Facilitating Rest for Victims of
Sex Trafficking at Genesis Project Safe House

May, 2012

This project, submitted by Julie Snider, OTS, has been approved and accepted in partial fulfillment of the requirements for the degree of Master of Occupational Therapy from the University of Puget Sound.

Christine deRenne-Stephan, MA, OTR/L
Project Chair

Lucretia Berg, MA, OTR/L
Project Course Instructor

George Tomlin, MS, PhD, OTR/L
Director, Occupational Therapy Program

Sarah Moore, MA, PhD
Dean of Graduate Studies
Abstract

Anxiety management techniques are commonly used by occupational therapists in mental health settings to help reduce symptoms of Posttraumatic Stress Disorder (PTSD) and facilitate participation in meaningful occupations. With a growing number of human trafficking victims in Washington state, local non-profit organizations have begun to team with health professionals and law enforcement to become involved in their rescue and reintegration. This is a current emerging practice area for occupational therapists. A “relaxation” kit and accompanying manual were created to assist staff at Genesis Project Safe-house of South King County in providing relaxing activities that facilitate participation in rest for trafficked youth suffering from posttraumatic stress. After an in-service training, 90% of staff demonstrated knowledge of the kit’s purpose and safe implementation. One hundred percent of feedback from staff was positive concerning usefulness. As this shelter transitions into a 24-hour shelter and residential facility, staff will have a resource to promote health and well-being for these girls as they begin the process of rescue and reintegration.
Purpose Statement

The purpose of this project was to provide an educational resource manual and corresponding relaxation kit to volunteer staff at the Genesis Project Safe House so that they can provide and facilitate effective relaxation opportunities for domestic minor victims of sex trafficking in order to promote rest during their one night stay at the facility.

Context of the Problem

The 2005 report to Congress, the Department of Congress found that between 14,500 and 17,500 people are trafficked into the United States annually. Within U.S. borders, it was estimated that as many as 100,000 minor citizens are trafficked and subsequently enter into the sex trade each year (Sisken & Wyler, 2010). This is a major problem within Washington due to the many ports and extensive rural areas (Washington State Office of Crime Advocacy, 2008). It is difficult to ascertain the true number of victims due to an inability of victims to self-report. In the South King County area alone it is estimated there are currently approximately 1,000 unidentified victims. In 2009, 81 minors were arrested for prostitution and determined to be domestic minors in sex trafficking (DMST) (A. Connor, personal communication, March 10, 2011). Often times, young girls are targeted by pimps who pose as a boyfriend and get the victim to run away with them. Other victims are homeless youth who are abducted and forced into prostitution (United States Department of Justice, 2010). Sex trade “circuits” exist all over the country but are extensive especially along the Pacific Coast via major thoroughfares. These circuits are routes, used most frequently by gang-affiliated pimps, to recruit and to make money off of abducted girls. Ads are often placed on backpage.com and Craigslist, online advertising sites (A. Connor, personal communication, March 10, 2011).
By its very nature, human trafficking causes an extreme loss of personal independence and choice. Victims are told what to do, where to go and are often beaten and/or purposely given drugs to control their behavior. According to one study, 73% of DMST victims interviewed reported that they had been physically assaulted and 62% reported being raped while prostituting (Farley, Baral, Kiremire, & Sezgin, 1998). As a result of these events, PTSD, anxiety and depression are commonly seen in DMST victims (Sisken & Wyler, 2010).

**Target Population**

The target population for this project is staff at Genesis Project Safe House. It is a non-profit organization created by individuals in law enforcement to help reach very young girls who have been forced into prostitution in the South King County area. The Genesis Project’s mission statement is “hope for a new life”. In keeping with that directive, the staff believes in surrounding each girl who comes through the center with care and attention in the hope that she will see a way out of her situation. This project served counselors and support staff at Genesis Project by providing them with a relaxation kit that helped them promote rest and sleep for DMST victims. Thus, the DMST victims indirectly benefited from the relaxation kit. Currently there are eight trained support persons and two social workers on staff. Program Director Bonita Cooper and Deputy Andy Connor from the King County Sheriff’s Department are currently managing Genesis Project safe house operations (A. Connor, personal communication, March 10, 2011).

