



DURHAM REGION'S

HUMAN TRAFFICKING MODEL

OVERVIEW OF

DOMESTIC HUMAN TRAFFICKING

The United Nations defines human trafficking (HT) as the recruitment, transportation, transfer, harboring, or receipt of persons by improper means for an improper purpose including forced labor or sexual exploitation. More broadly, human trafficking is the forced exploitation of a person for financial gain. There are three elements that must be present for HT to exist; force, fraud and coercion, all of which must be facilitated by a third party, working behind the scenes to accrue profits.

Domestic sex trafficking involves the trafficking of persons within the same country. The process of recruitment for domestic sex trafficking often follows the same pattern. The process has been broken down into the stages of commercial exploitation. These stages include Luring; Grooming & Gaming; Coercion & Manipulation; Exploitation, and; Recruitment. Traffickers target vulnerabilities of young individuals, often posing as boyfriends in the luring stages before taking them further through the stages to ensure Survivors are dependent on them for both physical and emotional needs. There are three main reasons why people do not or cannot leave, including fear of physical violence, fear of the unknown and the psychological hold and relational trauma bond that the trafficker has created between themselves and their Survivors. These reasons make it all the more challenging to support Survivors, even after they have been identified.

In Canada, an estimated 71% to 93% of all cases can be classified as domestic sex trafficking and of these cases, 93% are female and 72% are under 25 years old. Shockingly, the average age of recruitment is 13 years old. Human Trafficking (HT) is a serious and ongoing epidemic in Ontario. Ontario, which accounts for 39% of the total Canadian population, has accounted for just over two-thirds (68%) of all police reported human trafficking incidents since 2009.

Durham is a region in Southern Ontario which is part of the east-end of the Greater Toronto Area. Durham Region has been identified as a hotspot for trafficking due to the proximity of municipalities situated on Ontario's Highway 401. Since 2017, Victim Services of Durham Region (VSDR) has seen a steady increase in the number of cases, with referrals to Victim Services Durham growing 7 times between 2018 and 2023. In November 2018, The Durham Regional Police formally established a Human Trafficking Unit to address the large increase of trafficking in the region. In 2019, approximately 1 in 10 Survivors were under the age of 15. The Covid-19 pandemic that began in March 2020 stands to exacerbate trafficking in Durham Region.

PURPOSE

As a response to the alarming number of cases in Durham alone, the Durham Region Human Trafficking Model was developed to identify Survivors of human trafficking and ensure a coordinated Regional response to preventing and responding to trafficking.

This document seeks to outline the unique collaboration between service providers in Durham Region, which is the cornerstone of the model, as it leads to specialized service pathways and interventions for Survivors of human trafficking. It is built upon special agreements between over 30 partnering agencies in Durham Region who comprise the Durham Human Trafficking Coalition (www.StopHT.com) and share a common understanding that Survivor-centric and wraparound services are crucial to mitigating the lasting effects of trauma experienced by Survivors.

This model meets Survivors where they are at regardless of whether or not they have left a trafficking situation or choose to report to police. Overall, this model demonstrates how a Survivor-informed, multi-agency response can effectively respond to the complex needs of Survivors of human trafficking. With implementation of the model in 2018 Victim Services of Durham Region (VSDR) saw referrals rise nearly 7 times by 2024.

FOUNDATIONAL VALUES

The following are the six core values that underpin the effectiveness of the model, followed by brief descriptions. It's important to note that organizations involved in the model operate within their own philosophies and some are further advanced in their understanding and application of these concepts. However, the collective goal of the coalition members is to provide programs and services aligned with these principles in their organizational values and mandates. Having said that, there is a shared understanding that upon collaboration, these values should inform the manner in which prevention, assessment and intervention activities take place across the region.

1 SURVIVOR-INFORMED/SURVIVOR LED

- Programs and services informed by lived expertise of Survivors
- Client-centred service provision guided by self-determined needs of Survivors
- Regular formal and informal feedback by Survivors who utilize the model

3 INTERSECTIONAL APPROACH

- Acknowledging the context of colonialism, patriarchy and systemic racism as it relates to HT; and the over-representation of women, particularly Black, Indigenous and People of Colour (BIPOC)
- Acknowledging intersectionality and other factors that create barriers for Survivors of HT to receive adequate supports; 2SLGBTQIA+, refugees, immigrants and individuals with disabilities
- Proactive community outreach and equity based approach to identify and support Survivors
- Anti-Oppressive and Culturally Responsive practice is as a critical component

5 TRAUMA-RESPONSIVE

- Applies a trauma-informed lens; understanding that those who have experienced sexual abuse, prior involvement with child protection and/or criminal justice systems are at increased risk of trafficking, and that these systems disproportionately target marginalized groups
- Actively applies trauma-informed principals to affect systems change/dismantle systems of oppression
- Minimizes the number of times a Survivor has to tell their story and emphasizes building trust
- Service provision that takes into account the impact of systemic and individual factors

2 RELATIONAL APPROACH

- Human trafficking is a relational crime, therefore healing should entail building of healthy relationships
- Needs first approach that meets physiological and safety needs of survivors and replace dependence on
- having basic needs fulfilled by traffickers
- Build trusting therapeutic relationships with Survivors by providing services and resources without expecting anything in return
- Foster secure attachments to build Survivor resiliency as described by Attachment Theory

4 HARM REDUCTION

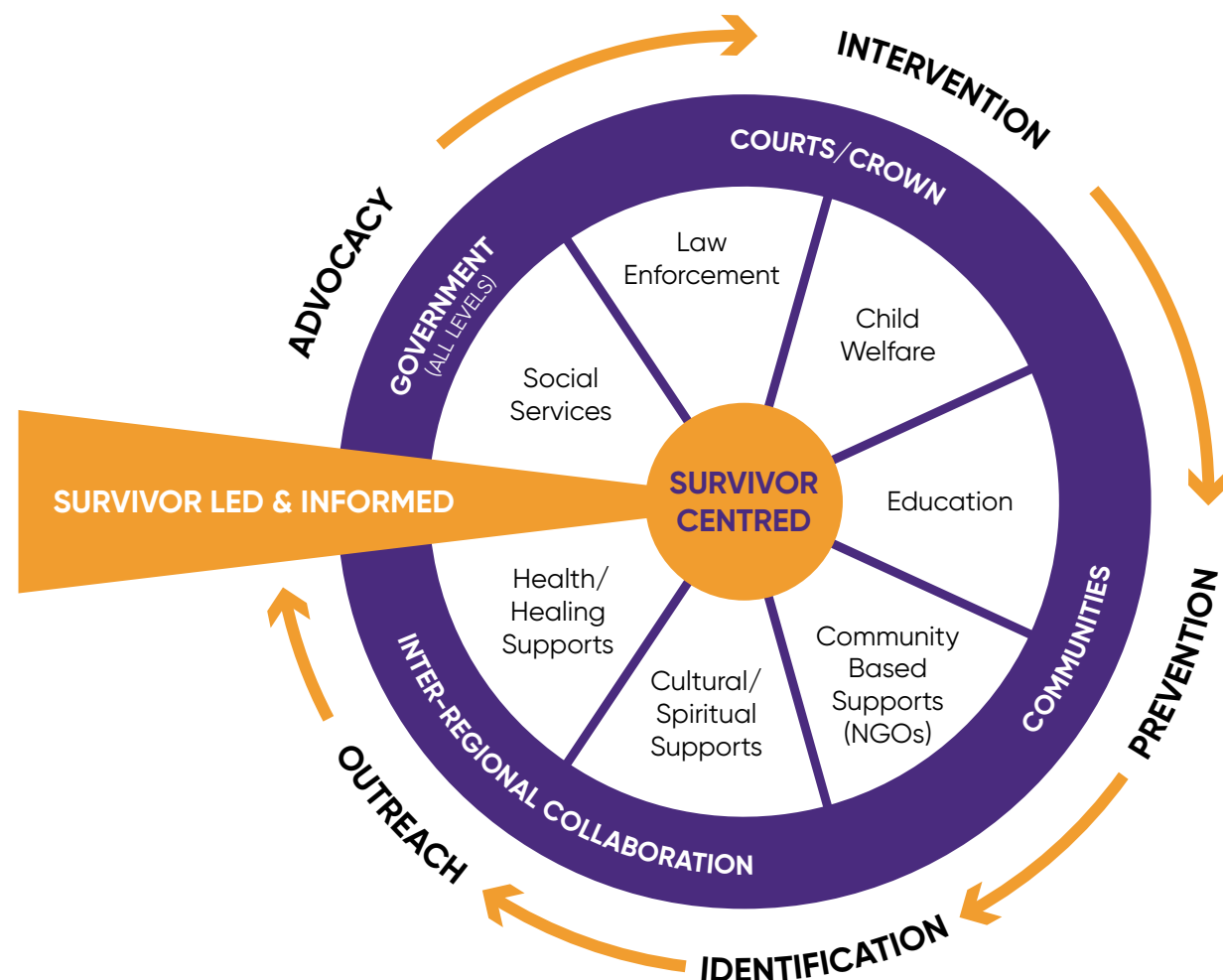
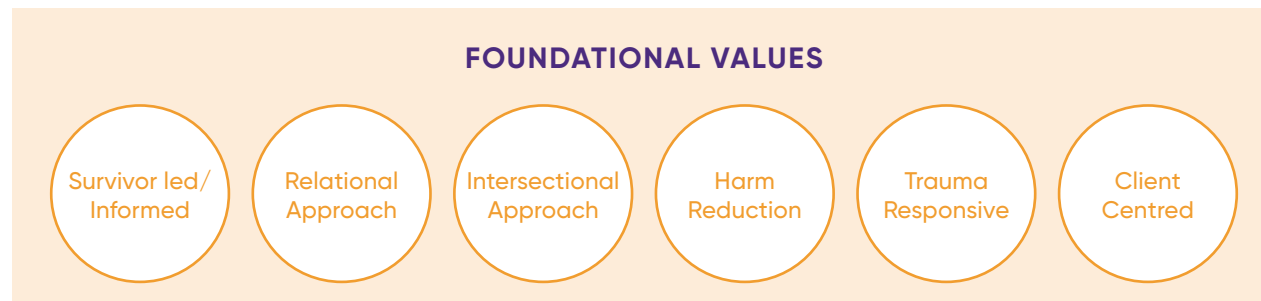
- Meeting clients where they are at in terms of their psychological, social and physical condition
- Recognizing that decision-making regarding exiting a trafficking situation should be determined by clients to avoid a "save and rescue" mentality
- Maintaining services to clients' regardless of their current substance use
- Promoting safer sex and substance use practices
- Supporting safety planning regardless of decisions about whether or not individuals are remaining involved in trafficking

