

# AMERICAN INDIAN ADOLESCENT GIRLS: VULNERABILITY TO SEX TRAFFICKING, INTERVENTION STRATEGIES

Alexandra (Sandi) Pierce, PhD

*Abstract: The Minnesota Indian Women's Resource Center offers harm reduction programming to at-risk adolescent American Indian girls, including outreach, case management, advocacy, healthy sexuality education, and support groups. To evaluate program impact, participants are assessed at intake and every 6 months afterward for current vulnerability to commercial sexual exploitation, violence, and addiction. Evaluation results indicate frequent exposure to sex traffickers and suggest that harm reduction methods can help girls reduce risk of commercial sexual exploitation.*

## INTRODUCTION

This article describes American Indian and Alaska Native (AI/AN) adolescent girls' exposure to the sex trade, their vulnerability to traffickers, characteristics of known traffickers, and the usefulness of harm reduction strategies in reducing girls' risk of commercial sexual exploitation. Since the earliest years of the colonial era, AI women and girls have been sexually exploited for commercial purposes (Deer, 2010; Fischer, 2002), but only recently have they been considered victims rather than criminals. In the U.S. Trafficking Victim Protection Act of 2000 (TVPA), sex trafficking was recognized as a form of human slavery "in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age." Individuals that "recruit, entice, or obtain a person to engage in commercial sex acts, or to benefit from such activities" are subject to significant penalties under the TVPA (see 18 U.S.C. § 1591 and 22 U.S.C. § 7101, 7102, and 7105). The TVPA must be reauthorized every two years, and has been through the Trafficking Victims Protection Reauthorization Acts of 2003, 2005, and 2008. In each reauthorization, innovations and improvements have been added (International Justice Mission, n.d.). In 2011, a bill for reauthorization of the TVPRA was proposed to Congress, but as of March 2012, Congress had not yet passed the bill. However, at least 40 states had passed their own legislation criminalizing sex trafficking.

Very little published research has focused on the commercial sexual exploitation of AI/AN adolescents or adults in the United States, and what exists is mostly anecdotal and limited to the states of Minnesota and Alaska. The Minnesota Office of Justice Programs (OJP) interviewed law enforcement personnel, nurses, and social services providers for its 2006 human trafficking report to the state legislature, asking that they estimate the number of trafficked women and children that they had served in the previous 3 years. In reporting its findings, OJP noted, “Many people interviewed for this report mentioned anecdotal evidence and stories about Native American girls and women moved off of the reservations and forced into prostitution in the Duluth Harbor area or in the Twin Cities” (OJP, 2006 pp. 12-13). In 2007, the OJP again conducted interviews with the same groups of professionals, concluding that at least 345 AI/AN women and children had been sexually trafficked in Minnesota from 2004 to 2007 (OJP, 2007).

An analysis of 2007 Hennepin County Corrections prostitution arrest data (which included Minneapolis) found that AI/AN women represented 24% of arrests, more than 12 times their representation in the county population (Martin & Rud, 2007). Also in 2007, tribal advocates in South Dakota and northern Minnesota began alerting the Minnesota Indian Women’s Resource Center (MIWRC) and other urban AI service providers that adolescent AI girls from their communities were being trafficked into prostitution, pornography, and strip shows, and transported over state lines and internationally to Mexico. By 2008, the Federal Bureau of Investigation had identified Minneapolis as one of 13 U.S. cities having a high concentration of criminal activity around the commercial sexual exploitation of juveniles (Bortel, Ellingen, Ellison, Phillips, & Thomas, 2008).

A similar pattern is seen in Alaska. In 2010, investigators from the Anchorage Police Department and the FBI notified Alaska tribes and villages that sex traffickers were targeting AN girls visiting Anchorage to attend Alaska Federation of Natives events and conferences (DeMarban, 2010a). The Anchorage Police Department’s Vice Unit also reported cases in which traffickers had lured AN girls from remote rural areas to Anchorage for purposes of prostitution (DeMarban, 2010a; McBride, 2011). In 2009 and 2010, about one-third of women arrested for prostitution in Anchorage were AN, while ANs represented only 16% of the entire state population (DeMarban, 2010b).

The body of published research with trafficked and prostituted Indigenous women and youth in Canada is somewhat larger but still limited in scope. Small studies in Canadian cities with women and children in street prostitution have found that 14-63% of their samples were Aboriginal (which includes indigenous First Nations, Métis, and Inuit people), though these groups represented only 1-3% of the area population (Assistant Deputy Minister’s Committee on Prostitution and Sexual Exploitation of Youth, 2001; Benoit & Millar, 2001; Cler-Cunningham & Christensen, 2001; Farley & Lynne, 2000, as cited in Farley & Lynne, 2005). In a qualitative study with 22 Aboriginal communities across Canada, informants in some areas estimated that 90% of children in the local

sex trade were Aboriginal (Kingsley & Mark, 2000). More recent Canadian research has identified Vancouver, British Columbia; Ottawa, Ontario; and Winnipeg, Manitoba as major centers for the sexual trafficking of Aboriginal women and children (Assembly of Manitoba Chiefs, 2010; CBC News Canada, 2010; Chansonneuve, 2010; Farley & Lynne, 2005; Farley, Lynne & Cotton, 2005).

### IDENTIFYING AND RESPONDING TO SERVICE NEEDS

Founded in 1984, the Minnesota Indian Women's Resource Center (MIWRC) provides strength-based, culturally centered support services to AI/AN women, adolescent girls, and their families in six core areas: an accredited early learning center, emergency and supportive housing, a library and learning center that provides training workshops and educational materials on issues impacting the wellness of AI families and communities, a family stabilization program, support and advocacy for gender violence and other traumas, and a co-occurring disorder treatment program.

