

LIFE HISTORIES of TRAFFICKING SURVIVORS: THE COMPLEXITY OF PSYCHOLOGICAL IMPACT OF TRAFFICKING

INTRODUCTION

Trafficking in human beings is a crime of extreme gravity generally linked to organized crime. It is a serious violation of fundamental human rights. Its objective is to exploit the trafficked person and can be carried out in different ways, and thus there are different forms of trafficking. The main typology is trafficking in persons for sexual exploitation, which constitutes approximately 60% of all cases worldwide and is the main form of exploitation of women and girls.

The latest report published by the United Nations Office against Drugs and Crime (UNODC, 2018) shows a clear gender bias since trafficking does not affect men and women in the same way. The data show that 72% of all trafficking victims detected are women or girls (49% and 23% respectively). This tendency is accentuated when the number of victims of trafficking for sexual exploitation is analysed because, in this case, 94% are female (68% women and 26% girls). While it is true that women and girls are victims of multiple forms of exploitation, the vast majority are trafficked for the purpose of sexual exploitation. The same report shows that 83% of women and 72% of girls trafficked, are for sexual exploitation purposes.

This crime is one of the most extreme forms of sexist violence and has a huge impact on both the physical and mental health and well-being of the survivors. This serious violation of human rights triggers multiple psychological consequences: anxiety and depressive symptomatology, post-traumatic stress disorder (complex), hostility, dissociative disorders, self-destructive behaviours, attention and memory difficulties, among others. However, despite the magnitude and seriousness of the problem, there is little research into the subject and thus little is known about the phenomenon and the psychological impact it generates.

Prior to the practical study presented below, we first carried out a bibliographic analysis of the most outstanding studies on the subject. These studies can be found in the first chapter of this book.

Similarly, there is little research on the cultural and personal backgrounds of the surviving women, which can lead to differences in the experience of trafficking and its consequences.

This is the main objective of this research, to learn trafficked women's life histories in order to contextualize their experiences of trafficking, as well as their reactions and the



consequences, and to explore polyvictimization experiences prior to trafficking to construct better approaches and interventions for the recovery processes of these women, understanding their lives holistically.

METHODOLOGY

As stated above, the present study aims to understand and contextualize the experience of trafficking and its consequences in the context of a holistic view of complex life histories.

The research sample is formed by 30 female trafficking survivors; that is, women who were trafficked and sexually exploited but who are not currently in this situation and who currently live in Spain. A time criterion was also established, so that the participants had to have been away from the trafficking and exploitation situation for at least 3 years. All of them are over 18 years old and come from different regions of Africa (10; 33%), Latin America (11; 37%) and Eastern Europe and Russia (9; 30%). We tried to create a balanced sample between these three geographical origins, which are the most identified in the Spanish NGOs that are part of the project. The aim was to determine significant differences in the trafficking experience and/or previous life histories depending on the women's place of origin.

The participants were interviewed in a semi-structured interview, applying the Life Interview for Trafficking Situations (EVT), created specifically for the PHIT project, and which is based on the LHC - Life History Calendar and other components such as the theory of resilience, needs, trauma (complex) and grief. This interview collects retrospective information on the different life stages of the participants: before birth, early childhood (0-4 years), childhood (4-12 years), adolescence and first youth (12-20 years), and youth and early adulthood (20-35 years).

Most of the women interviewed, specifically 67%, are currently in the last stage, between 20 and 35 years old, and thus the information of this period is incomplete since they are not yet 35 years old. Therefore, we analysed the information of the completed stages. It is also important to note that, although all women were given the same interview, they did not necessarily answer all the questions. This could be because, for example, the women did not want to answer, did not remember or did not have the information.

The interviews were conducted in one or two sessions that lasted an average of two hours each. They were carried out in the entities APRAMP and PROYECTO ESPERANZA, in Madrid, and SICAR, in Barcelona, by professionals from each organization. Interviewers were previously trained to use the tool in question in order to homogenize its application. All the interviews, with the previous consent of the participating women, were recorded to be able to contrast the responses collected and, in turn, have an element of control that guaranteed the reliability among the observers.



The Life Interview for Trafficking Situations (EVT) model that was designed for the research is attached in annex 1, as well as the confidentiality commitments that were added to each interview. The ethical and safety protocol that was created (attached in the annexes) details the basic principles that must be scrupulously respected in order to carry out these interviews.

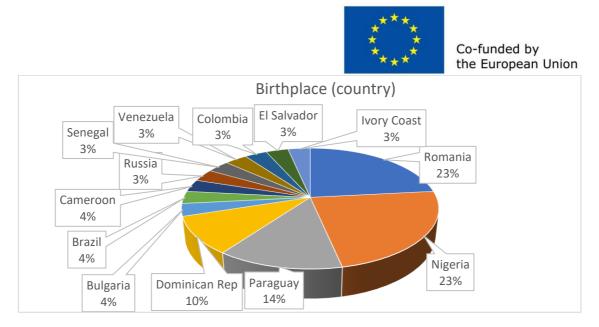
RESULTS

→ SOCIODEMOGRAPHIC VARIABLES

The sample consists of 30 women over 18 years of age who have survived a trafficking process and who have been away from sexual exploitation for at least three years. The current average age of the participants is 29.4 years old, although the range is from 20 to 41 years old. The average period of time since they left their countries of origin is 5.6 years and the average time they have lived in Spain is 5.25 years.

The women are divided into three geographical groups depending on where they were born: Africa, Latin America and Eastern Europe and Russia. Of the participants, 33% of the women are African and come from different regions of Nigeria, Cameroon, Senegal and the Ivory Coast. A total of 37% come from Latin American countries, specifically Paraguay, the Dominican Republic, Brazil, Venezuela, Colombia and El Salvador. The remaining 30% of the sample comes from Eastern Europe (Romania and Bulgaria) and Russia.

There is no clear pattern in relation to the geographical origin of the interviewees, since not all of them come from the same countries or from regions with the same characteristics. For example, many come from rural environments and others from urban areas. It should be noted that coming from a rural area does not necessarily imply vulnerability, just as coming from urban areas does not necessarily translate into more opportunities. What does seem quite common among women who have been trafficked and sexually exploited are the constant changes in residence and family figures. For example, moving from urban to rural areas (or vice versa), or having to move from a poor home with their parents to a well-off environment with the extended family, and the emotional conflicts that this entails on many occasions.



In terms of education level, 14% of the women attended primary school (up to 12 years old), 28% finished secondary education (from 12 to 16 years old), 34% continued studying until they were 18 years old, and the remaining 24% did some sort of professional training. No significant differences were observed in relation to the origin of the women, although approximately 46% of the Eastern European and Russian participants were able to study until they were 18 years old. However, in this group there were fewer women with professional training (18%) compared to those from Africa or Latin America.

Currently, around 70% of the participants work and have a residence and work permit, regardless of the geographical group to which they belong. However, approximately half of women do not receive a sufficient amount of money to live on (also regardless of where they come from).

A total of 61% of the survivors are mothers and the average age at which they had their first child is 20.8 years old. Most of them (40% approximately) only have one child. However, some women in the sample have up to five. When this aspect is analysed according to the geographical group, we observe that 40% of the Latin American interviewees have more than one child, and in contrast most of the women of the other two groups have only one or two children. In 43% of the cases, the children live with a family member in the country of origin (in some cases in the custody of the relatives or partners who participated in the abuse or trafficking of the mother).

About 60% of the women of African and Latin American descent are single. In contrast, 60% of the women from Eastern Europe and Russia are in a relationship.

