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## “Labor Trafficking in Portugal: Victims Perceptions of Formal Support, Post-Victimization and Impact”

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### ABSTRACT

This study aims to understand, through victims' experiences, the impact and subsequent help-seeking and support process. The data was collected in institutional settings, through a semi-structured interview, from nine adult sheltered victims of labor exploitation of both sexes – 2 females and 7 males, aged between 42–67 years ( $M = 56.67$ ;  $SD = 8.411$ ). Thematic analysis was used, and three main themes emerged: formal support system, post-victimization and impact and traumas during formal support. The support provided to the victim was portrayed as effective and adequate; being able to meet the most basic and immediate needs. The victims trusted the police and the governmental institutions and were able to collaborate with the courts. The implications regarding the help-seeking system and public policy are discussed.

### KEYWORDS

Human trafficking; post-victimization; help-seeking; support; qualitative

Human Trafficking (HT) has been widely considered one of the most severe forms of violence against any human being. Given that HT situations can have a combination of various types of violence, with high degrees of severity that tend to co-occur and repeat themselves over time, they can end up presenting a high potential for developing multiple physical, psychological and behavioral symptoms that severely affect daily functioning and the well-being of victims. Also, given the frequent presence of threats to survival and the precarious living conditions in which many victims live on, these effects tend to persist over time (Couto & Fernandes, 2014; Ottisova, Hemmings, Howard, Zimmerman, & Oram, 2016; Turner-Moss, Zimmerman, Howard, & Oram, 2014; Zimmerman & Kiss, 2017).

### *Legal framework*

To regulate HT, nationally and internationally, several instruments have been elaborated, approved and ratified, seeking to establish political commitments in the prevention and combat of this crime, bringing the legal systems of the

states closer together, fostering research, cooperation and monitoring, as well as the articulation of knowledge and strategies and the optimization of resources. For this work, only those developments that deserve greater international recognition will be addressed. The first international definition of THB in the United Nation (UN) was referred to in the Protocol to Punish Trafficking in Persons, Especially Woman and Children, often referred to as the Palermo Protocol, from 2000. Over the years, several directives have emerged from the European Commission to commit member States to implement legislation to combat and suppress HT. One of the most important was the Directive 2011/36/EU of the European Parliament and the Council of 5 April 2011 on preventing and combating trafficking in human beings and protecting victims: focusing on protecting human rights by implementing protection and assistance mechanisms crime prevention and repression. This community legal instrument was intended to approximate the Member States' substantive criminal law and criminal procedural rules in the fight against HT. The changes in the conception of the victims and the awareness of the diversity of exploitation forms in the Palermo Protocol led to the recent normative development in the European context on different levels (social, political, legislative and legal). In that document, HT is defined as “ *the recruitment, transportation, transfer, harboring or receptions of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs.*” (p. 6).

This definition features a list of acts (such as recruitment, transportation, and others), followed by the methods used to enforce those acts such as threat, use of force, abuse of power or a position of vulnerability. The definition also mentions the victim's vulnerable conditions, which means that s/he has no real or acceptable alternative but to submit to the abuse. Furthermore, even if the victim's consent is referred, it is legally irrelevant where any of the means have been used for exploitation. In HT, the exploitation includes, at a minimum, the exploitation of prostitution or other forms of sexual exploitation, forced labor or services (including begging, slavery or practices like slavery, servitude) or the exploitation of criminal activities, or the removal of organs.

In Portugal, the changes on this subject started in 2007, when the crime was covered by article 160º of the Portuguese Penal Code, which is part of the chapter on Crimes Against Personal Freedom, given by Law no.59/2007, of September 4. The Council Directive 2004/81/CE, of April 29, was transposed into the national framework by Law 23/2007, and concerns the access to residence permit issued to third-country national who are victims of THB

and decide to cooperate with the competent authorities. This legislative instrument also establishes that victims of HT are entitled to a reflection period with a duration between 30 to 60 days, notwithstanding whether they express or not cooperate with the competent authorities. This law has the objective of enabling the victims to recover physically and emotionally and to

make an informed decision about their options regarding possible collaboration in the criminal investigation. This period may have a minimum duration of 30 days and a maximum duration of 60 days. During this period, the victim is ensured that if s/he does not have enough resources, subsistence and access to appropriate medical treatment, psychological and legal support, and language translation, those services are available. Also, under Directive 2004/81/CE, as stated above, the victim has the right to remain in national territory, and no expulsion measures can be carried out during the reflection period. After this period, a residence permit may be granted to the victim, even if the victim is in a situation of migratory irregularity or does not fulfil the legally required conditions to access the residence permit. This concession is, in exceptional situations, depending on the need to guarantee or extend the victim's stay in national territory for criminal investigation and/or to enable them to participate in legal proceedings. The residence permit is valid for one year and renewable for equal periods (Matos & Maia, 2015). Regarding the concept of "*Human Trafficking Victim*," Portuguese legislation does not provide any specific definition, but according to law 368/2007, a victim of THB is someone to whom judicial authorities or the criminal police found evidence of the offense regarding trafficking in Persons. According to Portuguese Legislation, when applying a criminal penalty is absent in the principle of free will. With this idea in mind, HT victims can be exonerated from crimes committed under exploitation based that idea on the lack of free will and exempting the victim from criminal responsibility based on a state of necessity (Matos & Maia, 2015).

### ***Needs of the victims***

As a result of the traumatizing and complex nature of HT, the mental health issues associated with this population are frequently complex, and there is a high degree of co-morbidity of mental health diagnostics (Couto & Fernandes, 2014). Adding to this, many of these mental health problems do not present themselves until after the more immediate needs have been met – such as safety and shelter (Couto & Fernandes, 2014; Zimmerman, 2003). While the majority of research on impact has focused on the health needs of victims of sex exploitation, the victims of labor exploitation have a unique set of health risks due to the nature of their work and exploitative conditions (Arhin, 2016; Couto & Fernandes, 2014;). Those risks can be similar to the occupational hazards of type of work, but due to the dangerous and/or highly repetitive work, the health problems are often exacerbated by lack of security

measures (like protective gear, demanding work conditions), adding that to the living conditions they are forced to live in. Research carried out in this area (Couto & Fernandes, 2014; Hemmings et al., 2016; Reichert & Sylwestrak, 2013; Stanley et al., 2016; Zimmerman, 2003; Zimmerman, Hossain, Watts, & Stolz, 2011) reveals that, due to the cumulative effect of multiple traumatic episodes, trafficking situations indulge the presence of high co-morbidity rates of physical, psychological and social damages that tend to persist over time. According to (Pocock et al., 2016), the most commonly reported injuries among all males, forced laborers in common low-skilled labor sectors including fishing, agriculture and factory work, were deep cuts (61.8%) and skin injuries (36.7%), injuries for which fewer than one-quarter reported receiving medical care. Six fishermen lost body parts, none of whom received medical care. Most males (80.5%) had no or very few rest breaks. One-third (37.8%) experienced severe violence. Therefore, all these aspects are factors with implications for the therapeutic plan to delineate with these victims (Reichert & Sylwestrak, 2013; Reid, 2010).

### **Intervention**

Considering that, intervention necessarily will have to cover different dimensions and materialize in several measures (Couto & Fernandes, 2014; Hemmings et al., 2016; Reichert & Sylwestrak, 2013; Westwood et al., 2016; Zimmerman, 2003) like housing, hosting in specific structures and ensuring protection; subsistence (e. g. food, hygiene, clothing); medical care, e.g., evaluation and treatment of physical and psychiatric health problems; psychological support (evaluation and intervention in terms of emotional recovery and cognitive, behavioral and interpersonal functioning); legal support, e.g., counseling in the process of regularizing the migratory situation and/or in the context of the criminal process, in the face of their rights as a victim [a special residence permit, protection of witnesses]; social support, e.g., economic, education, possible (re)integration; cultural support, e.g., access to translation services and practice of religious services and assisted return, e.g., access to assisted return programs.

Intervention with victims of HT is likely to be developed under approaches already tested and adopted for intervention with victims of other violent crimes, such as domestic violence, rape, abduction, or torture, since, by their very nature, are sensitive cases to trauma-centered approaches (Abas et al., 2013; Couto & Fernandes 2014; Ghafoori et al., 2019).

It should also be addressed that, although HT has deep historical roots, public attention to it is recent, which means that at this stage, there are no specific intervention models tested and validated within this population (Freemire, 2017; Ghafoori et al., 2019; Villacampa & Torres, 2019). Nevertheless, and given the diversity of the effects of this type of victimization, the understanding of the scientific community has been that the intervention

should be based on a combination of different approaches and therapeutic modalities depending on the intervention phase and the type of consequences and needs identified (Borschmann et al., 2017; Couto & Fernandes, 2014; Hornor, 2015).

