victims of severe forms of human trafficking, increase criminal penalties for persons who commit such acts of trafficking, and to foster international cooperation in efforts to combat human trafficking (Chacon, 2006, p 2978). To distinguish human trafficking from human smuggling, Wilson & Dalton (2008) use the U.S. Department of Justice's (2006) definition which defines human smuggling as:

“...the facilitation, transportation, or illegal entry of a person(s) across an international border.”

Human trafficking victims don't need to be moved across any border to be exploited, and traffickers seek profit from the exploitation of victims, rather than from smuggling people (Newby, & McGuinness, 2012; Wilson & Dalton, 2008).

Human trafficking is complex. Winterdyk, and Reichel (2010) explain that globalization, competing economic markets, and the population boom, make it unfortunately easy for human trafficking to exist, whether it be bonded labor, sex, organ, or slave labor. This is a difficult crime to detect and monitor for it is related to many crime rings and is speculated to be the third largest profitable trafficking activity worldwide, next to gun and drug trafficking (Logan, et al., 2009). Victims are also involved in many illegal activities for their own survival needs, which are used against them in order for perpetrators to continue to exploit them. This also makes it hard for victims to ask for and receive help. Human trafficking continues to be profitable for traffickers because, as Logan, et al. (2009) describe, traffickers receive a profit from victims' labor, commercial sex acts, etc., and then charge the victim fees for providing them their basic human needs of shelter, clothing, food, etc. Traffickers keep their costs low by either not paying

victims, paying them very little, housing them in poor, crowded, unsanitary conditions, and making victims work long hours (Logan, et al., 2009). Human trafficking happens all over the world, and is kept active by the fact that it is an underreported and misunderstood crime in all countries, making prosecution of traffickers difficult (Laczko & Gramegna, 2003). This paper will examine domestic (within the United States) sex trafficking, and how service providers can better serve victims of this crime.

As mentioned previously, the Trafficking Victims Protection Act of 2000 (TVPA) states that any commercial sex act that is induced by force, fraud, or coercion is sex trafficking. This can include prostitution, stripping, and/ or pornography. In simple terms, Wilson and Dalton (2008) discuss how sex trafficking happens normally with a pimp befriending a homeless girl, spending money on her, and then paying attention to her in a way that she has not experienced before. Cecchet and Thoburn (2014) describe how girls who are targeted by traffickers often have a desire to feel loved, making them susceptible to a pimp. Sex is then taken for granted, and in time, the pimp convinces her to have sex for money that he keeps. The relationship becomes less emotional and more contractual, with financial quotas that are set for each night (Wilson & Dalton, 2008). These girls are typically runaway or homeless youth, and come from impoverished, and/or abusive homes where they experience extreme physical and sexual abuse and neglect, and/or are involved with or have observed criminal activity such as using or selling illegal substances (Cecchet, & Thoburn, 2014; Countryman-Roswurm & Bolin, 2014; Logan, et al., 2009; Nixon, Tutty, Downe, Gorkoff, & Ursel, 2002; Wilson & Dalton, 2008).

Many victims of trafficking have been in and out of foster care and child welfare. Nixon, et al. (2002) reported from his study that 64% of their 47 participants were involved in child welfare, and that 77.8% had been in foster care or group homes. Sex trafficking victims are often

transported across state lines and are rotated among motels, truck stops, and highway welcome centers (Wilson & Dalton, 2008). Runaway and homeless youth are often extremely vulnerable to sex trafficking because of the high need for support that they have once they have left their homes (Countryman-Roswurm & Brakin, 2014; Wilson & Dalton, 2008). Victims are lured by the promise of better opportunities and hopes for a better life, but find themselves in inconceivable situations. As time goes on, these girls have become women who are accustomed to the ongoing physical and sexual violence in their lives. They become victims to their pimps (sellers/ traffickers), johns (buyers), other prostitutes, intimate partners, possibly police officers, and perceived higher members of society (Nixon, et al., 2002). Prostitution is often a normal phenomenon in victims' lives, for typically a family member is involved in prostitution, either as a pimp or prostitute, and/or prostitution is common in the neighborhood (Cecchet & Thoburn, 2014).

Why does this continue? Logan, et al. (2009) points to the powerful effects of psychological coercion that continues to entrap and enslave victims. This can be anywhere from victims being blackmailed into committing other criminal acts such as buying, selling, and using drugs, or not having legal documents, and traffickers threatening to expose them. Victims often deal with real threats to their lives or the lives of their loved ones which keeps them quiet. Additionally, the continual use of violence by perpetrators that is classified as acts of love keeps victims wanting to stay with their perpetrators. This ingrained fear, lack of knowledge about alternatives, systemic isolation leading to a mistrust in others, and physical and psychological confinement is what causes many victims to be afraid to ask for help, and continue to remain trapped in the life of sex trafficking (Cecchet & Thoburn, 2014). Nixon, et al. (2002) discussed how the survivors in their study reported that fear of the police or their pimp punishing them, or

a loved one, is what kept victims from reaching out. Both Nixon, et al. (2002) and Cecchet and Thoburn (2014) found that for those who did get out, it was due to fear of losing their life, changes in lifestyle, mental health problems, or because they became pregnant and did not want to lose their baby or have their child grow up the way they did.

Many times women make attempts to leave, but find themselves back in the world of sex trafficking because they either found themselves in need of money, had a substance addiction and were needing to feed it, or the identity of being a prostitute or drug addict was so strong that they didn't know how to be anything else (Wilson & Dalton, 2008; Nixon, et al., 2002).

Substance use is highly correlated with trafficking. Many victims/survivors grew up in homes where substance abuse and addiction were normal. Once in the life of trafficking, Nixon, et al. (2002) explains that substance use and addiction is either a precursor or the result of being prostituted. Nixon, et al. (2002) along with Cecchet and Thoburn (2014), found that many participants in their study stated that they needed to be high or intoxicated because the everyday experience of fear was overwhelming. The participants discussed how becoming numb or desensitized to their violent environments was a necessity for survival, and addiction was considered a coping mechanism to deal with the emotional, psychological and physical reactions associated with their trauma (Cecchet & Thoburn, 2014; Nixon, et al., 2002).

