

Human Trafficking Protection: Improving Interventions to Protect Survivors of Forced Labor and Human Trafficking

LESSONS FROM RIGOROUS EVIDENCE

Introduction

Protection encompasses a vast array of comprehensive efforts to identify, assist, and support those who have been exploited or trafficked as they rebuild their lives. Services focus on improving identification of victims and providing support through shelter, food, counseling, health care, legal assistance and access to educational, vocational, and economic opportunities ([U.S. Department of State, 2022](#)). Existing research is primarily focused on improving identification and supporting survivors' mental health.

In this evidence brief, the Human Trafficking Research Initiative (HTRI) has compiled evidence¹ from 14 studies on protection interventions for survivors of human trafficking. We identified nine randomized controlled trials (RCTs) and four systematic reviews that—in response to the lack of rigorous evidence—included a wide range of quasi and non-experimental study designs. We have included these systematic reviews and a single quasi-experimental study to understand the evidence landscape and research gaps. Further research is needed to build the evidence base around protection efforts for survivors of trafficking. HTRI is providing research funding for academics, researchers, donors, and policymakers to pursue and support further research around these topics.



Key lessons from existing research



- 1. Trauma-informed mental health interventions are successful in reducing post-traumatic stress disorder (PTSD) symptoms** and other trauma-related symptoms amongst child soldiers and children who have experienced trafficking.
- 2. Evidence around mental health support in adult survivors of human trafficking is much more limited**, with only one RCT demonstrating the effectiveness of narrative exposure therapy for survivors of trafficking with PTSD.
- 3. A small number of studies show that educational interventions can improve healthcare** and specialized social workers' ability to identify and support human trafficking victims, but additional research is needed.

¹Please find a description of the methodology at the end of the document.

Detailed findings from existing research

1. Trauma-informed mental health interventions are successful in reducing PTSD symptoms and other trauma-related symptoms amongst child soldiers and children who have experienced trafficking.

Thousands of children are recruited, many through abduction and force, and used in armed conflicts across the world as combatants, messengers, scouts, cooks, minesweepers, and spies ([Ertl et al., 2011](#); [UNICEF, 2021](#)). Their exposure to extreme violence and traumatic events leaves them vulnerable to mental health and behavioral issues upon return to their home communities. Previous studies have found high incidences of PTSD, depression, aggressive behavior, and social difficulties among former child soldiers ([McMullen et al., 2013](#)).

Researchers have recommended treatment programs addressing PTSD, depression, and other trauma symptoms as necessary to successful reintegration of former child soldiers ([Ertl et al., 2011](#)). Trauma-focused cognitive behavioral therapy (TF-CBT) aims to help children suffering from PTSD and other trauma-related disorders, such as stress, anxiety, or depression. TF-CBT is the only well-established treatment for children exposed to traumatic events ([Silverman et al., 2008](#)). Though normally delivered in individual sessions, McMullen et al. ([2013](#)) provided group-based TF-CBT to former male child soldiers and other war-affected boys in the Democratic Republic of the Congo (DRC).

The group-based TF-CBT significantly reduced post-traumatic stress, psychosocial distress, depression or anxiety-like symptoms, and behavioral problems, and improved prosocial behavior. It also helped promote understanding, normalize symptoms, foster friendships, and provide a sense of safety and emotional support. In Haiti—where religion and

spirituality play a significant role in the culture—a spiritually-oriented TF-CBT program was delivered to child survivors of restavek, a form of modern-day slavery where children are sent by their families to work as indentured domestic servants ([Wang et al., 2016](#)). Spiritually-oriented TF-CBT—which integrates spiritual and/or religious themes—significantly reduced symptoms of post-traumatic stress among participating children, with a 70 percent reduction in symptoms relative to children who did not receive TF-CBT.

