



TRAUMA BONDING IN HUMAN TRAFFICKING

The following is a product of the Human Trafficking Expert Consultant Network funded by the Office to Monitor and Combat Trafficking in Persons. The purpose of the Network is to engage experts, particularly those with lived experience, to provide expertise and input on Department of State anti-trafficking policies, strategies, and products related to human trafficking, both in the United States and abroad. The authors have a range of expertise related to human trafficking, marginalized communities, and trauma.

In human trafficking cases, the relationship between victim and trafficker may involve trauma bonding, a phenomenon that is beginning to receive increased attention. In research on the topic, trauma bonding is commonly referred to as “Stockholm Syndrome,” and the terms may be used interchangeably. However, there is no medical standard for diagnosis of either, nor any agreed upon definition of trauma bonding. In addition, there is no definitive understanding of trauma bonding’s prevalence within trafficking situations and not all trafficking victims experience it. Current research is mostly limited to the United States and focused almost exclusively on sex trafficking of women and girls. These research gaps create uncertainty regarding the prevalence and full impact of trauma bonding on all human trafficking victims globally.

Although definitions vary, the most common meaning of trauma bonding is when a trafficker uses rewards and punishments within cycles of abuse to foster a powerful emotional connection with the victim. Traffickers may take on a role of protector to maintain control of the victim, create confusion, and develop a connection or attachment, which may include the victim feeling a sense of loyalty to or love for the trafficker. This connection, or traumatic bond, becomes especially intense when fear of the trafficker is paired with gratitude for any kindness shown. Additionally, trauma bonding, including in cases of trafficking, may occur within familial relationships in which the perpetrator could even be a parent.

UNDERSTANDING BIOLOGY

To understand the complexities of trauma bonding in human trafficking, it is critical to consider the biological impact of trauma and the effects of psychological coercion on the brain. The foundations for trauma bonding are laid at the neurobiological levels. During a single incident of trauma, the limbic system, the brain’s emotion center, over-activates and the prefrontal cortex, the brain’s logic center, shuts down.

Repeated trauma exposure can negatively affect brain development and the way a person thinks, often resulting in a victim becoming numb and disconnected from themselves. Therefore, in order for them to feel something, it must be intense. For example, a trafficker’s repeated abuse and the related trauma exposure may result in a trafficking victim returning to the trafficker due to the intensity, familiarity, and routine provided by the relationship. At times, this relationship may also decrease the psychological impact of the trauma as moments of love and care from the trafficker offset experiences of anxiety or fear.

UNDERSTANDING PSYCHOLOGICAL COERCION

Psychological coercion may increase the likelihood of trauma bonding. When a victim perceives a threat to their physical and psychological survival at the hands of their trafficker, trauma bonding may occur. Traffickers may isolate and threaten victims, induce exhaustion, and interfere with their believed or real ability to escape. A victim may eventually feel helpless and respond to any form of “help” or “kindness” from their trafficker with gratitude and attachment in order to survive.

Inaccessibility to other sources of support or comfort can increase the power of psychological coercion within a trauma bond. Describing the bonding that occurs in the face of danger, psychiatrist and trauma expert Bessel Van der Kolk explains, “Pain, fear, fatigue, and loss of loved ones and protectors all evoke efforts to attract increased care. When there is no access to...other sources of comfort, people may turn toward their tormentors.” Therefore, a victim’s social and economic circumstances may contribute to their developing a sense of trust and



loyalty towards a trafficker. For example, lack of access to housing, healthcare, employment, income, education, or asylum may increase the likelihood of a trauma bond developing.

IMPACT ON SERVICE DELIVERY

When a trafficking victim who has experienced trauma bonding seeks assistance, government officials and service providers must recognize that survivors may behave in ways that seem incongruous with typical expectations of victimization. Within human trafficking, trauma bonding may cause coerced co-offending, perceived ambivalence, delayed or inaccurate reporting, or unwillingness to cooperate with law enforcement.

Services available to survivors of human trafficking, especially those who have experienced trauma bonding, need to be responsive to the impact of the survivor's relationship with their trafficker. A trauma bond may help a victim feel balanced due to the sense of predictability the relationship provides. Within the relationship, there is familiarity and consistency, while leaving the relationship presents the risk of the unknown. The control in a trauma bond may help a person mentally make sense of the world, whereas escaping the trauma bond and trying to make independent decisions may feel overwhelming.

By leaving a trauma bond, a survivor may risk experiencing intense anger and sadness, numbness, negative expectations about the future, and internal disorder. When providers deny access to services due to a victim's interaction with the perpetrator, it may result in re-victimization through engagement in high-risk survival activities. Stages of "relapses" wherein the victim returns to the trafficker should therefore be considered in treatment planning. Finally, organizations must be cautious not to replicate trauma bonding within their own programs, wherein the service provider assumes the simultaneously protective and coercive role the trafficker previously played in the survivor's life.

LOOKING AHEAD

More research is needed on trauma bonding in human trafficking alongside development of evidence-based and trauma-informed service delivery.

- Rigorous, methodologically sound, and impartial research into the frequency of trauma bonding will support improved understanding among practitioners and more effective policies and services.
- Standardization for assessing trauma bonding can help identify red flag indicators and establishment of response protocols.
- Systemic inaccessibility to stability is noted frequently among human trafficking survivors. Examination of the relationship between socioeconomic factors and the occurrence of trauma bonding is necessary.
- Adult-focused interventions require additional empirical research on the role of trauma bonding.
- Significant exploration regarding trauma bonding among labor trafficking victims is needed.
- Because there are no consistent criteria for identifying trauma bonding, the label should be used carefully until clear criteria are established.
- Programs need to recognize when trauma bonding has occurred and enhance a victim's agency. Patience and consistency with service responses may increase a victim's ability to break the trauma bond.

