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A Literature Review Exploring Resilience and Resiliency Interventions for Female Sex Workers

A graduate project submitted in partial fulfillment of the requirements

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By

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## Dedication

Dedicated to the hundreds of thousands of men, women, and children who are sex trafficked and sexually exploited, to the ones who died at the hands of traffickers and were unable to share their stories, to those who enter sex work due to social and/or economic reasons, and to those who advocate for an end to sex trafficking and sexual exploitation. Dedicated to Journey Out, a Los Angeles-based nonprofit organization, and all its members who opened my eyes to the reality we live in. The women who walked through your doors inspired me to find better ways to empower them. Thank you for all the work that you do in advocating for them. A special thank you to my husband, Alfonso, for the constant support and motivation. Lastly, this could not have been possible without my parents who immigrated here in hopes that they could provide us with a better life. I would not have been able to pursue higher education if it was not for their sacrifices.

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## Abstract

A Literature Review Exploring Resilience and Resiliency Interventions for Female Sex Workers

By

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This study is an investigation of the literature relating to the resilience factors of female sex workers (FSWs), both women and children, and the resiliency interventions used in practice when working with the population. The intent is to discover factors that contribute to sex workers resiliency and resiliency interventions that lead to significant positive outcomes in their lives. The research question for this literature review is: What are the resiliency factors that female sex workers have, which assist them in exiting sex work, and what resiliency interventions are used to help strengthen these factors? Results show that there are significant factors such as interpersonal relationships, spirituality, and development of self that contribute to resiliency in FSWs. When considering interventions that work best with this population, using a resilience-based lens is critical because it avoids stigmatizing and traumatizing the population further. These interventions include psychoeducational and trauma focused groups, art therapy, and a program known as Critical Time Intervention (CTI). A resilience lens is used throughout this review to approach the needs of FSWs and to increase awareness of the holistic services that they need access to. This research is identified to inform both policy and practice, that affect FSWs, and to assist social work practitioners in building effective and empowering programs that provide a safe space to heal.

Keywords: sex work, sex trafficking, domestic minor sex trafficking, resilience, interventions

## **Introduction**

Sex trafficking is a widespread form of modern slavery that is exploiting thousands of women and girls, in an underground economy that thrives off their vulnerabilities. Since 2016, the National Human Trafficking Hotline has reported sex trafficking as the type of trafficking with the most cases every year. Of the 22,326 victims helped by the hotline in 2019, more than half, were identified as victims of sex trafficking (National Human Trafficking Hotline, 2019). Both genders are forced and/or coerced into sexual exploitation and face various obstacles when attempting to leave sex work. Furthermore, over the last 5 years, the number of sex trafficking cases reported has steadily increased affecting more than just the United States. Globally, approximately 800,000 people are trafficked across borders, 80% are women/girls and 50% of those are minors (Dovydaitis, 2010). It is important to note that those who are sex trafficked are sex workers but not all sex workers are sex trafficked. Research shows that women enter sex work out of economic necessity, drug addiction, lack of education, flexibility of the job, homelessness, and running away from various forms of abuse (Cobbina & Oselin, 2011). Due to the lack of literature, articles will be used for the purpose of this literature review, regardless of whether or not the population researched was sex trafficked.

There is an abundant amount of research on the risks and barriers that sex workers face when attempting to exit the sex trade industry. On the other hand, there is limited research on the resiliency factors and resiliency practices for social workers to adopt into their practice. Using resilience-based models, when creating interventions, can provide social workers with a non-oppressive way of understanding sex workers (Burnes et al., 2012). Despite the growing numbers of female sex workers (FSWs) there are limited services that are adequate in meeting their needs. To be able to identify and develop effective interventions, for FSWs, we must be

able to identify, not only the risk factors, but the resiliency factors that they hold. This literature review will focus on exploring the resiliency factors of FSW's and the resiliency interventions being used globally.

## **Background**

### **Sex Trafficking and Sex Work**

Sex trafficking is defined as a modern form of slavery in which individuals perform sexual acts through the use of force, fraud, or coercion (National Human Trafficking Hotline, 2020). Furthermore, the top 5 forms of these acts include exploiting woman through substance abuse issues, physical abuse, sexual abuse, intimidation with weapons, and emotional abuse (National Human Trafficking Hotline, 2019). When identifying sex trafficking and sex work, it is important to note that there are various forms including survival sex, prostitution, sex tourism, pornography, smuggling, escort services, stripping, phone sex lines, illicit massage parlors, personal sexual servitude, and private parties (Polaris, 2017). As stated, prior, not all FSWs are sex trafficked but many participate in various forms of sexual exploitation. Those who enter sex work do so for various reasons such as financial necessity, running from abuse, and/or lack of job opportunities. Moreover, domestic minor sex trafficking (DMST) is the recruitment, harboring, transportation, provision, or obtaining of minors for the purpose of sexual exploitation (U.S. Department of Justice/DOJ, 2012). DMST includes all forms of sexual exploitation previously identified. Due to the limited amount of research, currently available, all forms of sexual exploitation, among adult women and children, will be considered for the purpose of this study. Additionally, the term "sex worker" will be used as an all-inclusive term that incorporates all forms of sex work, whether trafficked or not.

## **Risk and Resilience**

There are various pathways into the sex trade industry and not all are exploitative. Those who enter sex work, by choice, do so out of social and/or economic reasons (Baker, 2010; Burnes et al., 2012; Scorgie et al., 2013; Shdaimah et al., 2014). However, for those who are trafficked, reasons for entering sex work include coercion, kidnapping, force, and/or deception. Victims of sex trafficking can be anyone regardless of the identities they hold. On the other hand, there are some vulnerabilities that lead to a higher susceptibility of entering sex work, including, runaway and homeless youth, foreign nationals, and victims of violence and trauma (National Human Trafficking Hotline, 2020). Furthermore, research has shown that a significant amount of FSWs are minors when they begin selling sex (Hickle, 2017). In 2019, the National Human Trafficking Hotline reported that the average age that sex trafficking begins is at age 17, with 14 being a close second. The false promises of “making a lot of money” are enticing to women working minimum wage jobs, facing evictions, and/or having family to care for. There are various markers that put people at risk for sex trafficking, including gender, race, class, and citizenship status. Although anyone despite age, gender, and ethnicity engage in sex work, women and girls, account for 80% of victims globally (Deshpande & Nour, 2013). Studies show that women who are sex trafficked experience more isolation and instability, as well as, higher levels of fear, trauma, and mental health needs, compared to other victims of crime. In addition, they are susceptible to physical injuries and infections including pelvic pain, vaginal and anal tearing, HIV and AIDS, broken bones, burns, and broken teeth (Desphande & Nour, 2013). Socially, women who engage in sex work have fewer resources and increased vulnerability. Focusing on women only addresses part of the problem with sex trafficking and sex work but it addresses the highest affected population.