Finally, approximately 55% of the women from Latin America and Eastern Europe and Russia are Catholic. In the group of African origin, 60% of the women are of another religion (Islam, Syncretism, etc.) and 90% of the African women practice their religion. Around 70% of the women of Latin American origin practice their religion. In contrast, 75% of the Eastern Europe and Russia survivors do not practice their religion.

CONTEXTUAL AND SOCIOECONOMIC SITUATION IN COUNTRIES OF ORIGIN



The interviews were divided into different sections related to the women's life stages and other elements that provide contextual information to better understand their life histories. The results show that the women describe the contextual situation of their countries of origin through two main factors that seem to be closely related: the lack of opportunities for the future and economic vulnerability. In terms of the lack of opportunities, 43% of the participants expressed that in their countries of origin it is extremely difficult to ascend the social ladder and that this inequality tends to be reproduced from one generation to the next. In relation to economic vulnerability, 36% highlighted the poverty and precariousness of their countries, which means that access to basic needs is not guaranteed.

The lack of opportunities is the most important factor for African women (in 70% of cases), while the women from Latin America and Eastern Europe and Russia highlight the extreme economic vulnerability of their countries of origin (in approximately 50% of cases) and, secondly, the limited opportunities they provide (30%).

Other factors that the interviewees highlight, although to a lesser degree, are armed conflicts (especially among African women), natural tragedies and situations of violence. There are also some women who state that they had a good living standard and do not identify any risk.

In relation to all these aspects, some women (especially women in the Latin American group) state that the situation in their countries of origin has become worse. They believe that the economy and society in general are worse now than when they lived there. For example, they consider that there are currently fewer job opportunities or that the country has become an increasingly insecure place to live. Perhaps this is one of the reasons why most women do not consider returning to their countries because, regardless of the economic situation that the family may have, the context remains unfavourable.

Despite all these contextual situations, women victims of trafficking do not necessarily come from impoverished environments. In fact, although many come from poor contexts, with a clear lack of opportunities and strong gender inequalities, 41% of the participants define the socioeconomic level of their personal and family situation as good. This implies that, although the macro-environment may often be impoverished, many claim to have had a good socio-economic situation at the micro-environment level. That is, some women describe their socio-economic situation positively but not the contextual situation of the country and/or region of origin (lack of opportunities, gender inequality, war contexts, situations of violence, etc.). On the other hand, those women who define their family's socio-economic situation as bad (35%) or not very good (24%) attribute it, for example, to family changes that influence the amount of family income and the death of family members or abandonments that are translated into fewer resources to support the family.



Although no statistically significant differences are observed according to the geographical group to which the women belong, a worse socio-economic situation is observed among those of African origin, especially before their birth and during childhood.

PREGNANCY OF THE MOTHER AND BIRTH

The average age of the mother when she gave birth is 24.7 years old; however, the average age of the fathers when the women interviewed were born is 30 years old. Regarding the pregnancy, 46% of the participants expressed that it was good, while the rest stated that there were problems. A total of 29% consider that the pregnancy was not very good, and usually this is related to their mother being very young and to situations of vulnerability. The remaining 25% considered that their mother's pregnancy was bad, due to such things as premature births, the father abandoning the mother during pregnancy, lack of support and help due to the family's rejection of the baby and, in an extreme case, physical abuse by a family member to cause abortion.

Although the percentages vary somewhat depending on the origin of the participants, the proportions are the same in the three geographical groups: pregnancy was good in about half of the cases and problematic in the other half (very young mother, lack of support and help, feelings of loneliness, family rejection, abandonment by the father, economic vulnerability, etc.).

Most family reactions to the mother's pregnancy and birth of the women interviewed were good (45%), and in these cases the news was even cause for celebration. However, there are cases in which the reactions were negative (20%). Some of the women's mothers were rejected by their families (for example, if they were not married). There are other cases in which there were reactions of both types (14%).

When these reactions are analysed according to the origin of the participants, similar proportions are observed in the different geographical groups. However, among the families of African women there were no ambivalent reactions (good and bad at the same time) and positive reactions predominate in this group a little more (60%).

FAMILY STRUCTURE

The results show that it is common for the women interviewed to have had unstable family environments, as we can see how their family structure varied throughout the different stages of their lives. At the moment of birth and during early childhood it is common to find an unstable family composition (in approximately 50% of cases), with brothers and sisters of different fathers or mothers, with a single parent, sharing a house with extended families, etc.

This is a very important factor that is present from the **first years of life** of many of the women trafficked regardless of their place of origin. However, the results reflect a greater tendency towards instability among Eastern European women, as we found unstable family environments in almost 67% of cases.



During **childhood** (4 to 12 years) in approximately 50% of cases the women experienced many changes of family figures. In this stage, for example, they begin to experience divorces and other changes in the nuclear family (abandonment by the father, arrival of new intimate partners of the mother or father with their respective children) and constant house changes (they have to move to live with other relatives, some have to live with their extended family, some do not live with either parent, etc.). All these changes increase towards the end of this stage in the three geographical groups and women highlight them as negative experiences and even traumatic in some cases.

In the next stage, during **adolescence and early youth** (from 12 to 20 years old), changes in the family structure continue to be accentuated. A total of 63% of the women say they experienced constant changes of house and family figures, and even to have had to move from their towns or small cities of origin to the city with their extensive families. In fact, at the end of this stage, approximately 43% of the women no longer lived with their family. It is during this period that many undertake their migratory projects or the trafficking process begins.

When the family structure is analysed according to the origin of the interviewees, a similar situation is observed in the three geographical groups. At the beginning of adolescence, about half of the women lived with their parents; however, at the end of this stage, approximately 50% lived outside the family nucleus. The women highlight this as an aspect of instability that affected them emotionally.

FAMILY BACKGROUND

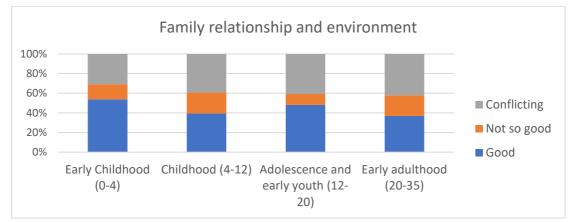
It seems that there is a reproduction of abusive patterns, since approximately half of the mothers of the women interviewed were abused, mainly physically, by their fathers. There is a clear gender bias, as this figure doubles that of fathers who suffered mistreatment. This is true regardless of the origin of the women, since in all geographical groups the number of mothers who were abused is greater than the number of fathers who were abused. In this sense, the experience of gender inequality is passed on from generation to generation, normalizing many experiences of sexist violence suffered simply for being a woman.

Addictions are observed in a minority of cases, regardless of the women's country of origin. The most common is alcohol addiction and is more frequent in fathers (present in approximately 30% of cases) than in mothers (in 3%). In some cases, the women interviewed associate abusive alcohol consumption with physical abuse towards mothers (for example, they verbalize that their father was an alcoholic and mistreated their mother).

FAMILY RELATIONSHIPS



To analyse family relationships throughout the survivors' lives, they were asked to define these relationships as *good*, *not very good* or *conflicting* in each life stage. The following graph shows the diachronic synthesis that is analysed below.



With regard to the relationship between members of the nuclear family **before their birth**, around half of the women interviewed (approximately 52%) defined it as good, while the other half describe it as not very good or conflictive. In these cases, it is common that the father is violent towards the mother and in some families this violence is also associated with other forms of abuse (for example, that the mother has to support the family economically while the father does not work). There are no significant differences in this respect depending on the country of origin of the women interviewed.

In relation to the extended family, many of the participants' parents lived in unstable family environments. They also express that there were family conflicts, for example between the father's and mother's families. However, a third of the women describe good relationships with their extended families.

