

Welcome to our Learning Network & Knowledge Hub Webinar

Date & Time: Tuesday, October 22, 2019 from 1:00 to 2:15 PM EASTERN STANDARD TIME

- All attendees are muted during the webinar.
- If you are experiencing issues, please type into the chat box.
- If you have a question for the webinar speakers, please type into the Q&A box and we will spend 15 mins near the end on Questions and Answers.
- There will be a link to an anonymous evaluation survey in the chat box at the end of the webinar, please fill out the survey as your feedback will guide our future webinars.
- Once you complete the evaluation survey, you will be directed to a website where you will be prompted to enter your full name and email address. A certificate of attendance will be generated and emailed to you.
- There will be a link to the presentation slides in the chat box.
- The webinar recording will be posted on our website within the next few days:
<http://www.vawlearningnetwork.ca/lk-kh-webinars>

Western Centre for Research & Education on Violence Against Women & Children



Intersectional Trauma-Informed Approaches to Human Trafficking for the Purpose of Sexual Exploitation Northeastern Ontario

Northeastern Ontario Research Alliance on Human Trafficking

Presented by: Brenda Quenneville, MSW, RSW & Gina Snooks, PhD Candidate, MGS

Introduction

Northeastern Ontario Research Alliance on Human Trafficking (NORAHT) is a partnership between Nipissing University, Amelia Rising Sexual Assault Centre of Nipissing, the AIDS Committee of North Bay and Area, and the Union of Ontario Indians: Anishinabek Nation.

Land acknowledgement: Our home-base is North Bay, Ontario on the traditional territories of the Nipissing First Nation, however, our research spans across northeastern Ontario throughout Anishinabek and Mushkegowuk territories and we acknowledge the First Peoples and ancestors of these lands.

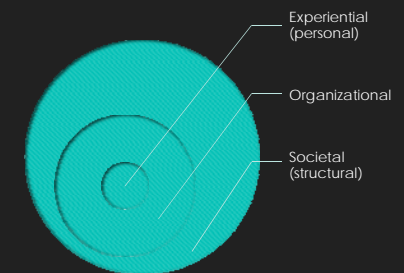


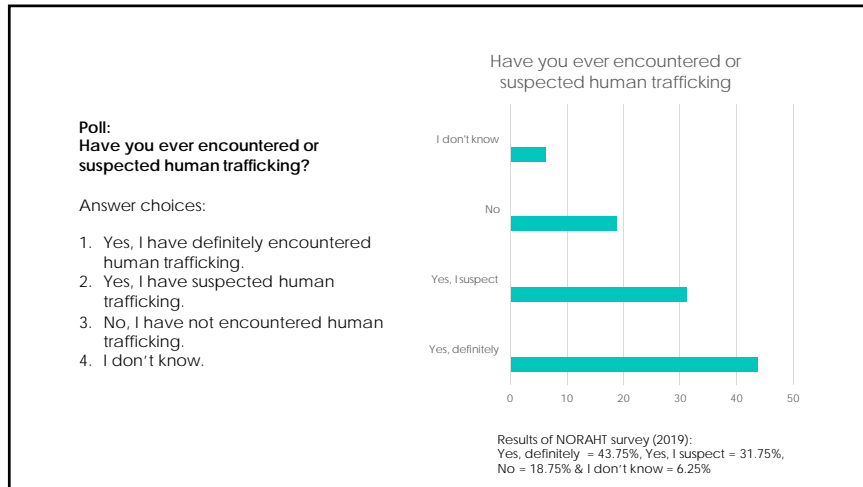
Website: <https://noraht.nipissingu.ca/>



What we hope that you'll take away from this webinar

- q **Do no harm.** The goal of intersectional trauma-informed practice is to cause no further harm/avoid retraumatizing people;
- q Sometimes our practices cause unintended harm;
- q Ongoing **critical reflection is key** to identifying & addressing harmful practices.





Q: When you imagine human trafficking in your communities what do you think it looks like? What comes to mind?

~~Just because you are right, does not mean, I am wrong.~~

But one of those people is wrong, someone painted a six or a nine, they need to back up and orient themselves, see if there are any other numbers to align with. Maybe there's a driveway or a building to face, or they can ask someone who actually knows.