Resilience is one's ability to adapt in the face of tragedy, trauma, adversity, hardship, and ongoing significant life stressors while using internal and external resources (Everall et al., 2006; Newman, 2005). These internal and external resources include but are not limited to positive coping mechanisms, setting boundaries, creating healthy relationships, and access to mental health, legal, and other community services. Despite the growing number of those affected by sex work and sex trafficking, there is a lack of research on resiliency interventions and how these interventions support women exiting the life. Therefore, this literature review will address the resiliency factors identified in FSWs and the resiliency interventions being used among the population. It is important that interventions used among this population addresses trauma, while building resiliency. Even after leaving sex work, women struggle with the desire to return when they begin facing emotional and/or financial hardships. However, fostered resiliency factors, come into play during these times, allowing them to persevere (O'Brien, 2018). With positive human connections trauma recovery can begin to take place. For each survivor, healing looks different and multiple factors, such as, substance use disorders, legal status, length of trafficking, and readiness for intervention, must be considered when providing services (Kometiani & Farmer, 2020).

### **Aims and Objectives**

Despite the growing population of FSWs, there continues to be a lack of research focusing on their resiliency factors and the resiliency interventions social workers use in practice. This literature review will attempt to address the gap by synthesizing the literature of the resiliency factors of FSWs, globally, and the resiliency interventions used with the population. The objective is to inform both policy and practice that affect FSWs and to assist social work practitioners in building effective programs for this population. In addition, this literature review will also address the current limitation of

research such as the lack of articles discussing Hispanic women, one of the most impacted ethnicities.

### **Methods**

To address the main research question, the researcher conducted an electronic search of databases that provide free access to scholarly, peer-reviewed, full-text articles. This study focused on articles that were available in English. The electronic databases that were searched were California State University of Northridge (CSUN) database and Google Scholar. Additionally, the snowball method was utilized by using key documents and consulting the bibliography to identify other relevant articles. Each database was comprehensively searched for articles containing information on the topic being studied. “Sex Trafficking AND Resilience”; “Sex Trafficking AND Resilience Factors”; “Sex Work AND Resilience”; “Sex Work and Resilience Factors” were all terms that were searched in order to find articles that related to the research topic. The studies that were selected to determine eligibility were identified by title and abstract. Once identified, they were screened to assess whether they met the eligibility criteria.

Articles were eligible for inclusion in this review if they: (a) were published in the last 10 years; (b) if the study population addressed adult female sex workers/trafficking victims and/or children who were currently/previously trafficked; (c) if the articles discussed resilience factors of sex workers and/or resiliency interventions. After the articles were filtered to meet the criteria, the researcher read through the articles to confirm that they were relevant to the research being conducted. Data was extracted from the articles and used for the purpose of this literature review.

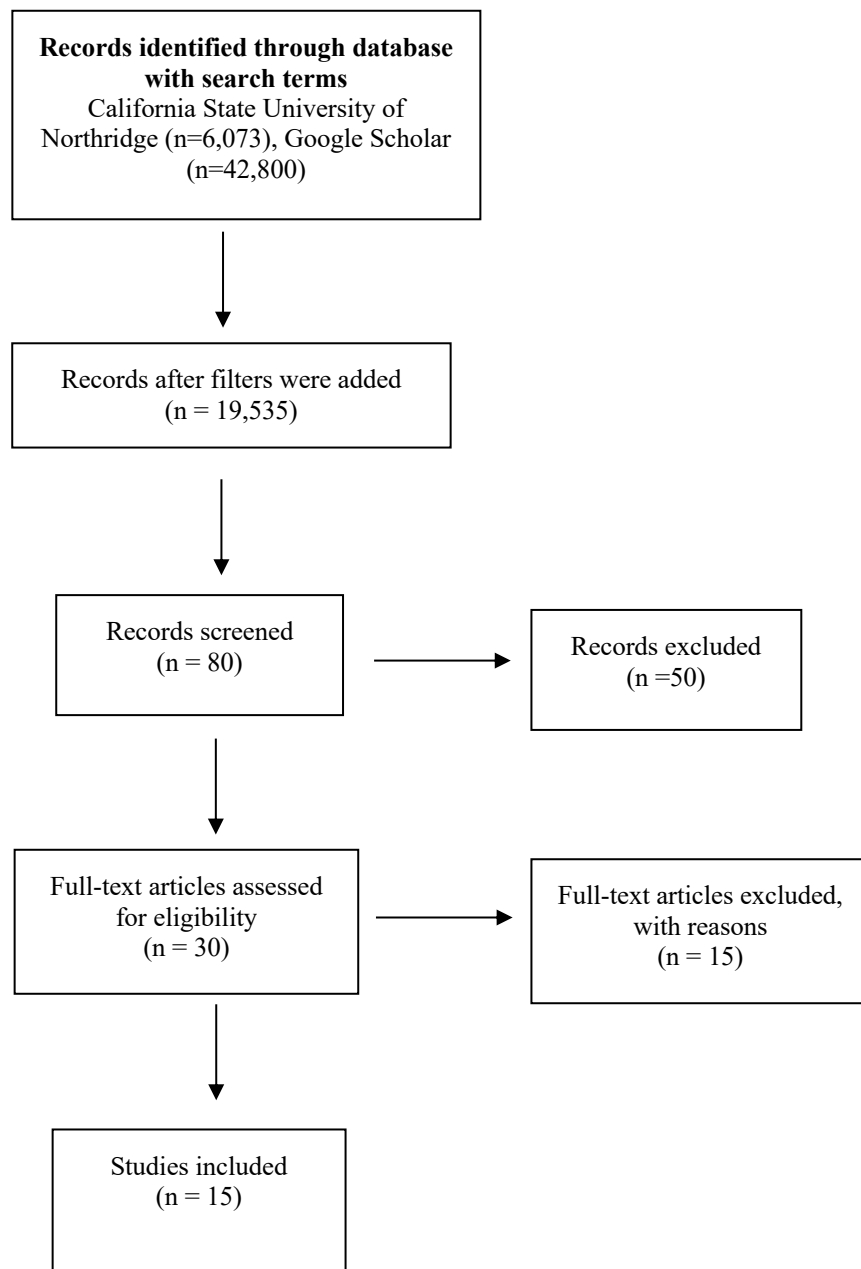


Figure 1. Flow Diagram – included and excluded articles in the systematic literature review

## Results

### Description of Studies

A total of 15 articles were identified from the databases using the search strategy described above. 12 of the 15 studies included in this review were carried out in the United States (Baker et al., 2010; Burnes et al., 2012; Cecchet et al., 2014; Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Holt, 2015; Kometiani et al., 2020; O'Brien, 2018; Reid, 2014; Shdaimah et al., 2014; Steiferwald et al., 2020; Whaling et al., 2020), one study was carried out in the United Kingdom (Hickle, 2017), one in Canada (Shareck et al., 2020), and one in Africa (Scorgie et al., 2013). 11 of the included studies were published between 2010 and 2018 and four studies were published in 2020 (Kometiani et al., 2020; Shareck et al., 2020; Steiferwald et al., 2020; Whaling et al., 2020). The age and demographics varied across the studies, but all the articles included some/all women participants. Five studies included children, ranging between the ages of 8 to 18 (Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Holt, 2015; Reid, 2014; Whaling et al., 2020). Of these five studies including children, four of them also included adults (Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Reid, 2014; Whaling et al., 2020). 10 studies recruited adults, ranging between the ages of 19 to 72 (Cecchet et al., 2014; Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Hickle, 2017; Kometiani et al., 2020; O'Brien, 2018; Reid, 2014; Scorgie et al., 2013; Shdaimah et al., 2014; Whaling et al., 2020). A high percentage of participants, within the studies, identified as Caucasian. Only six of the articles had a significant number of participants identify as African American (Cecchet et al., 2014; Reid, 2014; Scorgie, 2013; Shdaimah et al., 2014) and one article had a significant number of participants identify as Hispanic (Whaling et al., 2020).

