

**Understanding Sex Trafficking and its Impact in North Carolina: Implications for School,
Career and Clinical Mental Health Counselors**

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Abstract

Domestic sex trafficking of minors is a hidden, yet crucial issue for counselors to be aware of in North Carolina. North Carolina currently ranks tenth in the nation for sex trafficking with Charlotte at the epicenter. Vulnerable youth who are run-aways, feeling “lost,” and/or impoverished are often the targets for traffickers. Federal and state laws have been put in place to detail the illegal actions of sex trafficking and the penalties for engaging in such behavior. Furthermore, in 2019, the North Carolina legislature passed a Child Sex Abuse/Strengthen Law, which included a mandate for all public schools, including charter schools, to train school employees who work directly with students about learning about the warning signs of sex trafficking. Those who have fallen victim to sex trafficking have many needs and like staff within the schools, counselors should also be prepared to assist this population. Therefore, North Carolina counselors’ competencies should include understanding sex trafficking, awareness of sex trafficking subculture, current public policy, survivor challenges, and trauma-centered approaches including collaborating with culturally-specific organizations to best fit survivors’ individual needs. Implications for clinical mental health, school and career counselors are discussed.

Key words: North Carolina, domestic sex trafficking, cognitive behavior therapy, trauma centered

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“The modern day slave trade is a multi-billion-dollar industry. Worldwide, 40.3 million individuals are trafficked for labor, sexual exploitation, and profit. This problem is global — it reaches from the most distant shores to our very own neighborhoods, [even in North Carolina]” (Project FIGHT, 2020, ¶1). While there is no true census (Kotrla, 2010; Polaris, 2014), many sex-trafficked adults began as children, totaling over 300,000 sex trafficked victims in the United States (Kotrla, 2010). In the Carolinas, over 4,000 cases of human trafficking have been reported since 2007. More than 65% of them were trafficked for sexual purposes. More than 30% of these victims are minors. The youngest clients in Project FIGHT (Freeing Individuals Gripped by Human Trafficking) are just eleven years old. (Project FIGHT, 2020).

In North Carolina, the Salvation Army's Project FIGHT serves throughout the state through their offices in Raleigh, Charlotte, Durham, Asheville, Greenville, and Boone. Project FIGHT is a comprehensive holistic case management program that assists survivors with assessments and case management including legal help, housing, clothing and food in order to stabilize them. In time Project FIGHT will connect survivors with medical care, mental health services, employment, to help them be stabilized and self-sufficient (Project FIGHT, 2020).

According to the National Human Trafficking Resource Center, there is now an average of 78 sex trafficking cases every year in North Carolina, and Charlotte ranks as first on the list of cities in the nation. To understand the gravity of the problem in Charlotte, there are at least five-hundred new ads posted soliciting sex in Charlotte every day. (“Charlotte Stories,” 2020). Cities like Charlotte, North Carolina—an urban area with growing populations and affluence—are becoming magnets for human trafficking either as laborers or for sex trade. The most

vulnerable among those trafficked are young people, especially minors who lack family structure or are in foster care. In particular, people of color—especially African Americans—are at risk of exploitation (White, 2018).

What is more, Charlotte has become a mecca for this booming industry. According to Tammy Harris, the executive director and co-founder of *The Ursus Institute*, a non-profit fighting against sex trafficking stated

If you dig a little deeper, there are many reasons that cause trafficking to be so prevalent in Charlotte. We have a lot of major sports and highways. A lot of things in our city to drive up the demand for trafficking. You need to understand that perpetrators will lure those who have a need that's not being addressed. When you live in a city where we are 50th out of top 50 cities for economic mobility, so if you were born in poverty, you are more like to stay in poverty. If you are in a city where we have 5,000 children in CMS that are homeless, and so many foster care youths as well. You have a population that perpetrators can easily prey upon, and say, 'Hey, I can fulfill this need for food, shelter, belonging,' and they are more likely to go into that life. (Lundberg, 2018, ¶13)

Being sex-trafficked can result in multiple levels of physical and mental trauma, as well as economic, educational, and safety challenges (Dabby, Dawson, & Ortiz, 2015). Due to this reality, counselors need to expand their awareness of domestic sex trafficking in order to identify the full potential range of an individual's needs, build survivor-informed counseling knowledge, and develop skill competencies in order to be appropriately prepared for clients who are survivors of sex trafficking. The 2013-2017 Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States stated that “anti-trafficking efforts should be victim-centered and culturally relevant, holistic, comprehensive, evidence-based, gender-

responsive, and trauma-informed” (Departments of Justice, Health and Human Services, & Homeland Security, 2014, p.19). Policies such as this encourage counselors to see themselves as advocates within the communities in which they work.

