

# Trauma as an Outcome of Child Trafficking for Commercial Sexual Exploitation: A Human Rights-Based Perspective

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The trafficking of children for commercial sexual exploitation (CSE) is a human-rights violation, with serious consequences for the psychosocial well-being of victims. This paper highlights the human rights-based approach (HRBA) to the recovery and (re)integration of children who have been traumatized as a result of being trafficked for CSE. The literature reviewed was extensive and included academic publications, as well as governmental and non-governmental reports. It begins by describing the children's rights framework and highlights international mechanisms for protection (international and regional declarations, conventions and treaties) that incorporate the principles of human rights to health, mental health, and child trafficking. In addition, a comprehensive HRBA to child trafficking is described, including rights designed to guide efforts to prevent, protect from, respond to, and provide remedy for human rights violations. It also highlights trauma as an outcome of child trafficking for CSE, identifies a range of physical, psychological, and emotional abuses to which victims are exposed to, and describes the impact of these human rights violations on children's psychological development. Finally, it highlights trauma informed care (TIC) as a promising practice to facilitate the recovery and (re)integration of young victims.

*When we speak of human rights, we must never forget that we are labouring to save the individual man, woman or child from violence, abuse and injustice... Freedom from want and freedom from fear go hand in hand.)* (Excerpt from the address of Kofi Annan, United Nations Secretary-General, to the Commission on Human Rights, April 24, 2003<sup>1</sup>)

## THE CHILDREN'S RIGHTS FRAMEWORK

Since the end of World War II, international and regional declarations, conventions, and treaties have been adopted that incorporate the principles of human rights to health, mental health, and human trafficking. Human rights, as part of international law, are rights that every human being holds. The concept of a 'right' means that it is a legally enforceable entitlement, which governments are obliged to respect, promote, protect, and fulfill.

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<sup>1</sup> <http://www.un.org/apps/news/story.asp?NewsID=6832&Cr=Commission&Cr1=rights#.V0THYGYbq84>

*Human rights, as part of international law, are rights that every human being possesses, irrespective of race, religious or political beliefs, legal status, economic status, language, colour, national origin, gender, ethnicity, etc. In other words, human rights are accorded to every human being. They apply to all individuals and groups on the basis of equality and non-discrimination. Even if they are not always honoured in fact (de facto), everyone is entitled by international law (de jure) to enjoy benefits of human rights. (Asher, 2004, p. 7)*

## **Historical Perspective**

The modern human rights movement began in 1948 when the United Nations (UN) General Assembly adopted the Universal Declaration of Human Rights (UDHR). The UDHR declares that all human beings are born free and equal and contains 30 articles, which outline the fundamental human rights that every individual is entitled to. Article 4 speaks specifically to slavery and the slave trade: “No one shall be held in slavery or servitude; slavery and the slave trade shall be prohibited in all their forms”. In 1966, the UN General Assembly adopted two treaties to strengthen the UDHR: (1) The International Covenant on Civil and Political Rights (ICCPR); and (2) The International Covenant on Economic, Social and Cultural Rights (ICESCR). These covenants and the UDHR are referred to collectively as the International Bill of Rights, from which has evolved most of the basic principles contained in the body of international human rights law today.<sup>2</sup>

Since the International Bill of Rights came into effect, a number of other principal international treaties enshrine and safeguard human rights and clarify and refine the specifics of human rights norms in particular areas. Those that are most relevant for the current discussion include: (1) The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), adopted in 1979;<sup>3</sup> and (2) The Convention on the Rights of the Child (CRC), adopted in 1989.<sup>4</sup> An Optional Protocol to the CRC on the Sale of Children, Child Prostitution and Child Pornography, adopted in 2002, expands upon the CRC and stresses the importance of international cooperation to protect children from trafficking, prostitution and pornography.<sup>5</sup> In addition, the 2002 Optional Protocol on the Involvement of Children in Armed Conflict aims to increase the protection of children during armed conflict.<sup>6</sup> A third Optional Protocol, adopted in 2011, establishes a procedure of individual complaints and empowers children to submit complaints before the United Nations Committee on the Rights of the Child.<sup>7</sup> Complaints can be submitted for the violation of any of the rights included in the CRC and the two Optional Protocols described above, in order to request compliance with the rule of law. Finally, the Convention on the