- The voices of persons with lived experience should be at the front of the movement to address human trafficking & sexual exploitation;
- Each experience is unique, but research identifies similar patterns and themes;
- Research indicates that various approaches are necessary to addressing human trafficking. Including: trauma-informed, harm-reduction & culturally competent approaches.

The crossroads of intersectionality

- 1 If each road is a different race, gender or ethnicity
- 2 If each car is a different tool of oppression
- 3 Then the more cars that meet at an intersection, the bigger a crash of systems will be

What Factors shape peoples' experiences of human trafficking?

- **Identity:** gender, age, sexuality, ethnicity, religion/spirituality; culture; etc.
- **Personal experiences:** trauma (personal, intergenerational, historical), racism, sexism, experiences of poverty & homelessness, involvement with the child & family services, encounters with law, low self esteem, seeking a sense of belonging, etc.;
- **Systems & Structures of Oppression:** settler colonialism, systemic racism, patriarchy; "normalization" of violence, MMIWG2S, etc.

Critical Reflection Questions:

1. What motivates you to do this work?
2. How might your own identity & personal experiences inform your ideas about human trafficking and how you do your work?

In a nutshell Trauma-informed approaches:

- o Understand that **trauma is multifaceted**: has physical, emotional, psychological, behavioural, community and spiritual aspects;
- o Are attentive to the **contexts** in which trauma & healing occur (the whole story);
- o Approach trauma and healing through each person's **unique perspectives** and lived experiences & **promote self determination**;
- o Aim to **avoid causing further harm** (re-traumatization, re-enactments)

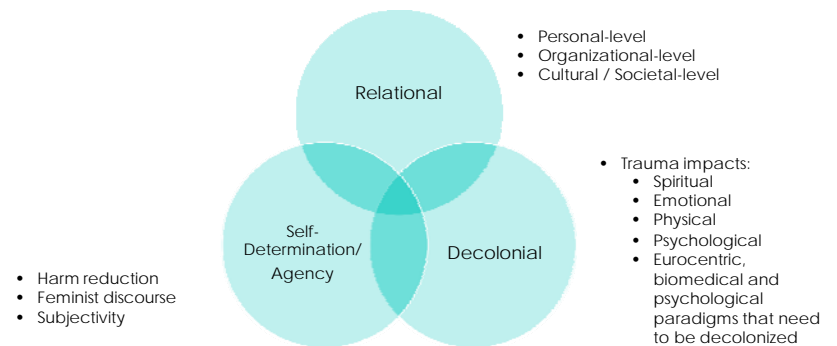
What's the whole story?



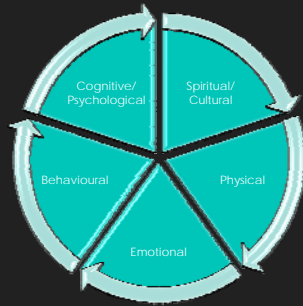
Trauma-Informed Approaches

- Human rights approaches
- Avoid causing further harm (or minimal harm)
- Awareness of trauma (the whole story)
- Strengths-based (individual, resiliency)
- Safety & trustworthiness
- Cultural safety

Intersectional Trauma-Informed Approaches



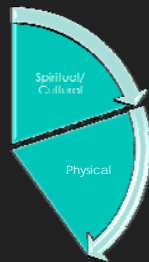
Trauma: Reactions & Adaptations



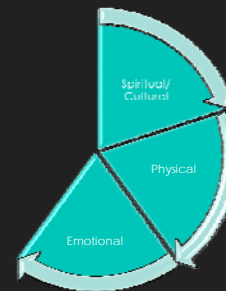
Please see handout for more examples



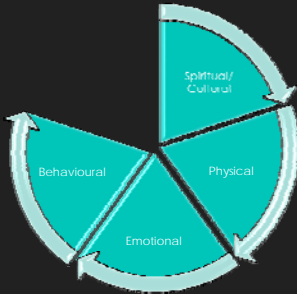
- Change in sense of self
- Change in worldview
- Intergenerational trauma
- Soul wound
- Isolation and disconnection
- Disconnection with purpose and place in Creation
- Loss of ability to co-regulate with safe others
- "Living Dead"
- Depersonalization and/or derealization



