Expanding Our Reach
Equipping North Carolina’s Rape Crisis Centers to Serve Survivors of Human Trafficking

A collaborative project by:

North Carolina Coalition Against Sexual Assault (NCCASA)
CrossRoads
Expanding Our Reach

Equipping North Carolina’s Rape Crisis Centers to Serve Survivors of Human Trafficking

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Introduction and Foundations

Welcome to *Expanding Our Reach: Equipping North Carolina’s Rape Crisis Centers to Serve Survivors of Human Trafficking*. This manual brings NCCASA’s decades of expertise and advocacy in the fields of sexual violence and human trafficking together with Crossroads’ strong human trafficking direct services program for in-depth guidance on incorporating services for survivors into existing rape crisis center programs.

This section of the manual gives an introduction to the handbook, its aims, and associated training, and includes:

A. NCCASA, Alamance for Freedom/Crossroads, and Human Trafficking  
B. Handbook Objectives  
C. Webinars and Training

**Centering of Services:**

NCCASA as a statewide coalition uses a social justice framework. Our work is done from a strong intersectional, social justice perspective. By centering our work around marginalized communities, everyone is served. Adapting services and policy to eliminate discrimination and disparities in service delivery is a priority.
I. Introduction and Foundations

For those of us who work in the field against sexual violence (SV), the movement has consistently given survivors a voice and designed and established survivor-centered services to address the impact of rape on individuals. Advocacy activities involve working on behalf of survivors in the criminal justice system and in communities; collective action to change rape laws to benefit survivors and hold criminals accountable; improving law enforcement, medical and court procedures; and changing public perceptions of rape and its victims; researching rape’s history; conceiving and developing rape theory, which defines rape as a human rights and social justice problem, rooted in cultural and societal norms.

The SV movement has struggled at times to embody intersectional ideals in outreach, client services, messaging, and internal operations. We engage in the constant work of organizational and individual self-reflection, and yet seeking and incorporating survivor voices have consistently been the priority. This truth is reflected in the fact that many SV agencies began as a second phone line in someone’s home, with a handful of survivor-friends rotating shifts answering calls, offering support, and holding space for empowerment and continual re-empowerment for survivors of sexual violence.

Unlike the movement against sexual violence, which emerged from the collective “ENOUGH!” of those who’d experienced its harms firsthand, the history of the movement against human trafficking has followed a different arc. Our country was founded during a time in which forced labor was legal. The Mann Act of 1910 (also called the “White Slave Traffic Act”) heralded a time of fears that white women’s presence in the public sphere would lead to their vulnerability to sexual harm, especially by Black and foreign-born men. The 2008 National Public Radio article “The Long, Colorful History of the Mann Act” notes:

*Enacted during a time of great change and "moral panic," the Mann Act was originally designed to combat forced prostitution. The law, however, has been applied broadly over the years and, critics say, used as a tool of political persecution and even blackmail. In the past century, thousands of people have been prosecuted under the Mann Act, including celebrities such as Charlie Chaplin, Frank Lloyd Wright, Chuck Berry and Jack Johnson.*
The renewed vigor against trafficking rose with the passage and subsequent renewals of the Trafficking Victims Protection Act (TVPA) in 2000. Unlike the movement against sexual violence, the movement against human trafficking originated from a criminal justice impetus. The framework was largely developed by those who were not survivors themselves but felt passionately about aiding survivors. Frequently framed as “rescue and restore,” these models focused on identifying and “rescuing” survivors being actively trafficked, and providing them with services to “restore” them to “wholeness.” The anti-trafficking movement is shifting toward a public health framework that emphasizes personal and environmental influences rather than only criminal justice causes and solutions, and that recognizes both personal and systemic trauma make “rescue and restore” problematic as a driving goal. The movement has increasingly recognized the importance of informing this work with survivor voices and insights. Incorporating diverse survivor perspectives and experiences in all aspects of programming will ultimately improve the quality of the movement’s work to end human trafficking.

With this in mind, we are pleased to provide this training manual to our member agencies, whose survivor-centered, empowerment-based approaches serve as a model for forward momentum in the movement to end human trafficking. Your dedicated staff and volunteers are on the frontlines of the movement to prevent and respond to all forms of sexual and gendered violence. While many perceive the movements against human trafficking and gender violence to be separate but parallel, human trafficking is deeply intertwined with sexual violence and is thus firmly within the purview of the movement against child sexual abuse, rape, sexual assault, and all forms of sexual violation.

**Human trafficking is a sexual and domestic violence issue.**

You, our member agencies, are the experts on sexual violence in your communities, and sex trafficking is a form of sexual violence. You are the sources people look to for support, advocacy, and compassionate listening as they navigate the overwhelming process of moving through trauma. You help clarify charged issues for your communities and spotlight those that are frequently forgotten, all the while honoring all survivors through trauma-informed, culturally-sensitive, empowerment-based services. And as such, you are in a unique position at the forefront of North Carolina’s response to human trafficking and to those who have survived its violence.

Through this manual and its accompanying online and in-person trainings, we hope to support you in building on your foundational skills – outreach, prevention, resources, referral, advocacy, crisis intervention, community collaboration, and case management – so
that you can confidently bring the survivor-centered perspective that has always been the impetus behind the movement into your work with survivors of human trafficking. We hope to help you identify and build capacity around any gaps in your current knowledge and skills, to learn how to network with your local regional response teams, and to better understand the movement against human trafficking so that you can navigate it more effectively and discover your place within it.

A. NCCASA, Alamance for Freedom/Crossroads, and Human Trafficking

The North Carolina Coalition Against Sexual Assault (NCCASA) is an inclusive, statewide alliance working to end sexual violence through education, advocacy, and legislation. NCCASA was organized in 1986 to address statewide issues surrounding sexual assault, and its first annual retreat of local rape crisis center advocates was held later that year. Since its official incorporation in 1988, NCCASA has become a powerful, statewide non-profit organization that works on behalf of its members on a local, state, and federal level. NCCASA provides support, information, advocacy, and education for North Carolina’s rape crisis programs, college campuses, organizations individual members, and the general public. NCCASA also remains a legislative change agent by advocating for important pieces of legislation that affect local rape crisis programs, the Coalition, and, most importantly, survivors of sexual violence.

NCCASA has worked for and implemented many improvements for victims of sexual assault and human trafficking, including, but not limited to, co-founding the North Carolina Coalition Against Human Trafficking (NCCAHT), formerly RIPPLE (Recognition, Identification, Protection, Prosecution, Liberation, and Empowerment) with the North Carolina Attorney General’s Office circa 2005. Since then, NCCASA has been incubating NCCAHT by remaining an active member, being instrumental in the development of a North Carolina-specific manual on human trafficking, conducting trainings on human trafficking at workshops and conferences across North Carolina for victim services providers and law enforcement, providing information and educational materials on human trafficking to over 75 rape crisis centers across the state, partnering with the North Carolina Governor’s Crime Commission to develop Sexual Assault Response Teams across the state, providing statewide trainings to Sexual Assault Nurse Examiners (SANE), and providing human trafficking resource packets to a variety of victim services and law enforcement agencies throughout North Carolina.

As a lead victim service provider for sexual assault and human trafficking survivors in North Carolina, and as a co-founder of the North Carolina Coalition Against Human Trafficking,
(NCCAHT), NCCASA assists in coordinating and monitoring case management and legal services, and collaborates with law enforcement and U.S. Attorneys to assist victims and pursue prosecution of traffickers. The North Carolina Coalition Against Sexual Assault also closely collaborates with numerous victims’ service agencies to ensure that victims of trafficking are identified and assisted as quickly as possible. These agencies include The Salvation Army of Wake County, Legal Aid of North Carolina, the Pitt County Coalition Against Human Trafficking, and the regional response teams in North Carolina. NCCASA regularly partners with the North Carolina Human Trafficking Commission (NCHTC) to support consistency of services across the state’s direct service providers and to provide training and technical assistance as needed statewide.

Since launching its anti-human trafficking programmatic work, NCCASA has assisted victims of human trafficking throughout the state of North Carolina by improving North Carolina’s victim response efforts through coordinating and collaborating on efforts between federal, state, and local partners and stakeholders. NCCASA has also provided training and technical assistance to hundreds of allied professionals under this initiative. We have partnered with the University of North Carolina at Chapel Hill on initiatives such as Teach2Reach, a project developing a sex trafficking prevention curriculum for use in student education, as well as Project NO REST – a statewide project focused on bringing awareness to and ending the trafficking of children.

As the North Carolina anti-human trafficking movement was gaining momentum, two friends, Liz Leon Burleigh and Courtney Dunkerton, planned to visit local Latinx markets to distribute the National Human Trafficking Hotline number in the spring of 2013. This idea led to a small gathering of colleagues in a Mebane coffee shop to discuss the problem of human trafficking in North Carolina and to address the significant gap of human trafficking awareness and victim services. The group, Alamance for Freedom (AFF), incorporated that fall, and met quarterly, inviting the community to participate and share ideas to bring awareness to Alamance County. Courtney and Liz built a strategic coalition of allies and a network of collaborative partnerships around this issue, based on how human trafficking was occurring in the Alamance region.

In 2015 Liz and Courtney developed and facilitated three regional human trafficking awareness trainings for the North Carolina Child Advocacy Centers’ multidisciplinary teams. In addition to this training, AFF provided numerous staff trainings and presentations to agencies such as law enforcement, the Department of Social Services, Elon University, victim service providers, basic law enforcement training cohorts, and school support staff. AFF also participated in research projects and collaborative initiatives with NCCAHT, Triad.
Regional Response Team, Project NO REST, and the NC Human Trafficking Commission. In 2016 AFF received funding from the Governor’s Crime Commission for a direct services victim assistance program. With this funding, AFF joined the handful of nonprofits devoted specifically to human trafficking survivors. AFF became a trusted leader and trainer at statewide conferences and symposia due to their extensive experience of direct service at a time when many communities were just beginning to learn about human trafficking and how to best support survivors.

In 2017, AFF added a Youth Services Coordinator to focus on outreach to at-risk youth by developing a mentoring program for runaway and at-risk youth in Alamance and Caswell counties that offered group and one-on-one mentoring with case management. In 2018 the first victim-centered response protocol for law enforcement was created by Burlington Police Department, Alamance District Attorney’s office, and AFF. In July 2018, to achieve sustainability and enhance victim services, Alamance for Freedom officially merged with Crossroads Sexual Assault Response & Resource Center, adding a Human Trafficking Program to the existing rape crisis and child advocacy center. What began as a volunteer grassroots organization developed into a leading program in the NC anti-human trafficking movement.

Notes on Manual Update

This manual was originally co-authored in 2019 by NCCASA’s Anti-Human Trafficking Specialist, Christy Croft, and Crossroads’ Human Trafficking Program Director, Courtney Dunkerton. At the time of the most recent revision in 2020, Christy Croft is the Prevention Education Program Manager at NCCASA and Courtney Dunkerton is the Anti-Human Trafficking Specialist.

B. Handbook Objectives

This handbook aims to assist NCCASA’s member agencies in strengthening their expertise in supporting clients who are survivors of human trafficking and incorporating trafficking awareness into outreach and prevention programs. While the focus of the handbook is supporting NC rape crisis centers and dual domestic violence agencies, the information presented is applicable across a range of human trafficking crisis response, advocacy, and prevention education programs. The handbook can be used as a stand-alone resource, or as a self-study guide to accompany NCCASA’s training webinars. In-person training is also available; contact NCCASA for more information or to schedule.
Through the use of the information provided in this handbook and the referenced resources, staff or volunteers will be able to:

- Recognize what human trafficking is and its risk factors, warning signs, and dynamics.
- Better understand the needs of trafficking survivors and specific ways trauma may impact survivors.
- Discuss the intersections of sexual violence and human trafficking in both labor and sex trafficking, and recognize common dynamics and language of sex trafficking.
- Envision and clarify the role of the rape crisis center, and its agency, staff, and volunteers, in particular, in human trafficking response and prevention.
- Make informed decisions about language used to describe trafficking, exploitation, and sex work.
- Understand the cultural context in which trafficking happens, and implement culturally-sensitive response and prevention programs.
- Discern how human trafficking prevention and outreach dovetails with existing sexual violence prevention and outreach efforts.
- Build human trafficking knowledge, intervention, crisis response, and referral onto the foundational sexual violence interventions in order to better serve survivors of human trafficking who are also survivors of sexual violence.
- Build collaborative relationships with other agencies to streamline processes for human trafficking survivors.
- Think through and make informed decisions about policy and best practices regarding sexual violence and human trafficking.

C. Webinars and Training

NCCASA will offer online and in-person training opportunities to develop the knowledge and skills covered in this manual. Please check the members’ area of our website for information and updates as these become available, or contact NCCASA to schedule customized training for your region.

D. A Note on Gender

We respect a survivor’s right to identify their own gender, regardless of the gender assigned to them at birth. They will be welcomed by our agencies into the gender-specific spaces in
which they feel comfortable. We understand that some agencies will not be equipped to practice this belief; however, we strongly encourage them to move quickly in that direction. We also acknowledge that there is a wide spectrum of gender-identities and expressions, and we are constantly learning. We encourage agencies to understand that a person’s gender identity and expression is entirely their own and not open for commentary. For simplicity of reading, we have chosen to write our manual in a gender-neutral manner, as survivors of human trafficking can be any gender identity or expression.
Understanding Human Trafficking

Many rape crisis centers are new to human trafficking prevention, outreach, and direct services. Some have been deeply engaged for years, and are on the forefront of the anti-human trafficking work in their regions. Others may be struggling to learn how to apply their anti-sexual violence lens to their work with human trafficking, unsure of the ways in which trafficking work is similar to or different from other rape crisis dynamics, needs, and services.

This section of the manual gives an introduction to human trafficking, and an in-depth introduction to how those dynamics relate to broader sexual violence prevention and response when the trafficking happens within the sex trade. It includes:

A. Introduction to Human Trafficking
   - What is Human Trafficking?
   - What Makes This Definition Tricky?
   - Statistics and Vulnerability
   - Who is Vulnerable?
   - Identification, Doubt, and the Burden of Proof

B. Introduction to Sex Trafficking
   - DMST and CSEC
   - Sex Trafficking Typologies
   - Pimp-Controlled Trafficking Models and Language
   - Choice and Victim-Blaming
II. Understanding Human Trafficking

This section will provide an introduction to human trafficking with a focus on sexual violence that occurs in the context of trafficking. As you consider definitions and language your agency will use, it is important to bear in mind that human trafficking occurs along a spectrum of violence that includes physical, sexual, economic, and psychological harm. Additionally, remember that both definitions and approaches to human trafficking prevention and response embody underlying philosophical understandings of empowerment, agency, gender, hierarchy, worldview, and national versus global perspective. While we are direct service providers and preventionists, the ways we frame and understand human trafficking in context informs the way we treat survivors, and the way they feel about our services and care. Thus, while we will not focus on theory and history, its relevance will be woven throughout.

A. Introduction to Human Trafficking

What Is Human Trafficking?

Human trafficking is a human rights violation whose prevention and response require nuanced understanding of power and control dynamics, sexual violence prevention, and harm reduction models. The anti-sexual violence movement’s commitment to the empowerment model allows us to undo the harm of trafficking and control, little by little, in the ways we help survivors explore choices and find their voice. We understand interpersonal and systemic power and control, and see survivor choice as the counter to the control of trafficking.

Remember the phrase, force, fraud, or coercion. Any time someone is trapped in an exploitative work situation through force, fraud, or coercion, human trafficking is happening.
The definition of human trafficking can be easily remembered by using the acronym A-M-P – Act, Means, Purpose. **Human trafficking is when someone induces, recruits, harbors, transports, provides, or obtains a person through means of force, fraud, or coercion, for the purpose of forced labor and/or commercial sex.**

- The presence of force, fraud, and coercion is not required to meet the definition of sex trafficking for anyone under 18 but is currently required for the legal definition of labor trafficking with minors.
- Any commercial sex exchange by a minor is considered sex trafficking, even if there is not a third-party exploiter. This definition applies, for example, to a minor who is violently exploited by an organized, professional trafficker; for a minor exploited by an abusive “romantic interest,” caregiver, or family member; for a homeless minor who is shown by another homeless minor how they’ve been surviving; and for a minor who self-initiates commercial sex exchange. Any exchange of sex for anything of value by a minor falls under the legal definition (and protections) of human trafficking.

