POLICY BRIEF NO. 2 | JUNE 2020



TRAUMA AND VIOLENCE-INFORMED APPROACHES TO SERVICE PROVISION

EXECUTIVE SUMMARY

Trafficking is one form of gender-based violence that can occur within the sex industry, along with other forms of violence, abuse and exploitation. Gender-based violence is at once an **interpersonal experience and a structural issue** that stems from a number of issues, including historical trauma, ongoing colonization, social inequities and social isolation. Persons who have experienced violence, abuse, exploitation and human trafficking within the sex industry can experience complex trauma that requires specialized trauma and violence-informed models of care.

NORAHT advocates for trauma and violence-informed approaches to service provision as well as program and policy design. Our research indicates that systems of care that are not trauma and violence-informed can retraumatize persons who have experienced human trafficking and other forms of violence. We use the term service provider broadly to include persons working in various capacities to provide support to persons who have experienced human trafficking.

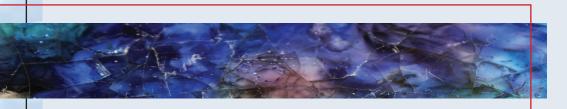
Trauma and violence-informed approaches emphasize that trauma and violence are pervasive in society, and that trauma and violence can happen to anyone regardless of gender, sexuality, age, culture, socioeconomic status, and other aspects of lived experience. Simply stated, trauma and violence-informed approaches to service provision:

- Attend to and actively name the root causes of trauma, including experiential (personal), organizational, and societal (structural) dimensions that influence survivors' experiences of human trafficking and their interactions with service providers;
- Understand that trauma and violence are multifaceted;
- Approach trauma and healing through each person's unique perspective and lived experiences;
- Aim to do no harm (avoid retraumatizing persons).

Key principles of trauma and violence: informed approaches to human trafficking are **self-determination**, **relationality** and **decolonization**.

NORAHT follows feminist and decolonial trauma scholars in defining trauma in terms of reactions to difficult and/or harmful experiences. In other words, "trauma is not a disorder but a reaction to a kind of wound."¹ NORAHT highlights the importance of including decolonial approaches to trauma and violence-informed approaches because trauma theory and practice is largely rooted in Eurocentric, biomedical and psychoanalytical conceptualizations of trauma which many not adequately address how trauma is understood and experienced across diverse cultures and histories. Moreover, Eurocentric, biomedical and psychoanalytical experiences of trauma and/or event-based experiences of trauma. In doing so, contemporary trauma discourse risks pathologizing persons' traumatic experiences and fails to acknowledge the social and structural dimensions contributing to trauma, such as historical trauma and the collective trauma experienced by Indigenous peoples as result of ongoing settler colonialism. Decolonial approaches, therefore, aim to decentre Eurocentric approaches to trauma theory and practices.

¹ Burstow, B. (2003). Toward a radical understanding of trauma and trauma work. Violence Against Women, 9(11), 1293-1317. https://doi. org/10.1177%2F1077801203255555



Recommendations:

- 1. Ensure that all policy makers, programmers and service providers have the **knowledge and tools** to develop a deep understanding of interpersonal, complex trauma specific to human trafficking, and to deliver holistic services. This includes understanding the impact and legacies of historical trauma (interpersonal, intergenerational and cultural);
- Program mandates and organizational operating policies and procedures should emphasize trauma and violence-informed models of care at all levels of service provision. Moreover, wherever possible, Indigenous persons ought to be in paid employment to support the growth of decolonial practices. Further, policies and procedures should be evaluated by persons with advanced knowledge of human trafficking, and especially by persons with lived experience who are paid members in the circle of care;
- 3. Organizational policies and procedures must proactively prevent and address issues of vicarious trauma, secondary trauma, moral distress, and compassion fatigue. We recommend that strategies be in place to support the physical, emotional, psychological and spiritual needs of service providers working with persons who have experienced human trafficking. This includes culturally appropriate approaches that are attentive to the diversity of Indigenous and francophone cultures and traditions.

BACKGROUND

NORAHT conducted a multi-year (2013- 2020) community-based research project to learn how service providers are equipped to support persons who are and/or have been trafficked and to see what gaps exist in service provision in our region. NORAHT hosted community engagement sessions in eight northeastern Ontario communities, which were attended by persons with lived experience and service providers across various sectors. NORAHT also conducted interviews with persons with lived experience and gained feedback via surveys.

