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UNDERSTANDING VICTIMS OF HUMAN TRAFFICKING: IDENTIFYING MACRO AND MICRO-LEVEL MENTAL HEALTH IMPLICATIONS

Abbigail Pereyra

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UNDERSTANDING VICTIMS OF HUMAN TRAFFICKING: IDENTIFYING MACRO AND MICRO-LEVEL MENTAL HEALTH IMPLICATIONS

A Project
Presented to the Faculty of California State University, San Bernardino

In Partial Fulfillment of the Requirements for the Degree Master of Social Work

by Abbigail Pereyra
May 2023
UNDERSTANDING VICTIMS OF HUMAN TRAFFICKING: IDENTIFYING MACRO AND MICRO-LEVEL MENTAL HEALTH IMPLICATIONS

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ABSTRACT

This study seeks to understand the mental health implications for adolescent victims of human traffic. This will be explored on both a micro and macro-level through the perspective of mental health professionals who have experience working with this unique population. It is important to better understand the multi-faceted impact of service delivery and barriers which victims of human trafficking often face. Equally important is how services and resources can be tailored to meet the needs of this population. This exploratory study utilized qualitative methods for data collection. Data was collected by facilitating interviews and a focus group with mental health professionals. Results from this study had major implications for the field of social work and identified important themes such as unmet needs, mental health and gender identity implications, and barriers to help-seeking. Results from this study also informed social work policy and advocacy as social workers will be better informed and equipped to meet the needs of adolescent victims of human trafficking which includes best practices for treatment interventions. The study concludes that the effects of human trafficking on mental health are complex and multifaceted, with micro and macro-level implications. Addressing the mental health needs of human trafficking victims requires a multi-level and multi-disciplinary approach, as well as addressing the root causes of trafficking and promoting social justice.
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CHAPTER ONE

INTRODUCTION

Problem Formation

Human trafficking is a ubiquitous problem which has no geographic or demographic bounds. Children are particularly targeted as victims of human trafficking. According to the United States Department of Justice (2020), human trafficking, considered modern-day slavery, is defined as a crime which coerces or intimidates a person to engage in sexual acts or forcibly provide labor. Gathering accurate data for this particular population has proven to be difficult by some studies (Cockbain & Bowers, 2019; Nemeth & Rizo, 2019; Tyldum, 2010). While efforts have been made to improve this facet of research, given the complexity of the problem, there is not an infrastructure in place to support collection of accurate data. However, the U.S. Department of Justice (2005) estimates that approximately 200,000 U.S. citizens are at risk of being human trafficked each year.

To aid with research and data, it is important to clearly define sex trafficking and mental health implications that will be discussed in this study. Sex trafficking is a subset term from the broader term human trafficking. For simplicity, these words may be used interchangeably throughout this study. Regarding mental health implications, the study will view this through both a micro and macro-level social work lens. This will include mental health diagnosis on an individual level, influence on gender identity and sexuality, and large-scale
systematic impact of connectivity and navigation through the health care delivery system.

At the micro level, human trafficking drives major consequences concerning mental health diagnoses. Research shows that victims of human trafficking report increased rates of post-traumatic stress syndrome (PTSD), anxiety, and depression (Ottisova et al., 2016). Not only are there long term physical and mental health ramifications for this issue, but there are also consequences which can be noted on a macro level. Human trafficking disproportionately affects disadvantaged and vulnerable populations of children (Marburger & Pickover, 2020). Survivors of human trafficking encounter a harder time reintegrating into society and struggle with forming supportive social networks, education, and access and availability of basic services (Marburger & Pickover, 2020).

To combat these issues, the United States has begun to implement various policies that would aid in decreasing human trafficking. In January of 2020, the Executive Order 13903 was signed. The outlined various measures that would be enforced to combat the problem of human trafficking and online child exploitation in the United States (U.S. Department of State, 2020). This would also include an appointed White House staff position whose sole duties would entail working to aid in preventing human trafficking. The government also enlisted the help of a task force named the Interagency Task Force to Monitor and Combat Trafficking in Persons (PITF). This task force works collaboratively
with other agencies to enforce laws that criminalize traffickers, aid in data and research collection, and increase education and awareness initiatives (U.S. Department of State, 2020). While these policies help in addressing the issue of human trafficking most of them are working in a preventative capacity. It is important to prevent these terrible crimes, but it is equally important to understand the impact on victims as well as solution-based interventions to address these impacts.

**Purpose of the Study**

The purpose of this study is to explore the mental health implications for victims of human trafficking from the perspective of mental health professionals. It is important for social work and mental health practitioners to understand how human trafficking impacts the mental health of children and adolescents. As they grow, children and adolescents are in a constant state of biological development. Encountering traumatic experiences can impede that development and create lasting effects on how children cope and understand the world around them (Lubit et al., 2003). It has major implications which influence both upstream and downstream determinants of health which thus creates major implication for social work practice. Social work practitioners in many different roles assume the responsibility of working for some of these victims/survivors. Therefore, a greater understanding of this unique subset of the population is important to the field.

This study further explores this issue by first identifying mental health practitioners in the field who work closely with victims of human trafficking.
Qualitative data was collected from these individuals through interviews and a focus group. This research method provides us with ample context and information relating to the clinical experiences of these individuals. This information allows us to synthesize common themes, barriers, and mental health implications for victims of human trafficking.

Significance of the Project for Social Work Practice

The findings of this research have major implications for the field of social work. It provides a bird’s eye view of the unique problem’s survivors of human trafficking encounter. On a micro level, this knowledge enables social workers to better understand the scope and pervasiveness of the problem. This will then inform best practices regarding mental health diagnosis, interventions, and services tailored to their needs.

This research also informs social work practice on a macro level. Understanding this populations unique needs and barriers will provide social workers with appropriate needs-based knowledge. Moreover, social workers will be equipped with appropriate services and linkage which can further assist this special population. The research can also influence and impact future policy development that can benefit social work practice.