Remember the phrase, **force, fraud, or coercion.** Any time someone is trapped in an exploitative work situation through force, fraud, or coercion, human trafficking is happening. Force typically includes physical violence, and coercion can include threats – of violence, of harm, of outing, of deportation, of law enforcement or child protective services involvement.
What Makes This Definition Challenging?

As you may have noticed, this definition is broad. It can include:

- A person who has romantic feelings for or an emotional dependency on their trafficker, with domestic violence patterns of power and control, with or without physical violence, with or without physical constraint.
- A teenager groomed and manipulated by an older “romantic interest.”
- A child traded for sex by a parent or caregiver in exchange for drugs or any other items of value.
- A person of any age recruited into commercial sex and maintained in the sex trade through physical violence or threats of physical violence.
- A homeless minor who engages in commercial sex (in exchange for anything of value, to include housing or food), even without a third-party exploiter.
- A foreign-born person brought into the United States on a legal visa tied to a specific employer whose work conditions do not match those promised and held in that employment through threats, coercion, violence, and/or debt bondage.
- Someone manipulated into a work/living situation in which labor is exploited through force, fraud, or coercion.
- A young adult being recruited for a position in door-to-door sales then encumbered with debt-bondage, threats or violence, or unsafe or unusually long work hours.
- A homeless person is given a place to stay in exchange for turning in money collected through begging and maintained in that position through force or coercion (“begging rings”).
- Someone being trafficked by one individual, or someone being trafficked as part of an organized criminal network.
- Someone trafficking one person, or someone trafficking many people.
- A trafficker operating alone, or a trafficker operating in partnership with others.
- Someone who was trafficked for one night, or someone who was trafficked for years.
- Someone who experienced one form of trafficking, or someone who has repeated experiences of different trafficking contexts.
- Someone who has been trafficked for sex and also has engaged at different times in consensual sex work.

It’s important, as we teach about human trafficking, conduct outreach, and provide healing services, to remember that survivors’ needs will vary. They each come into their trafficking situation through different modes of entry; what will feel supportive and safe as an option
for exit will feel different from one person to the next. Their traumas, while similar, will not be identical; different survivors will need and want different kinds and levels of support at different times.

It’s also important to remember that while human trafficking is often understood as two distinct categories – sex trafficking and labor trafficking – these categories might not be neatly separated. Any trafficking of a human for sex is sexual violence; many instances of trafficking of humans for non-sexual labor also include sexual violence as part of the force and control. Many people who are trafficked for commercial sex are also forced to do other forms of labor. While not all forms of human trafficking involve sexual violence, human trafficking is – broadly – a sexual violence issue. People being trafficked in any form are at significantly higher risk for sexual violence, and they frequently experience few options for recourse, safety, and recovery.

**Statistics and Vulnerability**

Accurate statistics on human trafficking prevalence and survivors are hard to find. This is partly because human trafficking exists in many of the same deeply personal and non-public spaces as other violations of bodily autonomy. Like with sexual and domestic violence, not all survivors report to law enforcement, seek medical attention, or enlist nonprofit or community organizations for support. North Carolina is consistently in the top 10 states in the country in cases called in to the National Human Trafficking Hotline, which suggests high prevalence but also high effectiveness of awareness campaigns. North Carolina’s high prevalence is often credited to the significance of NC’s agricultural and tourism-based industries, interstate highway networks, large military presence, and incidence of substance use disorders.

Some frequently cited statistics apply to specific research populations but have been inaccurately generalized to apply broadly. One such statistic cites an average age of entry into sex trafficking of 12-14 years, but this number came from an informal survey of sex trafficking survivors up to age 18. In contrast, The Covenant House Study included youth up to age 24 and found the average age of entry to be 16-18 years. The difference in age of entry was attributed to this being the age many youth come out as LGBTQ+ or age out of foster care systems. “Average age of entry” will vary based on the age of the population sampled.

Some anti-trafficking activists have claimed a spike in sex trafficking related to major sporting events. The Polaris Project has noted the lack of evidence for this claim, and some
advocates have credited these spikes in arrests for sex trafficking to increased law enforcement investigation rather than to an increase in trafficking cases. In short, like many newer movements, research about human trafficking is only now catching up to some of the more sensationalized stories used early on in the movement against trafficking to garner support and mobilize action. Remember this as you encounter research and statistics:

| Look for and assess sources before repeating numbers; |
| Resist the temptation to generalize focused findings; |
| Hard numbers or sensational stories are not necessary for us to act, support survivors, or engage meaningfully in our communities. |

Who Is Vulnerable?

Traffickers target vulnerable populations: Documented and undocumented immigrants, people with mental health or substance use disorders, distinct racial groups, gender and sexual minorities, youth in or aging out of foster care, non-English speakers, people experiencing homelessness, and other underserved groups. Runaway and homeless youth (RHY) are especially at risk. The Covenant House Loyola study, *Labor and Sex Trafficking among Homeless Youth*, found that nearly one in five of the RHY surveyed had experienced human trafficking, 30% of all young adult respondents had engaged in sex trade.

Eighty-four percent (84%) of those who were in the sex trade without force by a third party did so for economic reasons. Sixteen percent (16%) freely chose sex work because they enjoyed it or thought it was fun. Of the youth who had been trafficked or engaged in survival sex, 68% experienced this while homeless. LGBTQ+ youth were found to be twice as likely as heterosexual RHY to have engaged in sex trade, and were overrepresented among those who had experienced trafficking (29% compared to their heterosexual peers’ 17%). Youth aging out of the foster care system accounted for over a quarter of the trafficking survivors (both labor and sex) in the Covenant House. Notably, over 80% of the youth who had been trafficked for labor had been forced to work in the drug trade.

Identification, Doubt, and the Burden of Proof

While human trafficking depends on the presence of force, fraud, or coercion, the burden of proof is too often all on the victim. In the absence of extreme physical violence,
confinement, or imprisonment (such as chains and bolted doors), coercion is often doubted and rarely proven. Not running away or seeking to escape can be interpreted as consenting to commercial sex or services. To many, the victimization is also suspect if the victim engages in intermittent sex work. Continuing drug use when commercial sex is expected to supply the drugs may be misunderstood as consent. But the fact is, many survivors are impacted by dynamics of fear and manipulation that are invisible to others. Emotional manipulation and trauma bonding can be as powerful as the threat of physical violence. Someone who uses opioids might be controlled by the fear of withdrawal symptoms. Controlling a partner by threatening to expose their nude photos on social media unless they engage in commercial sex is coercive, even if the photos were provided consensually. A person’s loyal attachment to a trafficker through manipulation and perceived affection is an example of trauma-bonding, but may be perceived by outsiders as an intimate relationship, even if an unhealthy one. Threats to expose someone to authorities, although that exposure may not actually lead to deportation or arrest, are still powerful to the person threatened. When a mother with two young children has to choose between homelessness and agreeing to sex work to supply drugs for a partner, is it really a choice?

The “Identification Trap”

Frequently, crisis advocates will get caught in the identification trap – feeling a need to definitively confirm the presence of human trafficking before provision of services. How many times have we received calls from survivors of sexual violence who start their call with, “I don’t know if this is rape or not, but...”? Remember, if you’re an advocate, you’re an advocate. If you’re a preventionist, you’re a preventionist. You aren’t a freelance investigator. You don’t have to prove human trafficking before providing crisis services to a survivor of human trafficking. It is not our job to make survivors’ situations prosecutable. Meet the presenting need. Build trust. Reflect the same language.

In certain circumstances, identification can be useful, and thus it is important to educate agency staff on subtle dynamics of coercion, especially in the absence of a clear disclosure by the victim. While honoring survivor choice is still an essential part of sexual violence advocacy, advocates with knowledge of human trafficking dynamics are better able to assist trafficking survivors in exploring options. Survivors will use their best judgment in disclosing trafficking status. Here are some examples where identification may be beneficial:
Some services, funding sources, and immigration relief programs are restricted to survivors of human trafficking. This includes mandatory disclosure of human trafficking and cooperation with investigation and prosecution for foreign-born survivors in order to secure a T or U visa and maintain continued presence in the United States.

Sometimes, law enforcement may intend to charge potential survivors unless they “prove” or confess their trafficked status (as in the case of “prostitution stings”).

Some human trafficking survivors with prostitution-related charges may have access to expungements based on trafficking status under safe harbor laws for minors.

B. Introduction to Sex Trafficking

While sexual violence can happen in any form of human trafficking (including as part of the force or coercion), “sex trafficking” is any human trafficking in which the labor being exploited is commercial sexual activity, which is the exchange of a sex act for something of value, such as money, housing, food, or other goods. Commercial sexual activity may include street or motel-based sex work, escort work, pornography, live online services (“camming”), stripping, illicit massage, or personal sexual servitude.

For adults, the definition of sex trafficking is the same as any other form of human trafficking, in that it requires the presence of force, fraud, or coercion. With minors, force, fraud, and coercion are not required, which means that any commercial sexual activity involving a minor is sex trafficking. This includes recruitment, harboring, transporting, obtaining, providing, and soliciting. In the absence of a third-party trafficker, the minor is not guilty of human trafficking; the buyer is. Neither mistake of age nor consent of the minor are defenses under North Carolina statute.

DMST and CSEC

DMST is an acronym for Domestic Minor Sex Trafficking; CSEC stands for Commercial Sexual Exploitation of Children.

Girls Educational & Mentoring Services (GEMS), an anti-trafficking organization focusing on girls and young women who have been sexually exploited, offers the following definitions for these terms.
Note that the TVPA definition for sex trafficking of a minor does not require a third party to profit, and those who commercially sexual exploit children may be charged under trafficking laws. The Covenant House Loyola study found that 42% of sex trafficking victims had engaged in underage commercial sex or survival sex, but were not forced by a third party to do so.

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**Safe Harbor Laws**

*North Carolina has Safe Harbor laws, which are continually being revisited by the Human Trafficking Commission as the movement to end human trafficking grows and evolves. Safe harbor laws are laws that exist to provide survivors of trafficking legal relief and protections for criminal activity performed as part of their trafficking, which can include prostitution charges, drug-related charges (if the drug use was part of the trafficking experience), or any other charges that can be proven to be related to the trafficking experience.*

*North Carolina’s Safe Harbor law, at the time of this writing, provides protections for minors who have been sex trafficked, but has limitations around prior offenses, age of survivor, and type of trafficking. For current information on legal remedies available to survivors of human trafficking, refer out to Legal Aid or any of the other legal advocacy nonprofits providing services to survivors.*

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**Sex Trafficking Typologies**

**Exploitation without a Third Party (minors, or those who are unable to make decisions for themselves)**

The exchange of sex by a minor for anything of value is exploitation and fits the definition of a third party, even in the absence of a third-party trafficker. There is no such thing as a “child prostitute,” and this language contributes to blaming minors for their own exploitation. This kind of exploitation can include the exchange of sex for drugs, shelter,
food, money, or other goods or “protection.” It is especially common among runaway and homeless youth (RHY), many of whom may identify as LGBTQ+ or have system's-involvement as current or recently aged-out foster care youth.

“Pimp-Controlled” Trafficking (minors or adults)
This is the most well-known form of sex trafficking. The trafficker may be someone who recruits and manipulates the survivor through romantic attention, offers of protection, and false promises of love, or might be someone who recruits and controls the survivor through violence and fear. Others typically recruit survivors through false business offers, such as offers for modeling gigs or dancing opportunities. Survivors of pimp-controlled trafficking often mirror many of the same dynamics as survivors of intimate partner violence, including forming trauma bonds with the trafficker and other survivors that make exit frightening or confusing. Pimp-controlled trafficking will be covered in more detail later.

Peer Exploitation (minors)
Peer exploitation of minors can include “revenge porn,” a peer exploiting another minor at the direction of an older trafficker, or a peer commercially profiting off of the exploitation of another minor in the absence of a third-party controller.

Gang-Affiliated Exploitation (minors or adults)
This form of exploitation frequently involves known neighborhood youth and a drive toward a sense of familial acceptance. Individuals may be beaten or sexually assaulted as part of joining the gang, and over the course of exploitation money earned may be used to fund gang operations. There may be crossover with pimp-controlled trafficking models.

Familial Exploitation (minors)
Familial exploitation of minors is among the more emotionally difficult to unpack as we support the survivor in their healing. Familial exploitation occurs when a person is trafficked by a parent, caregiver, or other family member. It is more common among very young children, who are exploited in exchange for money or drugs.

Massage Parlor Trafficking (minors or adults)
While trafficking in massage parlors, brothels, or party services are forms of sex trafficking, many of the dynamics are similar to those of non-sexual labor trafficking models. Survivors may be held under debt bondage from recruitment, travel, or visa fees, live in poor conditions and have room and board expenses deducted from “earnings,” and believe themselves to owe a legitimate debt.
Special Concerns: Familial Trafficking

Advocates who are not familiar with human trafficking are sometimes shocked to learn about familial trafficking, and these disclosures (which often come after trust has been established) can be especially hard to hear. Survivors may have been trafficked by a parent or other family member. Familial sex trafficking involves selling sexual access to a family member, usually a child, for drugs, money, a place to stay, or to produce pornography. Some parents “sell” sexual access to their children for money to cult leaders, persons with affluence or celebrity status, or as brides. Some survivors were made to preform sexual acts on other siblings or children for paying customers, or to be filmed or live-streamed.

Familial trafficking typically involves children who are younger than other forms of domestic minor sex trafficking. Survivors who were trafficked as children by a parent or caregiver are more likely to experience high levels of shame and grief and high rates of suicidal ideation. The survivor is likely to have complicated feelings about their trafficker; even if the survivor expresses hatred toward the family member, they also may still be connected with them on some level, even as a caregiver for the survivor’s children.

Pimp-Controlled Trafficking Models and Language

Pimp-controlled sex trafficking has specific language used to describe the model. It is not within the scope of this manual to cover all these terms (especially since new ones emerge over time), but RCC staff and volunteers are encouraged to search out common sex trafficking language from reputable anti-trafficking sources. Sometimes a survivor who has been with a trafficker for a while may be coerced or manipulated by the trafficker into recruiting, collecting pay from, or supervising other survivors. This survivor, who functions in a “manager” kind of role, is called the “bottom.” While “bottoms” often feel like they are chosen for this role due to being special to the trafficker or trustworthy, traffickers typically use bottoms in order to deflect responsibility, expecting them to take actions that could be criminally charged when trafficking operations are investigated. Assisting survivors in the bottom role in accessing trafficking-aware legal representation is important, as their victim-defendant duality adds complexity to their case.
Choice and Victim-Blaming

Making a choice does not equal having control over whether or not someone targets you for harm. This is an essential part of the sexual violence framework and how we resist victim-blaming. With survivors of sexual assault, we know that nobody deserves to be raped no matter what they were wearing or drinking, for example. Similarly to how survivors of sexual assault have internalized cultural messages that might lead them to blame themselves, survivors of sex trafficking might blame themselves for their own trafficking experience, leading to shame and feelings of guilt and responsibility.

A survivor might think, this is my fault because:

- I ran away from home. What did I expect would happen?
- I fell for that fraudulent advertisement.
- I left with those people from that party.
- I met/interacted with strangers online.
- I used illegal drugs.
- I met my trafficker when I chose to trade sex for drugs, shelter, or rent.
- I took out that loan to come here.
- I fell in love with someone who treated me badly.
- I didn’t leave or try to leave earlier.

Just as with any form of sexual violence, it is never the survivor’s fault. Traffickers seek out vulnerabilities to exploit. They know what they are doing, and intentionally groom, manipulate, coerce, threaten, and enact violence upon people to keep them from leaving or being able to leave. This is how force, fraud, and coercion work, and survivors are not targeted because of stupidity, guilt, blame, or responsibility; they are targeted because of and through their vulnerability and humanity. It is not their fault, and this fact should be reflected in the language and models we use for both prevention and service provision.

Consensual Sex Work vs. Sex Trafficking

Remember: Not all sex work is coerced; not all commercial sexual activity by adults is human trafficking. Consent for any sexual activity exists along a range from enthusiastically desired to coerced violence. Similarly: Consent for commercial sexual activity exists along a range from enthusiastically desired to coerced violence. Pay attention for trafficking red flags when working with adults engaged in commercial sex, but do not make assumptions. For
adults who are in the sex trade due to economic hardship or housing crisis that do not meet the criteria for sex trafficking, offer resources, supports, and referrals that might help with the economic or housing crisis, as well as any desired resources around safety planning and harm reduction. As with all client interactions, respond to the presenting need. Do not force services or strategies that are not desired.
Human Trafficking Overview for RCCs

What are the contexts in which a rape crisis center is likely to encounter, identify, or provide services to a survivor of human trafficking? What concerns might a rape crisis center encounter when developing intentional programming for survivors of human trafficking?