6 CLIENT-CENTERED APPROACH

- Seamless and coordinated, multisectoral, culturally responsive wraparound services
- A continuum of care which meets clients where they're at given their psychological, social and physical state
- Warm transfers or personal introductions between client case managers and other service providers to increase trust and rapport for clients navigating multiple services

DURHAM REGION HUMAN TRAFFICKING MODEL

The following diagram outlines the relationship between the guiding principles and the model, followed by sections that describe each of these key components of the model.



PREVENTION OF HUMAN TRAFFICKING

Primary prevention - education and awareness to prevent people from being trafficked

- Prosecution
- Youth workshops
- Community/Caregiver education
- Outreach/Early Engagement

IDENTIFICATION OF SURVIVORS

Secondary prevention - improving screening/ identification techniques in order to enact early intervention

- DRPS HTU
- Service organizations
- Community education
- Outreach (Early Engagement)

ASSESSMENT AND INTERVENTION

Tertiary prevention - minimizing harm for people who have already been affected by trafficking

- Infrastructure
- Collaborative practices
- Advocacy
- Specialized staff
- Specialized service delivery

SURVIVOR CENTRIC

- Survivor Advisory Panel (SAP)
- Youth Advisory Committee (YAC).

ADVOCACY

THE COLONIAL CONTEXT OF HUMAN TRAFFICKING

Individuals at greatest risk of victimization in Canada generally include those who are female-identifying and members of vulnerable or marginalized groups who are socially or economically disadvantaged. While Indigenous women and girls in Canada make up only 4% of the population, they are 3 times more likely to go missing, 6-7 times more likely to be murdered, and represent over 50% of survivors of domestic sex trafficking in Canada (1, 2).

With trafficking survivor demographics reflecting such a staggering over-representation of those from Indigenous communities, it is essential that we acknowledge the impact of Colonization in Canada, including the insurmountable harm caused by the Indian Residential School system. The intergenerational trauma inflicted on Indigenous peoples has led to heightened vulnerabilities and therefore, increased rates of victimization. The Indian Act has perpetuated harmful stereotypes, forced assimilation and migration, poverty, loss of culture and systemic discrimination, all of which contributes to poor socio-economic outcomes. The sexualisation and de-humanizing of Indigenous women and girls in particular, has enabled and normalized violence against Indigenous women and the processes of human trafficking that we see today (1). To acknowledge the harmful legacy of colonization we must accept the shared responsibility to protect Indigenous Women, Girls and Gender Diverse People and to address systemic social, cultural and economic inequalities that continue to disproportionately impact them.

The Durham Region Model encompasses a commitment to honor the teachings and experiences of Indigenous Survivors, knowledge keepers and Indigenous organizations as an essential part of its anti-human trafficking efforts. The Coalition recognizes that restorative and healing practices are often those rooted in regaining and reclaiming culture, and that Indigenous communities and organizations are best positioned to offer these supports to Indigenous survivors (3, 4). All agencies intersecting with survivors must take responsibility for creating connections and linkage with culturally appropriate services, and advocate for enhanced funding for services where they are not available.

THE INTERSECTIONS OF INDIGENOUS HUMAN TRAFFICKING AND THE CHILD WELFARE SYSTEM

The greatest risk factor for human trafficking is involvement with the child welfare system (4). During the "Sixties Scoop" from the 1960-1980s, Indigenous children were removed from their homes and placed in the foster care system at alarming rates. While we acknowledge the enduring trauma from this era, we must recognize that there are higher numbers of Indigenous children in care today than during the sixties scoop, with Indigenous children under the age of 14 representing approximately 52% of the children in care in Ontario (5, 6, 7). Anti-human trafficking efforts must therefore recognize this intersection, and ensure prevention and intervention focuses on building relationships with our Indigenous brothers and sisters and includes action to address systemic harm that leaves Indigenous Peoples at greater risk.



IDENTIFICATION

Identification of Survivors happens in the region in a variety of ways. In Durham, service providers have recognized that Survivors rarely proactively self-disclose. Survivors may be referred to police, or police may identify potential Survivors through pro-active searches of online advertisements or through tips. Survivors may also be identified through community service organizations that they interact with, such as income and employment supports or the emergency department. In Durham Region, Survivors may also be identified as a result of disclosures that occur after education is provided to youth. It is not uncommon for youth to self-disclose trafficking or other forms of victimization to Victim Services Durham (VSDR) after an education session has been provided.

DURHAM REGIONAL POLICE SERVICE – HUMAN TRAFFICKING UNIT (DRPS HTU)

The DRPS HTU in collaboration with VSDR Human Trafficking Crisis Intervention Counsellors (HT CIC) deploys a proactive approach to identifying Survivors of Human Trafficking through a program called “Date Night”. Police utilize a web-scraping software called ‘Traffic Jam’ that searches the internet for advertisements that may contain indicators for trafficking. Officers pose as individuals seeking services from the ads and attend the location with the HT CIC to engage the victim using a trauma-informed approach, in which the Survivor is advised of supports available to them. The Survivor-led model, called Helping Alliance with Law Enforcement to End Trafficking (HALT) has been used since 2018 and operates from a Survivor-centric approach that does not pressure Survivors to speak to police or provide a statement. The Model has garnered international recognition and has been replicated across the country and highlighted at conferences held by the Organization for Security and Cooperation in Europe (OSCE). A detailed overview of the Model can be found at www.victimservicesdurham.ca/reports The model led to an increase in identification of Survivors with referrals to Victim Services growing from 60 in 2018 to 443 in 2023.