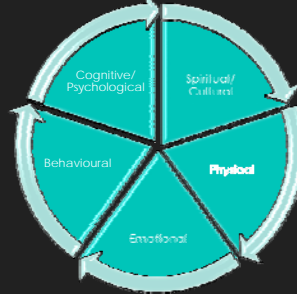
- **Bad memory**
- **Physical sensations may trigger**
- **Hyperarousal:**
 - Constriction, bracing, chronic pain, heart issues
- **Hypoarousal:**
 - Spaceyness, numbing, shallow breathing
- **Sensitivity to light & sound**
- **Changes to libido**



- Helplessness
- Hopelessness
- Shame
- Blank/hollow
- Rage
- Abrupt mood swings
- Limited or inability to identify emotions or broad range of emotions
- Altered ability to love, nurture or bond with safe others



- Distrustful
- Avoidant attachment behaviours (withdrawing, isolating, increased need for control, possible increase in rigidity)
- Anxious attachment behaviours (reassurance seeking, trying to please others, need for constant contact, fear of abandonment)
- Hypervigilance with safety
- Self-fulfilling prophecies (related to negative schemas and cognitive distortions and shaped by attachment patterns)
- Substance use as a means to cope with trauma reactions
- Helpless behaviours and active passivity
- Attraction to dangerous situations/activities



- Dissociation
- Splitting and advanced compartmentalization
- Memory gaps
- Negative schemas
- Cognitive distortions
- May not seem "rational" as frontal cortex may not be fully engaged
- Narrowed window of tolerance for distress (every day stressors perceived as insurmountable or personal attacks)
- Difficulty identifying and meeting needs
- External locus of control

Relational

Human Trafficking:

- Human trafficking is an interpersonal trauma that often manifests out of a relationship that holds some meaning, therefore requires a relational (interpersonal relationship focused) approach.
- Often times, there are areas in life in which people are disconnected, edged out or "othered" which are opportunities in which to exploit by traffickers.
- Filling in these areas of disconnection is an important part of prevention work, as well as informing interpersonal dynamics

In Practice:

In any relationship, there is a meeting of 2 (or more) subjective realities. In the case of trauma, it is particularly important to have an awareness of both our own intrapersonal dynamics as well as imagining the person with lived experience intrapersonal dynamics

Tips from persons with lived experience:

- Be authentic: know who you are, what you can offer, what you can't offer, where your boundaries are
- Don't make promises you can't keep
- Hold hope and empathy as much as you can
- Look beyond trauma to see the person (please see the trauma reactions chart for areas to ponder)


Our Job as Trauma-Informed Practitioners:

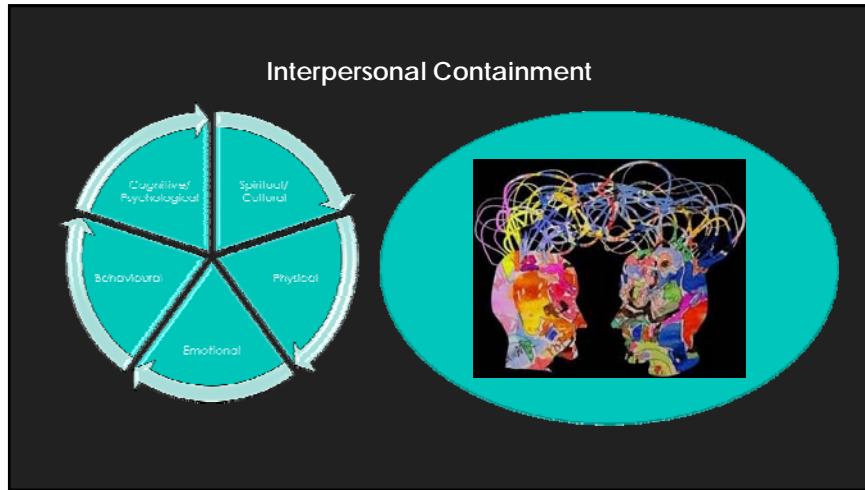
To create a setting rooted in awareness of our own multifaceted trauma reactions and counter-transferences and how they may influence attunement while providing effective containment

Our own Trauma Reactions and Counter-Transference

Questions include but are not limited to:

- Why am I drawn to doing this work?
- Am I feeling authentic in all my strengths and shortcomings?
- How do I hold my own fears while maintaining an effective container for the people I provide service to?
- Do I feel I have allies in my community who will help in doing this work?
- How do I see myself? Am I a hero?
- What do I fantasize about?