Minors in sex trafficking often suffer extreme physical consequences like disease, physical violence, and death at the hands their abusers (United States Department of Justice, 2010; A. Connor, personal communication, March 10, 2011). In one study, 92% of DMST
victims expressed a desire for immediate rescue from a life of prostitution (Farley et al., 1998). The Genesis Project is a non-profit organization created by individuals in law enforcement and is currently the only one of its kind in the entire Pacific Northwest. The center relies on donated goods and services for this transient population. Currently, there are no meaningful activities or resources available to address the extreme stress that the girls are under. The Genesis Project program director wanted to provide a relaxing, healing, peaceful environment with meaningful activities that promote stress relief and relaxation. She expressed a strong interest in additional resources that would enable the girls to experience simple strategies to reduce stress and promote rest.

**Literature Review**

DMST victims are modern-day slaves in our society. They are children who have been kidnapped or lured into a life of sexual exploitation and abuse (A. Connor, personal communication, March 10, 2011; United States Department of State, 2011). DMST victims are defined as children under the age of 18 who are engaged in commercial sex acts such as stripping or prostitution. These acts are against their will and for the profit of someone else (Siskin & Wyler, 2010; Federal Bureau of Investigation, 2005). In the United States, the average age of a trafficked victim is between eleven and fourteen (Farley et al., 1998). According to another study, 70% of women prostitutes in the U.S. today were introduced to the commercial sex industry as minors (Kotrła, 2010). Women and girls who are trafficked and coerced into prostitution suffer enormous abuse at the hands of their pimps and clients (Shared Hope International, 2009). Forced prostitution causes an extreme decrease of personal independence and choice. Victims’ lives are very restricted and little control over personal circumstances exists for these women (Hossain, Zimmerman, Abas, & Light, 2010).
Many victims express the lack of control over how much they work, with whom they work, protection from disease, and basic activities of daily living (Hossain, et al., 2010). Physical and sexual violence is common and severe (Farley et al., 1998). According to a 1998 study (Farley, Baral, Kiremire, & Sezgin, 1998), 73% of DMST victims interviewed reported that they had been physically assaulted and 62% reported being raped while prostituting. Often, violent threats are used to keep victims in fear and submission. In addition, many prostitutes are extremely poor and worry about poverty despite working long hours. The money they make goes to the person controlling them and they are often beaten if they try to keep it (A. Connor, personal communication, March 10, 2011). Stigma is another documented concern for prostitutes (Hossain, et al., 2010).

The result of such abuse causes serious psychological issues. Because this population is difficult to access by researchers, there is a challenge in ascertaining the mental health needs of these women. However, empirical studies have been done with survivors. These studies show that such experiences commonly lead to anxiety, depression and posttraumatic stress disorder (PTSD) (Farley et al., 1998; Hossain, et al., 2010). PTSD is a severe anxiety disorder that affects many areas of occupation. An Axis I disorder, it is caused by exposure to severe trauma which rewire the brain to respond to the painful stimuli even after exposure to it has stopped. Symptoms can include insomnia, hallucinations, hyper-vigilance, and anger (Stewart & White, 2008). In one study assessing 204 girls and women aged 15-45 recently rescued from prostitution, 77% scored above the cutoff for the PTSD subscale of the Harvard Trauma Questionnaire (HTQ) (Hossain, et al., 2010). In another study assessing 130 U.S. women and girls in prostitution, 83% had PTSD as measured by the PTSD checklist (PCL). In addition, many women who engage in prostitution have previously experienced trauma as a result of abuse.
FACILITATING REST FOR VICTIMS AT GENESIS PROJECT SAFEHOUSE

(Hossain, Zimmerman, Abas, & Light, 2010). This layering effect of multiple traumas makes a person more susceptible to victimization and increases vulnerability to psychological disorders (Kotrla, 2010). Longer and more severe exposure to abuse was positively correlated with high levels of PTSD (Hossain, et al., 2010).