This section of the manual provides an overview of how rape crisis centers can incorporate intentional services for survivors of human trafficking into their existing service models, and includes:

A. Thinking Through Safe Physical Spaces for Survivors
B. Prevention Education and Human Trafficking
C. Advocates and Direct Care Staff
   - Direct Services Overview
   - Legal Support for Survivors
   - Trauma-Informed Care
   - Intake/Screening and High Risk Populations
   - Harm Reduction in Outreach and Crisis Response
   - Crisis Response and Client Services
   - Emergency Shelter
   - Post-Crisis and Ongoing Survivor Support
   - Collaborative Case Coordination
   - Off-Site Support
   - Shelter and Housing
III. Human Trafficking Overview for RCCs

Rape crisis centers already have contact with survivors of human trafficking. They call your hotlines. They access your crisis services. They attend your support groups and prevention and outreach events. Rape crisis centers have contact with people currently experiencing trafficking and likely have survivors of past human trafficking among their clients, volunteers, and staff. Survivors of human trafficking may choose not to disclose their trafficking experience or even define it as such.

By learning more about human trafficking and the needs of survivors, you can be intentional about creating physical spaces, training, and programs for survivors of human trafficking. You will also be in a better position to expand and help coordinate local and regional options for trafficking survivors, who often lack access to services that are trauma-informed, survivor-centered, and use the empowerment model that is so familiar to those in rape crisis or domestic violence work.

Labor and sex trafficking exist along a continuum. Sex trafficking is simply a form of human trafficking in which the labor coerced is sex work. Sexual violence frequently can be used as part of the force in all forms of human trafficking, in which sexual assault (or the threat of sexual assault) becomes a strategy for exerting power and control. The categories of sex and labor trafficking are useful shorthand, but do not refer to consistently distinct experiences.

Reflect on your agency’s values and ideals, and choose language to describe your framework and program that is in line with your values.

When working with other agencies doing human trafficking prevention and response, it is important to remember the value of the sexual violence framework and lens. As mentioned in the Introduction, the movements emerged from different communities and different impetuses. The rape crisis and intimate partner violence movements emerged out of survivor action; from their earliest inception, they have always been powered by the voices of survivors, informed by social justice and trauma-aware frameworks, and framed as human rights issues that occur in specific cultural contexts. The human trafficking movement has more complicated roots, dating back to the White Slave Traffic Act of 1910, which prohibited transporting women and girls across state lines for the
purpose of “sexual immorality,” and was successfully used to prosecute men of color and immigrant men in relationships with women who had differing racial identities than their own. The anti-human trafficking movement has, from its inception, been powered by faith-based voices and criminal justice framing, influenced by specific existing cultural norms around sexuality and morality.

One model that dominated the anti-sex trafficking movement until recently was “rescue and restore,” a model whose framing minimizes a survivor’s agency and inherent wholeness. A rescue model focuses on the removal of the person from their trafficking situation as the goal of the crisis intervention; the empowerment model focuses on assisting the person in crisis by discerning their needs and processing with them different options for meeting the needs and goals they’ve articulated for themselves, which may include exiting their trafficking situation.

This engages the “stages of change” transtheoretical model to support someone in getting to the preparation and action stage before making major changes. Similarly, the restoration model is not compatible with therapeutic approaches to trauma, which suggest that trauma cannot be undone but rather managed, integrated, or healed. It is an unrealistic (and often undesired) expectation to return to a “pre-trafficking status.” Remember that the language and framing you use conveys your agency’s beliefs about autonomy, choice, and the inherent worth and dignity of your clients. Reflect on your agency’s values and ideals, and choose language that is in line with your values.

Focus on a strengths-based approach, which is essential with survivors of all forms of violence and oppression, but especially so with survivors of human trafficking. Trafficking survivors are frequently dehumanized and criminalized through systems that are not set up to understand their exploitation and trauma. Often, they are dehumanized unintentionally by well-meaning service providers through hierarchies of care, and subtle forms of power-over can easily slip into service provision to survivors. The empowerment model depends on the provider honoring survivor choice, and encouraging the survivor to exert their own agency, assess their own needs, and develop a plan for their own wellness.

See also NCCASA’s Equipping North Carolina’s Rape Crisis Centers to Serve Survivors of Human Trafficking Webinar.
A. Thinking Through Safe Physical Spaces for Survivors

Space can be used creatively at RCCs to foster a sense of safety and security after the trafficking experience. A room devoted primarily for trafficking survivors and designed around their specific needs and services, when resources allow, can be a helpful addition to a program. For example, a round table and chairs, a comfortable recliner or loveseat, a room with shower and bathroom (when possible), stored toiletries and change of clothes are often welcome. Ideally, this room should be available for an extended period of time and in a way that the survivor won’t feel in the way or on display.

If a client is staying at a local shelter, or receiving therapy nearby, space can be available to decompress with art, music, or quiet time. If they are working with several agencies, the RCC can be a safe place to meet together with the client to receive or coordinate services.

RCCs can keep simple clothing items in various sizes on site: underwear, sports bras, leggings or sweatpants, tops, zip up hoodies, socks, and flip flops. Engage your community by providing a list of specific items they can collect and donate to maintain your inventory. Other helpful items include: diapers, wipes, children’s socks, pads and tampons, snacks, and sports drinks. Blankets or stuffed animals can be very comforting and soothing for adults and children. In stocking your inventory, remember that survivors can be any gender, race, faith, or ethnicity, so have items that account for that diversity.

Remember that safety feels different to different people. An uncovered window or open door may feel safe to one person, but not to another. It is vital to ask if there is anything that you can do to help survivors feel comfortable and safe.

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Unique Traumas, Unique Triggers
When working with survivors of human trafficking, it is important to think through some of the ways human trafficking violation might differ from that of many of your other clients. Does your emergency housing program make use of hotels when shelters are unavailable? Someone who experienced trafficking in a hotel might find this to be a trigger. Be prepared to consider alternative rental options.
B. Prevention Education and Human Trafficking

Because sex trafficking is a form of sexual violence, preventionists trained in implementing rape prevention education programs – in-school or community-based – are uniquely positioned to offer effective human trafficking prevention programming in a trauma-informed, survivor-centered manner. As mentioned earlier, the sexual violence and human trafficking movements have different histories with different frameworks. This does not make the lens we use for sexual violence prevention less relevant; it makes it ideal, and a sexual violence prevention program can be easily adapted and expanded to include trafficking prevention.

In violence prevention, the social-ecological model (SEM) emphasizes the different levels at which harm occurs rather than emphasizing individual causality and criminal justice framing.

All forms of violence have risk and protective factors that influence the likelihood of a specific form of violence occurring. Risk factors increase the likelihood of violence occurring, even if they are not causal. Protective factors decrease the likelihood of violence occurring. The Centers for Disease Control (CDC) has identified that many of these risk and protective factors that contribute to violence and harm are shared by multiple forms of violence. Thus, many of the risks and protective factors for human trafficking are the same as those for sexual and intimate partner violence. You can learn more about shared risk and protective factors in the CDC document, “Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence.” As you thoughtfully address risk and protective factors that influence the likelihood of experiencing harm, you are also addressing many of the same risk and protective factors that influence the likelihood of causing harm.

The SEM notes that risk factors and protective factors exist at each level: individual, relationship, community, and society. Thus prevention efforts can occur on each level to reduce the likelihood of a person experiencing or causing various traumas or forms of violence.

See NCCASA’s Prevention Page for our Human Trafficking Prevention Toolkit and other information on the SEM and its applications to human trafficking prevention.
Considerations in Developing and Implementing Prevention Programs

Consider education on how to recognize fraudulent job offers, and what is realistic in a legitimate job offer. Both labor and sex trafficking can begin with a fraudulent offer for employment, which can happen in person, via social media, or in an online ad posting (among other places). The Covenant House Study found that ninety-one percent (91%) of all homeless youth in the study reported being offered lucrative work that turned out to be fraudulent. This could be a fraudulent ad for a sales or non-sexual work opportunity; it might also be an ad for a modeling or dancing job that leads to trafficking for commercial sex.

Consider carefully how to frame risk factors in ways that avoid implying either blame or inevitability. Use language that places the responsibility for trafficking where it belongs – on the trafficker – and include education around not exploiting others in your program, rather than just language around not being exploited. Just like with sexual violence, responsibility for the trafficking falls on the trafficker, not the survivor. Vulnerabilities are not personal character flaws, and while risk factors may increase the statistical likelihood of causing or being targeted for harm, not everyone with a specific risk factor will cause or experience a certain form of harm.

Avoid “conflation” of consensual sex work with sex trafficking. Engagement in the sex trades can be by coercion (or force/fraud), circumstance, or choice. People along the entire range of consent deserve the right to safety and self-determination, bodily autonomy, and the ability to frame their own experiences. Those who are in the sex trades by circumstance (meaning, they would exit if they had other options) are existing under similar pressures to other lower-income individuals living paycheck-to-paycheck, who do not have the luxury of quitting a job they may not enjoy, and it is a privilege to “just leave” in the absence of structural changes that enable financial stability, especially for sex workers who may have disabilities or other issues that might not be accommodated or welcomed in traditional workplaces. Many consensual sex workers have also experienced trafficking; many trafficking survivors have also done consensual sex work at different points in their journey. When we use language that frames all sex work as exploitation we invalidate those survivors’ voices. Additionally, almost all major national and statewide LGBTQ+ serving agencies have an official position supporting sex worker safety; collaborations to increase capacity to serve LGBTQ survivors will be complicated when we are not clear on our language, when we conflate consensual and trafficked sex work, or when we frame or treat all sex workers as victims.
Consider the ways in which strongly gendered prevention models may exclude the experiences of LGBTQ+ youth, and how foregrounding white, middle class survivors in prevention, awareness, and outreach campaigns might further marginalize youth of color. Work with disproportionately-impacted communities themselves to develop culturally-sensitive materials and curriculum. Be aware of how aging out of the foster care system or losing family support after coming out as LGBTQ+ creates unique vulnerabilities for youth aged 18-24. LGBTQ+ and foster care youth and young adults are at increased risk for both trafficking and survival sex when compared to their same-age peers, and transgender youth and young adults are at increased risk from even their cisgender lesbian, gay, and bisexual peers. Foster care youth (among whom Black and Native children are overrepresented) are especially vulnerable due to prior history of abuse or neglect as well as a deep desire for belonging, family, and acceptance – desires that are shared by LGBTQ+ youth who have been rejected by their families.

When talking about trafficking in your community and implementing a prevention program, consider how to meet those needs that only exploiters have met (or promised to meet). How can we make sure those needs are met by non-exploitative adults and systems? How can we promote resilience for those whose trust has been betrayed to reduce initial vulnerability as well as re-exploitation? Often survivors stay with their traffickers for some of the same reasons that they are initially vulnerable: the trafficker meets (or promises to meet) needs that are not being met elsewhere, like housing, food, income, new clothes, protection from other individuals, or a feeling of acceptance, belonging, or community.

Incorporate information about labor trafficking into all presentations, and consider how you will conduct (or support and partner with agencies conducting) prevention and outreach in Spanish and other regional language communities. Do not shy away from educating about the intersections of immigration policy and human trafficking. The media, concerned citizens, and even anti-human trafficking professionals have employed sensationalism in framing the public dialogue around sex trafficking in a way that obscures the reality of other forms of human trafficking. Because of this, it is hard to identify and serve survivors of labor trafficking. Are low numbers of identified survivors of labor trafficking indicative of low incidence, or of lack of outreach, awareness, and public interest? Additionally, while immigrants may be trafficked for labor or sex, the general public may be more likely to view an immigrant survivor of labor trafficking in a farm camp through the lens of immigration status rather than force, fraud, or coercion.
C. Advocates and Direct Care Staff

While advocates and direct care staff will benefit from training on modalities, best practices, and service provision, two of the most essential pieces of advocate-provider effectiveness and wellness are philosophical beliefs and practices that run through all forms of service provision: staff resilience and a strengths-based approach. A focus on resilience and strengths contributes to a workplace that honors staff as well as clients.

Staff resilience includes practices that promote organizational health through staff well-being. An emphasis on staff resilience can include benefits such as insurance that covers mental health treatment and an employee assistance plan for crisis support, discounted gym memberships, or stated policies that allow use of employee sick time for mental health and emotional resourcing in addition to physical illness. It may include flex time and opportunities to work remotely, an organizational commitment to modeling boundaries around work hours, and supporting staff in setting realistic goals for workload and time management.

Staff resilience can also be fostered by allowing your staff to bring their full selves into the workplace by using principles of trauma-informed supervision or allowing employee workplaces to be customized to feel cozy with some home-like comforts. It means building opportunities for debriefing challenging cases into staff meetings and interactions and providing a culture of mutual support and encouragement in addition to a culture of competency and professionalism. It means giving employees space to let “off” time be off time, and staff taking part in free-time activities that promote staff wellness and restoration. It means cultivating organizational cultures where it’s okay to turn off the phone when not at work.

Direct Services Overview

The role of the direct service provider is to provide crisis counseling, advocacy, information, and referrals for survivors, connecting them with appropriate supports and resources. Survivors may be identified through self-reporting, referrals from other service providers, or criminal justice agencies. Identification can also happen through screening when presenting with sexual assault at the hospital or rape crisis center.

Agency staff and volunteers sometimes express fear or concern over serving survivors of human trafficking. This may often be due to:
• Situations and scenarios portrayed in media and documentaries that advocates feel unprepared to address.
• The perceived expectation that the advocate must be able to successfully identify a survivor of human trafficking, so that the advocate feels pressure to investigate or screen during a crisis rather than provide compassionate crisis response.
• The perceived expectation that the advocate is required to say exactly the right thing in order to initiate a successful “rescue.”
• Feeling that interacting with a victim of human trafficking puts the advocate in danger (the fear of angry traffickers or unpredictable survivors of trafficking).
• Confusion about how to use lists of human trafficking indicators or “red flags.”
• Concerns about the ability to work with people from a variety of racial or ethnic backgrounds or with significant and complex trauma.
• Confusion about how immigration and human trafficking intersect, or about laws regarding immigration and visas.

It is not necessary for client to self-identify as having been trafficked to receive sexual assault services, nor does the survivor need to identify the trafficker as such to receive services. Services to survivors or potential survivors of human trafficking, like those we offer other survivors, are offered in a trauma-informed, strengths-based, survivor-centered manner. Your agency may consider using the “Five Domains of Wellbeing,” a wellness model developed by the Full Frame Initiative, to inform a strengths-based, social-ecological framework to services and safety planning.

In all services, respect and uphold the dignity and humanity of all clients, in part by avoiding a rescue mentality that focuses on convincing the client of their victimization, turns them against their abuser or trafficker, or pressures them to leave their trafficking situation when they are not ready. Best practices, as noted by researcher Deborah Gibbs, include: engaging youth in youth prevention strategies, harm reduction approaches, post-runaway assessment, specialized placements for sexually-acting-out youth, and survivor-led services.

**Legal support for survivors**

North Carolina has a “Safe Harbor” law that provides relief for minor survivors of sex trafficking, which allow them remedies for charges that are related to their trafficking experience. This law has limitations around prior offenses, age of survivor, and type of trafficking. Special visas may allow foreign-born survivors of human trafficking and other crimes to stay in the United States or apply for legal residency. These visas require official
determination of trafficking status and cooperation with investigations. Survivors of human trafficking may also benefit from legal support around labor claims, child support, child custody, public assistance, housing, and consumer complaints.

**Civil Legal Services for Survivors of Human Trafficking in North Carolina**

Free civil legal services by Legal Aid of North Carolina and Justice Matters are available to survivors of trafficking in North Carolina that civil legal service can help survivors address safety concerns, minimize the possibility of re-victimization, remove barriers to healing and stabilization, improve their immigration status, and/or reunite with their family, if appropriate. Adults and minors, both foreign-born and domestic, may be eligible for a free consultation with an attorney.