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<sup>2</sup> [www.ohchr.org/Documents/Publications/Compilation1.1en.pdf](http://www.ohchr.org/Documents/Publications/Compilation1.1en.pdf); [www.ohchr.org/Documents/Publications/FactSheet2Rev.1en.pdf](http://www.ohchr.org/Documents/Publications/FactSheet2Rev.1en.pdf)

<sup>3</sup> [www.un.org/womenwatch/daw/cedaw/](http://www.un.org/womenwatch/daw/cedaw/)

<sup>4</sup> [www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx](http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx)

<sup>5</sup> [www.ohchr.org/EN/ProfessionalInterest/Pages/OPSCCRC.aspx](http://www.ohchr.org/EN/ProfessionalInterest/Pages/OPSCCRC.aspx)

<sup>6</sup> [www.ohchr.org/EN/ProfessionalInterest/Pages/OPACCRC.aspx](http://www.ohchr.org/EN/ProfessionalInterest/Pages/OPACCRC.aspx)

<sup>7</sup> [www.ohchr.org/EN/HRBodies/CRC/Pages/CRCIndex.aspx](http://www.ohchr.org/EN/HRBodies/CRC/Pages/CRCIndex.aspx)

Rights of Persons with Disabilities (CRPD), adopted in 2013, explicitly recognizes the rights of children with disabilities.<sup>8</sup>

Other international mechanisms for protection also relate to human trafficking and provide guidelines on interventions to effectively address the mental health needs of child victims. Particularly relevant to the current discussion are: (1) The UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, supplementing the Convention against Transnational Organised Crime (Trafficking Protocol);<sup>9</sup> and (2) The United Nations Office of the High Commissioner for Human rights (UNOCHR) Recommended Principles and Guidelines on Human Rights and Human Trafficking.<sup>10</sup>

## **CHILD TRAFFICKING AND THE HUMAN RIGHTS-BASED APPROACH**

The human rights-based approach (HRBA) recognizes that every human being is endowed with human rights and obliges governments to take steps to ensure the protection and fulfillment of these rights. By ratifying various United Nations human rights treaties, governments at all levels (local, regional/federal and national) are obliged as 'duty-bearers' to ensure that every human being enjoys universal human rights, to prevent the violation of their rights by others, and to guarantee access to remedies where violations occur. In addition, the HRBA ensures that any policies or endeavors aimed at improving human well-being be guided by human rights and human rights principles. Key principles include non-discrimination, accountability, meaningful participation, and equality of outcomes for different groups of people regardless of their status or identity (Pillay, 2010).

### **Human Rights Principles and Guidelines in Action**

One essential component is the development of a clear understanding of the rights that children have, and outlining the human rights principles which inform and guide efforts to prevent, protect from, respond to, and provide remedy for human rights violations. The CRC, for example, is guided by four key principles, which are indivisible and integrally connected. It is the most universally accepted human rights instrument in history.

1. Non-Discrimination (Article 2) obliges governments to ensure all rights, to all children, without discrimination. It further requires that all children are entitled to the rights set out in the CRC, regardless of their religion, political or other opinion, national or social origin, race, color, ethnicity, age, language, sex, disability, and property, birth, or other status.