Thus, the contacts made with the victim should be considered as an opportunity to improve their well-being and should prioritize safety, be focused on their rights as a human being and be efficient at referral, transfer and care, which implies the existence of a well-articulated network of services and professionals (Couto & Fernandes, 2014; Dell et al., 2019; Salami et al., 2018). It is often desirable to synchronize these approaches and modalities over time (e.g., to initially adopt a crisis intervention model that is individually worked and, subsequently, a therapeutic model of a constructivist nature and developed in a group format (Couto & Fernandes, 2014; Freemire, 2017).

The strategies used in the context of intervention in crisis aim to restore the balance of the victim biopsychosocial functions, emotional stabilization and minimizing the potential of psychological trauma (Couto & Fernandes, 2014). In later stages of follow-up, strategies that address the work of deeper issues, such as medium and long-term emotional management capacity and personal identity, may be promoted (Banovic & Bjelajac, 2012; Reid, 2010). Consequently, trauma-informed care is essential for managing victims of human trafficking (Butler et al., 2011; Freemire, 2017; Hopper, 2017; Nguyen, Coverdale, & Gordon, 2017; Salami et al., 2018).

Providers at different levels of care and training stages may interact with victims and provide them with safe spaces to talk about and process their victimization details (Nguyen et al., 2017). It is essential that all service providers understand trauma and how trauma affects victims' response to services and even criminal process, and the individual task force members' response to victims (Hom & Woods, 2013; Pascual-Leone et al., 2017; Salami et al., 2018). Even if in an initial phase, cognitive-behavioral strategies are favored, aiming at restoring the balance of the biopsychosocial functions, emotional stabilization and minimizing the potential of psychological trauma (Freemire, 2017; Hemmings et al., 2016) in later stages of follow-up, strategies that address the work of more profound issues of trauma are essential (Banovic & Bjelajac, 2012; Freemire, 2017; Pascual-Leone et al., 2017; Salami et al., 2018). The victim's heritage and cultural background can also directly influence the feeling of shame and disgrace and can prevent the victim's identification and possible treatment. Also, cultural factors can influence individuals' beliefs about threats and response to danger and can play a vital role in how individuals respond to violent crimes (Fernandes et al., 2020). With this idea in mind, service providers should remember that

every culture has a different perspective and distinctive beliefs about the benefits of seeking help or different forms of assistance (Couto & Fernandes, 2014).

There are central tasks to restoring normality and the victims' sense of control over their lives and autonomy, such as: ensure the primary conditions of subsistence and security/protection of the victim; assist the victim in the processing of the memories and emotions associated with the trauma, facilitating their affective expression and validating the emotions, analyzing and reformulating their system of beliefs and personal meanings affected by the traumatic event, as well as in the execution / maintenance of behavioral changes that guarantee their survival and daily functioning, and; anticipate and prepare for the future, taking into account the need for victims in general to have control over what is about to happen, so that it is essential to be assisted in the construction of these scenarios and the resolution of concrete problems (e.g., concerning the criminal process – Matos et al., 2019). The inclusion of the victim in the decision-making process will favor a perception of self-efficacy and empowerment, in which the victim assumes the role of protagonist in the recovery process and becomes confident in the definition and implementation of an alternative project for his/her life (Bonanno, 2004; Salami et al., 2018). Psychological intervention thus assumes a fundamental role; in fact, according to Couto and Fernandes (2014), psychological support seems to be central to most, if not all HT situations, since the impact of this experience tends to be particularly severe at this level.

### *Portuguese context*

Concerned with the support provided to the victims of HT, in 2013, Portugal created the National Trafficking Victims Support and Protection Network (NTVSPN). This network aggregates 22 governmental and non-governmental organizations dispersed through the continent. This network aims to prevent, protect, and reintegrate HT victims using multidisciplinary and specialized interventions (legal, psychological and social support) and provide adequate referrals to other support services previously identified. Portugal has now four temporary shelters. The first shelter was created in 2008 for women victims and their minor children, the second created in 2013 for men victims and their children, and the third was created in 2014 for female victims and their children. The last one was created in the year 2018, specifically for minor victims.

Notwithstanding, there are few cases reported annually compared to what could be the reality. The lack of solid, reliable official and comparable data is an issue that feeds the stereotypes generated by social media (Cunha et al., 2018). Portugal registered 1427 potential victims (nationals and foreign victims) between 2010–2017, but justice

authorities only confirmed 281 (Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH], 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018).

In 2016 there were identified a total of 264 presumed victims in Portugal, which in comparison with the homologous period, there is an increase in the number of identified victims (variation of 36.8%). Most of the identified victims were male ( $n = 141$ ) for labor exploitation, with only 14 female victims, for sexual exploitation. According to the OTSH (OTSH, 2018), when we compare the year 2016 with 2017, we can see that were registered 175 suspected victims of HT in Portugal. These data corroborate Portugal's tendency to be a country not only of destination but also of transit and origin of HT (OTSH, 2015) and regardless of nationality, the purpose is for labor exploitation, about 58% (OTSH, 2018), which is why the Portuguese nationals enter these networks and are eventually exploited mainly abroad. A conclusion that is drawn is that in cases of labor exploitation, there is internal mobility within Portugal, between municipalities, according to the seasonality of agricultural products (OTSH, 2018).

In the first evaluation report on Portugal, the Group of Experts on Action against Trafficking in Human Beings [GRETA] (2013) welcomed the setting up of the legal and institutional framework for combating HT, including the adoption of national action plans against HT and the setting up of the Observatory on Trafficking in Human Beings. However, GRETA (idem) considered that increased attention should be paid to HT for labor exploitation, who was previously overlooked and that led to more identification of this exploitation in Portugal (OTSH, 2019). They also noted the adoption of a national referral system for trafficked persons but urged the authorities to ensure that, in practice, the identification of victims is dissociated from their participation in the investigation and court proceedings. From this directive, Matos et al. (2019) analyzed the criminal justice process in HT in Portugal, aiming to understand the factors associated with successful convictions. In this work, the victim took a central role in the judicial process, regarding the testimony (quality and detail), the collaboration with judicial authorities and even the impact of the exploitation was regarded to a successful conviction. These characteristics together were considered indicative of accurate and credible reports. It is necessary to ensure that



the victim can participate within the judicial process without further victimization, and only an informed approach about the victim's vulnerability and trauma can achieve that. They also underlined that front-line professionals should adopt a more proactive approach to detecting victims of HT and increasing their outreach work.

Concerned by the low number of convictions for HT in Portugal (GRETA, 2013), the authorities were called out to identify gaps in the investigation procedure and the presentation of cases in court, with a view to ensuring that HT offenses are effectively investigated and prosecuted, leading to proportionate and dissuasive sanctions. From this directive, Matos et al. (2017) studied human trafficking and criminal proceedings to access the discourses of professionals in the justice system. Another area of concern was the absence of compensation awarded to victims of HT, and GRETA (2013, 2017) urged the authorities to address this gap through improved access to legal aid and increased information to victims about their right to compensation and the procedures to follow. Correspondingly, the GRETA (2017) recognized Portugal's efforts since the last report and the improvements made but advised to increase and document the use of victim services. Another advice was to be continuing to improve identification and assistance of trafficking, providing further training and guidance to police, NGO's, social workers and the community for the identification of possible victims for different forms of exploitation. To have access to an in-depth understanding of any human experience is vital direct contact with its main actors. Knowledge of the phenomena whose nature is more hidden only makes this need more pressing. However, and as would be expected, it is challenging to access these groups, even though for different reasons. Victims are not easily identifiable and often don't mingle in the same contexts as the majority of the population, so that, as a rule, contact with these only occur after their institutional identification and subsequent exit or liberation (Reichert & Sylwestrak, 2013, Tyldum, 2010; Villacampa & Torres, 2017). However, even at this stage, many ends up not wanting to establish any contact with institutional services or even talk about that experience, and when they do, it will only be in contexts that inspire them confidence. For this set of reasons, most studies on HT do not include, in their samples, those victims or, when this is possible, access is essentially through institutional channels. As a rule, the entities are also restrictive concerning access to spaces such as shelters (Couto, 2012; Reichert & Sylwestrak, 2013). In Portugal, this scenario becomes even more complicated, given that there are only four specific structures for the support of these victims at the time of the data collection.