During **early childhood** (first 4 years of life), 45% of the women define their parent's relationship as conflictive and 33% as not very good. This implies that during their first years of life most of the women witnessed numerous fights and arguments, conjugal disharmony, abandonment, physical abuse and abusive consumption of alcohol and drugs. These last two factors tend to characterize conflictive relationships. In fact, in many cases they are closely related since in general the abusive consumption of substances can trigger situations of abuse and physical violence. Only 22% of the participants expressed that their parents had a good relationship, understanding the relationship as good if there was no violence or abuse. That is, the concept of *good relationship* did not have anything to do with positive or healthy relationships, but rather with relationships in which there were no conflicts.

All this is maintained when the relationship between the parents is analysed according to the geographical group of origin, since in each group conflicting or not very good relationships are detected in more than half of the cases (88% for Latin American women, 77% for Eastern European and Russian women and 66% for African women).



On the other hand, during this early childhood, approximately 50% of the women state that they had a good relationship with both their mother and father, which can therefore coexist with violence within the family. For example, 54% of the women state that they had a good emotional relationship with their father (because they feel that he took care of them, treated them well and played with them) although they had witnessed their father be violent towards their mother. However, a quarter of the women said that the relationship was bad or not very good with their parents. This is related to the consumption of alcohol and physical and psychological abuse. The remaining approximately 27% of women said that they did not have a relationship with their fathers.

When this aspect is analysed according to geographical group, it should be noted that 90% of the women of African origin said they had a good relationship with their mother, while in the remaining 10% of cases the relationship was not very good. On the other hand, in no case did these women describe the relationship with their fathers as bad (67% said that the relationship was good and the remaining 33% said that the relationship was non-existent or not very good). Only 33% of Latin American women said they had a good relationship with their mothers, and 67% had poor, not very good or non-existent relationships. For Eastern European and Russian women, 57% said they had a good relationship with their mothers in this stage and 43% said they also had a good relationship with their fathers. However, it should be noted that approximately 30% of women did not have a relationship with their father.

During **childhood** (from 4 to 12 years old) family relationships continue to be conflict in most cases (36%) or not very good (20%). In conflictive relationships we usually find child abuse and violence towards the mother, abandonment by the father and even the death of a family member. In the relationships that are not very good there are usually problems with a specific family member (for example, authoritarian fathers, a bad relationship with an uncle or cousin, etc.).

This does not vary according to the women's origins, since in the three geographical groups in the majority of cases the relationships were conflictive or not very good.

Between 12 and 20 years old, during **adolescence and early youth**, we also observe conflictive (39%) or not very good (21%) relationships in most cases. At this stage, conflictive relationships are related to witnessing violence, the presence of mental health problems and alcohol consumption, divorces, etc. On the other hand, women who state that they did not have very good family relationships describe them as cold or distant and relate this to the lack of support from their parents, emotional deficiencies, little emotional bonding and even the absence of a relationship due to an argument.

When family relationships are analysed in relation to the participants' places of origin, it should be noted that 70% of African women say that their family relationships were good. On the contrary, in the Eastern European and Russian geographical group,



approximately 89% of the relationships were conflictive or not very good during this stage. For the survivors of Latin American origin, the relationships were conflictive in 67% of the cases (and were good in the remaining 33%). Therefore, except in the African geographical group, not very good or conflictive relationships are observed in the vast majority of cases.

During **youth and early adulthood** (between 20 and 35 years old), family relationships continue to be conflictive in 42% of cases, which coexists with the fact that the women suffered violence and the consequences of past violence (physical, psychological and sexual). A total of 21% of the women describe family relationships during this stage as not very good and highlight the lack of support or care from their parents.

This trend is maintained in all geographical groups, since in all three conflictive or not very good relationships are observed in at least 50% of the cases.

HISTORY OF VIOLENCE

The results reflect that the women have suffered multiple situations of violence throughout their lives. Violence is a recurring situation in their life histories, that is, it is repeated in the different life stages and, in many cases, takes different forms. This leads us to affirm that the participants are not only survivors of the trafficking of human beings for sexual exploitation, but that they are also victims of multiple and diverse processes of victimization that they have suffered throughout their lives.

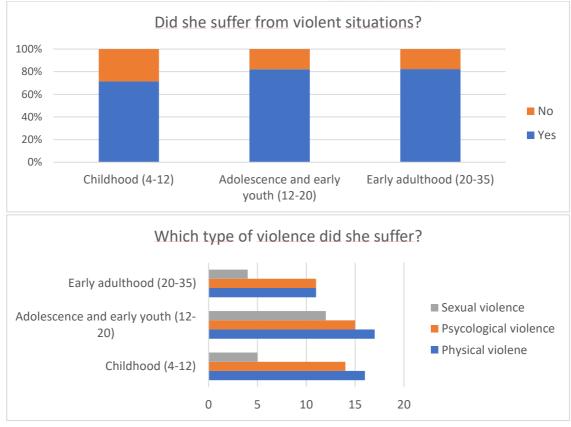
In the life histories of these women, it is very common to find a large number of traumatic events and experiences prior to the trafficking process, mostly related to violence, which have a large psychological impact that accumulates. This increases the effect on the integral health of these women and the complexity of the consequences. All this places them in a situation of increasing vulnerability, at the same time increasing the risk and the probability of ending up suffering other processes of victimization, such as sexual exploitation processes.

Therefore, the concept of polyvictimization becomes very important, by which authors such as Finkelhor (2011) refer to the occurrence during growth of more than one form of victimization that leads to multifocal disruptive experiences that have a harmful impact on the development of the individual.

The following graphs reflect the polyvictimization that the women experienced and the diachronic analysis shows the multitraumatic experiences that they had, since they experienced different kinds of violence.



Co-funded by the European Union



During **early childhood** (from 0 to 4 years old), around 30% of the women interviewed expressed having suffered traumatic and violent situations. Although in general there is some difficulty in remembering traumatic experiences during this early stage, some do have traumatic memories related to abuse or mistreatment by their fathers or grandfathers or the death of a family member. However, most women do not have such memories at such an early ages, and this is the case regardless of the geographical group to which they belong. It is important to bear in mind that this reflects a very high percentage of victimization already from a very early age, since the majority of the population do not have memories of their first years of life.

The figures change drastically when the next stage is analysed (no differences are observed depending on the place of origin), since 75% of women state that they suffered violence during their **childhood** (between 4 and 12 years). In most cases, this violence is physical (present in 57% of women) and psychological (50%). But it is worth noting that it is at this stage that sexual violence begins to affect the women (touching, attempted rape, consummated rape, etc.) since 18% state that they suffered this type of violence as a child.

It is relevant to consider the difficulties that these women have to identify situations of violence, since many violent actions, especially those that are psychological, are very normalized and naturalized due to their experience of inequality. This could imply a higher real percentage in relation to the violence suffered.



During this stage, violence is perpetrated mainly by the father and, in 89% of cases, it is continued. This implies that the vast majority of women suffered processes of violence that were constant over time. This chronic violence has serious long-term effects, which have been analysed in various research studies. For example, according to Finkelhor and Hashima (2001), victimization processes during childhood and adolescence have a greater long-term impact than suffering the same types of victimization during adulthood. This is because traumatic events during the first life stages can influence the processes of emotional, cognitive and social development, thus affecting an individual's resources and the development of future skills.

Many women had told other people about the violence they were experiencing but, although some were offered emotional support, the situation of violence did not end (for example due to the normalization of said violence, to the fact that they were not believed, etc.).

