

Overview of Blue Door (Draft)

Submitted by Mary Fearon

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Background:

The Blue Door is a five-year program designed to support individuals, inclusive of gender or sexual orientation who are primarily between the ages of 14-29, to exit sex trade activities, and/or sexually exploitive situations including sex trafficking. We offer intensive individualized services and supports to address barriers to the exiting process. We strive to meet participants where they are and offer flexible services that are rooted in the principles of self determination, respect and harm reduction. We have two support coordinators, a counselor and a teacher on staff who focus on addressing social isolation, complex trauma, mental health, addictions, education, employment, housing and other issues identified by participants. The staff work in partnership with other service providers in the community to strengthen the network of support for participant. The participants can stay in the program for as long as they are interested. Once the participant identifies they would like to transition out of our program they work with the Blue Door team to develop a transition plan designed to support the participant in maintaining their progress and continue to move towards their long-term life goals. We have recently extended the education role to include outreach to the participants on the waitlist. This role will include reaching out to those on the waitlist once a month and connecting them to other community services.

The program works from a perspective of best practice, looks to new research in this area and also recognizes the importance of lived experience and hearing these voices as we work towards running successful programs. The Blue Door program works in partnership with the Coalition of Sexually Exploited Youth (CASEY). CASEY facilitates regular consultation for Blue Door staff with individuals who have lived experience in the sex trade to ensure we are hearing the voice of the population we are supporting.

The criminal code of Canada defines sexually exploited youth as anyone under the age of 18 who is engaged in any form of sexual commerce, including survival sex. The major distinction between exploitation and sex trafficking is that people are transported, by force, deception, coercion, abuse of power or the giving or receiving of payments or benefits to achieve the consent from a person, for the purpose of exploitation. When the use of force or coercion is present this is also illegal, even if the individual is 18 years of age or older.

Creation of Blue Door:

One of the challenges acknowledged by our stakeholders is that there is very little data on the number of youth or adults who are sexually exploited or engaged in the sex trade. There is no process to track this group of people. Service providers do not generally include sex trade activities or sexual exploitation in their documentation practice. While they carefully record the service provided, such as emergency shelter, medical detoxification, emergency relocation funds, health interventions, etc., the underlying reasons the service is required go unrecorded and often undetected.

Exhibit: National Inquiry into Missing and Murdered Indigenous Women and Girls		
Location/Phase: <u>Parts 2/3 St. John's</u>		
Witness: <u>Mary Fearon</u>		
Submitted by: <u>Christa Big Canoe</u>		
Add'l info: <u>P02-03 P04 P02 01</u>		
Date: _____		
Initials	I/D	Entered
<div>53</div>	<div></div>	<div>61</div>

In 2010, the Government of Newfoundland and Labrador contracted Thrive to conduct a research study into sexual exploitation, the sex trade and human trafficking in our province. The research included a literature review and key informant interviews. The reference materials are housed in a library at the Thrive offices. Over 100 workers from youth-serving agencies, Aboriginal organizations, women's groups, shelters, front-line social workers, police, teachers, housing authorities, health care providers, victim services, peer support workers, and government departments participated in the research. In addition, seven site visits were made to organizations serving sex trade workers in Victoria and Vancouver, BC.

The final report, *"It's Nobody's Mandate and Everyone's Responsibility: Sexual Exploitation and the Sex Trade in Newfoundland and Labrador"* was distributed to relevant Provincial Government departments and agencies in April 2011. Copies were also printed for release to CASEY members and other interested parties; however, for reasons best known by the government of the day, the release was halted and the document remained internal to government for over 4 years.

The NL Privacy Commissioner recently ordered the release of a redacted version of the report, which was placed on the NL Government website on October 8, 2015. Approximately 20% of the report has been redacted, primarily direct quotes from experiential individuals. These were redacted due to concerns they could possibly lead to the identification of key informants. The report can be accessed at: <http://www.exec.gov.nl.ca/exec/wpo/publications/STR.pdf>

The report presents 21 recommendations designed to assist in creating responses to the issues. Recommendation 14 of the report calls for a comprehensive exiting program.