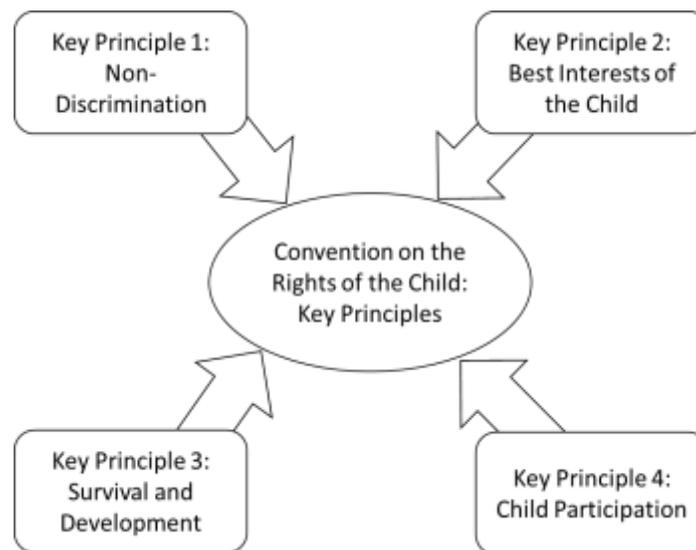
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<sup>8</sup> [www.ohchr.org/EN/HRBodies/CRPD/Pages/ConventionRightsPersonsWithDisabilities.aspx](http://www.ohchr.org/EN/HRBodies/CRPD/Pages/ConventionRightsPersonsWithDisabilities.aspx)

<sup>9</sup> <http://www.ohchr.org/EN/ProfessionalInterest/Pages/ProtocolTraffickingInPersons.aspx>

<sup>10</sup> <http://www.ohchr.org/Documents/Publications/Traffickingen.pdf>

2. Best Interests of the Child (Article 3) requires that the child’s best interests are given primary consideration in all actions, supports a child-centered approach, and requires those in positions of authority to review programs, policies, regulations, and legislation so that they have a positive influence on promoting or fulfilling children’s rights.
3. Survival and Development (Article 6) indicates that children should be protected from situations, including conflict, which would place their lives in jeopardy and that countries must ensure that children do not die from malnutrition, disease, or other causes.
4. Participation (Article 12) establishes children’s opinions as vital, and that their views must be considered whenever decisions are made concerning their well-being.



Convention on the Rights of the Child: Key Principles

In addition to these four principles, a number of CRC articles specifically address child trafficking. According to Article 35, “State Parties shall take all appropriate national, bilateral and multilateral measures to prevent the abduction of, the sale of, or traffic in children for any purpose or in any form.” Article 36 requires State Parties to “protect the child against all other forms of exploitation prejudicial to any aspects of the child’s welfare.” Article 32 requires State Parties to “recognize the right of the child to be protected from economic exploitation and from performing any work that is likely to be hazardous to or interfere with the child’s education, or to be harmful to the child’s health, physical, mental, spiritual, moral, or social development.”

Three additional articles speak to commercial sexual exploitation (CSE) and the importance of physical and psychological health.

1. Article 39 focuses on recovery and reintegration and requires member states to “take all appropriate measures to promote the physical and psychological recovery and social integration of children who have been victims of any form of neglect, exploitation or abuse, torture or degrading treatment, or of armed conflict.”
2. The right to health is addressed in Article 24: “States Parties recognize the right of the child to the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.”
3. Article 19 obligates States Parties to “take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child. Such protective measures should, as appropriate, include effective procedures for the establishment of social programs to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.”

Finally, the Optional Protocol on the Sale of Children addresses the need to eliminate poverty and economic inequality and disparities of power between sending and receiving countries that facilitate child prostitution. It notes, for example, “the elimination of the sale of children, child prostitution and child pornography will be facilitated by adopting a holistic approach, addressing the contributing factors, including underdevelopment, poverty, economic disparities, [and] inequitable socio-economic structure.” It also requires signatories to “take all feasible measures” to ensure all appropriate assistance to victims of offences mentioned in the Protocol, “including their full reintegration and their full physical and psychological recovery.”

