

Protection, recovery and treatment after sexual exploitation due to youth prostitution –

Experiences of the Asja Treatment Program



Alfons Crijnen

Child and Adolescent Psychiatrist



Fier Fryslân (the Netherlands)

- Victims of violence in dependant relationships:
 - Domestic violence and sexual abuse
 - Prostitution and loverboy
 - Human trafficking and war
 - Family honour-related violence
- Services:
 - Prevention and Expertise (telephone services)
 - Participation in Child Advocacy Center
 - Shelter (120 BBB)
 - Youth Services and Mental Health Services
- Over 250 professionals (and growing)

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Today:

Asja – protection, recovery and treatment after sexual exploitation due to youth prostitution

- Adolescent girls: elusive
- Grooming, rape and impaired mental functioning
- Code Red – 1st video–portrait
- Mental Health Consequences – Risk Factors
- Code Red – 2nd video–portrait
- Safety and recovering: the Asja – treatment program
- The Asja program in figures

Juvenile Prostitution and Psychopathology

Elusive*

* in Dutch: ongrijpbaar

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Elusive (I)

- They are in love
 - 'Not that I am in love'
- They are intimidated and/or raped
 - 'It is as if they have power over you'
- They are traumatized
 - 'When you don't speak about it it is as if it never happened'
- They keep many things secret
 - 'I arranged to be in time for music lessons'
 - 'My parents didn't know that I worked in a club at night'
- They are liable for blackmail
 - 'In a few weeks I was for € 5000 in depth'
- They consider this as normal
 - 'Everybody said it was normal what I did'
- They are frightened to death
 - 'They knew where I live and went a couple of times through our street'
 - 'He threatened to stab my father'

Elusive (II)

- They believe that they are invulnerable
 - 'He had said that he and his friends wanted to rape me'
- They are easily impressed by power and wealth
 - 'He was so strong, I thought he would protect me'

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- The beginning (grooming):
 - He stand up for her, she fell sort of in love for him, had the idea to belong to him, was raped at night by him and two other boys
 - It was just cozy, they were talking, sweet things happened, two weeks later he started to talk about girls working in clubs, they had sex with the four of them together another girl included, that made that I trusted it, a few days later I was working in the club
 - With a knife in my back I was forced to close a telephone-account, I had for € 5000 debts in a few weeks, then I had to work for them, had to go to bed with men
 - He was just there, gave me the attention I needed, I just didn't go to school, went with the train to him, at his home he touched me and raped me, I was scared
 - I became in touch with a boy through the internet, we had an appointment and went for a drink, his telephone ringed and he said that he had to go home, there were three men waiting, he told me to go to the bedroom and that I knew what to do, the three of them raped me