Here are sample phrases that you can use to refer your client to a nonprofit civil legal service provider:

- “Would you like to have a free confidential consultation with an attorney to help you understand some of your options?”
- “You may be eligible for help with your (ex: criminal record, impending eviction, Medicaid denial, etc.). Do I have your permission to share your contact information with an organization that may be able to consult with you or represent you?”
- “I can understand how you may be afraid to speak with the police about what happened to you. Would you first like to have a confidential conversation with an attorney to understand your rights and options throughout this process?”
- “It sounds like you are afraid to report what happened because you are afraid for your (or your family’s) safety (or immigration status). Would you like to privately talk to an attorney to see if there are any options to address your concerns?”

**Trauma-Informed Care**

If providers fail to consider the timeline of a survivor who has entered into your program, it is easy to become so focused on the trafficking experience that you miss out on the complexity of someone’s entire life. Perhaps that survivor witnessed domestic violence as a child, or had an absent or incarcerated parent. Perhaps they had a parent with a substance use disorder, or were abused or neglected. They may have experienced lifelong traumas such as poverty or racism, traumatic events such as a sexual assault or witnessing a violent assault, or have experienced any number of other traumatic experiences in their life.
A provider who becomes too focused on the trafficking violation may be prone to overly simplistic solutions, as if getting the survivor out of their trafficking situation will resolve the impacts of their trauma. In seeing the whole person, acknowledging the depth of their experiences, and appreciating the survivor’s strength and resilience in surviving complex and painful realities, you build empathy and respect that lay the foundation for truly trauma-informed care.

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Trauma-Informed Care

“Trauma-informed care is a philosophy and a skill set. Its underlying philosophy is grounded in grassroots and survivor-centered models that came from the early rape crisis center and domestic violence movements. Its evolution has made it an approach recognized in many mental health, medical, and advocacy models and settings. It provides a framework for understanding the impact of trauma on survivors, communities, and those that serve them.”

- SADI “Building Cultures of Care”

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Building Cultures of Care outlines the six areas of trauma-informed practice and how they might be experienced by survivors of sexual violence; these six areas can inform your practice with survivors of human trafficking as well. Consult the original BCC manual for additional questions to consider.

Safety

What does your visual space look like? What signs and visual materials are there? Is your space welcoming, with clear and legible information? Are survivors provided with clear explanations about services and processes? Does each contact end with information about what steps come next?

Trust

How is informed consent defined and maintained? How is confidentiality preserved in all cross-agency interactions? Are risks and benefits explained truthfully and clearly?
Choice

How much choice does each survivor have about what services they receive? Do survivors have a choice about who attends meetings, or the presence of non-offending support persons?

Collaboration

Are survivors involved in the development of programming? Are the survivors’ life experiences and history honored through a non-judgmental, strengths-based approach?

Empowerment

Does the provider have people with lived experience in key roles? How does the agency validate and affirm survivors in each contact and program?

Cultural Competency

How does the agency prioritize meeting the needs of survivors from diverse backgrounds, with regard to race, ethnicity, nationality, gender, identity, sexual orientation, disability, socioeconomic class, and/or religious affiliation (or lack thereof)? Are people from these groups incorporated in the development and implementation of programs? Are people from these groups represented in agency leadership?

Intake/Screening

There are a variety of screening tools to assist providers in determining whether or not a client has experienced human trafficking. The Department of Health and Human Services has an eight-question screening tool called the Adult Human Trafficking Screening Tool that is conversational in format. The Vera Institute for Justice has developed a screening tool appropriate for all genders and ages, and Covenant House has adapted this screening tool for use with young adults. West Coast
Children’s Clinic has a CSEC screening tool, and Project NO REST has developed a screening tool for use with youth.

Dignity Health partnered with HEAL Trafficking to develop the PEARR tool (Provide privacy, Educate, Ask, Respect, and Respond), which is less a screening tool than a model for integrating trauma-informed care and identification into services for survivors of trauma. Many experts are recommending that service providers shift from a focus on screening (which can feel like an interrogation and be less likely to produce honest answers) to a focus on needs assessment (which builds trust and focuses on client wellness).

Before choosing a screening tool or developing one specific to your agency, consider:
What is the goal and intended benefit of identification? Some services, funding sources, and immigration options are limited to survivors of human trafficking, and additionally awareness of trafficking status might shape the kinds of services your agency offers. However, when responding to a survivor in crisis, remember not to get caught in the identification trap.

Amanda Gopal, a licensed therapist who works with survivors of human trafficking and trains regularly for the National Criminal Justice Training Center, notes that while screening tools are helpful to have on hand, they might be less useful in a mental health setting. Without taking time to build trust with the client first, survivors might hide or lie about some of their experiences, might not self-identify, or might shut down in response to intense questions. Even with trust, survivors may struggle to reveal intimate details. Gopal notes that when providers are well-trained on what human trafficking is, they can ask questions in a different, more conversational way, taking note of signs and red flags along the way.

Laura Murphy, lead researcher with the Covenant House Loyola study, found that the two questions most likely to produce evidence of trafficking were: “Are/were you able to walk away when you wanted?” and “Did you ever do anything that made you feel unsafe or in danger?” Among youth who have had to develop hardened exteriors to survive, they might be less likely to admit fear for their safety. If you sense this is the case, you might ask, “Did you ever do anything that someone else might have thought was unsafe or dangerous?”

Questions about daily routines, such as “Where did you usually sleep or shower?” or “How often did you eat,” or “Where did you keep your stuff?” can lead to further conversation about the situation.
Compassion Builds Trust

Unless you are an interviewer conducting a forensic interview, conversational approaches that give the survivor plenty of space to feel heard and cared about are more likely to build trust. Questions such as “have you ever been forced to have sex for money?” might be useful or appropriate, but do not convey compassion or concern for the survivor’s well-being, even when they come from a place of genuine concern. Consider: How have you been taking care of yourself? How did you survive? Were you able to stay safe? Did you ever do something you didn’t want to do? Is there anything you’re worried about?

Similarly, the way you administer the screening tool can build trust and rapport. In some cases, you may choose to (or be required to) administer the intake in a specific format. In other cases, you may opt to conduct the interview organically and conversationally, going back in after the fact to see which questions remain unanswered. Survivors may also have concerns about you writing during the conversation; if you need to record notes, explain what you are doing and why.

Statistically Vulnerable Populations

Special consideration should be given to populations that include people that have a higher number of risk factors for trafficking. Examples include:

- Youth, particularly systems-involved and/or LGBTQ youth and youth of color.
- Immigrants, particularly undocumented immigrants.
- People with substance use disorders.
- Non-English speakers.
- People who live in neighborhoods with high incidence of gang activity, poverty, or violence.

Identifying and understanding these populations specific to your service area helps rape crisis centers to tailor services and outreach strategies for those populations. For example, outreach materials that target street-based youth will probably not be relevant or effective in reaching immigrant farm workers. Materials and information should be available in the languages represented in the service area, especially materials regarding victims’ rights and legal services. Additionally, some screening or assessment tools may be more appropriate than others, depending on the target population.
Think through how your agency is developing services in a way that provides meaningful access to these populations. The language advocates or community trainers use to explain pimp-controlled human trafficking may not make sense to people trafficked in brothels. Technical or academic language can be a barrier to those we are trying to reach. We shouldn’t assume that a national hotline number would be preferred for everyone; local, familiar resources may feel more comfortable. Conversely (and especially in small towns), local resources may feel intimidating due to fears around confidentiality, and a national or regional resource may be preferred.

Can you collaborate with other organizations at community events? This can get your name and information to groups that may not be aware of or have access to your agency’s services. Are there existing efforts or organizations by and for the populations you want to reach? Find out how you can support their work and build capacity around human trafficking outreach. Collaborating with other groups builds trust and credibility, and diversified networks for support and referrals.

In this vein, some rape crisis centers have opted to partner with local sex worker outreach programs. Our Voice in Asheville is a member of their local sex worker outreach project chapter and hosts the region’s bad date line, Kelly’s Line. Other agencies have looked into partnering with NC Harm Reduction Coalition on outreach efforts.

Post-Runaway Debrief

Researcher Deborah Gibbs has noted that youth who have experienced human trafficking during a period of homelessness or having run away might not disclose upon their return. Often families are so relieved to have them home that youth do not receive adequate support for harms they might have experienced while on their own and try to “move on” with their lives without the proper supports in place. For this reason, it is important to have a thorough post-runaway debrief that includes compassionate screening for trafficking experiences so that youth may receive trauma counseling and other supports that might be warranted.

Harm Reduction in Outreach and Crisis Response

Harm reduction is an approach and movement that emerged out of substance use disorder treatment and response. Harm reduction meets people where they are in their lives and
accepts that some people may not be ready or able to stop behaviors that put them at increased risk for harm. Examples of harm reduction for substance use include needle exchanges to prevent the spread of disease, distribution of test strips to test drugs for the presence of fentanyl before use, and distribution of overdose-reversing medications like naloxone to reduce overdose-related deaths. Harm reduction does not minimize the real harms of drug use, but rather tries to find ways to lessen or mitigate that harm.

Obviously, our ideal is that all people who are being trafficked would exit their trafficking situation willingly and enthusiastically when given an opportunity, and sometimes they do. Other times, however, trauma bonds, economic influences, shared custody of children, and other factors may leave a survivor unwilling, unprepared, or unable to exit their trafficking situation or cut all ties with their trafficker. In these cases, some professionals have found it useful to incorporate harm reduction principles into their approach.

Principles of harm reduction, (Adapted by Christy Croft for NCCASA from the Harm Reduction Coalition's Principles of Harm Reduction; published in NCCASA’s Human Trafficking Prevention Toolkit):

- Accepts, for better or worse, that some human trafficking survivors are not willing, ready, or able to exit their trafficking situation, and chooses to work to minimize harmful effects rather than simply ignore or condemn them.
- Understands that survivors of human trafficking may have complex, multi-faceted feelings about their traffickers, and acknowledges that some ways of interacting with their traffickers are clearly safer than others.
- Ensures that survivors of trafficking routinely have a real voice in the creation of programs and policies designed to serve them. Listens to communities impacted by trafficking and trafficking policy, not just those who share your lens, framework, and narrative.
- Affirms that people with lived experience across the range of consent are the primary agents of reducing the harms of coercion, violence against those in the sex trade, and sex trafficking, and empowers impacted communities to share information and support each other in strategies which reflect their actual needs and realities.
- Understands that sex work and sex trafficking exist along a continuum of consent from enthusiastically chosen to violently coerced, and acknowledges that some ways of engaging in commercial sex are clearly safer than others.
- Views self-determination as the opposite of force, fraud, and coercion. Focuses on quality of life, sense of well-being, and increase in self-determination as the measure of success, rather than on immediate exit as the only measure of success.
- Calls for the non-judgmental, non-coercive provision of services and resources to people who are experiencing trafficking or engaged in commercial sex in order to assist them in reducing attendant harm.
- Affirms that people engaged in sex trade across the range of consent are the primary agents of reducing the harms of coercion, violence against those in the sex trade, and sex trafficking, and seeks to empower impacted communities to share information and support each other in strategies which reflect their actual needs and realities.
- Recognizing that the realities of poverty, class, racism, social isolation, immigrant status, past trauma, sex and gender-based discrimination and other social inequalities affect both people’s vulnerability to human trafficking as well as their access to and experience of resources and programs.
- Does not attempt to minimize or ignore harm or danger associated with human trafficking, labor exploitation, or the sex trade, and considers conditions outside the sex trade itself that perpetuate or normalize increased harm to those in the sex trade.

Real-life Example: Harm Reduction for Challenging Situations

Imagine a woman who is married to her trafficker, and possibly has a child with him, who manages to get out of her trafficking situation. She is moved to another town on the other side of the state into a shelter, but she has no local support system, doesn’t yet trust the staff, and feels even more isolated, lonely, and afraid than ever. She might want to call him late at night when she’s feeling down and wants emotional support. A “no contact” approach might cause her to leave her safe placement, whereas a case manager using a harm reduction approach might instead help her find ways to stay safer if she chooses contact.

“So, I want you to be able to make your own choices about contact, and I’m also concerned about your safety and well-being. Can we have a conversation about what that contact might look like? What are your concerns, and how can we talk them through?”
Options might include:

- **Using a burner phone or burner app on a smartphone to avoid being traced or tracked and agreeing not to share the location.**
- **Planning for and practicing how to respond to anticipated requests or challenges, like the trafficker demanding the location, becoming emotionally abusive, or trying to employ guilt-inducing tactics.**
- **Creating a self-care or debrief plan for after contact to make sure the survivor can process through uncomfortable situations or feelings from the contact.**

There are many reasons survivors may not be ready, willing, or able to leave their trafficking situation even when offered an out. Some of these reasons may include:

- **Feeling shame and guilt.** Survivors often feel ashamed of what they have been forced to do, or of any choices they have made that they mistakenly feel make the trafficking their fault. This may take time to process through.
- **Having a relationship with their trafficker,** who may be a family member, caregiver, co-parent, or romantic interest.
- **Threats or fear of violence or harm to self or others (including their children)** if they exit.
- **A substance use disorder,** as many survivors either used licit or illicit drugs before they were trafficked, or their traffickers induced a substance use disorder as part of their coercion.
- **Fears of deportation of themselves or loved ones,** and different communities’ complicated relationships with Immigration and Customs Enforcement, law enforcement, and the criminal justice system.

Remember, sometimes survivors who get out of their trafficking situation and are able to stay out went into and out of trafficking situations several times before staying out. This is not unusual, and keeping this in mind encourages a goal of building trust and rapport rather than focusing on immediate extraction. If your agency provides compassionate, empowerment-based, nonjudgmental services, and you make sure every survivor you work with knows how to contact you, they will know you are there for them if and when they are ready to leave.
Sex Worker Outreach

Many cities have street and motel-based outreach programs in place providing harm reduction support to people who trade sex. If your agency has a non-judgmental, harm reduction approach to sex work, consider collaborating as a partner in local harm reduction efforts. In Asheville, Our Voice participates in the local sex worker outreach program and hosts the “bad date line” for sex workers to report violent or unsafe buyers; in Durham, Durham Crisis Response Center is partnering with the NC Harm Reduction Coalition’s sex worker outreach workers to improve access to services for sex workers who are survivors.

Crisis Response and Client Services

As with survivors of sexual assault, client services with survivors of human trafficking fall into three broad categories: crisis response, survivor support, and advocacy. Crisis response may include emergency response when a survivor is identified and supported in exiting their trafficking situation as well as services provided in the immediate post-crisis period, once the survivor’s immediate needs are stabilized. It may also include crisis support for trauma responses and periods of increased vulnerability well after the initial exit.

Crisis Response

Emergency response occurs when immediate services are required for victims or potential victims of human trafficking. This may happen when the victim is identified through the criminal justice system or has recently been removed from or separated from the trafficker(s). This may also happen when survivors themselves are seeking help exiting their trafficking situation or are experiencing a crisis related to leaving their trafficking situation, and may involve planning for the needs of dependent children. The goals of crisis response include safety, stability, and self-determination.

Survivors appreciate open, non-judgmental support. Remember, our role is to provide support, not to investigate. Even experienced rape crisis advocates who do well with this balance with survivors of sexual assault sometimes shift into questioning when trafficking is suspected. Depending on how the survivor comes into your program, intake and getting a signed release form may not be possible at first. Start by serving the survivor’s presenting needs, taking into account their emotional state, confusion, mental health, or fear of law enforcement or their trafficker. When working with people experiencing trauma, we may
need to repeat information and use simple words and short sentences. As much as possible, wait until an appropriate time to do paperwork.

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A Note on Safety

When a client, adult or minor, is leaving a trafficking situation, make every effort to prioritize the safety of all people involved. There may be situations where only law enforcement can transport survivors to safe locations or other services. A staff person or volunteer may sometimes accompany law enforcement. Know your agency’s policy on relevant safety issues regarding contact, privacy, and transportation. Safety plan as soon as possible.

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Emergency Shelter

Often the survivor will not want to go to a “shelter,” but if appropriate you can explain that emergency shelter is simply a safe place to go to so they can get some sleep, quiet, and an opportunity to talk to a professional advocate about next steps. Going to an emergency shelter does not obligate the survivor to a program. Ideally, the survivor would be housed in a shelter that has services specific to (or at least sensitive to) the needs of trafficking survivors from diverse backgrounds and with diverse identities. Coordination of more appropriate shelter or longer-term housing should begin as soon as possible.