In addition to the CRC, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) reaffirms many of the rights set forth in the CRC and sets out core principles to protect that right. Consistent with the CRC, they include accountability for obligations and responsibilities, universality, indivisibility (e.g., all rights have equal status and are independent), non-discrimination, and meaningful participation in fulfillment of their rights (United Nations Population Fund [UNFPA] & UNICEF, 2011). CEDAW establishes signatories’ legal obligation to “take all appropriate measures to modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the

idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women.” Since CEDAW is not age-specific, its provisions apply to females throughout their life cycle; it also acknowledges the differing needs of girls at diverse stages of their lives and the various patterns of discrimination that impact upon their day-to-day reality. Article 6 lays the foundation for combating trafficking of girls and women and their exploitation for the purpose of prostitution. It also calls upon governments to adopt all necessary measure to combat these crimes: “States parties shall take all appropriate measures, including legislation, to suppress all forms of traffic in women and exploitation of prostitution of women.”

In addition to the development of a clear understanding of the rights that children have and the human rights principles that inform and guide efforts to ensure human rights (discussed above), a second essential component of a HRBA is adherence to these key human rights principles, including their integration into legislation, policies, programs, and processes. In addition, it means placing children at the center of all trafficking related interventions and recognizing their right to a remedy and prioritized prevention, assistance to victims, and an appropriate response for perpetrators. It thus requires all actions to be measured by the impact they have on the rights of the children concerned. This approach is in contrast with conventional approaches that generally give priority to law enforcement strategies.

*The child rights-based approach to trafficking means placing the children at the centre of all trafficking related interventions. The child’s best interests need to be given primary consideration in all actions. These should be determined for each child, giving due consideration to his or her views. (UNICEF, 2008, p. 39)*

A fourth essential component of a HRBA is the requirement for monitoring actions to identify children who are at risk of trafficking, as well as identifying those who have been trafficked, and to assess the extent to which programs are facilitating their timely recovery and restoring human rights.

*One of the distinctive features of the human rights approach is its focus on vulnerable individuals and communities. Because a human right is a universal entitlement, its implementation is measured by the way it benefits those who are most disadvantaged and vulnerable and the extent to which it brings them up to mainstream standards. (UNICEF, 2008, p. 39)*

A final component of a HRBA is the requirement that governments and other duty-bearers meet their obligations to ensure that every human being enjoys universal human rights, to prevent the violation of their rights by others, and to guarantee access to remedies where violations occur. It further recognizes every human being as a rights holder who plays a prominent role in the processes and decisions that affect them, and to empower rights’ holders to take control over their lives, ensure their human rights, and to re-claim their

rights through skills and resources when they have been violated. It further recognizes that human rights are violated at various stages in the trafficking cycle and provides a vital source of guidance to States, to empower them to develop and implement an effective and rights-based response to trafficking in persons (Gallagher & Karlebach, 2011). Thus, in addition to providing a strong national legal framework, an effective rights-based approach helps hold governments accountable for their obligations under the treaties. These obligations are to guide development work, evaluate impact, and to understand that the human rights embedded in treaties must be converted into services on the ground (Asher, 2004; Croll, 2006; Dottridge & Jordan, 2012; Fried, Harrison, Starceвич, Whitaker, & O’Konek, 2012; Jordan, 2002). As noted by Ms. Pillay, United Nations High Commissioner for Human Rights, in her statement on maternal mortality and morbidity, “translating these principles from rhetoric to reality is the core of a human-rights based approach.”<sup>11</sup>

Since trafficking is a denial of basic human rights, recovery strategies must aim to strengthen the link between human rights and the goals of rehabilitation. The following section highlights trauma as an outcome of child trafficking and trauma informed care as a viable strategy to empower child victims of trafficking for CSE to recover and reclaim their human rights.