## **Purpose of the study**

This exploratory study aims to understand, through victims' experiences, the impact and subsequent help-seeking and support process. Specifically, we aim to expand knowledge about how trafficking victims of labor exploitation depict the support services, the security forces and the justice system.

## **Research questions**

The research questions' emphasis was to focus on the experience and identify the characteristics of the support provided to victims of HT in Portugal. Namely, the victim portrays the support services (being the social, educational, medical and legal services) and the post victimization experience. Therefore, the primary research question was, "What can be learned from the lived experiences of men and woman who successfully exited human labor trafficking exploitation?" The secondary question included:

- (1) How does the institution portrayed by the victim provide the services (social, educational, medical)?
- (2) How does the victim portray the judicial forces?
- (3) Is the victim included in the decision making of his/her intervention plan?
- (4) What are the victims plans for the future?

## **Methods**

### ***Sampling and recruitment***

For this study, a total of the 23 agencies, governmental and non-governmental and three shelters for HT victims', dispersed throughout mainland Portugal that are part of the Network for Support and Protection of Victims of Trafficking, were contacted to publicize the study with the victims. It is a convenience sample since the study does not have the pretense of representation. The inclusion criteria were: being a victim or presumed victim of HT; to be at least 18 years old, with no maximum age limit; having undergone some type of exploitation (sexual, labor, extraction of organs, illegal adoption, begging, slavery and/or exploitation of other criminal activities); having received support by the network; being able to communicate in one of these languages: Portuguese, English, Spanish or French. As clearly stated above, the institution was a safe house only for victims of human trafficking, regarding their type of exploitation. So, we know that all the people

that participated had been exposed to at least one type of exploitation. This was based on a referral process, and the victim identification was, in most cases, not self-identification. The agency that provided the support was an agency only for victims of human trafficking with a wide range of services. It was incumbent upon the institution's respective directors to inform the researcher in advance of any situation that it deems relevant, considering the inclusion criteria and participation procedures. There was no prior screening of participants by completing tests, interviews, and/or other means of diagnosis in the study.

### **Consent**

During the face-to-face interview (in Portuguese), the primary researcher thoroughly explained the proposed research, its potential benefits, and any risks to the participant. The researcher took time to allow participants to ask any questions or clarify anything that might not have been understood. Written consent to participate in the study was obtained from all participants.

### **Procedure**

#### **Confidentiality**

In the study, the biographical data requested in the sociodemographic questionnaire did not identify the participant (e. g., sex, age, country). A code was assigned (the code was the combination of the order in which the interview was performed, the sex and the age of the interviewee). The code was necessary to correspond to the same participant in the various phases of the data analysis.

Individuals that consented to be participants were interviewed individually face-to-face, in the Portuguese language. Interviews were semi-structured and were anticipated to last approximately 60 to 90 minutes. The researcher who selected the study participants did not have any prior contact or knowledge of the participants, safeguarding the possibility of coercion or undue influence for participation in the study. The data collection took place between May and November of 2017. The interviews took place in the shelters or other place provided by the shelter institution, at which point the researcher made sure to mobilize the necessary resources to stabilize possible emotional discomforts since the shelter has at their disposal service providers who are familiar with the medical and/or psychological assessment of the participant. The interviews were audio-recorded for later analysis. The recordings were used exclusively for this study.

This study was approved by the Ethics Subcommittee for Social and Human Sciences under the code SECSH 038/2016. APA ethical standards were followed in the conduct of this study alongside the fundamental principles of the intervention of WHO Ethical and Safety Recommendations for Interviewing Trafficked Woman, produced by the Health Policy Unit, London School of Hygiene & Tropical Medicine with the support from the Daphne Programme of the European Commission and the World Health Organization (Zimmerman & Watts, 2003).

### **Theoretical framework**

We frame our investigation in the context of Applied Victimology (refers to the scientific study of victimization, including the relationships between victims and offenders, investigators, courts, correction, media, and social movements –) anchored in the Critical Victimology. We are trying to analyze the social context in which issues related to victimology interwoven with questions of policy response and service delivery to victims of crime from a human rights perspective (Walklate, 2011; Wilson, 2009). We used a constructivist grounded theory (Brink et al., 2019). After each interview, codes and categories were created during analysis and helped choose the next informant, and the guide was modified to explore related topics and elaborate categories. An analysis with constant comparisons, both within an interview and between interviews, was done. Subsequently, focused coding was used in which the most significant line-by-line codes were used.

### **Analysis**

The interviews were transcribed by the first author (7 interviews) and two research collaborators (2 interviews each), educated and trained for the fact. The interviews' transcription was done accordingly with the guidelines of Azevedo et al. (2017). The transition scheme was linear, and the type of transcription was naturalized to correspond to the thorough transcription of what was said and how it was said. This type of transcriptions advocates preserving the different elements of the interview other than the verbal content (such as non-verbal language, contextual aspects, and the interaction between interviewer and interviewee – or third parties involved).

Data were coded by the first author following thematic analysis (Braun & Clarke, 2012), using the QSR International NVivo 10 Software. The interviews were analyzed based on the emerging themes, using an inclusive criterion (as each theme could be included in more than one category). An initial coding grid was used to guide the initial codings, which were later refined and added as inductive codes emerged (those inductive codes were in the theme impact: *fear and control of movements* (during support); in the theme formal support

system theme – before the complaint (*in collaboration with police*); (*lack of knowledge on criminal proceedings* – in the theme formal support system – *feelings associated* – in psychosocial support. Moreover, the theme *post victimization- plans for the future and experiential experts* were all inductive that derived from the data. The final coding grid includes core categories, subdivided by secondary and more ideographic categories. Themes are iteratively developed from the coding, and interpretative work was necessary to identify them. To ensure the validity and credibility of the results, different strategies were adopted, including a constant comparative analysis of the data and a dense description of the meanings found therein, further identified in the results section by a detailed presentation and illustration of each category excerpts of the participants' speech. Theoretical saturation was reached after seven interviews; after that, we conducted another two interviews to ensure no novelty in the data.

Additionally, an independent coder (the second author) analyzed 40% of the interviews, randomly assigned, to ensure data reliability. After independent review by a co-coder, the fidelity rate was calculated using Vala's (1986) formula:  $F = 2(C1, 2)/C1 + C2$ . The number of agreements between the codifiers was divided by the total categorizations performed by each:  $2(617)/634 + 645 = 0.96$ . The result was a fidelity rate of 0.96, which represents an excellent agreement level (Martins & Machado, 2006), allowing confidence in the results obtained. Coding discrepancies were discussed and resolved by the coders by consensus. A senior researcher (third author) audited the coding process.

## Results

### Demographics

The study sample is a clinical-forensic one; it follows that the victims come from clinical (medical support) and forensic settings (involvement with the judicial process) and are HT victims of labor exploitation. We did not aim to constitute a representative sample of the Portuguese victims (meaning that we do not want a study of representativeness of victims of Human trafficking in Portugal). We aimed to access their speeches (the way they spoke), because it allowed us to understand and access their experience as a victim and enrich HT's understanding from their idiosyncrasies more significantly. Hence, nine volunteered adult (victims of labor exploitation), all Portuguese speaker victims, sheltered victims of both sexes – (2 females and 7 males), ages between 42–67 years ( $M = 56.67$ ;  $SD = 8.411$ ), participated in this study. For more information regarding the participants, please see the study of Fernandes, Gonçalves and Matos (2021).

**Table 1.** Data of the participants.

ID	Social Support <sup>c)</sup>	Marital Status	Form of exploitation	Level of education <sup>d)</sup>	Age	Initial Identification as a victim	Social status <sup>c)</sup>	Number of children	sex	Professional situation <sup>c)</sup>	Duration of Support	Type of Trafficking	Victimization experiences <sup>d)</sup>
11	Living alone	Divorced	Labor	1° grade	57	Hetero identification	Socially integrated	2	Male	Unemployed (looking for a job)	+ than 6 months	Domestic and International	one
22		Single		2° grade	49	Self-identification	Homeless	0	Male			Domestic	More than one
23		Single		No education	63		Homeless	0	Male			Domestic and International	One
34		Married		1° grade	55	Hetero identification	Socially integrated	2	Male		Until 6 months	Domestic	One
45		Single		1° grade	42	Self-identification	Socially integrated	3	Female		+ than 6 months	Domestic	One
66		Divorced		2° grade	62	Hetero	Socially integrated	1	Female			International	one
77		Single		1° grade	64	identification	Homeless	0	Male		Until 6 months	Domestic	More than one
88		Divorced		1° grade	65		Homeless	2	Male			Domestic	More than one
99	Nuclear Family	Married		1° grade	50		Socially integrated	1	Male		+ than 6 months	Domestic	one

<sup>c)</sup>At time of recruitment<sup>a)</sup>This victimization experience refers to the fact that the participant mentioned being victim of exploitation more than once. It is merely the participant's perception of his own victimization experience.