After the initial crisis a survivor may:

- Return to trafficker, sex work, or original situation.
- Stay with a safe person, but in the area s/he was trafficked.
- Move to another state or to a part of the state where family and friends are.
- Re-engage in criminal activity.

These can be disappointing, but we must meet them where they are, giving clients all the relevant information they need to make informed decisions.
Post-Crisis

In reality, a trafficking survivor may have an extended period of crisis, and there may be multiple systems and services to access and navigate, including significant setbacks that can create a great deal of stress. For the purpose of this manual, we’ll define “post-crisis” as the next phase of the survivor’s life once initial safety has been achieved and steps are being taken to separate from the trafficker and/or situations that may have contributed to survivor’s vulnerability. The goals of post-crisis support include creating safe supportive networks, community connection, and increased independence.

Ongoing Survivor Support

Ongoing survivor support occurs when a survivor is feeling stable and is seeking support. They may be referred by another agency or have self-referred through finding out about your services online or in the community. Unlike crisis intervention, ongoing services usually can be scheduled and occur at the rape crisis center. Weekly support meetings may be helpful to some, while one or two in-person appointments may be all others need.

Ongoing support may include participation in support groups or on-site therapy, if those services are offered by your agency. Depending on the size and capacity of your program, human trafficking survivors can be integrated into other appropriate groups for survivors of sexual assault or domestic violence if your program capacity does not warrant separate groups. Remember, even among survivors of human trafficking there is great variance of needs based on different experiences of trafficking – was it one person trafficked or many, a business model or family dynamic, and was manipulation and competitiveness fostered between survivors? Depending on the specifics of the trafficking experience, some of these dynamics may play out in group or in interactions with the therapist, group leader, or case manager. One size does not fit all; treat each survivor as unique.

For more information on support groups, see NCCASA’s Support Group Manual The Power of Social Connection.

Collaborative Case Coordination

When working with multiple agencies, it is crucial to maintain client confidentiality while carefully coordinating with others. Have clear, set roles and services, establish clear lines of communication, and include your client in the process. A Collaborative Service Plan
(included in the resources at the end of this manual) is a tool to help avoid duplication of services and eliminate confusion. Meet or communicate with other team members as needed to review and update the plan. This may need to be done daily, weekly, or monthly, depending on the client.

Services to survivors are not necessarily linear, which often occurs in a “rescue narrative:” victimization, rescue, restore. The reality is that a person moves through a complex process in order to get to a place where they are no longer under the influence of a trafficker.

**Off-Site Support**

Advocates who work with this population should have the ability to provide support off-site. This might include support provided at court, in meetings with service providers and trauma therapists, in jails and prisons, at domestic violence shelters, at Family Justice Centers, or at law enforcement agencies. When providing or coordinating off-site support, advocates should be prepared for things that may be triggering for survivors and work with them to discuss coping strategies.

Serving survivors who are currently incarcerated is extremely challenging, as there are many barriers to safety and confidentiality. Work with your local facilities by reviewing any current MOUs, and build a relationship with the facility PREA coordinator. Survivors who are incarcerated due to “prostitution” or “human trafficking stings” are sometimes pressured to prove or disclose trafficking experience, so be aware of this problematic power imbalance, and how it might impact trust.

**Shelter and housing**

Survivors of human trafficking have experienced intense, complex, and sometimes long-term trauma. Most survivors of trafficking will have experienced trauma prior to their trafficking experience, and may bring their lived experiences, cultural norms, and existing coping skills with them into shelter programs. As long-term shelter staff and directors know, much of what is considered “problematic shelter behavior” stems from trauma. For example, someone who was abused at night by a family member might feel afraid to sleep in a room with other people with the lights out. For almost every problematic shelter behavior you will encounter with a survivor of human trafficking, there will likely be a trauma response at play. This does not make unacceptable behaviors acceptable, but
viewing challenging behaviors and dynamics through a trauma lens will both increase empathy and inform an appropriate response.

As you develop shelter policy, protocol, and staff training, it is important to remember that your programs already serve and will continue to encounter survivors of non-trafficking-related sexual and intimate partner violence who come from marginalized racial and gender identities, have substance use disorders, or have current or past gang or criminal involvement. By clarifying your policies and protocols in these areas and strengthening staff knowledge, training, and empathy for the lived experiences of people from these backgrounds, you not only will be better prepared to serve survivors of human trafficking, but will also be better prepared to serve all survivors of gender-based violence.

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Finding Shelter for Trans and Gender-Nonconforming Survivors

NCCASA regularly receives technical assistance requests around housing, or finding appropriate emergency shelter for, trans survivors of human trafficking. “Injustice at Every Turn,” a 2011 survey of over 6,000 trans people in the United States found that transgender people are significantly more likely to be unemployed due to hiring and workplace discrimination, to have experienced homelessness or currently be homeless, and to experience family rejection as youth. Because of these and other factors, trans youth and adults are at increased vulnerability to human trafficking and other forms of exploitation, and those who also experience the intersecting oppression of racism are even more vulnerable.

“Injustice” found that while one percent of the adult female population of the United States has traded sex, 11% of all trans people, 53% of Black trans people, and 34% of Latinx trans people have traded sex. Thirty-three percent of all trans people who had experienced homelessness had traded sex, and that number jumped to 55% among those who were currently homeless. While it is not a foregone conclusion that a trans or gender-nonconforming youth or adult is trading or will trade sex, their increased vulnerability cannot be denied, and that vulnerability is directly increased by lack of access to safe, affirming shelter.
Challenges in sheltering transgender survivors may include:

- Shelters that are gender-segregated may exclude or struggle to understand the needs of transgender survivors or may exclude or be inappropriate for nonbinary survivors.
- Geographical disparities in access to non-discriminatory, safe, and affirming shelters across the state.
- Shelters that do not have an anti-discrimination policy, or whose anti-discrimination policies do not cover gender and sexual minorities.
- Inconsistent implementation of anti-discrimination policies (such as shelter monitors who “didn’t hear” other residents’ ongoing bullying of trans guests but did hear the trans guests verbally defend themselves).
- Staff bias, misunderstanding, or lack of training around gender identity and sexual orientation, particularly among shelter monitors and direct staff.
- Shelter policies that require a survivor to detransition or participate in mandatory religious activity.

NCCASA is at the forefront of the statewide effort to close these gaps so that every survivor of human trafficking has access to safe shelter. Reach out for technical assistance around finding safe housing for transgender survivors, for staff training, or for additional guidance on creating inclusive shelter policies, housing, and intake forms.

Intake
In some cases, a survivor comes into a placement in your shelter from an unsafe location where immediate shelter is required. In other cases, the survivor is in a temporary safe space and you have time to evaluate options and prepare referrals, such as coordination of detox or gathering additional information that might be needed to support the survivor and minimize retraumatization. Evaluate for safety as early in the process as possible and on an ongoing basis, and maintain MOUs with shelters in other regions in case transfer is the safest option. Many survivors choose to relocate to shelter services in a different part of the state, or even in a different state, in order to gain a safer distance from their trafficker. There are email lists and professional networks for helping connect with shelter placements in other states.

Secrecy and communication
By definition, survivors of human trafficking will likely have experienced severe limitations of their communication and freedom of movement as part of being trafficked. For this
reason, many common policies around program secrecy, who they can speak with and when, and long- and short-term phone privileges can feel frightening or triggering for survivors. **When developing policies and protocols, work at balancing the need for the safety of the survivor, staff, and other residents with the survivor’s need for clarity and self-determination.** Use a harm reduction approach where possible and clearly explain those policies that are not flexible. There is a tendency to view survivors of human trafficking as more dangerous than other survivors; in most cases, agencies can develop appropriate policies by asking, “How would we provide this service for a survivor of sexual or intimate partner violence?” or “Is there a way to meet the agency's need for safety while meeting the survivor’s need for self-determination?”

**Detox and recovery options**

Many survivors of human trafficking will exit their situation with a substance use disorder that requires safe detox. Identify options for local or regional options for detox, and maintain MOUs with detox providers to ensure survivors have access to medically supervised detox when needed, and plan to have a bed ready for a survivor when released from detox. If space and capacity allow, consider dedicating a room for survivors in their first few days in your shelter before they are moved into the general shelter population. If your shelter does not offer substance use treatment or in-house recovery meetings, connect with local recovery groups such as Alcoholics Anonymous and Smart Recovery and ensure that residents have access to meeting information and assistance with coordinating transportation. As survivors transition out of your program, be aware of alternative and transitional living options in your area, including sober-living houses.

**Recruiting**

Recruitment can happen anywhere that traffickers know there are people who are especially vulnerable to force, fraud, or coercion. This can include places where young people hang out (in person and online), transportation hubs, food pantries, and homeless shelters. It can happen in shelters that already house survivors of human trafficking when someone seeking services independently leaves the program and convinces others to go with them. It can also happen when a survivor is intentionally sent into the shelter by the trafficker to recruit other people for the trafficker to exploit. Your agency can be better prepared to address this reality through training and awareness that it happens. Also consider using survivor leaders, who are more familiar with these dynamics, to assist in screening survivors when possible.
Shelter ejection or exit concerns

Some concerns around exit from the shelter will be specific to how the survivor came into your program and whether or not there is a criminal case pending. For example, a survivor removed from the trafficking situation during a “prostitution sting” may have been told that law enforcement will drop any charges related to illegal activity pending cooperation with cases against the trafficker or other persons. In this situation, the survivor may fear that leaving the shelter would be considered a lack of cooperation and may feel pressured or coerced into staying in your program. Have a clear agency policy around involuntary housing placements. Make sure your agency has clear communication with law enforcement agencies and court programs to clarify roles, and that the survivor has been offered legal counsel.

Evaluate all shelter policies around ejection with a trauma-informed lens, and check them against potential possible misconceptions or biases against survivors of human trafficking or people with marginalized identities. Every field—homelessness, human trafficking, rape crisis, and domestic violence—has norms that may be historical artifacts of times in which we had less awareness of trauma impacts and minimal understanding of cultural and societal influences on health and violence. For even accepted norms, evaluate for bias and trauma-awareness, and consider incorporating survivor feedback into the process of evaluation and revision.

Adolescents and young adults

Depending on their age, adolescent survivors of human trafficking will require more structured expectations and guidelines than adult survivors. Consider whether a foster-style placement might be appropriate. At the time of this writing, at least two organizations in North Carolina have begun host home programs to provide additional support for young adults facing or experiencing homelessness.
Many survivors of human trafficking will have complex needs, and strong multidisciplinary partnerships can help streamline service provision and access. Additionally, some survivors of human trafficking may come into a rape crisis center’s programs with existing involvement in court, law enforcement, or social services systems, and a multidisciplinary response can strengthen communication and response coordination.

This section of the manual explores common concerns about multidisciplinary partnerships, and includes:

A. Building a Successful Team
   - Key Elements of a Successful Team
   - What Can a Multidisciplinary Team Do?

B. Engaging Law Enforcement
   - Diversion Programs

C. Engaging Local Healthcare Providers and Hospitals
IV. Building a Multidisciplinary Response

Successful programs build collaborative partnerships with local and statewide agencies and organizations that interact with survivors. These partnerships can be formal with MOUs and regularly scheduled meetings, or informal relationships. Regions may collectively organize into coalitions around the issue of human trafficking with representatives from the community. On the other hand, communities may already have multidisciplinary team (MDT) meetings that serve different purposes which may be challenging for outside agencies to access due to confidentiality. Know your communities, work with what already exists, and build where there are gaps.

The goal of a multidisciplinary response is to coordinate services for a survivor in a way that is helpful and not counterproductive or burdensome. This includes streamlining communication among agencies while maintaining sensitivity to the survivor’s identified needs. To facilitate effective service coordination, community agencies should be familiar with human trafficking, aware of the various needs and challenges for the survivor, and especially aware of the various ways traffickers use to coerce and control victims. Regular communication to coordinate and update service plans among agencies is important. (See the Service Plan worksheet in the resources section of this manual.) This reduces confusion and overlap of services. A team working with the survivor is more able to identify gaps and discover solutions together.

Different Disciplines, Different Lenses

Not all of our partners engaged with our MDTs will share our survivor-centered, trauma-informed, empowerment-focused lens, and this can be challenging. Amanda Gopal, a licensed clinical social worker who is a consultant for the National Criminal Justice Training Center (NCJTC), has noted that non-advocate, non-therapeutic MDT partners may lack training on the neurobiology of trauma; fight, flight, or freeze responses; trauma-bonding and oxytocin; why some survivors don’t leave; and why they might miss their traffickers or struggle with “no contact” guidelines. A well-functioning MDT will allow knowledge-sharing to improve service provision across care needs, promote survivor well-being, and ensure investigations do not fall apart due to escalating survivor trauma responses. If you feel your systems advocacy on this front is not having the intended effect, consider referring out to trauma-informed trainers from within their fields, such as the NCJTC for law enforcement or HEAL Trafficking for healthcare providers. And as always, remember client confidentiality concerns when partnering with your MDT; avoid revealing personal details of client
disclosures (especially considering human trafficking survivor status around criminal record or active sex work) unless a client opts in to having their information shared with the MDT, in accordance with your agency’s written policy.

A. Building a Successful Team

Your multidisciplinary team should include representatives from agencies/organizations that can identify and refer survivors to the RCC, or whose services survivors may engage: DV programs, therapists, detox/rehab facilities, health care professionals, school resource staff, immigration nonprofits, advocates working among high-vulnerability or marginalized populations, juvenile justice, law enforcement agencies, court systems, diversion programs, jail staff, first responders, shelters, service and faith-based organizations, school support staff, clinics, and youth-serving agencies.

Key Elements of a Successful Team

• Willingness to learn and grow.
• Patience: focus on long term growth and sustainability rather than the short term “win.”
• Familiarity with victim/survivor service agencies and organizations.
• Good working relationships with agencies and willingness for candid conversation about any differences.
• Regular communication and presence.
• Understand and respect other agencies’ roles and goals in the community.
• Know how to refer, how best to contact.
• Ethical communication.
• Honor other agencies’ confidentiality practices and standards.
• Show up: attend and participate in meetings.
• Willingness to stay at the table, even if it’s uncomfortable.

Staff Turnover: A Challenge for MDTs

One commonly expressed challenge in human trafficking MDTs (as well as sexual assault and intimate partner violence community response teams) is staff turnover. Since so much of a team’s effectiveness relies on both relationship-building and consistency of knowledge-
building, staff turnover has the potential to disrupt even the most well-functioning teams.

Potential solutions might include:

1. If staffing allows, having more than one person from each agency attend MDTs as available, either consistently at every meeting, or on a rotating basis.
2. Include a debrief from MDT meetings at your agency’s regular staff meetings, or incorporate an update into regular staff emails (in accordance with your agency’s confidentiality policy around electronic communication).
3. Include other agency staff in collaborative training for networking opportunities and to build cross-disciplinary professional relationships that could help bridge gaps during periods of staff turnover.
4. Consider writing MOUs in a way that allows for secondary staff engagement with collaborative processes to ensure greater consistency when staff turnover happens.

What Can a Multidisciplinary Team Do?

• Promote accurate human trafficking awareness that includes information about marginalized populations.
• Create protocols to identify and respond to human trafficking.
• Review cases and discuss improvements in service delivery.
• Plan investigative and prosecution strategies.
• Identify resources and improve access to those resources.
• Provide or coordinate training and awareness events.
• Regular training to keep team agencies aware and updated on trends and resources.
• Provide screening tools or awareness materials to team members.

When partnering with team members from different government agencies, remember each agency’s scope and priorities. The UNC School of Government Public Management Bulletin “Ten Questions About Local Government: A Primer for Anti-Human Trafficking Advocates” notes:

*The “right” decision might be obvious to someone who wants to make a specific change for a singular purpose (for example, supporting a shelter for homeless trafficking survivors to improve the likelihood of their long-term success). But that decision making becomes more challenging when other equally compelling and competing interests are considered (for example, funding a shelter for trafficking victims versus reducing the class size in public school classrooms).*
elementary schools or supporting an economic development proposal that could bring well-paying jobs to the community). Community advocates should be aware and respectful of the competing interests that local government officials have to manage.

For more comprehensive guidance on building a multidisciplinary collaborative anti-human trafficking task force, we recommend Development & Operations Roadmap. For building a North Carolina-specific community response to human trafficking, NCCASA and NCCAHT partnered with the Human Trafficking Commission to produce Responding to HT in Your Community: A Toolkit for NC Regional Response Team that we look forward to sharing in the future.

