



Human Trafficking: Impact & Clinical Needs

**Trauma, Substance and Self Harm.
Cultural considerations**

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Human Trafficking: Impact & Clinical Needs

Stats: Global/UN Report and US. Dept of State

- 12.3 million adults & children in forced labor, bonded labor, and forced prostitution around the world of which 56 % are women and girls
- \$32 billion annual trade for the traffickers
- 49,105 victims identified worldwide, a 59 percent increase over the last reporting year (2008)



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- Prevalence of trafficking victims in the world: 1.8 per 1,000 inhabitants (in Asia and the Pacific: 3 per 1,000)
- 4,166 successful trafficking prosecutions in 2009, a 40% increase over 2008
- Countries that have yet to convict a trafficker under laws in compliance with the Palermo Protocol: 62. Countries without laws, policies, or regulations to prevent victims' deportation: 104
- 23 countries received upgraded rankings in the 2010 TIP Report; 19 countries received downgraded rankings



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Sexual Abuse: Trauma, Clinical Issues

- Long-term effects of child sexual abuse include: depression, self-destructive behavior, anxiety, feelings of isolation and stigma, poor self-esteem, a tendency toward re-victimization, and substance abuse. After effects can be categorized into six groupings:
 1. Emotional responses/affect regulation,
 2. Self-perceptions/body image and self esteem,
 3. Physical effects/hyper arousal, sleeping disorders,
 4. Sexual effects/re-traumatization and discomfort
 5. Interpersonal relationship/functioning; and
 6. Social functioning.



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Physical Symptoms & Process: Clinical issues

- Chronic physical distress with anxiety and hyper awareness versus a stable “resting state” has a lasting impact, including:

Dissociation, PTSD, and Sleeping disorders.

- Other chronic physical and medical issues, such as enuresis, substance addiction, and abnormal eating pattern.



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From Resiliency Research: PTSD

- if being part of a family/peers/friends or group going through the trauma together; not being separated from support system.
- experiencing a calm, non-chaotic reaction from one's immediate family or adult caretakers; receiving immediate, on-site treatment.
- identifying a clear “enemy” so there can be periods of non-stress and relief from constant fear of identified aggressor.



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Clinical contact: self introduction, responses to physical environment and self soothing.

- Cognitive Behavior Therapy (PTSD, Substance Abuse, Self Harm); grounding, problem solving with triggers, limit setting in relationships, affect regulation, and assertiveness training.
- Narrative Therapy (PTSD, Recovery from Sexual and Domestic Abuse); self definition, self empowerment and authorship for future.
- Milieu Therapy, Group Supportive Therapy.
- Creative Therapies (Art, Movement, Theatre).



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Stats: Global and US State Dept.

- <http://www.unodc.org/unodc/en/human-trafficking/index.html>
- <http://www.state.gov/g/tip/rls/tiprpt/2010/>
- <http://www.state.gov/g/tip/index.htm>
- http://www.humantrafficking.org/combat_trafficking/reintegration/
- <http://www.humantrafficking.org/updates/865>

Clinical and Outreach Resources

- http://www.omh.state.ny.us/omhweb/human_trafficking/brochure.html
- <http://www.nyc.gov/html/endht/html/how/professionals.shtml>

Legal

- <http://prostitution.laws.com/human-trafficking>