Physical and sexual abuse in childhood, substance abuse, and poverty are highlighted as risk factors for sex trafficking, and being a victim of continuous severe violence, substance abuse, and a lack of means, education, and isolation are risk factors for staying in the life or returning back to sex trafficking. However, there are other systemic risk factors. Logan, et al. (2009) indicated that human trafficking is different from other crimes because it is more difficult to identify victims, and the complexity of the cases makes it difficult to access justice for the

victims. This is because there has been prejudice against those who are victims, for they are frequently seen as illegal immigrants, addicts, prostitutes, and runaways (Logan, et al., 2009). Gradually, as human trafficking is becoming more and more understood, these prejudices are slowly dying. However, it is still a stereotype that victims of sex trafficking are criminals, dirty, and no good. The new federal and state laws that are highlighting human trafficking are bringing this issue to light, and helping us understand that sex trafficking has occurred for a long time. Prostitution, escorts, pornography, and stripping are all commercial sex acts that are illegal by the new laws, and it is hard for many to accept those who are involved as victims, and not criminals.

Chapter 2 - Theoretical Background

The paper is guided by two theories, i.e., Attention Restoration Theory (Hartig, Evans, Jamner, Davis, & Galing, 2003) and The Holistic Process Theory of Healing (Ventegodt, Andersen, & Merrick, 2003). The Attention Restoration Theory (Hartig et al., 2003) suggests that restoration from directed attention fatigue (or the overwhelmingly problematic focus of one's mind, body, and spirit) happens when there is psychological removal (and in the case of the study, physical removal) from what is causing the distress into a new structured and supportive environment that is significantly different from the previous one, in which the individual's expectations match the demands of new environment (Hartig, et al., 2003). The women in this study seeking restoration, have either removed themselves or were mandated out of the life of sex trafficking, and are now living in a safe and orderly home, where they are provided with the expectations of the home and their future success upon entry and are given support to meet those expectations (Kluttz, n.d.).

Also, The Holistic Process Theory of Healing is used because it focuses on how emotional pain can lead to physical pain in the body due to one not making the decisions to take care of their emotional needs, and in order to remove both, one needs to receive treatment for the emotional, physical, mental, and spiritual needs (Ventegodt, et al., 2003). The research has shown that survivors not only go through physical hardships stemming from substance abuse, physical and sexual abuse, and environments that lead to bad hygiene, but this experience also leads to emotional pain as well that expresses itself through mental health needs, and trauma disorders.

Chapter 3 - Literature Review

State Regulations

While there is a federal and state focus on human trafficking, Kansas has focused more on how to combat domestic minor sex trafficking, or the prostitution of minors (under 18 years). Countryman-Roswurm & Brackin (2014) discuss how Kansas House Bill 2034 was signed into law in April of 2013 which mandated that young people subjugated to domestic minor sex trafficking are to be treated as victims/survivors, and are to be housed in environments that provide therapeutic care and holistic treatment services. It also provides far reaching implications for combating trafficking through prevention, prosecution, partnership, and prosperity efforts (Countryman-Roswurm & Brackin, 2014). This bill made commercial sexual exploitation of a child a crime, with increased fines and jail time for offenders. It also addressed the promotion and the buying of sexual relations with minors under the age of 18 (Countryman-Roswurm & Brackin, 2014). This new law set aside funds for the Human Trafficking Victims Assistance Fund that is used to provide multidisciplinary training, victim/survivor treatment, and aftercare for youth (Countryman-Roswurm & Brackin, 2014). This is a great start for the state of Kansas, but in many places in the U.S., programs try and assist girls to exit the streets, but not much is done with the much-needed aftercare for victims (Nixon, et al., 2002). Although the federal regulation, i.e., TVPA has done much in ensuring the duty and importance of prosecution of traffickers and victim protection, the prosperity of victims has been overlooked, for the law provides no mandatory requirements for victim's protection and assistance across the country (Countryman-Roswurm & Brackin, 2014).

Victim Services and Treatment Needs

When focusing on the services and treatment victims need after leaving the life of sex trafficking, Hodge (2014) discussed how mental health needs are likely to be more profound than physical needs, and if restoration of psychological wellness is left unaddressed, this can lead to an increased risk of re-victimization. While physical needs for safety, medical attention, food, shelter, and clothing are needs that must be met first, many survivors have an elevated level of depression, anxiety, PTSD, substance use and abuse disorders, hostility, self-harm, suicidal ideation, and suicides (Hodge 2014; Kleinschmidt, 2009; Abas, Ostorvschi, Prince, Gorceag, Trigub, & Oram,2013). Victims also suffer from other issues that might include memory loss, dissociation, insomnia, guilt, shame, mistrust of others, social withdrawal, loneliness, loss of self-esteem, a sense of apathy or resignation, extreme forms of submissiveness to authority, as well as a loss of personal initiative and autonomy (Hodge, 2014). When understanding the systemic factors and the complex needs of trafficking victims, it is suggested that holistic, trauma-focused, client-centered, culturally responsive, and culturally aware therapeutic services, that might not always be strictly talk therapy, should be used in treating victims of human trafficking (Chung, 2009; Countryman-Roswurm & Bolin, 2014; Hodge, 2014; Yakushko, 2009). Chung (2009) and Cecchet and Thoburn (2014) also stress the need for mental health providers to collaborate with the community and family when helping survivor from trafficking, for it takes a fully holistic approach to attend to the environmental risk factors, the hurts of the psychological and physical trauma, and the healing of the victim's sense of wellbeing.

Also, Dewan (2014) discusses how those who were referred to services were eight times more likely to go if they were referred by a non-governmental agency. Those who were referred to services by a police officer, or someone from a governmental service agency, were not likely to go and receive those services. Many victims come in contact with many service providers

without the service providers knowing they are victims. As it is becoming more apparent that there is a gap between the services provided to victims and the amount of services that are being used, researchers are beginning to explore this issue. Why are victims not using services that are available? Nixon, et al (2002) found in their study that their participants didn't use services because they weren't aware of them, or they had a previous bad experience with the welfare system. Logan et al. (2009) found that barriers to utilizing services included language barriers, issues with understanding the full scope of services offered, timing when services were offered (right at rescue when in a time of crises, making it difficult to make decisions), no written materials available, a lack of trust in service providers, feeling like they must owe something, feelings of embarrassment, fear, or not wanting to be labeled a victim.

Barriers to Seeking Services

One problem that keeps victims from utilizing services is service provider's inability to identify victims. Hodge (2014) explains that identification is the first step in victim restoration and wellness, and that 28% of victims have visited a health professional while they were trafficked. However, due to the inability to identify victims, the proper aid was not given. Law enforcement officers are typically trained to look for perpetrators and not victims, therefore victims are often picked up for another crime and are viewed and registered as criminals (Logan, et al., 2009). Farrell (2014) reported that a survey done by Newton, Mulcahm & Martin (2008) found that 44% of police leaders are not familiar with the legislation on human trafficking, and many of those police leaders in their study provided different definitions of what human trafficking actually was. Grubb and Bennett (2012) also found that there was a lack of human trafficking training among the law enforcement agencies. Without the proper understanding of what human trafficking is, identification of victims and the prosecution of perpetrators is difficult

(Farrell & Pfeffer, 2014). A lack of collaboration between service providers and law enforcement also led to victims not getting the services they need and making the prosecution of perpetrators less likely (Farrell & Pfeffer, 2014). Thus, it is important for collaboration to occur between agencies and law enforcement for victims to receive services.