B. Engaging Law Enforcement

Working with law enforcement agencies that are addressing human trafficking is complex and challenging. Many of the benefits and challenges, like coordinating supports and streamlining services for survivors, will be familiar to those working in rape crisis.

Some of the challenges encountered in working with law enforcement may be specific to your local jurisdictions. You may have a sheriff or chief of police speak derogatorily about certain populations, but also have investigators in the same agency who are extremely sensitive to victims and their trauma. You might have leadership who understand trauma, especially how marginalized populations have been historically and generationally impacted by law enforcement, but injustices in the system remain. You will be aware of survivors who report frightening and harmful experiences with officers on the ground. You can be one election away from changes that directly affect your work. Your work is done in your community, and advocacy work must be done in all conditions. You can build stronger and more sustainable programs when you can find ways to work with people who have different perspectives. You can create space to engage effectively with law enforcement to better serve all survivors, and in so doing create opportunities to lead, to inform, and to influence.

One common belief among law enforcement is that “prostitution stings” are the most efficient way to separate the survivor from their trafficker, and some survivors have supported this view, especially when it was part of their lived experience. A common misconception that is often behind these operations, and general outcries to “do something” about human trafficking or concern over local activity of drugs and prostitution, is the conflation of sex trafficking with consensual sex work. When this happens, sex
workers are targeted as possible victims of human trafficking with the intent to identify victims to “rescue” them, or to gather information about traffickers and other criminal activity.

Many rely on stings as the best way to address the problem of human trafficking. This is often supported by the general public, who believes that a criminal justice response is the best response to human trafficking. These stings are frightening and retraumatizing for survivors, and often further burden survivors with additional charges on their criminal record. They also put survivors at increased risk for harm, as traffickers will sometimes punish them for having interacted with law enforcement, even though they had no choice. Survivors tell stories of being beat for talking with law enforcement and interacting with service providers. We must be thoughtful as we structure our partnerships with law enforcement and any participation in those activities.

Just like with other forms of sexual violence, many survivors do not want to be involved prosecuting their trafficker. Placing survivors with marginalized identities into increased contact with the criminal justice system often leads to increased harm. Successful human trafficking investigations that seem to result in curbing drug trafficking and gang violence are in law enforcement agencies’ best interest, and human trafficking has been used to win elections, garner support and funding, and boost readership and clicks for local media. Those agencies who have built successful law enforcement partnerships should find the balance between speaking out publicly as part of community-wide advocacy around an issue when it is called for, but also advocate in private, candid and sincere conversations that result in changed minds and practice.

It is important that law enforcement agencies understand what services RCCs offer and how your center can be a help to them. You may want to foster relationships with your local jurisdictions’ victim assistance coordinators to partner for service coordination and to assist survivors in navigating systems. Law enforcement typically prefer training by other law enforcement professionals who can focus on investigative practices; there are a growing number of law enforcement professionals training on the importance of trauma-informed investigations. Such training is regularly offered through the National Criminal Justice Training Center.

As you build relationships with local law enforcement, your agency may be asked to assist with trafficking-related operations by standing by on site of the operation to assist survivors or to be on call in case any survivors accept rape crisis center services. Care must be taken to establish clear policy on exactly how rape crisis centers will assist law enforcement.
Human trafficking arrests and press releases can raise local awareness about the issue; however, these can harm the survivor their family through unwanted publicity. This story may reinforce misinformation about human trafficking.

Have a clear policy and MOU on file for working with law enforcement, and always maintain client confidentiality and avoid sensationalism when working with the media. Once you are engaged in your community’s human trafficking outreach, prevention, and response, you will likely receive requests for interviews, research projects, survivor stories, access to survivors to interview, “shadowing” agency staff to learn more about trafficking, and program training for newly hired staff. These requests should go directly to supervisors, and you will want to have an agency policy detailing how to respond to such requests.

**Diversion Programs**

As more become aware of survivors’ victim/defendant duality, many are developing and turning to specialized diversion programs, or human trafficking “courts,” in an effort to provide survivors with legal options that address behaviors such as drug use, to reduce recidivism. Conditional discharges in the criminal justice system are opportunities for your agency to provide services to a population that is vulnerable to trafficking: those with prostitution charges. Your agency may be called upon to provide a “diversion” type of service to those who meet the criteria of N.C.G.S. 14-204, subsection (b) which has a built-in conditional discharge for anyone who does not have a prior conviction under that statute (or has not been placed on probation for a violation of this section.) The statute uses the word shall, so a judge must sentence the person through the conditional discharge if they qualify and meet specific requirements. The individual is supervised by a probation officer in the 12-month duration, and if conditions are met, will come back for a dismissal.

While this can be a helpful service, it is important to consider that such programs tend to assume “success” means prosecution of trafficker, participation in drug treatment, and clinical case management. It may be more successful to address the gap of access to resources instead of mandated services such as therapy. Some courts prohibit survivors from interacting with people they are connected with. While this is often related to the thought that separating victim/survivors from traffickers, it fails to address the need for a survivor to negotiate and establish their own social networks as a means for safety and survival. Lastly, specialized courts can motivate law enforcement agencies to rely on, and even justify increasing operations that lead to arrests and charges as a means to save
trafficked survivors from further trafficking. As rape crisis centers partner with the courts in working with survivors, keep these things in mind as you create your MOUs or policy.

C. Engaging Local Health Care Providers and Hospitals

Rape crisis centers with existing partnerships with local health care providers may want to expand or clarify existing MOUs to account for human trafficking survivors’ health care needs. Survivors may benefit from and choose to request advocate support during physical or mental health care treatment. Many RCCs have agreements in which an advocate is called to the hospital when sexual assault survivors present for services. Some RCCs have incorporated language into their hospital MOUs asking to be contacted for suspected cases of human trafficking as well.

What’s in your hospital MOU?

Survivor consent to services is an essential piece of rape crisis advocacy in the health care setting. For some MOUs, the hospital secures survivor consent before contacting the RCC. Many survivors, when asked if they desire advocate support, will initially decline support for reasons that may include not wanting to feel like a burden or feeling like they should be able to handle a frightening experience on their own.

Many RCCs have adopted an alternative agreement with the hospital that allows for initial hesitation and still provides for survivor consent. In this model, the RCC is contacted and sends an advocate to wait in the waiting room. The survivor is told that there is an advocate from the local RCC on site if they’d like support, and can choose whether or not to allow the advocate to join them. If the survivor gives consent, the advocate will come and explain what services they can provide on-site and allow the survivor to choose if the advocate stays. If the survivor does not give consent or opts out after hearing the advocate explanation, the advocate or nurse lets the survivor know the advocate will be in the waiting room for a set period of time (e.g., 20 minutes) before leaving, in case the survivor changes their mind and would like support.

Specific to human trafficking, you might consider asking the hospital to contact the RCC for suspected cases of human trafficking, whether trafficking-related injuries are the presenting need or not.
Policy and Protocol

As your rape crisis center builds policies and protocols around serving survivors of human trafficking, you may encounter new situations and have to strengthen, expand, or clarify existing policies.

This section of the manual will walk you through common situations, special considerations, and overall expectations of program development, and includes:

A. Special Considerations
   - Training New Staff
   - Survivor Input and Leadership
   - Faith-Based Anti-Trafficking Organizations

B. Highlights from the NC Human Trafficking Commission Standards
   - Ethical Standards
   - Media and Confidentiality Standards
   - Emergency Response
   - Outreach and Indicator Standards

C. Next Steps
V. Policy and Protocol

As your agency considers intentionally building services for survivors of human trafficking into your existing services, remember that your agency is already providing services to survivors of human trafficking. Developing policy and protocols about trafficking services is less about expanding existing services to include a new population, and more about building capacity to intentionally serve the needs of survivors of human trafficking.

Part of effective service to survivors of human trafficking is building capacity to serve survivors who hold marginalized identities or have specific individual, interpersonal, community, or societal vulnerabilities – a practice that will strengthen the other sexual assault services you provide.

You can also view NCCASA webinar Expanding our Reach: Human Trafficking Policy and Protocol Webinar that builds on this information.

A. Special Considerations

Think about what changes your agency should make and what support you might require to better accommodate survivors:

- With heavy drug use, street-based lifestyle or homelessness.
- With a criminal record, warrants for their arrest, or who are incarcerated.
- Who have both experienced and caused harm.
- Who are gang-affiliated.
- Whose primary languages might be new to an agency.
- Who might have additional or complex safety concerns.

Again, there are survivors of non-trafficking sexual violence who fit one or more of these categories who need and may seek out support; building capacity in these areas strengthens your overall sexual violence programming.

Also consider:

- Adding or revising intake paperwork, or having supplemental intake pages to obtain relevant information that reflects the needs of the survivor such as drug/rehab history, criminal justice information.
● Developing follow-up protocols to account for unique situations, like working with a survivor who has no address, or whose phone line or vehicle is in the trafficker’s name.
● Preparing for complex case management needs, such as a trafficker having custody of the survivors’ children.
● Adding related agencies or other human trafficking programs to your release forms.
● Maintaining a directory of trafficking-specific services in your region.
● Maintaining a stash of snacks and food that is not too heavy, in a variety of choices, such as sports drinks, cans of soda, salty snacks, breakfast bars, applesauce, as survivors may have gone more than 24 hours since eating.

Examine your current policies for how supportive they are of survivors with complex trauma to avoid policies and practices that retraumatize survivors or punish them by removing them from services early for having trauma symptoms. A strict policy removing a survivor from services for not showing up for appointments might not account for avoidance as a trauma symptom among high-trauma clients. Focusing on convincing a survivor to leave a trafficking situation might overlook the strength of trauma bonds in a situation where a harm reduction approach might be more appropriate and effective. Consider: Are there safe ways you can still interact? Ask the survivor, “How can you keep yourself safe if you are not yet ready to leave or end contact?” Serving survivors of human trafficking (or any complex trauma) requires viewing agency policy (and the behaviors they may be intended to address) through the lens of trauma and resilience.

Training New Staff

When new staff is hired to work with trafficking survivors, have a plan for their training that would include webinars (such as those offered by NCCASA), local and national conferences, and training websites. Training and technical assistance can help staff and volunteers be better prepared to serve survivors of human trafficking; NCCASA is available to provide this support. The North Carolina Victim Assistance Network (NCVAN) also provides advocate training through its academy programs. Be thoughtful when reaching out to other direct service providers with training requests to set up an MOU and appropriate compensation structure, as ongoing training and support is typically beyond the scope and capacity of most local programs.

Cross-training on intimate partner violence and health impacts of gender-based violence will increase staff and volunteer awareness of red flags and potential concerns. For
example, strangulation and traumatic brain injury are common among survivors of intimate partner violence and human trafficking, and can have delayed impacts that the survivor might not know would require related medical attention. Additionally, survivors of human trafficking might be more likely to need referrals to detox and substance use treatment programs; these are referrals that may also be needed by other clients as well.

Encourage staff to remain flexible with the pace and complexity of human trafficking cases, especially when interacting with multiple law enforcement agencies or service organizations. Also expect and prepare for intense news and social media attention. It can take time for everyone (even in your own agency or those you partner with) to learn to treat survivors in ways that honor their dignity and humanity. This can be surprising, but prejudice against survivors of human trafficking (and other vulnerable or overlapping populations such as sex workers and immigrants) is common. Incorporate empathy-building into your training program. Most people drawn to prevention and advocacy work have a strong desire to help. Many of them may still need support around teasing apart their internalized biases.

**Survivor Input and Leadership**

The movements to end sexual assault and domestic violence were built out of the collective voices of survivors; over the decades, we have developed frameworks and training to help survivor-advocates and non-survivors alike to hold space for a wide variety of survivor experiences, perceptions, and needs. One survivor may feel that their participation in prosecution was empowering and restorative; another may feel further victimized or harmed by the investigation and trial. One survivor may desire an opportunity to speak openly in their community about the harm they experienced; another may prefer to work quietly through their reactions and tend their trauma with only a few friends or advocates as support. Part of how the rape crisis movement addresses this complexity is by providing training that helps advocates understand the varying needs of individual survivors and by employing the empowerment model in supporting the survivor to discern their own needs as they navigate their experiences, decisions, and responses.

Similarly, individual survivors of human trafficking may have experiences, perceptions, and needs that vary greatly from each other – variance that may be due to factors as quantifiable as length of time trafficked, age at first exploitation, type of trafficking, or relationship to the trafficker, or as nuanced as the survivor’s temperament, values, ideals, culture, and beliefs about harm. For example, one survivor may feel that getting arrested was the best thing that ever happened to them and feel gratitude for the law enforcement
intervention; another may struggle for years with trauma experienced during their arrest and the residual impacts of their criminal record on housing, employment, and child custody. Each survivor is allowed to have their own unique perspectives and understanding of their experiences, and it is the work of advocates (even other survivor-advocates) to hold space for a variety of perspectives beyond their own.

When you hear from one survivor of human trafficking, you build empathy and grow your understanding of ways in which trafficking occurs and causes harm; and yet you have still heard only from one survivor. Additionally, many programs preparing survivor-leaders focus on leadership-building and public speaking, but do so from the perspective of one framework, rather than preparing survivors to hold space for a variety of experiences unlike their own. How will a survivor-leader whose primary framework for understanding the sex trade is exploitation support survivors whose framework hinges on bodily autonomy and consent?

When incorporating survivor input or leadership for your program, be aware of:

- Appropriately compensating survivors for their consulting and guidance to avoid replicating harms of exploitation. Many survivors already have a set consulting fee, so asking is appropriate. Be aware in compensating survivors of human trafficking that many have experienced economic harm they may still be recovering from, so providing expenses upfront rather than expecting them to wait on reimbursement is best practice. Similarly, offering direct payments rather than gift cards is ideal. If a survivor is unsure of how to set a consulting fee, be fair in explaining consulting fee ranges, and refer the survivor to more experienced survivor leaders and leadership networks for guidance. Always expect to compensate survivors for consulting or work positions, but thoughtfully consider allowing them to apply for existing volunteer positions on a case-by-case basis. For example, a survivor may desire to

“Survivor” is a descriptor of someone’s relationship to a specific kind of life experience, not a skill set, and the survivors you work with will each have their own unique skill sets, strengths, triggers, experiences, professional certifications, and areas of expertise.
become an advocate in a rape crisis program that staffs the hotline with volunteer advocates or serve in an unpaid position on the board of directors.

- Maintaining appropriate professional and ethical boundaries with survivors who have been through your program or with whom you have a current or prior provider-client relationship. There is an inherent power dynamic in providing services to survivors, and many survivors pressure themselves to show gratitude or please providers they feel have helped them in the past and feel less empowered to say “no” to requests to share their story or provide assistance. How does your agency navigate this dynamic with survivors of other kinds of sexual violence?

- The fact that with crisis agencies, there isn’t typically a hard line at which point a client stops needing services. An emergency client who comes to your agency while still in or just after exiting their trafficking situation may access the hotline for years to process triggers as they arise just like other rape crisis clients do, or access your other services, support groups, or therapy program. Implementing a strict timeline between “graduation” from services and ability to provide feedback or leadership may be an arbitrary rule depending on the services you provide. Again, look to how you navigate these boundaries with your other rape crisis clients for insight.

- Being thoughtful about where the survivor is in their healing. Some programs attempt to bridge this gap by setting a period of time since leaving the trafficking situation or defining some other criteria for assessing readiness. Since part of the power and control dynamic of both sexual violence and human trafficking is the limiting of survivor choice and voice, consider a guided self-reflection process to help an interested survivor determine their own readiness for different forms of survivor leadership. If desired and/or appropriate (especially for survivors newer to survivor leadership), help them anticipate potential risks and triggers, which ones feel manageable, and which ones feel too overwhelming or harmful. For those anticipated to be manageable, support the survivor in identifying strategies for avoiding, minimizing, or working through challenging parts of the work. Many of the principles included in the section on staff resilience might be applicable to survivor leaders as well. If you anticipate survivors working in your program, ensure that they have access to your employee assistance program and sabbatical during times of crisis.

- Honoring the unique backgrounds, experiences, and beliefs of different survivors of human trafficking. Survivors will have different perspectives on a wide range of
issues, including arrest, prostitution stings, criminalization, religion, social workers, social services, law enforcement, sex work, pornography, and what it means to be a survivor. You can have and set professional expectations around survivors who work in or with your agencies; they will bring their own identities and awareness into their work, and this awareness can be expected to continually transform over time and with new experiences.