In addition, MIWRC's Sacred Journey Division offers two harm-reduction programs to AI/AN women and girls struggling with chemical use; the problems that accompany it; and unsafe peer networks, relationships, neighborhoods, and/or home environments. Oshkiniigikwe ("Young Woman" in the Ojibwe language) serves adolescent AI/AN girls and young women ages 11-21, while Healing Journey serves adult AI/AN women. In 2008, participants in Healing Journey and Oshkiniigikwe programs began disclosing that they or their friends were involved in trading sex, often at the behest of a family member or "boyfriend." Concerned that these reports might signal a growing trend, MIWRC implemented a two-pronged response. First, with the support of the W.K. Kellogg Foundation, MIWRC contracted a research affiliate (this author) to gather all available information on the trafficking and/or prostitution of AI/AN women and girls in Minnesota, to inform the development of appropriate victim services at MIWRC. Specific areas of interest were the size and scope of the problem, locations where AI/AN women and girls were being trafficked and prostituted, pimps' "recruitment" strategies specific to AI/AN women and girls, circumstances that were making young AI/AN girls vulnerable to commercial sexual exploitation, barriers to escaping the sex trade, and the types of supports and services that were most needed.

The result was a report titled *Shattered hearts: The commercial sexual exploitation of American Indian women and girls in Minnesota* (Pierce, 2009). Because so little had been published on the subject in relation to AI/AN women and girls, the report triangulated several sources of information, including:

- Two round table discussions with advocates and other frontline staff working directly with AI/AN women and girls in crisis situations, in which participants shared information about prevalence and patterns;

- Evaluation data from Oshkiniigikwe program client intake and follow-up assessments over a 6-month period;
- Secondary analysis of the 2007 Minnesota Student Survey (a state-sponsored population-based survey completed by students in schools every 3 years);
- Secondary analysis of non-reservation AI data from the 2006 Wilder Research *Homeless in Minnesota* study;
- Publications and reports developed by and for government agencies, advocacy groups, and foundations in the U.S. and Canada;
- Articles published in human services, social services, law enforcement, and social science journals; and
- Informational interviews with law enforcement and corrections personnel.

MIWRC's second response to clients' disclosures of commercial sexual exploitation and trafficking was expansion of its Oshkiniigikwe Program in 2008 to reduce AI/AN girls' vulnerability to commercial sexual exploitation. The program's trauma-centered culture of care has always emphasized meeting girls "where they are" to build upon strengths and reduce exposure to potential harm. Outreach workers and case managers (professionals who have academic training, experience with Oshkiniigikwe's service population, and knowledge of AI history and cultural perspectives) focus on building trusting relationships free of judgment that support girls' right to determine their own priorities and make their own decisions when they feel ready to do so. Oshkiniigikwe staff initially worked to reduce AI/AN girls' risk of addiction and violent victimization by providing 1) intensive case management to address their housing, safety, medical, mental health, and other crisis needs; 2) holistic health care (e.g., acupuncture, acupressure and massage as a source of safe, healing touch); 3) cultural teachings; and 4) space and supplies where participants could learn and work together on traditional beading, sewing, and crafts projects. Case managers also worked with school personnel to help girls develop individual education plans that support school completion; monitored their medical, mental health, and dental care needs; linked them to culturally responsive providers; and drove them to appointments as needed. In addition, Oshkiniigikwe staff served as liaisons to County Child Protection workers whenever a girl had an open case or was in need of intervention due to sexual abuse or commercial sexual exploitation at home.

The expansion of Oshkiniigikwe's focus included adding a commercial sexual exploitation risk assessment component to the program's intake and follow-up assessment process. MIWRC also implemented the Phoenix Project, a partnership between Oshkiniigikwe and the Greater Minneapolis Council of Churches' Division of Indian Work (DIW), to provide outreach programming at two Minneapolis alternative high schools that were specifically designed to serve AI/AN youth. Phoenix workers offered support services to all youth that disclosed involvement in or exposure

to commercial sexual activity, referring girls to Oshkiniigikwe at MIWRC and boys to DIW's Strengthening Family Circles program. Oshkiniigikwe's staffing was increased from 1.0 FTE to 2.0 FTE to accommodate weekly Phoenix outreach and to ensure that Oshkiniigikwe girls could access crisis assistance on a daily, drop-in basis.

Through the expanded programming, AI/AN girls in Oshkiniigikwe and Phoenix support groups received education about commercial sexual exploitation; sex traffickers' deliberate targeting of vulnerable girls; and methods used by traffickers to force or trick girls into prostitution, stripping, and pornography. Staff began working more closely with girls in developing and regularly updating safety plans to reduce their vulnerability to traffickers. Each girl's safety plan identified people, situations, and behaviors that could put her at risk of sex trafficking, other forms of sexual exploitation, and violence, and described strategies of her own design that she would employ to reduce that risk. MIWRC also developed an informal partnership with the Minneapolis Police Department's Sex Crimes Unit, which began referring all AI/AN girls and women reporting sexual assault to MIWRC for additional support services. In return, MIWRC's Sexual Assault program staff assisted victims seeking services at MIWRC that had not made police reports by explaining the reporting process, accompanying victims to make police reports, staying with them through the entire evidence-collecting process, transporting and accompanying them to court dates, and providing ongoing support.

### **DATA COLLECTION METHODS**

Two types of information gathered by MIWRC are discussed in this article: qualitative data from two round table discussions and quantitative data collected for evaluation of the Oshkiniigikwe program.

