Human Trafficking and Trauma Bonding

In some cases of human trafficking, the relationship between the victim and the trafficker may involve trauma bonding. Trauma bonding is commonly referred to as “Stockholm Syndrome” and may be used interchangeably. The victims often had prior trauma experiences, making them more vulnerable. This relationship between the victim and trafficker is beginning to receive increased attention. Still, most research is limited to the United States and focuses on the sex trafficking of women and girls.

What is trauma bonding?

Trauma bonding, sometimes referred to as trauma-coerced attachment and trauma-coerced bonds, is when a trafficker uses rewards and punishments within cycles of abuse to foster a powerful emotional connection with the victim. Traffickers may take on the role of protector to maintain control of the victim, create confusion, and develop a relationship or attachment, which may include the victim feeling a sense of loyalty to or love for the trafficker.

This connection, or traumatic bond, becomes incredibly intense when fear of the trafficker is paired with gratitude for any kindness shown. The cyclical nature of affection and abuse causes victims to internalize the positive interactions as meaningful and “the real” personality of the trafficker. Traffickers often identify women’s and girls’ unmet needs, whether for shelter, food, or love and self-esteem, and fulfill them. In addition, trauma bonding may occur within a family when the perpetrator or trafficker could be a parent.

In most cases, the longer the victim and trafficker spend time together, the stronger the bond. As a result, the trafficked person may remain or repeatedly return to their trafficker and see their situation as their “choice.” This makes exiting trafficking even more of a challenge.

I was addicted to my trafficker, like an emotional dependency. Every time he left the room I felt that I was having an anxiety attack and my chest felt like it would collapse. At first . . . he was always there for me. I didn’t have that when I was growing up, and he made me feel he was stable and I could rely on him. But when we got in fights, I would be scared that he would never come back. Then I felt I would have nothing. A lot of the girls who work feel this way about their trafficker. I would sit there and wonder why I would be crying if he went to the corner store. I felt messed up inside.

— Christina

Click here to learn more.

Stages of Trauma Bonding

The Grace Being website compares trauma bonding to drug addiction. Victims of abuse become psychologically addicted to their abuser and find it hard to leave the relationship. They describe seven stages of trauma bonding:

1: Love bombing
At the beginning of the relationship, your connection feels intense, and you experience euphoric moments. You feel appreciated and loved, and they present themselves as your ideal partner.

2: Get you hooked and gain your trust
As the relationship develops, your partner does everything they can to win over your trust. As a result, you start feeling attached to them, and your emotions depend on them. They slowly begin distancing themselves as they sense you are becoming addicted to them. Craving their love and validation indicates that you are developing trauma bonding signs.
In a healthy, loving relationship, love and acceptance are always present, as your partner won’t leave you craving for their affection and validation.

3: Shift to criticism and devaluation
The criticism stage generally starts slowly, and you might mistake it as a normal progression of two people getting more comfortable together in a relationship. But instead, you find yourself being blamed for everything that goes wrong, including their feelings and perceptions. As they enter the devaluation stage, they become more demanding, and it seems they are never pleased. No matter what you do, it is never good enough for them.

4: Gaslighting
During this stage, your abusive partner denies your feelings and experiences. They twist facts and make you feel that your concerns are invalid and that all problems in the relationship are solely your fault. This emotional manipulation technique can make you seriously doubt your thoughts, memories, and experiences.

5: Resignation & submission
You realize that no matter how hard you try to reason things out, you cannot get anywhere. Every time you want to reason things out, your partner continues to blame and criticize you while shifting the point of the argument to something irrelevant. Finally, you find yourself mentally and emotionally exhausted, so you decide to try and do things their way to resolve conflict.

6: Loss of sense of self
You find yourself feeling powerless and exhausted. A common symptom of trauma bonding is losing touch with your true self. At this stage, you will do anything to avoid another conflict and more suffering.

7: Emotional Addiction
At this stage, you struggle to find pleasure in anything, and you crave relief from the pain due to being rejected by your partner. This creates a cycle of dependency that can feel very similar to drug addiction.

Psychological Coercion
Trauma bonding may occur when a victim of human trafficking perceives a threat to their physical and psychological survival at the hands of their trafficker. Traffickers may isolate and threaten victims, induce exhaustion, and interfere with their believed or actual ability to escape. The sense of internal reality shifts, and the victim begins to lose her sense of self, adopts the worldview of the abuser, and takes responsibility for the abuse. Some media reports indicate that victims will fail to testify against their trafficker regarding abuse.