CHILD AT RISK OF EXPLOITATION UNITS (CARE)

In 2021 Ontario’s Child, Youth and Family Services Act was amended to include a duty to report suspected cases of Human Trafficking. The Act also includes provisions that allow removal of a child/youth from a high risk environment in order to bring them to a place of safety for a 12-hour hold in order to engage the youth and offer support. CARE Units were created, which pairs police with Child Protection or Child Well-Being staff to proactively identify, investigate, locate and engage children and youth who are high risk of or are victims of child trafficking. The initiative began in 2020 as part of Ontario’s Anti-Human Trafficking Strategy. Toronto Police and Durham Regional Police were the initial police forces chosen to pilot the initiative. In Durham Region this included pairing of staff from police with child welfare organizations – Durham Children’s Aid Society and Dnaagdawenmag Binnoojiyag Child and Family Services (A multi-service Indigenous Child Well-being agency).

CARE Units are not meant to replace existing law enforcement or community based or Indigenous-led organizations doing Anti-Human Trafficking work in their respective jurisdictions. The partnerships aim to supplement Anti-Human trafficking efforts by improving identification of victims, and enhancing communication between police and child welfare organizations to ensure an expedited and well-coordinated response to strengthen investigations and ensure victims are quickly linked to wrap around supports. The addition of CARE Units in Durham Region has created a successful team based approach to trafficking that sees police, victim services and child welfare organizations working in tandem to ensure the protection of children and youth impacted by trafficking.

MISSING PERSONS PROJECT

In 2023 DRPS HTU indicated that approximately 70% of trafficked youth connected to the unit had

been reported missing on at least one occasion prior to being identified as a victim of trafficking. Approximately one third (500+ cases) of missing person cases in Durham involve youth, and the majority of those cases involve youth connected to the Child Welfare system, which is a significant risk factor for trafficking. For this reason, DRPS HTU routinely monitors all reports for missing persons under the age of 18. The cases are reviewed in order to proactively identify any youth who may be at risk of or are showing indicators for trafficking.

In December 2023 DRPS HTU and VSDR expanded the HALT Model to include embedding a VSDR Crisis Intervention Counsellor (CIC) in the police Missing Persons Unit. The initiative aimed to respond to recommendations in the Epstein Report titled “Missing and Missed” but was also seen by VSDR as an opportunity to proactively identify and intervene early in cases of suspected trafficking.

Recognizing that Indigenous women and girls are disproportionately impacted by trafficking and are reported missing and are murdered at much higher rates than the general population, VSDR prioritized the need to, where possible, hire an Indigenous counsellor for the role. The project therefore, answers calls to action through the Missing and Murdered Indigenous Women and Girls Inquiry and Truth and Reconciliation Report. The Missing Persons CIC works in close collaboration with partners at Dnaagdawenmag Binnoojiyag Child and Family Services, Bawaa-jigewin Aboriginal Community Circle and other diverse community partners to ensure that individuals supported are also linked with culturally responsive services.

In the first month of the project 100 referrals were provided to the CIC, with 20% self-identifying as Indigenous. Prior to this police indicated that less than 0.5% of missing persons identified as Indigenous. That same month the CIC received disclosures of trafficking from 5 Indigenous youth. In

the first year of the project more than 800 individuals were supported by the CIC, with nearly 75% being youth. The project has also led to significant conservation of resources and cost savings for police. The Evaluation Report for the Missing Person Project will be available in 2025 at www.victimservicesdurham.ca/reports

SERVICE ORGANIZATIONS

Businesses such as those in the hotel industry provide opportunity for staff education that will enhance ability to recognize indicators for trafficking. As such, VSDR provides tailored training to targeted industries such as the hotel industry to improve identification and increase referrals to police.

Frontline service organizations such as social services, education/schools and healthcare are well positioned to identify indicators for trafficking. As such, training is also provided to a multitude of sectors and agencies on how to identify trafficking, and how to engage Survivors in a way that is safe and trauma-informed.

ONTARIO WORKS (OW) EMPLOYMENT AND INCOME SUPPORTS

Durham's OW program has created specialized Human Trafficking Response Teams that consist of staff with specialized training on how to identify and support Survivors. All staff, including administrative and reception staff are trained in HT identification. Effective identification of human trafficking also allows Survivors to access specialized supports within the Region's programming such as special priority status for social housing or expedited access to income support that will waive identification requirements.

HEALTHCARE IDENTIFICATION

In approximately 2019, and as a member of the HT Coalition, Lakeridge Health created an internal working group that consisted of various staff across the corporation who would receive training on human trafficking and act as a liaison and support for suspected or confirmed cases of trafficking within the hospital. Unfortunately, the working group dissolved in 2020.

Between 2020-2023 VSDR conducted hospital based research on the experiences of Human Trafficking Survivors in Durham through a project

called "Rise Up", funded by Women and Gender Equality Canada (www.victimservicesdurham.ca/reports). The research supported that despite more than 80% of Survivors frequenting the Emergency Department (ED) during their trafficking experience, little to no identification of Survivors was occurring within the hospital. It also showed that less than 39% of staff surveyed had received training on trauma-informed care and less than 24% had received training on human trafficking.

Following recommendations from the Rise Up report, VSDR created a free, human trafficking E-course for healthcare professionals that consists of 3 modules: 1-Trauma Informed Healthcare, 2-Human Trafficking Identification and Response and 3- Application of Trauma Informed Care with Human Trafficking Survivors (www.victimservicesdurham.ca/training-resources).

Hospital Survivor Support Worker (HSSW) – In 2023, in response to recommendations from the Rise Up report, VSDR and Lakeridge Health created a Memorandum of Understanding for a pilot project that embedded a Hospital Based Crisis Intervention Counsellor or HSSW within the hospital, most notably the ED to support with identification of Survivors, increased multi-sectoral knowledge exchange, enhanced communication between healthcare staff and community based services, and ensure direct/immediate support for Survivors attending hospital. The HSSW was also able to ensure Survivors identified within the hospital setting were linked with community based services prior to discharge and immediately access supports available through VSDR to ensure safer discharges from hospital. In 2022, prior to implementation of the pilot, VSDR received only 3 referrals from Lakeridge Health, which has approximately 11,000 staff. No referrals were received that year from DVSAACC or the Emergency Department. As a result of the pilot, referrals from Lakeridge Health increased to 75 in 2023 during the pilot. The pilot concluded after one year due to a lack of funding.

The Human Trafficking Coalition continues to

work with various healthcare organizations in the region to establish referral pathways that will ensure consistent and expedited access to acute, mental health and addictions, and primary care supports for Survivors.

EDUCATION SECTOR

In July 2021 the Ontario Ministry of Education issued a directive (PPM 166) that school boards across the province establish and follow a protocol for identifying and responding to suspected cases of sex trafficking. The Keeping Students Safe: Policy Framework for schoolboard Anti-Sex Trafficking Protocols aims to implement prevention measures using trauma-informed, survivor-informed and culturally responsive practices, and through collaboration with community based service providers. School boards within Durham and Kawartha Regions worked in collaboration with VSDR to develop protocols.

Through a partnership with the Ministry of Education, Durham Catholic District School Board and Durham District School Board, VSDR has been providing youth violence prevention and Anti-Human Trafficking training for youth and educators since 2019. In 2024, through collaboration with the Ministry of Education, the Anti-Human Trafficking and Youth Violence Prevention Symposium by VSDR expanded to include all school boards and First Nations across the province ensuring all youth in every region have access to critical prevention programming. In Durham specifically, referrals to VSDR doubled in the two weeks following the symposium each year from 2022-2024 indicating a significant increase in identification as a result of prevention education provided.

OUTREACH LOCATIONS

In 2023 Durham Regional Police, in partnership with VSDR, OW, CAREA Community Health Centre (now Durham Community Health Centre – DCHC) along with various other partners created the Monday Night Project (MNP). MNP operates using a hub model that individuals involved in the sex trade can visit to access food, basic needs items and connect with various

community services including plain clothes police officers, VSDR, health, mental health and harm reduction services, Ontario Works, among other supports. The hub offers opportunity for engagement with those at high risk for trafficking or victimization, and increased identification of human trafficking. It also provides opportunity for clients to connect with each other in order to share details about dangerous individuals as a means of increasing safety for those working in the sex trade.

Members of various partner organizations are also positioned at various hubs across the Region to increase access to services for Survivors as well as enhance identification at sites where Survivors may frequent. In Durham Region, members of the HT Coalition are also situated at a downtown outreach and warming centre called Backdoor Mission as well at Safety Network Durham (a hub that operates through a collaboration of Violence against Women sector partners).