According to experts who work with those affected by human sex trafficking, the lack of knowledge and understanding is the biggest challenge for service providers (e.g. school, career, and clinical mental health counselors), law enforcement and the victims as well. The victim of domestic sex trafficking usually is not aware of what services are available to them, thus these individuals go unidentified and underserved. Providers are not always aware of the services and resources available for survivors, which is missed opportunity to provide the best for the survivor/client (Clawson & Dutch, 2008). Therefore, future counselors need a solid understanding of the multi-faceted competency requirements surrounding this topic. Herein, this article will provide an overview of human sex trafficking, its impact on survivors, and implications for counselors working with survivors of human sex trafficking.

Background on Sex Trafficking

Sex Trafficking—What Is It?

As defined by the Victims of Trafficking and Violence Protection Act (VTVPA) of 2000, human trafficking is “the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act (p. 8)” with severe forms of human trafficking including “sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age” (Victims of Trafficking and Violence Protection Act of 2000, p. 8).

While North Carolina enacted on the federal VTVP Act of 2000 in 2013, the age of consent in North Carolina is 16, therefore law enforcement, prosecutors, medical professionals,

educators and advocates need to be aware of this federal definition and the Safe Harbor Laws for minors that are included in this act (Kotrla, 2010; Nation Human Trafficking Resource Center, 2015). If overlooked, this age discrepancy may ignore or marginalize the issues of the adolescent that is found in such a situation. A better understanding of what sex trafficking looks like and the overarching federal description of a minor is crucial in prostituting traffickers (Kotrla, 2010; J. Sandoval, personal communication, October 9, 2015).

The Law and Human Trafficking

Given the illegal nature of human trafficking, laws must be tailored narrowly enough to specific behaviors and activities as a legal cause of action. Human trafficking without narrowly tailored legal language could make it difficult to prosecute perpetrators of the practice. While sex trafficking is a state crime, Federal laws such as 18 United States Code, section 1591, make sex trafficking a federal crime and illegal to conduct the activities of a sex trafficking enterprise in a way that affects interstate or foreign commerce or that involves travel in interstate or foreign commerce...Section 1591 now provides in part the following: "Whoever knowingly in or affecting interstate or foreign commerce, or within the special maritime and territorial jurisdiction of the United States, recruits, entices, harbors, transports, provides, obtains, advertises, maintains, patronizes, or solicits by any means a person; knowing, or in reckless disregard of the fact, that means of force, threats of force, fraud, coercion ... , or any combination of such means will be used to cause the person to engage in a commercial sex act, or that the person has not attained the age of 18 years and will be caused to engage in a commercial sex act," shall be imprisoned not less than 15 years (not less than 10 years, if the victim is 14 years of age or older and the offender is less than 18 years of age). (Doyle, 2015, p. 2)

North Carolina General Statutes Chapter 14-43.10ff. closely resembles federal law, including the penalties which accompany conviction. (For more on NC General Statute see https://www.ncleg.net/enactedlegislation/statutes/html/bychapter/chapter_14.html)

Because the incidents of sex trafficking are high in North Carolina, in 2019, the legislature unanimously passed Senate Bill 199/House Bill 596, which was an act to protect children from sex abuse by improving prosecutorial options for delayed reports of child abuse, to expand the mandatory duty of reporting child abuse, and to protect children from online predators. The Governor signed the bill into law, which requires all public schools, including charter schools, to train school employees who work directly with students about learning about the warning signs of sex trafficking. The training program is supposed to include a) best practices from the field of prevention; b) the grooming process of sexual predators, c) the warning signs of sexual abuse and sex trafficking; d) how to intervene when sexual abuse or sex trafficking is suspected or disclosed; e) legal responsibilities for reporting sexual abuse or sex trafficking and f) available resources for assistance (Hui, 2019).

Victim Profile

There is no set profile of the people who have been pulled into sex trafficking: adults, minors, US or foreign born, immigrants (documented and undocumented), refugees, developmentally handicapped youth and adults, lesbian, gay, bisexual and transgendered individuals (Dabby et al., 2015; National Human Trafficking Resources Center, 2015). Minors are a growing percentage of sex trafficked victims, with several studies reporting that Domestic Minor Sex Trafficking (DMST) victims are recruited between the ages of 12 to 14 (Bigelsen & Vuotto, 2013; Dabby et al., 2015; Mehlman-Orozco, 2015). The Polaris Project, which operates the National Human Trafficking Resources Center (NHTRC) and its hotline, finds the age range

of initial sex trafficking closer to being between 14 and 17 years old (Polaris Project, n.d.). A 2010 comparison study of 1,229 human trafficking investigations found that 83% of the victims were sex-trafficked, and of this amount 63% were US citizens and 32% were minors (Kotrla, 2010).