### **TRAUMA AS AN OUTCOME OF CHILD TRAFFICKING**

Child trafficking for CSE exposes victims to a range of human rights abuses, including unrelenting physical, emotional, and sexual abuse. Consequently, victims may present with a range of mental health issues, including depression, hopelessness, anxiety, and post-traumatic stress disorder (PTSD) (cf., Rafferty, 2013a). Given the profound and long lasting effects of trauma on children, victims require timely and appropriate services that are designed to mitigate harm, and help dissipate the post-traumatic symptoms experienced (Cimmarusti & Gamero, 2009). An inadequate awareness of trauma among staff in aftercare facilities, however, can result in a lack of a comprehensive understanding of the presenting issues, failure to treat the child appropriately, and retraumatization of victims. Research on children in multiple service settings has found that common practices, such as unsafe and inappropriate shelter policies and practices, have retraumatized survivors by triggering feelings of a time when they were unsafe or disempowered (Elliott, Bjelajac, Fallot, Markoff, & Reed, 2005; Harris & Fallot, 2001). In addition, children who have developed harmful behavior patterns post trauma are often unaware of their symptoms, the reason they are acting in a certain way, and do not know how to self-soothe. When staff in treatment settings is not informed on the impact of trauma, these behaviors will continue and possibly be exacerbated (Chandler, 2008).

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<sup>11</sup> <http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=10160&LangID=E>

## TRAUMA INFORMED CARE AS A PROMISING PRACTICE

Trauma Informed Care (TIC) is a promising practice for addressing the psychosocial needs of children who have been trafficked for CSE. TIC is a model of care that recognizes the impact of trauma on children and emphasizes the need for all aspects of treatment and service delivery to be sensitive to a trauma's impact on victims (Brown, Baker, & Wilcox, 2012; Butler, Critelli, & Rinfrette, 2011; Green, 2011). It aims to understand how traumatic experiences can impact people's life, behaviors, perceptions, and reactions (e.g., anger, hostility, irritability, self-harm, withdrawal, dissociative states), and applies that understanding at all points of service provision (Chandler, 2008; Green, 2011).

*Given the nature of abuse and violence experienced by victims and survivors of commercial sexual exploitation and sex trafficking—including exposure to repeated physical, sexual, and in some cases psychological abuse or witnessing violence—services specifically designed to address trauma can provide much-needed help.* (Institute of Medicine & National Research Council (IOM/NRC), 2013, p. 33)

One of the most important aspects of making a system trauma informed involves attending to what may potentially be retraumatizing for a client and taking steps to minimize retraumatization (Butler et al., 2011). Staff sensitivity to past trauma minimizes “the triggering of negative memories that can cause additional traumatization” (Johnson, 2012, p. 380). Staff play a major role in creating trauma informed systems by assessing the system for potential trauma triggers, reducing critical incidents, deescalating situations and avoiding restraint, seclusion and other interventions that may repeat aspects of past abuse (Miller & Najavits, 2012). Overall, TIC is a “fundamental ‘do no harm’ approach that is sensitive to how institutions inadvertently reenact traumatic dynamics” (Miller & Najavits, 2012, p. 1).

*TIC is grounded in the principle that treatment systems and practices should ameliorate, rather than exacerbate, the negative impacts of trauma.* (Brown et al., 2012, p. 507)

*Trauma informed care is a framework for caring for trafficked persons that involves recognizing the impact of traumatic experiences (including abuse prior to, during, and after the trafficking experience) and treating the person in a way that is individualized, supportive, non-judgmental, integrated and holistic, empowering and patient centered.* (Cannon, Arcara, Arnoff, & Bloom, 2014, p. 18)

Trauma informed systems should be differentiated from trauma specific services (Fallot, 2011). Trauma informed systems create a culture within an organization or system that is

mindful of the impact of trauma on an individual and directly plan their service provision around not retraumatizing clients.