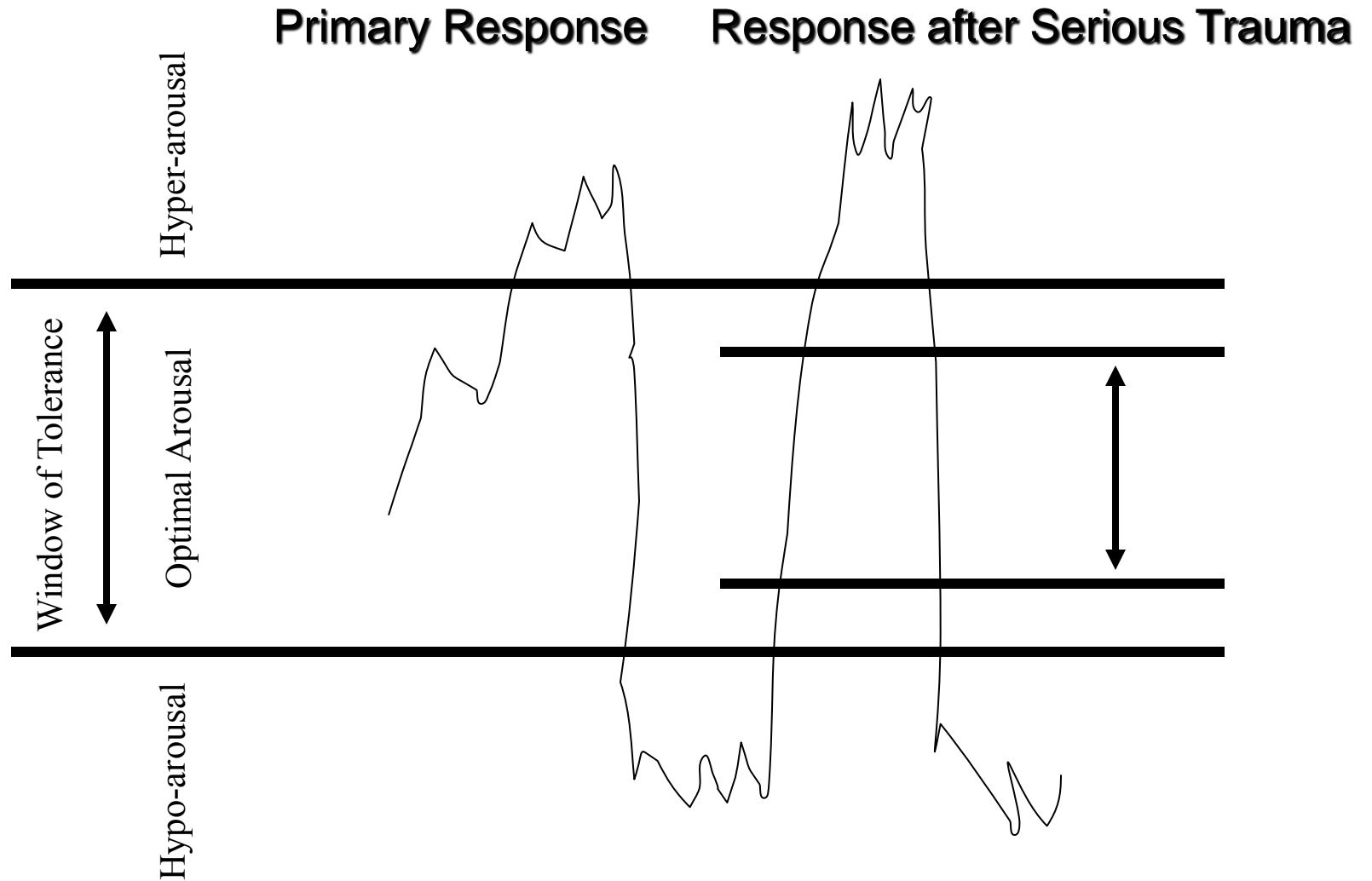
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The rape:

- 'She didn't understand it, she was taken completely by surprise, she was frightened and very anxious, wanted to leave but they kept her, in the bedroom, the three of them raped her, she was mainly frozen, scared to death, tried to resist but to no avail, the worst thing was that she had no control, they did with her what they wanted to do, she was raped, they touched her, were laughing and busy all the time, gave her some money, said that she had done well, said that she had to come immediately when they would call her'
- 'You feel like a doll handled from one to the other, I was not myself anymore'
- It happened twice in a similar way and the last time she was able to escape

Trauma Responses:



Trauma-response associated symptoms

- Hyper-arousal-related Symptoms:
 - Active protection – fight or flight
 - High activation resulting in impulsivity, risk-taking, poor judgment
 - Chronic hyper-vigilance, post-traumatic paranoia, chronic dread
 - Intrusive emotions and images, flashbacks, nightmares, racing thoughts
 - Obsessive thoughts and behavior, cognitive schemas focused on worthlessness and dread
- Hypo-arousal-related Symptoms:
 - Passive protection – freeze, submission
 - Flat affect, numb, feels dead or empty, “not there”
 - Cognitively dissociated, slowed thinking process
 - Cognitive schemas focused on hopelessness
 - Disabled defensive responses, victim identity

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Video 1

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Afterwards:

- Her parents didn't notice anything, she said she had slept at her girlfriends place
- Her father had no idea, she felt disgusting, was very angry, a little scared, she was watching television expressionless
- She could hold it for two days for herself, her mother tried everything to find out what had happened
- She was afraid how her parents would respond, they would go to the police, she didn't want to go there, she is so afraid, afraid that they will find her
- Nobody had an idea, she was playing theater, one girl knew, but her mother had no idea
- Afterwards, finding help earlier would have been much better
- The things they write in the newspapers aren't correct
- The last weeks she can't sleep, she is too tired, is turning around, can be very aggressive, she sleeps through the alarm, is so tired, she is seeing the men at the bench at the courthouse
- Tomorrow it will happen again, she will continue to make a declaration at the police office, last time it was the same

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- **Sleep problems, flashbacks, and nightmares:**

‘She had lots of nightmares and images for her eyes, especially about the rape, especially about the rape because it was the first time she had sex and he was very violent, he was aggressive and hard to her. When she could free herself and was yelling he took a pistol, put it on her head, then you are silent, that is often on my mind.’