The Victims of Trafficking and Violence Protection Act of 2000 provides continued stay, health and legal services, and funding to qualified victims through special legal status, called “T-status” (Sisken & Wyler, 2010). The William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 also makes provisions for aid to support shelters for U.S. minors. However, despite these provisions there is little funding available as of yet and the United States currently does not grant T-status its own citizens. Thus, it is up to nonprofit organizations to help DMST victims.

DMST victims live with extreme restriction in all areas of occupation and may also suffer from PTSD. They present a unique and important challenge for those involved in their rescue and reintegration. Those with PTSD symptoms may have difficulty being able to relax. Because of this, rest and relaxation needs are important for social workers, mental health workers and occupational therapists to consider when working with these victims (Goździak & Bump, 2008). One way to address these rest and relaxation needs is to create opportunities for DMST victims to decrease anxiety and participate in rest while visiting a short-term shelter.

Research shows that a combination approach to treating PTSD-related anxiety is effective, especially for girls who have recently been sexually assaulted (Foa, Keane, & Friedman, 2000). According to the U.S. Department of Health and Human Services, stress inoculation training is one approach that has been successful in preventing chronic PTSD while
hastening recovery. Stress inoculation training consists of psycho-education and anxiety management techniques like breathing retraining and thought stopping. This approach has been found to be especially effective with female sexual assault victims (Rauch & Cahill, 2003; United States Department of Health and Human Services, 2010). Currently there is no relaxation training or therapy directed specifically at reducing anxiety at Genesis Project (B. Cooper, personal communication, August 10, 2011).

According to Taber’s Medical Dictionary, rest is defined as “freedom from activity, either in mind or body” (Venes, 2009). The American Occupational Therapy Association describes rest as “quiet and effortless actions that interrupt mental and physical activity and result in a relaxed state (AOTA, 2008). Anxiety and relaxation are opposites and a relaxation response is needed to transition from an aroused or anxious state to a relaxed one (Benson, Beary & Carol, 1974). Anxiety results from perceived threat and in the case of PTSD victims, this state can remain even when the person is no longer in danger. While in an anxious state, a person’s sympathetic nervous system is working overtime. This hypothalamic arousal is part of what is called the “flight-or-fight response”; the body’s natural reaction to danger (Benson et al., 1974). Metabolism, adrenaline and blood flow to skeletal muscles increases, enabling a person’s muscles to react quickly if necessary. Heart rate, blood pressure and breathing also increase. There are varying levels of anxiety depending on the level of threat one perceives but the purpose is always for short-term safety. Overall, anxiety increases energy expenditure and puts a chronic strain on the body and mind. A relaxation response is defined as an integrated hypothalamic reaction resulting in generalized decreased sympathetic nervous system activity. Research shows that regular elicitation of the relaxation response counteracts anxiety symptoms both in the short and long-term (Benson et al., 1974). Furthermore, facilitating the relaxation
response has been shown to be an appropriate and therapeutic intervention for those with chronic or acute anxiety (Benson et al., 1974).

Hypervigilance, another symptom of PTSD, is an increased state of arousal (Stewart & White, 2008). A person’s senses are heightened resulting in an exaggerated awareness of one’s environment. This phenomenon helps the person to quickly perceive a threat and either engage in conflict or escape. Evidence shows that those with PTSD often have sensory filtering disruptions. This means that their bodies are constantly picking up on sensory information that most people subconsciously dismiss (Stewart & White, 2008).