#### **Round table discussions**

Upon finding that no information was available that provided a detailed look at the sex trafficking and/or commercial sexual exploitation of AI/AN women and girls in Minnesota or anywhere else in the U.S., MIWRC and its research affiliate discussed the lack of information with colleagues providing services to AI/AN women in crisis situations. Based on these colleagues' suggestions, the research affiliate began planning for two round table discussions with advocates and organizations serving AI/AN women and youth in crisis in Duluth, Minnesota's international port on Lake Superior, and in the Twin Cities metro area. Prior to contacting potential participants, the research affiliate discussed the project with the Minnesota Department of Health's IRB. Since the intent was not to generate or contribute to generalizable knowledge (the federal definition of

“research”) and because participants were only being asked to discuss their general observations and suggestions as professionals, the IRB deemed the round tables to be “non-research” and exempt from further IRB review.

MIWRC and its research affiliate reached out to a variety of urban AI programs in Minneapolis/St. Paul and Duluth, tribal programs in Northern Minnesota, and AI elders and other respected community leaders, describing the goals of the round tables and requesting recommendations for knowledgeable and interested individuals to be invited. Many volunteered themselves, and MIWRC’s research affiliate contacted each additional person or program that had been recommended. In each of these contacts, the researcher: 1) described the *Shattered Hearts* project and goals for the round table discussions, 2) requested feedback on the potential participant’s interest in joining a discussion about sex trafficking of AI women and girls, and 3) requested suggestions for any additional people or programs that should be invited to participate. Following these conversations, MIWRC sent formal letters of invitation by e-mail and postal mail to all of the 41 recommended individuals and/or their programs. Invitations described the *Shattered Hearts* project, its funder, and the goals for the round table discussions.

Of the 17 people invited to attend the Duluth round table in January 2009, 12 attended. Of the 22 people invited to attend the Minneapolis round table in March 2009, 18 attended. These 30 participants represented tribal and urban programs providing crisis/emergency housing, basic needs, domestic violence and sexual assault advocacy, runaway and homeless youth services, police prostitution diversion programs, and other human and social services. Most attendees were AI, all were women, and all had worked directly with AI/AN women and/or youth involved in the sex trade.

The Duluth round table was hosted by the Fond du Lac Band of Lake Superior Ojibwe Health and Human Services Department, and the Minneapolis round table was hosted by the Division of Indian Work. MIWRC provided lunch for participants at both round tables, but no other incentive or compensation was offered. The two 4-hour discussions were co-facilitated by MIWRC’s Executive Director and the research affiliate, recorded with participants’ consent, transcribed verbatim, and then analyzed qualitatively using a grounded theory approach.

### **Evaluation data**

To evaluate Oshkiniigikwe’s impact and to periodically gather information about current risk areas for case planning, case managers conduct face-to-face interviews with each Oshkiniigikwe participant at program entry (baseline) and every 6 months afterward. Interviews are scheduled in advance and are conducted privately in the case manager’s office. Questions address factors that increase risk of addiction and violent victimization, including chemical use, poor relationships with parents/other adult caregivers, exposure to physical and sexual abuse or violence, inadequate

support networks, lack of housing safety and stability, physical and mental health diagnoses and care, traumatic brain injury and/or fetal alcohol spectrum disorders (FASD), and poor educational attainment and school attachment. On the form completed during these interviews, questions are organized in three columns so staff can quickly and easily compare participants' baseline and follow-up responses. The first column contains questions asked at intake; the second and third contain those asked at 6-month and 12-month follow-up, respectively.

When MIWRC expanded its Oshkiniigikwe programming in 2008, its evaluator (contracted per state funding requirements) designed a commercial sexual exploitation risk assessment form and protocol that were added to the Healing Journey and Oshkiniigikwe intake process. Questions address family and friends' engagement in the sex trade, personal involvement in the sex trade, traffickers in participants' environments and/or social networks, whether participants have been asked or pressured to pose for pornography, and whether they have been asked or pressured to recruit other girls/women to sell sex. If a participant reports current or previous involvement in commercial sex, additional information is recorded, such as age first sold for sex, pimp's recruitment and control strategies, and people in the participant's life that have threatened to harm her or a loved one if she did not cooperate.

Initially, case managers filled out the commercial sexual exploitation risk assessment form during the participant interview. In July 2010, the form was expanded to include additional items and details. Due to concerns that writing down such sensitive information in great detail during the intake interview could trigger participants' fear and/or distrust, case managers use a one-page list of topics as a prompt to ensure that they address all items on the form. They also jot down brief reminder notes during the interview, then fill out the form immediately after the participant leaves. The expanded form also provides space for staff to record new information disclosed after participants grow more comfortable with the program and the staff, as well as the date of disclosure.

Oshkiniigikwe case managers also document individual participation in program activities and requests for assistance, using a daily "checkbox" form that allows multiple activities to be quickly recorded for each girl attending that day. To provide an avenue for confidential feedback, girls participating in Oshkiniigikwe and Phoenix Project education and support groups at school complete anonymous participant feedback surveys every 6 months. Blank surveys are clipped to envelopes; each girl completes a survey in private, seals it in an envelope, and returns it to the staff.

To ensure confidentiality of participants' records, only ID numbers are used on evaluation forms. The evaluator periodically visits MIWRC to pick up copies of completed intake and follow-up assessment forms and activity logs (the program retains the originals), as well as envelopes containing completed participant feedback surveys. The evaluator enters data from the copied forms into password-protected SPSS databases, then shreds the forms. All participants whose

information is described in this document signed standard consent forms authorizing the use of their information for case management and for staff to use in helping participants apply for outside services and resources. These participants also consented to allow use of their de-identified data for other purposes permitted by law, including program evaluation and presentations and publications describing the program and its outcomes. As an additional safeguard, the Minnesota Department of Health Institutional Review Board reviewed all data collection forms and protocols, determined the data collection to be routine program evaluation activities and exempt from further IRB review, and approved use of the evaluation data for this article.