The Northeastern Ontario Research Alliance on Human rafficking (NORAHT) takes a critical anti-trafficking approach that respects and promotes human dignity and self-determination of persons involved in the sex industry, whether by choice, circumstance or coercion. We clearly distinguish between sex work and human trafficking. Critical anti-trafficking approaches reject "rescue narratives" because such strategies can undermine trafficked persons' human dignity and right to self-determination. It is NORAHT's position that service users are experts in their own experience; therefore, service providers ought not to assume authority regarding the needs of persons with lived experience. Further, critical anti-trafficking strategies emphasize resiliency, resistance, and strength-based approaches.

1. Knowledge and Tools:

Violence, abuse and exploitation experienced within the sex industry, including human trafficking, do not occur in isolation, but are embedded in larger structures of violence, such as continued colonial violence and the genocide of Indigenous peoples. Moreover, violence in the sex industry cannot be separated from the root causes of racial discrimination and gender-based violence (GBV) more broadly, including the normalization of gender-based violence, sexualized violence and ongoing settler colonialism.

Policy makers, programmers and service providers must hold advanced knowledge of how trauma and violence impact a person's emotional, cognitive/psychological, physical and spiritual self. In this context, the term service provider is used broadly and might include both policy makers (such as executive directors, CEOs, executive leaders, and board members) and programmers (such as program coordinators and/or other frontline workers who work directly with service users and are, therefore, directly engaged in implementing policies and procedures). Further, trauma and violence-informed work supports approaches that are relational, client self-determined, and decolonial and holistic, which includes critical analysis of and departure from Eurocentric conceptualizations of trauma and violence which are problematic because they reinforce colonial violence by ignoring, undermining or contradicting holistic spiritualities.

Service providers must be familiar with how trauma manifests in various complex, interconnected and overlapping ways, which may include but are not limited to:

- 1. **Emotional:** feelings of hopelessness, helplessness, anxiety/agitation, depression, limited or inability to identify emotions or a broad range of emotions, altered ability to bond with persons who are safe, frustration, irritability;
- 2. **Cognitive/Psychological:** splitting ("all or nothing" thinking), negative schemas, cognitive distortions, memory gaps, sensorybased memories, intrusive thoughts, difficulty making plans or problem solving, difficulty identifying or meeting needs, external locus of control, lack of narrative integration, narrowed window of tolerance for distress;
- 3. **Spiritual:** soul wounds, change in sense of self or worldview, disconnection with purpose in Creation and/or Creator (however one understands those concepts), disruption in connection with culture, sense of not belonging to humanity;
- 4. **Behavioural:** distrustful, avoidance and/or anxious attachment behaviours, self-fulfilling prophecies which reinforce negative views that one has of themselves, re-enactments (behavioural repetition of past traumatic events), helpless behaviours or active passivity, testing to gauge safety or trustworthiness in relationships, general avoidance behaviours;
- 5. **Physical:** blood memory, triggered by bodily sensations, unsafe and/or unhealthy relationship with one's own body, chronic pain, immune system problems, disruption in sleep cycles, sensitivity to light and sound.

Examples of holistic healing modalities may include:

- 1. Active recruitment and inclusion of Indigenous helpers, such as Elders, to facilitate healing;
- 2. Use of traditional Indigenous healing (linking to cultural resources or encouraging existing cultural practices);
- 3. Active invitation of spirituality and meaning-making into healing journey;
- 4. Positive psychology;
- 5. Use of Jungian theories and some psychodynamic approaches;
- 6. Somatic-based trauma healing;
- 7. Hybrid approaches that blend traditional and/or holistic healing practices with psychoanalysis and/or peer counselling.

For more information about knowledge and tools to support the development of a trauma and violence informed lens for human trafficking see our service provider workbook: <u>Trauma and Violence Informed Approaches to Human Trafficking: A Critical</u> Reflection Workbook for Service Providers, available on our website.

2. Trauma and Violence-Informed Models of Care at all Levels of Service Provision:

All policy makers, programmers and service providers must translate trauma and violence knowledge into program design and organizational policies and procedures. These necessary frameworks are needed to support effective interventions that hold relational, client self-determination and decolonial approaches at the core. This requires thoughtful critical analysis of both the interpersonal and structural contributors of exploitation and coercion in the sex industry, as well as meaningful, respectful and fair remuneration of those with lived experience.