The emotions and reactions stimulated in trauma bonding are natural responses based on an ingrained effort to survive. These responses instinctively lead us to move away from negative experiences and towards positive ones. As a result, the instinct for self-preservation is being exploited for the benefit of the captor.

A victim may eventually feel helpless and respond to any form of “help” or “kindness” from their trafficker with gratitude and attachment to survive. However, when the victim has no other source of support or comfort, the victim may turn toward the trafficker. Therefore, a victim’s social and economic circumstances may contribute to their developing a sense of trust and loyalty towards a trafficker. For example, lack of access to housing, healthcare, employment, income, education, or asylum may increase the likelihood of a trauma bond developing.

Trauma bonding is often found when trafficked persons see their trafficker as lovers or partners. Often, survivors are unaware of the trauma bonding, making it even more difficult to leave.

Trauma bonds can also be so strong that women may return to traffickers many times before they can finally escape, even if their needs are being met elsewhere. Trauma bonding may also lead to PTSD, depression, anxiety, and other mental health issues. Click here to learn more.
Biological Impact of Trauma

Trauma bonding is not a sign of weakness but is a normal biological response to prolonged trauma and a psychological coping mechanism. Researchers have compared trauma bonding to Battered Women’s Syndrome in domestic violence or Stockholm Syndrome in kidnapping circumstances.

When a person initially experiences trauma, the limbic system, the brain’s emotional center, becomes overactive while the prefrontal cortex shuts down. Over repeated exposure to trauma, brain development may be negatively affected so that the victim becomes numb and disconnected from themselves. For the person to feel something, the trauma must be intense. The trafficking victim often will return to the trafficker due to the familiarity and routine provided by the relationship.

At times, this relationship may also decrease the psychological impact of the trauma as moments of love and care from the trafficker offset experiences of anxiety or fear. Click here to learn more.

Advocacy

Signs of Trauma Bonding

When working with survivors, be aware of the following signs that may signify a bonding situation. These include if the survivor:

- Over-identifies with the abuser and excuses their behavior.
- Feels indebted or always wants to please.
- Feels “needed” by the abuser.
- Appears to wear multiple “hats” or assumes personas in different contexts (with the trafficker, with service providers, with police, etc).
- Minimizes negative emotions.

Click here to learn more.

Strategies for Engagement

If you work with or encounter a trauma bonding situation, engage the person with compassion.

Focus on developing your relationship with the individual and tap into the moments of “doubt” and contemplation as they arise naturally.

It is helpful to be attuned to what needs the trafficker has satisfied and provide suggestions for healthy replacements. This includes emotional voids (love and care), physical needs (housing, food), hope for a better future, etc.

A trauma-informed approach is a key to ensuring appropriate care is offered and available.

Click here to learn more.

Impact of Trauma Bonding on Survivor Care

When trauma bonding has been part of the experience of a sex trafficking survivor, they may behave in ways that seem inconsistent with typical expectations of victimization. For example, within human trafficking, trauma bonding may cause coerced co-offending, perceived ambivalence, delayed or inaccurate reporting, or unwillingness to cooperate with law enforcement, service providers, or government officials. Therefore, services available to survivors need to consider the survivor’s relationship with their trafficker.

A trauma bond may help a victim feel balanced due to the relationship’s sense of predictability, and leaving the relationship presents an unknown risk. The survivor may find it difficult to make independent decisions and experience intense anger and sadness, numbness, damaging expectations about the future, and internal disorder. The treatment plan should consider the possibility of the victim returning to the trafficker.

By understanding trauma bonding and its lasting impacts on survivors, anti-trafficking advocates and service providers can present more holistic and effective care. Providing survivors with resources to address their immediate needs and opportunities for decision-making allows service providers to better support survivors’ healing process. While we must acknowledge the pain associated with trauma bonding and trafficking, we must also recognize the strength and resilience of survivors.
In a recent article, *Trauma-coerced Bonding and Victims of Sex Trafficking: Where do we go from here*, Chitra Raghavan and Kendra Doychak discussed the complex relationships that occur with both traffickers and other women who work beside sex trafficking victims. While being forced to engage in commercial sex with numerous partners, the trafficking victim often is involved romantically with their trafficker. Some victims even have children with their trafficker. In addition, some traffickers may coercively keep up the façade of a romantic relationship to facilitate control of the victim. The victim thus views her trafficker as a lover, while the criminal justice system sees the trafficker as a criminal.