Self-Determination/ Agency in the context of human trafficking

- Understanding that each person is the expert of their own experiences and have the capacity to determine their own needs;
- Working alongside persons who are being or have been trafficked to determine their needs at a given moment;
- Acknowledging the autonomy of each human being.

For Indigenous peoples this further includes:

- Returning Indigenous peoples' inherent rights bestowed by creator.

In practice:

Consent and coercion

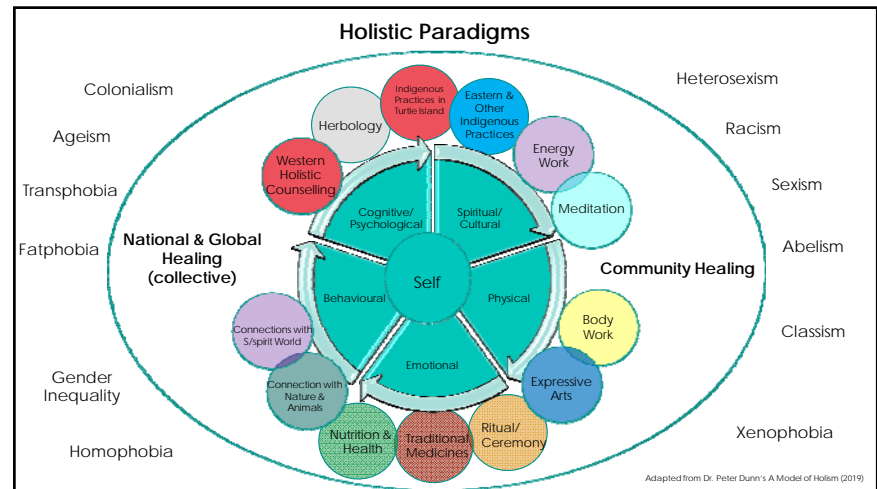
- What are your personal desired expectations?
- What are the desired outcomes of the program?
- Are there any parallels between the narratives or strategies used by traffickers and those used in the programs or service provision?

Decolonial Approaches to Service Provision

- Unsettle Eurocentric paradigms;
- Make space for multiple ways of knowing;
- Recognize the impact of colonialism, including trauma & healing practices;
- Rooted in holistic paradigms.

"Using trauma terminology implies that the individual is responsible for the response, rather than the broader systemic force caused by the state's abuse of power. This enables government and society in general to circumvent responsibility and liability"

Renee Linklater (Rainy River First Nation), *Decolonizing Trauma Work: Indigenous Stories and Strategies* (2014)



Decolonized Approaches to Service Provision

In Practice

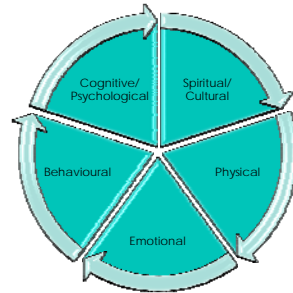
We cannot assume that trauma theory and practices can be applied universally.

- creating space for multiple ways of knowing to coexist in order to best meet the needs of the people we are supporting in ways that align with their worldview.
- might mean integrating traditional healing practices into psychotherapy and counselling, (ie) honour indigenous knowledges and ways of knowing.

Service practitioners must be open to the idea that multiple healing modalities can coexist and that the best approach for some people who are healing from trauma may be to integrate multiple approaches

Dr. Brenda Restoule:

- Soul wounds, blood memory, intergenerational trauma
- Ability to articulate ongoing process of colonization
- Positive psychology
- Psychodynamic approaches
- Jung
- Logotherapy and meaning making



Message from persons with lived experience: systems can be retraumatizing

Intersectional trauma-informed approaches:

- Organizational and programming aspects provide the container for the interpersonal trauma-informed approach to reside:
 - Trauma-focused supervision
 - Organizational vicarious trauma
 - Sex work allied
 - Active collaborators with other organizations, both formal and informal, professional and grassroots
 - Work toward decolonizing practice