Obtaining this vital information can guide future research, program development, mental health diagnosis, and inform policy practice. As a vulnerable population, it is important to better understand and serve this
population. This study seeks to answer the following: How does human trafficking impact the mental health outcomes of children and adolescents?
CHAPTER TWO
LITERATURE REVIEW

Introduction
The literature review for this research question seeks to build on any prior knowledge surrounding the problem. This section will provide the reader with an expansive review of the literature surrounding research with victims of human trafficking. Findings of the literature review will be synthesized to identify gaps in the literature and any limitations in methodology. A critical analysis of the research will provide context for the research question. This will establish support for the proposed study and enable researchers to explore the mental health implications for children who are victims of human trafficking. The use of this data and its guiding theoretical frameworks will further assist in directing this research project.

Gaps in the Literature and Methodological Limitations
One of the primary gaps in the literature was available treatment plan options and barriers that exist when working with victims of human trafficking. Studies suggest that treatment plan options and barriers go hand in hand when providing services (Domoney et al., 2015; Munro-Kramer et al., 2020). The lack of treatment plan options is heavily impacted by the barriers that this population encounters. More specifically, there are prevalent barriers including the interplay of social and legal unpredictability, inadequate knowledge of client history, lack of
services, and integrated cross-agency care (Domoney, 2015). These factors play a role in the social work practitioner’s ability to provide adequate treatment plan options tailored around these victim’s unique needs. To address these gaps in literature, it will be important for this study to touch on the unique ways that these limiting factors can be resolved.

Several key limiting factors that contribute to methodology relate to gathering data. As previously mentioned, data for this obscure population is extremely difficult to gather. Victims of human trafficking are a part of a special population often deemed a hidden phenomenon, making it difficult to quantify its prevalence (Brunner, 2015; Martinho et al., 2020; Miller-Perrin & Wertele, 2017). Brunner (2015) explains that this lack of data is due to several elements unique to this population such as no standardization for the definition of human trafficking, its corrupt nature, and the natural lack of ability to collect these records. These combined elements make gathering this data an expected methodological limitation for all studies centered around human trafficking.

Another central limitation to note is the terminology that is used in research based around human trafficking. Human trafficking is an all-encompassing term that includes all forms of trafficking. These various forms consist of sex trafficking, labor trafficking, and debt bondage (United States Department of Justice, 2020). The comprehensive nature of this word can create issues when beginning to collect data. It is difficult to isolate one particular subset
of the larger sample. As Brunner describes above, a standardization of the term human trafficking would help to address this limitation.

Need for Proposed Study and Expansion on Current Research

A comprehensive review of the literature indicates that survivors of human trafficking suffer severe and functionally impairing trauma (Levine, 2017; Ottisova et al., 2016). In addition to major mental health implications, victims of human trafficking also have higher rates of health issues and secondary mental health disorders including substance use and co-occurring disorders (Levine, 2017). The outcomes of this problem alone, constitute a need for further research. Further research should explore the pervasiveness of the issue and the extent to which adolescent children are affected (Tyldum, 2010). Once identified, further solutions can be implemented and tailored to address these issues.

As indicated, a review of literature indicates that there are gaps and limitations which need addressing. This research will build on prior studies by focusing our efforts on tackling those limiting factors. While data collection is a limiting factor there is still overwhelming evidence that supports the idea that victims of human trafficking are at an increased risk of developing mental health issues in response to the associated trauma (Levine, 2017; Ottava et al., 2016). With regards to data collection, this research will view the mental health implications of victims of human trafficking through a mental health professionals’ point of view. This will enable the research to be tailored to the population of interest while also gaining a unique perspective from the providers that provide
direct services to this population. While research shows the general mental health implications for victims of human trafficking it does not take into consideration the various levels of analysis through which to view these implications (micro and macro) (Ades, et al., 2018; Edwards & Mika, 2017). Utilization of research through the lens of a mental health professional will provide a foundation on which to also view the mental health implication for victims of human trafficking on both a micro and macro level. The micro perspective will look at mental health and its associated barriers at the individual’s level. On the macro level, the study will examine how these barriers create a systematic impact on the health care access and delivery system.

Theories Guiding Conceptualization

Studies have examined human trafficking through various theoretical frameworks. This includes the Ecological Model and feminist theory (Burner et al., 2018; Finnigan-Car et al., 2019). Further exploring these theories can give a better understanding of its relation to this field of study and the disadvantages the use poses.

Some studies used the ecological model to explore the study of human trafficking and the role it plays in problems presented in this population. This addressed how the various environmental levels influence an individual. The feminist theory was used as a framework to understand the role of gender in this social issue. The feminist theory addresses the vulnerabilities women experience
as a population that is disproportionally affected by human trafficking (Edward & Mika, 2017).

Based on this information, this study will examine the research question using the Ecological Model. The Ecological Model, originally conceptualized by Urie Bronfenbrenner, surmises that individuals are a result of their environments (1974). This theory was produced within the field of child development and was utilized as a means to explore the ecology of childhood (Bronfenbrenner, 1974). This directly coincides with the research question because the target population for this study is adolescent youth. Additionally, this framework looks at the individual on several levels. The purpose of utilizing this framework is to better understand the complex dynamics between each of the various environmental levels and how each one interacts to impact the individual. Another reason this model applies to the problem is that it can be applied to all parties involved in the process to explain how they are influenced by their environments. This consists of, not only victims, but survivors, families, and perpetrators. Since human trafficking is an insidious issue that involves multiple agencies and various fields of study, it is important to understand all people who are involved in the issue. Ultimately, this framework provides context for the population.

Summary

A review of current literature allowed for the identification of several gaps in research including treatment plan options and barriers in accessibility to this hidden population. Due to the hidden nature of human trafficking, data collection
remains a methodological limitation in most studies. Additionally, the all-encompassing term ‘human trafficking’ has also created issues in data collection as there is a lack in standardization of the term. A review of the research indicated an obvious relationship between victims of human trafficking and mental health implications (Levine, 2017; Ottava et al., 2016). However, further research should explore the impact on the individual within various environments including the micro and macro level. The feminist theory and ecological model have both been used as theoretical frameworks to guide previous research studies. This study will utilize the ecological model as a guiding theory as it is more fitting to the target population and allows us to view the individual within those various environmental levels.
CHAPTER THREE

METHODS

Introduction

This research will address the mental health implications of victims of human trafficking as well as the barriers these individuals face when seeking help. The study will seek to find commonalities as it relates to diagnoses and identify ways in which barriers can be addressed or eliminated. This chapter will explore this study’s methodology. The sections for this chapter encompass study design, sampling, data collection and instruments, procedures, protections for human subjects, and data analysis.