The overall purpose of these following studies was to explore the experiences of sex workers and/or sex trafficking survivors and the factors that contributed to their resiliency. O'Brien (2018) specifically explored the role of interpersonal relationships as a resiliency factor within DMST survivors. Cecchet & Thoburn (2014), Hickie (2017), Holt (2015), Reid (2014), and Shdaimah & Leon (2014) explored a variety of factors that contributed to resiliency in their participants. Three resiliency factors will be discussed in depth including interpersonal relationships, spirituality, and development of self. Furthermore, there were various articles that specifically addressed resiliency interventions used within the research including Baker et al. (2010), Burnes et al. (2012), Kometiani (2020), Shareck et al. (2020), Steiferwald et al. (2020), and Whaling et al. (2020). The interventions that will be discussed within this literature review include psychoeducational and trauma focused groups, artistic expression interventions, and a critical time intervention program (CTI).

### **Individual Resiliency Factors**

For FSWs, their self-determination and resilience provide much needed insight on resiliency factors that provide them with the strength to persevere and eventually exit sex work. Research within the last ten years reveals various overlapping resiliency factors. Those that were mentioned included interpersonal relationships, spirituality, and development of self. Interpersonal relationships are defined as a strong or close association between two or more people and can include extrafamilial relationships (coach, spiritual advisor, case manager), primary caregiver relationships, and familial relationships (O'Brien, 2018). Interpersonal relationships can be both a risk and protective factor; but, for the purpose of this literature review, it will be discussed as a protective factor contributing to resiliency. When discussing spirituality, all religious beliefs are taken into consideration. Participants expressed that,

oftentimes, spirituality or religion was used as a coping mechanism during stressful situations (Cecchet & Thoburn, 2014; Hickle, 2017; Holt, 2015). Lastly, development of self incorporates various other intersecting factors that relate to how the individual views themselves and how they enhance their inner self. Other factors that contributed to resiliency included building trust, establishing boundaries, dealing with grief, reclaiming independence, positive attachments, and positive coping mechanisms (exercise, meditation).

For the women who constantly face unfair conditions, self-advocacy was an additional resiliency factor that allowed them to obtain their needs (Hickle, 2017 & Shdaimah et al., 2015). In one study, being system savvy, selective manipulation, assertion of control, resistance, and self-advocacy were discussed as resilience factors that benefited the women significantly (Shdaimah et al., 2015). One participant took advantage of her supervised sessions with a judge to argue for modifications to her treatment plan; her success resulted in access to exercise equipment and family visits (Shdaimah et al., 2015). The women are often treated unfairly, within the justice system, because of being sex workers. Oftentimes, the women are not given the benefit of the doubt when addressing questions in court such as drug usage and breaking curfew (Shdaimah et al., 2015). Sex workers express their resiliency by being self-advocates for the things that they need and at times are successful. These needs, such as family visits and having access to exercise equipment can significantly contribute to additional resiliency factors such as building interpersonal relationships and healthy coping mechanisms. It is important to recognize that this self-advocacy signifies that the person is attempting to take control and make changes in their lives, which could contribute to successfully exiting sex work (Shdaimah et al., 2015)

An additional study, of 174 participants, identified completion of higher education as a potential resiliency factor (Reid, 2014). Oftentimes, FSWs choose to exit the life for their

families, and they choose to pursue education for similar reasons. Results showed that obtaining an education was associated with exploitation being limited to adolescence, by over two-thirds, compared to reaching later into adult life (Reid, 2014). Completion of a higher school grade or college was associated with exploitation being limited to adolescence instead of persisting into adulthood, with the risk of persistent abuse being about half that for women who had completed at least high school compared to those who had not (Reid, 2014). Completing at least high school, may serve as a protective factor for those at risk of exploitation. With this in mind, providing educational opportunities to those affected by sex trafficking and/or sex work could positively impact their lives. Furthermore, the research showed that education could reduce the likelihood of persistent substance abuse within victims of DMST (Reid, 2014). A limitation for this study is that the data collected had a high percentage of African American females (89%). Therefore, there is a lack of diversity in demographics and cannot be generalized to the FSW population. This study states the need for interventions with a holistic approach including access to education, life skills, and job training which are discussed in the Resiliency Intervention section of this article. Resilience is built through various factors, but evidence shows that education is one of the best-established protective factors (Steiferwald et al., 2020). For those affected by DMST, their education is oftentimes cut short; therefore, they have few alternatives to earning income. Additionally, having a poor education is a barrier to being able to exit sex work (Baker et al., 2010). For women who are struggling to exit sex work, having educational goals, career plans, and a motivation to succeed could contribute significantly to their resilience. It is through their education that they can gain access to job opportunities, which could greatly assist them financially, and prevent reentry into sex work. Whether education means obtaining a GED or completing college, organizations should work to provide access to these resources.

## **Interpersonal Relationships**

Interpersonal relationships were identified as a protective factor that contributed to resiliency in various articles (Cecchet et al., 2014; Countryman-Roswurm et al., 2014; Hickie, 2017; Holt, 2015; O'Brien, 2018; Scorgie et al., 2013; Stieferwald et al., 2020). Six females were interviewed, and results showed that despite survivors having unhealthy past relationships, that consisted of violence, abuse, and betrayal, they recognized the need for healthy relationships and making connections outside of the sex trade (Cecchet et al., 2014). Their desire for meaningful and safe relationships provided them with the motivation to leave sex work and find stability in their lives. Furthermore, the participants began processing their trauma through their new, healthy, emotional supports (Cecchet et al., 2014). Having familial, peer, and/or community support when exiting sex work is critical to successfully transitioning. Being able to build healthy relationships, with family members and/or community professionals, produces hope for many survivors, and in turn, helps to build resiliency (Holt, 2015). In a study of DMST survivors, adolescents also expressed that any encouragement was helpful, regardless of whether it came from a family member or a professional (Holt, 2015). Within this study, positive attachment was a theme that played a significant role in survivors understanding their resilience. Participants also expressed that both professionals and/or family members helped them cope with trauma and move forward (Holt, 2015). Additionally, O'Brien (2017) researched the importance of interpersonal relationships, in DMST survivors, in fostering resiliency and providing protection. For this study, data was collected from 13 DMST survivors and in-depth individual interviews were conducted. Results showed that having positive early relationships served as both an intervention for those affected by DMST and as a prevention for those at risk of DMST (O'Brien, 2017). Within these relationships, survivors expressed the need to learn boundaries as



a form of protection and that being exposed to healthy relationships allowed for them to better identify “red flags” of potentially unsafe relationships (O’Brien, 2017). Furthermore, when survivors were tempted to return to the life, due to hardships, interpersonal relationships helped them to persevere and not return (O’Brien, 2017).

Scorgie et al. (2013) used the snowball method to research 106 women, 26 males, and 4 transgender sex workers in four African countries. Within the article, participants identified the importance of building relationships with fellow sex workers. In this way, they were united with others experiencing similar situations. Their unification provided a safe space for the women to advise and comfort one another, which, as expressed by one participant, made them feel human and relieved of stress (Scorgie et al., 2013). The participants also discussed that forming relationships with organizations that supported sex workers was of high importance. They provided them with the necessary resources such as support groups, bail for arrests, legal assistance, training in human rights, and practical skill building (Scorgie et al., 2013). It was through these relationships that the women felt supported and confident to take control of their lives. On the other hand, the researchers expressed the difficulties in obtaining this information from the participants, many who felt the need to conceal or limit the amount of detail provided (Scorgie et al., 2013). Additionally, as with all of the articles within this literature review, the sample is not reflective of the diversity of the sex worker population.