The National Human Trafficking Resource Center (2015) stated that, out of 5,647 cases of sex trafficked minors in the United States between 2007 and 2014, 85% were female, 17% were male, and less than .5% were transgender. These same cases of sex trafficked minors involved 44% being of US citizenry, 21% of other nationalities, and the remaining did not report documentation at the time of the case studies. Sex trafficking can be found in urban and rural areas (NHTRC, 2015), as confirmed by Durham Police Department Detective J. Sandoval, who described the case of a sex-trafficked minor who was brought through Durham, NC and was ultimately rescued at a dairy farm in rural New York State (J. Sandoval, personal communication, October 9, 2015). Project FIGHT of Wake County, North Carolina serves survivors of human trafficking in the age range of 11 to 63 years old who are a majority of domestic client cases, with most of these being newly immigrated individuals (C. Milam, personal communication, September 30, 2015).

Minors who are runaways are at a greater risk of entering sex trafficking than non-runaways. In fact, one in six of the runaways reported in 2014 were likely victims of sex trafficking. Of this group, 68% were within the child welfare system when they ran away (National Center for Missing and Exploited Children, n.d.). Particularly susceptible to sexual exploitation after running away are lesbian, gay, bisexual and transgendered youth, since they may have been kicked out of their homes and feel they lack options for survival (Bigelsen & Vuotto, 2013; Dabby et al, 2015; Mehlman-Orozco, 2015).

In Durham County, NC there were 390 calls in 2014 to the Durham Police Department concerning adolescents of 17 or younger as potential runaways or missing persons. Of this same number, 31 of these adolescents had run away more than three times which is a high risk factor in becoming a sex-trafficked victim (Reiss, 2015). Traffickers target individuals with vulnerabilities. According to WCNC (2018), Joy—adopted daughter of Christian parents who loved her dearly—felt like she did not belong. She said

I felt like I didn't belong. So I moved out of my parents' house and started partying a little bit. I went to a club (in Atlanta) one night with a friend of mine, and she was not doing things that were very good. I remember she pulled out two or three thousand dollars, and I was strapped for cash. I was angry at my parents, angry at God, didn't feel like I belonged, needed a place to go, needed security and needed money. (¶ 17)

Once Joy was lured into sex trafficking the pimp moved her and the other females from Atlanta to Charlotte because there was a greater financial pay off. Victim profiling is very important to identify who the traffickers are. In addition to understanding who is trafficked, attempts to identify the method of recruitment is another aspect to consider.

Methods of Recruitment and Trafficking

Traffickers are the people providing and controlling those being sex trafficked. In gang run trafficking, young females are often recruited by older female adolescents, charming them with living a grander lifestyle, and even worse with direct threats and violence (Dabby et al., 2015; Sharma, 2014). In crime syndicates that are already involved in narcotics and arms trafficking, they expand business into sex trafficking since the money is so lucrative (Dabby et al., 2015; Kotrla, 2010). In transgender operations, it is often transgender women who are the traffickers, with mostly gay, transgender and heterosexual male minors being trafficked. Family

run trafficking operations may be realized through a system of debt and poverty, and therefore are not always an ongoing business. Sometimes this may be a one-time event of selling a child to make rent money or to pay a drug debt (Dabby et al., 2015).

In pimp-run businesses, individuals are targeted and often groomed for months, and in turn the minor may see the pimp as a source of security, shelter or provider of drugs (Dabby et al, 2015). Pimps become the potential victim's boyfriend creating a psychological control that includes physical abuse, but relies on emotional control as a major tool of power (Kotrla, 2010; Leidholdt, 2013). Victims often do not turn-in their pimps to law enforcement due to this "trauma-bond" (Mehlman-Orozco, 2014, p. 55). Case managers at Project FIGHT in Wake County, NC have voiced concern for this type of psychological entrapment or Stockholm syndrome over victims returning to their pimps multiple times before being able to make a more permanent break (C. Milam, personal communication, September 30, 2015). Some of these young women who were victimized were deeply afraid of their pimps due to the violence inflicted upon them.

The pimps would get girls pregnant to make sure that they would stay, so they would get a girl pregnant and take the baby. They would hold the baby and make sure that if something were to happen with the girl, he would do something bad to the baby. (WCNC, 2018, ¶22)

Sex trafficked victims are sold for 'tricks' anywhere (Dabby et al., 2015). From a survivor-based informational reporting system through NHTRC and BeFree Textline, over 35% were sold in hotel rooms, 16% were street-based, over 11% were sold in houses or residential brothels, 10% were delivered to the perpetrators, 3.75% sold at truck stops, and several other local places (Polaris, n.d.). The internet is a major source of advertising and solicitation as well

as a recruitment tool, with backpage.com being a primary source of where many victims are being offered for *services*, such as at places that offer massage, or nail salons, escort services, etc. (Dabby et al., 2015; J. Sandoval, personal communication, October 9, 2015; Polaris, n.d.).