### Theme's considerations

We need to report that the theme and respective sub-themes should not be interpreted independently. Instead, they are related and mutually dependent. To facilitate data reading, the results are presented according to the questions that guided the analysis. The themes that materialized were “*Formal support system*,” “*Post-Victimization*,” and “*Impact and Traumas During Formal Support*,” by the degree of references made by the participants.

### Formal support system

All the participants reported a range of perceptions about the formal support system. We defined *Formal* social support from professionals/public services (e.g., family physicians, nurses, and social workers). Social support is defined as a fundamental form of human interaction central to the human experience. At various times in peoples' lives, individuals either seek or provide support. Social support includes interpersonal communication and interaction, love and understanding, caring and concern, affection and companionship, financial assistance, and respect and acceptance. Social support impacts mental and physical health throughout the life span and may be especially important later in life (). We have all nine sources, with 545 references in this theme. From this theme emerged the following sub-themes: (a) Judicial system; (b) psychosocial support system; (c) Referral pathway.

**Table 2.** Formal support system: theme and sub-themes.

Theme	Sub-theme	Participants <sup>a</sup>	References <sup>b</sup>
<b>Judicial system</b>		<b>9</b>	<b>255</b>
	<i>Collaboration with the police</i>	9	130
	• Before the complaint	7	46
	• During the complain	6	45
	• After the complaint	6	25
	<i>Feelings associated</i>	8	82
	<i>(Lack of knowledge) on criminal proceedings</i>	8	43
<b>Psychosocial support</b>		<b>9</b>	<b>229</b>
	<i>Perception and effectiveness</i>	9	149
	• Type of support	9	139
	<i>Feelings Associated</i>	8	64
	<i>Duration of support</i>	8	13
<b>Referral Pathways</b>		<b>9</b>	<b>61</b>

<sup>a</sup>Number of participants who mentioned the theme and sub-theme

<sup>b</sup>Total number of references that integrated that theme and sub-theme

## Judicial system

### Collaboration with police and court

All the participants mentioned the judicial system as part of the formal support they received; 7 of them even mentioned collaborating with the police before, during and after the complaint be filled. The main reason for the victim's contact with the judicial system before the complaint was the victim's police approach. Most times, the contact with the police took place even before the participant could leave the exploitation: *"They had gone there many times, already."* (ID1). The police returned to gather evidence on exploitation, and the participant was able to report to the police what was happening: *"I told him [police officer] everything, everything that went, from beginning to end . . . and he [the police officer] says: 'all right. You wait. "And so, it was (ID4). After the authorities" initial contact, some participants remained in the exploitation until they were aided in exiting their labor trafficking situation by law enforcement. Sometimes it took almost nine months: "They [the police] one day, they went there to be with me. They met me up in the hills, where I was with the sheep and had questions and one asked: "Do you want to get out of here?" I said: I could leave today, I'm sick of it! [the police] Okay, so you're going to wait a while and we'll come later . . . we'll come and get you . . ." (ID7).*

Another way to collaborate with the police was during the criminal charge, when the victim was taken into protective custody and presented before a prosecutor to gather the testimony. Most of the participants (n = 6) mentioned that they were able to answer the questions from the prosecutor, even if they were demanding: *"It was there, the GNR [national guard] with me. The GNR took me to the police office, so I said to them: 'I don't want to go there anymore, if I go, they will beat and kill me.'" (ID3). The participants felt the need to tell their story and were not afraid to speak to the police: "That's when I confessed everything! I had to tell the truth, how it was and how it was not!" (ID3).*

Six participants reported being in court after the criminal charge, but they did not know how, or even in what stage, was their judicial case: *"Look, when I went to the court. I was speaking and the other one was writing. I signed the first and last name on one sheet and then I signed the name on another one, three sheets, which she [the prosecutor] then said: 'These 3 sheets are now going to be delivered to the judge.' But I do not know what's going on."* (ID4). Only one participant had his judicial case concluded, with the conviction of the trafficker.



### **Feelings associated**

There were feelings associated with the collaboration with the police and the court. The participants felt safe and secure, telling their story, sharing their victimization experience, and answering the questions made by the prosecutor. Even if they were scared and afraid of retaliations on an initial level, the police were able to ensure them that they would obtain support and protection, and, through it, the participants could collaborate. Feelings of hope replaced the initial apprehension and insecurity. Those feelings of hope were associated with the possible future: *“To see if it [the criminal charges] goes on. They [the traffickers] will see the evil they have done . . . I am not afraid I will go forward . . . I went [to the police], I already knew for what it was! I had to respond, I had to say . . . I had to answer what was the truth and . . . nervous, nervous . . . as if I were to say something different but when I started, I told everything, and I no longer felt like this . . . ”* (ID1). The participant revealed that fear was suppressed by the police forces’ protective action, which ensured the victim safety. *“I was afraid of going out. That the gypsies were out, and I was afraid to leave . . . I was only afraid to leave, but Mr. [social worker] and other people from the police were there. They accompanied us, and I felt more at ease. Of course! And I felt more comfortable because two agents were with us.”* (ID1).

### **Lack of knowledge**

This suitable level of collaboration with the judicial system does not mean that the victim knew the situation of the criminal proceedings or was even aware of the stage in which their process was: *“I do not know . . . I’ve been waiting, I do not know how it is . . . ”* (ID1); *“At this moment, I know nothing.”* (ID8). Only one participant knew that the judicial process ended with a conviction: *“Five years of a suspended sentence. I do not agree! I do not agree! I agreed if they were inside the jail.”* (ID2).

### **Psychosocial support**

#### **Perception and effectiveness**

All the participants mentioned that they were provided with some type of support. The support was diverse and not very detailed. Nonetheless, we could assess that there was psychosocial support: housing, subsistence (access to primary living conditions (e.g., food, hygiene, clothing – *“I help with chores at home. Everyone helps, those who are there all help. (. . .) [financial help] It must be the income.”* (ID1).

Access to health services (medical care, psychiatric health problems; psychological support – *“I have to have surgery again.”* (ID3).

Legal support (counseling in the process of regularizing the migratory situation and/or in the context of the criminal process, in the face of their

rights as a victim: e.g., request for granting the reflection period, a special residence permit, protection of witnesses).

Social support (economic support and/or access to other essential goods), support for educational (re)integration, training and/or labor – “*Now I’m waiting to get a job. I’m waiting for a job. I also took a class [educational].*” (ID6).

Assisted return (access to assisted return programs, with support in the (re) integration process in the community of origin or in another that the victim intends to integrate) – “*They were now seeing, because I already said to go to my homeland . . . but they want to see if I can find a home here!*” (ID3). However, there was a lack of description of the conditions of the support provided. The participants only named them, whether they existed or not, but did not formulate opinions about them (e.g., whether it was appropriate to their needs, whether their will were considered).

### **Feeling associated**

The participants’ predominant feelings were based on the fact that they had someone to talk to when they needed it and the care and affection from the social worker. The feeling of safety was most important, as ID2 mentioned, “*It’s not a matter of food. I’ll tell you what, it’s not a question of . . . food, it’s not a matter of clothing . . . it’s not a matter of washing clothes. That’s all, it’s all a help. (. . .) If a person needs anything; talk to the boss; talk to the person who is in the house, because when we talk . . . is by talking that we understand each other, it is not?.*” ID4 also mentioned that being in the shelter changed his life for the better “*Changed . . . yes, because I talk . . . I have the freedom to talk to my colleagues who are there at home . . . talk to our boss . . . To free oneself . . . is . . . because, a person, a person will . . . will open gradually . . . !*” (ID4).

### **Duration of support**

Almost all the participants reported their perception about the support duration, which varied from two months until more than a year. It is just the perception of the participant’s time, not corroborated by the institutional’ data. Due to the secrecy of justice (the process was still in courts, in most cases) and the victim’s confidentiality, we could not compare the duration they spoke about the support time with the accurate support time provided. So, there is a possibility of a trauma-response and lack of concept of time.

### **Referral pathway**

The participants refer to several referral pathways, each with a different identification process and exiting from the exploitation. Either by hetero-identification (by someone unknown) or by self-identification, the process of

victim recognition was in all cases an outcome from the coordination of various organizations: judicial authorities (“*To their [police] office. Then we went to the court . . . afterward here[shelter] . . .*” (ID4), social and/or medical service providers (“*They [nurses and doctors] started calling the social worker, they started calling . . . and I did not leave the health center anymore.*” (ID5).