## FINDINGS

### Round tables

In the Minneapolis and Duluth round table discussions, advocates working directly with prostituted AI/AN women and girls described male and female pimps using “finesse” pimping methods to lure AI girls off reservations to the city. These methods included telling girls that they are so beautiful that they should try modeling or being a dancer, offering road trips or shopping trips to “the city,” offering to “take care” of them with a free place to stay, buying them jewelry and clothing, and generally making them feel special. The advocates reported that, once isolated from their support systems, girls discover that the “modeling” is pornography, “dancing” is in a strip club or at private parties, and a pimp’s eventual request that they “help out” leads to trading sex.

Round table participants also described “guerilla” pimping methods, which involve using physical and sexual violence, or threatening to seriously harm a loved one, to force girls into prostitution. Those making the threats were often other girls affiliated with a pimp, and were usually gang members. One advocate described her client’s experience: “She didn’t want to do this [prostitute] and she thought she could walk away, but she couldn’t. Those girls actually beat the crap out of her, so she ended up in the hospital...she was a mess and they beat the hell out of her.” The round table participants’ descriptions of finesse and guerilla pimping methods directly paralleled those identified in Canadian research with prostituted and trafficked Aboriginal women and youth (Native Women’s Association of Canada, 2007; Nimmo, 2001; Sethi, 2007; Urban Native Youth Association [UNYA], 2002).

Several participants providing crisis services to adolescent AI/AN girls described factors they had noted in their work that increased girls’ risk of being trafficked into prostitution. The most frequently mentioned factors included being runaway, throwaway (defined as being under age 18 and abandoned or forced to leave the family home), or homeless, because girls in such circumstances are very vulnerable to offers of affection, safety, and “jobs” from pimps posing as a kind older



friend or boyfriend. Advocates reported that these offers can appear especially inviting to girls that have not completed high school or gained any job skills. The round table participants' descriptions of most common vulnerability factors also matched those reported in Canadian studies of sexually trafficked Aboriginal youth (Kingsley & Mark, 2000; UNYA, 2002).

In both cities, participants agreed that highly visible prostitution in AI/AN girls' neighborhood environments is a major risk factor. Almost all cited AI/AN girls' constant exposure to abuse, exploitation, and violence in their families and peer networks as an important risk factor, describing it as one of the most devastating impacts of generational trauma. Some participants reported having worked with prostituted girls that were particularly vulnerable to traffickers due to FASD, addiction, mental or emotional vulnerability, post-traumatic stress disorder, or a combination of these cognitive and mental health issues.

Participants in both round tables reported two primary methods used by pimps to prevent girls from escaping. First, pimps pose as boyfriends, deliberately fostering girls' emotional dependency and self-doubt by giving and withholding affection, then blaming the girls for this change in mood. Second, pimps practice strategic use of violence and threats to keep girls off balance and in constant fear. A severe shortage of crisis shelters is the major barrier for AI/AN girls seeking to escape their pimps. Currently, there are no shelters in the U.S. designed to respond to the unique trauma-related and cultural needs of trafficked and prostituted AI/AN girls.

### **Commercial sexual exploitation risk assessments**

Forms were completed at intake with two cohorts of Oshkiniigikwe participants, one group entering August 2008 to March 2009, and a second entering July 2010 to June 2011. In all, 58 AI girls/young women ages 11-21 completed the commercial sexual exploitation risk assessment portion of the intake assessment. None were AN. Average age at program entry was 16, with 55% of participants between ages 11 and 16. Analysis of the intake assessment data revealed participants' significant exposure to commercial sexual exploitation prior to program entry (see Table 1).

**Table 1**  
**AI Girls' Vulnerability to Commercial Sexual Exploitation**  
**at Oshkiniigikwe Program Intake**

	<b>Number</b>	<b>Percent</b>
Had traded sex	20	34%
Had a family member involved in prostitution	15	26%
Had one or more friends involved in prostitution	24	41%
Knew a pimp personally	18	31%
Were sexually trafficked as children	15	26%
Had regular contact with gang members	26	45%
Sustained a serious head injury during an assault	18	31%
Diagnosed with depression or PTSD	13	22%
Were currently homeless	13	22%
Ran away from home 2+ times in past 12 months	7	12%

Some girls also described friends working as nude dancers or strippers at private parties, as well as their own or their friends' involvement in the production of pornography, but these numbers are not reported because they are relatively small.

The most surprising finding was the proportion of girls that reported knowing a pimp personally. Male and female pimps were equally represented in girls' descriptions of family members and friends involved in trafficking others into prostitution, but several girls reported that their boyfriends sold them and/or other girls or women for sex. Overall, the proportion of girls reporting exposure to and/or involvement in commercial sex is disturbingly large, and it is likely that these data actually reflect at least some under-reporting, since they were collected at intake when girls had not yet developed any level of trust for program staff.

Reported exposure to violence and threats was also quite high in intake assessments, as was injury due to drug/alcohol use. Of the 58 girls, 18 (31%) said they had sustained a serious head injury as a result of being assaulted; 20 (34%) reported a head injury due to falling while under the influence of drugs or alcohol. Almost half (45%) reported regular contact with gang members in their neighborhoods, families, and/or peer groups. Of these, over one-third said that female gang members had threatened them.

Other factors that round table participants described as contributing to AI/AN girls' vulnerability to sex traffickers were found in the 58 girls' intake assessments. Eleven girls (29%) had received a mental health diagnosis prior to Oshkiniigikwe intake, usually depression or depression

with anxiety. Almost one-fourth (22%) described themselves as homeless, and among participants ages 16 or younger, 35% had run away from home two or more times in the previous 12 months, averaging almost 6 runaway attempts that year.

### **Other intake and follow-up data**

The findings reported here describe 35 girls that completed Oshkiniigikwe intake assessments during the most recent fiscal year (FY2010-2011, July 1, 2010 to June 30, 2011). Comparisons of baseline and follow-up measures represent 17 girls (49%) that also completed follow-up assessment interviews.