Outreach programs have used occupational therapists to help sex trafficking victims participate in meaningful activities that decrease stress while they wait in shelters for permanent housing (NGO for a Happy Childhood, 2004; Phongphisuthubpa, 2007). Due to their transient state and the proximity to traumatic events, research suggests that early intervention should not increase the physiology of arousal as this may re-traumatize victims (Flannery, Perry, & Harvey, 1993). Asking victims to verbally communicate about their experiences soon after the event, called “psychological debriefing,” can actually be counterproductive as it may cause the person to re-live the trauma (Rauch & Cahill, 2003). While psychological debriefing is not recommended, early therapeutic intervention combined with psycho-education has been shown to increase the likelihood of continued participation in mental health services (U.S. Department of Health and Human Services, 2010). As modeled in other shelters for trafficked victims, giving victims the choice of participating in diversional activities like yoga and painting allows victims the opportunity to relax and empowers them. This in turn promotes relaxation and a sense of personal control (NGO for a Happy Childhood, 2004).
Art therapy has been indicated as effective with children¹ with PTSD (Lyshak-Stelzer, Singer, St. John, & Chemtob, 2007). In a study with two groups of severely abused and violent teenagers suffering from PTSD, the group who participated in arts and crafts activities had a reduction in anger, depression and anxiety as compared with the control group who received only standard treatment. Children and adolescents react to posttraumatic stress differently than adults (Lyshak-Stelzer et al., 2007). Children often find it difficult to express their feelings about traumatic events verbally and respond more readily to abstract forms of communication (Lyshak-Stelzer et al., 2007). Filling in mandalas, empty circles on paper, with inner patterns and designs has been shown to be an effective way to reduce anxiety as part of a combined therapy program in PTSD victims (Mascaro, Henderson, & Rosen, 2007). While this study used mandalas as a symbolic alternative to written disclosure of a traumatic event, the primary focus was to examine the healing nature of creativity with trauma victims. One group of individuals meeting criteria for PTSD were given a mandala activity as a way to process their traumatic experiences while the control group was given a simple, structured art activity with no trauma-processing. The experimental group experienced a significant reduction in anxiety and depression but only after one-month. The control group with the structured art activity also experienced a reduction in anxiety and depression, though the effects were not as significant (Mascaro, Henderson, & Rosen, 2007). While further research needs to be done in this area, the study indicates a positive effect, even with simple structured drawing activities, in the reduction of anxiety and depression for those with PTSD symptoms. Given the amount of time the girls are actually at the Genesis Project safe house, an activity is needed that is both feasible and beneficial in the short-term for the reduction of PTSD-related symptoms. By providing structured art activities, such as a simple

¹ Because the population served by this relaxation kit is comprised of children and adolescents who have been forced into adult roles, the evidence for the rationale behind this project will include research about children and adults, with a focus on children and adolescents.
step-by-step mandala drawing activity (without trauma processing guidance), the girls at Genesis Project can have the opportunity to participate in a simple and potentially anxiety-reducing activity.

In a recent study, trauma victims exhibiting early signs of PTSD participated in an intervention in the hours immediately after the traumatic event. They reported that deep breathing exercises in conjunction with repeating self-affirmations to be most effective at helping them feel safe and achieve a state of relative calm (Flannery et al., 1993). Anxiety produces an increase in oxygen consumption, resulting in quick, shallow breathing. Deep breathing is achieved by taking deep, slow breaths. This strategy can be complimented by mentally focusing on a preferred image, thought or place. Studies show that this reduces anxiety better than simply closing one’s eyes and sitting quietly or reading a book (Benson et al., 1974). As a part of relaxation training, deep breathing has proven effective with anxiety management which is a key goal in child-based PTSD treatment (Kearney, Weschler, Kaur, & Lemos-Miller, 2010).