Study Design

The purpose of this study is to explore the obstacles this unique population faces. Victims of human trafficking are often exposed to traumatic events and circumstances. This study seeks to understand how those unique set of circumstances impact their overall wellbeing. Additionally, this study seeks to understand how those circumstances influence their help-seeking behavior and access to health care services.

This research utilized an exploratory research method to gain a better understanding of the existing problem of human trafficking. This research approach was also chosen to develop and more comprehensive understanding
of the issue. Additionally, this study collected data from mental health professionals in the field who work with victims of human trafficking. This will enable researchers to gain a unique perspective on this issue, inform treatment recommendations, and address barriers distinct to this vulnerable population. This will also guide future research.

As is often the case with exploratory research methods, this study utilized qualitative data collection. Qualitative data collection uses firsthand experiences and narratives to paint a picture of the problem and gain a true understanding of the research question posed. The researcher for this study facilitated individual interviews and a focus group. During the interviews and focus group data was collected by having participants answer open-ended questions pertaining to the research topic.

An exploratory research design is ideal for this research topic for a couple reasons. Firstly, it is important to understand the perspective of mental health practitioners. Their experience working in health care settings enables them to see things through a provider’s lens. Thus, increasing the knowledge they have about this issue and the systemic barriers this population faces. Additionally, it is important to collect data from this group through a focus group and interviews. It will provide the researcher with candid accounts of personal experiences. Not only will this give one experience or perspective, but it will enable research to be gathered on a wide range of individuals with just one practitioners’ response.
While there are benefits to an exploratory research design, it is equally important to address limitations to this research methodology. Limitations might include a possible response bias when collecting data. For example, in a focus group setting participants may not want to be as candid with their answers. Responding to questions in front of peers could make them uncomfortable. They may also be influenced by the responses of the participants in the focus group as well. It is also important to note that exploratory research designs are limited to only collected qualitative data. The use of more data collection techniques may make for a stronger research study. This is not necessary a limitation, but rather an element of data collection that should be noted.

Sampling

This study uses a nonprobability purposive and snowball sampling method. This method was selected since it is necessary for the sample to consist of mental health professional who have experience working with victims of human trafficking. Due to the distinct selection criteria participants may be more difficult to obtain. Therefore, snowball sampling was used as means to combat this obstacle. In this case, the researcher identified a single member within the target population and asked that individual to connect the researcher to additional participants who may meet the selection criteria.

The mental health professionals worked in a variety of organizations, capacities, and geographic locations and were selected because of having
extensive experience working with victims of human trafficking. There was a total of 7 subjects participating in individual interviews and one (1) focus group. The subject’s participation in the focus group or individual interview was dependent on the availability and access to that participant.

Data Collection and Instruments

Data for this study was collected for both interviews and focus group via electronic telecommunication through Zoom. All encounters were also audio-recorded and took place in April-December 2022. Reliability and validity of all data collection tools and instruments were informed by the literature and further refined by discussions with research supervisor. Participants for both interview formats will initially be given introductory information about the study. This information will consist of the purpose and need of the study as well as more background information pertaining to their role in the research study.

Once basic introductions and information have been completed the researcher will begin the focus group/interview by asking the participants a series of questions (See Appendix A). These questions are open-ended to create a spontaneous and open dialogue. This is to enable participants to have a candid conversation about topics and reveal their honest thoughts and opinions. The content of the questions started off with initial questions that gather information regarding participant thoughts and perceptions about this population and subsequent implications and barriers. The participants were then asked more
specific questions regarding their experiences with this population during service delivery. Lastly, it ended with closing questions that invited participants to make comments that contribute to the conversation, ask questions, or provide additional information which may have been overlooked during the discussion portion.

Procedures

Participants for this study were solicited using the researchers existing network of mental health professionals. As previously stated, the research utilized snowball sampling in addition by asking members of the researchers existing network to identify additional participants they may know. Upon identifying participants for the study, an email confirmation was disseminated individually. This email confirmation stated the confirmation of the participant and included dates and times of prospective interview and focus group slots.

Two formats were utilized for data collection which consisted of one-on-one individual interviews and one focus group. For individual interviews the researcher decided on a date and time that worked for the participant. These one-on-one interviews took place via Zoom, a videoconferencing software platform. One week prior to the meeting a zoom link invitation was created and sent to each respective participant. On the day of the interview a follow-up reminder email was sent to participants to ensure a good turnout rate. The interview consisted of one researcher and one participant and lasted roughly 45 minutes with a 15-minute window for any questions participants may have. The
The interview itself consisted of a series of questions for the participant to answer. The interview was recorded and transcribed by the interviewer for future use in the collection of data.

The one focus group for this study used a similar format to the individual interviews and will also be held virtually via Zoom. Participants initially sign-in to the secure zoom conference room using a pseudonym that has been randomly assigned to them. This pseudonym was used by all participants for the duration of the focus group. Before the start of the focus group participants were asked to sign an informed consent form and they were given additional information regarding the privacy and confidentiality of all responses from participants. Once this is complete, the group answered a series of questions pertaining to the study. At the end of the focus group, the group of participants were asked if they would like to make any final statements regarding the questions and material that was covered. The focus group lasted roughly 1 hour and left a 15-minute window for questions to be asked by participants proceeding the focus group. The focus group was recorded and transcribed by the interviewer for continued analyzation of data after its collection.

Protection of Human Subjects

The confidentiality of all participants and data is of the upmost importance for the duration of the study. Any participant information that needs to be documented including names and emails is kept on a password protected document on the researcher’s password protected laptop. During interviews,
participants were asked to use a pseudonym which was utilized for the duration of the interview and focus group to ensure the participants confidentiality. Lastly, this study also included an informed consent which was signed at the beginning of each subject’s participation in the research project.

Data Analysis

The procedures used to process and refine the data include recording, transcribing, and analysis. To analyze the data, the researcher utilized content analysis. Content analysis synthesizes the data by an objective and quantitative means to find themes and ideas within the interview data. Emerging themes and ideas are centered around the content of the interview questions including mental health implications for victims of human trafficking, influences on gender and sexuality, intervention recommendations, and perceived barriers. Other variables which were collected and analyzed as part of the descriptive data include age, gender, profession, and years of experience within the field of mental health.