**Post-victimization**

All the nine participants referred to the post-victimization period with 77 references, including plans for the future and some learnings as experiential experts (e.g., Advise others depending on their experience).

All of the participants reported having plans for their future. Nevertheless, those plans were more explicit in the participants that have been supported for more time: “*Now I’m waiting to get a job.*” (ID6); “*Can improve, because I have the strength yet to improve my situation.*” (ID1).

The participants that have the support only until two months have plans, but they are not defined. The feelings of hopelessness and embarrassment for being exploited are still very present and creates ambiguous feelings, preventing those participants from seeing the future more clearly and optimistically: “[. . .] *because if I go this way . . . if I arrive this way . . . without a little money, if I come with empty hands, it’s a shame . . . so . . . at the end of it . . . I can . . . get a job here.*” (ID4).

**Table 3.** Post-victimization: theme and sub-themes.

Theme	Sub-theme	Participants <sup>a</sup>	References <sup>b</sup>
<b>Plans for the future and experiential experts</b>		<b>9</b>	<b>77</b>
	<i>Hope in the future</i>	9	5
	<i>Hopelessness</i>	5	8

<sup>a</sup>Number of participants who mentioned the theme and sub-theme

<sup>b</sup>Total number of references that integrated that theme and sub-theme

**Impact and traumas during formal support**

Half the participants (n = 4) reported symptoms that indicated a degree of impact during exploitation, and almost all of them (n = 8) reported symptoms during support.

This theme reflects the discourse on the impact that participants verbalized throughout the interview. It was split into impact during exploitation and during support (when participants reported impact before identification and after identification as a victim when they were already with support). During the exploitation, the participants described a sense of helplessness that was still vivid in the discourse “*I lowered my morals and stayed in my quiet corner.*” (ID4).

During the support, almost the majority of the participants reported symptoms of PTSD: “*I often have nightmares . . . ,*” “*I even avoid thinking about*

things!” (ID2). They also reported fear of reprisals of the trafficker, even when they are in the shelter: “No, they know where I am, that’s why ... [the traffickers] they know my family ... ” (ID1) and even sadness: “A person becomes ... sadder, emptier ... always thinking the same thing. I think a lot about the subject and then ... I’m sadder ... ” (ID6).

**Table 4.** Impact and traumas during formal support: Theme and sub-themes.

Theme	Sub-theme	Participants <sup>a</sup>	References <sup>b</sup>
<b>During exploitation</b>		<b>4</b>	<b>8</b>
<b>During support</b>		<b>8</b>	<b>75</b>
	<i>PTSD</i>	7	37
	<i>Fear</i>	4	16
	<i>Control of movements</i>	3	16
	<i>Sadness</i>	3	6

<sup>a</sup>Number of participants who mentioned the theme and sub-theme

<sup>b</sup>Total number of references that integrated that theme and sub-theme

## Discussion

This exploratory study aims to understand, through victims’ experiences, the impact and subsequent help and support process. Specifically, we aim to expand knowledge about how trafficking victims of labor exploitation depict the support services, the security forces and the justice system.

The support provided to the victim was portrayed as effective and adequate. As we will see in the discussion below, the participants are somehow unaware of their ability to make informed decisions into their care, leaving that to their caregivers. So, we suppose that the participants perceived that the care was effective and adequate, without knowing their ability to choose services or be provided with different choices. Future research topic needs to address this limitation concerning the perception of “adequate and effective support. If there is a lack of awareness into the option of care or if there is an assumption that adequate is minimal care (having a house, meals on time, clothes, and access to physical and mental health). We need to consider that the participant could felt obliged to appreciate any service provided and evaluate it as adequate and effective, and this issue need further studies to better understand if this is mentioned, only with national’ victims or foreign, neither or both.

The participants reported the justice system as essential in the release. They were confident in the judicial system’s effectiveness in solving their problems, and the judicial system was identified as a source of help. This may be facilitated by the fact that these victims were Portuguese, exploited domestically, when comparing to international victims who, according to other researchers, see the law enforcement with distrust (Farrell et al., 2014; Verhoeven & van Gestel, 2011). The participants were able to collaborate with the judicial system (e.g., providing testimony), and the judicial system

was able to provide security and trust to these victims, preventing the secondary victimization that the literature has been calling attention to. Force policies should develop protocols to avoid the victim's re-traumatization, increase the safety of all, and increase the effectiveness and efficiency of interaction with victims. This is fundamental when the victim expresses that s/he is willing to testify in court. By using trauma-informed care, the provider can access the time of the day and the company to testify (whether the victim would prefer a female or male agent) (Helfferich et al., 2011; Honeyman et al., 2016; Matos et al., 2019). This may be a small change but can affect the victim's feelings of increased control and decreased vulnerability, which can have a massive difference in the efficiency and effectiveness of interaction between the victims and the judicial system.

It can be very challenging building a rapport with a victim of HT. The law enforcement must understand the factors that may influence the victim in their interactions (Helfferich et al., 2011; Honeyman et al., 2016) respond in a supportive and soothing manner. The crime of HT is challenging for the investigators, prosecutors, and victims service providers alike. To reach a successful criminal investigation, there is a necessity for a suitable collaboration between investigators, prosecutors, and many service providers (being them dependent on the victim's needs) (Matos et al., 2019). Successful HT investigations depend on overcoming such barriers to create practical and functional cooperation. The task members need to be mindful that HT investigations are purposely victim-centered because the victim supplies the most critical evidence (their testimony) (Matos et al., 2017, 2019). The approach must be related to the needs, phase and consequences of the victim. However, for victims to participate and give their testimony, they need to be stabilized (mentally and physically) and must feel secure and safe (Barnert et al., 2016; French & Liou, 2016). It is crucial to consider that the victim participation as a witness is a very complex aspect and can add additional pressure and result in (re)traumatization (Butler et al., 2011). The law enforcement and the judicial system need to understand that the victims of HT may have extensive exposure to violence and psychological trauma, that they suffered under challenging conditions that left them with a sense of hopelessness (which is aggravated by the guilty feeling of being responsible for their suffering – Freemire, 2017; Hopper, 2017; Salami et al., 2018). In this case, the professionals who accompany the victim and made her feel safe acted and gave evidence that these competencies may be present, and if so, they should be disseminated. By providing education to law enforcement on trauma-informed approaches and improving the victims' understanding of the criminal justice process, we can enhance their cooperation with law enforcement to suppress better this crime (Matos et al., 2019). The results show the efficiency generated by a suitable articulation between police authorities and the organizations (the network of psychosocial support).

However, there are difficulties with implementing laws. For example, there are no compensation records. We asked, and we did not get an answer from the victims, both because the process was still running in the court or because the participant did not know if there was compensation.

Another difficulty that we could access was that despite the police care for the victim, the help or aid them in exiting their labor trafficking situation may take much time. This is due to the need for criminal police bodies to gather evidence to build a court case leading to a conviction. This issue raises a lot of ethical questions, as Tyldum (2010) states, perhaps because it would be challenging to defend ethically an investigation where we were to identify victims of trafficking, interview them and then leave them to continue a life exploited by traffickers, which happened to several participants. To collect information about ongoing abuse, exploitation, and coercion (if the victims are aware that this information is obtained- which was the case because the police identified themselves as such), and then not act to improve their situation is likely to ruin any belief the victim had in humanity or any hope of being identified as a victim. This did not happen because the participants were hopeful that someday the police would come again to take them from that exploitation, but that may not be the case with all the victims.

European Commission data on confidence in the police in the Portuguese population reveal that in the year 2019, 71,49% trusted the police forces.<sup>1</sup> These data can influence the level of confidence that the victims had and demonstrated in their speech regarding the police's trust to be able to help them. However, we need to consider that most likely, this assurance seems perhaps only on a feeling or rather, lack of understanding of the justice system process. The same may not happen with international victims, which is what the literature suggests (Nichols & Heil, 2015). This area could potentially be expanded further in additional studies to clarify a lack of understanding and autonomy in the process, the blind faith in the systems and if the correlation is specific to citizens of the nation as apposed to foreign nationals experience Human trafficking victimization within the region.