A total of 56% of the women state they also experienced other traumatic situations between 4 and 12 years of age: changes in family figures, abandonment by fathers, violence against their mother, lack of protection by the family, death of a family member, etc. In this aspect, although there are no large differences according to the geographical group, it should be noted that among Latin American women the percentage seems to be reversed; 40% say they experienced traumatic situations of this type, while 60% do not remember having experienced these situations during childhood.

Between 12 and 20 years, during **adolescence and early youth**, 82% of survivors, regardless of the geographical group they belong to, state that they suffered situations of physical violence (in 61% of cases), psychological (in 43%) and sexual (in 54%). It is worth noting the large increase in sexual violence compared to the previous stage, since it increases to become the second type of violence that most women suffered during their adolescence and early youth. In 71% of the cases, this violence was not a one-off experience, but rather continued. In fact, 52% of women say that these situations of violence did not end, and many feel guilty for not having reported them or not having acted to end them. In some cases (17%), the women say that faced with the impossibility of ending these situations of continued violence they were forced to flee or escape from their homes. It is for this reason they say they decided to take the journey. The violence in this stage was perpetrated mainly by the intimate partner, the father, an uncle or another relative.

During these years, 73% of women begin to establish their first sentimental relationships, and in 53% of cases they are abusive. In relation to geographical group, it is worth noting that the majority of Latin American (60%) and African (83%) women had an abusive first relationship. However, all the Eastern European and Russian survivors who answered this question state that their first sentimental relationship was not abusive. Despite this, there is a significant number of women who already in their first



relationships began to suffer all kinds of violence because, as mentioned, more than half of the participants (53%) said they suffered abuse in their first couple relationship.

Similarly, in 50% of the cases the first sexual relation was a rape, mainly by an uncle or their own partner. And this is true regardless of the place of origin since, in all geographical groups, about half of the women had an unwanted first sexual relationship.

At this stage there are some forced marriages with men much older than themselves and unwanted pregnancies begin to be detected in 57% of the women interviewed. Some are forced to abort and experience highly traumatic situations as a result. In general, motherhood is highlighted as very complex due to their youth and the sexist environment in which they live, where they must support maternity practically alone, although they often ask for support from their mothers.

During this same stage, it is added that about 70% of the survivors of each geographical group express having suffered other traumatic situations: witnessing the death of other women, death of loved ones, family violence, abandonment by fathers, sexual exploitation, addictions, not being cared for by the family, etc.

In this life stage, 77% did not receive any type of medical or psychological care. In no case did they receive it in their countries of origin. This is due to the lack of financial means to pay for it, the lack of psychologists in the country of origin, the prejudices towards mental health or also the normalization of the abuses suffered or the attempt to hide them.

During **youth and early adulthood** (from 20 to 35 years old), 82% of the women suffered violence, without significant differences depending on their origin. 65% of women report having suffered psychological and physical violence and 24% sexual violence. It is important to note that many women here do not identify or take into account the sexual exploitation suffered during the trafficking process as violence, and therefore, the percentage of violence (especially sexual) is actually greater. In most cases, in this life stage the violence is perpetrated by the intimate partner or by relatives of their partner and is generally continual (86%). Many women explained some situations of violence to family members, friends and even on occasions to the police, but the intervention of these people was not enough.

At this stage there are also many women (65%) who experienced other traumatic events related to the death of loved ones, pregnancies, abortions, confinement situations, having to leave their children in their countries of origin, etc., and no significant differences in this are observed depending on the origin of the survivors.

The accumulation of all these traumatic experiences and situations of violence throughout the different life stages takes on particular importance when the experience of trafficking is contextualized. Polyvictimization is the most relevant factor for understanding the phenomenon in a holistic way, since many of the women fall into trafficking and exploitation networks when they try to escape from these situations of



violence, which only end with geographical distance (although from this point more violent situations begin). This is a key point because many women undertake their trips in order to escape all these processes of violence. In fact, many of the survivors say that having been trafficked and sexually exploited is not the worst thing they have had to live through, and they even consider trafficking as part of the process they had to undergo to improve their situation. Trafficking is perceived, in most cases, as a way out of all the violence and traumatic situations that they suffered in their countries of origin from a very early age.

→SYMPTOMS OF VIOLENCE

The consequences of the violence suffered begin to manifest during **childhood**, between 4 and 12 years. At this stage, women already had symptoms of post-traumatic stress disorder, such as recurring dreams, hypervigilance, flashbacks related to situations of violence witnessed or suffered, etc. They also had symptoms of anxiety (fear of the abuser, generalized anxiety that lasts over time, etc.) and depression (very related to traumatic experiences such as witnessing violence at home). They also show symptoms of hostility (greater aggressiveness towards people, introversion, aggressive impulses as a defence mechanism, etc.). All this symptomatology has a large effect on the future personality of the women. Some of them express that the psychological effect of the experience of violence marked their way of being and relating with others throughout their lives. For example, they say that after going through a depression they were not able to communicate with other people in the same way, because they became more reserved and shy; or that, due to experiencing anxiety symptomatology, they became more fearful and distrustful; or that the hostility turned them into more aggressive and introverted people. As all these symptoms are maintained over time, due to their histories of multivitimization, their personality is shaped by the experiences of violence and the symptomatology that these trigger.

It should be noted that comorbidity of symptoms is observed in this life stage and in the following stages. That is, women have more than one symptom or more than one symptomatologic group at a time. These accumulate from one stage to the other and this accumulation can lead to the appearance of other symptoms.

During **adolescence and early youth**, between 12 and 20 years, all these symptoms begin to become accentuated. They continue to experience symptoms related to post-traumatic stress disorder (negative thoughts about others, fear of men due to the sexual abuse suffered, nightmares and intrusive thoughts related to experiences of abuse) as well as anxiety (which is usually hidden if they are in a situation of sexual exploitation) and depression (sadness predominates as a result of death, suicidal ideation, autolytic behaviour, etc.). Hostility also begins to increase and they say that they wanted to destroy objects and that they thought about harming or even killing their abusers.

In the next stage, **between 20 and 35 years**, the symptomatology is accentuated even more. The most present symptoms related to post-traumatic stress disorder are



nightmares, persistent hypervigilance and personality changes (some express that they have become more irritating and cruel). On the other hand, fear continues to accompany them persistently as the main anxiety symptomatology. With regard to depression, the most striking symptom is attempting suicide, which appears for the first time. They also have periods of depression, loneliness, lack of hope for the future (although many come into conflict with themselves because they want to live and get out of the situation they are in). Finally, they continue to exhibit symptoms of hostility.

It is important to note that high comorbidity is observed, since the same woman has different symptoms that accumulate and many of these symptoms become chronic over time. Taking into account the lack of specialized attention that has been mentioned previously, in many cases these consequences continue to increase and affect and interfere in the habitual development of these women's lives.

→RISK FACTORS

The risk factors are any variable related to the individual or their environment that increases the probability of developing a problem, worsening it or maintaining it. That is, risk factors are elements that increase the probability that an undesired result will occur. They do not usually act in isolation and tend to be cumulative, so in many cases the consequences associated with them are magnified.

To analyse these factors, the women were given a list of situations and they were asked to indicate which ones they considered had acted as risk factors in their case. At the end of the list there was an open answer so they could add all the options they wanted. From here and throughout the different life stages, the women evaluated various elements as situations of risk. The most outstanding ones are shown below.

During **early childhood**, one of the main risk factors that the participants highlight is physical abuse in the family environment. Of the survivors, 37% consider it an important risk factor to have witnessed from an early age constant situations of physical violence by their father towards their mother. On the other hand, 37% of women highlight the systematic psychological abuse in the family environment (psychological violence exercised by the father towards the mother and also the intimidation that they themselves received from their stepbrothers), 37% consider poverty as an important risk factor and 33% highlight abandonment by their father.