According to Sandoval (personal communication, April 5, 2017), who receives ongoing information at training conferences and Sheriff education programs, information about sex trafficking is changing. The internet has become the bigger 'pimping inter-mediator' than decipherable gangs, not to say they are not involved. Due to the clandestine nature of trafficking details are evolving. From information given to him over the years, NC was "divided" up into three general gang run areas. Along the Eastern coast of the state, the trafficking rings were run by European gangs. They would use tourist shops and other venues. In the Northern/Central regions of the state, around Greensboro, trafficking rings were run by Asian gangs using massage parlors. For example, a Chinese massage parlor owner in Apex, NC, was arrested in connection with a trafficking ring that brought young Asian women to the Triangle from China into the Raleigh/Wake County area as well as in Johnston County, Charlotte, Greensboro, and Wilmington areas to work in brothels, exotic dance clubs, and massage parlors (abc11.com, 2016). In Charlotte and around the Triangle Latinx gangs there are mostly MS-13. This issue is multifaceted and, in some cases, involves gangs but it seems the internet has more of an impact (J. Sandoval, personal communication, April 5, 2017).

Consequences of Sex Trafficking

When a person returns from a devastating event such as domestic sex trafficking, they may start their lives with no possessions or attachments. There are several essential pieces that they will need to begin their healing process. Some of these necessities are safe housing, food, clothing, medical care, child care, physical safety, education, employment and many more. This

extensive list of basic needs can vary depending on if the patient is an international or domestic, and an adult or minor. According to law enforcement and service providers, all victims whether they are international or domestic, and adult or minor, the duration and the level of difficulty obtaining services is usually the greatest dilemma in acquiring these needs (Clawson & Dutch, 2008). The federal Victims of Trafficking and Violence Protection Act of 2000 assures multiple rights offered to victims including protection in the justice system and assistance with visa among other safeguard services (Dept. of Justice, 2014). In addition to the aforementioned consequences related to necessities, victims of sex trafficking experience health consequences—both physical and mental.

The health consequences due to human sex trafficking are complex because the victims experience physical and psychological harm. The traffickers use physical violence to dominate and control those trafficked. Some of the tactics include starvation, beatings, and rape including gang rape. Victims also experience violence and harm from some of the people who are purchasing the sex acts. Common physical injuries include broken bones, concussions, burns, and brain trauma. Additional physical injuries include, gynecological health problems, which are a result of forced commercial sex acts. More specifically, they may suffer from sexually transmitted infections, menstrual pain and irregularities, miscarriages, and forced abortions, among other gynecological issues (Kaylor, 2015).

The physical effects of sex trafficking are often coupled with mental or psychological effects. The mental health impact of victimization may be more severe than the physical violence (WHO, 2012). Victims who have been rescued from sexual slavery, typically present with various psychological symptoms and mental illnesses, including the following: a) post-traumatic

stress disorder (PTSD); b) depression; c) anxiety; d) panic disorder; e) suicidal ideation; f) Stockholm Syndrome and g) substance abuse (Kaylor, 2015).

Many physical and mental consequences result from sex trafficking and one of the most significant consequences is emotional distress due to “intrusions, which most commonly take the form of relatively brief, vivid sensory impressions such as images, sounds, body sensations, tastes, or smells” (Ehlers, 2010, p.141). For the client, these intrusions trigger memories which the client can never fully escape (Ehlers, 2010; Hom & Woods, 2013). Distressing and intrusive re-experiencing of the trauma is a hallmark symptom of PTSD (American Psychiatric Association, 1994) By simply hearing the same song that was playing while being transported to meet “clients,” the victim’s brain is overcome with flashbacks and images of the experience as if being transported back in time to the worst parts of their experience. Triggering can also happen as a result of simply socializing with men, being around addicts or other sex workers, or having the knowledge of how to return to the former pimp if desired (Hom & Woods, 2013).

Domestic sex trafficking also has an especially strong impact on the overall self-image of the victim. Both during and after the experience, they rate themselves based on the amount of expressed sexual interest. If the victim feels as if they are not being requested enough, they begin to feel as if something is wrong with them. In the context of a healthy relationship, if their partner does not express a perceived amount of sexual desire, then the victim feels like a failure, that no one desires intimacy with them, or that they are “dirty” or “trash.” There is also a perceived socio-cultural penalty that victims feel or experience when they return to society, particularly in sub-cultures that value purity and innocence before marriage. In such situations, the victim would be unable to accept the shame associated with breaking a pledge of abstinence, even if they were forced (Hom & Woods, 2013).