Issues with Identification

There is a gap that is keeping law enforcement and service providers from identifying victims, which prevents victims from getting the services they need. This gap also allows communities to continue to perpetuate an environment that tolerates sex trafficking. The previous studies looked at why victims had or had not sought out services, but the question as to what are services that lead victims to restoration, and allow them to maintain a stable life outside of sex trafficking, is still left unanswered. Along with a better way to identify and protect victims, there needs to be a better understanding of the types of support and protection services victims may need, and the preferences from victims of how victims want to be treated as they are seeking justice and restoration (Logan, et al., 2009; Macy & Graham, 2012; Weitzer, 2014). In this study I hope to address these concerns by conducting interviews with female survivors of sex trafficking in order to gain their perspectives of how service providers can be more helpful in the process of restoration and recovery in order to close the gap between service providers and female victims.

Chapter 4 - Current Study

The purpose of the current study was to examine how service providers can be of better help to female sex trafficking victims who are on the path to restoration, as well as to learn how service providers can better identify victims and victims' needs from the perspective of sex trafficking survivors. This will aid in closing the gap between services available to victims and the number of services victims use.

Participants

This study was conducted at a local restoration facility in the Midwest. In order to utilize the common language used by the participants, sex trafficking was and will continue to be referred to as the "sex industry." The local restoration facility is a residential home that is used for ministry to women who are 18 years or older and need a place to stay after exiting the sex industry (Kluttz, n.d.). Women at this restoration facility have made the decision to exit the sex industry and to work on their own recovery and restoration. They have the opportunity to live in this residence free of charge, enroll in school or participate in a job apprenticeship, continue their work towards restoration, and move from a 100% supervisory program to a 100% independent citizen who can move through life in a productive, life-giving, and contributing way (Kluttz, n.d.).

There were 5 possible participants who were staying at the restoration facility, and 3 of those 5 participants agreed to participate. All participants were female, over 20 years of age, and identified as "white" or "half white, half Mexican". Participants had been involved in the sex industry for 1 to 4 years, and had been at the local restoration facility anywhere from 3 to 9 months. For each participant, this was their first restoration facility they had been to that was specifically designed to help them become restored after being sex trafficked. All participants

had children of which they no longer had custody. Some knew where their children were, and others did not. Also, all participants have had experiences of depression, anxiety, PTSD, low self-esteem, and substance abuse. One participant stated she had experiences of hostility, another stated she had experiences of self-harm, and two stated that they had experiences of suicidal ideation. The following are substances that the participants stated that they have had abusive experiences with: alcohol, meth, marijuana, cocaine, ecstasy, PCP, amphetamine, and K2 (synthetic cannabis).

Self of the Researcher

In all qualitative research, the researcher is automatically a part of the study due to the researcher's beliefs and biases influencing the research (Dahl & Boss, 2005). As the researcher, I have had a history with this population that involves not only research, but educating others and bringing awareness about the topic, supporting differing organizations with their efforts in combating human trafficking, and I have worked as a therapist to young victims of sex trafficking, as well as with clients who have experienced many of the risk factors that could lead someone to being trafficked. My background includes going across the current state I live in and helping those who are leaders in the fight against human trafficking begin conversations in differing communities about how their community can begin to eradicate the problem of human trafficking. I have also attended and helped facilitate trainings and conferences to educate service providers across the state and in surrounding areas about sex trafficking. In the past I've also helped spread awareness at my university and coordinated a supply drive for a local facility that supports trafficked youth. In my clinical work as a marriage and family therapist, I have worked with clients who have had a history of being sex trafficked, or who have dealt with many of the risk factors that were mentioned above. As one can see, even though I do not have any personal

experience of being trafficked, I have worked with many in this field who hold a passion for combating human trafficking, as well as with victims/ survivors.

As far as the research team, they have had experience working both clinically as marriage and family therapists, and have researched extensively the issues of intimate partner violence and sexual assault, which are both heavily tied to domestic sex trafficking. This also attests to their experience with working with trauma-related issues and topics, and that they understand the level of importance of connecting their experiences to this research.

Chapter 5 - Methods

Gathering Participants

Participants were notified of this study by an informal meeting held at a scheduled time at a local restoration facility in the Midwest. At this meeting each potential participant received a hard copy of the questions to be included in the interview, demographic questions, as well as the contact information of the lead researcher if they had any questions. Participants were then asked to sign-up using only their initials on a sign-up sheet that was passed around. On the same sheet, they identified the best time to meet for an interview with the lead researcher. Alternative timing for the interviews was negotiated with the lead researcher via phone or email if the initial scheduled interview could not work out.

Collecting Data

Interviews were conducted solely by the lead researcher, who followed the *World Health Organization's Ethical and Safety Recommendations for Interviewing Trafficked Women* (Zimmerman & Watts, 2003), as well as keeping in mind the considerations set forth by the Center for Combating Human Trafficking of Wichita State University, Wichita, KS, in their *Sharing the Message of Human Trafficking: A Public Awareness and Media Guide* (Countryman-Roswurm & Patton, 2013). All interviews were held either at the local restoration facility, at a local church that the restoration facility is partnered with, or over the phone at a Midwestern University. The address and name of the local restoration facility will be kept confidential for the safety and privacy of the participants. Interviews were audio-recorded, via a tape recorder. To protect confidentiality, before the audiotape was turned on, the participant was given the opportunity to choose a name she wanted to be called on the tape. Additionally, each

interview was given a number that was used to identify the participant, and the interview. Along with the tapes, all demographic forms and initialed consent forms were kept and transported by means that are HIPPA compliant. Each interview consisted of the researcher and the participant. The goals of the interview did not include asking about the participant's history to avoid a chance of re-traumatization. The participants were informed that at any time they can choose to not answer a question or opt out of the study if it was too uncomfortable to answer or continue.

Each interview began with an explanation of the informed consent of the study and assessing for any potential harm by asking the following questions:

1. After viewing the following questions do you have any concerns about carrying out this interview?
2. Do you think that talking with me would pose any problems for you, for example with friends, family, employers, or anyone assisting you?
3. Do you feel this is a good time and place to discuss the outlined questions? If not is there a better time and place?