In 2025 Victim Services, in partnership with Durham Youth Services (DYS) created a Youth Advisory Council (YAC) using a drop in model that engages youth from the shelter and outreach programs at DYS. The YAC serves as an opportunity for youth who are at increased risk to build rapport with VSDR staff in a non-threatening way and also provides opportunity for youth empowerment through sharing of insight and input into VSDR's programs. Increased interaction with youth at the shelter will provide additional opportunity for disclosures. VSDR also works with an HT Survivor Advisory Panel to gather additional insight into programming to ensure effectiveness of prevention and intervention methods used. All participants are provided with an honorarium for voluntary participation.

COMMUNITY AWARENESS AND EDUCATION

Social Media Campaigns, media campaigns and awareness events are hosted regularly by members of the HT Coalition to increase community awareness of HT and ability to identify indicators for HT. Free education is provided to all community members and is available via VSDR's website. VSDR received 4 disclosures in 2024 from attendees at community awareness events.



PREVENTION

Prosecution of traffickers, targeted and community-based education and outreach in high risk areas have been shown to increase effectiveness of prevention efforts.

PROSECUTION OF TRAFFICKERS

It is challenging for law enforcement to hold traffickers accountable without having formal statements from Survivors. Formal statements allow investigators to build a case against their traffickers, and increase the chances of a conviction. As Survivors tend to distrust law enforcement given negative prior interactions and/or fear instilled in them from their traffickers, this makes obtaining statements particularly challenging. The partnership between Durham Regional Police Services (DRPS) HT Unit (HTU) and Victim Services Durham Region (VSDR) ensures Survivors of human trafficking have the opportunity to speak with a trauma-informed service provider when police attend a scene. They are met by an HT Crisis Intervention Counsellor (CIC) who can help Survivors feel safe and supported by someone with a trauma-informed lens, and where the focus is on establishing a trusting relationship rather than obtaining a statement. An HT CIC ensures informed consent and explains the process of testifying against their trafficker, as well as the supports available, including court guidance during court processes in collaboration with the Victim Witness Assistance Program (VWAP). This approach is part of the HALT Model developed by DRPS and VSDR since 2018 (Helping Alliances with Law Enforcement to End Trafficking, 2024, www.victimservicesdurham.ca/reports)

HT CICs never pressure clients to give statements however with this approach, more Survivors have chosen to testify against their traffickers. DRPS HTU saw a 30% increase in the number of formal statements given between 2018 and 2020. In 2019 and 2020, DRPS HTU completed 257 investigations, laid 238 charges and identified 239

victims, 103 of whom were under the age of 18. Formal statements from Survivors of human trafficking is a crucial aspect of prosecution, which has been enhanced with the model.

OUTREACH

As previously mentioned, Durham has effectively utilized hub models to strategically position key staff from various organizations in areas that are central or frequented by those at risk of trafficking. The Monday Night Project provides a safe space for individuals involved in the sex trade to engage with multiple service providers at a single site. Service providers such as VSDR and OW have also positioned staff at Backdoor Mission, an outreach hub located in downtown Oshawa that provides food, warming center and health-care services for at risk individuals in the community. Violence Against Women service providers also collaboratively operate a hub model called Safety Network Durham, located within CFSD (Catholic Family Services Durham) that provides support for female identifying individuals and families experiencing violence. The Region of Durham has a mobile paramedic/social worker team (Primary Care Outreach Program – PCOP) that also provides support at these various hub locations as well as through a mobile unit. PCOP has been able to support with acute healthcare needs such as harm reduction or wound care for those experiencing trafficking who are otherwise unable to attend hospital or clinic locations. By ensuring staff are positioned in locations frequented by those at risk of trafficking, Durham Region service providers have been able to reduce barriers to accessing service. VSDR's Youth Advisory Council (YAC) and Survivor Advisory Panel (SAP) also ensure all programs and outreach efforts are Survivor informed.

Coalition members are visible at community events and awareness raising activities. Marketing and signage at these events, particularly in

high priority neighborhoods have resulted in on-site disclosures to VSDR staff, creating additional opportunity for support and intervention.

YOUTH WORKSHOPS AND EDUCATION

The prevention of human trafficking begins with a shared understanding of human trafficking. Prevention initiatives have been led by VSDR in collaboration with DRPS, Durham District School Board (DDSB) and Durham Catholic District School Board (DCDSB). Educational workshops are Survivor-informed and take place from a trauma-informed lens. While initial workshops were provided to grade 9 students across the Region, the workshops were expanded to include grades 7+ in response to trends that reflected recruitment tactics targeting youth at an increasingly younger age. Other partner agencies such as Bethesda House shelter, CFSD, and DRCC are involved in additional provision of gender based violence education.

In aligning with the Ontario Government's Anti-Human Trafficking Strategy (2021-2025), the Ontario Ministry of Education introduced new policy framework in 2021, which included updated curricula for grades 1-3 students to learn skills in identifying and responding to exploitative and coercive behavior, and how to seek help. Curriculum for Grades 4-8 include learning to develop skills needed to stay safe (in person and online), and how to help themselves or others. Students also learn about the impact of sexually explicit media, including pornography. In every grade, students learn about consent, healthy relationships, online safety, building foundational skills that support safe, healthy relationships throughout their lives.

School aged children and youth from Mississaugas of Scugog Island First Nation also receive this education, given they attend the nearest provincially funded school(s) through a protocol with the Durham District School Board. Federally funded First Nation schools do not fall under the policy framework of the Ontario Ministry of Education.

Prevention efforts must acknowledge the social and economic inequalities that increase vulner-

ability to trafficking for marginalized youth. In recognizing that involvement in the child welfare system is the greatest risk factor for trafficking, it is important to also ensure prevention efforts focus on areas where intersections and highest risk factors occur (4). For this reason, workshops are also provided to youth in care, as well as to caregivers, foster placement caregivers, group home staff and child protection staff who support youth involved in the child protection system.

Between 2018-2025 more than 75,000 youth from across Ontario have received prevention education from VSDR. VSDR provides school-based education for youth in the Region year round. Additionally, the Annual Youth Symposium run by VSDR since 2019 expanded in 2024 to ensure access for youth from across all Regions and First Nations in the province. In the two weeks following the event each year referrals to VSDR for youth under the age of 16 usually double. In 2024 half of those referrals were for youth in the grooming and luring stages indicating effectiveness of education in achieving early intervention and prevention.

In 2024 VSDR piloted the Teen IRL Empowerment and Prevention Program in Durham Region, recognizing the need for prevention education to engage youth in ways that appealed to them and kept pace with changing technology, particularly platforms and devices used by youth. The immersive learning program leverages an internationally multi-award winning virtual reality game that uses scenario based learning to teach youth about important topics like human trafficking, intimate image distribution, toxic masculinity, and more. Digital games, group activities, board games and interactive social media mock boards teach youth about online safety, consent, sextortion, gang recruitment and dating violence using age appropriate language and diverse characters that reflect the varying life experiences and intersectionality of the youth who attend the program. Immersive learning has been shown to increase knowledge retention, comprehension, empathy and engagement for youth participants in addition to presenting a more successful and inclusive

learning experience for youth with special needs (ie. Autism, ADHD) who are at a higher risk of trafficking. 94% of the youth who participated in the program expressed greater learning as a result of the methods used. VSDR intends to expand the Teen IRL program with hopes of providing access to other service providers and schools across the province.

COMMUNITY, SERVICE PROVIDER AND CAREGIVER EDUCATION

The devastating impact of trafficking extends far beyond its victims, affecting families, schools, communities, and society at large. Prevention is a crucial component in the fight against human trafficking, so to be effective, it requires a collective, multidisciplinary effort. Teachers, parents, community members, healthcare workers, and other stakeholders all play vital roles in identifying risks, protecting vulnerable individuals, and promoting awareness.

Prevention programming in Durham includes free monthly virtual facilitator-led training for caregivers, a free online interactive e-course geared towards caregivers and service providers, tailored in person trainings for specific sectors such as judges, hotel workers, police, healthcare workers, education staff etc. and a free 3-module e-course for healthcare providers. Training programs were created by VSDR in partnership with a diverse Survivor Advisory panel, A Survivor leader with clinical training, caregivers of those with lived experience and those from various sectors with expertise in the areas the training was being developed for. Durham Region has experienced a significant increase in reporting from schools, healthcare workers, caregivers and other service providers since the training programs began in 2018. Additional information about training programs can be found at <https://www.victimservicesdurham.ca/training-resources>

NEWCOMERS

Outreach and education on human trafficking within newcomer populations to Canada is crucial for raising awareness and preventing exploitation. Many newcomers, including refugees and immigrants, may be unfamiliar with the risks and signs of human trafficking, making them particularly vulnerable to exploitation. By providing targeted education and resources, these individuals can be better equipped to recognize potential threats and seek help if needed. Additionally, outreach efforts can empower community leaders and support organizations to identify at-risk individuals and offer the necessary services.

