RESPOND, EDUCATE & ADVOCATE TO END SEXUAL VIOLENCE

UNDERSTANDING HUMAN TRAFFICKING AND HOW TO RESPOND

CARLOS GOLFETTO, PH.D., LPC, NCC, ACS
CERTIFIED EMDR THERAPIST
DIRECTOR OF CLINICAL SERVICES
Outline

• PAAR - Overview
• Who We Serve
• Trauma-Informed Care
• Human Trafficking
  • Sex trafficking
  • Commercially Sexually Exploited Children (CSEC)
PAAR’s Mission
To respond, educate, and advocate to end sexual violence.
Human Trafficking
Vulnerable populations

Diagram showing the following factors:
- Race
- Education
- Sexuality
- Ability
- Age
- Language
- Culture
- Ethnicity
- Gender
Recruitment

TACTICS TO ENSURE CONTROL –

- Manipulation
- Create an illusion of family structure
- Become a role model and/or parent figure
- Degrading, threatening, and controlling behavior
- Provide occasional indulgences
- Violent or abusive behavior

Recruitment

PRIMARY FORMS OF RECRUITMENT

- FAMILY
- ADULT “FRIENDS” OR “BOYFRIENDS”
- PEERS
- ONLINE
  - Message or “friend request” from an unknown account
  - Might engage in live chat and video/photo sharing

University of Minnesota – Mapping the Market for Sex with Trafficked Minor Girls in Minneapolis (Sept. 2014)
Recruitment

Recruitment Locations

- Parties
- Schools
- Libraries
- Shelters
- Malls
- Abandoned Buildings
- Bus Stops & Bus Rides
- Juvenile Detention Centers
- Parks

University of Minnesota – *Mapping the Market for Sex with Trafficked Minor Girls in Minneapolis* (Sept. 2014)
Recruitment
EXPLOITATION CONTINUED FOR TWO OR MORE YEARS

DON’T SEE THEMSELVES AS BEING EXPLOITED

UNDER AGE 14 WHEN EXPLOITATION STARTED

75%

75%

50%
The market and demand

THE LOCAL LANDSCAPE

Commercial Sex Arrests by the Numbers

6,042 arrests for SELLING sex

1,519 arrests for BUYING sex

The Institute to Address Commercial Sexual Exploitation – Villanova University, report on Commercial Sexual Exploitation in Pennsylvania (2016)
Recognizing the Signs: The Polaris Project

Common Work and Living Conditions:

- Is not free to leave or come and go as he/she wishes
- Is in the commercial sex industry and has a pimp / manager
- Is unpaid, paid very little, or paid only through tips
- Works excessively long and/or unusual hours
- Is not allowed breaks or suffers under unusual restrictions at work
- Owes a large debt and is unable to pay it off
- Was recruited through false promises concerning the nature and conditions of his/her work
- High security measures exist in the work and/or living locations (e.g. opaque windows, boarded up windows, bars on windows, barbed wire, security cameras, etc.)
Recognizing the Signs: The Polaris Project

Poor Mental Health or Abnormal Behavior:
- Is fearful, anxious, depressed, submissive, tense, or nervous/paranoid
- Exhibits unusually fearful or anxious behavior after bringing up law enforcement
- Avoids eye contact

Poor Physical Health:
- Lacks medical care and/or is denied medical services by employer
- Appears malnourished or shows signs of repeated exposure to harmful chemicals
- Shows signs of physical and/or sexual abuse, physical restraint, confinement, or torture
Recognizing the Signs: The Polaris Project

Lack of Control:
- Has few or no personal possessions
- Is not in control of his/her own money, no financial records, or bank account
- Is not in control of his/her own identification documents (ID or passport)
- Is not allowed or able to speak for themselves (a third party may insist on being present and/or translating)

Other:
- Claims of just visiting and inability to clarify where he/she is staying/address
- Lack of knowledge of whereabouts and/or of what city he/she is in
- Loss of sense of time
- Has numerous inconsistencies in his/her story
Common Responses to Sexual Trauma

**Emotional**

**Behavioral**

**Beliefs**

- Trust
- Can't sleep.
“It seems like you’re a little scared of your (boy)friend. Would you like to talk about that with me?”

“It’s tough to be out there on your own. How are you surviving on the streets?”

“Has anyone ever asked you to have sex in exchange for a place to stay, food or money?”

“Did you ever have sex with someone when you didn’t want to?”

“Did anyone ever take photos of you? If yes, what did they do with the photos?”
What do I say?

I’m sorry that happened. I want you to know it wasn’t your fault.

You aren’t alone; there are services to help you through this.

I want you to know that regardless of the circumstances, this shouldn’t have happened.

I know this is difficult to talk about. It’s important that the right people are involved so we can help keep you safe.

I’m glad you told me – it’s important that you feel safe and supported.
Treatment Considerations

MULTIDIMENSIONAL NEEDS

- Intensive case management
- Medical
- Behavioral health
- Legal / immigration
- Improvement of basic living conditions
- Social connection
Treatment Considerations

BARRIERS FOR TREATMENT

- Distrust of authority and institutions
- Fear of deportation
- Language
- Unfamiliar with the health care system
- Uninsured
- Lack of support and resources
Keeping perspective

- Don’t expect a victim to RECOGNIZE THEIR SITUATION AS EXPLOITIVE, or to present themselves as a victim in need of immediate help.

- Do meet a victim where they are and on their terms, and TRY TO MEET THE NEEDS THEY PRESENT.
RESPOND, EDUCATE & ADVOCATE TO END SEXUAL VIOLENCE

81 S. 19TH ST.
PITTSBURGH, PA 15203
P: (412) 431-5665

1-866-END-RAPE
PAAR.NET