During **childhood**, between 4 and 12 years, a larger proportion of participants highlight physical and psychological abuse in the family environment as risk factors (50% and 43% respectively). At this stage, not only does the father's abuse of their mother appear, but they themselves become victims of systematic violence by the father and other male figures (physical violence, punishments, insults, contempt, threats, harassment by stepbrothers, etc.). Gender inequality becomes a key element in their experience of victimization. At this stage, isolation and bullying at school also appear (43% of the participants were bullied at school) and constant house changes (considered an element of risk by 37% of the women). On the other hand, the participants highlight parental



abandonment or early separations of parents (33%), loneliness (30%), and poverty (27%).

The risk factors of violence and suffering psychological effects increase during **adolescence and early youth** (between 12 and 20 years). The physical and psychological abuse suffered in childhood is continued during adolescence and is maintained while they live with the abusers. In 67% and 53% of cases, respectively, these abuses are highlighted as the main risk factors during this stage. Similarly, 47% of the participants consider sexual abuse an important risk factor and 37% highlight traumatic couple relationships (gender violence appears for the first time during adolescence, a stage in which we find forced marriages and all types of violence from the intimate partner). In 33% of the cases there is a lack of protection and emotional ties and leaving school due to the need to get work. Of the participants, 30% consider the death of loved ones, poverty and mental health problems, mainly as a result of having suffered violence, as risk factors in this stage. A total of 27% consider it an element of risk to have looked for ways to escape from their homes (getting married to flee, wanting to travel to Europe, etc.), as well as family conflicts and constant house changes.

Between 20 and 35 years of age, during **youth and early adulthood**, the sample is considerably reduced, and becomes 19 women, since there are many who are not yet 35 years old and who, therefore, have not completed this life stage. However, among the participants who have completed it, the most prominent element as a risk factor is gender violence (in 84% of cases). The vast majority of women have conflictive relationships that involve different types of violence to different degrees. Women continue to highlight psychological (53%) and physical (47%) abuse as important risk factors, not only by the family, but also and mainly by the intimate partner. Of the interviewees 47% highlight the lack of positive emotional bonds and loneliness and 42% highlight mental problems (mainly symptoms of anxiety, depression, PTSD and hostility as a consequence of the violence suffered). They continue to highlight elements of gender inequality such as pregnancies, abortions and maternity without any support (37%), among other factors.

PROTECTION FACTORS

We understand protection factors to be all those circumstances, characteristics, conditions and attributes linked to prosocial behaviour that enhance an individual's capacity to face certain adverse situations successfully. They can be static (non-modifiable) or dynamic (although sometimes it is difficult, they can be modified) and, if present, favour resistance to risk factors, encouraging more positive results.



At this point, the strategies that survivors of multi-traumatic situations have for coping with the risk factors become very important. Below are the most relevant strategies.

During **early childhood**, the majority of women (60%) emphasize that positive emotional bonds with a family member helped them a lot. That is, the main factor of protection during the first years of life of these women was to have had a special bond with a family member, usually with another woman (mother, grandmother, aunt, etc.). On the other hand, in 43% of the cases, they highlight family unity. In fact, some of the women identify early childhood as one of the best moments of their lives because they lived together with their family.

Between the ages of 4 and 12, during **childhood**, the elements that they identify as protection factors are still similar to those that appear in the previous stage. 63% of women highlight having positive connections with a family member and feeling protected when they are with him or her. On the other hand, 47% highlight leisure time (playing with friends, listening to music, etc.) and school. That is, one of the main protective factors highlighted is the right to play and to enjoy childhood.

During **adolescence and early youth** (between 12 and 20 years old), the main element that continues to stand out (in 73% of cases) is protection by a family member with whom they have a special bond. In these cases they emphasize the fact of having a relative who does not abuse them and with whom they can talk, be believed and find support. Therefore, the presence of a figure who believes in them and supports them unconditionally is very important. Secondly, resilience itself stands out, the ability to overcome and even emerge strengthened from adversity, the ability to recover from a trauma. 47% of women consider that their strength, self-confidence and hope for the future is one of the main elements of protection.

In **early adulthood** (between 20 and 35 years old), women continue to emphasize their strength and resilience as key elements of protection and having a special bond with a family member in 53% of cases. Of the women, 42% consider motherhood as an important protective element. It is important to highlight how the survivors' vision of motherhood changes, because what they previously considered a risk factor becomes in this stage a protective factor: being a more adult mother or the experience they have in this case of motherhood, which is usually experienced as something positive that fills them with hope. In the same way, family harmony continues to appear (26%) and being able to continue studying (26%), which reflects the importance of access to certain needs that are not always covered. At this stage, 21% of the women attach importance to economic sufficiency.

→ HEALTH AND ACCESS TO MEDICAL AND PSYCHOLOGICAL CARE

Regarding the survivors' health status, 53% said they had enjoyed good health **between 0** and **4** years and 30% stated that they had some minor illnesses during that period (migraines, tonsillitis, asthma, seizures or malaria). However, 17% of the women consider that they had poor health, with many headaches and stomach aches, seizures,



etc. In relation to place of origin, it should be noted that no woman from Eastern Europe or Russia said they had poor health during their first years of life (67% said that their health was good and the remaining 33% had some minor problem). However, regardless of the geographical group, these women did not have access to medical care, in most cases (60%) because their parents thought they did not need it or because no medical care existed.

During **childhood** (between 4 and 12 years old), 72% of the women report having had good health. The remaining 28% had minor illnesses that they affirm to have successfully overcome (caries, asthma, hepatitis A, anaemia, dermatological problems, etc.). None of the women received medical or psychological assistance in this stage, with no significant differences between geographical groups. The main reason for not receiving mental care is that it does not exist in many of the countries of origin or there are strong prejudices related to mental health.

In the next stage, **adolescence and early youth**, the majority of women (62%) had good health. However, during these years we found more health problems related to their social life, since 27% expressed having had anxiety problems, coma induced by alcohol poisoning, physical and psychological consequences of the abuse suffered, etc. On the other hand, 11% expressed having bad health and they relate it to having suffered strong anaemia and anorexia. The differences between geographical groups reveal that 80% of women of African origin had good health; however, 70% of women from Eastern Europe and Russia had health problems (only 30% said they had good health).

During this age, many began to consume alcohol, tobacco and cannabis (some between 12 and 14 years old). One of the women in the sample started using heroin at age 16.

Regardless of the place of origin, the vast majority of women (77%) did not receive any kind of medical or psychological assistance due to lack of economic resources, prejudices about mental health, because they hid the abuses suffered or because they tried to normalize them. The remaining 23% who received psychological support received it because they were recovering from a trafficking situation or were in a rehabilitation centre. That is, only women who were in an entity or NGO received psychological help. They all believe they needed help and now some are receiving that support they never had.

During **youth and early adulthood** (between 20 and 35 years old), 50% of the participants say they suffered from minor health problems, including mental health problems, such as hypervigilance and postpartum depression, and also physical problems, such as sensitivity in the legs, breast lumps, gynaecological infections, toothache, etc. During this stage no addictions were reported. Regarding the differences between geographical groups, it is relevant to note that 83% of women from Eastern Europe and Russia had minor health problems; in contrast, around 70% of women from Latin American had good health, and 50% of women of African origin had good health.

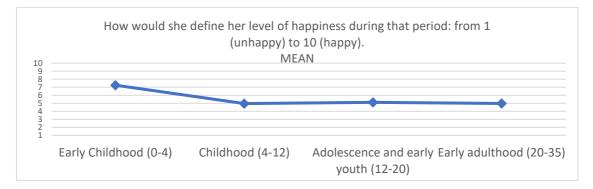


Following the trend of the previous stages, during this period most of the women did not receive medical or psychological support (many did not want it because they did not want to talk about their experience or thought they did not need it and, in many cases, there are still many prejudices in relation to mental health). However, those women who have received psychological attention value it very positively.