Victims also experience acute stress disorder where symptoms last from a few days to several weeks. This disorder begins to occur within four weeks after the trauma and is characterized by a) persistent re-experiencing of negative events, b) marked avoidance of stimuli, c) anxiety, d) hyper-alertness, and e) arousal or irritation with social and work distress. Victims are left in a state of paralysis in which they are unable to both recognize and make use of their available support resources. Stuck in a retrospective state of disbelief after an extended history of victimization, the victim has difficulty organizing their thoughts into a working plan for future survival and escape possibilities. Through repeated abuse by perpetrators, the victim projects the same distrust towards all people, and they become incapable of articulating their actual thoughts and feelings. Acute stress disorder is chronic only when characterized as lasting more than three months. This classification, however, is difficult to obtain because the onset of symptoms may be delayed up to six months following a stressful event. Acute stress disorder is caused by an event beyond the normal range of human experiences, including, but not limited to, a threat of death, serious injury, fear, helplessness, and/or horror. The victim becomes clinically and significantly impaired in both their social activities and their ability to work (Crane & Moreno, 2011). Understanding the nature and complexity of these consequences is important for developing the necessary competence to help those who have survived sex trafficking.

Implications for Counselors

Indicating Factors for Counselors to be Aware of

Minors who have survived sex trafficking may not even see themselves as victims in the first place, so it is important for counselors and other advocates to be aware of a variety of potential signs of trafficking (C. Milam, personal communication, September 29, 2015; National Center for Missing and Exploited Children, n.d.). While the indicators to lookout for may assist

childrens' service providers and advocates in identifying potential trafficked victims, it is also crucial to remember that these may be areas of concern without any connection to trafficking situations. Several indicating factors for counselors to lookout for in minors include:

a) chronic runaway [or] homeless youth, b) excess amount of cash in their possession (may be reluctant to explain its source), c) hotel keys and key cards, d) lying about age/false ID, e) inconsistencies when describing and recounting events, f) unable or unwilling to give local address or information about parent(s)/guardian, g) presence or fear of another person (often an older male or boyfriend who seems controlling), h) high number of reported sexual partners at a young age, i) sexually explicit profiles on social networking sites, j) injuries/signs of physical abuse (that they may be reluctant to explain), k) inability or fear of social interaction, l) demeanor exhibiting fear, m) anxiety, n) depression, o) submissiveness, p) tenseness, q) nervousness, r) is not enrolled in school or repeated absence from school, ... s) prepaid cell phone. (National Center for Missing and Exploited Children, n.d., p. 1)

What Counselors Can Do

Counselors are not isolated, building knowledge in the field of human trafficking policies, while developing collaborative relationships with culturally specific organizations that meet survivors' goals, and partnerships with medical and criminal justice professionals can create an effective task force of client-centered services (Dabby et al., 2015; Perdue, Prior, Williamson, & Sherman, 2012). It is a counselor's role to collaborate between the client's needs and culturally-specific organizations that may best fit the client's needs. Culturally specific organizations may offer wrap-around services for the survivors from translation services and religious support to housing and employment referrals (Dabby et al., 2015). In terms of working

with police departments there is much planning before a sex trafficking raid. Ideally advocates will be the first to communicate with the victims while the police secure the location and focus on the traffickers (J. Sandoval, personal communication, October 9, 2015).

Resources are prevalent on the internet to broaden knowledge around this area and deepen advocacy potential. Shared Hope International (<http://sharedhope.org/>) works on a global stage to bring awareness, training, and policy change around the issue of human trafficking. Polaris (www.polarisproject.org) is a central location of human trafficking statistics in the United States, news updates, and direct resources, including the National Human Trafficking Resource Center (<https://traffickingresourcecenter.org/>) which runs a national trafficking hotline number: 1-888-373-7888. The National Center for Missing and Exploited Children (<http://www.missingkids.com/>) brings together direct contact resources, statistical information and educational material for professionals in child welfare services, school communities and parents. On the state level as already mentioned, Project FIGHT is part of the Salvation Army (www.salvationarmycarolinas.org) and has five locations and they all offer holistic wrap-around case management services for human trafficking survivors. Transforming Hope focuses on domestic minor sex trafficking issues and is based in Durham, NC (<http://www.transforminghopeministries.org/>). They offer educational curriculum for schools that meet state educational standards and workshops for other organization to bring resources and advocacy to a local level.

When someone returns from being enslaved by sex trafficking, whether they are aware of it or not, there are many challenges and barriers that may prevent them from getting the best support possible in this time of need. The major challenges are the lack of knowledge and understanding, the availability of the services, the appropriateness of the service provided, the

access to the service, the length of the service, and the lack of coordination of services (Clawson & Dutch, 2008). While the aforementioned information is useful for counselors in general, the following sections give specific suggestions for school, career and clinical mental health counselors who can provide help and support to potential victims and survivors of sex trafficking.

School Counseling

According to the American School Counselors Association (ASCA), “school counselors are vital members of the education team. They help all students in the areas of academic achievement, career and social/emotional development, ensuring today's students become the productive, well-adjusted adults of tomorrow” (ASCA, 2020, ¶1). North Carolina legislature further defined the role of public school administrators including counselors which “requires local boards of education to address sex trafficking prevention and awareness” (“Senate Bill 279,” 2015, p. 1). School counselors will need to incorporate this knowledge base into their comprehensive school counseling programs.