Over one-third (34%) of the 35 girls participating in Oshkiniigikwe during FY 2010-2011 entered the program through Phoenix Project outreach at alternative schools. About one-fourth (23%) were self-referred and another 17% were referred by a friend that was familiar with the program. The remaining 25% were referred by a parent or guardian, another MIWRC program, another AI program or agency, or juvenile justice workers.

During intake interviews, one-third of girls (34%) reported prior abuse, most frequently by a parent, foster parent, other family member, or friend of the family. One in five (20%) had been involved with police at least once in the 6 months prior to Oshkiniigikwe intake. Forty percent reported alcohol use in the 6 months prior to intake, 46% reported marijuana use, and 17% had been previously diagnosed as chemically dependent by a chemical dependency professional licensed by the State of Minnesota.

Due to the small number of girls completing follow-up assessments (n = 17), most comparisons of baseline and follow-up measures are stated generally to protect participants' confidentiality. Also, some girls entered a residential juvenile treatment facility in the 6 months following program intake and were still in treatment at 6-month follow-up. Though currently clean and sober and in contact with Oshkiniigikwe case managers, these girls did not complete follow-up assessment interviews and so are not represented in these comparisons.

Over half of the 17 girls completing follow-up assessments had reported using alcohol in the 6 months prior to program entry. At follow-up, 47% reported alcohol use in the previous 6 months, including five girls that had reported no prior alcohol use at program intake. At intake, 24% of girls reported having used drugs in the past 6 months; at follow-up, 50% reported drug use in the previous 6 months. In both assessment periods, girls that had used drugs reported marijuana as the drug most frequently used. Illegal use of prescription medications was second, but numbers were much smaller. At 6-month follow-up, 47% of the 17 girls reported they were currently clean and sober; 29% had been drug- and alcohol-free for at least 6 months.

Of the girls that reported being homeless at intake, two-thirds were no longer homeless at follow-up, and two-thirds of those that reported current abuse at intake were no longer in that situation at follow-up. Though most girls reported positive relationships with parents/adult caregivers at intake, 100% of those reporting negative relationships at program entry said that these relationships had improved and become more positive at follow-up.

Overall, girls reported increased support from clean and sober family members and friends at follow-up, and reduced contact with drinking and using family and friends: 41% of girls reported clean and sober family support at intake, and 59% reported such support at follow-up. While only one girl had support from clean and sober friends at intake, 29% reported this support at follow-up. Over one-fourth (29%) reported less contact with drinking and using family members, and 47% had less contact with drinking and using friends. In addition to healthier social support networks, 53% of girls reported increased support from other MIWRC programs and other agencies' social service programs at follow-up.

Regarding school attachment and completion, two-thirds of girls with poor attendance at intake had improved their attendance and were making progress at follow-up. Of girls not in school at intake, 20% had completed high school equivalency in the 6 months prior to follow-up.

The number of girls experiencing police involvement changed very little from intake to follow-up, but the girls reporting police contact, and the reasons for the contact, differed across the two assessment points. At intake, contact was related to girls' own illegal actions, and none of these girls had repeated involvement with police in the 6 months after intake. Among the set of girls experiencing police involvement after program entry, the reasons were related to their own victimization. This finding appears to be related to girls' exposure to violence in their environments, which did not show the same level of improvement as other risk factors. Of the girls reporting current threat of violence at intake, 33% reported the same or increased threat at follow-up; and, though only 18% of girls reported getting into physical fights at intake, 18% (not consistently the same girls) also reported physical fights in the 6 months prior to follow-up.

### **Participation logs**

Analysis of FY2010-2011 Oshkiniigikwe participation log data shows fairly strong attendance, despite the fact that scheduled activities took place less frequently during the school year (after school 2 days per week). Activity log data were available for 34 girls that participated at least once. On average, girls attended 24 scheduled activities over the course of the year, the most popular of which was the weekly Oshkiniigikwe support group where they discussed issues confronting them in their efforts to live a healthier lifestyle. Though 15 girls (45%) attended 3 or fewer support group sessions, the other 19 girls averaged almost 7 sessions each.

Two other activities also had fairly good attendance: guest speaker events and holistic health care (acupuncture, acupressure, and massage therapy sessions). A total of 28 girls (82%) attended at least one guest speaker event, with 13 girls (38%) attending four or more. The topics resulting in highest attendance were sexual exploitation, domestic violence and sexual assault, gang violence, and emotional health. Fifteen girls (44%) attended holistic care sessions where they received acupuncture, acupressure, or massage therapy, averaging more than 4 visits each.

In addition to scheduled program activities, girls also sought out case managers for individual support and problem-solving. On average, girls visited their case managers for private support more than 16 times over the course of the year. Family issues were the most common reason. Girls averaged more than 8 visits with case managers to discuss problems at home and develop strategies for dealing with them. Other common reasons for seeking individualized support included help meeting basic needs (food, clothing, etc.), advocacy in working with County Child Protection workers or investigations, and assistance in developing Individualized Education Plans with schools.

### **Oshkiniigikwe participant feedback**

Of the 17 Oshkiniigikwe girls completing intake and follow-up assessments during FY 2010-2012, 12 (71%) also completed anonymous participant feedback surveys. They were most enthusiastic about MIWRC feasts and social events, which 83% rated “excellent” and 8% rated “good.” Traditional arts and crafts also received high ratings; 75% of girls described them as “excellent” and 25% as “good.” The vast majority of girls (92%) rated education about healthy sexuality, healthy family interactions, and healthy eating, as well as problem-solving with Oshkiniigikwe case managers, as either “excellent” or “good.”