Another study on resiliency, in women exiting sex work, found that having networks was key to helping the women obtain different needs (Hickle, 2017). The participants expressed that feeling connected to others also helped them in reducing feelings of isolation, shame, and stigma (Hickle, 2017). This is what provided them with the motivation to successfully exit sex work and achieve their goals. Engagement and building trust with professionals also had a significant

impact on the women successfully exiting sex work (Hickle, 2017). Of the 19 participants interviewed, 9 of them expressed that their support networks consisted of the professionals they met throughout their time in the criminal justice system (Hickle, 2017). Those that experienced positive relationships with law enforcement felt better supported, both physically and emotionally. It is crucial to note that forming interpersonal relationships with service providers is also important to survivors. Therefore, professionals should make an effort in building rapport when interacting with the population. As detailed above, research shows that having stable and supportive relationships, even if it is just one, can lead to positive outcomes such as successfully exiting sex work.

### **Spirituality**

In addition to interpersonal relationships, spirituality also played a role in fostering resiliency for some of the participants within the studies (Burnes et al., 2012; Cecchet et al., 2014; Countryman-Roswurm, 2012; Hickle, 2017; Holt, 2015; O'Brien, 2018). Spirituality is defined as the belief that there is a higher power and the practice of these beliefs in various religious or faith traditions (Holt, 2015). The women throughout these studies looked to a form of a higher power for support and guidance. Recognizing their spirituality allowed them to view the world differently and provided them with the courage to change their life (Cecchet et al., 2014; Hickle, 2017; Holt, 2015). It is important to point out that, within one of the studies, five of the six participants were actively involved in a religious organization, possibly contributing to the theme of spirituality (Cecchet et al. 2014).

Participants also expressed that God was able to “change them in ways that they felt powerless to change themselves” (Hickle, 312). Being involved with their faith-based communities not only provided them with a form of coping but also led to relationship building.

Which as discussed previously, healthy relationships are critical to successfully transitioning. Furthermore, spirituality was identified as a subtheme in Hickle's (2017) study of resiliency in adult women. Almost half of the women (n=7) expressed that their spiritual beliefs and practices provided them with hope and motivation to exit sex work and they believed that their success in changing was possible through believing in a higher power (Hickle, 2017). Spirituality also served as a coping mechanism during times of stress, anxiety, and/or depression. As described within a study conducted by Holt (2015), these practices included rituals such as prayer, church attendance, and magic (Holt, 2015). Additionally, participants expressed that prayer helped them to not be scared and provided them with the motivation and the resiliency to push forward (Holt, 2015).

Faith/Spirituality had a total of 15/34 mentions, with the three subcodes of reading scripture, attending a faith congregation, and prayer and other personal spiritual practices, within Countryman-Roswurm's (2012) study of DMST survivors. The participants expressed that reading scripture was a resource that they turned to which helped them through difficult times (Countryman-Roswurm, 2012). Even though the participants were unable to attend church services during their time in sex work, they shared positive memories of attending church. This influence served as a resilience factor during their exploitation (Countryman-Roswurm, 2012). Moreover, prayer and other spiritual practices were used by the participants, such as looking for "signs" to help them overcome their traumas (Countryman-Roswurm, 2012). Despite the constant abuse and trauma FSWs face, spirituality is still present in their lives. Their faith not only promotes resilience but also helps them heal their traumas. At times, it provides them with the motivation that they need to exit sex work and provides them with the hope that everything will fall into place once they exit. Even though religion is often absent from social services, it is

important that organizations are able to refer women who are interested in developing or reconnecting with their spirituality.

### **Development of Self**

Development of self, as a resiliency factor, consisted of various other intersecting factors including self-worth, self-esteem, self-respect, self-acceptance, self-sufficiency, self-efficacy, self-regulation, developing a positive sense of self, belief in self, future planning, and achieving empowerment (Cecchet et al., 2014; Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Hickie, 2017; Holt, 2015; Kometiani et al., 2020; O'Brien, 2018; Reid, 2014; Shdaimah et al., 2014). Strengthening these various concepts of the inner self enhances the resilience within the women and empowers them through the healing process (Cecchet et al., 2014 & Kometiani et al., 2020). In Countryman-Roswurm's study (2012), four themes emerged under individual characteristics/traits: future-oriented (planning/looking ahead, ability to envision the future, hopes, dreams, and goals), positive oriented (optimistic thinking, thankfulness, and forgiveness), internally oriented (insight and awareness of conflicting values), and survival oriented (personal responsibility, self-sufficiency, belief in self, self-reliance, and self-possession). Under survival oriented, participants expressed that they were confident in utilizing their internal resources to meet their own needs (Countryman-Roswurm, 2012). It was through this self-sufficiency that they were provided with the hope they needed to overcome any obstacles they faced. Furthermore, 9 of the 17 mentions in survival oriented was belief in self which included the participant's positive thoughts about themselves and their capabilities, including being smart, creative, motivated, passionate, honest, and good with people (Countryman-Roswurm, 2012). With a strong belief in self, the women found their inner strength to survive DMST. A limitation of this study is that it only included young people living in Kansas who had been affected by

DMST. Therefore, their experiences of resilience cannot be generalized to bigger cities such as Los Angeles and Las Vegas.

Additional research showed that those who had a positive self-concept and were able to see other parts of their identities, outside of trafficking and/or sex work, appeared to have an overall more positive outlook on their lives despite trauma (Holt, 2015). The results of this study included 10 themes, 8 of which included aspects of development of self. Participants proudly expressed their sense of capability and positive self-concept, which provided them with the motivation to complete drug treatment programs or educational careers (Holt, 2015).

Furthermore, those participants who took the time to reflect on their positive traits expressed more hope for the future (Holt, 2015). The girls expressed planning for their futures, including educational and career goals, helping their family members, and emotional healing. Through this future-oriented thinking, they had hope which could have contributed to their overall resiliency. With planning for the future, many of the participants actively sought change such as obtaining drug treatment, maintaining sobriety, starting school, and using healthy coping skills (Holt, 2015). This form of actively implementing change demonstrates the impact that a future-oriented self has on successful outcomes and resiliency. Establishing an identity outside of being a “sex worker” also contributed to the women’s resiliency. Participants expressed that this was a more difficult task because they had grown up with others negative views toward them (Holt, 2015). To establish a new identity, the women looked at other pieces of their self such as their passions and interests (Holt, 2015). Despite the trauma they had faced, the women still described that they had a purpose in life providing them with the motivation and resilience that they needed (Holt, 2015).