VSDR partnered with Community Development Council of Durham and the Newcomer Centre to deliver education workshops for newcomers and service providers that support newcomers. In 2024 VSDR also partnered with the Region of Durham to provide education and support to a collective of more than 200 refugees in Durham. Building trust within these communities through culturally sensitive and accessible information fosters a safer environment and helps newcomers adjust while reducing the likelihood of falling victim to human trafficking.

AWARENESS EVENTS

Members of the Coalition frequently host and attend awareness raising events or speak at conferences and community events to provide education to all members of the public. The Coalition hosts events annually on Human Trafficking Awareness Day. Members of VSDR and DRPS have also spearheaded awareness campaigns such as truck wraps, bus wraps, information booths located at shopping centers, and high profile posters located at train and bus stations. Various media and social media campaigns have been held to further highlight trends in the region: www.victimservicesdurham.ca/blog/posts



ASSESSMENT & INTERVENTION

COLLABORATION AS A KEY INTERVENTION STRATEGY

The Durham Region Human Trafficking Coalition (www.StopHT.com), chaired by VSDR, is a Survivor led collaboration consisting of various multi-sectoral agencies that work collectively to support Survivors of Human Trafficking. The coalition was formed as a result of a shared understanding that it is fundamentally unfair to ask a Survivor to exit their trafficking situation unless service providers are able to meet all of their basic needs. Traffickers use vulnerabilities to exploit the vulnerabilities of their victims, who may then struggle to find other ways to meet their needs. Given one agency alone is often unable to meet all of a Survivor's needs, it is essential to have collaboration from multiple partners to ensure Survivors' needs are met. Coalition members work together to ensure wrap around supports are available, and operate under a shared understanding of common values and guiding principles, captured through the coalition Terms of Reference. The coalition aims to ensure Survivors' needs are met regardless of where they are or how they enter the system.

Coalition members meet every other month to discuss program changes, new supports, or to develop joint advocacy strategies aimed at enhancing supports for survivors or addressing needed process or policy changes. One key aspect of meetings is confidential case con-

ferences whereby complex cases are reviewed using non-identifying information in order to uncover unfamiliar resources, pool resources or discuss strategies for accessing resources by using the strengths of a multi-agency approach. Due to limited resources across multiple sectors, often this may lead to a safety plan that entails pooling of resources and supports from multiple partners. The meetings also serve as an opportunity to identify gaps or barriers experienced by Survivors as well as discuss ideas on how to mitigate such barriers through support and collective advocacy of the coalition.

It is critical that partner agencies of the coalition share common goals and approaches to supporting Survivors that is trauma-informed, Anti-oppressive and ensures consistency and safety in the approach to supporting Survivors. Coalition members have on occasion expressed concern regarding agencies who may engage in work to support Survivors without having these values, or who may not have the necessary training and expertise to support Survivors safely. For this reason, the coalition opted to create a Terms of Reference and membership application process to verify that agencies joining and are endorsed by the coalition have an established and trusted reputation in the Region prior to joining. This ensures that Survivors are only referred by coalition members to trusted agencies with a demonstrated ability to appropriately and safe-

ly respond to trafficking situations. Applicants must have two references from the coalition and the vote of 50+1 existing member agencies in order to join. The application, active member list and Terms of Reference can be located at www.StopHT.com. The member list is available online so that outside agencies can use this as a resource to confirm they are referring survivors to trusted service providers.

JOINT SERVICE DELIVERY PROTOCOLS

In Durham Region, joint protocols have allowed agencies to deliver services in a more cohesive and consistent manner and ensure Survivors know what to expect when being referred to a particular agency. The use of joint protocols has also aligned with the harm reduction values of the coalition by minimizing differences in approach and even the number of times a Survivor may need to tell their story. It has also reduced frustration between service providers attempting to understand eligibility criteria for each other's services and ensure role clarification. The following protocols are not an exhaustive list of those existing in Durham but provide a sample of some of the unique partnerships and associated protocols that have enhanced streamlining of services and enhanced collaboration within the region:

Durham Children's Aid Society (DCAS) and Dnaagdawenmag Binnoojiiyag Child and Family Services have a joint protocol as well as a protocol with Durham Regional Police for cases relating to human trafficking. This protocol now includes CARE Units as well as Victim Services of Durham Region. DCAS and Dnaagdawenmag Binnoojiiyag have information sharing agreements in place with DRPS in order to ensure the immediate safety of children and youth at risk of or who are being trafficked.

SPECIALIZED SERVICE DELIVERY AND FLEXIBLE INTAKE

Several service agencies have modified their intake processes for Survivors of human trafficking. The purpose of this is to minimize the barriers that can make it difficult for Survivors of human trafficking to access services, prevent Survivors from falling through the cracks and address challenges that are likely to deter Survivors from seeking support.

The HALT Model [Helping Alliance with Law Enforcement to End Trafficking] is a component of the broader Human Trafficking Model in Durham.

It was developed in 2018 by Durham Regional Police Service (DRPS) in partnership with Victim Services of Durham Region (VSDR) using a Survivor-led/Survivor-informed approach to respond to suspected cases of trafficking. VSDR employed a Survivor of Human Trafficking who was also clinically trained in crisis intervention and was embedded within the police HT unit. The Survivor worked with police to engage Survivors using a trauma-informed approach that did not pressure Survivors to speak to or provide a statement to police. Cross sectoral training and knowledge exchange led to greater collaboration, consistency in approach and a shift to trauma-informed policing that created enhanced trust and relationship-building with Survivors. The Model, which is now internationally recognized has led to referral increases by more than 7 times from 2018–2023, enhanced trust of police, an increase in statements and convictions.

All suspected cases of Human Trafficking referred to DRPS are also referred to VSDR. Prior to implementation of the HALT model, VSDR had supported 60 Survivors of HT in 2018. By comparison, this number grew to 443 Survivors supported by VSDR in 2023. A critical component of the model is to ensure that Survivors have the choice to refuse support, or work solely with VSDR without pressure to be involved with police. Information is only shared with police with the Survivor's consent or if required by law (ie. Duty to report legislation). VSDR uses an informal intake process that follows the Survivor's lead, meets the Survivor where they are at and focuses on trust and relationship building as a key priority over obtaining information or a disclosure. As a result of this approach and the Model's success, it has been expanded into multiple other units at Durham Regional Police including the Intimate Partner Violence Unit, Special Victims Unit, and Missing Person Unit. The Model has also been replicated in multiple other jurisdictions across the province. The HALT Model Evaluation and Initial report can be viewed at www.victimservicesdurham.ca/reports

Ontario Works Income and Employment Supports has developed an internal Human Trafficking Response Team to ensure all staff working with HT Survivors have received specialized training and are aware of the internal processes that have been created to better support survivors and remove barriers. OW staff support with applications for special priority status for social housing, will waive the requirement for Survivors

to present identification in order to be eligible for income support, and display significant flexibility in their approach. As an example, OW staff from the HT Response Team are aware of the added barriers Survivors face in consistently attending scheduled appointments so will allow for greater flexibility in terms of location, timing, and attendance and will often show lenience in this regard rather than stipulating income is dependent on meeting criteria that is unrealistic given their experiences of complex trauma. They also understand the challenges Survivors face when attempting to find employment or housing, which can often be the result of poor credit scores or lack of employment history, both often a result of their trafficking situation. When police or VSDR reach out to OW staff, they are able to successfully connect a Survivor with income support usually within a matter of hours, rather than months, as they recognize the imminent safety of survivors and their ability to exit a trafficking situation is largely dependent upon timely access to supports to meet their basic needs. In Durham, OW and VSDR are often the first point of contact for survivors, with both agencies making warm referrals to each other and working collaboratively on securing resources such as gift cards for food, clothing or harm reduction supplies. VSDR will often refer to OW for income support for Survivors and OW staff often refer to VSDR to access more intensive case management, trauma counselling and access to other resource such as funds for transportation or hotel, through the provincial Victim Quick Response Program. Both support with securing shelter accommodation and applying for special priority housing.