Once the above safety questions had been answered and the participant felt they could continue, and all consent forms had been initialed or verbal consent was given, the participant was asked to select a name that she wanted to be called during the interview. The interviews lasted about 45 minutes each. The researcher asked four groups of questions at each interview, in which the participant has seen ahead of time (See Appendix A: Qualitative Research Interview Questions):

1. Questions about how they made it to the restoration center, and what factors at the center they find helpful and unhelpful

2. Questions that ask about what factors they found most helpful, and least helpful while in the sex industry and after exiting the sex industry
3. Questions that ask about longevity and commitment to restoration as well as potential barriers to their achievement of their goals
4. Questions that could help professionals better identify and/or help minors and adults who are victims in the sex industry

Participants then filled out a short demographic survey either in person or over the phone that was kept with the taped recording and only had the participants' number on it (See Appendix B: Demographics Questionnaire). This information was used to better understand the nature of the population that will be participating in the study. Participants were then invited to meet a second time to go over the transcripts of the recorded interview in order for member checking to take place. One of the three participants agreed to meet a second time, and another participant had viewed the transcript of her interview electronically, and approved it.

Analyzing Data

All interviews were tape recorded. Each interview was transcribed, and then analyzed by a research team (co-authors of this paper). Analyzing of data was done by a combined approach of Braun and Clarke's (2006) thematic analysis and Gilligan and colleagues' (n.d.) Listening Guide. Thematic analysis "is a method for identifying, analyzing and reporting patterns (themes) within data" (Braun and Clarke, 2006, p. 79). The authors followed Braun and Clarke's (2006) six phases of thematic analysis: 1) familiarizing one's self with the data, 2) generating initial codes, 3) a search for themes, 4) reviewing themes, 5) defining and naming themes, and 6) producing the report. The Listening Guide focuses on the voices of the participants by "providing a way of systematically attending to the many voices embedded in a person's

expressed experience” (Gilligan, et al. n.d., p. 157). The author followed the second step of Gilligan’s et al. (n.d.) Listening Guide, *I Poems*, which focuses on the voice of the “I” to focus on the participant’s first-person voice, and to hear how the participant speaks about themselves. This is significant to the study to ensure that the authors maintain an essentialist/ realist approach to the data that Braun and Clarke (2006) describe as theorizing motivations, experience, and meaning in an honest way due to the assumed relationship between meaning, experience and language.

Initially, the first author reviewed demographic characteristics of all the participants who were interviewed and then created a description of participants. All authors then familiarized themselves with the data by reading each of the transcripts for each participant. Then the first author went through the transcripts and underlined every first person “I” within the text and any accompanying verbs or seemingly important words and then developed a sequence of the “I” phrases as they appeared in the text on a separate document forming the *I Poem* (Gilligan, et al. n.d.). The first author used the I Poems to better understand the first-person perspective of each participant, and kept this in mind when writing the final report.

Next the first and second authors generated initial codes from all the transcripts. These co-authors met weekly to review initial codes and to determine relevant themes (Braun and Clark 2006). The first and second authors held an open discussion to select the appropriate label for themes. Individually, the first and second authors reviewed all transcripts to categorize quotes within each of the themes previously agreed upon. In a final meeting, the first and second authors conducted a review of the data and themes. Also, findings were discussed by all authors and analyzed for internal homogeneity addressing the question of how service providers can better help and aid victims who are exiting the sex industry, as well as survivors who are the path to

restoration. Finally, themes were checked for external heterogeneity making sure that each theme is distinct from the others. After themes and quotes were selected, the first author took a theme and wrote the section referring to that theme to maintain consistency. Finally, the co-authors read and revised the manuscript to ensure fluency.

Chapter 6 - Results

Qualitative Analysis of Results

After reading the interviews, the research team separated the data into nine themes. These included: reasons for leaving the sex industry, factors that were helpful while in restoration, factors that were not helpful while in restoration, factors that were helpful while in the sex industry, factors that were not helpful while in the sex industry, perceived barriers to completing restoration, motivators to completing restoration, identifiers for victims of sex trafficking, and advice/ implications for professionals.

Reasons for leaving the sex industry. Two sub-themes emerged in all interviews under the category of “reasons for leaving the sex industry” The subthemes included: “the situations they were in became too dangerous” or they were wanted to get off substances”. Participants shared that they felt that they found themselves hitting “rock bottom” and that they felt stuck in a world where their lives were in danger. One participant shared, “My life was threatened by the guy I was running with...” While another shared that, “Being in the situation that I was in, it was dangerous and it became something that I didn’t want to do.”

Along with being in danger, all three participants felt that their substance abuse and addiction was not only contributing to their desire to leave the sex industry, but also contributed to their desire to stay in the industry. One participant’s testimony made it especially clear that addiction is what kept her trapped in the life of the sex industry, and also how a key element to getting someone off the streets and into restoration is first by detox from substances.

I really think detoxes would be so beneficial, because there's a lot of people that stay in bad situations, because they're addicted, their abusers know that, and they use that against them. They're stuck and they're also, it's hard to explain. It really feels like you're

trapped. I sometimes wanted to go to my family so bad and I felt like I was, I couldn't. I don't know how to, it was like being chained. I wasn't physically chained down, but it was like I felt like I couldn't run away, I couldn't get away.

Factors that were helpful while in restoration. Focusing on the services that were helpful while in restoration, there were four main sub-themes that included; 1) therapy, 2) having services provided at no cost as well as financial help, 3) services that focused on rehabilitation to a more independent way of living, and 4) social support.

Therapy. The first thing every participant shared that was helpful was the therapy they were receiving, even though they didn't want to face what they were feeling or had gone through, but as one participant put it, "...how to deal with the inside and the PTSD..." was one of the most helpful aspects.

Having services provided at no cost, as well as financial help. Another element was having services such as housing, medical care, and financial support to get a driver's license was very beneficial. One participant described how these were beneficial in that they allowed the participants to focus fully on their rehabilitation and restoration by removing financial stressors. One participant reported, "Having a place to stay and not worry about much of everything and being able to focus on myself and get myself where I need to be" was very helpful.

Services that focused on rehabilitation to a more independent way of living. This ties into the next sub-theme, where participants described specific services that helped them get to a more independent and sufficient way of living. These included: having transportation to where they needed to be, gaining a driver's license, having a job apprenticeship, and having a chance to go back to school. For example, one participant stated, "So, they really do have, like try and help

you get a job, and get started and get going.” Participants also made it clear that they had a choice with these services as one describes how she chose what would be the best plan for her,

Yeah, well I mean the apprenticeship, that was given to me but I would rather get my high school diploma and also my trade so that's why I'm at school. I'd rather do that than just jump right into an apprenticeship.