Another part of development of self is learning self-worth and self-respect. Both of which contributed to survivors establishing boundaries and setting sexual limits in a study conducted by O'Brien (2018). Participants expressed that developing these aspects of themselves were important to mitigating their risk for DMST victimization and helping them build interpersonal relationships (O'Brien, 2018). Oftentimes, those who enter sex work are actively seeking love and support in the wrong places. Knowing one's self-worth and learning to respect yourself provides survivors with a voice and with an understanding that they are worthy of love. Participants in Cecchet's study (2014) also expressed the need for self-acceptance and forgiveness as a part of the healing process. With this came a release of shame and guilt that in turn, allowed them to begin building healthier relationships. Sex work oftentimes has a negative impact on various aspects of the self such as self-esteem, self-worth, and self-respect. FSWs face constant stigma and discrimination when accessing services which can lead to further traumatization and reentry into sex work. Whether FSWs explicitly experience stigma or anticipate it, this stigma is often internalized and affects various aspects of the self. Providing a safe space, free of judgement, can help FSWs develop their self in a positive way. When they are provided with the opportunity to develop their self-esteem, self-worth, self-respect, etc., they are not only strengthening their resilience but are also improving their mental health. Development of self encompasses these and other factors that help the women discover who they are and what they want out of life. Holistic care should incorporate ways to help FSWs develop a positive sense of self that they may feel empowered to overcome trauma, build interpersonal relationships, and reach their goals.

## **Resiliency Interventions**

For women who want to exit sex work, the process can be challenging and may not always be successful. Of the 15 articles selected for this literature review, six specifically focused on resiliency interventions and/or programs (Baker et al., 2010; Burnes et al., 2012; Kometiani et al., 2020; Shareck et al., 2020; Steiferwald et al., 2020; Whaling et al., 2020). In addition to those six, seven articles incorporated some discussion on resiliency interventions (Countryman-Roswurm, 2012; Countryman-Roswurm et al., 2014; Hickie, 2017; Holt, 2015; O'Brien, 2018; Shdaimah et al., 2014). Using a resilience-based lens is important because it highlights strength-based interventions and avoids stigmatizing and traumatizing the population further. Interventions that have a resilience lens understand the importance of language used within the work, positive coping mechanisms, and the role protective factors play for this population (Burnes et al., 2012).

Throughout the articles, it was evident that the interventions would vary based on the individual and their specific experiences. For example, the type of sex work the individual took part in (escorts, brothel workers, street walkers, etc.) could impact whether an intervention is effective (Burnes et al., 2012). Programs that are developed for this population should focus on resiliency and aim to foster healing through a holistic approach, where treatment goes beyond medical and mental health (Burnes et al., 2012; Holt, 2015; Steiferwald et al., 2020). A holistic approach would include supportive services in basic needs (housing, hygiene, food), education, life skills, job training, financial literacy, legal, and immigration. Within a study conducted by Steiferwald, Barnes, and Williamson (2020), a survivor of DMST was interviewed on what helped her cope and heal, as well as, what provided her with resilience. She expressed the importance of support from professionals and education. To build resilience, healing

interventions must help to establish protective factors which, in turn, work to strengthen the FSW's ability to cope with trauma and adversity (Stieferwald et al., 2020). Implementing education would provide more than just basic needs for survivors and the need for education goes further than just providing it as an intervention. Moreover, education should serve as a key form of prevention, to be used to alert communities that may be at risk of sexual exploitation.

Interventions should also aim to assist FSWs in identifying healthy individuals/relationships in their lives (Burnes et al., 2012 & O'Brien, 2018) and integrating mentorship programs that help build those relationships. Including these aspects of intervention could help build onto resiliency factors. Shdaimah et al. (2014) also discussed that interventions should be considerate of the demands they place on clients and whether they align with their needs. For example, programs requiring travel for services (health, housing, legal, etc.) without providing transportation does not have the needs of the client in mind (Shdaimah et al., 2014). An additional need identified by a separate article is that supporting women with children is critical (Hickle, 2017). For some FSW's, having children serves as a form of motivation to exit sex work. Interventions that strengthen resiliency factors should provide access to services that help mothers transition back into a parenting role, help them to reunite with their children, and/or help them process grief when losing custody (Hickle, 2017).

Baker et al. (2010) discussed the importance of an integrated model that focuses on a comprehensive view of the various ways women attempt to exit sex work. This integrated model was developed with six stages in mind: immersion, awareness (visceral and conscious), deliberate preparation, initial exit, reentry (for those who return before fully exiting), and final exit (Baker et al., 2010). The model incorporates the commonly palpable reality that sex workers often return to the life after many failed attempts. This stage of reentry is difficult to navigate;



because, despite the individual knowing that there needs to be a change, there may be a lack of resources and/or coping skills that allow for that action (Baker et al., 2010). When considering limitations, any model that is established is developed off the experiences of a specific population of sex workers. Therefore, may not necessarily address the needs of different types of sex workers or trafficking victims. Despite this, having an integrated model for exiting sex work is necessary because it provides professionals with a better understanding of the complexity of this process and outlines it in a way that allows others to recognize the stages more efficiently.

### **Psychoeducational and Trauma-Focused Groups**

One of the therapeutic interventions that could be used, in practice, when working with those impacted by sex work are psychoeducational groups. Despite there being minimal research on this intervention and its impact on sex workers, there is research with victims of other forms of sexual abuse and exploitation (Hayes & Morgan, 2005). The Lotus Psychoeducational Group was developed as an intervention to contribute to social work practice with DMST survivors (Countryman-Roswurm et al., 2014). Additionally, this group used pre and post-test assessments, as well as the Rosenberg Self-Esteem scale to analyze the program's success. Lotus consisted of a 10-session, therapeutic curriculum, where each of the sessions had a goal in educating the participants involved. Within the curriculum, healthy relationships, setting boundaries, self-discovery, developing a positive sense-of-self, and holistic health were explored. A total of 23 participants were included in this study, ranging between the ages of 14 and 21. Some additional demographics to consider are that 56% of the participants were women, 39% were Caucasian, 22% African American, 17% Bi-Racial, 13% Native American, and 9% Hispanic (Countryman-Roswurm et al., 2014). Results of this study showed that the psychoeducational group had a significant impact on the children. 70% of youth demonstrated that the group had taught them

skills to develop healthier relationships, 82% improved their ability to identify the signs of a healthy vs. unhealthy relationship, 71% improved their skills in setting boundaries, 88% in knowing what to do if they found themselves in an abusive relationship and/or sex trafficked (Countryman-Roswurm et al., 2014). The findings show that those who completed the psychoeducational group improved protective factors and, in turn, decreased vulnerability to DMST. Developing other psychoeducational groups, like *Lotus*, can help increase those individual resiliency factors described above. Like most of the studies within this literature review, the sample size for this intervention was small. This is typical with the nature of sex worker populations, which are hard to reach because of criminalization and stigmatization. It is important to note that the participants within this study also had access to additional social services which threatens the internal validity of the intervention used (Countryman-Roswurm et al., 2014).