The authors stress that when examining the relationship of a trafficked woman to her trafficker, clinicians and researchers should strive to define the relationship first and foremost from the victim's point of view, rather than a legal one, to allow better insight into the victim's behavior and coerced bonds.

The authors examined the second area of relationships of the sex trafficking victim to other women who work beside her, which may be the only social support the women have. These relationships are often marked by competition, abuse, and exploitation.

Newer, younger women may threaten the victim's position with her trafficker, with the trafficker actively taking advantage of this threat to maintain control. The older favorite may be asked to take an active role in "breaking" in the new woman, disciplining her, and humiliating her when she brings in less money or does not meet the expected earnings. These vertical power relationships compound the trafficked victim's psychological entrapment and trauma-coerced bond to the trafficker.

The traumatic-coerced attachment may grow more powerfully because all other relationships are marked by mistrust and betrayal. Two, when asked to exploit, abuse, and punish other women, trafficked victims are asked to violate their own moral stance. This betrayal of values is considered key to trauma-coerced bonds. The victim is not only experiencing personal abuse but also inflicting abuse in the sacrifice of others. This creates a final surrender of will, autonomy, and the self, and leads to shame, self-hatred, and ultimately, identification with the abuser as a means of coping and protection from their 'wrongdoing.'

The authors maintain that trauma bonding should be understood within these hierarchical and vertical relationships rather than through a single and dominant relationship with the trafficker. Click here to learn more.

**Action**

What needs to be done?

Currently, there is no medical standard for the diagnosis of trauma bonding. There is also a need to develop evidence-based and trauma-informed service delivery. Standardizing the assessment of trauma bonding can help identify red flag indicators and establish response protocols.

Current research is mainly limited to the United States and focuses almost exclusively on the sex trafficking of women and girls. Significant exploration regarding trauma bonding among labor trafficking victims is needed. These research gaps create uncertainty regarding the prevalence and full impact of trauma bonding on all human trafficking victims globally. Examination of the relationship between socioeconomic factors and the occurrence of trauma bonding is also needed. Research into the frequency of trauma bonding will support improved understanding among practitioners and more effective policies and services.
Victims of trauma bonding are usually interviewed as survivors several years after exiting. Unfortunately, this could lead to missing information or details about traumatic experiences and outcomes.

Further study and research should include comparing the presentation of these attachments in victims of sex trafficking to other forms of victimization (e.g., intimate partners, childhood sexual abuse, etc.) to more clearly grasp what commonalities these relationships share and how they differ. Specifically, little is known about the process of forming the attachment or bond—is the process rigid, or does it fluctuate? Further, why do some women bond and others do not? What level of awareness do the victims have over their cognitive shift? Finally, how do the dual role of intimate partners and coerced working relationships and the nature of sex work, which involves the body, affect the presentation of the trauma-coerced attachment and the experiences had by the sex-trafficking victim?

Lastly, prevention and intervention strategies should be explored so that researchers, clinicians, and the criminal justice system are better equipped to meet these victims’ needs successfully. Click here to learn more.

Unwinding the Trauma Bond: Handbook of 20 Group Sessions for Human Trafficking by Katherine D. Norfleet

This book was published in January 2020 and is written for professionals working with the victims of human trafficking.

Unwinding the Trauma Bond aids the human trafficked teen by helping them:
− Realize they are experiencing normal responses;
− Begin to recognize their story through the stories presented in session and in videos;
− Begin to understand “how a smart person like me” could be so duped by unscrupulous people;
− Begin to acknowledge these unscrupulous people are not their friends nor their family.

Now that they have escaped the life, what is next?
Begin making sense of the void that is left now that Human trafficking is over.
− Learn in group processing that this void is also normal;
− Learn how to sublimate the trafficking experience to unfold a new purpose that can be utilized to rebuild a bright future.

Understanding Trauma Bonds Between Traffickers and Their Victims

The purpose of this presentation is for participants to understand how the bond between the trafficker and the victims is established and the barriers that stand in the way of recovery. Please click here to view this YouTube video.

Inside the Mindset of Sex Trafficking Victims

Dr. Chitra Raghavan describes the signs and symptoms of sex trafficking victims and the main, problematic emotion of ‘feeling responsible for the abuser’s future’ in her study ‘Trauma-coerced Bonding and Victims of Sex Trafficking: Where do we go from here?’. Please click here to view this 6-minute YouTube video.
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