It is apparent in her words that she, along with the others, got a chance to plan for their future once they were removed from the sex industry.

Social Support. Finally, social support seemed to be the biggest factor that was helpful while in restoration. This social support was made up of their mentors, roommates, the leaders of the restoration facility they were at, and even friends outside of the restoration facility. One participant described it as, “It's like a new family.” It became apparent that it is important that the social support needed to be accessible continuously while in restoration, as one participant responded to a question about what was most helpful while at the restoration facility, “Their support. It don't matter if it's 3:00 in the morning, if somebody's having a craving or an inkling to go do something, you can call them. They're basically walking with us through our journey to restoration.”

Also, having a positive social support that was outside of the restoration facility was important as one participant described her relationship with a friend she had before coming into restoration,

I can talk to her about anything, and she'll listen or give me pointers, just basically listen... It's more, because I can actually ... Before, she wouldn't agree with me on the decisions I was making, and now she's very supportive on the decision I've made to get out of the sex industry and stay out.

Factors that were not helpful while in restoration. Participants described how a lack of social support was a factor whether it be from mentors or professionals that they interacted with. One participant had described that the first time she tried to leave the sex industry, about a year before she came to the current restoration facility, she tried out a substance abuse detox facility that was hours outside of the city in which she was working. As you can see, she reported that the lack of patience and support was what led her back to the life in the sex industry.

...but I went in and the very next morning, they needed me up right at six and it was a program, so you can't smoke cigarettes and just ... They tore all my cigarettes and took them away. They said I have to ... I was trying to get in the shower, but somebody was in the shower, and so I kind of laid down on the ground, because I had no energy. Then I was responsible to be alert. They're like, "We're going to need you alert, taking notes," because they were doing classes and stuff. I couldn't do it, so I had to leave ... I had nowhere to go because I had left my city to come there. Then, they kicked me out because I wasn't able to ... I mean, I kept laying my head down. I kept falling asleep. I was sick. If they could have given me even maybe three days at the very least...a grace period... It would have saved me about another year that I stayed out there.

Factors that were helpful while in the sex industry. It was important to look at any factors that the participants found helpful while in the sex industry before they made it to restoration in order to gain an understanding of what support they may or may not have had. Two of the three the participants stated that they either did not use any formal services, or did not find any services helpful. One participant described that there were services for minors that she knew about, but couldn't use them because she didn't feel they would be accessible for her. Another stated that, "I didn't have nobody but me..." making it clear that she had to rely on herself while

in the life. Lastly, one participant found a detox treatment facility helpful in getting her on the right track “...there were people pointing me in the right direction from the [detox treatment facility] ...”

Participants also described their informal social supports as being helpful and also unhelpful at the same time. These sources included their friends, traffickers, clients, or industries that contributed to the sex work. For example, one participant found the motel she worked at as helpful to her finances as she stated, “The motel would let me wait to pay them sometimes...” One participant shared that even though she had a friend she could trust, she didn’t always rely on her because, “I didn't care to call her very often when I was in the motel, doing what I had to do.” Another participant described that there was someone who was a mentor to her while she was on the street. She reported that the mentor

...would like just show some love, or maybe would be available to take...like pick us up or hygiene gift bags. I thought that was nice, and they gave the opportunity if...there were several times where I had to call her...

Participants also reported that their boyfriends (a.k.a. traffickers) and clients (a.k.a. johns) were also helpful, while at the same time they described them as not helpful. One participant described the cycle she found herself trapped in while in the sex industry between relying on her boyfriend and/or clients, and then needing to get away from them. As you can see with the I poem below, you can hear how unsettled she was:

*I knew no one else was going to
I was fighting with my boyfriend
I needed a place to stay
I have measures of trust to certain people.*

I never could trust anyone 100 percent.

I could go with the person that I trusted 13 percent, is going to be safer than the person that I trust 10 percent.

Factors that were not helpful while in the sex industry. Participants reported that they found the police, other girls they worked with, and as mentioned before, people they associated with in the business such as drug dealers, traffickers, and clients were what they described as least helpful. One participant described the girls as seeming like they have your best interest at heart, but then they soon realized they don't. Another participant described how she found herself in a dangerous situation at the motel she was working at with her boyfriend, and how the police didn't help in that situation,

I had the office call the police because the guy I was running with held a knife to my throat and was pushing me up against the wall and being verbally abusive, yelling, screaming, all kinds of stuff. They called the police. The police came out, and they didn't arrest him. They didn't even stay there while he gathered his stuff. They let him stay there to gather his stuff while I'm still there.

She went on to say how after that she felt she couldn't rely on the police, and stated how she felt the police look at her and other women in the sex industry,

A lot of police officers look down on women that's out there doing it, and I think they just need to ... sometimes we do it because it's not our choice. When somebody like myself calls the police because somebody holds a knife up to your throat, and the police don't do nothing about it, I think...

Participants described how their dealers, boyfriends, and clients weren't helpful in the sex industry. They felt threatened, degraded, and mistreated by those they were involved with. One

participant described how at times she had no choice but to take part in the sex industry due to threats to her family,

Sometimes people did scare me or manipulate me though, I would feel like something was going, tell me something was going to happen to my kids or my family or something. I wouldn't want to bring any trouble or drama to my kids, so I just stayed away...

Perceived barriers to completing restoration. When asked about the barriers to completing restoration, participants stated that there are financial barriers, influences that might lead them to relapse on substances, and a lack of support from professionals.

Financial barriers. One participant stated,
...[I] don't save money very well. One of the things I'm scared of when I graduate, because I'm staying in [current city] the cost of living here is so high. I'm just afraid that I'm not going to be making enough or having enough to survive out here...

Others reported how quick money was a big contributor to being in the sex industry. One participant stated,

It sucks you up pretty fast. You get used to making the fast money. To get them out as fast as they can, because once you get started and you get used to that money, that's how it was for me. I was all in then.

Substance Abuse Relapse. Participants also stressed that relapsing would send them back to life in the sex industry. One participant stated she would need to stay away from the city in which she had worked, for that would lead her to relapse.

Lack of Support. Finally, the lack of support from professionals or service providers was a barrier to completing restoration. This leads back to the previous example that a participant

shared about how she had gone to detox facility, and due to the lack of patience and support from the staff, she found herself back in the sex industry for another year.