In regard to girls’ perspectives on how much the program helped them with life issues, all 17 girls reported that the program had helped them “a lot” or “some” in having happier and healthier romantic relationships, avoiding situations that could lead to police involvement, avoiding abuse or violence, and dealing with grief and loss issues. Almost all girls (92%) said the program had helped them have healthier and happier relationships with their families, take care of problems before they become a crisis, and stay away from people that are bad for them. Two-thirds (67%) said they had “improved a lot” in taking care of their own physical, emotional, and spiritual needs; respecting themselves and their right to be treated well; and having more people and resources to help them live a healthy life.

In regard to abstinence from alcohol and drugs, one-third of girls completing the feedback surveys (33%) said that the program had “helped a lot” with staying sober for longer periods of time, and half (50%) said it “helped some.” All 17 girls also reported some improvement in facing problems without drinking or using, and in developing sober friendships.

Girls' feedback regarding how well Oshkiniigikwe staff worked with them was also very positive. All of those completing the feedback survey said the Oshkiniigikwe staff "work with me very well" in treating them with respect and in caring about their well-being, and 92% said staff "work with me very well" in problem-solving and in providing a safe space for healing.

### Phoenix Project support group feedback

The weekly Phoenix Project girls' support groups at alternative schools involved 22 girls between July 2010 and June 2011. In participant feedback surveys, girls were asked to rate the types of information that they received in the groups. Those most frequently rated "most important" included "what you can do if someone tries to pressure you to sell sex" (96%), "knowing where you can go for help" (96%), "having a chance to talk about this issue with other Native youth" (91%), "learning how to recognize sexual exploitation" (86%), and "having Native adults you can talk with who will not blame or judge" (82%).

Girls attending Phoenix Project support groups most frequently reported experiencing "huge improvement" in "feeling confident that you have the right to be safe and make your own choices" (82%), "knowing when someone is trying to exploit you sexually" (77%), and "avoiding sexual situations that you do not want" (77%). The types of support described as "a huge need" by this group of girls included "having a safe place to stay" (73%), "having the support of adults who won't blame or judge" (73%), and "getting information to AI youth that there is help out there" (73%).

## DISCUSSION

To our knowledge, MIWRC offers the only programming for AI adolescent girls that have been sexually trafficked or are at high risk of being trafficked. Even though the number of girls participating in MIWRC's recent Oshkiniigikwe and Phoenix activities was quite small, the need for such services appears significant, at least among the AI/AN girls in MIWRC's service area.

The absence of safety in Oshkiniigikwe girls' lives, and their exposure to a highly visible sex trade in their environments, appear to be critical contributing factors in their vulnerability to sex trafficking and commercial sexual exploitation. Among Oshkiniigikwe participants, homelessness and "couch-hopping" are common responses to unsafe or unsupportive home environments. The proportion of Oshkiniigikwe girls that reported having run away from home in the past year (35%) is alarming. AI/AN girls' responses to the 2010 Minnesota Student Survey, a statewide population-based survey of students in public schools, suggest that the problem is widespread: 16% of 6th-grade AI/AN girls and 22% of 9th-grade AI/AN girls reported they had run away from home at least once in the past year (Minnesota Student Survey Interagency Team, 2010).

Oshkiniigikwe case managers report that some pimps have played on this vulnerability by framing prostitution as a form of empowerment in which girls can receive money for what was already taken for free at home, and by posing as loving boyfriends and protectors. Given that many of these girls also experienced childhood sexual exploitation, it is not surprising that they are extremely reluctant to view themselves as victims and continue to insist that their “boyfriends” love them, despite their demands that the girls “help out” through prostitution.

The prevalence of gangs in Oshkiniigikwe girls’ family and peer networks, especially gang members involved in the sex trade, also makes it difficult for them to find safety or stability. Girls’ reported involvement in physical fights may simply reflect the amount of violence, threats, and gang contact they experience in their environments, and it appears that at least some fighting may be a response to guerilla pimping strategies by female gang members.

Despite these challenges, Oshkiniigikwe appears to have positive impacts in girls’ lives that can help reduce risk of addiction and commercial sexual exploitation. These impacts include improved safety and stability in housing situations, healthier sources of social support, and improved relationships with parents/adult caregivers. Input from the girls served through the program suggests that they most value having caring adults that do not judge them but, instead, provide education and support based on cultural norms for trusting girls to make their own decisions at the time they feel ready to do so.

### **LESSONS LEARNED**

The key lesson learned for Phoenix Project and Oshkiniigikwe case managers is that routinely asking AI/AN girls entering harm reduction programs if they have been involved in trading sex opens the door to disclosure of commercial sexual exploitation and trafficking. Even if a sexually exploited girl is too frightened or ashamed to disclose at time of intake, she still gains a sense that others must have had the same experience, since the question would not be asked otherwise. Routine screening is also useful for estimating the lower-bound prevalence of commercial sexual exploitation in Oshkiniigikwe’s service population.

Oshkiniigikwe’s approach is patterned after lessons learned from the domestic violence movement. Before battered women were widely recognized as victims of domestic violence, asking an injured woman if she had been battered by her partner was considered inappropriate, due to concerns that asking the question might cause her distress and make her situation even worse. Most women do not disclose domestic violence without prompting (Gerbert, Abercrombie, Caspers, Love, & Bronstone, 1999), so few women reported.

Once social service and health programs responded to the domestic violence movement by implementing routine screening for domestic violence, the number of women reporting it dramatically increased, stigmatization of victims declined, and, as a result, battered women were empowered to talk with others about their experiences. A similar pattern is occurring within Oshkiniigikwe. A few girls that disclosed current involvement in trading sex at intake received extensive support and assistance from case managers, recognized that they had been exploited by people claiming to love them, and over time escaped those situations. As these girls continued their healing process, they also began talking in support groups about what had happened to them, which led to other girls realizing that being sexually traded by boyfriends or family members was not normal. The issue became a central topic of discussion, with girls requesting more information about commercial sexual exploitation. Staff responded by introducing additional awareness-building activities in Oshkiniigikwe groups and through guest speaker events. Topics included indicators of sexually exploitive relationships, pimps' recruitment and control methods, factors that increase vulnerability to being sold for sex, and sources of help for people wanting to escape the sex trade.