Aromatherapy has been widely used to treat anxiety and is in fact the most commonly used complementary alternative treatment (National Institute of Health, 2012). In a recent systematic review, the anxiolytic effects of inhaled aromatherapy, as opposed to massage, were determined to be effective at decreasing anxiety levels for people with anxiety symptoms (Lee, Wu, Tsang, Leung, & Chung, 2011). Though the underlying mechanism for this effect is not fully understood, research suggests that some essential oils, like lavender, work as an agonist to the GABA receptors in the brain. GABA is a neurotransmitter that has an inhibitory effect on the nervous system and can be used to calm the overstimulated system. No adverse side-effects were reported in this review.
Music has long been considered generally therapeutic (Robarts, 2006). Preferred music has been described as having a regulating, organizing effect on the body. This is one of the foundational aspects of music therapy. It has been well-documented that music therapy is very effective in reducing psychopathology, particularly in children with “fragile foundations of self” (Robarts, 2006). In a recent qualitative study, music was shown to have a strong effect on pain perception and the ability to relax when the music type was preferred by the participant (Mitchell, MacDonald, & Knussen, 2008).

Implications for Occupational Therapy

This project is applicable to occupational therapy practice because it addresses areas of occupation, activities that are both meaningful and necessary for human life. The project’s focus was the promotion of rest, an important area of occupation as outlined in the Occupational therapy practice framework: Domain and process (AOTA, 2008). Rest is important to overall health and wellbeing because it reduces stress on the body. Being able to achieve a restful state is important for sleep, which in turn influences a person’s engagement in all other areas of occupation (AOTA, 2008). One main goal for this project was that volunteer staff at the Genesis Project Drop-In Center be made aware of the importance of rest for domestic minors in sex trafficking. This project resulted in a relaxation kit that can be used by staff to promote rest for these girls.

Occupation-Based Model

The ecological models are a group of occupational theory models that provide for a unique consideration of the environment surrounding the client as it relates to an area of occupation. Of the three ecological models, the one that best informs this project is the Person
Environment Occupation Model (PEO) (Brown, 2009). The PEO model views the person as a holistic being and life experiences are considered along with worldview and abilities. This model also defines the physical component of environment as any place where occupation occurs, including temporary environments (Brown, 2009). The environment can either hinder or facilitate an occupation, or the occupation can have components that are challenging to the client, or the client can have or lack skills that facilitate the activity. This is represented by a Venn diagram in the PEO model, with person, occupation and environment overlapping to create occupational performance. Occupational performance is defined as being the outcome of the convergence of person, occupation and environment (Brown, 2009).

The way that the PEO model describes the elements surrounding occupational performance fits with this project. The staff and volunteers at Genesis Project aim to provide a safe haven for domestic minor girls in sex trafficking. As young girls with PTSD and other conditions, the occupation of rest has been impacted. In addition, the facility’s limited resources have created an environment not wholly conducive to rest. By providing resources for staff, this project will use both establish/restore and adapt/modify intervention strategies to increase the occupational performance of rest (Brown, 2009).

**Application of the Framework**

Occupational therapy is concerned with promoting health through participation in occupation. Its domain includes all occupations, or human activities, that carry meaning and purpose to a person (AOTA, 2008). These areas of occupation are categorized as activities of daily living, instrumental activities of daily living, rest and sleep, education, work, play, leisure
and social participation. Any meaningful activity that falls within those categories is addressed by occupational therapists.

The meaningful activity of rest is addressed by this project. Rest is biologically important for maintaining a healthy body and a healthy state of mind. For someone whose mental state is fragile due to underlying client factors of pre-existing PTSD and anxiety over current circumstances, participating in rest may be extremely difficult. This project aimed to promote participation in rest for girls exhibiting anxiety and hyper-vigilance. It achieved this by addressing the lack of relaxation tools within the Genesis Project center and by providing staff with a relaxation kit that promotes restful activities for the girls. As a result, victims brought through the center will hopefully achieve rest and if they choose, sleep. Other potential by-products will be increased participation with counselors at the center and, if they return to the streets, the knowledge that the Genesis center is a place that they can come to participate in those areas of occupation.