Motivation to maintain restoration. There were two big motivators for participants to complete and maintain restoration; these included their future careers and plans, and being able to reconnect with their children someday. Participants reported, “I would actually like to own my own business,” “I really have thought about maybe opening one of these houses,” and “I probably graduate from college, working in [city of choice] as a psychologist. I’ll be driving my own car, and hopefully living in my own house.” Another participant reported, “I would be, I would love to say probably working at a hospital.”

Participants also expressed a strong desire to be with their children again and that they were hoping to reconnect with them once they are set. One participant described how her children would be the only reason she would leave the current restoration facility, and how she is currently trying to think of how she can get connected with them again as they live with their father in the city she had worked in, stating,

The reasons to leave would be with good intention because it would be about my children, but it could lead to interactions with the people from the street that because my kids live with their Dad in the same city. I hope to not be in the same city

This participant spoke about the pain of the separation from her children she felt while in the sex industry, but now having a chance to talk to them is what is motivating her to continue her restorative work,

I wasn't with them when I was living that lifestyle, but also was being under [influences of substances], what do I say? Now I don't have the substances and I still, I can't be a

part of their lives the way I'd like to be. I know that that's just for this time period. I've talked to them on the phone and we text, or sometimes we video chat."

Ways services providers could better identify victims. It was vital to understand from the participants' perspectives what identifiers could help service providers better identify victims and get them services sooner rather than later. Participants identified that for both minor and adult victims that promiscuity, withdrawal from loved ones and friends, hanging around hotels and motels, and hanging around with older men were the best identifiers they could offer. One participant described how withdrawal from the people who care about them should also include those who are not in school, "...from other people, they withdraw. Maybe scared. Maybe calling their pimp or their guy they're running with, their boyfriend, when he's being abusive, really abusive, especially if the guy's a lot older than them."

Another participant described how, when she was in the hospital for overdosing, and the social worker who got her connected with the current restoration facility had an idea of what she was involved in given that she was living out of a motel, "I was homeless, living out of a motel. Maybe she had an inkling that I was in it. I'm not sure."

When it came to being with the older men, participants talked about how they were scared with their boyfriends or traffickers due to the abuse they experienced. Therefore, one way to identify victims of trafficking is to look for signs of intimate partner violence. One participant stated, "Sometimes adults fall in love with the guy that they're running with, too, so they could call him their boyfriend. I guess we can be scared, too, but only scared because of what might happen to us."

Advice/ implications for professionals. It was also important to get advice from the participants about how service providers can better help victims get to, complete, and maintain

restoration. Participants stressed the importance of service providers being compassionate, supportive, and patient, as well as, removing victims from the situation where the trafficking was taking place, and having and providing resources were what would be the most helpful to victims. One participant stated,

Be compassionate and very supportive, because a lot of us girls that is in it doesn't know how to get out safely, or want to get out but don't want to get out, because they don't want to disappoint the guy. I think there needs to be more safe spots for women to go to if they need to go."

While another recommended, "Don't listen to the person and just blow it off. To actually listen and then determine what kind of support they can give..."

It appears that support also requires a service provider to give a lot of time, for it takes time to change a life, and one service provider can't do it alone. Victims, when exiting the life, need holistic and inclusive care. One participant makes this clear by stating, "There's a lot of people that give their time and they're not expecting anything, and they're not getting paid. Sometimes when you're dealing with services, it's just a job."

Overall, showing love and patience leads to survivors feeling like they are not alone and that they have another way to live their lives, as a one participant alluded to, "Just show them a lot of love I guess, show them that someone cares and that they're so much more than what they're putting their selves out there as."

Participants also stressed that being removed from the city they were working in was incredibly helpful to their restoration. This ties into the theories of restoration mentioned previously. For example, Hartig, et al. (2003) describes in the attention restoration theory, being removed physically and psychologically is what is necessary for actual restoration to take place.

All the participants discussed how being away from the city they were working in is what is most helpful. One participant stated,

They need to offer them a safe place to go to instead of sending them back home. That way, they can get back to ... Like the [current restoration facility] does. It transitions you back into real life. That's why this program is 9 months to a year, because if it was only 3 to 6 months, a lot of women ain't going to be healed from all the trauma and stuff that we go through in the sex industry.

Another reported, “Somewhere where they can transition to get sober and be clean, get some separation from that, to where they can clear their mind a little bit.”

One participant stressed that sometimes victims don't have the resources to get out of the city they are in or are not willing to leave the city they are in, suggesting that there needs to be more restoration facilities all over, and not just in certain parts of the state. She stated,

Find the resources. Just because we started at a house like the [current restoration facility], a lot of people's not willing to move away from their hometown. When you find somebody that is willing to move away from their hometown, finding other organizations outside of [previous city], outside of their hometown, should be an option. Changing people, places, and things can sometimes help women stay clean and sober, and get out of the sex industry.

Lastly, the participants reported that service providers need to be knowledgeable of resources in their area, and be able to promote them or provide them. It was also noted that the resources be promoted more than once, as one participant described,

Yeah, like reaching out without anyone expecting an immediate response to that reaching out. Sometimes it just has to soak in. If there's a number to call or a flier, so you know

that there is someone to call. Somebody will. When things ... Hopefully things don't get real bad, but if something ... When things get bad or something happens, they'll remember. They'll have some alternative. A lot of times people that have been in my shoes, they're not going to trust it at first. They'll have to ... What do they call it? Milking it.

The same participant also suggested having resources advertised in more accessible places such as public bathrooms, laundromats, or parks. She found her way out by finding a card that advertised a safe place,

Okay, I'll give you an example. One day I was at the park, and just, there were these little cards, they were all over the bench that said, "For a safe place." [gas station] was a safe place. One time when I was in danger ... I would never just go into [gas station], because it's a public place, but I can remember as all those cards that said [gas station] was a safe place. I went to [gas station] and I'm like, I didn't know really what to do, and what to say, but I was like, "I have a card that says that this is a safe place, and so I'm here, is there an officer or whatever?"

Chapter 7 - Discussion

Results of this study supports previous research in that participants do experience psychological coercion that keeps them in the life of sex trafficking as Logan, et al. (2009) stated. One participant explained in the following quote that she did experience her trafficker making threats to her family and loved ones, and how she didn't want anything to come to them.

Sometimes people did scare me or manipulate me though, I would feel like something was going, tell me something was going to happen to my kids or my family or something. I wouldn't want to bring any trouble or drama to my kids, so I just stayed away..."

Also, results from this study support previous research by Wilson and Dalton (2008) and Nixon, et al. (2002) who found that many times it is hard to leave due to an addiction or a lack of finances. It became clear through the results of this study that substance abuse and finances was what kept participants in the sex industry life and also what could lead them back to it.