Moreover, if the investigation's main task is to identify victims to help or aid them in exiting their labor trafficking situation from traffickers, it will be hard to legitimize putting cooperation with the police forces as a prerequisite for being assisted. We understand the difficulties of gathering evidence to achieve a conviction in HT crime (Farrell et al., 2014; Matos et al., 2019; Munger, 2015; Spohn, 2014), but the lives of those who are being exploited are at risk, for each second that passes without being able to exit their trafficking situation. This lack of follow-up on case status, case process, and conversation with persons involved within the law enforcement systems of prosecution-based

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<sup>1</sup><https://ec.europa.eu/comfrontoffice/publicopinion/index.cfm/Chart/getChart/chartType/gridChart/themeKy/18/groupKy/88/savFile/850>

interventions is problematic and this lack of understanding of the cases may be a curious follow-up study.

Concerning the support provided, we could initially identify the adoption of a crisis intervention model (meeting the most basic and immediate needs – food, clothes, shelter) and was mentioned as effective and adequate to the participants' needs. There seem to exist a network of well-articulated services and professionals on this level.

The victim service provider's primary concern must be the safety and well-being of the victim, which was achieved (Greenbaum, 2016; Hemmings et al., 2016). However, the victim needs to be informed about the services that s/he wishes to obtain, if s/he is willing to work with law enforcement and immigration (if necessary) and other options (Couto & Fernandes, 2014; Reichert & Sylwestrak, 2013). The participants gave no indication those aspects when they mentioned the support provided. They did not mention being informed of their legal rights or being asked about their support choices. Although there was room for training courses and professional (re)integration, it was not clear from the participants' speeches whether they played an active role in this decision-making or whether they did what the service providers advised them to do. It is important to voice the speech of those who experienced human trafficking. That empowerment can lead and be useful in awareness campaigns as Countryman-Roswurm and Brackin (2017) stated, but the collection of the speech of the victims needs to be accounted for in an ethical an empowering way. Rather than being recognized or compensated as experts and leaders in the anti-trafficking movement victims are taken advantage of in the pursuit of a story that has emotional pull. In response to the increasing rates of re-exploitation, those who already experienced human trafficking victimization are asked to share their stories with little thought to the context or effects of doing so. The victim needs to have autonomy to choose their decisions, actions, and programs and this needs to be clear to the victims themselves, social service agencies, community, media personnel and law enforcement. This happens probably because the victim is still feeling shameful and fearful of the future, which means that the formal assistance has yet to improve. More detail is needed to know precisely what this formal help looks like (duration, components, and the gaps in this help that need to be addressed).

Victim-centered approaches are essential, in this sense, because they focus on empowerment rather than coercion or even dependency of the victim in the institution (Hopper, 2017). The fact that participants are not aware of their supportive process leads us to think that they are not involved in the decisions that affect their lives. This victim's lack of participation in her/his life project hinders adequate and practical support to the victim's needs. The empowerment of the victim in making her/his own choices about her/his own life can lead to an establishment of a trusting relationship that can enable the victim to

overcome the trauma and be reintegrated social, educational and professionally (Butler et al., 2011; Hopper, 2017; Okech et al., 2018).

The participants reported behaviors of avoidance and fear of reprisals by the trafficker. The impact was described but in a lesser way than we had expected. This can be explained by the complexity of traumatic experiences and the fact that mental health is a complex issue and is still wrapped in stigma. The feeling of guilt can play a significant role in preventing the verbalization and awareness of the impact that HT had on the participant (Contreras et al., 2017; Hopper, 2017). On the other hand, the fact that participants do not verbalize the impact can make it very difficult for supportive approaches to meet their real needs. Empowerment is needed for victims to self-identify and recognize the consequences of HT and their own needs (emphasizing on needs) (Bonanno, 2004; Steiner et al., 2018). Further research needs to address if this lack of verbalization is shame or perhaps a lack of understanding of the process of support and judicial.

The participants' verbalization about the duration of/and the support provided does not allow us to characterize to the full extent the quality and effectiveness of support provided. It was also impossible to understand if the victim support network has culturally sensitive services and whether they are being applied or not, as the participants were Portuguese victims and there was no need for translation and/or religious services. Further research needs to focus on the perception of time versus the actual time in records of these programs to determine if the perception is indeed equated to reality or if trauma-triggers exacerbate the perception of time passing.

### **Practical implications and potential to stimulate further research**

This study opens new avenues for studying the support provided to HT, national, and international victims. Specifically, it can influence future policies and even practices with all those who contact victims of HT (service providers, police, and even courts) to serve the victims and repress this crime. This study addresses the need for more studies to analyze the network's cultural competence that we were not able to do. We need to develop more about how these experiences of trauma, fear and hope change and construct the victim's future and plans. There is a need to study in more detail what formal help looks like, duration, components, and the major gaps in achieving them.

It would be equally interesting to understand, investigate, and evaluate trauma-informed care interventions in the various service providers (doctors, social workers, judges, lawyers, police, among others). At the same time, it would be interesting to study if the trauma-informed approach impacts the repression of crime in Portugal (if it enhances the involvement of the victim in criminal prosecution and if it helps different criminal police bodies gather evidence leading to a conviction). Another point that would be interesting to study is the type of psychological support that is provided in the network (the



(in)existence of protocols or guidelines and the (in)existence of technical supervision). It would also be interesting to understand the effectiveness of interventions that are in practice. We also want to see the nuances between a foreign and a national victim regarding these issues to see if the services are culturally appropriated.

Another aspect that needs to be accounted is the fact that the interviews were conducted in a shelter environment and that context could make the participants' responses conditioned by concerns of negatively reflecting on services and being ungrateful. Even if the context of shelter is the one who has more access to the human trafficking victims, we need to start to address this issue to ensure that the context of the data collection do not influence the data gathering and the data itself. Future research should try to collect data with human trafficking victims in a neutral third-party location to promote a more comprehensive, robust and evidence-based research in the future.

### **Conclusion and limitations**

This study's main objective was to access national and international HT victims' experiences in Portugal. Nevertheless, the participants were voluntarily Portuguese nationals, that suffered from labor exploitation and were living in a shelter. Although it was not intended to achieve a representative sample of the victims identified or confirmed in the national territory, these results prevent any generalizable conclusion. There were limitations in the realization of this study; more precisely, the difficult access to the institutions that are part of the network (even with the support of the national rapporteur on trafficking in persons regarding the authorization and dissemination) and the lack of participation in the study, which resulted in a small number of participants. Some institutions remained closed within themselves and did not aim to contribute to this investigation. Because of the above, this also means that we cannot make an extrapolated generalization of the data regarding the service provided to the victims of human trafficking in Portugal as a whole.

We also need to address the possibility that, in selecting the participants, there has been some bias; that is, the victims selected could be the ones with a more positive response to treatment and, therefore, more likely to express their experience. Another limitation may be that Portuguese victims rely on the police, while international victims may not have that confidence and hinder the identification process. Another limitation is the length of support time the victim has been subjected to, which is just the victim's perception and does not correspond to an exact verification of the time s/he was supported. As we see in the literature, labor trafficking happens especially with foreign victims (Oram et al., 2012; Rothman et al., 2017; Villacampa & Torres, 2017). However, we can emphasize that our participants had structural and

individual vulnerabilities that could increase this type of trafficking, such as unemployed, homeless and uneducated (Zimmerman (2003).

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## References

- Abas, M., Ostrovski, N. V., Prince, M., Gorceag, V. I., Trigub, C., & Oram, S. (2013). Risk factors for mental disorders in women survivors of human trafficking: A historical cohort study. *BMC Psychiatry*, 13(1), 204. <https://doi.org/10.1186/1471-244X-13-204>
- Arhin, A. (2016). A diaspora approach to understanding human trafficking for labor exploitation. *Journal of Human Trafficking*, 2(1), 78–98. <https://doi.org/10.1080/23322705.2016.1136538>
- Azevedo, V., Carvalho, M., Fernandes-Costa, F., Mesquita, S., Soares, J., Teixeira, F., & Maia, Â. (2017). Interview transcription: Conceptual issues, practical guidelines, and challenges. *Revista de Enfermagem Referência*, 4(14), 159–167. <https://doi.org/10.12707/RIV17018>
- Banovic, B., & Bjelajac, Z. (2012). Traumatic experiences, psychophysical consequences and needs of human trafficking victims. *Vojnosanitetski Pregled*, 69(1), 94–97. <https://doi.org/10.2298/VSP1201094B>
- Barnert, E. S., Abrams, S., Azzi, V. F., Ryan, G., Brook, R., & Chung, P. J. (2016). Identifying best practices for “safe harbor” legislation to protect child sex trafficking victims: Decriminalization alone is not sufficient. *Child Abuse and Neglect*, 51, 249–262. <https://doi.org/10.1016/j.chiabu.2015.10.002>
- Bonanno, G. A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events? *American Psychologist*, 59(1), 20–28. <https://doi.org/10.1037/0003-066X.59.1.20>
- Borschmann, R., Oram, S., Kinner, S. A., Dutta, R., Zimmerman, C., & Howard, L. M. (2017). Self-harm among adult victims of human trafficking who accessed secondary mental health services in England. *Psychiatric Services*, 68(2), 207–210. <https://doi.org/10.1176/appi.ps.201500509>