*To be trauma informed is (1) to understand how violence and victimization have figured in the lives of most consumers of mental health, substance abuse, and other services and (2) to apply that understanding in providing services and designing service systems so that they accommodate the needs and vulnerabilities of trauma survivors and facilitate client participation in treatment. (Butler et al., 2011, p. 178)*

*Trauma informed services are those in which service delivery is influenced by an understanding of the impact of interpersonal violence and victimization on an individual's life and development. (Elliot et al., 2005, p. 462)*

Trauma specific services (e.g., individual or group therapy), meaning evidence based treatments that have been demonstrated effective in working with traumatized children and adults, are a part of all trauma informed care systems (Brown et al., 2012, Butler et al., 2011; Falot & Harris, 2008; Hummer, Dollard, Robst, & Armstrong, 2010; Morrissey et al., 2005). These services focus on helping individuals to feel safe, regulate emotions, develop skills to improve interpersonal functioning, build resilience, and make meaning of the traumatic events (Butler et al., 2011; Falot & Harris, 2008; Hummer et al., 2010). In addition, most trauma-specific treatments support the development of good self-care, coping mechanisms, and affect regulation before delving into the uncovering of a trauma (Elliot et al., 2005). In one noteworthy guide for providers working with victims of trafficking for CSE, Macy and Johns (2011) highlight the importance of ensuring survivor's physical and emotional safety, addressing co-occurring problems simultaneously, using an empowerment philosophy to guide the delivery of services, maximizing survivors' control and choice of service, emphasizing resilience, and minimizing the potential for additional trauma. Other effective strategies that have been identified include the development of collaborative relationships with others who have trauma related expertise and experience.

### **Developing a Trauma Informed System for Victims of Child Trafficking**

Evidence indicates that the trauma informed service framework holds much promise for services for victims of child trafficking (Clawson & Grace, 2007; International Organization for Migration (IOM), 2009; IOM/NRC, 2013; Macy & Johns, 2011). In a review of the literature on empirically supported treatments for child trauma, Schneider, Grilli, and Schneider (2013), for example, highlight the importance of using trauma informed approaches as a primary "first line intervention." More specifically, IOM/NRC (2013) reported that implementation of trauma informed services may be especially beneficial for victims of CSE. More recently, Bounds, Julion, and Delaney, (2015) describe the TIC framework as increasing victims' of CSE sense of control, allowing for greater engagement and retention of victims, and facilitating their reintegration into society. They also highlight

the need to implement trauma informed services and training within the child welfare system: “programs that do not operate from a TIC perspective may potentially increase feelings of exploitation, repelling victims of CSEC from their programs” (p. 6).

Research suggests that changing a system to become trauma informed might include: ongoing training in trauma for staff, use of trauma assessment tools and provision of trauma specific services, an environment that is physically and psychologically safe, and meaningful participation by both staff and those receiving services in the design and operation of the organization (IOM/NRC, 2013). Research has also indicated that many providers of aftercare services for children have only limited knowledge about trauma, how to facilitate rehabilitation and recovery using trauma informed care and services, or how the services that they provide may impact victims in a positive or negative way (Hopper, Bassuk, & Oliver, 2010; Rafferty, 2016; Rafferty, under review). One recent study designed to assess the effectiveness of training programs for health providers responding to human trafficking in the Middle East, the Caribbean, and Central America, for example, found that although many of the providers were informed about the issues and warning signs, there was a lack of knowledge related to how providers should respond during contact with victims. Several topics were discussed in the training (e.g., definitions, mental health, children and adolescents, culturally sensitive care, TIC, etc.), and 92% of the participants reported a desire for follow up training in trauma informed care, mental health, and role of the health care provider in caring for victims (Viergever, West, Borland, & Zimmerman, 2015).

*Although many children who come in contact with the educational, health care, child welfare, first responder, and juvenile justice systems have experienced significant psychological trauma, there has not been a systematic approach within these systems to develop evidence-based services that address trauma in the children that they serve. (Ko et al., 2008, p. 397)*

Both the human rights framework and trauma informed care aim to ensure that anti-trafficking practices and policies do not adversely influence the dignity and human rights of victims of human trafficking. Thus, governments should ensure that strategies are in place to address child trauma during the identification process, while children are being assessed for services, and while they are placed in aftercare programs for recovery and rehabilitation.