- **Depersonalization and dissociation:**

‘The sex was aggressive and hurted me, you feel like a doll handled from one to the other, I was not myself anymore.’

- **Anxiety, grief, sadness:**

‘Afterwards she was anxious and sad.’

- **Hyper-arousal, hyper-alert:**

‘She went only out with other people around, was always looking around, she couldn’t stand hard noises, was easily scared’

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- **Self depreciation and guilt:**

‘It always comes to my mind that that other girl is still there, it is alright that I am away but I feel guilty about her.’

- **Inability to speak about it:**

‘I didn’t dare to speak about it, was scared that people would be angry at me or wouldn’t be able to understand it.’

- **Scared for revenge:**

‘He called me a thousand times, I ignored it, saw him a couple of times downtown, at the station but I took care to keep distance.’

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Other responses:

- **Aggression:**
'It became black in front of my eyes'
- **Angry at oneself:**
'That I let this happen, that I could be so stupid, that is what I blame myself for'
'I should have never went with them'.
- **Concentration problems, poor functioning at school**
- **Substance use:**
Blowing, cocaine, speed, alcohol, heroine
- **Auto mutilation**
'When you see yourself bleeding, you know that you are still alive, you can choose yourself whether you want to live, make a choice yourself'
- **Running away from home, truancy, promiscuous behavior**
'I was raped every week, it was just that I was so scared, otherwise they come after you, I couldn't tell them that I didn't want this, I was so scared, so scared'
- **Psychotic symptoms**

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Early risk factors:

- Early years:

'she arrived all of a sudden, her mother didn't know she was pregnant, she is mentally retarded'

- Bullying:

'she was always an outsider, was adopted and her hair was different'
'she was hit and threatened, didn't attend school because of the bullying'

- Physical abuse:

'her uncle had hit her aunt and stabbed her with a knife, he is threatening her now if she would say something'
'the worst thing was when her father put a knife on her throat'

- Sexual abuse:

'by her friend's father, by a boy, a stepfather, a teacher, an uncle'
'at the end she is able to express herself, from her 9th until 15th year she was abused by her mother's friend, nobody noticed anything, the pictures in her mind are about this, it was bad and painful'
'until she was 7 she lived with her mother, during this time she was abused by her mother's boyfriend, she had forgotten about it'
'she acknowledges that more has happened, but she is not yet able to speak about it'

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Early risk factors (cont'd):

- Attachment
- Loneliness and a need for attention
- Feelings of insufficiency
- Traumatization and abuse
- Divorce and family split-up