NORAHT recommends:

- 1. Trauma and violence informed models that are grounded in **harm reduction** strategies in order to ensure that persons who access support do not experience further harm;
- 2. Policies, procedures, and mandates are developed with an understanding of how trauma affects the whole person, specifically within the context of human trafficking, which may include:
 - a. Avoidance of behavioural-modification approaches **which reward desired behaviours (a common strategy that is used** by traffickers) such as rewarding desirable behaviours, like arriving on time for an appointment with resources (bus tickets, food vouchers, et cetera) and discouraging undesirable behaviours with unfavourable consequences like a worker not available if the client is late to an appointment;

- b. Understanding that many people who have been trafficked may return to or continue to engage in sex work, therefore policies should be **non judgemental of continued sex work**;
- c. Including harm reduction; which focus on minimizing risks while at the same time respects individual choices, meeting people where they are at on their journey (i.e. provide support without "strings attached" mandates) and respects human dignity;
- d. Supporting **highly relational** approaches that support self-determination and agency;
- e. Supporting holistic interventions;
- f. Ensuring an ongoing consensual relationship between service providers and persons ac cessing services by openly communicating outcome expectations;
- g. Availability of trauma-specific clinical supervision;
- 3. Provide opportunities for collaboration with various organizations, including sex work alliances and peer professionals, to widen the circle of care.

For more information see our webinar "Intersectional Trauma-Informed Approaches to Human Trafficking in Northeastern Ontario."

3. Preventing and Addressing Issues of Vicarious Trauma and Compassion Fatigue

NORAHT's research indicates that persons who have experienced human trafficking require consistent, long-term support. However, ongoing exposure to vicarious and secondary trauma an have lasting physical, emotional, cognitive/psychological and spiritual impacts on service providers' own well-being. Secondary trauma is witnessing directly or immediately following a traumatic incident that happened to another person (i.e., seeing someone get hit by a car); vicarious trauma is indirect exposure to trauma after it has happened (hearing about it, imagining it, etc.).

NORAHT also recognizes the need for the active involvement of people with lived experience in service planning and provision. Peers as well as others in the helping field may have a history of traumatic experiences. While these experiences lend to their expertise, they ought to be supported by trauma and violence-informed organizations.

NORAHT contends that organizational leaders and policy makers must be committed to preventing and addressing issues of vicarious trauma, secondary trauma, moral distress (when an organization's policies conflict with a worker's sense of "the right thing to do") and compassion fatigue (when the stressors of the work pile up, limiting the capacity of the worker to respond with care and compassion) among service providers. This necessitates that organizational leaders and policy makers are knowledgeable about the ways in which service providers can be impacted by exposure to trauma in their work (e.g. repeatedly hearing about service users' experiences of trauma can lead to service providers feeling a sense of helplessness to adequately support service users). Moreover, organizational leaders and policy makers must understand the concept of organizational trauma which holds that organizations can experience and reiterate trauma responses. Examples of organizational trauma can include: breakdown in communication, lack of trust among employees, sense of hopelessness to effect social and/or political change, et cetera.

NORAHT recommends:

- 1. Trauma and violence-focused supervision to help with the intrapersonal aspects of relational approaches; to help contain the anxieties related to taking a self-determined and agency-focused approach (i.e.: supporting a person who is making decisions that you are deeply uncomfortable with); and to foster the ongoing, personal journey of decolonizing practice;
- 2. Adequate training on how trauma impacts organizations (organizational vicarious trauma) directed to management teams;
- 3. Adequate training on the complexity of trauma for service providers, as well as ongoing clinical supervision to foster knowledge integration and safeguard from secondary and vicarious trauma;

- 4. Awareness that staff exposure to human trafficking and sexual violence trauma can impact their capacity to absorb everyday non-work stress. Therefore, organizations should provide adequate financial compensation and robust extended health benefit packages;
- Staff access to discretionary funds allotted for self-identified wellness care (for example, art classes, yoga classes, nutritional supplements, aesthetic services – whatever the staff deems to be important in their own wellness care, all of which fall under the umbrella of holistic modalities);
- 6. Flexibility in scheduling that corresponds with the need for flexibility in providing support to persons who have been trafficked because typical daytime schedules cannot adequately meet the needs of persons who have been trafficked;
- 7. Predictable and planned opportunities for rotating out of the role but still have a job within the organization in order to help prevent vicarious trauma, secondary trauma and/or compassion fatigue.

CONCLUSION

Human trafficking and other forms of violence in the sex industry are traumatic experiences that can have long-lasting physical, emotional, cognitive/psychological and spiritual effects. Trauma and violence-informed approaches are necessary to prevent causing further harm to persons who are accessing services. This requires that policies and programs be designed with advanced knowledge of human trafficking and other forms of violence in the sex industry, including how individual experiences are interconnected to structural violence and oppression. Further, NORAHT contends that trauma and violence- informed approaches are key to minimizing vicarious trauma and compassion fatigue experienced by service providers who are routinely exposed to trauma in their work to support persons who have experienced human trafficking.