Domestic Violence and Sexual Assault Care Team (DVSACC) - Through a partnership with Lakeridge Health Corporation, VSDR was able to advocate for a process change whereby Survivors of trafficking referred by VSDR can experience fast-tracked and direct support through the hospital DVSACC with specialized nurses who can provide sexual health services, rather than having to access the support through the typical Emergency Department (ED) process. The process allows Survivors to bypass the ED, are able to avoid lengthy ED wait times and repeat discussions with multiple ED staff that are likely to deter them from seeking support through DVSACC. The process allows for a more trauma-informed approach for Survivors. As mentioned previously, a subsequent partnership with Lakeridge Health allowed VSDR to embed a HSSW in

the hospital to further reduce barriers and timelines in connecting Survivors to community based organizations.

Victim Quick Response Program (VQRP+) – In Ontario, the Ministry of Children, Community and Social Services offers a provincial funding program, accessed through Victim Services agencies funded to deliver the Victim Crisis Assistance Ontario program, such as VSDR. The fund provides immediate practical support for eligible Survivors of crime, including Human Trafficking Survivors. The fund will often cover expenses related to the need for safe accommodation (ie. Hotel), food, clothing, transportation, counselling, residential substance abuse treatment and other items. The HALT Model and positioning of VSDR staff within the DRPS HT Unit allows for expedited and immediate access to the VQRP program for Survivors. It ensures that immediate support is available on site at the time of initial intervention or when Survivors need it. While the VQRP program is designed to provide only short term crisis support and should be used as a last resort, funds available through this program are essential to ensuring safety for Survivors when shelters are full, other services are not available after hours, or Survivors are reluctant to engage other service providers.

Counselling Supports – Family Services Durham and Catholic Family Services Durham (CFSD) provide counselling services for Survivors. Fees are assessed according to a sliding fee scale and are often reduced or waived entirely for clients referred from VSDR and waived for clients on OW. Durham Rape Crisis Centre also provides counselling support using a dedicated staff for HT cases. Counselling support is also available through the VQRP+ program accessed by VSDR.

SPECIALIZED STAFF

Coalition member agencies ensure training is provided to staff at their respective agencies who are likely to intersect with Survivors. Coalition members utilize only training programs that are recognized by the coalition as being trauma-informed and have a Survivor-led component. In Durham Region, Victim Services of Durham Region provides this training at free of charge to any Durham-based organization. Member agencies can also participate in a provincial training offered by the Ministry of Children, Community and Social Services – a program that the Survivor leader from VSDR

supports (Sexually Exploited Youth Risk Assessment TOOL – SEY).

While all coalition partner agencies have ensured human trafficking training for staff likely to intersect with survivors, some have also designated certain staff to engage solely with Survivors of human trafficking. This has enabled some agencies to have staff that are more highly attuned to the nuances and barriers faced directly by HT Survivors, and greater specialization of those offering support. For staff working directly with HT Survivors on a daily basis, they are able to also gain a greater understanding and awareness of trends in recruitment strategies and gaps in services in order to adjust intervention and advocacy as required. It has also enhanced the relationships between dedicated HT staff at partner agencies supporting increased collaboration. Durham Regional Police, Victim Services, Ontario Works and Child Welfare partners represent some of the partner agencies with specialized human trafficking staff. Durham Rape Crisis Centre (DRCC) also has a dedicated staff to provide counselling support specifically to Survivors of Human Trafficking.

ONTARIO'S HUMAN TRAFFICKING LEGAL SUPPORT PROGRAM

This program, which was created as part of Ontario's Strategy to combat Human Trafficking, provides free legal assistance to survivors. Prior to this program, survivors experienced numerous barriers to justice as a result of lack of consistent and trauma-informed legal support, challenges navigating the criminal justice system, not understanding their rights, and dealing with justice sector professionals who have little or no training on human trafficking or the unique barriers faced by survivors as a result of complex trauma. Securing protection orders was also particularly challenging, leaving numerous survivors at risk. The program utilizes a Crown attorney who is trained in Human Trafficking and works collaboratively with the community service providers who support survivors. The program has been successful in obtaining unprecedented protection orders for Survivors through advocacy by the Crown Attorney in ensuring judges understanding the special circumstances and challenges relevant to HT cases. In 2024 the program was expanded to include a second Crown Attorney to deal with the influx of cases and capacity challenges the program was experiencing given Ontario was utilizing one Crown Attorney to respond to cases for the entire province.



ADVOCACY

Given the trauma that Survivors of human trafficking have experienced, there's a recognition that it's important to advocate for critical supports (e.g. financial supports, housing, counselling). A key reason this is important is because there are many policies and procedures which inadvertently pose as systemic barriers to accessing services. Additionally, many Survivors may not be at a stage yet of fully realizing that they were trafficked, let alone being able to recollect their experiences, and understand and articulate their needs. All of this can impact their ability to receive appropriate services. Therefore, advocacy on behalf of clients given where they're at in terms of their psychological and emotional well-being, helps to ensure a timelier provision of appropriate interventions and change practices that are seen as systemic barriers.

For Survivors in Durham Region, VSDR and OW are often the first point of contact, with both agencies making warm referrals to the other within the first few meetings with clients. Typically, VSDR HT counsellors will submit an application to OW for income services if appropriate, while OW HT Response Team workers will refer to VSDR for clients eligible for VQRP+ funding and access to more intensive, trauma-related case management. During a client's short-term stay at a hotel, HT

counsellors at VSDR and caseworkers at OW typically work on securing further short-term emergency housing in a shelter. Both agencies manage housing paperwork and can submit a Special Priority Program application to Durham Region Housing Services, which is important for accessing longer-term housing benefits. The Special Priority Program recognizes the unique challenges, complex trauma and enhanced barriers faced by Human Trafficking Survivors.

VSDR, as a representative of the coalition has been active on the political and policy levels to advocate for legislative and policy change to ensure better support for Survivors. For example, VSDR has represented the coalition at a National Survivor Roundtable, international conferences, and was instrumental in highlighting needed changes to the VQRP+ program. VSDR has spoken at the House of Commons and in the Senate to advocate for member bills aimed at enhancing victim's rights. Coalition members regularly engage elected officials to address systemic barriers, funding gaps and highlight challenges experienced by HT Survivors. Advocacy is also aimed at mandatory training and education for key sectors such as healthcare, education, and the criminal justice sector (police, judges, crown attorneys, etc).

OPPORTUNITIES AND CONTINUED CHALLENGES

CHILD PROTECTION RESPONSE

While child welfare organizations in Durham have engaged in agency-wide training on human trafficking, it would be highly beneficial to have provincially mandated human trafficking training for all CAS and child wellbeing agency workers, specialized human trafficking caseworkers in every office across the province. Additionally, expanding the CARE Units province-wide would enhance collaboration between key crisis response agencies and improve victim identification, thereby expediting engagement with survivors.

To this end, VSDR and DCAS as well as Dnaagdawenmag Binnoojiiyag Child and Family Services management are actively working to train CAS and child wellbeing staff in trauma-informed best practices related to human trafficking. DCAS and Dnaagdawenmag Binnoojiiyag Child and Family Services and other Children's Aid Societies in Ontario are currently collaborating with the Ministry of Community and Social Services, PATCO and ANCFSAO to implement the changes to the Eligibility Spectrum and standards that include human trafficking.

Moreover, through coalitions and partnering agencies are partnering with Indigenous Child and Family wellbeing agency, Dnaagdawenmag Binnoojiiyag Child & Family Services to provide culturally centered supports specifically tailored for Indigenous communities. This initiative aims to ensure that Indigenous survivors receive care that respects and integrates their cultural heritage and practices as well as their inherent rights, fostering a more inclusive and effective support system.

HEALTHCARE

The healthcare needs of trafficking Survivors are extremely complex and wide-ranging. Trafficking

Survivors are extremely unlikely to self-identify in healthcare settings for a number of reasons including fear for their own safety and the safety of others. Systemic discrimination and the legacy of harm inflicted on Indigenous and gender diverse individuals by the Canadian Healthcare system may also contribute to survivors' distrust in healthcare providers and/or their willingness to disclose trafficking. Many will not identify as having been trafficked given internal and external stigma, and others will not identify with this as they are too deeply affected by trauma. Additionally, trafficking is usually not the primary source of complaint for Survivors who present in hospitals. Rather, they may present to Emergency Departments to address sexual and physical trauma, sexual and reproductive health concerns, substance use, mental health or a myriad of other health concerns, often exacerbated by trauma.