**Overview of the Project**

This project addressed the needs of the Genesis Project facility by providing a kit that promoted simple relaxation strategies for girls visiting the center. When a girl first arrives at the center, she must participate in an initial counseling session (B. Cooper, personal communication, August 10, 2011). After counseling is complete, staff members will take the girl on a brief tour of the facility which consists of a front lounge area and a back bedroom/bathroom area. At this time, staff will be able to show the girl the relaxation kit’s location in the back bedroom area. She can choose whatever she wants to do from the relaxation kit. Also included were
After the Genesis Project received the relaxation kit, staff had some hands-on tools to help facilitate relaxation and rest.

**Steps Taken**

- Researched the following topics:
  - Human trafficking including history in the U.S., current laws, provisions for victims
  - Common treatment for children and adolescents with PTSD used by occupational therapists
  - Effectiveness of various treatments, i.e. cognitive behavioral therapy versus complementary alternative medicine for those who have recently experienced trauma
  - Recommended treatment for PTSD by the Department of Health and Human Services
  - Complementary alternative medicine and uses with people with chronic and acute anxiety as outlined by the National Institute of Health (NIH)
- Interviewed local law enforcement and social workers about DMST victims in South King County, their rescue and reintegration into society
- Interviewed Genesis Project program director and staff to understand what services already existed at the time and what was lacking
- Volunteered with Genesis Project in South King County for 10 months to gain first-hand understanding of the experience of the staff in working with this population
- Created the relaxation kit
  - Collected or purchased items
  - Created “calm thoughts cards”
    - Wrote them out
    - Submitted them for editing
- Produced original artwork for the front of each card
- Printed, laminated and attached them to a binder ring

- Created corresponding manuals
  - wrote the manuals
  - produced original artwork
  - submitted them for editing
  - printed and professionally bound them

- Submitted materials for final editing by project chairperson

- Conducted an in-service training with volunteer staff at Genesis Project

- Received feedback about the staff’s understanding, perceived value and perceived effectiveness of the kit and manuals via forms distributed after the in-service training

- Calculated percentages of various responses to measure staff understanding of the kit and perception of usefulness

**Description of Final Product**

A short and simply-worded manual provides an explanation of the various items in the kit and serves as a guide to simple relaxation techniques. Relaxation techniques include deep breathing exercises, progressive muscle relaxation exercises. Also included in the kit were “calm thoughts cards” or peaceful images and descriptions of relaxing places in nature to complement deep breathing and progressive muscle relaxation exercises. Other items included: a sketchpad, markers, mandala drawing activity, small CD player, headphones, 2 CD’s with slow rhythmic music for relaxation and wipes to clean off headphones between uses. Each activity in the kit can be done by the girl alone or with a staff member. Another manual will also be provided for staff use only. It was written in the same format as the kit manual but included notes for staff. These notes contained descriptions of each item and procedures for implementation. Also in the
manual were safety and health concerns so that the staff can safely and effectively implement the kit.

**Outcome of the Project**

The relaxation kit and corresponding manuals were created to provide the staff with materials that promote rest and relaxation for the girls. By utilizing the items that appeal to her, the girl will be able to actively reduce tension and anxiety. This will lead to greater potential for rest and participation in personal health maintenance. This outcome supports the Genesis Project’s mission to rescue and restore victims. Due to time constraints, effectiveness of the kit was not directly measured but rather feedback forms were used to determine the value of the kit to staff after an in-service training.

Project Goals and Objectives

Goal 1: After participating in the student-led in-service training, staff at the Genesis Project Safe House will have a better understanding of the relaxation kit’s contribution to the occupational health of girls with PTSD.

  - objective 1: After being introduced to the relaxation kit manual, staff at the Genesis Project Safe House will be able to describe two ways in which PTSD affects the body and therefore limits the girls visiting the center.