→ LEVELS OF HAPPINESS AND WELLBEING

During the interviews, the women were asked to define their level of happiness in the different stages of their lives with a score of 1 (*unhappy*) to 10 (*happy*). This aspect is very important because it is closely related to the emotional coping strategies that the participants have used throughout their lives and, consequently, to their ability to be resilient and to overcome all the situations of violence they have experienced.

When the diachronic evolution of the women's happiness level is analysed we can see how it decreases through the different stages of their lives as the years go by. No statistically significant differences are observed depending on the geographical group to which the women belong. Regardless of their place of origin, their level of happiness and wellbeing decreases throughout the different life stages. This can be seen in the following graph.



\rightarrow THE TRAFFICKING

None of the women interviewed are currently in a situation of trafficking and sexual exploitation. This was one of the inclusion criteria, in addition to the time criterion that established a minimum of 3 years since they left the exploitation situation. The average duration of this situation was 19 months, although the range goes from a few days to 10 years.

When the women's trafficking experience is analysed, it can be seen how they were contacted in different ways and one in three captors was a women (the rest being men). Between 20% and 30% of the survivors of each geographical group were contacted by a person they knew. This could be a neighbour, someone they met online, a former classmate, etc. In 22% of the total cases, it was their own intimate partner who persuaded them or forced them to prostitute themselves. This is the second predominant form of recruitment but it is relevant to note that it is only observed in women from Eastern Europe and Russia (37.5% of the women of this geographical group



were trafficked through their partners). In 15% of the total situations, the contact person was a relative, and it was the Latin American and African women who were captured through this channel. 19% of the women were contacted by an unknown person, mainly through Facebook, who proposed a job, and 11% ended up in a trafficking situation through a deceptive job offer. Finally, in 7% of the cases, the women were contacted by a friend (although normally not a close friend). This last modality was observed only in two cases, that of a survivor from Latin American origin and also a woman belonging to the Eastern European and Russian geographical group.

The most common expectations that the women had were related to earning money in the shortest possible time by working abroad, escaping the situations they were in, and starting their lives again (finish their studies, buy a house, help their family in the country of origin, create their own family, etc.).

In most cases (61%) the captors made them a job offer, which was usually not very precise. Very few women knew that they were going to be prostitutes, most of them were deceived into thinking that they were going to do something else (working as a waitress in a restaurant, as a shop assistant, as a nanny or doing housework, etc.). These promises of work acted as a factor of attraction regardless of the geographical group, but many women ended up deciding to leave their country of origin because they felt completely alone or rejected by their family and/or community (which acted as a precipitating factor).

A total of 21% of the women interviewed were recruited through promises of a relationship or a future together in Spain. For example, 30% of participants from Eastern Europe and Russia were recruited by intimate partners who suggested they move to Spain to have a better life. And 36% of the interviewees of African origin were recruited by people they met through the internet who promised a future together in Spain.

In a few cases, migration was forced by other people. There is one case of a Romanian gypsy woman who was sold by her partner to a man in Spain.

THE JOURNEY

About 30% of the women experienced or witnessed violence during recruitment and the journey. This includes threats to their family in the country of origin during transport, robbery, physical, verbal and sexual violence from the traffickers and authorities, deprivation of water and food, and witnessing physical and sexual violence against other women. Before starting the journey and during the trafficking, some women had to accept extreme conditions, such as the obligation to have sex with the trafficker a minimum of times a week, accept passports and false documentation, learn indications on what to say in the immigration controls, etc.

There is no clear pattern about the characteristics of the trip (price, means of transport, duration, etc.), although some generalities can be observed. The trip is usually very long, with many changes of transport and geographical scales and a long chain of accomplices



along the way. Likewise, women do not usually travel alone, but are transported along with other women, relatives or acquaintances during the journey, with whom they often establish good friendships.

Despite these generalities, there are important differences depending on the origin of the women. The results of this study show that it is very common for African women (especially those who come from Nigeria or Senegal) to travel by land in very harsh conditions through different African countries. The trip is usually very long and during the journey they are subjected to multiple forms of violence (physical aggression, sexual abuse and rape, deprivation of food and water, robbery and economic extortion, abandonment by the men who act as links, etc.). They say that the trip was especially long and hard in the countries near the border (Morocco, Libya, and, in one case, Turkey) and they emphasize that crossing the border was a traumatic experience.

On the contrary, the majority of Latin American women travel by plane. In these cases, many flights are taken and it is common for them to enter Europe by a country other than the country of destination. For example, women who come from the Dominican Republic usually came to Spain through Italy or Germany and those who left Paraguay entered Spain from France. Some African participants, although few, also made the trip by plane. In these cases, the women first travelled to Morocco, then to France and finally arrived in Spain.

Finally, making the entire trip by car or bus was only observed in women coming from Eastern Europe and Russia, specifically from Romania and Bulgaria. Some travelled in a car driven by their intimate partner or a contact person of the trafficker, who controlled them throughout the journey. In these cases, many travelled with other women who could be friends or relatives of their country of origin or women they met during the trip. On the other hand, some travelled alone by bus.

During the recruitment and transfer, the women were subjected to multiple control mechanisms and situations of violence by the traffickers. In 35% of cases, these forms of control were permanent surveillance, telephone control, threats and violence. Some of the women had their passports taken off them (25%), were confined (20%) and subjected to multiple situations of physical violence (25%).

DEBT

In most cases (65%), the travel expenses were paid in advance by the contact person and this is how the victims obtain a debt that increases arbitrarily upon arrival in the destination country, adding all kinds of services (housing, food and drink, clothing, commissions, a system of fines in case of labour indiscipline, etc.). The payment of this debt becomes a huge extortion system.

KNOWLEDGE OF THE DESTINATION COUNTRY



In general, the women know the name of the country they are going to but they do not usually know anything about it. A total of 68% of the interviewees knew that the destination country was Spain (except in the case of the African participants, among which only 28% knew that they were traveling to Spain) but about 80% did not have any knowledge about it beyond its name (they did not really know the country or its customs, they had never been to the country before, they did not know the language, they did not have a work permit or family or friends that could help them when they arrived). All this usually translates into complex processes of adaptation and feelings of sadness, disappointment, frustration, loneliness and uncertainty when they reach their destination.

CONDITIONS OF THE EXPLOITATION SITUATION

Upon arrival in the destination country, traffickers take advantage of the women's lack of knowledge about the country and their lack of protection and social support to manipulate and frighten them with threats (reporting them to the police for their irregular administrative situation, threats to them and their families, coercion through debt, etc.). Since most of these women have internalized attitudes of helplessness and submission from childhood, it is very difficult for them to identify themselves as victims and react against abusive situations. Although they have been deceived, many think that they will work as prostitutes but not that they are being trafficked, since becoming aware of the situation of sexual exploitation has a great psychological impact in many cases. For this reason, the self-identification process often does not occur until after a recovery process.

During the sexual exploitation situation, control is exercised mainly by the traffickers and other members of the criminal group (persons related to the prostitution business, brothel owners, travel facilitators, etc.). However, within this group there is a relevant number of women who exercise control over the trafficked women. These women are, in some cases, relatives or intimate partners of brothel owners and other prostitution businesses. It is also possible that the control is exercised by a person with whom the woman has an emotional bond (their partner, relatives, friends). In other cases, control is exercised by women who were also trafficked and sexually exploited. According to data from UNODC (2016), 38% of people convicted of trafficking human beings for the purpose of exploitation are women. This figure is exceptional, since in other types of crime the percentage of female offenders ranges between 10% and 15%. This may be because many female victims are forced to commit crimes, but research is still scarce.