While substantial progress has been made in collaborating with healthcare partners in the Region, barriers to identification and consistent training of healthcare staff remain a challenge. Healthcare partners have experienced significant challenges as a result of the COVID-19 pandemic, which have made progress in addressing these issues even more challenging. Although healthcare training materials have been created in an attempt to address the training and identification gaps, a robust healthcare response that emphasizes the need for mandatory training and a system-wide commitment to addressing the gaps through policy and protocol implementation are required.

HT-APPROPRIATE HOUSING PROTOCOLS

Emergency Shelters: VQRP+ provides funding for emergency shelter standards however they are not necessarily suitable for supporting human traffick-

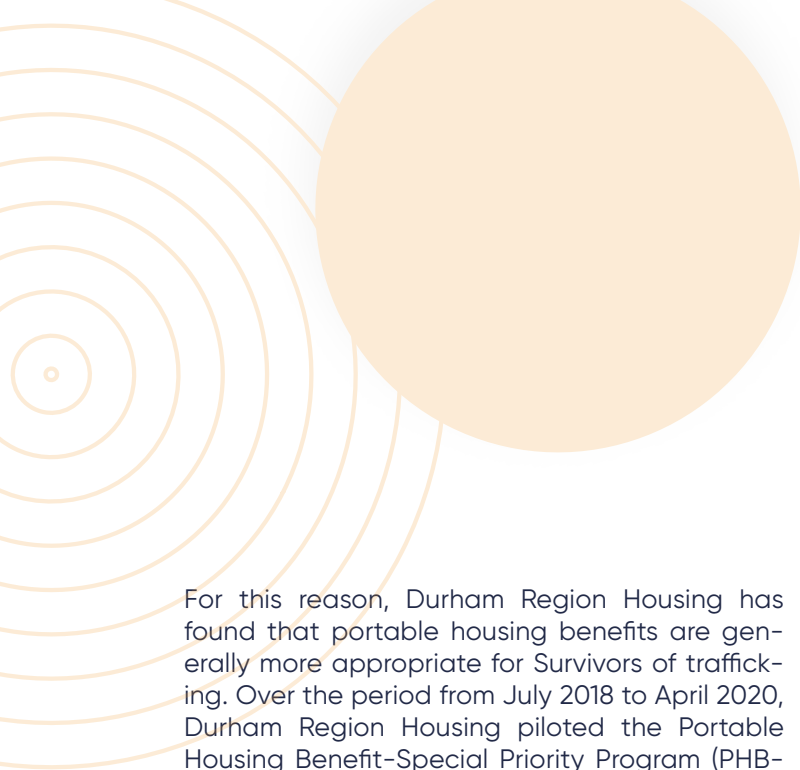
ing Survivors. This funding is approved to provide accommodations in hotels or motels, however this is often where Survivors were trafficked and therefore, these settings can be re-traumatizing. Additionally, the period after a Survivor's three to six month stays in short-term shelter and prior to approval for longer-term housing, represents a significant gap in the model. It is a period during which Survivors are vulnerable to becoming re-trafficked or become more vulnerable to survival sex work in order to meet their basic needs.

While Durham Region has a number of Violence Against Women Shelters and dedicated shelters for other unsheltered individuals, the traditional shelter system experiences challenges in meeting the unique needs of HT Survivors. Members of the Coalition have consistently voiced challenges with securing space for HT Survivors at shelter. Shelter staff are not always trained or educated on the complex needs of HT Survivors or how to address trauma responses associated with complex trauma. Survivors often struggle to meet rules and regulations within the shelter environment that do not align with the unique needs of those who have been trafficked (ie. Contributing to chore schedules, meal prep, or following set routines and curfews). Survivors who engage in substance use often have difficulty within shelters where they may be expected to remain clean or their stay is jeopardized if they appear to be under the influence of substances. While Emergency Shelters are an essential service for vulnerable individuals, specialized or dedicated shelter environments that are focus entirely on meeting the needs of human trafficking Survivors may help to address these challenges in the region. The Coalition has been involved in multi-systems advocacy to highlight the need for a dedicated Human Trafficking shelter program in the region.

Multi-Stage Accommodation for Youth: Where traditional out of home placements cannot meet the complex needs of Survivors, finding safe accommodation can be very difficult for youth under the age of 16. Consent is required from a legal guardian for shelter admission and those under the age of 16 cannot be placed alone in a hotel. In January 2022, with funding from the provincial government and with the endorsements of multiple partners, including the Durham Coalition, the Murray McKinnon Foundation opened a Healing Home for persons, under 18, who identify as female, and are seeking safety from sexual exploitation. It is a voluntary, rural-based specialized residence that is survivor informed, healing centered, and anti-oppressive with a focus on harm-reduction principles. Referrals can come from anyone and youth do not have to be CAS involved. The Healing Home offers individualized programming to children/youth exiting trafficking situations in order to fill this gap within the region. A great deal of advocacy, research and planning prefaced the development of the Lavender Hill program.

DURHAM REGION HOUSING – SPECIAL PRIORITY:

Applications for long-term housing are made to the Durham Housing's Special Priority Program (SPP), which is a status made in consideration to Survivors of human trafficking, those fleeing someone who is abusing them (or their children), and those recently living with their abusers, including immigrants who experience abuse from their sponsors. The SPP grants eligible applicants expedited status on the Durham Rent-Geared-to-Income (RGI) waitlist, however the wait may be between one to five years before an RGI unit becomes available. Additionally, there have been concerns over safety issues, including instances where a client's trafficker may also live in the same social housing units.



For this reason, Durham Region Housing has found that portable housing benefits are generally more appropriate for Survivors of trafficking. Over the period from July 2018 to April 2020, Durham Region Housing piloted the Portable Housing Benefit–Special Priority Program (PHB–SPP). The PHB–SPP was a monthly benefit administered by the Province of Ontario designed to help Survivors of domestic violence and human trafficking bridge the gap between affordable rent and the average market rent. This benefit proved to be very successful. The PHB–SPP has since been replaced by the Canadian–Ontario Housing Benefit (COHB) however for this benefit, funding is not limited to those on the SPP waitlist due to human trafficking. While the PHB–SPP program did not suit all clients, this funding allowed approximately 300 HT Survivors in 2019 to relocate to find housing away from their traffickers and abusers.

HT-SPECIFIC MENTAL HEALTH & SUBSTANCE DEPENDENT TREATMENT

Survivors do not always qualify for substance use treatment because they require acute mental health stabilization prior to being accepted into a rehabilitation program. Despite this, Survivors often experience significant challenges in accessing acute mental health care, and even in situations where they are not stable enough to attend treatment, they may not meet the threshold for admission to hospital where they can stabilize. They are also often excluded from community mental health treatment because of substance use-related issues, and they experience increased barriers to stabilizing while remaining in the community due to safety issues, risk of returning to trafficking, inability to access shelter/safe accommodation – all basic needs or risks that must be addressed in order for them to focus on stabilizing. Even in instances where a client is able to access treatment, VQRP+ available funding can be quickly depleted if individuals are

unable to remain in rehabilitation during their first attempt. Given substance use recovery can often take multiple attempts to achieve sobriety/abstinence, the support available for Survivors of HT is not always practical in light of these challenges.

Since human trafficking is frequently not identified in hospital settings, discharge from hospital tends to occur without support or knowledge of the ED Social Worker. This can lead to HT Survivors remaining without needed supports, or being linked with critical mental health and substance abuse services. Additionally, where substance abuse concerns may be known, but trafficking has not been identified, connecting Survivors to substance abuse supports without fully understanding the barriers they face as a result of trafficking will often lead to unsuccessful outcomes or an inability by Survivors to follow through.

Addiction and mental health services are not tailored to reflect a needs-first model that reflects the unique presentation and circumstances of HT Survivors. Specialized supports that appreciate the unique barriers and complex trauma experienced by HT Survivors is required in order to address these challenges.