Summary

This study explores the mental health implications and barriers of victims of human trafficking. The study will use an exploratory research design. This design is ideal for the study because the research question is studied from the mental health practitioner’s viewpoint. The one-on-one interviews and focus group took place to facilitate the collection of data that this unique target
population will likely have. Mental health practitioners provide a greater understanding of the implications and systematic barriers that victims of human trafficking face.
CHAPTER FOUR

RESULTS

Introduction

This chapter comprises the results for the current study gathered during one-on-one interviews and a focus group with study participants. Upon analyzing the interview data, this researcher used comparative analysis to extract information, statements, and key terms that shared common themes. All eleven interview questions were open-ended and required comprehensive analysis and review. These questions sought to elicit data that would pertain to the mental health implications and barriers experienced by victims of human trafficking as seen from the mental health providers perspective. The respondent’s self-disclosed personal and professional experiences with human trafficking. Final analysis of the participants responses has been organized into the following five categories: demographics, unmet needs, mental health implications, gender and sexuality expression, best practices, and barriers.

Results

Demographics

Seven participants were interviewed for this study. Each participant was assigned a pseudonym which was utilized for the interview and focus group process to ensure confidentiality. The first letter of the pseudonym (letters A-G) will be used to identify them throughout this study. Demographic data for the
seven participants included information on their age, gender, ethnicity, education, profession, population served, and years of experience, geographic location, and years of experience working with victims of human trafficking. Of the seven participants, the ages ranged between 25 and 54 years old. Participant ethnicity was varied with three (3) participants identifying as mixed race, two (2) participants identifying as Hispanic, one (1) participant identifying as African American, and one (1) participant identifying as Caucasian. All seven (7) participants were located in California. More specifically, three (3) were located in Hemet, two (2) were located in San Bernardino, one (1) was located in Visalia, and one (1) was located in Modesto. Gender data was skewed, as six (6) participants identified as female, and one (1) participant identified as male. With regards to education, the data was relatively evenly distributed with one (1) participant reporting a doctorate as their highest level of education and working as a psychiatrist. Three (3) participants reported a master’s degree and are working as social workers, and again three (3) participants reported a bachelor’s degree and are each working respectively as a peer support specialist, a drug counselor, and a crisis intervention specialist. There was a range of experience working with human trafficking victims with years of experiencing ranging from 4 to 20 years, with the mean years of experience identified 12.7. Additionally, all seven (7) participants served the mental health population and had professional experience working with victims of human trafficking.
Unmet Needs

All seven participants reported that victims of human trafficking were not adequately getting their needs met. While the reasoning behind why their individual needs were not met may have differed, all participants unanimously agreed that victims of human trafficking often navigate a system that is lacking resources, awareness, and education around this issue. One participant reported that their individual needs are not being met even on the most basic level of human emotions. For example, participant B recounts both her lived experience as a survivor of human trafficking and presently as a practicing clinician how victims are lacking these fundamental needs. When asked if she felt that victims of human trafficking were getting their needs met, she states

So, a lot of times youth become easier targets because there is something missing at home, right? Whether it be emotional support, physical support, what have you. A lot of victims come from broken homes, or they’ve been in foster care, the juvenile justice system, and so, for me personally being a survivor myself, I know that I came from a broken home… when I was a teenager, I felt like the streets were safer than being at home. And I think at the most basic human level, most of the victims come from, you know, marginalized populations, poor single-family homes, stuff like that (Participant B, personal interview, May 15, 2022).
Of the 7 participants, 6 of them brought up the lack of resources and awareness as the leading contribution for unmet need among this population. Participant A recounts her experience as a psychiatrist working as she states

The availability of human resources and mental health resources for the aftermath of an experience like this are just not readily available especially for those individuals who may have trouble navigating the healthcare system… as we all know, navigating through the mental health system in California and the United States in general is not easy. Also finding locations where they provide specific therapies that are based in trauma care or trauma informed therapies, especially when you’re looking for continuity of care, that's just not available here (Participant A, personal interview, April 23, 2022).

Participant F also shared in this sentiment as she states

Also, the lack of resources and finding and receiving those services, because it is one thing to find a service or a resource, but it's a whole other thing to be able to get into that. And they often encounter either a long wait list or not even being able to accept the client. This can be really discouraging for someone who is at that point of getting help and seeking those services that need, and not being able to, because you're going to revert to that same lifestyle (Participant F, personal interview, December 7, 2022).
Mental Health Implications

Analysis of the data showed a correlation between having a history of human trafficking and the negative implications it has on one’s mental health. All 7 participants agreed that victims often present with an extensive history of trauma and mental health. The exact implications vary from person to person, but there are commonalities including trauma disorders, anxiety, depression, co-occurring disorders, and maladaptive coping. Trauma-related stressors like human trafficking has an impact on appropriate child development and secure attachment as a child as participant A explains:

In early childhood, as part of a normal development, formulating secure attachments and having a sense of safety is imperative to child development. And when that is interrupted, or when something occurs, where a child is drawn into or pooled into a situation in which they’re being violated, and they are unsafe, that feeling of lack of safety, and just being unsure about the world kind of follows them from there on. And so, we get very severe cases of PTSD... they go through the world with a chronic sense of anxiety and worry and hyper vigilance. It really creates a situation in which we have a young patient who goes on to be an adult or in their late teens that’s functionally impaired (Participant A, personal interview, April 23, 2022).
Participants also reported that repeated trauma exposure can lead to maladaptive coping mechanisms. As such, human trafficking survivors often turn to these means to help ease the feelings associated with the situations they go through and the mental health manifestations. Participant D describes her experience with this when working with these individuals as she states

I've seen depression and anxiety. It instills fear, low self-worth, self-esteem. Just low values, so it's almost like you must rebuild the person because they've been violated. Not only physically, but mentally, and you know they develop a lot of maladaptive behavior to cope with the situation they're in… they're guarded, build balls. They don't trust anymore…the need to isolate. Cutting because they blame themselves a lot. So, anger, resentment, and all that. It all kind of creates, especially in juveniles, it creates a real rebellious angry future for them (Participant D, personal interview, April 29, 2022).