The main forms of control during the sexual exploitation situation are psychological control (79%), mainly through threats to them and their families, and taking away their passport (64%). Physical violence was used in 64% of the cases (as punishment when they did not get enough money or refuse to perform certain sexual practices, or simply as a coercive means). There were extreme measures of surveillance in 43% of cases (they were locked up, never left alone, their movements were permanently controlled, video surveillance, etc.). Sexual violence as a form of control was used in 39% of women (they



were frequently raped). There were other forms of control such as voodoo in some Nigerian women.

Women worked an average of 14 hours a day, although the hours varied depending on where they had to prostitute themselves. A total of 46% of the women had to prostitute themselves in the street and worked from 5am/6am in the morning until 10pm at night (or from 8am to 10pm if they were in industrial zones). 42% were prostituted in brothels and normally had to work from 5pm until 7am. Those who were prostituted in flats (23% of the participants) had to be available all day.

In most cases, the women lived in the same brothel or flat where they had to prostitute themselves, they were made to pay rent for the room and they were charged for everything. They did not have days off and they were forced to work even when they were pregnant.

Differences are observed in relation to the place of exploitation according to the women's origin. The results show that having been sexually exploited in a brothel is more common among women of Latin American origin. A total of 70% of the survivors of this geographical group were prostituted in brothels and the remaining 30% in flats. Street prostitution predominates in women coming from Eastern Europe and Russia (it occurs in 70% of cases), although it is also observed in 56% of the participants of African origin. In this last group, brothel exploitation is also observed (in 33% of the cases).

The vast majority of women, regardless of the geographical group to which they belong, could not communicate freely with other people during the exploitation situation. Of the women, 54% said they could not contact anyone, 8% could only establish contact with other people within the workplace and 14% said they had a mobile phone but could not make calls freely, but rather it was used to control their activity. Consequently, many women could not communicate with their families, and therefore they were unaware of the trafficking situation.

The vast majority of women could not move freely either, and in this aspect there are no differences between geographical groups. A total of 55% say that they could not leave the flat or brothel, and 41% could leave but always accompanied by someone who controlled them. In these cases, the traffickers justified themselves by telling the women that they were accompanying them because they did not speak the language.

In practically all the cases of the three geographical groups, the women suffered multiple forms of violence during the exploitation situation. Of the interviewed women, 89% state that they were victims of physical, psychological and/or sexual violence during the exploitation period. A total of 75% suffered physical violence (assaults, beatings as punishment for not getting enough money, for refusing to work or rejecting certain sexual practices, pat-downs and vaginal inspections, etc.). Approximately 80% suffered psychological violence (death threats against them and their families, lies to scare them,



such as the police will not believe them but rather deport them to their countries of origin, or they will go to jail for their irregular administrative situation, etc.). Around 35% say they suffered sexual violence (rape and sexual abuse) but many women do not identify the experience of trafficking as sexual violence. In one case, there were other types of violence, such as forcing her to consume alcohol and other drugs with clients.

HELP RESOURCES

The results show that 52% of all women who answered this item asked for help. No significant differences were observed depending on the place of origin of the participants, since in the three geographical groups about half of the women asked for help. In most cases, specifically 54%, help was requested from the clients, but almost none of them wanted to do anything to help them out of fear of the consequences that becoming involved could have for them. Some women also told their situation to a family member, co-workers and even the police or an NGO. However, 48% of women did not ask anyone for help, not only due to fear, but also disorientation caused by ignorance of available resources and the traffickers' lies (about deportation or imprisonment if they went to the police or supposed contacts in hospital centres). For example, some of the women say that they did not know that they could have asked someone for help.

On the other hand, 96% of the survivors affirm that someone offered them help after leaving the process of trafficking and exploitation. In approximately 60% of cases it was a professional (police, NGOs, health professionals, etc.). Although there was also occasionally clients, co-workers or friends who offered to help them. However, many women did not accept the help of professionals or the police for fear of reprisals against them and their families, distrust of the authorities or even because they were not conscious of the trafficking situation. In most cases, the isolation they experienced coupled with the lack of knowledge of the country and available resources made it very difficult to get help.

They were mainly offered help related to providing asylum, maintenance, learning the language, etc. They were also offered help in contacting the police, medical assistance, financial support, legal advice, etc.

Only 24% of the women knew about some help resource, mainly the police and some NGOs, but they did not know very well what kind of help they could offer and their great distrust of authorities and the language limitations prevented them from contacting these resources. The remaining 76% did not know of any resource or service to ask for help before getting out of the trafficking and sexual exploitation situation.

Similarly, a quarter of the women say they had gone to some help resource. Some called the police after a fight with the trafficker, for example, and after the police intervention they were able to explain their situation and a help protocol was activated (usually they were referred to a comprehensive care service). Others contacted a mediator in the street or with an NGO and from there they received comprehensive care. However, 75%



of the women never went to a support service during the sexual trafficking and exploitation situation regardless of where they came from.

RELATIONSHIP WITH THE TRAFFICKERS

A total of 25% of the women maintained a relationship with the trafficker (55% of women from Eastern Europe and Russia and 22% of the women of African origin). Some of them were recruited by their husbands or partners, who forced them into prostitution. Others initiated a sentimental relationship with the trafficker in the country of destination, especially women from Eastern Europe or Russia. It is also possible that the trafficker was the woman's husband but he stayed in the country of origin and there was another person who controlled the woman in the country of destination. However, 75% of the women did not have a sentimental relationship with the traffickers.

END OF SEXUAL EXPLOITATION

In most cases in all geographical groups, the sexual exploitation situation ended when the woman escaped. A total of 55% of the interviewees escaped the trafficking situation by themselves, usually by calling the police or by contacting an NGO. About 24% were able to get out of trafficking when they were arrested during a police check or raid. The remaining 21% escaped by other means (with the help of the police without being arrested, through mediators of an NGO that offered them help in the street, etc.)

CONSEQUENCES OF THE EXPLOITATION ON HEALTH

Sexual trafficking and exploitation have multiple consequences on the survivors' health. We observe a high comorbidity and confluence of symptoms in the different spheres of health. The psychological symptoms that predominate are a high prevalence of anxiety symptoms (constant fear, nervousness, difficulty in basic functions such as eating or breathing, insomnia, etc.), depression (sadness, excessive crying, suicidal ideation, despair for the future, etc.), symptoms related to post-traumatic stress disorder (mainly hypervigilance, flashbacks, intrusive thoughts, nightmares, etc.) and hostility.

This is consistent with the results of another study that was carried out within the PHIT project (Ramos, 2018) to assess the immediate impact of trafficking on mental health. The aim of that study was to identify the presence of psychopathology in women victims of this type of crime in the first 6 months after getting out of the network in Spain. The main results show that 60% of the participants have psychopathology and in approximately 90% of cases it is related to an anxiety disorder. The most prevalent diagnosis is Generalized Anxiety Disorder, in 60.9% of cases. In a smaller proportion there were other diagnoses such as Posttraumatic Stress Disorder (in 21.7%), Major Depressive Disorder (in 8.7%) and Panic Disorder (in 8.7%). No differences were found according to the age or origin of the survivors.

However, physical consequences are common, such as fatigue, loss of appetite and weight, neurological symptoms (headaches, concentration and memory difficulties, dizziness and fainting), gastrointestinal problems (abdominal pains, vomiting,



diarrhoea), cardiovascular and dermatological problems, muscle pain, etc. Sexual and reproductive health is also severely affected, as many women have pelvic pain or vaginal infections, sexually transmitted diseases, unwanted pregnancies, abortions, etc.