As a school counselor, it is also important to be aware of how victims of sex trafficking are recruited as mentioned earlier and to know the indicators that might be shown from a victim of sex trafficking. The list of indicators a school counselor may see in a school setting is extensive and if a person does show one of these indicators, it does not necessarily mean they are a victim of sex trafficking, it just means it could be a possibility. The following is an exhaustive list of possible indicators that a school counselor might see: visible signs of abuse, PTSD, history of sexual abuse, history of running away, changes in physical appearance, tattoos, facial scars, lack of personal safety, isolation, emotional distress, homelessness, poverty, family dysfunction, new friends, substance abuse, mental illness, learning disabilities, developmental delay,

promotion of sexual exploitation by family members or peers and lack of social support (Human Trafficking In America's Schools, 2020).

School counselors should take an active approach to address sex trafficking to incorporate it into the school's curriculum. There are already curriculums being used in school today. Some examples include the Commodities High School Curriculum, the Not for Sale Campaign's High School Curriculum, The Prevention Project, Teach UNICEF's Child Trafficking Curriculum and North Carolina's own Transforming Hope Curriculum (*Child Sex Trafficking*, 2014; *Child Sex Trafficking* 2016; Gjermeni E., & Van Hook, M., 2012).

School counselors should also have protocols in place to ensure that schools have a plan to prevent sex trafficking from happening (*National Center on Safe Supportive Learning Environment*, 2020). Schools should increase staff awareness and educate staff on the indicators and the nature of the crimes. If staff is properly trained, they could save someone who has been victimized or save someone from becoming a victim. Schools should also increase parent and student awareness of the risks and realities of trafficking by incorporating this into the beginning of the year orientation for students and their parents. As part of this awareness campaign, schools should develop and clearly articulate district or school-wide policies and protocols for identifying a suspected victim or responding to a disclosure from a suspected victim. Furthermore, school staff should be specifically trained on risk factors for vulnerable children, and become proficient in identifying the signs and indicators of victims (Human Trafficking in America's Schools, 2014; Human Trafficking in America's Schools, 2020).

Schools should also make certain that campus security is in place so that all visitors are screened. Most schools today require that all visitors report to the office first. Some schools enforce precautionary measures such as having their doors locked without authorization, or

tracking visitors with photo identification and name tags to be visibly worn at all times while visiting the school (Human Trafficking in America's Schools, 2015; Human Trafficking in America's Schools, 2020). As part of the beginning of the year orientation, schools should also partner with local law enforcement experts to provide and awareness on the dangers and warning signs of child sex trafficking, and establish a strategy to protect the routes that students use to travel to and from schools. Children may walk or ride a bike to and from school so it would be beneficial for police to patrol these areas during school traffic times (Human Trafficking in America's Schools, 2015; Human Trafficking in America's Schools, 2020).

Career Counseling

“The two most common goals of career counseling are the selection of an occupation and the adjustment to an occupation” (Sharf, 2013, p. 15). In regards to the population of domestic sex trafficking victims, the career counselor will play a major role in assessing the victim's skills, abilities, and education as it relates to occupational interests. Career counselors often take a holistic approach in regards to assisting clients, in order to ensure all of their needs are being met (Duggan & Jurgens, 2007). The counselor will also assist with interventions to help clients transition into self-sufficiency, help to provide training and education resources, and complete referrals to other agencies. The assessment of interests in career counseling is very important in job placement and career decision-making (Bullock-Yowell, Pearson, Wright, Reardon, & Mohn, 2011). Therefore, when assisting with clients, it is necessary for career counselors to assess the abilities and/or interests of the clients, to help them with their career choice.

Resources

If necessary, the counselor can provide resources for the client to obtain his/her GED or enter job training programs such as Job Corps. Another great tool would be the use of Career One Stop, which is a collection of internet resources, job banks, and service providers to assist clients in job placement and training (Duggan & Jurgens, 2007). In addition to those resources, the counselor may also provide assistance in regards to resumes, interviews, and job shadowing. If the client has very little knowledge about the job he/she would like to pursue, job shadowing provides a great opportunity for the client to see firsthand what the job requires and determine whether or not they would still like to pursue the job.

As mentioned earlier, clients within this population have a variety of needs and would definitely need assistance re-adjusting to society and becoming self-sufficient. In order to address and meet these needs, the counselor would need to make referrals to different agencies. The counselor would need to be familiar with local providers of support services, so they can holistically assist the client and point them in the correct direction to address housing, health care needs, food, substance abuse, etc. (Duggan & Jurgens, 2007). Doing so places the client in a great position to receive the assistance they need to survive until they have fully transitioned into self-sufficiency.

