



# Improving Survivors' Experiences With Services Through Peer Advocacy

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## Key Findings and Recommendations

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## INTRODUCTION

Sex trafficking survivors often need resources provided by community-based agencies, government institutions, and other public-serving organizations. A study aimed at estimating the prevalence of sex trafficking in Sacramento—and understanding the experiences of those who were exploited—found that survivors face barriers to accessing and receiving trauma- and survivor-informed support.

Study participants were asked about their awareness of, pathways to, and experiences receiving services in the community. This action brief provides guidance from survivors about how such organizations can create an environment that best serves people who have faced adversity, including people who have been trafficked. These recommendations have been generated by an advisory council composed of survivors, who served as critical members of the research team and authors of this report.

## STUDY OBJECTIVES

Understanding the scope and nature of sex trafficking in a community is an important first step toward mobilizing efforts to identify and provide services to trafficking survivors. Estimating the prevalence of sex trafficking has been a perennial data challenge with profound consequences. Without empirical data, efforts to disrupt trafficking or meet the needs of its survivors are subject to public opinion— which is often either sensationalizing or disregarding— resulting in either too little intervention or too much. Furthermore, lack of data stymies anti-trafficking efforts to guide any strategic public health or justice approach to effectively tackling this issue.

## RESEARCH OBJECTIVES

- 1) **Estimate the prevalence of sex trafficking among adults in Sacramento County,**
- 2) **Better understand the nature and scope of sex trafficking in Sacramento County, and**
- 3) **Provide data capable of informing a strategic, coordinated, multi-system response to prevent and respond to sex trafficking exploitation in Sacramento County.**

## STUDY DESIGN

This study used a participatory action research approach and mixed-methods design. Multiple systems estimation was used to generate a prevalence estimate from nine sources of administrative data on identified sex trafficking victims and survivors. Semistructured interviews were conducted with 159 people with lived experience in commercial sex in Sacramento County, who were identified using a respondent-driven sampling design to gather contextual information about sex trafficking exploitation and the needs of victims and survivors.



## THE SURVIVOR ADVISORY COUNCIL

This study was supported by a Survivor Advisory Council (SAC), composed of nine members who provided expert guidance throughout the project, including guiding the overall research direction at the beginning, supporting the respondent-driven sampling for interview participation, conducting interviews, and helping with interpreting study findings. The SAC was convened monthly. The findings and recommendations in this brief have been compiled by the SAC with limited support from other members of the research team.

## KEY FINDINGS

### Barriers to accessing services

Study participants reported several barriers that impeded their access to services, including lacking awareness of available resources; not understanding how to access services and support in the community; not feeling ready to take advantage of services; and facing eligibility restrictions, waitlists, or other obstacles to receiving help immediately. When a survivor reaches out for help, the response should not be to place them on a waitlist or offer to call them back later. Waiting for services that are not available wastes valuable time and may be discouraging. Survivors' needs are likely urgent. Confirming that their needs can be met at the earliest opportunity is very important.

**"After the intake interview, they [Service Provider] decided they weren't able to assist me. And I don't know why to this day. They said they didn't have to let me know why.... I thought that was really cruel." (Female, 49)**

### Service experiences

Survivors who received services largely reported positive experiences and felt that providers understood their trauma; however, they also indicated that there is room for improvement in providing trauma-informed care. Some survivors reported negative experiences with service providers, including not feeling supported or cared for and not having their trauma appropriately recognized. Some noted that providers were not well trained on trauma or what to look for. When asked how providers showed understanding, most responses emphasized the importance of providers who had lived experience, or, as one survivor said, "having stories like mine." When describing both positive and negative experiences





**“I stopped going anywhere if I don’t connect with someone or if I feel like they’re judging me or if I feel like me sharing what I’m going through is gonna do more harm than benefit me.” (Female, 35)**

with providers, survivors demonstrated the importance of providers’ (1) having knowledge about how to recognize and respond to signs of trauma; (2) engaging in active and mindful listening; (3) conducting nonjudgmental and respectful interactions; (4) conveying empathy (rather than sympathy); (5) being patient (including recognizing that building trust takes time); (6) recognizing that survivors have individual experiences, needs, and goals; and (7) focusing on strengths and empowerment.

It is important to recognize that negative experiences may decrease survivors’ willingness to seek help in the future and may be shared with others who may need these services, who, in turn, may be dissuaded from reaching out for assistance. Individuals who are unsure of the service environment or staff response to their needs may procrastinate in seeking help, which delays their ability to resolve their current situations. When individuals do not seek needed support and assistance, the community may be further affected by the creation of an inaccurate profile of how much the service is needed in the community (i.e., if people do not ask for a service, it may create the appearance that it is not needed).

## RECOMMENDATIONS

### Settings for Interacting With Survivors

- **Be mindful of the physical environment of organizations, including waiting spaces and offices.** Chaotic, loud, dark, or confusing environments are difficult to maneuver for people with trauma. Not all people can wait in these environments, even if it is for a benefit that they are entitled to.
- **Be consistent.** A simple process that is the same for each visit is the most supportive process.

### Staffing

- **Train all staff on trauma-informed practices.** The attitudes of all staff members matter. Asking for help, signing up for benefits, and answering personal questions is difficult and can provoke anxiety.
- **Build in enough time to be patient and notice when extra attention is needed.** Stress, trauma, and current experiences can cause disorganization or a “shutting down” response. Do not take this personally.

## QUICK TIPS

1. Train staff on trauma-informed practices and assess organizational readiness to provide services that account for the impact of trauma on individuals.
2. Make changes to policies and procedures and set the expectation that when people who have faced adversity ask for the assistance you provide, they will be treated with kindness and respect.
3. Make your workplace judgement free so employees know they can share overcoming adversity openly without consequence.

## Peer Support and Advocacy

Peer advocates can bridge the gap between an unfamiliar or uncomfortable environment and access to needed services. Peer support is an important principle for a trauma-informed approach for good reason—meeting someone who has had similar experiences reduces anxiety and provides a higher level of confidence that a survivor's situation will be understood.

**"If you've been through it, it makes a difference. You know some of the terminology or just when my anxiety would get really bad and it would be hard to say something, they already know what I was trying to say... 'cause they've been through it." (Female, 22)**

- **Place peers in positions throughout the public and service sector.** This is a good strategy to offer a person-centered response.
- **Match peers with allies throughout the service sector.** This can strengthen the entire system. People who have faced adversity are ready and able to be part of teams that are making a difference in our community.
- **Value lived experience like you value education and other work experience.** This helps level the playing field. Survivors understand the community and can provide insight that might be missing when serving vulnerable or marginalized populations.
- **Diversify your staff to include people with lived experience.** Survivors do not need to be confined to direct service positions or front-line staff. Survivors should be embraced in medicine, law, policy, research, and anywhere that serves or works on behalf of people who have faced adversity.



FOR MORE GUIDELINES ON BUILDING SURVIVOR-INFORMED ORGANIZATIONS, VISIT:

<https://nhttac.acf.hhs.gov/system/files/2023-03/Survivor%20Informed%20Toolkit%20Updated%202023.pdf>

FOR DETAILED FINDINGS AND ADDITIONAL INFORMATION ON THIS STUDY, VISIT:

<https://www.rti.org/impact/estimating-sex-trafficking-in-sacramento-county>

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