Narrative exposure therapy (NET) is another trauma-focused treatment developed for survivors of trauma that creates a chronological narrative of the patients' life as part of the therapy process. Among former Ugandan child soldiers, NET resulted in significant reductions of PTSD symptoms, including impaired functioning, as well as other outcomes not primarily targeted, such as depression, suicidal ideation, and feelings of guilt ([Ertl et al., 2011](#)).

An adaptation of narrative exposure therapy for forensic offender rehabilitation (FORNET) was developed to treat PTSD and appetitive aggression among former combatants. Appetitive aggression is characterized by enjoyment or pleasure in violence and is associated with continued violent behavior, which reduces the effectiveness of rehabilitation and reintegration programs ([Robjant et al., 2019](#)). PTSD symptoms were reduced for FORNET-treated former male child soldiers and ex-combatants in the DRC, though the intervention had no effect on appetitive aggression ([Hermenau et al., 2013](#)).

The FORNET group reported significantly less contact with active and delinquent ex-combatants, which suggests that participants are reintegrating more fully towards civilian life.

While girls make up a sizable proportion of child soldiers, research with female survivors is more limited. Robjant et al. (2019) delivered FORNET with additional components that strengthen social behavior and inclusion to former female child soldiers in the DRC. The adaptation of FORNET significantly reduced PTSD symptoms, depression, and current violent behavior. Appetitive aggression decreased, though the effects were moderate.

In India, Khubsing et al. (2020) delivered eye movement desensitization and reprocessing (EMDR) and art-based group therapy to male survivors of child trafficking.

The EMDR therapy had no impacts on PTSD symptoms, dysfunctional trauma related cognition, or depression symptoms. While meta-analytic studies suggest that EMDR therapy leads to reductions of PTSD in adults and adolescents, it may be insufficient in treating the complexity and severity of trauma within this population (Khubsing et al., 2020).

One systematic review of mental health support interventions for child trafficking survivors was identified, but the review was unable to draw conclusions about the effectiveness of interventions given the limited and heterogenous evidence to date (Wright et al., 2021). Further work is needed to develop and test appropriate mental health interventions for survivors of trafficking, including for mental health conditions other than PTSD.



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2. Evidence around mental health support in adult survivors of human trafficking is much more limited, with only one RCT demonstrating the effectiveness of narrative exposure therapy for survivors of trafficking with PTSD.

Evidence has shown that survivors of human trafficking are affected by high levels of mental, physical, and sexual health issues, but high-quality evidence on appropriate interventions to support these needs is limited ([Ottisova et al., 2016](#)). Only one RCT was identified: Brady et al. (2021) found that NET led to significant reductions in PTSD, depression, and anxiety symptoms among adult survivors of human trafficking with PTSD.

A systematic review of health interventions to support survivors of human trafficking highlights the significant gap in rigorous research ([Dell et al., 2017](#)). Only six studies met the authors' inclusion criteria, five of which were rated as poor quality for assessing the effectiveness of interventions. The review search included exit interventions—which are intended to help victims leave situations of trafficking—but no studies were identified. The poor quality of studies and variability of outcome measures prevented a synthesis of effects; the authors noted the urgent need for collaboration and agreement on outcome measures that could be used in future research efforts.

Another systematic review assessed the impact of social service interventions on the physical health, mental health, and personal development of female survivors of sex trafficking ([Schroeder et al., 2023](#)). Occupational therapy, standardized mental health therapy, and wrap-around services (focused on case management and access to multiple types of support services) were identified as the most effective intervention types, though the quality of studies included in the review was mixed. The authors further noted the lack of systematic outcome measurement as a key challenge in human trafficking research.

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3. A small number of studies show that educational interventions can improve healthcare and specialized social workers' ability to identify and support human trafficking victims, but additional research is needed.

Studies in the U.S. have found that between 50 and 80 percent of human trafficking victims had contact with the healthcare system at some point during the course of their exploitation, putting healthcare providers in a unique position to be able to intervene ([Garg et al., 2021](#); [Polaris, 2018](#)). In order to intervene, healthcare providers must be able to recognize victims and know how to best engage and support them. A brief educational intervention with emergency department providers in the United States significantly increased recognition of hypothetical victims and knowledge of appropriate referral options ([Grace et al., 2014](#)).