SPECIALIZED SEXUAL HEALTH CLINIC

The local DVSACC team located in the Emergency Department provides sexual health services and acute support to victims of sexual violence, including Survivors of HT. In the past, to be seen at DVSACC, Survivors needed to first go through the triage system in the Emergency Department, which created barriers for Survivors who would have to tell their story to multiple individuals, and would often experience lengthy wait times. While VSDR and Lakeridge Health worked in partnership to address some of the barriers to implement a patient registration process whereby Survivors can bypass the Emergency Department, some Survivors are still reluctant to attend hospital to seek support. As seen in the outcomes from the Rise Up report, 88% of Survivors in Durham who participated in the report recounted a negative experience at hospital and an unwillingness to return or ask for help from healthcare staff. Durham does have a Sexual Health Clinic but services available are not tailored to support the specific needs of trafficking Survivors. The Coalition continues to engage with local service providers, such as Durham Community Health Centre to explore service options that may address the need for longer-term supports to follow-up with

physical issues such as infection or physical trauma rehabilitation. Such a clinic could also support substance use and mental health treatment adherence or sexual health education programs that appreciate and understand the unique challenges experienced by Survivors of HT.

LEGAL SUPPORT

While this is not specific to Durham Region, there is a notable lack of HT-specific legal support available to Survivors of HT in Ontario. Many Crown attorneys, publicly funded legal aid attorneys, private sector lawyers, judges, and other criminal sector staff such as probation officers lack training and understand of human trafficking. While the Ministry of Attorney General does now have two Crown Attorneys dedicated to support Survivors of HT in cases pertaining to their victimization, Survivors often face criminal charges in relation to forced criminality that are dealt with separately without the support of these Crowns.

It is not uncommon for Survivors to be charged with trespassing, loitering, assault, or face more serious concurrent charges such as recruitment of others for human trafficking, drug-related offenses or firearms, often forced on them by their traffickers. Without an understanding of trafficking and coercion tactics used by traffickers, even defense attorneys working on behalf of victims may be ill equipped to appropriately and successfully advocate on behalf of Survivors. In some situations where a Survivor is working with VSDR, DRPS or another service providers, agency staff have been able to support with advocacy on behalf of the Survivor. However, mandatory training on human trafficking for all justice sector staff would help to reduce barriers and challenges faced by Survivors and ensure those tasked with supporting, prosecuting, defending or judging such cases has the expertise and understanding of human trafficking to do so.

AN INTERSECTIONAL APPROACH TO SERVICE PROVISION

Gender Diverse people refers to those who identify as 2SLGBTQQIA+. Gender diverse people face specific barriers relating to human trafficking, often driven by discrimination, intolerance and isolation, which impact their ability to access needed supports. Gender diverse people from racially marginalized communities often experience even greater challenges and vulnerabilities. For example, while Indigenous gender diverse people were a treasured part of their communities prior to colonial contact, homophobia and

transphobia were generated through colonialism and as a result, forced many individuals from their communities leaving them vulnerable to being unsheltered, and/or exploited.

A commitment to provide anti-racist, anti-oppressive, and trauma-informed services must entail system wide change that is culturally responsive, gender inclusive and demonstrative of an understanding of the intersections with human trafficking. This must include multiple service providers and agencies working at both the grassroots and federal levels to address systemic factors that perpetuate human trafficking and systemic inequality. While Durham Region Coalition members state their shared commitment to improve outcomes for marginalized communities, substantial work is required to address systemic inequities that persist across multiple sectors. All community partners must take action to promote diversity, equity and inclusion in their hiring practices, workplace policies and procedures, and through service provision.

Extensive and ongoing training of staff in Anti-racist, Anti-oppressive and trauma responsive practice is required across the sector to improve awareness, address discriminatory practices, enhance accessibility and inclusiveness, and ensure connections to culturally appropriate and gender-inclusive services for survivors. Additionally, more work is needed to address barriers that exist for those with accessibility challenges, such as the need for services and supports to include resources in ASL, a variety of languages, and to support the neurodiverse needs of the individuals who require support.

Systems with known histories of harm to marginalized communities must demonstrate awareness of and sensitivity to the impact of these harms, and how it may influence survivors' experiences today.

Survivors must have access to both cultural and spiritual supports for healing, as well as mainstream services that are gender inclusive, accessible and use an intersectional and equity-based approach.

Where gaps to appropriate services exist, extensive and collective advocacy is required from all agencies intersecting with survivors so that improved funding for those services is prioritized. Increased engagement and ally-ship with diverse populations and culturally diverse service providers is essential in order to address the root causes of systemic inequality that lead to the disproportionate representation of survivors from marginalized communities.



EVALUATION

Formal evaluation of the Durham Region Human Trafficking Model is needed to better understand the service capacity and efficacy of agencies supporting Survivors in Durham Region. While evaluations on various aspects of the model have been completed, additional evaluation entailing strong data collection and analysis could support with better identification of service gaps, and strategic program development aimed at addressing identified gaps.

The Model should be seen as a collaborative, region-wide intervention aimed at reducing harm due to trafficking. A formal evaluation of such a model should systematically assess activities and tools from all components of the model and consider cross-sectoral implications.

MEANINGFUL DATA COLLECTION AND ANALYSIS

VSDR partnered with researchers at Ontario Tech University to document the impact of the Covid-19 pandemic on Survivors of domestic sex trafficking in Durham Region in 2021, conducted the Rise Up Healthcare Research project from 2020–2024 and partnered with Ally Global and Queens University 2024–2025 to conduct an evaluation of the HALT Model. However, additional research and data analysis is required to build a knowledge base to support promising practices across the sector. It is critical that research is Survivor informed and uses an intersectional approach that considers the need for methods that consider data sovereignty and ethical considerations as they relate to Indigenous communities and diverse populations.

Evaluations of the HT Model would require significant investment in data collection infrastructure including database software and/or standardized data collection across agencies on the coalition. Survivor/client feedback also needs to be prioritized to reflect first-hand experiences of service delivery within the Durham Region HT Model.

An important first step is to implement ongoing and standardized processes to collect simple

information such as the number of cases per period, how clients are entering the model, where clients are being referred, the number of times services are accessed and the average length of time between a client's first occasion of service to their last. Other pertinent information may relate to the age, gender and race/ethnicity of an organizations' clients. This type of information is important to measure service access trends and the success of intervention and prevention programs in engaging diverse client populations.

REGIONAL OUTCOMES MEASUREMENT

Researchers may play a role in evaluating the efficacy of programs and understanding best practices. However, the extent to which they are able to capture outcomes is limited as there are many ethical considerations and barriers to meaningful engagement post intervention. For example, some clients may have long lapses in service, some are at risk of becoming re-trafficked, and some could be re-traumatized by participating in outcomes measuring if careful consideration is not used. Outcomes measures should ensure representation and feedback is provided by survivors from diverse backgrounds in order to evaluate efficacy of services on a broader scale, and identify barriers or gaps in service for marginalized populations.

One advantage of measuring Survivor outcomes is better understanding the cost of trafficking to the region. The Canadian Women's Foundation estimated a cost of \$552,964 of pain and suffering per trafficked person, and \$205,739 estimated value of lost earning and personal costs per trafficked girl. These estimates further categorize costs into third party costs to society. These include medical costs (emergency room; ambulance; hospital stay; long-term medical care; therapy), justice system costs, social support (welfare; shelter; housing), lost taxes and intergenerational costs (child mental health, substance use etc.) By understanding these figures in a regional context, it can inform a strong case for committed funding towards prevention of human trafficking, and identification, assessment and support for Survivors of human trafficking.

DURHAM HUMAN TRAFFICKING COALITION

The following are the organizations that are currently active members of the Durham Human Trafficking Coalition:

Victim Services Durham Region

Region of Durham

Bethesda House

Catholic Family Services Durham & Safety Network Durham

Durham Children's Aid Society

Dnaagdawenmag Binnoojiiyag Child and Family Services

Lakeridge Health

Durham Catholic District School Board

Durham District School Board

Durham Family Court Clinic

Durham Rape Crisis Centre Oshawa

Durham Regional Police

Durham Youth Justice Services – Youth Justice Division, MCCSS

Durham Youth Services

Find help/211 Central

Herizon House

Mississaugas of Scugog Island First Nation

Murray McKinnon Foundation

Ontario Provincial Police – Durham

Ontario Provincial Police – Peterborough

Victim Services of Peterborough and Northumberland

Victim Witness Assistance Program

Ministry of Attorney General – Human Trafficking Legal Support Program