Survivor input into programs exists along a spectrum from minimal to deeply engaged. The following “Spectrum of Survivor Input” is adapted from the “Spectrum of Public Participation,” which was developed by the International Association for Public Participation to describe levels of participation in development of public policy.

Inform → Consult → Involve → Collaborate → Empower

**Inform**
At this level of participation, your program will keep survivors informed about program development and decisions affecting their care.

**Consult**
Your program will seek out, obtain, and review relevant feedback from survivors, incorporating feedback as appropriate or feasible.

**Involve**
Your program will work directly with survivors throughout the process of program development and implementation to ensure that survivor concerns and feedback are understood and considered.

**Collaborate**
Your program will work closely with survivors on each aspect of program development and implementation, from exploring options to making final decisions.

**Empower**
Your program will leave final decision-making power to survivors, and will implement the recommendations, strategies, and decisions that they develop.

The level of intentional participation that is ideal for or available to your program (or even your agency’s varying programs) will differ based on factors that may include proximity to potential survivor leaders in your area (and the unique skill sets of survivor leaders you
work with), whether or not a potential survivor leader chooses to disclose their status, or the kind of program or project. For example, best practice for the development of a survivor leadership network sponsored by your agency might be the “empower” level of survivor participation, while best practice for the development of a structured group therapy program using a specific modality might be “consult” or “involve,” unless you have access to a survivor who is also a professional clinician.

In that vein, remember that “survivor” is a descriptor of someone’s relationship to a specific kind of life experience, not a skill set, and that the survivors you work with will each have their own unique skill sets, strengths, triggers, experiences, professional certifications, and areas of expertise. Depending on what lived experience, training, education, professional development, or professional experience a survivor already has, and the nature of work done, you may be responsible for providing or coordinating appropriate training and professional development to support the survivor in the expected role. For example, a survivor who wants to be a peer advocate or mentor might benefit from completing your agency’s sexual assault advocate training, attendance at the NCVAN’s Victim Service Practitioner Academy, or completing certification as a Peer Support Specialist. Provide training and support where needed; respect professional experience and/or credentials where they already exist.

It is important to remember that not all survivors are open about their survivor status or feel comfortable sharing details of their story, even among dedicated anti-human trafficking professionals, for a variety of reasons. A survivor may choose not to disclose due to these disclosures being especially vulnerable, because of stigma within and outside of the anti-trafficking movement, because they may not want to draw attention to themselves, because it is none of anyone else’s business, or for any number of reasons. A survivor with professional experience may fear losing professional credibility and choose not to disclose because of some anti-trafficking professionals’ tendencies to categorize professional leadership in the movement into either survivor leadership who can speak to the trafficking experience or trafficking professionals who can speak to program design and development.

Frequently, survivors in the field may selectively disclose to those colleagues for whom their status feels relevant or with whom the disclosure feels safe. Do not assume that someone is open about their survivor status just because they have discussed it with you, or disclose a colleague’s survivor status to or in front of others without the survivor’s consent. Also, keep this in mind when crafting job titles, which will appear on documents, literature, business cards, and email signatures. A position titled “client advocate” whose description references a priority on hiring survivors will attract applications from a variety of survivors; a position
titled “survivor mentor” will only attract those who feel comfortable with mandatory disclosure in all settings as a job requirement.

Ways to incorporate survivor input and leadership into your agency may include:

- Seeking survivor feedback on curriculum, programs, outreach approaches, and language and images on promotional, fundraising, or outreach materials. Following up for additional feedback on a regular schedule for course corrections and continual improvement.
- Having survivors on your board or staff.
- Contracting with survivors on elements of safe housing, quality assurance, crisis counseling, advocacy, non-clinical group facilitation, and helping other survivors obtain and apply for assistance.
- Providing residential support. Remember, recruiting does happen in shelters and other residential settings, sometimes by other people coming in to apply for services. Survivors well into their path of recovery might be excellent at screening out recruiters due to their familiarity with trafficking dynamics.

Three final thoughts on survivor leadership and input: First, if your agency employs survivors who engage with other agencies (as board members, volunteers, or staff), consider having a written protocol around expectations regarding compensation, scope, and time. Second, some survivors may have a criminal record that may or may not be related to their trafficking experience. Consider developing a policy around how to handle background checks for survivor leaders who have direct contact with survivors or sensitive information, and consistently document any exceptions made to agency policy. Third, if you desire lived experience for a position that is local and involves in-person meetings or services and are having a difficult time finding human trafficking survivor leaders, consider the value of people with “trafficking-adjacent” experience. For example, someone who is not a survivor of human trafficking but has lived experience of homelessness or recovery from illicit drug use may be able to provide valuable insights that might otherwise be missed.

The movement against human trafficking is growing in its understanding and appreciation of the value and importance of survivor input, involvement, and leadership, and North Carolina is deeply engaged in that dialogue.
Faith-Based Anti-Trafficking Organizations

Faith-based organizations (FBOs) have made generous contributions to the anti-human trafficking movement in North Carolina. FBO and those in faith-based communities often have access to facilities, volunteers, social networks, and funding that can be used in creative ways, especially when they collaborate with professionals who are able to provide technical training on cultural competency and help direct communities to the work best suited for them.

Many nonprofits doing anti-human trafficking work are faith-based, and many professionals doing anti-trafficking work in other non-religious agencies, including many of North Carolina’s rape crisis centers, are deeply motivated by their religious or spiritual beliefs.

That said, those working in FBOs should think critically how the framing of human trafficking reflects our values and worldview, and how programs reflect beliefs, values, and ideals. Faith-based organizations receiving federal funding will have strict anti-discrimination guidelines in place to ensure compliance, but beyond legal compliance with funders’ mandates, agencies will want to consider how they implement faith-based service provision (and how they determine the appropriateness of referrals to faith-based providers) around several key issues.

It is best for FBO to be clear and transparent about how religious programming is implemented, especially regarding whether or not participation in religious practice is required for acceptance, or continuance in the program.

Even among faith-based providers, there are different expectations around client participation in religious activity. Some FBOs may have guidelines around staff religious affiliation but do not otherwise incorporate religion into their client programs. Others offer optional participation in religious activities such as scripture study, transportation to services, or transportation to social events hosted by faith communities. Some FBOs, particularly those funded primarily through private donations, incorporate a specific religious ideology into all aspects of programming, or require religious participation as part of continued residence or participation in the program. When making client referrals to a faith-based program, it is important to inquire about that specific program’s policies around
religious participation to ensure appropriateness for your client, as each FBO operates according to its own model and values.

Remember that many trafficking survivors experienced their period of exploitation as being forced to do things they didn’t want to do in order to have their basic needs – food, shelter, clothing, or “acceptance” – provided by their trafficker. In the National Human Trafficking Training and Technical Assistance Center webinar “Human Trafficking and Faith-Based Organizations,” Marissa Castellanos, social worker and director of Catholic Charities of Louisville’s human trafficking program, noted that FBOs replicate these patterns of coercion when they require participation in faith-based activity as part of providing shelter or other recovery services to survivors of trafficking. Additionally, the National Survivor Network’s document “The Change We Want to See in the Anti-Trafficking Movement” voices organized survivor opposition to mandatory religious participation: “Many survivors have felt forced to engage in religious practices in order to access services. It’s important that survivors are able to practice whatever religion they desire and feel they can still get the help they need, even if they don’t participate in religious practices.”

It is also important to avoid making assumptions about the religious affiliation or spiritual identity of clients or colleagues, or about what their religious affiliation means about their desire to offer or receive nonjudgmental support, as this could help you avoid missteps that could cost you trust and harm relationships. Within this movement, we have survivors and professionals from a variety of backgrounds. Someone who does not share a particular belief system might still have a deeply held belief and practice that brings them meaning and hope, and/or they might find meaning and hope in non-religious principles such as trauma recovery, mindfulness, or health and wellness. That said, those with deeply held religious affiliation may be a strong advocate for nondiscrimination and anti-oppression work. When working with survivors as a faith-based provider, your ability to connect with a client will be impacted by their ability to feel safe, heard, and unconditionally valued by you and your staff.
For some survivors, especially those whose religious beliefs and background are similar to those of the FBO, the opportunity to participate in a welcoming religious community will strengthen their sense of belonging and provide a healing container for their recovery from trauma. Other survivors may have religious trauma that makes participation in faith-based activity triggering or harmful to their recovery, or they may hold an identity that is not accepted (or is only conditionally accepted) by the agency’s religious doctrine.

LGBTQ+ youth, for example, are at increased risk of homelessness due to family rejection and are highly vulnerable to human trafficking, and this is particularly so for trans youth. These youth are not accepted by some anti-trafficking residential programs, or may be allowed into a program but asked to de-transition, placed in unsafe housing, or asked to sign agreements that invalidate their identity and belief in their own inherent worth. When faced with these options, many LGBTQ+ youth return to homelessness, unsafe housing, or their traffickers, not out of free choice but out of the coercion of limited options.

Additionally, when working with foreign-born survivors, you are especially likely to work with people whose birth countries and cultures have a dominant religion that is not the same as yours. Those survivors might benefit from connection to a religious community that your agency does not typically work with. Connecting a survivor, at their request, to a faith-based community whose beliefs and values are different from your own might feel challenging; it might also improve that survivor’s chances of continued recovery and wellness.

In both of the above examples, a faith-based organization’s full acceptance of a survivor’s identity and choice about religious participation can be restorative, build trust, and facilitate a process of repairing harm.

Whether you are developing programs for a faith-based anti-trafficking nonprofit, developing protocols around referrals to FBOs for your rape crisis center, or are a strongly faith-motivated professional hoping to clarify your own values around how your beliefs inform your work, consider the following questions and how they align with your mission and values:

- How does your desire to support survivors of trafficking and your desire to express your faith intersect? In what ways do you communicate those priorities for your funders, community partners, staff, and those seeking your services and support? How do you plan for implementation of your faith-based principles and practices in a trauma-informed, survivor-centered way?
• How might those who don’t share your religion experience your program? Is there religious language and imagery in your literature, online presence, and facility, and if so, is it language of recovery or hope that would likely feel supportive to people of a variety of backgrounds? Does your intake provide an open-ended question about religious affiliation? Are survivors from different faith backgrounds given opportunities to request and participate in their own faith-based practices and communities?

• Does your agency have an anti-discrimination policy? Does this policy include populations with increased vulnerabilities to trafficking? Is this policy implemented consistently at all levels of the program in ways that feel safe and empowering to the people affected? How are you evaluating consistent implementation and appropriate service provision? What capacity-building professional development are you providing staff at all levels to support their ability to implement the policy consistently and fairly?

• If your agency does not serve all survivors, do you have a protocol in place for referral of survivors to safe, appropriate, affirming services? What support do you provide for a smooth transition of care when a referral is necessary? Does your regional response team have a plan to provide emergency services for all survivors? If your work is statewide, are there geographical gaps without services for survivors with specific beliefs or identities? How are you working to fill identified gaps?

In addition to partnering with or referrals to faith-based anti-trafficking organizations, your community may include churches whose members will want to support your work with survivors of human trafficking. Let them know what your needs are; many religious and other community-based organizations will want to raise funds, host drives for needed supplies, and offer office assistance. Provide opportunities for two-way learning communities and training opportunities to education FBOs on trauma, sexual violence, and human trafficking from a public health model. In building partnerships with local faith communities, you strengthen your program and its ability to serve survivors from those faith backgrounds and create opportunities to educate and dispel myths around human trafficking, trauma, and vulnerability.
B. Highlights from the NC Human Trafficking Commission Standards

In 2019, the NC Human Trafficking Commission adopted its first ever document detailing expectations of direct service agencies. The Standards of Service for Survivors of Human Trafficking (“The Standards”) are available for download at the NCHTC’s website and provide detailed guidance on a number of expectations and programs. Each section lists inadequate protocols as well as what is expected to meet the minimum standards, and many sections offer guidance for exceeding minimum standards so that growing programs can envision future expansion and program improvement.

The Standards begin with a review of basic ethical standards across a variety of service models and settings, including qualifications, hiring, safety, standardized training topics, and client privacy and confidentiality. The remainder of the document is broken down into topics that address guidelines for specific services a program may offer (such as 24-hour hotline, emergency response, residential shelter, case management, or therapeutic intervention) or specific priorities a program may need to consider (such as media/fundraising, staff resilience, and organizational health). For sections on services, the standards are applicable for programs providing that service; not all sections will be applicable for all organizations. For services your agency does not provide, The Standards can provide helpful information for you to gather about community partners when considering referrals.

This manual will not attempt to review all the information in The Standards; much of the information and details on implementation have been covered elsewhere in this manual, and NCCASA is available to provide ongoing training and technical assistance around their implementation. In the development of The Standards, however, there were several questions that were frequently fielded by the ad-Hoc Standards Committee. Following is information that addresses commonly asked questions about a few sections of The Standards.

Ethical Standards

For concerns about licensure and certification for professionally certified providers (such as attorneys, social workers, and other clinicians), the ethical and documentation standards of the provider’s field are primary. The Standards document was not intended to replace a field’s code of ethics, but to ensure providers are appropriately licensed in their fields, and that each anti-trafficking agency meets minimum standards. Where licensure expectations are discussed throughout the document, providers are expected to maintain licensure
and/or certification in their relevant field. For example, anyone providing therapy services should be a licensed clinician in good standing. Healthcare should be provided by a licensed medical professional. An exhaustive list of accepted certifications is not provided in The Standards, as each agency is responsible for ensuring that the services provided or contracted are by qualified professionals.

The mandatory training topics listed in the Ethical Standards section are required for all staff who have direct client contact within the first 90 days of hire. Training in these topics might occur over the course of a single, in-depth orientation training, or as part of a customized onboarding process for each employee that takes their field, education, and prior experience into account.

**Media and Confidentiality Standards**

Over the course of preparing The Standards, the ad-Hoc Standards Committee repeatedly heard stories of survivors who felt obligated to share their stories to help fundraise for the agency that had helped them, or who felt pressured to share their stories with the media without adequate informed consent or preparation. Additionally, survivors and providers alike have provided feedback that the inherent power dynamic in the provider-client relationship makes getting true informed consent challenging when asking permission to share a client’s story. For this reason, The Standards encourage agencies to use composite stories in media, training, and fundraising outreach. A composite story does not mean simply changing the name and identifying information; it means taking elements of different survivor stories and piecing together a realistic but non-identifying story that can be shared in an educational or informational way. Any and all identifying details should be removed from composite stories.

Additionally, this section provides guidance on the use of sensationalizing or stereotyping imagery in literature, fundraising, marketing materials, and media kits. The UNC Chapel Hill-based Irina Project provides expert guidance and extensive documentation on their website about language and imagery to use or avoid. Imagery that shows bars over windows or people in chains perpetuates an inaccurate stereotype that trafficking always involves physical restraint, where many survivors of trafficking are recruited and trafficked using emotional or economic coercion instead. Imagery that sexualizes survivors – such as pictures of scantily-clad people negotiating a sex trade, actual photographs of listings in erotic advertisements, or unnecessarily detailed descriptions of sexual violation of survivors – rely on sensational cultural interest in sexuality in a way that further exploits survivors.
Images and language that provoke people’s Not In My Backyard fears (“It could be your daughter!”) obscure the reality that often struggling or marginalized people are targeted specifically because our society is not set up to protect or care for them, and that they deserve our compassion and advocacy as well. It is not just funders, professionals, and concerned citizens who will see these images and read these stories – survivors themselves will encounter them, and it is important both to minimize retraumatizing survivors through unnecessarily sensationalized content and to make sure that the survivors who see your materials can see themselves, and compassionate care for people like them, in the language and images you choose.

One final thought on language: Be clear about what you mean. When you say, “selling a girl,” do you mean selling a child to another person similar to how humans were sold during the chattel slave trade? Or do you mean “selling sex with a woman” or “selling sexual access to a child for abuse”? Both of these can happen as part of human trafficking, and it is important for professionals to use clear language in their writing and outreach. Remember that sexual trafficking of children is sexual abuse; there is no such thing as a “child prostitute.” “Child pornography” is actually child sexual abuse imagery or materials. Be thoughtful about the use of the word “slavery” and language related to the abolition of chattel slavery; many Americans find the conflation of all forms of human trafficking with “slavery” offensive in the historical context of US Chattel Slavery. (See the National Sexual Violence Resource Center blog post “Reconsidering the Use of the Terminology ‘Modern Day Slavery’ in the Human Trafficking Movement” by Sarah Harrison.) And remember that conflation of consensual sex work and sex trafficking will alienate many would-be allies in the movement to end human trafficking, including trafficking survivors with a diversity of lived experiences and identities.