Moreover, participant E, provides more context with how children cope within the school-based setting. As a school counselor, she has encounters children who are often referred to her for things like this as she states

Coping is a big thing too. Dealing with emotions that are bigger than them. They don't know how to deal with those types of things, and they have experienced a lot of unworthiness feelings, and a lot of times this affects them in their everyday behavior. They can't focus on class because they don't want to focus. They constantly put their head down, they isolate
themselves from their peers, Things like that. They just can't really relate to the kids that they're age when they're dealing with adult problems (Participant E, personal interview, May 15, 2022).

Impact on Gender and Sexuality

Data was further analyzed to determine the impact a history of human trafficking has on an individual’s gender and sexuality. There were two major themes that emerged. One theme was that human trafficking can influence sexuality in that individuals become hypersexualized. 4 out of the 7 participants mentioned hypersexuality when discussing the impact of human trafficking. Participant C explains how this can vary from person to person, however in her experience she says victims are “overly sexualized, you know. I think that it’s depending on the age group you see. I think they've become oversexualized as a result” (Participant C, personal interview, April 26, 2022). Moreover, participant F describes her experience with identifying this as a commonality among the individuals she works with as she describes

Children are at an age, especially nowadays, at a pivotal age where gender and sexuality is being shaped and molded and that's where we start to have kids come out of the closet and see them experiencing some feelings… thoughts, ideas, and behaviors are being shaped, and we encounter issues with how gender and sexuality is interpreted. We can see a lot of hypersexuality amongst both our males and our females, of being overly sexualized and becoming more promiscuous, because
they've been exposed to that at such a young age (Participant F, personal interview, December 7, 2022).

On the opposite end of the spectrum, the second theme that emerged was a rejection and change in how gender is expressed. Both participants describe how in their experiences trauma of this sort will cause individuals to want to reject their assigned gender as a means to keep themselves safe. In her experience working in the school system, participant D encountered many youths who were presenting as the opposite gender as she explains, "I've seen some children (females) that then start to dress more… more boyish. They start to claim that they're gay or they're a dyke. They start to act like a male, so that they can be thought of as a male, especially if they're related to gangs and things like that. Because it's a way of safeguarding themselves" (Participant D, personal interview, April 29, 2022). Additionally, Participant A highlights this in her own work with victims of human trafficking as she states:

For example, when a cis female has been trafficked, and she is predominantly violated or repeatedly raped by cis males. Sometimes we see this feeling of being unsafe with your assigned gender at birth, and so we get a rejection of that femininity. And it's self-protective for some people. So, if I don't look feminine, and I wear baggy boys’ clothes, then males won't look at me, they won't touch me, they won't be around me, and I'll be safer. That's like an example of sometimes what we see with people who have experienced really severe rapes and sex trafficking and
these kinds of traumas. And this is not for everyone of course, all humans are on a spectrum (Participant A, personal interview, April 23, 2022).

Best Practices

With mental health implications being a prevalent theme for those who are survivors of human traffic, many participants brought up best practices for treatment. All 7 participants touched on at least one technique, theory, intervention, or treatment that has proven to be helpful when working with this population. While this ultimately depends on the severity of the issue, the common themes that arose included medication/medication management, coping strategies to address maladaptive behaviors, and trauma informed therapeutic services. Participant B describes the importance of delivering trauma focused therapeutic interventions as she states

So first, trauma-informed care at all times! Making sure that we’re not asking questions to fill our curiosities about it. Person-centered, a lot of the times if you’re working with a victim, a survivor, even an exploiter! That's super important, too. But at the same time, solution-focused, so like you might only get to meet with them one time, right? And so, being very solution-focused, person-centered, trauma-informed, because in that one moment you have an opportunity to plant a seed for them. Equipping them with any kind of future reason that can be easily accessed either through their phone or what have you just equipping them. Cause when I was out there, I would have what I call “moments of clarity” where you wake up
you're in a hotel, you're tired and you just want out right. It's like a 5-10 min moment where if I had a resource tucked away in my phone, I might have used it (Participant B, personal interview, May 15, 2022).

Barriers

All 7 participants provided information on barriers that were perceived from a mental health provider's perspective. These were barriers that both the provider encountered as well as the victims. Many of which are worth noting. There were some common themes that emerged around the discussion of barriers. 4 of the 7 participants brought up grooming as a barrier. In addition, a lack of education and awareness and time was also a commonality as it was brought up by 4 of the 7 participants as well. Participant B describes what she feels is the greatest barrier for both providers and victim of human trafficking as she says

The grooming is going to be the biggest barrier because we see that they're groomed. I mean when they're talking about their experiences, you'll hear them refer to their pimp as their boyfriend, their husband, their daddy, even their moms right? Women are exploiters, too. And they just truly have bought into this dream that they made this choice to use sex as a means of income, and that they're playing this vital role, right? And so, the greatest barrier is the belief that they are the only ones making that decision and that nobody else has made that decision for them. So, nobody's even going to want any kind of help or support on something...
they don't see as being a problem (Participant B, personal interview, May 15, 2022).

Additionally, a lack of education and time were both concepts that were brought up during interviews and focus groups. As previously mentioned, participant A states the lack of resources available to this population. However, she also acknowledges the lack of time that mental health providers have to give due to services being so inundated. As she states

In one particular clinic that I work in, prior to one month ago, we only had two in-house therapists that are working for an entire clinic patient load that can include over 1000 patients. And so, I was referring out for- and this is not just in regard to human trafficking victims and people with PTSD, but in general, the entire population in this area- so I have to refer out to other local organizations or local agencies or even private practice clinics. If people had the means to do that to get trauma-based therapies or those kinds of therapy interventions and even then it would be a waitlist for that kind of stuff. (Participant A, personal interview, April 23, 2022).

