

# Trauma Informed Interviews with Human Trafficking Victims

September 13, 2013  
13<sup>th</sup> Annual Children's Cove Conference

Amanda Gopal, LCSW  
agopal421@gmail.com  
864-915-8884

---

---

---

---

---

---

---

---

---

---

## At A Glance

- Trauma Informed Services
- The Victim Experience
- Impact on the Investigative Interview

---

---

---

---

---

---

---

---

---

---

## Why is it important to know about trauma?

- Trauma affects an individual's ability to function
- Trauma affects different people in different ways
- Pre-event factors, event factors, and post-event factors determine severity of response
- The specific ways a victim responds to trauma will affect the investigative interview
- The effects of trauma can be mitigated by someone who is trauma informed

---

---

---

---

---

---

---

---

---

---

## Trauma Informed Interviews

The goal is understanding “the role that violence and victimization play in the lives of most consumers of... services and to use that understanding to design service systems that accommodate the vulnerabilities of trauma survivors and allow services to be delivered in a way that will facilitate consumer participation in treatment.”

(Harris & Fallot, 2001)

“Regardless of the agency or system’s primary mission, trauma informed services are committed to providing services in a manner that is welcoming and appropriate to the special needs of trauma.” (Clawson, et al. 2008)

---

---

---

---

---

---

---

---

---

---

## Core Components of Trauma Informed Services

Principles and practices that understand that:

- Trauma is a defining life event that shapes a victim’s sense of self and others
- The victim’s complaints, behaviors, and symptoms are coping mechanisms
- Empowerment and recovery are the primary goals of the service
- The service relationship is collaborative

Clawson, Salomon, Goldblatt Grace, 2008

---

---

---

---

---

---

---

---

---

---

## Victims Experience:

- Loss of control
- Loss of safety
- Loss of predictability
- Loss of basic assumptions about life

---

---

---

---

---

---

---

---

---

---




---

---

---

---

---

---

---

---

---

---

## Common trauma reactions in victims of human trafficking

- Depression
- Anxiety or Panic disorders
- Substance abuse
- Eating disorders
- Suicidal thoughts or behaviors
- Irritability and Anger
- Hypervigilance
- Difficulty sleeping
- Flashbacks
- Intrusive thoughts
- Shame
- Self-blame
- Dissociation
- Hallucinations or Delusions
- Difficulty establishing trust
- Distrust of law enforcement
- Trauma bonds
- Avoidance
- Memory loss

---

---

---

---

---

---

---

---

---

---

## Severity of Response is determined by:

- Means of introduction to the life
- Relationship to trafficker
- Duration of abuse
- Violence or threats experienced and witnessed
- Being removed from home town or country of origin
- Personality of victim
- Coping skills
- Substance Abuse
- Experience of SAFETY, CONTROL, and PREDICTABILITY

---

---

---

---

---

---

---

---

---

---

## What you may see...

---

---

---

---

---

---

---

---

---

---

### Anger and Irritability

- Juvenile delinquents and angry teenagers
- Runaways
  
- Victims may be:
  - uncooperative
  - disrespectful
  - manipulative
  - sabotaging of the interview process

---

---

---

---

---

---

---

---

---

---

### Dissociation

- A disruption in the usually integrated functions of consciousness, memory, identity, or perception of the environment (APA, 2000)
- Splitting off of clusters of mental contents from conscious awareness (APA, 2013)
- Separation of an idea from its emotional significance and affect (APA, 2013)
  
- Day dreaming
- Zoning Out
- Can't recall details of trafficking abuse
- Not expressing or feeling emotions when discussing abuse

---

---

---

---

---

---

---

---

---

---

## Trauma Bonds/Stockholm Syndrome

- Phenomenon of hostages bonding with their captors
- Negative feelings by the captive toward the police or authorities
- Where there is a perceived threat to survival and belief that they will carry out the threat
- Perception by the captive of some small kindness from the captor within the context of terror
- Isolation from perspectives other than those of the captor
- Perceived inability to escape (Graham, Rawlings, and Rigsby, 1994)
  
- Victims may state that they are there willingly
- Provocative dress or behavior
- May refuse to identify pimp
- Refer to pimps/traffickers as boyfriends or husbands

---

---

---

---

---

---

---

---

---

---

## Posttraumatic Stress Disorder (PTSD)

- Exposed to event that involves actual or threatened death, serious injury, or sexual violence
- Can be experienced, witnessed, or informed of event
- Re-experiencing of the event through intrusive thoughts, memories, flashbacks, or dreams
- Avoidance of stimuli association with the trauma
- Negative alterations of cognition and mood
  - Difficulty remembering aspects of trauma
  - Anger, fear, guilt, shame
- Alterations in arousal and reactivity
  - Hypervigilance
  - Angry outbursts, verbal or physical aggression
  - Difficulty concentrating

APA, 2013

---

---

---

---

---

---

---

---

---

---

## Triggers

- Anything that brings up the traumatic memory
- Conscious or unconscious
- Can include
  - People
  - Places
  - Body Sensations
  - Dates
  - Tones of Voice
  - Sounds
  - Smells
  - Tastes
  - Fabrics
  - Emotions
  - Particular items
  - Animals
  - Weather conditions
  - Facial expressions
  - Words or phrases
- Grounding skills
  - Use the 5 senses to orient to the present moment
  - Strong mints
  - aromatherapy, essential oils
  - Rock, squeeze ball, play-Doh
  - verbal reminders that the trauma is not happening again, victim is safe
  - deep breathing