Emergency Response

One of the standards addressed under emergency response services states that emergency response includes coordinating a survivor’s safe removal from a trafficking situation, engaging law enforcement as required by mandatory reporting or survivor request, through trauma-informed care with the understanding a survivor may choose not to leave the situation. Obviously, for minor survivors, providers are bound by mandatory reporting guidelines, and for adults who are genuinely unable to express their desires law enforcement may plan an intervention.

For adult survivors who have contact with you while still in their trafficking situation, using an empowerment model that centers survivor choice means allowing the survivor the
opportunity to choose if, when, and how to exit their trafficking situation. If a survivor expresses interest in safe exit, talk through strategies and assist the survivor in engaging law enforcement if needed for safe exit, following a similar approach as is used with survivors of intimate partner violence.

As you continue to build collaborative partnerships with law enforcement, you may be contacted by law enforcement to support survivors as part of or in the immediate aftermath of a sting or extraction. These can be opportunities to discuss trauma-informed practice and create processes that are less frightening for survivors. Be clear about your confidentiality practices with law enforcement (so that they do not expect you to be an informant or investigator), and be clear about your relationship with law enforcement when talking with the survivor (so that they understand you are not a law enforcement agency). Not all confusion can be avoided, but common misunderstandings can be anticipated. If survivors do not exit in that moment, consider leaving them with contact information, perhaps in the form of a discrete product such as a lip balm with a special label or a small compact mirror. However, be aware of risks for further violence if a trafficker finds such items in their possession. Talk through the safety implications of providing hotline numbers and other information.

### Outreach and Indicator Standards

It is important for your program to have a clear safety plan for outreach activities. Legal Aid of North Carolina has a clear model policy for their migrant farm camp outreach that you might refer to as an example. Things you might include: always working in teams of at least two, documenting in advance where you are going and when, obtaining consent to speak with someone (as they may or may not feel safe speaking with you when you first approach), protocol for if a weapon is present, or criteria for engaging outside resources (including law enforcement). Even passionate staff and/or advocates may not feel safe in some communities and spaces where outreach is most useful; this is an area where engaging survivors of human trafficking, people with “trafficking-adjacent” experience, and/or outreach workers from the affected communities may prove useful.

### C. Next Steps

In working through this manual, there were likely pieces where you realized the strengths of your existing frameworks and programs to support survivors of human trafficking; there may also have been pieces that highlighted additional agency needs around capacity-
building, funding, professional development, staffing, or community engagement to strengthen human trafficking services. Wherever you are, start there.

- Consider conducting a community readiness assessment (such as the Tri-Ethnic Center Community Readiness Model) to determine how to focus resources and energy.
- If community partners or law enforcement are not aware that human trafficking is a problem in your county, conduct outreach and awareness activities to build knowledge. The State Bureau of Investigation has a unit dedicated to human trafficking who can help you educate local law enforcement about how trafficking happens throughout the state.
- Examine existing programs to figure out which pieces of human trafficking programming are a natural fit. Begin with strengthening existing training and programs. Expand programs as makes sense. Add in new programs as capacity allows.
- Be realistic about how much you can take on. You are already serving survivors of human trafficking and will continue to do so whether they disclose or not, but you might not have the capacity to organize local efforts, head up a regional response team, or add in new programs. Partner with other community agencies when possible and feasible.

NCCASA is available to provide ongoing training and technical assistance to member agencies. Reach out with questions; we are here to support your work.
Throughout the manual, specific resources are mentioned as examples, frameworks, or best practices.

This section of the manual provides a list of several key resources referenced in the manual, lists helpful organizations and recommended reading, and includes:

A. North Carolina Resources
B. Other Resources
   - Anti-Trafficking Organizations and Agencies
   - General Crime Victim Services
   - Prevention, Healthcare, and Holistic Services
   - Homelessness and Trafficking Resources
   - Criminal Justice Resources
C. Charts, Documents, Tools
   - Model for Client Contact
   - Multidisciplinary Task Force Model
   - Collaborative Service Plan Worksheet
   - Transtheoretical Model ("Stages of Change")
   - "Five Domains of Wellbeing" from the Full Frame Initiative
   - Suggestions for Trauma-Informed Care Across the Multidisciplinary Team
   - List of Prevention Curriculum
D. Recommended Reading
   - Books on Trauma

Acknowledgements
VI. Resources

Following is a list of resources that NCCASA’s member agencies have found helpful in their service to survivors of human trafficking.

A. North Carolina Resources

North Carolina Coalition Against Human Trafficking
http://www.nccaht.org

North Carolina Human Trafficking Commission
https://www.nccourts.gov/commissions/human-trafficking-commission

North Carolina Coalition Against Sexual Assault
http://www.nccasa.org

North Carolina Coalition Against Domestic Violence
http://www.nccadv.org

Child Advocacy Centers of NC
https://cacnc.org/

North Carolina Victim Assistance Network
https://www.nc-van.org/

North Carolina Statewide Automated Victim Assistance and Notification (see: victim’s services)
https://www.ncdps.gov/

Council for Women and Youth Involvement (see: Project CLICC)
https://ncadmin.nc.gov/advocacy/women/human-trafficking

Project NO REST at the UNC School of Social Work
https://www.projectnorest.org/

Teach 2 Reach Prevention Curriculum at the UNC School of Social Work
http://teach2reach.web.unc.edu/
The Irina Project at the UNC School of Media and Journalism
http://www.theirinaproject.org/

Public Intersection Project Trafficking Resources from the UNC School of Government
https://www.sog.unc.edu/resource-series/human-trafficking

Project FIGHT of the Salvation Army
https://www.salvationarmycarolinas.org/wakecounty/programs/social-ministries/project-fight/

World Relief Triad
https://worldrelieftriad.org/

North Carolina DHHS Injury and Violence Prevention Branch
https://www.injuryfreenc.ncdhhs.gov/

North Carolina Area Health Education Centers
https://www.ncahec.net/

Legal Aid of North Carolina (most legal issues)
http://www.legalaidnc.org/

Justice Matters (immigration, family law)
https://www.justicemattersnc.org/

US Committee for Refugees and Immigrants (immigration)
https://refugees.org/field-office/north-carolina/

Pisgah Legal Services
https://www.pisgahlegal.org/

Charlotte Center for Legal Advocacy
https://charlottelegaladvocacy.org/

NC Coalition to End Homelessness
https://www.ncceh.org/
NC Harm Reduction Coalition  
https://www.nchrc.org/

Alcohol/Drug Council of NC  
https://www.alcoholdrughelp.org/

NC Peer Support Specialist Program  
https://pss.unc.edu/

NC Farmworker Advocacy Network  
http://ncfan.org/

NC State Bureau of Investigation, (see: Human Trafficking Unit)  
https://www.ncsbi.gov/

NC Gang Investigators Association  
https://www.ncgangcops.org/

Goodwill Industries of NC (see: job services and career centers)  
https://www.goodwillnwnc.org/

B. Other Resources

Anti-Trafficking Organizations and Agencies

National Human Trafficking Hotline  
https://humantraffickinghotline.org/

Polaris Project  
https://polarisproject.org/

Freedom Network USA  
https://freedomnetworkusa.org/

Shared Hope International  
https://sharedhope.org/
Sexual and Intimate Partner Violence Resources

National Alliance to End Sexual Violence
https://www.endsexualviolence.org/

National Sexual Violence Resource Center
https://www.nsvrc.org/

National Network to End Domestic Violence
https://nnedv.org/

Futures Without Violence
https://www.futureswithoutviolence.org/

Reliance: Ending Sexual Violence in One Generation
http://www.reliance.org/

A Call to Men: The Next Generation of Manhood
http://www.acalltomen.org/

National LGBTQ Institute on IPV
http://lgbtqipv.org/

FORGE (anti-violence capacity building for transgender survivors)
https://forge-forward.org/

General Crime Victim Services

Family Justice Center Alliance
https://www.familyjusticecenter.org/
Office for Victims of Crime Training and Technical Assistance Center
https://www.ovcttac.gov/

Prevention, Healthcare, and Holistic Services

HEAL Trafficking (Healthcare Advocacy Education Linkage)
https://healtrafficking.org/

Centers for Disease Control and Prevention Violence Prevention Resources
https://www.cdc.gov/violenceprevention/

Full Frame Initiative
https://fullframeinitiative.org/

Dignity Health PEARR Tool
https://www.dignityhealth.org/humantrafficking

International Association for Public Participation
https://www.iap2.org/

Mental Health First Aid
https://www.mentalhealthfirstaid.org/

Substance Abuse and Mental Health Services Administration Treatment Finder
https://findtreatment.samhsa.gov/

Oxford House Sober Living Homes
https://www.oxfordhouse.org/

LaVare’s House (LGBTQ+ sober living home in Durham, NC)
https://www.lavareshouse.org/

Homelessness and Trafficking Resources

Covenant House (See: human trafficking studies)
https://www.covenanthouse.org/homeless-issues
Point Source Youth (training and technical assistance for youth homelessness solutions)
https://www.pointsourcemyouth.org/

National Alliance to End Homelessness
https://endhomelessness.org/

Catholic Worker Homes
https://www.catholicworker.org/

Criminal Justice Resources

International Association of Human Trafficking Investigators
http://www.humantraffickingtraining.info/

National Criminal Justice Training Center
https://ncjtc.fvtc.edu/

Human Trafficking Investigations and Training Institute
http://www.humantraffickingtraining.info/

C. Charts, Documents, Tools

Model for Client Contact

Adapted from Project West’s Training Materials

Step 1) Safety check. Plan in advance with the client for how to handle it if someone else comes on the line or a code phrase for if there is another person around.
Step 2) Recognize red flags in children and adults, and clarify (if needed) what to do in case of a mandatory report.
Step 3) As needed, ask general trafficking assessment questions. This should be tailored to a given situation and should be modified as needed to be supportive and appropriate for the client.
Step 4) Assess and collect any needed information for the regional response team.
Step 5) Activate regional response team action flowchart.
Transtheoretical Model (“Stages of Change”)

The Transtheoretical Model outlines stages people go through as they prepare for and implement changes in their lives. The most commonly discussed stages people progress through are precontemplation, contemplation, preparation, action, and maintenance. People begin most change with precontemplation, in which they are not yet ready to take action in the foreseeable future, and as they move through the cycle, they sometimes will exit and reenter at different stages.

Awareness of this model may be helpful for advocates and multidisciplinary team members in understanding why a survivor may not be ready to exit their trafficking situation or might exit and re-enter several times before finally leaving. A more detailed explanation of this model is available at [http://www.prochange.com/](http://www.prochange.com/).

“Five Domains of Wellbeing”

The Full Frame Initiative has identified five domains of life that foster a sense of well-being and can inform both our prevention work as well as the manner in which we structure and deliver direct services to survivors. According to this model, all people need:

1) social connectedness to people and communities, in ways that allow us to give as well as to receive; 2) stability that comes from having things we can count on to be the same from day to day, and knowing that a small bump
won’t set off a domino-effect of crises; 3) safety, the ability to be ourselves without significant harm; 4) mastery, feeling that we can influence what happens to us, and having the skills to navigate and negotiate life; 5) and meaningful access to relevant resources to meet our basic needs without shame, danger or great difficulty.

The “Five Domains of Wellbeing” model notes that in order to access each of these domains of well-being, people often have to trade off full or partial access to others. Successful, holistic programs will work at minimizing the need for these tradeoffs, ensuring that people have access to safety without sacrificing mastery, for example, or that survivors do not have to sacrifice stability in order to access basic needs of life. At the Initiative’s website (https://fullframeinitiative.org), you can access more information, training webinars, and a full toolkit on incorporating the “Five Domains of Wellbeing” into your programming.

**Suggestions for Trauma-Informed Care Across the Multidisciplinary Team**

When working with your multidisciplinary team, remember that trauma-informed care improves each discipline’s ability to work with a survivor. A survivor who receives trauma-informed care in a hospital will trust the provider more and be more likely to reveal helpful information to support their treatment. A survivor who receives trauma-informed care from investigators may feel safer cooperating with investigators and be more reliable as a witness.

*What does “trauma-informed” look like in different settings?*

For **medical**, it may include explaining before performing assessments and treatments or touching the survivor. It might include allowing time for detox when needed, making sure a sleep-deprived client has the opportunity to rest before non-urgent care, or asking if a client would like something to eat. It means allowing for survivor choice around contacting family (if the survivor is legally able to make that decision) and offering an opportunity to meet with a social worker before moving into non-urgent medical planning.

For **law enforcement**, it might mean remembering that a survivor who has been restrained by their trafficker is likely to be frightened or have a trauma response to handcuffs, cells, or other confined spaces. It means offering clothing or food before attempting to conduct an interview, allowing a quiet rest space, and remembering how trauma impacts both memory and disclosure. It may take a few interviews for the full story to come out. Law enforcement
would do well to be aware of how gender plays into the interview; a survivor who was trafficked by or regularly harmed by men might be fearful of a male officer.

For **attorneys and legal staff**, it means taking time to gain the survivor’s trust, and meeting somewhere that the survivor is comfortable and feels safe. Maintaining appropriate boundaries will help the survivor restore a sense of safety since trafficking involves violation of boundaries, so offer honest and realistic expectations and avoid overpromising. Be thoughtful to avoid blaming questions and remember that a survivor may be scared to rat someone out. Go slowly, speak plainly, and remember to safety plan where appropriate.

**Prevention Curriculum**

*See NCCASA’s Human Trafficking Prevention Curriculum Matrix for details about these and other curriculum.*

**Love 146 Not a Number**  
https://love146.org/notanumber/  
“Not a #Number is an interactive, five-module prevention curriculum designed to teach youth how to protect themselves from human trafficking and exploitation through information, critical thinking, and skill development. Not a #Number uses a holistic approach focusing on respect, empathy, individual strengths, and the relationship between personal and societal pressures that create or increase vulnerabilities... The curriculum was developed for youth ages 12-18, including male, female, and youth that identify as LGBTQ.”

**Teach2Reach**  
http://teach2reach.web.unc.edu/  
“This project aims to enhance the well-being of middle and high school students across North Carolina (NC) by developing evidence-informed and developmentally appropriate content and protocols to teach students about sex trafficking and connect at-risk students with needed services. These materials are being developed for use in NC public schools, including alternative schools for higher risk students.” Curriculum is designed for 7th, 8th, and 9th grade use with all genders, and is coordinated with NC’s health curriculum standards for each grade. NCCASA was a partner in the creation of this curriculum.

**My Life My Choice**  
https://www.mylifemychoice.org/prevention  
“The first comprehensive exploitation prevention curriculum in the nation, our nationally-acclaimed ten-session exploitation prevention curriculum equips disproportionately
vulnerable girls with the tools and knowledge needed to protect themselves from exploiters... While the Curriculum can be used as primary prevention, it is primarily a secondary and tertiary level of prevention, designed to reach the most vulnerable girls; those who are disproportionately at risk for victimization and those who are involved with the child welfare system... The curriculum is gender specific.”

**Project STARFISH**
http://projectstarfish.education/
“STARFISH is an educational tool developed by academics, researchers, social workers, and teachers, designed to raise awareness and provide education about the social injustice of sex trafficking in the United States. This is a free resource for school administrators and educators to utilize that provides a safe and age-appropriate way to educate middle school and high school students on the issue of sex trafficking. This resource also provides ideas for mobilizing students to action in educating their peers about risk factors and warning signs and taking a stand against sex trafficking. All of the content on this website is free of charge and is available for printing and implementing in the classroom.”

**D. Recommended Reading**

*The United States Attorneys Bulletin November 2017 Volume 65 Number 6*
https://www.justice.gov/usao/page/file/1008856/download

*Guiding Principles for Agencies Serving Survivors of Human Trafficking in the Regional Southeastern US*
https://www.acf.hhs.gov/otip/news/region4guidingprinciples

**Books on Trauma**

*The Body Keeps the Score* by Bessel Van der Kolk
*Life After Trauma Workbook* by Dena Rosenbloom and Mary Beth Williams
*Trauma and Recovery* by Judith Herman
*Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others* by Laura van Dernoot Lipsky
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