  - objective 2: After being introduced to the relaxation kit manual, staff at the Genesis Project Safe House will be able to describe one way in which the kit items can benefit girls with PTSD.
Goal 2: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to implement the activities with the girls visiting the center.

objective 1: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to operate/use the aromatherapy items.

objective 2: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to describe the steps for using the drawing materials and mandala activity.

objective 3: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to describe the steps for use of the compact disc player and compact discs.

objective 4: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to describe steps for use of the relaxation techniques provided including the deep breathing exercises, progressive muscle relaxation exercises and “calm thoughts” cards.

objective 5: After receiving the relaxation kit along with the corresponding instruction manual, staff at the Genesis Project Safe House will be able to name 2 safety concerns relating to use of the kit items.
Desired Outcome: Genesis Project staff will understand the purpose and proper use of the relaxation kit so that young female victims of sex trafficking will be able to participate in relaxing activities. This will lead to increased rest for the girls during their stay at the shelter.

Actual Outcome: In a feedback survey following the in-service training on use of the kit, staff members indicated their perception of the kit as well as their understanding of its purpose and proper use:

- Nine out of ten staff accurately identified the purpose of the relaxation kit
- Ten out of ten staff members accurately identified two negative effects of PTSD on the body
- Staff members were not asked to describe the specific steps to use each item in the kit. Due to time limitations, the student felt it would be redundant considering how the manual specifically lays out the steps for use of each item. Instead, a general question was used to measure the overall understanding of how to use the kit, including using the manual to operate equipment/use items. Ten out of ten staff members indicated they felt they clearly understood how to access and use kit items.
- Ten out of ten staff members responded that they thought this kit was a tool they would use to help the girls relax. When asked, “would you use this tool?” staff responded with very positive statements like, “I love this idea!” and “yes definitely!”

The student also included her email address for additional questions that might arise. Since she is also a staff member at Genesis Project, the student will continue to monitor use of the kit as well and actual effectiveness in decreasing anxiety in the girls.
Special Considerations, Limitations or Considerations

The population served by this project is fragile and needs to be protected from further trauma at all costs. In the event that the relaxation kit would in some way cause re-victimization it should be avoided. An example would be if a counselor notices that a girl has a strong unpleasant reaction to perfume or background music in the facility seems to upset her, the relaxation kit will probably not benefit her. Also, many girls are used to defending themselves in whatever way necessary. If a girl is known to be violent with staff, the relaxation kit should be avoided. Though items were carefully selected as items that would not lend themselves to becoming a weapon, people can become very creative if they feel sufficiently threatened. A suicidal girl will most likely not be brought to the center. If she is brought to the center for a short period of time until other arrangements can be made, the relaxation kit should be avoided as materials could be used inappropriately.

Another limitation is cost. While many items can be donated, this takes additional time. Items are expensive to purchase new. Used or donated items work best for this particular project. These things should be taken into consideration in the case that this project is duplicated.

Sustainability and Future Steps

This project can be easily stored at the current location. All kit items are contained in relatively small, appropriately labeled, color-coordinated bins for easy access by staff. As Genesis Project transitions into a 24-hour shelter accommodating more people, this kit may be accessed more frequently. It may be expanded by adding additional supplies, listed in the appendices of the staff manual. Eventually, Genesis Project aims to include a residential facility
with resources such as a mentor program, job skill training program, job placement assistance and education assistance. One potential area of future involvement for occupational therapy might be with assisting in job placement and job skill training. These programs will require matching a person’s physical and cognitive ability, in addition to skills and experience, to the right task. This is something that is part of the scope of practice of occupational therapy as it concerns providing people with meaningful work experiences. Occupational therapists who donate time and services in this way can be continual resources to this organization as it builds programs to increase opportunities for victims of human trafficking.
References


*Psychosocial Notebook, 4*, 101-115.