"Collaborative Exiting Program: provide funding for a collaborative, peer driven, long term program with a mandate to assist individuals with exiting the sex trade. The program would provide the following supports:

- *Immediate emergency support*
- *Immediate emergency funds for relocation*
- *Peer support and peer counselling*
- *Trauma counselling*
- *Addictions support*
- *Pre-employment support*
- *Assistance in navigating mainstream services, programs and supports*
- *Support would be available for the life of the individual and would be non-judgemental, inclusive, respectful, culturally appropriate, accepting of chaos and diversity, and able to respond to emergency situations"*⁵

The Provincial Government has made advances related to a few of the recommendations in the areas of health care, internet child exploitation and court services. However, there has been no movement to create an exiting program for our province, therefore the Blue Door Program will provide the opportunity for Thrive to address recommendation 14 of this report.

Blue Door Capacity:

Blue Door has five staff, the director (Mary Fearon), two Support Coordinators, an Employment & Education Instructor/Outreach Coordinator and a Mental Health Therapist.

Support Coordinators who have a caseload of 8-9 participant who they meet with regularly and offer support with social isolation and support with housing, income, navigating health systems and additions and mental health services, employment, education etc.

Mental Health Counsellor is responsible for providing individual and group counselling for participants of the Blue Door Program. Our counsellor also carries a small caseload of 2-3 participants.

Employment & Education Instructor/Outreach Coordinator providing one on one foundational literacy & numeracy instruction teaching GED classes and providing employment supports. They assess their educational and employment needs and create individualized plans based on these assessments. This person also provide monthly contact with individuals on the waitlist and provide encouragement and start to build working relationships with each individual. They assist individuals in meeting their basic needs and liaise with agencies and support the coordination of services and assist with referrals to external services.

The staff work in partnership with other service providers in the community to strengthen the network of support for participants.

Blue Door Partnership with CASEY:

The Blue Door program and CASEY are working in partnership to develop an education program to advance the leadership skills of survivors. The education program will be survivor led and directed in partnership with the Blue Door team, allowing survivors to participate in the project creation and execution. Peer support is an effective strategy to support the exiting process. It allows individuals an opportunity to connect with others who have successfully exited sex trade activities and/or sexually exploitive situations through a shared experience that demonstrates possibilities for individuals. The education program will provide opportunities for survivors to access: the support required to develop a critical analysis of all the factors that contributed to their vulnerability; the space to create awareness and understanding of the root causes of their vulnerability; active engagement in the community to have a voice about issues related to sexual exploitation; the opportunity to enact change.

We currently have three people who are engaged with the EVOLVE (Empowering Voices of Lived Experience) team and three more participants who have identified that they would like to transition into this role. The education program will be survivor led and directed in partnership with the Blue Door team. This gives survivors the opportunity to participate in the project creation and execution. Peer support allows individuals an opportunity to connect with others who have successfully exited sex trade activities and/or sexually exploitive situations through a shared experience that demonstrates hope and possibilities for individuals.

Blue Door Participants:

According to Statistics Canada (2011) 7% of the total population in Newfoundland and Labrador identified as Indigenous, or 3% of the total indigenous population in Canada

Who is in our program?

- Service provided to 28 participants since program inception
- 21 current program participants
- 20 women
- 1 non-binary
- 7 identify as Indigenous women
- 10 participants on the waitlist.