Furthermore, trauma-focused interventions are strength-based and assist in building protective factors. Resiliency Interventions for Sexual Exploitation (RISE) program was initially developed to meet the needs of incarcerated youth who had experienced child sexual exploitation (CSE) and sexual traumas but is now used as a referral point for various agencies including Child Welfare, Schools, Juvenile Justice, and Department of Behavioral Wellness (Whaling et al., 2020). The program uses a commercial sexual exploitation (CSE) identification screening and intake assessment to identify youths' trauma, mental health symptoms, basic needs, substance use, support system, current level of safety, self-worth, and risk/protective factors. Additionally, this program focuses on strengths and emphasizes protective factors such as empowerment, healthy communication, healthy relationships, and self-worth (Whaling et al., 2020). A total of 90 individuals engaged with the RISE program, in a span of one year. Participants ranged in age,

from 12 to 28, and the majority identified as Latinx. Of the four engagement groups, within this study, 25 participants were engaged throughout the six consecutive months; seven participants initially did not use services, but usage increased over time; 6 participants started with strong engagement which decreased over time; and 24 participants declined services (Whaling et al., 2020). Results showed that participants who declined services or dropped out tended to be older. Of those who declined or dropped out, there was a high rate of learning disorders indicating that youth may need academic support (Whaling et al., 2020). This program has been successful because it specifically addresses the challenges of each participant, by creating an individual care plan (Whaling et al., 2020). Most importantly, RISE understands that oftentimes sex workers are currently working/return to the life which may result in incarceration. Despite this, RISE can continue offering services within juvenile halls and even partnering with emergency housing facilities for those needing placement prior to long-term care (Whaling et al., 2020). Besides the lack of diversity in this study, an additional limitation of this program is the difficulty in maintaining data collection, due to the fluctuating needs of the participants. Further research is needed on ways to increase data collection of clients and sharing of data between the various systems that work with the population (Whaling et al., 2020).

### **Artistic Expression Interventions**

Expressive arts therapy is an effective intervention often used with trauma survivors to access their feelings and process trauma (Kometiani et al., 2020). Research shows that this form of therapy is both effective and empowering, providing healing to survivors which helps to enhance resilience (Kometiani et al., 2020). For this research study, participants were taken from an anti-human trafficking program, in Ohio, and an art therapy group was introduced as a new therapeutic practice. The age range of the participants was 23 years old to 43 years old and all

were Caucasian females. Additionally, the participants had a variety of health diagnoses and were facing personal challenges that led to their attendance fluctuating within the art therapy program (Kometiani et al., 2020). Despite this, the value of expressive art therapy was evident in the participants as they began to express their feelings of grief, vulnerability, and self-worth in a non-threatening way (Kometiani et al., 2020). Within the art therapy program, concepts were introduced such as creating a mandala and introducing themselves with a puzzle. Both art therapy processes were used to signify the wholeness of the individual (Kometiani et al., 2020). To process trauma and loss, a poem “I am from...” was used as a way for participants to share their stories in an empowering way that allowed for trauma to be safely communicated through images (Kometiani et al., 2020). Via art therapy and self-expression, participants developed a higher sense of self-awareness (individual resiliency factor) and expressed feelings of security, self-worth (individual resiliency factor), and power which allowed them to connect with themselves and others within the group (Kometiani et al., 2020). Participants also showed increased hope, strength, confidence, and resilience when participating (Kometiani et al., 2020).

An additional article incorporated creative writing and artistic expression into their Resiliency Interventions for Sexual Exploitation (RISE) program (Whaling et al., 2020). Interventions that focus on artistic expression, such as art and creative writing, provide survivors with a safe space to revisit trauma while focusing on resiliency and empowerment. This case study only represented one group of female trafficked survivors; therefore, cannot be generalized. Due to the small sample size, further research is recommended to be able to use art therapy in a broader perspective. Sex work affects women in various aspects of their lives including physical, emotional, mental, psychological, and spiritual. There is constant violence and abuse that women are faced with which leads to trauma. Art therapy, when done

professionally, can work as an intervention for healing of trauma. Before introducing art therapy, basic needs should be met, and a more structured form of therapeutic care should be provided. When proper interventions, such as art therapy, are used, substantial growth can be achieved with FSWs. It provides a safe space for the women to reconnect with themselves, improve their resilience, and decrease feelings of despair, shame, and guilt. Artistic expression interventions create an environment that help to build resiliency and empower the women so that they may heal from their traumas and move forward in their lives.

### **Critical Time Intervention (CTI)**

Based off the critical time intervention (CTI) approach, that assists those in homelessness, a 9-month program was created to assist women exiting sex work (Shareck et al., 2020). The CTI approach believes that a successful transition from high-risk lifestyles requires wrap-around supportive services including mental health, addiction, housing, education, employment support, community integration, and support systems (Silberman School of Social Work, n.d.). This specific program, in Canada, provides women with a case manager to help them address the areas that are essential to them successfully exiting. Additionally, it offers assistance with parenting, life skills, rent and entitlement management and children's services for women care for children/other family members (Shareck et al., 2020). The nine months are divided into three phases that ultimately connects survivors to long-term community services (Shareck et al., 2020). This intervention stems from the understanding that sex workers face multiple challenges when exiting the life and relapses and/or disengagement can occur. Therefore, the program also offers a pre-CTI phase that has no time restriction and can help social workers build rapport with clients who are beginning their transition (Shareck et al., 2020). The limitation to this study is that no data has been taken on the results of the program, all

that is provided is a description of how the program will be implemented and the expected outcomes. Similar to the previous case study on art interventions, the results obtained from this specific intervention study cannot be generalizable to all female sex workers.

Table 1. Multiple studies on resiliency factors of sex workers and resiliency interventions.

| Author             | Title  | Yr.  | Purpose of the Study  | Study Design                   | Sample   | Findings   | Themes  |
|--------------------|--|------|---|--------------------------------|--|--|---|
| O'Brien            | “Sometimes, somebody just needs somebody – anybody to care.” The power of interpersonal relationships in the lives of domestic minor sex trafficking survivors | 2018 | To explore the role of interpersonal relationships in the lives of domestic minor sex trafficking victims               | Qualitative                    | N = 13<br><br>Non-White 3, White 10<br><br>Age range: 29 to 66                   | Interpersonal relationships have a profound impact on victims’ entry into “the life” as well as their exit   | Interpersonal relationships as a protective factor and interpersonal relationships fostering resiliency   |
| Kometiani & Farmer | Exploring resilience through case studies of art therapy with sex trafficking survivors and their advocates  | 2020 | To Explore the application of art therapy in enhancing resilience within victims of sex trafficking                     | Qualitative                    | All participants were Caucasian<br><br>Age range: 23 to 43                       | Art therapy sessions demonstrated affirmative effects of trauma recovery and an increase in awareness of their feelings, the women were able to re-establish connections with themselves and develop relationships | Personal well-being, developing self-awareness, expressing vulnerability, positive self-worth, personal gratitude, understanding of others, building trust through relationships, acceptance of the past by dealing with grief, and reclaiming independence |
| Cecchet & Thoburn  | The psychological experience of child and adolescent sex trafficking in the United States: Trauma and resilience in survivors                                  | 2014 | To better understand the factors that contribute to resiliency of young women in the sex trade within the United States | Qualitative Narrative Analysis | N = 6<br><br>African American 4, Caucasian 1, Mixed 1<br><br>Age range: 22 to 55 | Women interviewed have naturally resilient personalities including a desire to live, positive thinking, and motivation for change.   | Learning from experience, learning acceptance, leaving sex trade due to pregnancy or mental health symptoms, the need for meaningful and healthy relationships, the need to make  |