Assessments

In regards to this population, the two assessments needed are the Self-Directed Search (SDS) inventory and the Transition-to-Work Inventory. The SDS is an online assessment, based on the belief that people and environments fall into six types: realist, investigative, artistic, social, enterprising, and conventional. The inventory consists over 100 questions, which the client will answer to generate a code based on the overall response. The coding consists of the

first letter of the three types that represent the client's highest scores. Once the client's code has been listed, the client is also presented with a listing of careers for that coding set. This is a great start to assist clients who need awareness of their interests, abilities and to get an idea of their occupational choices (Duggan & Jurgens, 2007).

The Transition-to-Work Inventory is an assessment which can be taken online or by paper and pencil by matching "clients' interests to job options by assessing their level of interest in 84 leisure activities" (Duggan & Jurgens, 2007, p. 51). This assessment is ideal for this population, because it focuses on leisure activities, and can provide guidance for those with little or no work experience. It can provide insight and resources to different job titles, employment, and training (Duggan & Jurgen, 2007).

Social Cognitive Career Therapy

Social cognitive career therapy is a good therapy approach for this specific population. This approach allows members to focus on self-efficacy, address the goals they would like to achieve, as well as get a clear sense of the expected outcomes (Sharf, 2013). Dealing with self-efficacy may be difficult for clients, as they may be dealing with depression or self-esteem issues, so it is very vital for the counselor to make sure the client understands the impact of their abilities and capabilities on their career choices (Sharf, 2013). Therefore, it is necessary for the client to seek assistance in regards to any mental health issues. The client will also need to think of what they want their expected outcome to be. Doing so provides generalizations as to what the client is interested in and also gives insight as to what the client feels he/she can accomplish based on their self-efficacy. After addressing the outcome expectations, the counselor and client will discuss the goals necessary to complete the outcome expectations. The client will set goals to help themselves organize their behavior to guide their actions (Sharf, 2013). Based on the

results of the assessments and the types of employment the client is interested in pursuing, the counselor can then discuss the educational and/or job training needs of the client.

Clinical Mental Health Counseling

In order to understand how to best help our clients who have been sex trafficked, we need to recognize the different ways in which trauma manifests throughout their lives. A trauma centered approach (TCA) is one of the best methods to help clients who have survived sex trafficking. The TCA involves a four-part model in which the therapist helps the survivor through healing the wound, engagement, unpacking the trauma, and achieving holism in meeting the needs of the survivor (Hom & Woods, 2013). Healing the wounds begins with the long and intricate process of building trust. Patience and determination are needed in the set goal of building trust with the trafficking survivor, which may take weeks if not months. Taking that time to build rapport, however, is critical for the survivor to recognize the counselor's investment in both their healing process and overall wellbeing. Unfortunately, there may be significant boundaries in establishing this nurturing dynamic due to the differences in culture, power, class, and race between the counselor and survivor (Crane & Moreno, 2011). Because the survivor may have only just escaped a world in which the survivor relied heavily on self-protective mechanisms, there exists a very real and automatic distrust of authority figures along with defensive reactions to statements or actions by the same authorities. It is also possible that the discussion of certain topics, such as sex or illness, may be considered taboo when engaging with certain individuals outside of their culture. The mental health professional must possess the humility to accept and acknowledge a lack of understanding the survivor's culture as well as the significance of the impact of such taboo concepts within the victim's culture (Crane & Moreno, 2011). Many small steps are needed to build trust, including, but not limited to, open ended

questions, few interruptions, and a private area to talk. More than one visit is also required but the victim must maintain autonomy in choosing to seek out assistance. Through numerous visits, further assessment and questioning can encourage the patient to open up about their experience. In order for the therapeutic alliance to remain effective and efficient, it is crucial for the therapist to convey a focus on safety, becoming healthy, and reiterating that the victim's welfare remains the highest priority (Crane & Moreno, 2011).

The next step of the TCA involves successfully engaging the survivor (Hom & Woods, 2013). To effectively help the survivor break free from her or his trauma, she or he has to be allowed to be the leader of their unique healing process. This survivor centered approach permits the survivor an opportunity to be in charge of her or his life after having been stripped of their autonomy through exploitation and control by others (Annitto, 2011). A survivor centered approach also incorporates the cultural components of the survivor's life by acknowledging the limitations of talk therapy in a variety of communities (Hom & Woods, 2013). Some survivors, for example, may experience a strong sense of dishonoring her or his family and require a "cleanse" accomplished only through working with healers or clergies. To successfully engage the person, the practitioner must also exhibit empathy and grace to help the survivor feel as if they are no longer being judged and are in a safe, therapeutic environment (Hom & Woods, 2013). The more secure the person feels, the more inclined she or he may become to open up about their experiences.

Part three of the TCA involves unpacking the trauma (Hom & Woods, 2013). Everyone responds to trauma differently and it is important for the therapist to recognize that trauma in one survivor will look completely different in another. When therapists fail to engage survivors or fail to recognize the impact of past experiences on the trauma, they invalidate the survivors's

experience. To prevent this from happening, therapists must provide focused time where the individual can tell his or her stories (individual counseling or specialized group), identify feelings, identify what they lost and grieve the losses (stolen children) and explore how they may use the experience(s) for strength (e.g., help other girls avoid sex trafficking by teaching them about the tricks of traffickers or helping others talk about their victimization and heal (Smith, 2013).