Additionally, the lack of education and awareness around human trafficking was a common topic addressed by all participants. Education was deemed important because it impacts how people communicate about human trafficking and will impact how others see this. Participates agreed that many times, there is not enough political buy in from leaders in the community. Thus, impacting the
valuable resources available for these individuals. Participant C addresses the topic of awareness when she states

it is just so overlooked and it's such a taboo conversation. It's what we call uncomfortable conversations and when we talk about this type of stuff, we talk about how there are predators at the video games store and on these little underground websites and stuff like that, you know it’s taboo with a concern, and it's happening all around us. We see the kids selling stuff at the corner. We see them in the grocery store parking lot. It's just that it’s a lack of awareness. We as a community need to start bringing awareness, and that’s one of my biggest concerns is that we don’t make awareness, we don’t bring it to the table often enough… to just make our kids aware. (Participant D, personal interview, April 29, 2022).

Summary

The research finding describes in this chapter were comprised of the results of 5 individual interviews and 1 focus group. The individuals interviewed were professional working within the realm of mental health to address the needs of victims of human trafficking. Their candid accounts are based on years of professional experience and personal lived experience. Through a qualitative approach using comparative data analysis, the data analyzed from the interview transcripts and descriptive experiences concluded five defined categories: demographics, unmet needs, mental health implications, gender and sexuality expression, best practices, and barriers. Each category provided details of the
participants accounts during the interviews. This data will be used to understand the hypothesis and guide future research.
CHAPTER FIVE
DISCUSSION

Introduction

The purpose of this chapter is to expand on the research findings presented in chapter four. This study sought to fill a research gap by examining the impact of human trafficking on the mental health of children and adolescents. This complex problem was further investigated through a provider’s perspective and utilized qualitative data compiled from one-on-one interviews and focus groups with mental health practitioners. By better understanding the mental health outcomes associated with trafficking, the study will also inform future interventions and policies that can better support and protect this vulnerable population. This section of the research will further analyze the findings from chapter four and provide more detail about the importance of the themes identified, such as the unmet needs of survivors, mental health implications, impact on gender and sexuality, best treatment practices, and the barriers associated with help seeking practices for survivors of human trafficking. This chapter will also evaluate the strengths and limitations of the study and cover the potential recommendations it has on social work practice, policy, and future research.
Discussion

Unmet Needs

To better understand the treatment plan options available to this population, this study sought to first understand their needs. The research found an overwhelming lack of services available to this population. Participants in the study unanimously agreed that victims were not getting their needs met. The emerging theme was that survivors of human trafficking have many unmet needs. This included basic level needs relating to stable family homes and emotional support. As well as higher level needs including education, public awareness and training, and a lack of specialized care for survivors of trafficking. The research clearly demonstrates a need for more services and infrastructure that support individuals who are impacted by human trafficking. Several participants mentioned that should begin in the home and through educating the public on the problem of human trafficking as it is growing at an exponential rate.

Mental Health Implications

Previous research on this topic suggests that there is an obvious relationship between survivors of human trafficking and subsequent mental health implications that exist (Levine, 2017; Ottava et al., 2016; Tyldum, 2010). However, this study wanted to understand the micro and macro needs of individuals as seen through a mental health practitioners' lens. In this study, it was clear through participant interviews that the consensus of all participants found that common mental health diagnosis for this population includes post-
traumatic stress disorder, panic disorder, anxiety, depression. As well as maladaptive behaviors including self-injurious behaviors, chronic suicidal ideation, substance use, and issues with self-esteem, self-worth, and trust. At the macro level, we need systems within the community to provide successful healthcare solutions that treat the unique mental health outcomes of these individuals. This study also found that mental health treatment should be comprehensive and include medication management, therapy-based services, substance use services, and linkage to other ancillary services as needed. However, it is also clear that we have a lack of resources available that includes a treatment plan this comprehensive. Without the infrastructure to support this, the mental health service availability will still be lacking. While the research is clear when it comes to mental health outcomes for survivors of human trafficking, we still require advocacy and support on a macro level as it relates to services that treat these mental health outcomes.

**Impact on Gender and Sexuality.**

There was a lack of prior research found that investigated the impact a history of human trafficking had on an individual’s gender and sexuality. Since research was unclear it was important to understand the dynamics between the two ideas and if there was any association between the two. After further research to determine the impact a history of human trafficking has an individual, two themes emerged related to gender and sexuality. Most participants acknowledged that they have witnessed victims on two opposite ends of the
spectrum when it comes to how gender and sexuality is expressed among youth who are victims. They are often either hypersexualized or rejecting of the gender they were assigned at birth. It was clear that the way in which these individuals expressed their gender and sexuality was utilized as a safeguarding measure.

**Best Practices**

Prior review of the literature found that mental health impact and service needs for individuals were vast (Ades, et al., 2018; Domoney et al., 2015; Munro-Kramer et al., 2020). However, research is limited with regards to best practices and interventions when working with survivors of human trafficking. On a micro level, the research gathered in this study shows that there are several best practices to follow when working within the field of mental health. From a clinical perspective standard practice is to treat mental health based on severity. Mental health services can encompass psychiatric medication and medication management, therapy-based services, and programs to treat substance use disorders. This study found that interventions which have proven most helpful among this population include Trauma Focused Cognitive Behavioral Therapy, Person-Centered and Solution Focused therapies, Motivational Interviewing, and coping and grounding techniques. There was a resounding focus on providing trauma informed services to this population, which was found to be difficult as service providers that have the specialized training to deliver trauma informed services are severely lacking, particularly in more rural areas. As one interviewer states, “trauma informed services are so important because it allows us to
provide services in a way that meets them where they’re at...in a place that makes them feel safe" (Participant D, personal interview, April 29, 2022).

Research should continue to explore the best practices, interventions, and techniques to treat survivors of human trafficking during a difficult and traumatic time in their lives. A large pool of research can increase visibility of this issue thus allowing the public to gain awareness of the issue and cultivate a conversation of change.