|   |   |      |   |             |   |   |  |
|---|---|------|---|-------------|---|---|--|
|   |   |      |   |             |   |   | interpersonal connections,   |
| Whaling, der Sarkissian, Sharkey, & Akoni | Featured counter-trafficking program: Resiliency interventions for sexual exploitation (RISE) | 2020 | To describe the Resiliency Interventions for Sexual Exploitation (RISE) program serving children survivors of trafficking | Qualitative | N = 62<br><br>Latinx 44, White 12, Black 3, Native American 2, Asian 1<br><br>Age range: 12 to 28 | There are certain factors that place participants at risk for dropping out of the program, those who declined services tended to be older and participated for less time compared to other groups<br><br>A high rate of learning disorders was also present in those who dropped out<br><br>4 engagement groups: 25 participants were engaged throughout the six consecutive months; seven participants initially did not use services, but usage increased over time; 6 participants started with strong engagement which decreased over time; and 24 participants declined services | Focuses on strengths and emphasizes protective factors such as empowerment, healthy communication, healthy relationships, and self-worth.<br><br>Identifies the importance of physiological, safety, love and belonging, self-esteem, and self-actualization |
| Reid                                      | Risk and resiliency factors influencing onset and adolescence-limited commercial              | 2014 | To examine the variables relevant to young women being involved in commercial sexual                                      | Qualitative | N = 174<br><br>African American 154, Caucasian 12,  | Child sexual abuse was not sig. related to exploitation but experience of sexual violence as an adolescent was. Other risk  | Level of education as a resiliency factor associated with exploitation being limited   |



|                    |   |      |   |                                |  |   |   |
|--------------------|---|------|---|--------------------------------|--|---|---|
|                    | sexual exploitation of disadvantaged girls  |      | exploitation and identify both risk and resiliency factors  |                                | Hispanic 3, Native American 2, Biracial 3<br><br>Average age: 8.4 (1973-1975) and 31.6 (1996-1997)   | factors include the age at first alcohol/drug use   | to adolescence and not reaching into adult life   |
| Hickle             | Resiliency and women exiting sex trade industry work  | 2017 | To explore the experiences of women exiting sex work and the helping factors that help build resilience throughout their exiting process                            | Qualitative Narrative Analysis | N = 19<br><br>White 11, Hispanic 4, Black 3, Biracial 1<br><br>Age range: 25 to 59   | Three factors facilitated women's exit: Connection, resources, and personal growth  | Connection: survivor presence, children, and spirituality; resources: networks, structure, and safety; personal growth  |
| Countryman-Roswurm | Girls like you, girls like me: An analysis of domestic minor sex trafficking and the development of a risk and resiliency assessment for sexually exploited youth | 2012 | To further develop a tool that focuses on the risks and resilience of young people at risk of and/or subjugated to DMST by examining lived experiences of survivors | Qualitative                    | <u>Study 1:</u><br>N = 23<br><br>Female: 56%<br><br>Caucasian 39%, African American 22%, Hispanic 9%, Native American 13%, Biracial 17%<br><br>Age range: 14 to 21<br><br><u>Study 2:</u><br>N = 258<br><br>Female: 64.3%<br><br>Caucasian 50.4%, African American | 57-70% were taught skills that helped them have better relationships with themselves and others, 82% reported "very helpful" in identifying signs of a healthy relationship, 71% in helping set boundaries, 71% in how to help themselves/someone else who is abused/sexually exploited<br><br>3 categories of resilience were identified including individual characteristics/traits, individual | Future-oriented, positive oriented, internally oriented, survival oriented, insight, awareness of conflicting values, personal flexibility, separating self from reality, street smarts, disassociation, relationship connections, and spirituality |

|                                   |  |      |  |             |  |   |  |
|-----------------------------------|--|------|--|-------------|--|---|--|
|                                   |  |      |  |             | <p>25.2%, Hispanic<br/>13.2%, Asian<br/>1.6%, Native American<br/>1.9%, other<br/>6.6%</p> <p>Age range:<br/>8 to 22</p> <p><u>Study 3:</u><br/>N = 8</p> <p>Caucasian<br/>38%, African American<br/>13%, Hispanic<br/>25%, Native American<br/>13%, other<br/>13%</p> <p>Age range:<br/>14-22</p> | adaptations, and individual resources   |  |
| Burnes, Long, & Schept            | A resilience-based lens of sex work: Implications for professional psychologists * | 2012 | To provide an alternative understanding of sex work by using a resilience-based lens   | Qualitative | n/a  | The value of going for walks, personal religious beliefs, and engaging in leisure activities outside of work  | <p>Building resilience, foster healing, fostering prevention</p> <p>Interpersonal skills, street smarts, factors that contribute to staying sober</p>                  |
| Steiferwald, Barnes, & Williamson | Building resilience and fostering prevention                                       | 2020 | To explore awareness of sex trafficking and its intersection with the health-care industry, to highlight screening tools, and to outline opportunities | Qualitative | n/a  | Protective factors associated with resilience has shown to strengthen the survivors' belief in their future and ability to cope with adverse effects; education is one of the best- | Positive adaptation in one or more areas of life, education, interpersonal and emotional competence, active coping, optimism, family social support, social attachment |

|                            |  |      |   |             |  |  |  |
|----------------------------|--|------|---|-------------|--|--|--|
|                            |  |      | to build resilience among adolescents who are at risk or have been victimized   |             |  | established protective factors; educational engagement, plans, motivation, and positive attitude toward learning also contributed to resilience  |  |
| Holt                       | The experiences of resilience and hope of adolescent girls who have been victims of sex trafficking in the United States | 2015 | To identify experiences of resilience and hope of adolescent girls who have been sex trafficked   | Qualitative | N= 20<br>European American 9,<br>Multiracial 7,<br>Hispanic/Latino 2,<br>African American 1, Asian 1<br><br>Age range: 15-18                           | Adolescent girls who have been trafficked experience lower resilience than those of the general population, younger girls experience less hope than the general pop., despite trauma the girls continue to experience moments of resilience and hope   | Positive attachment, sense of capability, positive self-concept, ability to see other parts of their identity, sense of purpose, religious beliefs, planning for the future, actively seeking change, others-focused thinking, and hope for change |
| Countryman-Roswurm & Bolin | Domestic minor sex trafficking: Assessing and reducing risk  | 2014 | To develop the domestic minor sex trafficking risk and resiliency assessment and to examine the factors that may put youth at risk for DMST | Exploratory | N = 23<br><br>Female: 56%<br><br>Caucasian 39%,<br>African American 22%,<br>Hispanic 9%, Native American 13%, Bi-Racial 17%<br><br>Age range: 14 to 21 | Participants who completed the group intervention noted improvement of protective factors; the group taught participants the skills that would assist them in the development of healthier relationships with themselves, peers, family members, and partners; 82% improved their ability to | Relationship building, understanding the signs of healthy relationships, boundary setting, increased self-esteem, more appropriate thoughts/beliefs  |

|   |  |      |   |  |                    |  |  |
|---|--|------|---|--|--------------------|--|--|
|   |  |      |   |  |                    | identify signs of a healthy relationship; 71% in setting boundaries within relationships; 88% in understanding what to do if they are in an abusive relationship and/or sex trafficked; 71% in how to help themselves/others if being sex trafficked |  |
| Baker, Dalla, & Williamson              | Exiting prostitution: An integrated model  | 2010 | To explore two general models and two prostitution-specific models applied to the process of exiting sex work | Exploratory                              | n/a                | An integrated six stage model is offered as a foundation   | Ability to dream, importance of individual coping strategies, both relational and individual factors: close relationships and social networks  |
| Shareck, Buhariwala, Hassan, & O'Campo, | Helping women transition out of sex work: Study protocol of a mixed-methods process and outcome evaluation of a sex work exiting program | 2020 | To evaluate a 9-month sex work exiting program based on the critical time intervention (CTI) approach         | Evaluation: quantitative and qualitative | n/a                | n/a  | Provides wrap-around supportive services including mental health, addiction, housing, education, employment support, community integration, support systems, parenting and life skills, rent and entitlement management, and children's services |
| Scorgie                                 | Human rights abuses and collective   | 2013 | To explore the impact of violence and   | Qualitative                              | N = 136<br>Female: | Many sex workers develop   | Importance of collective action and  |