A second lesson learned is the critical importance of using outreach at schools to link at-risk girls to culturally grounded, trauma-centered, long-term support. AI/AN girls that received healthy sexuality education and support groups in a confidential, school-based setting were able to learn about commercial sexual exploitation and traffickers' methods, talk about their exposure to the sex trade, and receive support if they discussed problems that could put them at risk of trafficking. When girls in Phoenix groups described situations putting them at risk of trafficking, a "smooth handoff" by Phoenix workers to onsite Oshkiniigikwe staff was immensely helpful in girls' transitioning to intensive case management. Even so, there is tremendous unmet need for a coordinated array of culturally based, trauma-centered, multilevel services provided by fully trained and experienced AI personnel. These include: 1) street outreach; 2) 24-hour safe houses where AI/AN girls can shower, eat, talk with a case manager, and obtain referrals for medical, mental health, clothing, and other emergency needs; 3) a continuum of housing options in which emergency shelter is linked to a residential trauma recovery center and supportive housing; and 4) long-term harm-reduction and intensive case management support. As an agency, MIWRC is only able to address a small portion of sexually trafficked and at-risk AI adolescent girls' needs. It is a safe place for girls to go 5 days a week from 8 a.m. to 4:30 p.m., but current Oshkiniigikwe funding supports only 2 days of scheduled activities per week.

The fourth major lesson learned is the critical importance of patience over a long period of time, which is an absolute requirement for working with this population. As noted earlier, it takes some girls as long as 2 years before they are able to recognize or admit that they have been sold for sex by a pimp. Oshkiniigikwe staff has found that, as girls build trust in their case managers,



they are more open and honest about their situations, which makes it possible for staff to offer additional resources and supports. However, the primary focus must be on empowering by providing information and offering choices rather than expecting girls to accept or act upon offers of help or advice.

MIWRC's final major lesson learned is that anyone working with this population must practice intensive self-care. Oshkiniigikwe case managers routinely hear very disturbing stories and report feeling emotional impact when a girl is deeply attached to a violent pimp, sustains major physical injury, or is spiraling more deeply into addiction. They note the importance of balancing active, ongoing efforts to deal with their own secondary trauma sustained through this work against the responsibility for assuring traumatized girls that they will never give up on them. Case managers sustain their spiritual and emotional balance by being deeply involved in their tribal cultures, ceremonies, and communities; they take care of themselves physically through exercise, healthy eating, and regular engagement with the natural world. Culturally responsive counseling and mental health support are also readily available, if needed. The entire staff meets at least weekly to talk about challenges in working with individual participants, support one another, and work together on solutions. They also have the option to attend training on self-care and stress management. These activities reflect the overall organizational culture of MIWRC, which values and supports staff wellness as an essential component of responding to the needs of the AI/AN women and girls in a good way.

### **FUTURE RESEARCH**

The data collected to date are very limited and confined to a single organization in a small geographic area. There is a great need for additional evaluation studies and research that allows comparison of AI girls' vulnerability and experiences regarding sex trafficking across multiple programs serving AI/AN girls in diverse geographic regions. Sex trafficking is an underground phenomenon, so the usual population-based methods for establishing generalizable knowledge are not feasible. However, comparisons of prevalence and other patterns in the service populations of programs that address crisis needs or provide harm reduction support can be made in diverse areas with large populations of urban AIs, if all programs use the same risk assessment tool. MIWRC is currently developing relationships with several other programs to enable such comparisons.

Alexandra (Sandi) Pierce, PhD

Phone: 651/247-9581

E-mail: [spierce651@comcast.net](mailto:spierce651@comcast.net)

## REFERENCES

- Assembly of Manitoba Chiefs. (2007). *Stand strong: Prevent human trafficking, stop the sexual exploitation of First Nations people*. Ottawa: Status of Women Canada. Retrieved from [http://www.manitobachiefs.com/pdf/Stand\\_Strong\\_Against\\_Human\\_Trafficking.pdf](http://www.manitobachiefs.com/pdf/Stand_Strong_Against_Human_Trafficking.pdf)
- Assistant Deputy Minister's Committee on Prostitution and Sexual Exploitation of Youth. (2001). *Sexual exploitation of youth in British Columbia*. Victoria: Ministry of the Attorney General, Ministry for Children and Families, and Ministry of Health. Retrieved from [http://www.mcf.gov.bc.ca/youth/pdf/sex\\_exploit.pdf](http://www.mcf.gov.bc.ca/youth/pdf/sex_exploit.pdf)
- Benoit, C. & Millar, A. (2001). *Dispelling myths and understanding realities: Working conditions, health status, and exiting experiences of sex workers*. Victoria: Prostitutes Empowerment, Education, and Resource Society. Retrieved from <http://www.peers.bc.ca/pubs.html>
- Bortel, A., Ellingen, M., Ellison, M., Phillips, R. & Thomas, C. (2008). *Sex trafficking needs assessment for the State of Minnesota*. Minneapolis: Advocates for Human Rights. Retrieved from [http://www.theadvocatesforhumanrights.org/uploads/report\\_final.10.13.08.pdf](http://www.theadvocatesforhumanrights.org/uploads/report_final.10.13.08.pdf)
- Chansonneuve, D. (2010). *A report on the feasibility of a kin-home for at-risk adolescent Inuit, Metis and First Nations girls in the City of Ottawa*. Ottawa, ON: Minwaashin Lodge-Aboriginal Women's Support Centre. Retrieved from <http://minlodge.com/images/Feasibility%20Study.pdf>
- Cler-Cunningham, C., & Christensen, L. (2001). Studying violence to stop it: Canadian research on violence against women in Vancouver's street level sex trade. *Research for Sex Work*, 4, 25-26. Retrieved from <http://www.nswp.org/sites/nswp.org/files/research-for-sex-work-4-english.pdf>
- CBC News Canada. (2010, September 23). *Winnipeg woman charged with human trafficking*. Retrieved from <http://www.cbc.ca/news/canada/manitoba/story/2010/09/23/manitoba-human-trafficking-charge-winnipeg.html>
- Deer, S. (2010). Relocation revisited: Sex trafficking of Native women in the United States. *William Mitchell Law Review*, 36(2), 622-683. Retrieved from <http://www.wmitchell.edu/lawreview/documents/8.Deer.pdf>
- DeMarban, A. (2010a, October 7). FBI, APD: Sex-trafficking rings target rural girls new to Anchorage. *Alaska Dispatch*. Retrieved from <http://www.alaskadispatch.com/article/fbi-apd-sex-trafficking-rings-target-rural-girls-new-anchorage>
- DeMarban, A. (2010b, December 3). Alaska Natives make up one-third of Anchorage prostitution arrests. *Alaska Dispatch*. Retrieved from <http://www.alaskadispatch.com/article/alaska-natives-make-one-third-anchorage-prostitution-arrests>
- Farley, M. & Lynne, J. (2000). Pilot study of 40 prostituted women and girls in Vancouver, Canada. Cited in Farley and Lynne (2005), Prostitution of indigenous women: Sex inequality and the colonization of Canada's Aboriginal women. *Fourth World Journal*, 6(1), 21-29. Retrieved from <http://cwis.org/publications/FWJ/classic/>