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Video - 2

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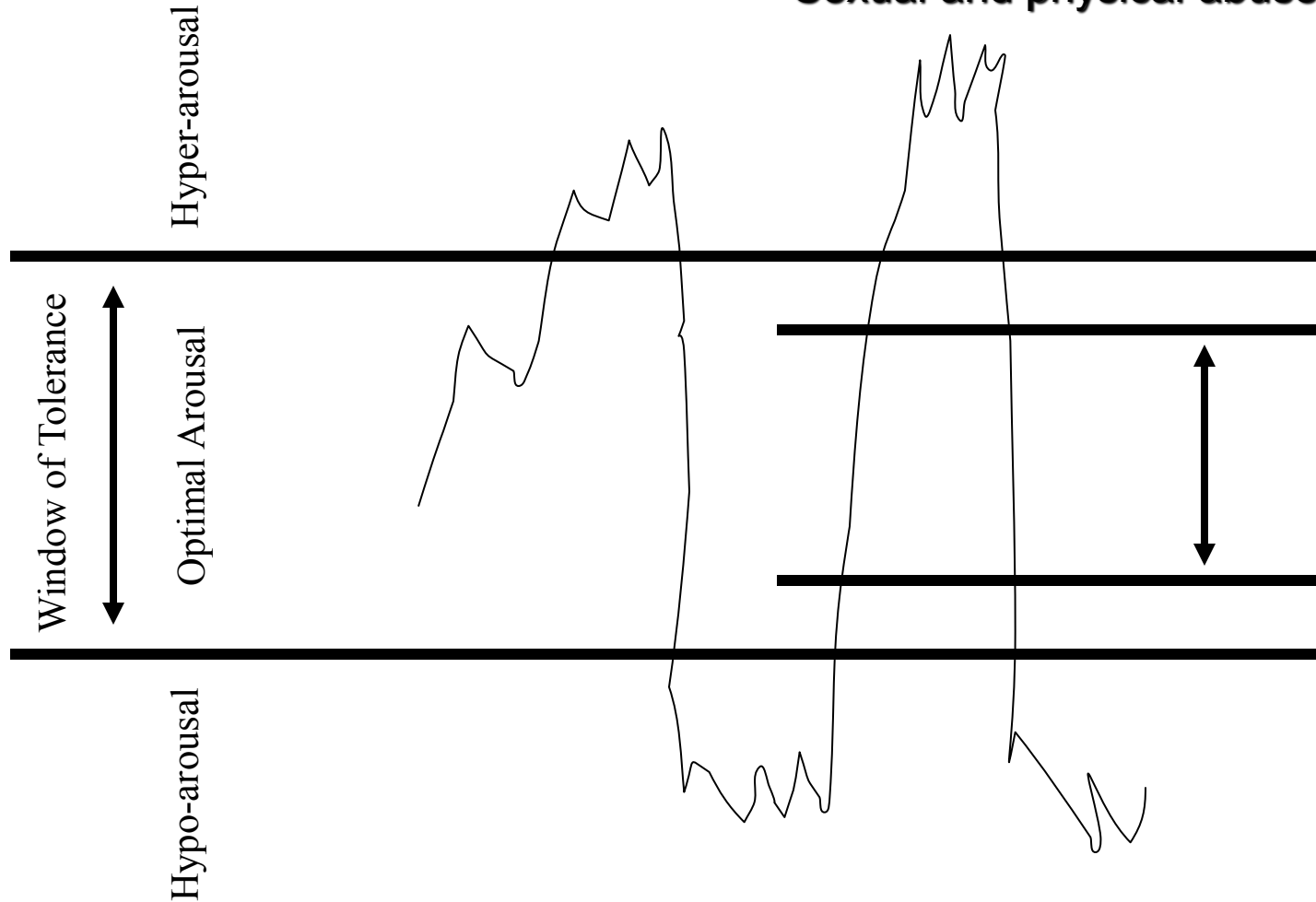
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Trauma Responses:

Primary Response

Response after Serious Trauma

- Earlier in life
- Sexual and physical abuse by pimp



Trauma-response associated symptoms

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Focus for Treatment Program:

- Mental health:
 - PTSS
 - Poor arousal
 - Hyper-arousal
 - Sleep
 - Exhaustion
 - Distorted ideas
 - Self-esteem
 - It was 'normal'
 - Oppositional-defiant behavior
 - Drug use
 - Medication
- Lack of trust
- Parents
- Peer
- School
- Legal issues
- Medical conditions

- Safety

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Safety and Protection

- Against herself
- Against her pimp (Stockholm syndrome)
 - Ambivalent
 - Dependent and isolated
 - Anxious and scared
 - In love

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Safety measures:

- Girls have to feel safe: they went through so much violence and intimidation and are so afraid for it that aggression is not tolerated
- Safe house far from their city of origin to avoid interaction, pressure or threats from their pimps
- (Temporary) measures to avoid that they can be traced (no interaction with pimps, not allowed to give their address, no mobile phones, no internet, limited and chaperoned going out, a.o.)
- Formulation of safety plan and risk analyses in collaboration with the police
- Video surveillance around our facilities
- Asja is an open setting and most girls can live up to this condition without running away or bringing themselves or others in danger
- We achieve low levels of aggression and intimidation because girls have to leave otherwise

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Parents as partner:

- The relation is often seriously disturbed:
 - The girls lied to their parents
 - The girls often lead a double life
 - The relation was often broken
 - The parents often didn't know about the whereabouts of their daughter
- Previous experiences are made a subject of discussion
- Parents are supported to provide a safe base for the girls
- If parents are here not able to:
 - Another person is asked to serve as a base and reliable attachment figure
 - Disappointment and rage are explicitly discussed
(‘some things you will never get/hear from your parents’)
- Girls and mentor get at least once a week in touch by phone
- Parents are invited regularly for a system meeting

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Education:

- For safety reasons our girls are not allowed to attend regular classes
- They are often behind in class
- They attend online education for 4 mornings a week at their own level of proficiency in our facilities
- They can take an examination or certificates
- They are obliged to attend 4 afternoons in:
 - Psycho-education (PTSS, stabilization, safety, sex, social skills, etc)
 - Therapy sessions with their group
 - Psychomotor and creative therapy, taekwondo and self-defense

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Positive experiences in and outside our facilities:

- Experience of exclusion and bullying, of failing on many occasions
- Individualized plan on how to deal with temptations when they are going out
- Stimulated to participate in Big Sisters-program with a peer
- Local sport clubs 'adopt' our girls through Fier Sports Academy
- Important to have the experience of being able to achieve at the level of sports, school, work

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Individualized treatment:

- To overcome destructive or self damaging behavior
- To develop competent behavior and take responsibility for one self
- Goals are around:
 - Daily problems, interaction with parents and other girls, school, work
 - Mental health and individual problems
- Mentor, system therapist, psychologist of psychiatrist

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Mental Health Treatment:

- A well-structured and busy day-program
- Psycho-education
- Medication
 - Sleep
 - Depression
 - Intrusive impulses
- Improvement of sleep
- Movement: running, steps, sport
- Stabilisation of PTSS-symptoms, especially dissociation
- EMDR
- Interapy (treatment through Internet)
- Counseling and TF-CBT

- Safety measures
- System therapy

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Asja – Some Numbers:

- 2-week acquaintance period:
 - Some girls are not yet ready and leave
 - Low-threshold and low-level of screening
- Regular program (voluntary and doors are open):
 - All girls accept safety measures (anonymity and no aggression) and consequences
 - 16% eviction because of violation of safety measures
 - 43% goals achieved or left with permission
 - 11% further in stricter regime
 - 16% left without permission or run away
 - 8% left but unknown whether with or without permission
 - Rest still in Asja
- Average stay is 22.2 weeks
- Average age: 17.4 years (SD 2.6; range: 12 – 23)

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Asja – Reason for Entry Asja Program:

- 35% affair with pimp
- 16% threat to fall in pimp's hands
- 4% threat to to involved in prostitution
- 37% involved in prostitution
- 2% involved in human trafficking
- 6% miscellaneous

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Asja – Reports on Physical and Sexual Abuse:

	Physical Abuse	Sexual Abuse
By parents	39%	8%
By pimp	69%	62%
By clients	4%	17%
By others in prostitution (usually friends of pimp)	50%	56%
Threats by pimp	3%	28%

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Asja - Reports on Mental Health Symptoms:

% of Girls	Mental Health Symptoms
74	Nightmares
77	Anxious, scared, panic
69	Flashbacks
31	Dissociation
43	Emotionally flat
56	Suicidal ideation
21	Suicide attempt
44	Auto-mutilation
67	Low self-esteem
71	Loneliness
63	Poor concentration
39	Poor memory
30	Poor planning and organization
66	Verbal and physical aggressive

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Asja – Reports on Social Problems :

% of Girls	Social problems
65	School drop-out
80	Truancy
68	Victim of bullying
33	Police involvement
75	Family violence and child abuse in family of origine
33	STD
40	Abortions
24	Drug dependency
12	Concern about drug dependency
37	Financial depts
7	Problem with others because of religion
8	Threats around family honour-related violence

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Asja – Reports on Physical Complaints:

% of Girls	Physical Complaints
75	Pain in head
45	Pain in stomach
23	Nauseated
57	Dizzy
71	Trouble with eating
88	Miscellaneous

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Protective factors - keep asking questions !

- **Parents**

‘My mother wanted to know everything

- **Mentor, teachers and school doctor**

The doctor at school kept keeping questions when I had something with my hand

- **Police**

‘The police saw immediately that I was terrified to death and took me with them’

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More questions?

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