## **Identification**

The first step in the protection and recovery process is to ensure that procedures are in place for the rapid detection of child victims so that they might have timely access to the appropriate assistance. Consequently, trauma informed services should start as early as client outreach. However, despite the existence of obligations, policies and procedures for their rapid identification, most victims of trafficking are not formally identified through

official channels, further decreasing the possibility of intervening from a trauma informed framework. Children who are not identified continue to be exploited, and the support and protection services that they so desperately need are not provided (Rafferty, 2016). Furthermore, when children are not identified, traffickers continue to exploit and their crimes are not documented or prosecuted. Noting the link between failure to identify victims and denial of human rights, the Office of the High Commissioner Human Rights has clarified the obligation of Member States:

*A failure to identify a trafficked person correctly is likely to result in further denial of that person's rights. States are therefore under an obligation to ensure that such identification can, and does, take place. (Robinson, 2002)*

Member States should therefore ensure that effective strategies are in place to remove barriers to timely identification of child victims, and to ensure that trauma informed care is immediately provided. Under no circumstances should their human rights be further violated by arresting them as criminals and detaining them in inappropriate facilities, or erroneously identifying them as irregular migrants and subjecting them to deportation.

### **Assessment**

Research indicates that effective trauma assessment and treatment are vital to break the cycle of violence and trauma and are associated with improved mental health outcomes (Harris & Falot, 2001; Hopper et al., 2010). Interview and assessment strategies should be safe, ethical, and not violate children's human rights. They should also be timely, strengths-based, culturally appropriate (Prescott, Soares, Konnath, & Bassuk, 2008), and include appropriate forms for intake, screening, intake and referral (Fallot & Harris, 2008). It is important to know about traumatic histories, but at the time of intake most details are not necessary to obtain, especially if the child is hesitant to discuss. Some survivors may feel uncomfortable answering questions because of their history of mistrust. Member States should therefore ensure that effective strategies are in place to execute a comprehensive interview and assessment of children's needs for legal, social, medical, and mental health services following their identification as victims of human trafficking.

### **Aftercare Shelter for Recovery and Rehabilitation**

Child victims should be provided with safe, secure, and appropriate shelter. As noted above, trauma informed care and services are consistent with the child rights-based approach and have been identified as a promising practice for child victims. Member States should ensure that resources are available to ensure that trauma informed care and services are provided to ensure their recovery and rehabilitation (legal, medical, psychological, educational) and facilitate their reintegration into their home community or integration into a new community.

Cultural competence is a vital component of trauma informed care and services, and research has identified the importance of integrating culturally competent care within any trauma informed system (Gozdziak, Bump, Duncan, McDonnell, & Loiselle, 2006; Rigby, 2011). As noted by Butler and colleagues (2011), for example, it is important to have knowledge of the cultural norms related to emotional expression, including an awareness of how symptoms may present (ex: somatic symptoms, mental health stigma, ways of coping), and to have interpreters available when necessary.

In addition, to culturally competent care, other key components have been identified in the literature as being part of most TIC models (Butler et al., 2011; Fallo & Harris, 2008; Green, 2011; Hummer et al., 2010; Prescott et al., 2008). They include (a) safety (create a safe and nurturing physical environment that ensures physical and emotional safety); (b) trustworthiness (set up procedures that allow time for trust to develop, minimal pressing for disclosure, awareness of what the client's emotional limits are, and a maintenance of boundaries); (c) choice (maximize autonomy and choice in the type of services they are receiving; services should be voluntary – without force or coercion, and clearly delineated rights and responsibilities); (d) collaboration (open and meaningful collaboration between staff and trauma victims at all points of service delivery); and (e) empowerment (atmosphere and environment is open, predictable, and empowering with a commitment to transfer power to clients; relationships that are trustworthy and honest; training for staff about trauma; provide clients with the tools to move forward and help themselves; explore children's strengths and resilience; and help them to understand symptoms and feelings). Each of these components can be integrated into models within aftercare shelters for recovery and rehabilitation to ensure that the facility and care is trauma informed.

Finally, research notes that a systemic paradigm shift may be required in order to implement trauma informed services, and that organizations should be ready for change prior to a structural shift in how services are provided (Elliot et al., 2005; Fallo & Harris, 2008).