- Farley, M. & Lynne, J. (2005), Prostitution of indigenous women: Sex inequality and the colonization of Canada's Aboriginal women. *Fourth World Journal*, 6(1), 21-29. Retrieved from <http://cwis.org/publications/FWJ/classic/>
- Farley, M., Lynne, M., & Cotton, A. (2005). Prostitution in Vancouver: Violence and the colonization of First Nations women. *Transcultural Psychiatry*, 42, 242-271. doi: 10.1177/1363461505052667
- Fischer, K. (2002). *Suspect relations: Sex, race, and resistance in colonial North Carolina*. Ithaca, NY: Cornell University Press.
- Gerbert, B., Abercrombie, P., Caspers, N., Love, C., & Bronstone, A. (1999). How health care providers help battered women: The survivor's perspective. *Women & Health*, 29(3), 115-135. doi: 10.1300/J013v29n03\_08
- International Justice Mission. (n.d.) *The Trafficking Victims Protection Act summary*. Retrieved from [http://www.ijm.org/docs/justice\\_campaigns/TVPA-Summary.pdf](http://www.ijm.org/docs/justice_campaigns/TVPA-Summary.pdf)
- Kingsley, C., & Mark, M. (2000). *Sacred lives: Canadian aboriginal children and youth speak out about sexual exploitation*. Toronto: Save the Children Canada.
- Martin, L. & Rud, J. (2007). *Prostitution research report: Data sharing to establish best practices for women in prostitution*. Minneapolis: Prostitution Project, Hennepin County Corrections and the Folwell Center.
- McBride, R. (Producer). (2011, March 3). *Stones in the backpack: The burden of teenage prostitution, Part 3* [Television broadcast]. Retrieved from <http://www.wsbt.com/news/ktuu-stones-in-the-backpack-part-3-030311,0,4547320.story>
- Minnesota Office of Justice Programs/Minnesota Statistical Analysis Center. (2006). *Human trafficking in Minnesota: A report to the Minnesota Legislature*. St. Paul: Minnesota Office of Justice Programs, Minnesota Statistical Analysis Center. Retrieved from <https://dps.mn.gov/divisions/ojp/statistical-analysis-center/Pages/human-trafficking-reports.aspx>
- Minnesota Office of Justice Programs/Minnesota Statistical Analysis Center. (2007). *Human Trafficking in Minnesota: A report to the Minnesota Legislature*. St. Paul: Minnesota Office of Justice Programs. Retrieved from <https://dps.mn.gov/divisions/ojp/statistical-analysis-center/Pages/human-trafficking-reports.aspx>
- Minnesota Student Survey Interagency Team. (2010). *Minnesota Student Survey 2010: American Indian (single or in combination)*. St. Paul: Minnesota Center for Health Statistics, Minnesota Department of Health. Retrieved from <http://www.health.state.mn.us/divs/chs/mss/statewidetables/amindiainsingleorincombo10.pdf>
- Native Women's Association of Canada, (June 20-22, 2007). *Aboriginal women and gangs: An issue paper*. Prepared for the National Aboriginal Women's Summit in Corner Brook, New London, Canada.
- Nimmo, M. (2001). *The "invisible" gang members: A report on female gang association in Winnipeg*. Manitoba: Canadian Centre for Policy Alternatives.

- Pierce, A. (2009). *Shattered Hearts: The commercial sexual exploitation of American Indian women and girls in Minnesota*. Minneapolis: Minnesota Indian Women's Resource Center. Retrieved from [http://www.miwrc.org/shattered\\_hearts\\_full\\_report-web\\_version.pdf](http://www.miwrc.org/shattered_hearts_full_report-web_version.pdf)
- Sethi, A. (2007). Domestic sex trafficking of Aboriginal girls in Canada: Issues and implications. *First Peoples Child and Family Review*, 3(3), 57-71. Retrieved from <http://www.fncfcs.com/publications/online-journal>
- Urban Native Youth Association/UNYA. (2002). *Full circle*. Vancouver: Author. Retrieved from <http://www.unya.bc.ca/resources>
- Wilder Research. (2007). *Homeless in Minnesota*. St. Paul, MN: Author. Retrieved from <http://www.wilder.org/download.0.html?report=1963&summary=1>