When looking at the needs of survivors after exiting the life of sex trafficking Chung, (2009), Countryman-Roswurm & Bolin (2014), Hodge (2014), and Yakushko (2009) all discussed the importance of mental health needs being met along with the physical needs. The results from the participants in this study agreed with this as they stated how therapy, detox, substance abuse counseling, and financial support were vital services while in restoration. The same authors also suggested a holistic client-centered form of treatment is necessary for a survivor's restoration process. This ties into the theory on the holistic process of healing which guided this study. This theory looks at how emotional pain and physical pain are tied together, and to relieve both, both must be attended too (Ventegodt, et al., 2003). This was made clear in the results based on how much the participants benefited from many different factors and resources that were offered to them, leading to a better sense of self, as well as sobriety.

Finally, it was found in past research that police officers have a lack of knowledge about human trafficking laws, and that there is a lack of training for police officers across the country on sex trafficking (Farrell, 2014; & Grubb & Bennett, 2012). This was also reflected in the results of this study, specifically by a participant who stated

A lot of police officers look down on women that's out there doing it, and I think they just need to ... sometimes we do it because it's not our choice. When somebody like myself calls the police because somebody holds a knife up to your throat, and the police don't do nothing about it, I think...

Here, one can see that the participant didn't feel like the police in that situation were there for her, and had looked at her as something other than a victim. Thus, police training is still a significant issue that needs attention. Overall, while much of these findings match previous findings, there is new information on how service providers can better help those who are survivors or victims of human trafficking.

Chapter 8 - Implications

Implications for service providers on how to better serve and help victims reach, complete, and maintain restoration are suggested from this research. First, services providers need to recognize when the potential for sex trafficking is occurring. When it comes to identifying, and treating victims a holistic approach is necessary. As the Ventegodt, et al. (2003) theory of the holistic process of healing has suggested, both emotional and physical needs need to be attended in order to get past trauma. Participants made it clear that substance abuse was something that drew them in to the life of sex trafficking, and substance abuse treatment was what helped them get out. To identify victims, it was also clear that intimate partner violence can be a sign to do further assessment on what is going on in the relationship. Finances were another reason to remain in the life of sex trafficking. Not having financial resources, or a means to live, was a driving factor for victims to get involved in sex trafficking. Also, homelessness and living in and out of motels was a sign that sex trafficking could be happening. Finally, a big sign that was continually mentioned being withdrawn from loved ones, peers, and school. Truancy and isolation are signs to take a closer look at what is going on in the life of possible victims. It was also clear that providing a familial-like supportive environment is very helpful in treating victims. Keep in mind that this supportive environment should be separate from the environment in which victims were sex trafficked according to Hartig, et al. (2003) attention restoration theory. Getting victims connected to mentors, others who are going through the same experiences, as well as leaders who can give time to help is what helped participants stay on track to reaching their goals.

Next, participants emphasized that providers need to be aware of the resources in their area and what resources are affordable and accessible for someone coming off the streets. Also,

service providers need to promote their resources in accessible ways that are public and even provide portable materials such as small business cards. Service providers also need to be persistent in promoting their services, for it was clear that victims need time to believe that there is help for them, and need time to think about taking that step to change their life.

Next, participants emphasized that it is important that service providers are compassionate, patient, and supportive to all the people they serve. A victim may not come out and say that they are being trafficked, but having someone who shows them they care, and who allows them a space to come off the drugs they've been on, as well as time to transition from the life of sex trafficking to a more stable life is critical. Participants also reported that they could tell when those who were supposed to help, didn't want to help. It is important to keep this in mind, for one's attitude could lead a victim to believe that there is nothing better for them outside of sex trafficking, or that they aren't worth anything more. One participant talked about how leaving the life of sex trafficking was a sacrifice in and of itself, so being understanding and supportive is key. She reported,

Yeah, I know, because it feels weird now. Well, it's hard to, a person that wants to submit to all the ... It's a great opportunity, but it's also a sacrifice. Even though it's for the better, it just ... You get comfortable where you are even though you don't like it, and even though you're miserable. It's comfortable, it's what you know, and so to be under the rule of somebody for the sake of getting help and sometimes until things get real bad, you're willing to just suck it up. That would mean getting out of your comfort zone..."

Another important implication from this study is that treatment can't be done alone. The participants at the restoration facility utilized substance abuse counselors, therapists, a job apprenticeship, financial counseling, church leaders, and mentors. It was also key that the

participants had a chance to get clean from the substances they were using in order to fully become involved in their restoration work. Restoration also needs to take place in a different environment than the sex trafficking took place in, for being in the same environment was a factor that led to relapse or quitting the restoration efforts. The attention restoration theory (Hartig, et al., 2003) emphasizes the need to have the one who has experienced distress removed completely (mentally, physically, and spiritually) from the stressful environment in order for true restoration to occur. This study supports this theory. Lastly, it is critical that finances for a restoration facility are necessary to expand and become more accessible. The current restoration facility in this study can only serve up to eight individuals at a time.

Finally, it is clear that participants in this study had a good idea of what could knock them off the course of restoration, as well as what is driving them to stay on course. Substance abuse, being back in the city where they were sex trafficked, as well as a lack of support from service providers, loved ones, and peers were the biggest potential barriers to restoration described by participants. However, being able to plan for their future, and the idea that they can reconnect with their children is what is driving them to succeed. Currently, participants are finding success in their efforts, proving that the current restoration treatment they are getting is really changing their lives

Implications for Family Therapists

This study has many implications specifically for family therapists. First, family therapist need to be sure that they have an understanding of human trafficking, and that they can see how it is a systemic issue and not an isolated problem. This understanding can help family therapists to recognize when a client may be experiencing risk factors for trafficking. This awareness could also help them better treat the client, get them connected to other services, and/ or identify if the

client needs more help than therapy alone. For example, if a family therapist begins treating a client for substance abuse and use, having the knowledge about trafficking can lead a family therapist to ask more questions and get an understanding of the client's background to be sure that they are not being trafficked or are in situations where trafficking could be occurring. It is important to also note that this training should begin in our training programs in the universities. Human trafficking can easily be tied to other trauma informed curriculum that is already covered including intimate partner violence, child and elder abuse, and sexual assault.

Family therapist also need to become aware of the differing resources in their communities and what their community offers. Therapists can be more helpful to clients who are potentially being sex or labor trafficked who may walk into a family therapist's office to deal with depression, if the therapist is aware of risk markers. When family therapists learn about their client's possible unsafe situations or other treatment needs, the clients can receive more help to attend to more problems that a victim of human trafficking faces. It has been made clear through this study that one person can't treat this population alone, and a victim or survivor doesn't have just one treatment need.