---

---

---

---

---

---

---

---

---

---

## Challenges to the Investigative Interview

- They may not “act like a victim”
- Victims may not want or be able to talk about their experience
- Victims may not be able to report details of victimization
- Victims may lie or give false information
- They may claim not to speak English
- They may have seemingly inappropriate reactions

---

---

---

---

---

---

---

---

---

---

---

---

## Recommendations for Mitigating Trauma

Safety  
Control  
Predictability

- Be genuine
- Have a plan for the interview
- Explain purpose of the interview
- Explain confidentiality and limitations
- Seek victim’s permission and give choices
- Address who is handling housing, food, medical needs before interview starts
- Recognize and start with the victim’s strengths

---

---

---

---

---

---

---

---

---

---

---

---

## How PTSD Symptoms Can Affect Behavior During a Case

PTSD SYMPTOMS	BEHAVIOR	RECOMMENDATIONS
<b>Intrusions</b>		
<ul style="list-style-type: none"> <li>• Intrusive, upsetting memories</li> <li>• Acts or feels like the trauma is happening now (flashbacks)</li> <li>• Physical reactions to triggers</li> </ul>	<ul style="list-style-type: none"> <li>• Sudden, intense reactions to the offender, court officials, and direct questions, as well as to less obvious triggers and reminders, such as a smell</li> <li>• Physical complaints (e.g., jumpy, nauseated, sweaty)</li> </ul>	<ul style="list-style-type: none"> <li>• Create comfortable, safe environment for questioning</li> <li>• Allow a support person to accompany them</li> <li>• Allow for frequent breaks as needed</li> <li>• Teach containment skills</li> </ul>
<b>Avoidance</b>		
<ul style="list-style-type: none"> <li>• Tries to avoid any thoughts, feelings, or emotions about the trauma</li> <li>• Has trouble remembering parts of what happened</li> <li>• Expresses or exhibits feeling detached, or cut off from others</li> <li>• Shows limited emotional reaction</li> </ul>	<ul style="list-style-type: none"> <li>• Has difficulty answering questions</li> <li>• Has difficulty remembering</li> <li>• Seems evasive</li> <li>• Appears shut-down or indifferent</li> <li>• Gives up or is hopeless</li> </ul>	<ul style="list-style-type: none"> <li>• Anticipate the need to protect themselves from painful reminders</li> <li>• Expect some omissions and confusion of details of traumatic memories</li> <li>• Be aware of assumptions about nonverbal communication</li> <li>• Work to decrease shame</li> <li>• Facilitate a sense of purpose and meaning</li> </ul>

---

---

---

---

---

---

---

---

---

---

---

---

## How PTSD Symptoms Can Affect Behavior During a Case

PTSD SYMPTOMS	BEHAVIOR	RECOMMENDATIONS
Hyperarousal		
<ul style="list-style-type: none"><li>• Sleep problems</li><li>• Poor concentration</li><li>• Irritability or angry outbursts</li><li>• On guard</li><li>• Easily startled</li></ul>	<ul style="list-style-type: none"><li>• Increase in concrete thinking with trouble responding to questions in an age-appropriate manner</li><li>• Overreacts to inquiries; is irritable</li><li>• Fatigue</li></ul>	<ul style="list-style-type: none"><li>• Keep questions simple and concrete</li><li>• Anticipate needing to repeat or rephrase questions</li><li>• Teach calming and coping strategies</li></ul>

Used with permission from Elizabeth Hopper, Project Reach

---

---

---

---

---

---

---

---

---

---

## Other Considerations

- Try to put yourself in the victim's shoes
- Normalize and validate thoughts and feelings
- Avoid "I understand" and "I know how you feel"
- Never make a promise that you cannot keep
- Don't take things personally
- Don't engage in the power struggle
- If more than one interview is needed, use the same interviewer
- Create a comfortable, relaxing space
- Take care of yourself

---

---

---

---

---

---

---

---

---

---

## Vicarious Trauma

- Trauma that results from being exposed to horrific things
- Self-care is vital to mediating the effects of vicarious trauma
- Set boundaries
- Take a vacation
- See a counselor

---

---

---

---

---

---

---

---

---

---

“Even if victim’s don’t disclose in your interview, if they leave with the impression that you care about what happens to them, it can instill hope and re-humanize them. This may lead them to seek help and/or disclose later on.”

Jordan Greenbaum  
June 2013

---

---

---

---

---

---

---

---

---

---

Amanda Gopal, LCSW  
agopal421@gmail.com 864-915-8884

References

American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision. Washington, DC, American Psychiatric Association, 2000.

American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.

Clawson, H., Salomon, A., & Goldblatt Grace, L. (2008). *Treating the hidden wounds: Trauma treatment and mental health recovery for victims of human trafficking*. Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.

Graham, D.L., Rawlings, E.I., & Rigsby, R.K. (1994). *Loving to Survive: Sexual Terror, Men’s Violence, and Women’s Lives*. New York, NY: NYU Press.

Harris, M. & Fallot, R.D. (Eds.) (2001). *Using trauma theory to design service systems*. San Francisco, CA: Jossey-Bass.

---

---

---

---

---

---

---

---

---

---