Part four of the model involves achieving holism in meeting all the needs of the survivor. Because the form of the trauma is shaped largely by past experiences, it manifests differently between any two trafficking survivors. When engaging with survivors, it is vital for the counselor to consider the early onset of trauma, such as childhood abuse; chronic trauma, as a result of prolonged exposure to sexual exploitation and violence; and intimate partner violence. While each contributor of trauma and its responses has its own significant, stand-alone psychological influence, when combined, they create a different set of physical and mental symptoms in each survivor (Hom & Woods, 2013). The following victim demonstrates the importance of understanding the complex trauma experienced by those who escape the trafficking industry:

What I see over and over again is that young people will come into a residential house or a foster home and there is a lot of anger, and people don't know what to do with that, and they end up sending them to some type of behavioral program. All of these symptoms connect to a much deeper issue. And instead of us treating the symptoms, it is important that we begin to create programs that get to the root cause of the trauma that they have been through. People get so caught in the anger and instead of reacting to that behavior, we need to figure out why this young person is so angry at such an early point in life and

so just kind of unpacking what that looks like and taking it to the next level (Hom & Woods, 2013, p. 79).

To address all past experiences and current necessities, the therapist should develop a full needs assessment and care plan with as much collaboration with the survivor as possible. This teamwork allows the counselor to address the most immediate needs for the survivor to begin their healing process. These care plans are similar to care plans found within other populations due to their inclusion of such needs as food, shelter, personal hygiene, transportation, and childcare. A more elaborate care plan goes on to include crisis intervention, dental services, language skills/training, advocacy, clothing, medical care, mental health services, substance abuse intervention, safety planning/protection, legal assistance, educational opportunities, income, vocational training, family connections, recreational, social, and spiritual outlets. The necessities for each survivor are determined by the initial assessment in which the counselor provides a detailed outline of their trauma history (Smith, 2013).

To best incorporate trauma sensitive services into the helping profession, better screening methods amongst healthcare professionals and first responders are required. The helping profession needs continuing education to better recognize the red flags of trafficking. If a woman, for example, was unable to speak for herself, this could be an indication of human trafficking with the known precedent of traffickers accompanying survivors to emergency rooms and speaking on their behalf. Other indicators are the woman's inability to answer questions or talk to the clinician alone as well as presenting with suspicious-looking wounds (Hom & Woods, 2013). There is also a great need for acceptance and lack of judgment during interaction with survivors. For example, service providers have mentioned instances of clients being so worried about their initial encounter that they would come inebriated to the consultation. Such situations

underscore the importance for service providers to receive survivors with warmth and acceptance (Hom & Woods, 2013).

Victims of human trafficking often do not recognize that they are being exploited. Therefore, understanding and sensitivity are important if a woman decides not to use available resources immediately. Nevertheless, service providers should provide ready accessibility to information and resources (i.e., an anti-trafficking hotline number) they can turn to when they feel ready to seek help. And once they become comfortable in seeking assistance, agencies should not force them to remain at their facilities, instead reinforce the right of all participants to choose their path of their own volition. Such approaches serve to make the survivors more autonomous, comfortable, and consequently, willing to remain at the helping agency (Hom & Woods, 2013).

Conclusion

Domestic sex trafficking is an issue which should warrant awareness for all communities, in particular counselors. It is the duty of professional counselors to become knowledgeable about this pervasive and sometimes clandestine issue in an effort to provide effective counseling services and resources to the individual and the community as a whole. The foundation of effective interventions begins with an awareness of "...the social system of domestic sex trafficking and all the players involved..." (Perdue et al., 2012, p. 451) in order to develop appropriate direct services to meet the survivor's needs (Perdue et al., 2012). Qualified clinical mental health counselors will keep the healing process survivor-centered and trauma-focused to assure the therapeutic intervention strategies are culturally specific. Counselors need to be aware of their own professional limitations, while recognizing the complexities and safety concerns presented in sex trafficking situations, therefore need to be prepared to skillfully identify a client

in need of such services and safely refer them to appropriate service providers (Dabby et al., 2015). School counselors have the responsibility to understand the scope of sex trafficking, be prepared to identify vulnerable youth, collaborate with relevant community organizations as needed, while still focusing on preventative curriculum (including self-empowerment and safe dates) as related to human trafficking situations. Career counselors may work in collaboration with survivors through service providers that offer wrap-around services, to ensure a self-actualized future with a safe and permanent living situation. Professional counselors become advocates when understanding of a situation such as sex trafficking, develops into policy changes, as with NC Bill 279. This awareness is a responsibility that translates to powerful community involvement and effective services for the most vulnerable.

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