**Barriers**

Previous research suggests that barriers in accessibility exists for victims of human trafficking (Domoney et al., 2015; Edwards & Mika, 2017; Munro-Kramer et al., 2020). This study reinforces that finding and proposes that additional barriers exist for both survivors and mental health practitioners. When it comes to the victims of human trafficking these barriers will include navigating the system of care, shame associated with human trafficking, and grooming. Most participants reinforced the idea that services are difficult in accessing and found that navigating the system of care is equally difficult as they often do not know where to begin. Participants mentioned that survivors will often feel shame and embarrassment associated with their situation thus impeding their help seeking behavior. The last and most insidious barrier that emerged was grooming. Due to the covert and widespread nature of grooming it can lead to a denial that human trafficking exists as victims do not seek out services.
From a provider’s perspective, similar barriers exist with grooming. Additionally, participants mentioned timeliness to services, referral points, and funding as obstacles. The lack of comprehensive and specialized services available to this population is concerning for providers within the mental health field. While a small number of specialized mental health services do exist, there is also the issue of time, as appointment availability and wait times often makes this difficult. This makes it problematic for providers to engage survivors in services, thus increasing the risk of youth becoming engaged in more harmful services which can involve group home placement and incarceration. Ultimately, this leads to the main macro level issue of public awareness and funding for human trafficking. Although task forces do exist, more needs to be done in the way of rehabilitation and funding to increase awareness and facilitate change.

Theories
To help gestate the research for this study, it was examined using the Ecological Model. The model was originally conceptualized by Urie Bronfenbrenner (1974). This theoretical framework theorized that an individual is shaped by the social and physical environment in which they live in. This theory is important to this study as it acknowledges that a child’s behaviors is not solely determined by personal characteristics, but is also shaped by the unique and complex interconnected environments which an individual lives in. The Ecological Model should continue to be utilized to inform academia, research, intervention,
and policy that targets human trafficking at all levels and aids in assisting survivors.

Another important theory that arose because of this study was Maslow’s Hierarchy of Needs (Maslow, 1970). The theory was mentioned by several research participants in relation to the human trafficking effects on children’s mental health. Maslow conceptualized that there are levels that compromise human needs. These needs are encompassed as hierarchical levels within a pyramid with the most basic needs starting on the bottom. Needs lower on the hierarchical scale must be satisfied before individuals can attend to higher level needs (McLeod, 2007). The five levels include physiological needs, safety needs, love and belonging needs, esteem needs, and self-actualization needs.

Participants discussed the lack of resources available to victims that are human trafficked. Even at the most basic level their individual needs are not being met. One research participant directly spoke to the unmet needs of this population when she stated, “We’re talking about issues with secure attachment on a basic level. At that basic level is, we need shelter. We need love. We need attachment, and these kids aren’t getting that when they’re involved in situations like this.” (Participant F, personal interview, December 2022). It is clear human trafficking can have severe mental health implications for both victims and survivors as it can violate their fundamental needs at each level depicted in the hierarchy of needs. This theory should continue to be utilized to develop interventions and
research that consider these needs which will be crucial in supporting the recovery and healing of human trafficking survivors.

Strengths and Limitations

The overarching strength of this study was the robust and representative nature of the sample size. The sample was representative of the population for which this study examined as each interviewee was a mental health practitioner working directly with survivors of human trafficking. Each practitioner works in a different capacity with this population which offered a more robust sample size. This led to diversity in the responses provided and strong interviews with the average interview lasting about 30 minutes in duration.

A limitation of this study is how human trafficking is defined. As mentioned in the beginning of this study, it is difficult to define human trafficking and tease out the various forms of human trafficking. As such, this paper is siloed to human trafficking as it relates to sex trafficking. While there are other types of trafficking types briefly mentioned by interviewees, overall, the interviews were focused on child sex trafficking. This may be indicative of a sampling pool that is reflective of a larger problem that highlights the lack of resources and professional services available within the realm of labor trafficking. Another key limitation is a lack of a male perspective as part of the sample population. The interviews were limited with male participants thus leading to a sample size not representative of the larger population. This is also indicative of a lack of male professionals within the helping profession who provide services to survivors of mental health.
Recommendations for Social Work Practice, Policy, and Research

Social Work Practice

This study informs social work practice on a micro and macro level. It emphasizes the need for more trauma informed practice and training with our social work professionals. Trauma informed care is essential and is proven to have a profound impact on an individual's mental health. As mentioned in this study, trauma often endured by survivors of human trafficking can affect the individual's mental wellbeing and subsequently lead to an inability to regulate emotions and form healthy relationships. Ultimately this can lead to developing mental health diagnoses. Trauma informed care is important to implement within our social work roles with victims of human trafficking. Due to the scarcity of professionals trained in trauma-informed care, this specialized training and education should be implemented as a part of regular social work higher education and both in academia and within the workforce. Additionally, this highlights the importance of providing teaching around trauma informed work to aid all health care professionals in providing tailored services needed for survivors and victims of human trafficking.

Social Work Policy

It is clear that services tailored to the needs of victims of human trafficking are lacking. The research presented in this study can be utilized to impact social work policy by informing our political leaders of the unmet needs of these individuals. This can create advocacy for better services and bring funding to
underserved communities and marginalized populations. Oftentimes, human trafficking starts in the homes and communities by this can shed a light on this problem and bring awareness and funding to those people most in need.

**Social Work Research**

As a result of this study, more research development is needed to study the impact and prevalence of labor trafficking. This will also lead to an increased awareness and provide context on understanding best practices when working with this population. Additionally, more research is needed to explore the relationship between gender/sexuality and victims of human trafficking. There is an association, but this can lead to more research within the field of gender and sexuality development.

**Conclusion**

In conclusion, the findings of this study suggest that the effects of human trafficking on mental health are complex and multifaceted. The micro-level implications of human trafficking include mental health diagnosis on an individual level and influence on gender identity and sexuality, while the macro-level implications include the large-scale systematic impact of connectivity and navigation through the health care delivery system. Through a mental health practitioners’ lens, this study highlights the barriers associated with micro and macro level implications of human trafficking. Moreover, the findings suggest that addressing the mental health needs of trafficking victims requires a multi-level and multi-disciplinary approach, which involves not only providing specialized
mental health services but also addressing the root causes of trafficking and promoting social justice. Ultimately, this study underscores the importance of recognizing and addressing the mental health needs of trafficking survivors as part of a larger effort to combat human trafficking and promote the well-being of vulnerable populations.
APPENDIX A

INTERVIEW GUIDE
Questions for Mental Health Practitioners Working Directly with Victims of Human Trafficking

1. What is your understanding of human trafficking and how would you define it?

2. How serious of a problem is human trafficking in your region/area of practice?

3. Do you feel that victims of human trafficking are adequately getting their needs met? If not, how can this be improved?