A quasi-experimental study found that a brief survivor-informed educational program for pediatric residents significantly increased identification of hypothetical victims and referral knowledge ([Garg et al., 2021](#)). Additionally, there were significant increases in the residents' confidence in recognizing and caring for trafficking victims, which has not been seen in other studies, and is likely important to improve identification and referrals in practice. Finally, a systematic review of human trafficking educational interventions for healthcare providers found increased awareness, knowledge, and confidence in providers' skills across all studies ([Fraleay et al., 2019](#)). However, only one RCT was included in this review, and the other studies were rated as fair or poor quality.

In the U.S., the child welfare system is a set of government and community-based services and programs designed to ensure the safety, well-being, and healthy development of children. This system is tasked with protecting children from abuse, neglect, and other forms of harm, as well as supporting families to provide safe and nurturing environments. Social service workers (such as Child Protective Services) are in an important position to be able to identify and support victims of child exploitation and trafficking, as a large proportion of survivors have a history of contact with the child welfare system ([McMahon-Howard and Reimers et al., 2013](#)). In this study, the focus is on commercial sexual exploitation of children (CSEC). A 90-minute training significantly improved CPS employees' ability to identify risk factors for entry into CSEC, their knowledge of relevant laws and services, and their self-reported willingness to refer CSEC victims and children 'at risk' for CSEC to specialized services ([McMahon-Howard and Reimers et al., 2013](#)).



Key takeaways and recommendations for further research:

- 1** Further research spanning intervention type and population is needed to build the evidence base for effective protective mechanisms for trafficking survivors. Currently, the evidence is focused on treating PTSD, while evidence on effective interventions for survivors affected by other mental health issues is largely untested. Similarly, former child soldiers are the primary population studied, with less research on supporting survivors of human trafficking for sexual or labor exploitation. HTRI is funding a study that examines the effectiveness of a mental health intervention for human trafficking survivors in Uganda (Carlson et al.) as well as four early-stage research studies to pilot protection interventions in the Philippines, Brazil, Uganda, and Lebanon. **More information can be found [here](#) (HTRI project brief).**
- 2** More studies are needed to show long-term effects of support interventions. While mental health care has been recommended as necessary to successful reintegration, very few studies looked at reintegration as an outcome measure. Hermenau et al. (2013) examined closeness with combatants as a short-term marker but was unable to measure common long-term outcome indicators such as employment, marriage, education, and land ownership.
- 3** The lack of standardized and consistent outcome measures in human trafficking research remains a significant obstacle in comparative analyses that examine quality and cross-regional assessments. Building consensus on outcomes to systematically measure the success of support and reintegration of trafficking survivors is important to generate high-quality evidence for protection interventions.
- 4** Despite the recognition that survivors should be thoughtfully engaged in the development of policies, programs, and interventions, HTRI only uncovered a single study that collaborated with a trafficking survivor to develop and implement a training program. More research is needed on interventions that are both informed and co-designed by survivors to ensure effective recovery and reintegration.

Methodology

In this rapid review, HTRI searched Cochrane Library, Campbell Collaboration, EBSCO, Elsevier, Google Scholar, PubMed, SAGE, and ScienceDirect. In addition, the “snowballing” method was used to identify references from eligible studies. We included systematic reviews and studies using experimental and quasi-experimental impact evaluation methods.

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Innovations for Poverty Action (IPA) is a research and policy nonprofit that discovers and promotes effective solutions to global poverty problems. IPA designs, rigorously evaluates, and refines these solutions and their applications together with researchers and local decision-makers, ensuring that evidence is used to improve the lives of the world’s poor. IPA has established the Human Trafficking Research Initiative (HTRI) in partnership with the Program to End Modern Slavery (PEMS) at the U.S. Department of State. HTRI aims to address the notable lack of evidence on effective programs to reduce trafficking and support victims.

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