ACKNOWLEDGEMENTS

This brief was written by the Northeastern Ontario Research Alliance on Human Trafficking (NORAHT). NORAHT is a partnership between Nipissing University, the Anishinabek Nation: Union of Ontario Indians, Victim Services of Nipissing District and Centered Fire Counselling and Consulting. We thank past partners Amelia Rising Sexual Assault Centre of Nipissing and the AIDS Committee of North Bay and Area. The research is generously supported by a Partnership Development Grant from the Social Sciences and Humanities Research Council of Canada (SSHRC).

We acknowledge the Anishinabek peoples on whose territory we live under the Robinson-Huron Treaty of 1850. We are grateful to be able to live and learn on these lands with all our relations.

RECOMMENDED CITATION

Quenneville Brenda, Gina Snooks, Rosemary Nagy, Kathleen Jodouin, Lanyan Chen, Donna Debassige, Rebecca Timms and Sydnee Wiggins. "Trauma and Violence-Informed Approaches to Service Provision," Policy Brief No, 2, Northeastern Ontario Research Alliance on Human Trafficking. 2020.

FURTHER NORAHT RESOURCES

Website:

Northeastern Ontario Research Alliance on Human Trafficking (NORAHT) website: <u>https://noraht.nipissingu.ca/noraht-research/</u>webinars/.

Webinars:

Quenneville, Brenda and Gina Snooks. "Intersectional Trauma-Informed Approaches to Human Trafficking in Northeastern Ontario." Centre for Research & Education on Violence Against Women & Children, Learning Network. Webinar, 2019.

Nagy Rosemary and Kathleen Jodouin. <u>"Strategies for Service Provider Collaboration."</u> Northeastern Ontario Research Alliance on Human Trafficking. Webinar. 2020.

Jodouin, Kathleen. <u>"Safer Places: Harm Reduction Strategies to Address Human Trafficking.</u>" Northeastern Ontario Research Alliance on Human Trafficking. Webinar. 2020.

Toolkits:

"Trauma and Violence Informed Approaches to Human Trafficking: A Critical Reflection Workbook for Service Providers." North Bay: Northeastern Ontario Research Alliance on Human Trafficking, 2020.

"Service Mapping Toolkit". North Bay: Northeastern Ontario Research Alliance on Human Trafficking, 2020.

Policy Briefs:

"Violence, Exploitation and Abuse in the Sex industry: Strategies for Service Provider Collaboration," Policy Brief No. 1, Northeastern Ontario Research Alliance on Human Trafficking. 2020.

"Trauma and Violence Informed Approaches to Service Provision," Policy Brief No. 2, Northeastern Ontario Research Alliance on Human Trafficking. 2020.

"Decolonize Our Actions! Providing Services to Indigenous Persons involved in the Sex Industry," Policy Brief No. 3, Northeastern Ontario Research Alliance on Human Trafficking. 2020.

"Safer Spaces: Harm Reduction Strategies to Address Human Trafficking," Policy Brief No. 4, Northeastern Ontario Research Alliance on Human Trafficking. 2020.

Journal Article:

Nagy, Rosemary, Gina Snooks, Brenda Quenneville, Lanyan Chen, Sydnee Wiggins, Donna Debassige, Kathleen Jodouin, and Rebecca Timms. 2020. "Human Trafficking in Northeastern Ontario: Collaborative Responses". First Peoples Child & Family Review 15 (1):80-104.

GLASS IMAGE

Images by Brenda Quenneville

The image of one of Brenda's potted bowls is fused glass encased in pottery. It was chosen to represent not only the complexities associated with human trafficking, but highlights the possibility of transformation and resilience. In this pottery technique, coloured pieces of broken glass are layered on the bottom of a thick walled clay form. When the glass goes through the kiln within the pottery, the glass melts, fusing together in beautiful swirls of colour and texture resembling crystals. There is no absolute control in this process, it is up to the materials to transform and choose to revitalize. The resulting glass is stronger than it was before, as this new shape embedded in pottery asserts its identity. Through resiliency it is able to maintain its core purpose and integrity even in the face of dramatically changed pressures and circumstances.



WAVES IMAGE

The image of the waves is another piece of Brenda's pottery, this time a plate. The imprint of the waves are rolled onto a flattened piece of clay. The clay is then stretched to size and placed on a mould to shape it as it dries. The imprint is very delicate, and can be flattened easily. However, once it goes through the firing process, and glaze is added, the subtleties of the transformation emerge. When Brenda works with this motif, she often thinks how "Happiness comes in waves."