- Brink, N. E. (2019). *Applying the Constructivist Approach to Cognitive Therapy. Applying the Constructivist Approach to Cognitive Therapy*. Routledge. <https://doi.org/10.4324/9780429397714>
- Braun, V., & Clarke, V. (2012). Thematic analysis. In *APA Handbook of research methods in psychology, Vol 2: Research designs: Quantitative, qualitative, neuropsychological, and biological* (vol. 2, pp. 57–71). doi:10.1037/13620-004
- Butler, L. D., Critelli, F. M., & Rinfrette, E. S. (2011). Trauma-informed care and mental health. *Directions in Psychiatry, 31*(January), 197–210. <https://doi.org/10.1093/acrefore/9780199975839.013.1063>
- Couto, D. L. M. (2012). *Tráfico de seres humanos: Percepções sociais, percursos de vitimação e sobrevivência [Trafficking in human beings: Social perceptions, victimization and survival pathways]*. (Unpublished PhD Thesis). Universidade do Minho, Braga, Portugal. (pp. 87–101). Braga, Portugal: Psiquilíbrios.
- Couto, D., & Fernandes, A. (2014). Tráfico de seres humanos: Dimensões da intervenção e medidas de proteção [Trafficking in human beings: Dimensions of intervention and protective measures]. In M. Matos (Ed.). *Vítimas de crime e violência: Práticas de intervenção* (pp. 87–101). Braga, Portugal: Psiquilíbrios.
- Contreras, P. M., Kallivayalil, D., & Herman, J. L. (2017). Psychotherapy in the aftermath of human trafficking: working through the consequences of psychological coercion. *Women and Therapy, 40*(1–2), 31–54. <https://doi.org/10.1080/02703149.2016.1205908>
- Countryman-Roswurm, K., & Patton Brackin, B. P. (2017). Awareness without re-exploitation: Empowering approaches to sharing the message about human trafficking. *Journal of Human Trafficking, 3*(4), 327–334. <https://doi.org/10.1080/23322705.2016.1201374>
- Cunha, A., Gonçalves, M., & Matos, M. (2018). Knowledge of trafficking in human beings among Portuguese social services and justice professionals. *European Journal on Criminal Policy and Research, 25*(4), 469–488. <https://doi.org/https://doi.org/10.1007/s10610-018-9394-1>
- Dell, N. A., Maynard, B. R., Born, K. R., Wagner, E., Atkins, B., & House, W. (2019). Helping Survivors of Human Trafficking: A Systematic Review of Exit and Postexit Interventions. *Trauma, Violence, and Abuse*. SAGE Publications Ltd. <https://doi.org/10.1177/1524838017692553>
- Farrell, A., Owens, C., & McDevitt, J. (2014). New laws but few cases: Understanding the challenges to the investigation and prosecution of human trafficking cases. *Crime, Law and Social Change, 61*(2), 139–168. <https://doi.org/10.1007/s10611-013-9442-1>
- Fernandes, Â., Gonçalves, M., & Matos, M. (2020). “Who are the victims, who are the traffickers?” university students’ portrayals on human trafficking. *Victims and Offenders, 15*(2), 243–266. <https://doi.org/10.1080/15564886.2019.1711276>
- Fernandes, Â., Gonçalves, M., & Matos, M. (2021). Exploring Human Trafficking Victimization Experiences in Portugal. *Victims and Offenders, 16*(5), 746–769. <https://doi.org/10.1080/15564886.2021.1880509>
- Freemire, K. E. (2017). “Mental Health Rehabilitation in Victims of Sex Trafficking”. *Senior Honors Theses*. 693. <https://digitalcommons.liberty.edu/honors/693>
- French, S., & Liou, C. C. (2016). The importance of strategic, victim-centred human trafficking prosecutions. *Anti - Trafficking Review, 6*. <https://doi.org/10.14197/atr.20121669>
- Ghafoori, B., Wolf, M. G., Nylund-Gibson, K., & Felix, E. D. (2019). A naturalistic study exploring mental health outcomes following trauma-focused treatment among diverse survivors of crime and violence. *Journal of Affective Disorders, 245*(November), 617–625. <https://doi.org/10.1016/j.jad.2018.11.060>

- Greenbaum, J. (2016). Identifying victims of human trafficking in the emergency department. *Clinical Pediatric Emergency Medicine*, 17(4), 241–248. <https://doi.org/10.1016/j.cpem.2016.09.006>
- Group of Experts on Action against Trafficking in Human Beings. (2013). *Report concerning the implementation of the Council of Europe Convention on Action against Trafficking in Human Beings by Portugal*. Strasbourg: Council of Europe.
- Group of Experts on Action against Trafficking in Human Beings [GRETA]. (2017). *Report concerning the implementation of the Council of Europe Convention on Action against Trafficking in Human Beings by Portugal: Second evaluation round*. (Council of Europe, Ed.). Strasbourg. Retrieved from. <https://rm.coe.int/16806fe673>
- Helfferich, C., Kavemann, B., & Rabe, H. (2011). Determinants of the willingness to make a statement of victims of human trafficking for the purpose of sexual exploitation in the triangle offender-police-victim. *Trends in Organized Crime*, 14(2–3), 125–147. <https://doi.org/10.1007/s12117-011-9125-1>
- Hemmings, S., Jakobowitz, S., Abas, M., Bick, D., Howard, L. M., Stanley, N., Zimmerman, C., & Oram, S. (2016). Responding to the health needs of survivors of human trafficking: A systematic review. *BMC Health Services Research*, 16(1), 1–9. <https://doi.org/10.1186/s12913-016-1538-8>
- Hom, K. A., & Woods, S. J. (2013). Trauma and its aftermath for commercially sexually exploited women as told by front-line service providers. *Issues in Mental Health Nursing*, 34(2), 75–81. <https://doi.org/10.3109/01612840.2012.723300>
- Honeyman, K. L., Stukas, A. A., & Marques, M. D. (2016). Human trafficking: Factors that influence willingness to combat the issue. *Journal of Applied Social Psychology*, 46(9), 529–543. <https://doi.org/10.1111/jasp.12381>
- Hornor, G. (2015). Domestic Minor Sex Trafficking: What the PNP Needs to Know. *Journal of Pediatric Health Care*, 29(1), 88–94. <https://doi.org/10.1016/j.pedhc.2014.08.016>
- Hopper, E. K. (2017). Trauma-informed psychological assessment of human trafficking survivors. *Women and Therapy*, 40(1–2), 12–30. <https://doi.org/10.1080/02703149.2016.1205905>  
<https://doi.org/10.14197/atr.20121545>
- Matos, M., Gonçalves, M., & Maia, Â. (2017). *Human trafficking and criminal proceedings in Portugal : Discourses of professionals in the justice system*. <https://doi.org/10.1007/s12117-017-9317-4>
- Matos, M., Gonçalves, M., & Maia, Â. (2019). Understanding the criminal justice process in human trafficking cases in Portugal: Factors associated with successful prosecutions. *Crime, Law and Social Change*, 72(5), 501–525. <https://doi.org/10.1007/s10611-019-09834-9>
- Martins, C., & Machado, C. (2006). Observações da interação humana: Considerações metodológicas [Observation of human interaction: Methodological considerations]. *Psicologia: Teoria, Investigação e Prática*, 2, 159–176.
- Matos, M., & Maia, Â. (2015). *Tráfico de Pessoas e Tramitação criminal*. CIG. <https://doi.org/10.1007/s10611-013-9511-5>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2012). *Relatório sobre Tráfico de Seres Humanos – 2011*, [Trafficking in human beings report - 2011]. Retrieved June 30, 2019, from <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2013). *Relatório sobre Tráfico de Seres Humanos – 2012*, [Trafficking in human beings report - 2012]. Retrieved June 30, 2019, from, <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>

- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2014). *Relatório sobre Tráfico de Seres Humanos – 2013*, [Trafficking in human beings report - 2013]. Retrieved June 30, 2019, from, <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2015). *Relatório sobre Tráfico de Seres Humanos – 2014*, [Trafficking in human beings report - 2014]. Retrieved June 30, 2019, from, <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2016). *Relatório sobre Tráfico de Seres Humanos – 2015*, [Trafficking in human beings report - 2015]. Retrieved June 30, 2019, from, <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2017). *Relatório sobre Tráfico de Seres Humanos – 2016*, [Trafficking in human beings report - 2016]. Retrieved June 30, 2019, from <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ministério da Administração Interna [MAI], Observatório do Tráfico de Seres, Humanos [OTSH]. (2018). *Relatório sobre Tráfico de Seres Humanos – 2016*, [Trafficking in human beings report - 2017]. Retrieved June 30, 2019, from <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Munger, F. W. (2015). Trafficking in law: Cause lawyer, bureaucratic state and rights of human trafficking victims in Thailand. *Asian Studies Review*, 39(1), 69–87. <https://doi.org/10.1080/10357823.2014.990355>
- Nichols, A. J., & Heil, E. C. (2015). Challenges to identifying and prosecuting sex trafficking cases in the Midwest United States. *Feminist Criminology*, 10(1), 1–29. <https://doi.org/10.1177/1557085113519490>
- Nguyen, P. T., Coverdale, J. H., & Gordon, M. R. (2017, May 1). Identifying, treating, and advocating for human trafficking victims: A key role for psychiatric inpatient units. *General Hospital Psychiatry*. Elsevier Inc. <https://doi.org/10.1016/j.genhosppsy.2017.02.006>
- Observatório do Tráfico de Seres Humanos [OTSH]. (2011). *Relatório sobre Tráfico de Seres Humanos – 2010* [Trafficking in human beings report – 2010]. Lisboa: Author. Retrieved from. <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Observatório do Tráfico de Seres Humanos [OTSH]. (2019). *Relatório sobre Tráfico de Seres Humanos – 2018* [Trafficking in human beings report – 2018]. Lisboa: Author. Retrieved from. <http://www.otsh.mai.gov.pt/Recursos/Pages/default.aspx>
- Ottisova, L., Hemmings, S., Howard, L. M., Zimmerman, C., & Oram, S. (2016). Prevalence and risk of violence and the mental, physical and sexual health problems associated with human trafficking: An updated systematic review. *Epidemiology and Psychiatric Sciences*. Cambridge University Press. <https://doi.org/10.1017/S2045796016000135>
- Okech, D., Hansen, N., Howard, W., Anarfi, J. K., & Burns, A. C. (2018). Social support, dysfunctional coping, and community reintegration as predictors of PTSD among human trafficking survivors. *Behavioral Medicine*, 44(3), 209–218. <https://doi.org/10.1080/08964289.2018.1432553>
- Oram, S., Stöckl, H., Busza, J., Howard, L. M., & Zimmerman, C. (2012). Prevalence and risk of violence and the physical, mental, and sexual health problems associated with human trafficking: Systematic review. *PLoS Med*, 9(5), e1001224. <https://doi.org/10.1371/journal.pmed.1001224>
- Pascual-Leone, A., Kim, J., & Morrison, O. P. (2017). Working with Victims of Human Trafficking. *Journal of Contemporary Psychotherapy*, 47(1), 51–59. <https://doi.org/10.1007/s10879-016-9338-3>

- Pocock, N. S., Kiss, L., Oram, S., & Zimmerman, C. (2016). Labour trafficking among men and boys in the greater mekong subregion: Exploitation, violence, occupational health risks and injuries. *PLoS ONE*, *11*(12), 1–21. <https://doi.org/10.1371/journal.pone.0168500>
- Reid, J. A. (2010). Doors wide shut: Barriers to the successful delivery of victim services for domestically trafficked minors in a southern U.S. metropolitan area. *Women and Criminal Justice*, *20*(1–2), 147–166. <https://doi.org/10.1080/08974451003641206>
- Reichert, J., & Sylwestrak, A. (2013). National survey of residential programs for victims of sex trafficking: National survey of residential programs for victims of sex trafficking. *The Illinois Criminal Justice Information Authority*. URI:[http://www.icjia.state.il.us/assets/pdf/ResearchReports/NSRHVST\\_101813.pdf](http://www.icjia.state.il.us/assets/pdf/ResearchReports/NSRHVST_101813.pdf)
- Rothman, E. F., Stoklosa, H., Baldwin, S. B., Chisolm-Straker, M., Price, R. K., & Atkinson, H. G. (2017). Public health research priorities to address US human trafficking. *American Journal of Public Health*, *107*(7), 1045–1047. <https://doi.org/10.2105/AJPH.2017.303858>
- Salami, T., Gordon, M., Coverdale, J., & NGuyen, P. (2018). What therapies are favored in the treatment of the psychological sequelae of trauma in human trafficking victims? *Journal of Psychiatric Practice*, *24*(2), 87–96. <https://doi.org/10.1097/PRA.0000000000000288>
- Spohn, C. (2014). The non-prosecution of human trafficking cases: An illustration of the challenges of implementing legal reforms. *Crime, Law and Social Change*, *61*(2), 169–178. <https://doi.org/10.1007/s10611-013-9508-0>
- Stanley, N., Oram, S., Jakobowitz, S., Westwood, J., Borschmann, R., Zimmerman, C., & Howard, L. M. (2016). The health needs and healthcare experiences of young people trafficked into the UK. *Child Abuse and Neglect*, *59*, 100–110. <https://doi.org/10.1016/j.chiabu.2016.08.001>
- Steiner, J. J., Kynn, J., Stylianou, A. M., & Postmus, J. L. (2018). Providing services to trafficking survivors: Understanding practices across the globe. *Journal of Evidence-Informed Social Work*, *15*(2), 150–168. <https://doi.org/10.1080/23761407.2017.1423527>
- Tsutsumi, A., Izutsu, T., Poudyal, A. K., Kato, S., & Marui, E. (2008). Mental health of female survivors of human trafficking in Nepal. *Social Science and Medicine*, *66*(8), 1841–1847. <https://doi.org/10.1016/j.socscimed.2007.12.025>
- Tyldum, G. (2010). Limitations in research on human trafficking. *International Migration*, *48*(5), 1–13. <https://doi.org/10.1111/j.1468-2435.2009.00597.x>
- Turner-Moss, E., Zimmerman, C., Howard, L. M., & Oram, S. (2014). Labour exploitation and health: A case series of men and women seeking post-trafficking services. *Journal of Immigrant and Minority Health*, *16*(3), 473–480. <https://doi.org/10.1007/s10903-013-9832-6>
- Vala, J. (1986). A análise de conteúdo [Content analysis]. In A. S. Silva e J. M. Pinto (orgs). *Metodologia das ciências sociais*(pp. 101–128). Porto: Edições Afrontamento.
- Verhoeven, M., & van Gestel, B. (2011). Human trafficking and criminal investigation strategies in the Amsterdam red light District. *Trends in Organized Crime*, *14*(2–3), 148–164. <https://doi.org/10.1007/s12117-011-9126-0>
- Villacampa, C., & Torres, N. (2017). Human trafficking for criminal exploitation: The failure to identify victims. *European Journal on Criminal Policy and Research*, *23*(3), 393–408. <https://doi.org/10.1007/s10610-017-9343-4>
- Villacampa, C., & Torres, N. (2019). Human trafficking for criminal exploitation: Effects suffered by victims in their passage through the criminal justice system. *International Review of Victimology*, *25*(1), 3–18. <https://doi.org/10.1177/0269758018766161>
- Walklate, S. (2011). Reframing criminal victimization: Finding a place for vulnerability and resilience. *Theoretical Criminology*, *15*(2), 179–194. doi:10.1177/1362480610383452
- Westwood, J., Howard, L. M., Stanley, N., Zimmerman, C., Gerada, C., & Oram, S. (2016). Access to, and experiences of, healthcare services by trafficked people: Findings from a

mixed-methods study in England. *British Journal of General Practice*. 66(652), e794–e801. <https://doi.org/10.3399/bjgp16X687073>

Wilson, J. K. (2009). *The Praeger handbook of victimology*. Santa Barbara, Calif: Praeger.

Zimmerman, C., Hossain, M., Watts, C., & Stolz, B. A. (2011). Human trafficking and health: A conceptual model to inform policy, intervention and research. *Social Science and Medicine*. 73(2), 327–335. doi:10.1016/j.socscimed.2011.05.028

Zimmerman, C., & Kiss, L. (2017). Human trafficking and exploitation: A global health concern. *PLoS Medicine*. Public Library of Science. <https://doi.org/10.1371/journal.pmed.1002437>

Zimmerman, C., & Watts, C. (2003). *WHO ethical and safety recommendations for interviewing trafficked women*. World Health Organization.