|                 |  |      |   |             |  |  |   |
|-----------------|--|------|---|-------------|--|--|---|
|                 | resilience among sex workers in four African countries: a qualitative study                                      |      | related human rights abuse on the lives of sex workers and how they respond to these conditions |             | N = 106<br>Age range: 26 to 35   | 'survival strategies' to cope with the challenges brought on by sex work; collective empowerment of sex worker community through building knowledge of their rights was also critical  | individual coping strategies, being proactive, furthering their education |
| Shdaimah & Leon | "First and foremost they're survivors": Selective manipulation, resilience, and assertion among prostitute women | 2014 | To describe prostitute women's agency and problematize dominant assumptions                     | Qualitative | N = 68<br>African American 27, Caucasian 20, Hispanic 5, Triracial/mixed 3<br>Age range: 28-45 (Study 1), 18-50 (Study 2), 18-72 (Study 3) | Sex workers are shaped by various factors such as socioeconomic circumstances, education, and networks of support; moral and rational choice making was consistent among participants; | Resistance and self-advocacy, assertion of control                        |

## Discussion

In this systematic literature review, many of the studies identified addressed both resiliency factors of FSWs and resiliency interventions used when working with the population. These studies described the array of experiences FSWs have when exiting and the resiliency factors that contribute to their successful reentry into the community. The common focus when researching FSWs, are the risk factors that lead to entry into sex work or risk exiting. Research that discusses resiliency and how it contributes to successfully exiting sex work has often been left out of these studies. Focusing on both risk and resilience is a more realistic approach when providing services to FSWs. Participants throughout the studies expressed the importance of

certain factors that contributed significantly to their successful exit and reintegration into their communities. These factors included interpersonal relationships (both familial and professional), spirituality, and various aspects of development of self. The research shows that supportive relationships can have a positive impact on the lives of FSWs who are attempting to exit sex work. These relationships do not need to be limited to family and friends but can also include professionals such as law enforcement, healthcare workers, and former sex trade industry workers. Furthermore, women were encouraged to exit sex work by recognizing their spirituality and using it as a positive coping mechanism. It was through their spirituality that they found hope and strengthened their resilience. Not only does trauma affect an individual physically, emotionally, and spiritually but it affects all aspects of the self. Therefore, it is important to incorporate strengthening various parts of the self into the interventions being established. These aspects of self include self-worth, self-esteem, self-respect, self-acceptance, self-sufficiency, self-efficacy, self-regulation, developing a positive sense of self, belief in self, future planning, and achieving empowerment.

It is through FSW's experiences that holistic interventions can be developed and implemented. When considering interventions for FSWs wishing to exit, it is important to note that up until recently, many interventions and programs were built on an oppressive paradigm that portrayed sex workers as criminals who "chose" to do the work they were doing or as victims. This perception has affected the way in which social workers, health practitioners, and other professionals provide services to sex workers. Therefore, incorporating resilience-based models and interventions is critical to providing new ways of understanding sex workers' experiences.

## **Limitations**

Based on the articles that were evaluated, in relation to resiliency factors of sex workers and resiliency interventions used within practice, it is difficult to conduct studies on this population. FSWs are known to be a hard-to-reach population and convenience sampling is often used to obtain participants which often results in small sample sizes. Therefore, many of those who are reached may not be representative of the whole population. Even though females make up a high percentage of sex workers, anyone can be victimized regardless of gender. Currently, there is a lack of research on sex workers who identify as male or transgender. An additional limitation is that a high percentage of the participants, within the studies included for this literature review, identified as Caucasian. This is not representative of the sex worker population that exploits all regardless of race. Research shows that women of color are disproportionately represented in the sex work industry (Carter, 2003). Furthermore, various articles focused on FSWs who had been sex trafficked, which is not always the case. For example, in 2008, 50 to 75 residents in Chicago chose sex work to meet their economic needs because it offered just enough money and flexibility to make it an attractive option (Rosen et al., 2008).

## **Directions for Further Research**

Of the victims who are trafficked, many are recruited from Mexico and East Asia, with the United States being a top destination (Hodge, 2008). In 2018, the National Human Trafficking Hotline identified Latinos as the top reported race, which has been at the top since 2016 (National Human Trafficking Hotline, 2018). Even though, Latinos make up the largest minority group within the U.S. and are a rising population within sex trafficking, there is very little research on how this community is impacted by sexual exploitation. There is even less research on resiliency factors and interventions that would help to identify successful programs

for Latina FSWs. Only one of the articles included had a significant number of participants who identified as Hispanic (Whaling et al., 2020). Future studies should replicate their findings with larger and more diverse population of sex workers to help support the recommendations made from these findings. Furthermore, considering the lack of diversity in demographics, research on resiliency factors and interventions is needed for both male and transgender sex workers. Considering that not all sex workers are sex trafficked, research should also address the needs of women who are sex trafficked and the needs of women in different types of sex work.

### **Implications for Micro and Macro Practice**

Despite the growing numbers of those involved in sex work and those who are sex trafficked, there continues to be a lack of research on social work practice. With this literature review, the goal is to inform social work professionals working with the variety of populations within sex work, on resiliency factors and interventions. Viewing this population with both risk and protective factors in mind, provides professionals with a more wholesome understanding of their experiences. Considering the literature and research data presented in this review, the following practice implications are provided to assist professionals who may be involved in the lives of female sex workers:

1. Acknowledge the role that various structural problems (e.g., access to healthcare, poverty, citizenship status, etc.) and systems (foster care and justice system) play in increasing the vulnerability of entering sex work and the decision to exit sex work.
2. Using a resilience-focused lens, assess for both risk and protective factors of sex workers during intakes and throughout the span of their time obtaining services. Consider the clients' strengths and current resources to empower them through a successful exit of the life.



3. Develop interventions providing an array of holistic services that go beyond medical and mental health, including but not limited to basic needs, education, life skills, job training, financial literacy, self-development, legal, and immigration.
4. Develop resiliency interventions that focus on developing and strengthening resiliency factors (interpersonal relationships, spirituality, development of self, etc.) of those involved in sex work.
5. Develop partnerships with other organizations interacting with this population, including police and healthcare professionals, to provide coordinated service planning and treatment.
6. Increase community awareness of sex work and sex trafficking as well as the vulnerabilities associated with a higher risk of entering the life. Educating communities could minimize stigmatization of the population, creating a safer space for those exiting the life and reintegrating into the community.
7. Provide continuous training, in accordance with the evidence codes of their state (e.g., California Evidence Code 1038.2) to professionals working with this population. Professionals should be knowledgeable about sex workers and sex trafficking before providing services to them. This includes competency in the language used to refer to the various types of sex work, the risk and protective factors of this community, and the policies that impact them.

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