Finally, along with the above-mentioned implications for service providers, and family therapists specifically, family therapists need to be finding out what community efforts are being used to eradicate human trafficking in the communities they are working in. Family therapists need to have a seat at the table so to speak, in order to become more educated and help educate others about human trafficking, and to become aware of what others are doing to address the issue, and what they are doing to help victims or survivors.

Implications for Policy

This study also had implications for legislation and policy makers within organizations that are serving this population. First, this study supported previous research that found that police officers and other law enforcement personnel need more training and a better understanding of what human trafficking is, and how to treat both adult and minor victims of the crime. It is advised that basic trauma informed practices can be implemented into protocols of how to handle situations involving trafficking. It is clear that this topic is new and it is often a struggle for police departments and individual officers to change their whole mindset to decipher between victim and criminal, therefore more effort needs to happen on how to make this transition easier for police officers.

In regards to those who are not law enforcement but who could possibly be working in with this populations, and are licensed professionals such as social workers, therapists, psychologists, medical personnel, advocates, and substance abuse counselors, there needs to not only be a mandated trauma informed training, but also training on human trafficking, and knowing what the risk factors are to help identify victims, as well as victim and survivor treatment needs. It also should be a part of the policy that at least one person from each organization can be a part of any community effort to combating human trafficking, so that their services are being advertised, and so that they can contribute on how to eradicate the problem in their community.

Finally, it was clear in past research and in the current study that there are many things happening to help the youth who are affected by the horrors of human trafficking. However, there seems to be a lack in recognizing adult victims, and giving focus to adult victim needs. It is clear in previous research that adult victims were groomed for trafficking when they were minors and most even started being trafficked as minors. For some reason, they aren't able to receive

care or treatment, or don't find a way out until they are adults, and even then, a lot of the adult victims seem to find themselves in the court and legal system for other related crimes before they are seen as victims and are offered help. Currently, it seems that when a trafficked child turns 18, the number of services that are advertised or are there for these victims diminishes. Legislatively, this needs to be discussed and addressed.

Chapter 9 - Limitations

Some limitations to consider include that this study only included three participants who all came from the same origin city where they were sex trafficked. Participants were also similar in their demographic factors, making it difficult to generalize the information to all victims who have been sex trafficked. Participants all came from the same restoration facility making it difficult to compare to other restoration facilities across the country. This restoration facility also is the only one of its kind in the surrounding area, making it equally difficult to compare treatment styles of different facilities. Finally, data was collected over a period of five months, suggesting more time would have possibly allowed for more participation.

Chapter 10 - Future Research

In order to expand on this research, it would be helpful to have a larger sample of participants, from different age groups, different genders, and from different restoration facilities across the country. It would also be beneficial to interview current participants after they have graduated from the current restoration program to see how well they are maintaining their restoration success, while also collecting data from other graduates as well.

Chapter 11 - Summary

Even though only three females who were seeking restoration from sex trafficking participated in this study, participants' feedback provides insightful perspectives on what service providers can do to identify victims, provide support while victims are involved in sex trafficking and provide assistance in the restoration of the lives of survivors of sex trafficking. Sex trafficking happens all over the world, and is kept active by the fact that it is an underreported and misunderstood crime in all countries, making prosecution of traffickers difficult (Laczko & Gramegna, 2003). Results from this paper provide guidance for service providers who want to better serve victims of this crime. The following I poems from two different participants really highlight the change they now see in themselves due to their restoration. With the first you can hear her sense of transformation in her self-talk.

I kind of lost myself back then

I know who I am

I mean

I'm a hard worker

I'm responsible

I'm beautiful

I'm worth more than I was putting myself out there to be

The next participant's I poem speaks to the changes she now sees in her-self as well as the changes she is continuing to actively make. One can hear her new found sense of security in her self-talk.

I'm more confident

I can accomplish the goals I have set for myself

I'm closer to God.

I use my

I guess

I use my support systems

I realize that I don't need a man in my life

I'm clean and sober

I have a job

I'm ready to graduate.

I'm ready to speak about my story

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Appendix A - Qualitative Research Interview Questions

Questions that ask about how they made it to restoration, and what services offered that participants found helpful and unhelpful:

1. What led you to come to [current restoration facility] and exit the sex industry?
2. Are there services that you find helpful now that you have exited the sex industry?
3. What services have you utilized and found helpful at [current restoration facility]?
4. What services have you utilized and not found helpful at [current restoration facility]?
5. What services have you been offered that you did not choose to use at [current restoration facility]? Why Not?

Questions that ask about what services they found most helpful, and least helpful while in the sex industry and after exiting the sex industry:

6. Were there services that you found helpful while in the sex industry?
7. Can you think of any services or forms of support that weren't offered, that could have been helpful to you while you were in the sex industry?
8. In your life, before leaving the sex industry, who were the people that you remember that treated you kindly? Not kindly?
9. Who or what was most helpful to your overall well-being while in the sex industry? Least helpful?
10. Now that you have exited the sex industry, who or what is most helpful to your overall well-being? Least helpful?

Questions that ask about longevity and commitment to restoration as well as potential barriers to their achievement of their goals:

11. As you continue this process of restoration, if something were to get in your way of where you want to be, what would it be?
12. Five years from now, if I were to meet you again, where would you be? What would you be doing?

Questions that could help professionals better identify and/or help minors and adults who are victims in the sex industry:

13. What are the signs a professional (e.g., police officer, teacher, school counselor, doctor) should look for in identifying minors who might be involved in the sex industry?
14. How do you think the signs that a person is involved in the sex industry would differ if the person is an adult?
15. What advice would you offer to the professional who wants to provide support to these minors who are just becoming involved in the sex industry?
16. How would this advice differ if the individual in the sex industry was an adult? What advice would you offer to the professional who wants to provide support to adults in the sex industry?
17. What is the biggest difference you can think of between the person you are now, someone not in the sex industry, and the you who was in the sex industry?

Appendix B - Demographic Questionnaire

Please fill out the following form.

1. Race _____
2. Age _____
3. How many years were you involved in the sex industry? _____
4. How long have you been at The Homestead Ministry? _____
5. Is this the first restoration facility you have been to? _____
If no, how many have you been to before? _____
6. Do you have children: yes or no? _____
7. Circle all that apply:

a. Had experiences of:

- Depression
- Anxiety
- Post-Traumatic Stress Disorder
- Hostility
- Low Self-Esteem
- Suicidal Ideation,
- Self-Harm,
- Substance Abuse

If circled substance abuse, which substances?