THE SURVIVORS' NEEDS

We analysed the women's needs right after they got out of the trafficking situation and their current needs. When these needs are compared, we observe that the survivors' current needs are still very similar to those they had when they escaped trafficking, although to a lesser degree. That is, although the intensity of the needs has decreased, the needs they had when they got out of the exploitation network have not yet been covered.

The main needs at both times are to have work, lodgings and economic support. Medical and psychological assistance and to rest and feel safe are also very important.

AFTER THE TRAFFICKING AND SEXUAL EXPLOITATION SITUATION

Most of the interviewees agreed to receive medical and psychological care after leaving the situation of sexual trafficking and exploitation. Only a few (11%) rejected psychological support due to prejudices towards mental health, lack of confidence or difficulties in expressing their emotions. No differences are observed between geographical groups.

All of the women who received psychological support are very satisfied and value it very positively. They greatly appreciate having someone who listened to them and with whom they could talk freely about their experiences. In relation to the other types of assistance (police, judicial, etc.), the women usually value the treatment received as good.

About 60% of the women felt quite safe or very safe after the situation of trafficking and sexual exploitation ended. This is observed regardless of their place of origin.

CURRENT SITUATION IN SPAIN

Currently, 43% of women are receiving medical and psychological care. Many of the participants continue going to the psychologist, although some with less intensity. They emphasize that it helps them a lot to talk about the many traumatic experiences they had during their childhood and youth. However, 57% do not receive psychological support at this time. Many left the psychological treatment or only go very sporadically (because they found work or because they think they no longer need it).

Most women assess their level of happiness as higher, but many women still need to cover what they consider basic needs, such as a stable job or being reunited with their family.



There are several factors that concern them: being away from their children, job instability, not being economically independent, finding a home, whether their residence permit will be renewed, learning the language, being able to study, family conflicts, their state of health, pregnancy or the possibility of becoming pregnant, finding a new partner, among others.

Unmet needs are often related to missing their family, lack of financial resources, unemployment, healing emotional damage, rebuilding their ability to trust and calming hostility, making new friends and creating a support network, etc.

However, they recognize that they have achieved different vital objectives: getting a job, having a child, building a family, bringing the family to Spain, getting a European residence permit, surviving the situation of sexual trafficking and exploitation, getting free, running away from a violent family situation, etc.

CONCLUSIONS

The objective of this study was to determine how the previous life histories of trafficked women are related to trafficking and its consequences. A specific interview was created for the project based on the Life History Calendar methodology. The interview was used to collect information to identify different victimization processes, and analyse differences according to the cultural backgrounds of these women, since the sample is divided into 3 sub-groups depending on place of origin.

The main results obtained evidence the clear gender bias in trafficking in human beings for sexual exploitation and the survivors' experience of this. They are victims of trafficking for sexual exploitation because they are women and, for this same reason, have suffered many other situations of sexist violence throughout their lives. In fact, from here we obtain one of the most important conclusions of this research: All the participants have histories of polyvictimization, that is, the accumulation of multiple traumatic situations during their different life stages, and this places them in a particularly vulnerable psychological state when they are trafficked.

The study's data clearly show that the participants have suffered many situations of violence throughout their different life stages. However, the percentages could in fact be higher due to the difficulties that the vast majority of women have in identifying violent situations. This is because many violent behaviours and attitudes, especially those that are psychological, are highly normalized as a result of the experience of inequality and because they have experienced them throughout their lives. In addition, many of the women do not identify or do not take into account the sexual exploitation suffered during the trafficking process, since they narrate this experience as part of a process of escape from other previous violence and, if they were not physically attacked by the clients, they do not identify these situations as experiences of sexual violence. Therefore, the violence experienced throughout the different stages may even be greater than that reported (which is perceived in the interviews), due to this naturalization of the violent processes suffered from early childhood.



There is a large similarity in the life experiences of the women, regardless of their origin. At some points, different trends are observed depending on the country of origin, but these have more to do with the trafficking process than with previous life histories. The results not only show that the vast majority of women suffered multiple processes of violence throughout their lives, but also that this violence is constant over time; that is, that the violence is chronic.

This accumulation and chronification of traumatic experiences has serious consequences for the women's health that begin to manifest at a very early age and become more pronounced as time goes on. We observed a general, clear comorbidity of symptoms, basically related to anxiety and depressive symptomatology, hostility and post-traumatic stress disorder.

It is relevant to note that very few of the women received help to end the abusive situations they were experiencing in their countries of origin. This is the reason that many fled, undertaking their migratory journeys in order to escape from all these situations of violence (most of them perpetrated by people from the woman's environment, mainly family members), since such situations only end with geographic distance (although from that moment they become victims of trafficking and are subject to other abusive situations). Surprisingly, many of the survivors state that having been trafficked and sexually exploited is not the worst thing they have experienced, and they even consider trafficking a part of the process they had to undergo to improve their life situation. Trafficking is perceived, in many cases, as a way out of all the violence and traumatic situations suffered in their countries of origin since their early childhood.

The study also shows that emotionally dysfunctional environments are also very common, since most survivors have experienced multiple changes of family figures throughout their lives. This is added to many other traumatic situations that they experience in a generalized way, including constantly moving house, being abandoned by parents, death of a relative, witnessing violence against their mother, lack of protection and support from their family, addictions, forced marriages, unwanted pregnancies, abortions, confinement situations, etc. All this is added in many cases to environments with large economic needs, although it is relevant to highlight that 40% of the women say that their family's socioeconomic situation was good. This implies that an environment that has the socioeconomic needs covered is not in itself a protective environment against trafficking, thus breaking important prejudices linked to these women.

The information obtained from the diachronic analysis has also been indispensable for understanding and relating key elements in order to contextualize these women's life histories, both in the comparison between the women's life stages and how the effects or experiences evolve throughout their lives.

We found that in most cases the women's narrative was interrupted by traumatic memories that affected how they explained their experiences (fragmented discourse,



lack of details, spontaneous memories, forgetfulness, difficulty in verbalizing certain facts, inability to remember important aspects of the traumatic experience, etc.). Although the main aspects are consistent throughout the various interviews, these disrupted elements have sometimes led to more complexity and difficulties when the information was collected and analysed.

These are just some of the elements that the Life Interview for Trafficking Situations (EVT) has allowed us to obtain, focusing the memories and obtaining more accurate and comparable information than when the person remembers freely. At the same time, this information has made it possible to approach the women's life histories in an overall and holistic way, beyond the experience of trafficking, and thus the victimological processes can be better understood. This victim-centred perspective, together with the transcultural vision, allows us to understand the complexity of these women's life histories and processes, and clearly points to the fact that we are facing processes that correspond to complex trauma.

This contribution of knowledge and specific tools for collecting this information (the Life Interview for Trafficking Situations) can be used to improve the processes of care and recovery for these women, going beyond the knowledge and tools that focus solely on the experience of trafficking. This approach adds elements of narrative therapy that, in addition to collecting essential information, make it possible to construct complete and complex stories, favouring and facilitating spaces for repairing and treating different traumatic aspects or lived experiences.

The comprehensive look at the survivors, based on their complete life histories, has facilitated a greater understanding of victimological processes and their consequences previous to and related to trafficking, since these are inter-related and lead to more complex processes. It is essential, therefore, to take into account all these key aspects to construct recovery paths for the survivors, without compartmentalizing their lives, attending to their needs appropriately, listening to them and placing the women at the centre of the entire process.

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