Total Referrals received 34 - 47% are Self Referrals

Age Range at date of referral:

21% = 18 Years and under

15% = 19 – 25 years

24% = 26 – 30 years

32% = Over 30 years

In our program, our participants have reported that:

95% are Living in Poverty

79% have/had Substance abuse/addiction

58% Dropped out of school

79% Experience(d) homelessness

Another important study that has influenced the work of Blue Door in community is the Adverse Childhood Effects Study (ACE). They identified 10 indicators including personal experiences of physical abuse, verbal abuse, sexual abuse, physical neglect, emotional neglect and external influence including family with a caregiver who is dealing with addictions, a mother who experiences domestic violence, a family member is in prison, family member with mental illness, and single parent family. The research made strong links between childhood trauma and adults dealing with depression, suicidal ideations, being violent and being a victim of violence. The More types of trauma (toxic stress) the more problems later in life but with physical and mental health.

We complete ACE study on our participants and 100% identified as having some adverse experiences as identified in the study. Here are the results:

- 73% - Emotional Abuse
- 40% - Physical Abuse

- 47% - Sexual Abuse
- 80% - Neglect
- 93% - Parents were divorces/separated
- 60% - Mother/Step Mother was treated violently
- 80% - Lived in household with substance abuse
- 87% - Household member experiencing mental illness
- 40% - Household member was incarcerated

Most of our participants have identified as having experienced more than 3 of the indicators and 2 of our Indigenous participants identified of having experienced 8 of the indicators.

The average ACE score of program participants is 7 (of a possible 10) Significant research indicates that risk for addiction, mental illness, physical illness, relationship problems dramatically increase when the score for adverse childhood effects reaches 4 and respectively increases with higher scores. The ACE scores (collected to date) reflect extreme trauma histories for the majority of participants. Considering the high ACE scores reported by participants, the substantial progress made by individual program participants over recent months is both remarkable and indicative of the incredible strength and resilience within each individual Blue Door Participant. It is also essential to note the important role that community and belonging has played in their personal wellness journeys. Participants have provided a sense of community to one another since being provided with weekly opportunities to meet as a group.

Top Issues identified by our participants

- Mental Health
- Food Security
- Housing
- Transportation
- Physical Health
- Addictions

Quotes from Blue Door Participants (gathered by an independent evaluator)

"I don't work in the sex trade anymore. I'd probably be doing the same thing now if I'd never come here"

"For the first time I can sit and talk to other people about the challenges and not taking a call cause I'm hungry and need money"

"This is the first time I've acknowledged that I was sexually exploited. They have helped me start to get my power back"

"I wasn't going to live until my birthday. And here I am months later. Every day they help me to stay alive. This is now my safe space. Since being an adult, I have definitely not had that"

"There are times when you get so low you just want to grab a razor. It's all different now that I

know there's a place to go"

"Oh my god – huge impact. I was a sex trade worker and a drug user for three years, until last year. I ended up in the hospital they came to see me and supported me. I've never felt so safe and supported for a long time. There's counselling, health care ... it's unbelievable"

"This place makes me want to do better. Every day I choose not to use and not to go back into the sexy industry. A Sobeys gift card helps, so I don't have to go out on that call to know I have food for my son"

"I don't work in the sex trade anymore. I'd probably be doing the same thing now if I'd never come here"

"In every aspect, literally. I've gotten to know myself. My basic way of life has changed. They give me support. I had really lost my way through years of addiction. I have a better understanding of how exploitation has played a role in my life. I'm in recovery and this is the first time I've stayed with it. I've learned it's okay to share parts of my story. I understand what community is because of Thrive. I feel like everything I've gained here I want to give back to others"

"It's been really positive for my mental health and my addiction. It gives me a routine and something to look forward to. It's like a little family here with the other girls"

"I've gotten to know myself. My basic way of life has changed. They give me support. I had really lost my way through years of addiction. I have a better understanding of how exploitation has played a role in my life. I'm in recovery and this is the first time I've stayed with it. I've learned it's OK to share parts of my story. I understand what community is because of Thrive"

"There are days if they didn't feed me here I wouldn't eat. It's too easy to take a call. If you're hungry, you tell yourself you're doing it for food. But then you have that cash in hand and it's too easy to use."