4. In your experience working with victims of human trafficking, what services have these individuals needed?
   a. What services have you provided directly?
   b. What services have required you to refer out to other agencies?

5. In your experience, how does a history of human trafficking affect children’s mental health?

6. In your experience, what mental health concerns are most prevalent with this population?

7. In your experience, how does a history of human trafficking effect how children express gender and sexuality?

8. What techniques, theories, interventions, or treatment options have proven useful/helpful in practice when working with victims of human trafficking?

9. As a mental health practitioner, explain the resources that are available to this population before, during, and after delivery of mental health services in your practice.

10. What do you feel is the greatest barrier victims of human trafficking encounter when seeking services?

11. What do you feel is the greatest barrier you encounter as a practitioner when providing services to victims of human trafficking?

12. Is there any additional questions, comments, or concerns that you would like to bring up during this time that were not already mentioned?

Developed by Abbigail Pereyra
APPENDIX B

DEMOGRAPHIC SURVEY
1. What is your age in years? _________________________

2. What is your gender?
   a. Male
   b. Female
   c. Transgender
   d. Other
      ____________________________________________
   e. Prefer not to answer

3. What ethnicity do you primarily identify as?
   a. African American
   b. Asian - Eastern
   c. Asian - Indian
   d. Hispanic
   e. White/Caucasian
   f. Mixed Race
   g. Other:
      ____________________________________________
   h. Prefer not to answer

4. What is the highest level of education you have achieved?
   a. Less than a high school diploma
   b. High school degree or equivalent
   c. Bachelors degree (e.g. BA, BS)
d. Masters degree (e.g. MA, MS, MEd)
e. Doctorate (e.g. PhD, EdD)
f. Other:

____________________________________________________
g. Prefer not to answer

5. What is your profession in the field of mental health?

____________________________________________________

6. What is your job title?

____________________________________________________

7. What population(s) does your agency serve?

____________________________________________________

8. What geographic location (city) does your agency serve?

____________________________________________________

9. Do you have experience working with victims of human trafficking?
   a. Yes
   b. No

10. How many years of experience do you have working with victims of human trafficking?

____________________________________________________
APPENDIX C

INFORMED CONSENT
INFORMED CONSENT

The study in which you are asked to participate is designed to examine the mental health implications for victims of human trafficking as seen by mental health practitioners in California. This study is being conducted by Abbigail Pereyra, a graduate student, under the supervision of Dr. Armando Barragán, Associate Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board at CSUSB.

PURPOSE: The purpose of the study is to examine the mental health implications for victims of human trafficking and the barriers this population faces.

DESCRIPTION: Participants will be asked a series of questions on their profession within the field of mental health, experiences working with victims of human trafficking, and some demographic information.

PARTICIPATION: Your participation in the study is completely voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY: Your responses will remain confidential, and data will be reported in group form only.

DURATION: It will take 5 to 10 minutes to complete the survey.

RISKS: Although not anticipated, there may be some discomfort in answering some of the questions. You are not required to answer and can skip the question or end your participation.

BENEFITS: There will not be any direct benefits to the participants. However, findings from the study will contribute to our knowledge in this area of research.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Barragán at (909) 537-3501.

RESULTS: Results of the study can be obtained from the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after July 2022

******************************************************************************

I agree to have this interview be audio recorded: _____ YES _____ NO
I understand that I must be 18 years of age or older to participate in your study, have read and understand the consent document and agree to participate in your study.

__________________________________  ____________________

Place an X mark here Date  Date
APPENDIX D

IRB APPROVAL
February 16, 2022

CSUSB INSTITUTIONAL REVIEW BOARD

Administrative/Exempt Review Determination Status: Determined Exempt
IRB-FY2022-92

Armando Barragan Jr. Abigail Pereyra CSBS - Social Work
California State University, San Bernardino 5500 University Parkway

San Bernardino, California 92407
Dear Armando Barragan Jr. Abigail Pereyra:

Your application to use human subjects, titled “Understanding Victims of Human Trafficking: Identifying Micro & Macro-Level Mental Health Implications” has been reviewed and determined exempt by the Chair of the Institutional Review Board (IRB) of CSU, San Bernardino. An exempt determination means your study had met the federal requirements for exempt status under 45 CFR 46.104. The CSUSB IRB has weighed the risks and benefits of the study to ensure the protection of human participants.

This approval notice does not replace any departmental or additional campus approvals which may be required including access to CSUSB campus facilities and affiliate campuses. Investigators should consider the changing COVID-19 circumstances based on current CDC, California Department of Public Health, and campus guidance and submit appropriate protocol modifications to the IRB as needed. CSUSB campus and affiliate health screenings should be completed for all campus human research related activities. Human research activities conducted at off-campus sites should follow CDC, California Department of Public Health, and local guidance. See CSUSB’s COVID-19 Prevention Plan for more information regarding campus requirements.

You are required to notify the IRB of the following as mandated by the Office of Human Research Protections (OHRP) federal regulations 45 CFR 46 and CSUSB IRB policy. The forms (modification, renewal, unanticipated/adverse event, study closure) are located in the Cayuse IRB System with instructions provided on the IRB Applications, Forms, and Submission webpage. Failure to notify the IRB of the following requirements may result in disciplinary action. The Cayuse IRB system will notify you when your protocol is due for renewal. Ensure you file your protocol renewal and continuing review form through the Cayuse IRB system to keep your protocol current and active unless you have completed your study.
• Ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.
• Submit a protocol modification (change) if any changes (no matter how minor) are proposed in your study for review and approval by the IRB before being implemented in your study. Notify the IRB within 5 days of any unanticipated or adverse events are experienced by subjects during your research.
• Submit a study closure through the Cayuse IRB submission system once your study has ended.

If you have any questions regarding the IRB decision, please contact Michael Gillespie, the Research Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at mgillesp@csusb.edu. Please include your application approval number IRB-FY2022-92 in all correspondence. Any complaints you receive from participants and/or others related to your research may be directed to Mr. Gillespie.

Best of luck with your research.

Sincerely,

Nicole Dabbs

Nicole Dabbs, Ph.D., IRB Chair CSUSB Institutional Review Board

ND/MG
REFERENCES