## **DISCUSSION**

Since the end of World War II, a number of international and regional declarations, conventions, and treaties have been adopted that incorporate the principles of human rights to health, mental health, and human trafficking. These treaties provide important human rights principles including non-discrimination, best interest of the child, protection from harm, and participation. In addition to these key principles, both the CRC and CEDAW speak to the importance of physical and psychological health, and require governments to take all feasible measures to ensure appropriate assistance to child victims in order to promote their full physical and psychological recovery and social integration. The obligation to develop and implement an effective and rights-based response to trafficking in persons is explicitly mentioned in several international human rights treaties.

The HRBA recognizes that human rights are violated at various stages in the trafficking cycle, including their right to physical and mental health, and affirms States' obligations under international human rights law to protect victims. International law, and human rights law in particular, provide a vital source of guidance to States to empower them to develop and implement an effective and rights-based response to trafficking in persons (Munro, 2009). It is an empowerment approach to helping victims to take control over their lives and ensuring their human rights. It recognizes every human being as a rights holder who should be empowered to play a prominent role in the processes and decisions that affect them. Thus, in addition to providing a strong national legal framework, an effective rights-based approach helps us to hold governments accountable for their obligations under the treaties, guide development work, evaluate impact, and to understand that the human rights embedded in treaties must be converted into services on the ground.

The HRBA is a promising theoretical framework to guide the effective recovery and reintegration of children who have been trafficked for CSE because it addresses not only what needs to be accomplished, but also the identification and development of effective strategies to the achievement of the identified goals. This paper has identified trauma informed care as a promising practice for children who have been trafficked for CSE in order to empower them to reclaim their right to health. As noted above, child trafficking for CSE exposes victims to a range of human rights abuses, including unrelenting physical, emotional, and sexual abuse. Consequently, victims may present with a range of mental health issues, including depression, hopelessness, anxiety, and post-traumatic stress disorder (PTSD) and thus require timely and appropriate services that are designed to help them with their experienced trauma. Consistent with the human rights-based framework, TIC recognizes the impact of trauma on children, emphasizes the need for all aspects of treatment and service delivery to be sensitive to a trauma's impact on victims, and aims to ensure that practices and policies do not adversely influence the dignity and human rights of victims. One of the most important aspects of making a system trauma informed involves attending to what may potentially be retraumatizing for a client, and, to minimize retraumatization.

Evidence indicates that the trauma informed service framework holds much promise for the provision of recovery and rehabilitation services for child victims of child trafficking. In addition, research indicates that cultural competence is an essential component of trauma informed care for child victims of trafficking for CSE. Research has also indicated, however, that many service providers have only limited knowledge about trauma, how to facilitate rehabilitation and recovery using trauma informed services, or how the care that they do provide may retraumatize victims (Rafferty, under review). Elements of such a system might include ongoing training in trauma for staff, the use of trauma assessment tools, the provision of trauma specific services, developing an environment that is physically and psychologically safe, and providing for meaningful participation by both staff and those receiving services in the design and operation of the organization.

## CONCLUSIONS

The key components of the HRBA emphasizes that an effective rights-based approach to child trafficking requires the translation of human rights embedded in treaties and into services on the ground. Translating principles from rhetoric to reality is at the core of a human rights based approach. This paper has emphasized the importance of an effective policy that ensures the appropriate protection and assistance for child victims of trafficking. It also identified the use of a trauma informed approach as a viable strategy to ensure that their immediate health and human rights concerns are responded to as they are empowered through their recovery and rehabilitation. An effective and sustainable response to child trafficking for CSE, however, will require the use of a human rights-based framework and approach that integrates strategies to combat this modern day slavery by addressing the structural drivers that underlie it, including demand for sex with children, poverty and economic inequality, and the social, cultural, and gender norms that perpetuate discrimination and violence against the girl child (cf. Rafferty, 2013b; 2013c). At the very least, we owe this to our children.

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