A qualitative exploration of components that promote resilience for survivors of human trafficking, specifically sexual exploitation, and care workers in the Netherlands

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# Table of Contents

Abstract ......................................................................................................................................... 4

Chapter 1: Literature Review ........................................................................................................ 6
  Background of Human Trafficking for Sexual Exploitation ....................................................... 6
  The Impact and Experience of Human Trafficking for Sexual Exploitation ............................. 8
  Resilience ................................................................................................................................... 10
    Internal factors that contribute to resilience ........................................................................... 11
    External factors that contribute to resilience ......................................................................... 12
  Care Workers ............................................................................................................................. 13
  The Current Study ...................................................................................................................... 14

Chapter 2: Methodology ............................................................................................................... 15
  Design ....................................................................................................................................... 15
  Participants ................................................................................................................................. 15
  Data Collection Procedures ....................................................................................................... 16
  Data Analysis ............................................................................................................................. 18
  Ethical Considerations ............................................................................................................... 19

Chapter 3: Results ......................................................................................................................... 20
  Cross-Case Analysis of Survivor Interviews .............................................................................. 20
    External factors that may contributed to the depletion of resilience .................................... 21
    Internal factors that may contributed to the depletion of resilience .................................... 26
    External factors that contributed to resilience ..................................................................... 28
    Internal factors that contribute to resilience ....................................................................... 31
  Cross-Case Analysis of Care Workers’ Interviews ................................................................. 36
    External factors that may contribute to depletion of resilience ....................................... 37
    External factors that contributed to resilience .................................................................... 40
    Internal factors that contributed to resilience .................................................................... 43

Chapter 4: Discussion and Conclusion ......................................................................................... 48
  Discussion ................................................................................................................................. 48
  Limitations ............................................................................................................................... 50
  Future Research ....................................................................................................................... 51
  Conclusions .............................................................................................................................. 52
COMPONENTS THAT PROMOTE RESILIENCE

References ......................................................................................................................................... 54
Appendix A: Informed Consent: Survivors .................................................................................... 56
Appendix B: Informed Consent: Care-Workers ................................................................................ 58
Appendix C: Consent Declaration .................................................................................................... 60
Appendix D: Audio Consent Addition .............................................................................................. 61
Appendix E: Demographic Questions for Survivor Participants ..................................................... 62
Appendix F: Demographic Questions for Care Worker Participants .............................................. 64
Appendix G: Survivors Interview Guideline .................................................................................... 65
Appendix H: Care Worker Interview Guideline ............................................................................... 68
Appendix I: IRB Approval Letter ..................................................................................................... 70
Appendix J: Certification of Completion ......................................................................................... 71
Appendix K: Tables .......................................................................................................................... 72
Appendix L: Figures .......................................................................................................................... 73
Abstract

Human trafficking is viewed as the second largest global criminal industry. There are many factors that can put an individual at risk for falling victim to this crime, as well as the abuse that they endure while they are used for sexual exploitation. Resilience is the ability to overcome negative experiences and aids in the process of personal growth. There are several factors that contribute to the growth of resilience, both externally and internally. In addition to the significance of building resilience in survivors of human trafficking, it is also important to pay attention to the resilience of the care workers who work with such survivors. This is extremely important in terms of overcoming compassion fatigue. To the best of the researcher’s knowledge, no study has examined resilience in both groups of individuals. This qualitative research study analyzed interviews from both survivors and care workers to assess internal and external factors that contributed to their resilience. In survivors, spirituality and mental health, were strong indicators to their resilience, whereas in care workers support system and mental health had significant influence in their resilience. This study identified several important factors that contributed to resilience and can be used to open the door for further research.
Chapter 1: Literature Review
The following literature review is provided to help the reader develop a deeper understanding of human trafficking, specifically for sexual exploitation, and the individuals that are affected by this crime. This background information is followed by an overview of what resilience is followed by different components that have been studied to help maintain resilience within individuals. Finally, the incorporation of care workers is taken into consideration, as it acts a critical part of this study. The aim is to provide enough information so that reader has an understanding of the different factors that are taken into consideration for this study, as well as the individuals themselves.

Background of Human Trafficking for Sexual Exploitation
Human trafficking is a subject that recently has received more attention worldwide. It is estimated that there are roughly 4.5 million individuals who fall victim to sex trafficking worldwide, the majority of them women and children, and that approximately 500,000 new individuals are trafficked each year (Orme & Sheriff, 2015). However, other sources state that the number of individuals trafficked can be up to 27 million globally (Hodge, 2014). The human trafficking business is viewed as the second largest global criminal industry currently (Silver, Karakurt, & Boysen, 2015); it is projected to earn roughly $30,000 per year per victim (Orme & Sheriff, 2015). Although the worldwide interest in and attention toward this industry is slowly growing, this form of modern-day slavery has been impacting several countries for quite some time. Asia accounts for the most cases of human trafficking; however, in recent decades, Europe and the Middle East have experienced a huge growth in this industry (Orme & Sheriff, 2015).

The definitions used to describe who would fall victim are not consistent worldwide, and this furthers the inconsistency and preconceived ideas about this industry. In 2000, the Trafficking Victims Protection Act (TVPA) defined a victim of sex trafficking as “a person induced to perform a commercial sex act through force, fraud, or coercion regardless of citizenship or national origin” (Gerassi, 2015, p. 591); this was defined by U.S. Congress and only identified individuals as victims if they were minors (under the age of 18). In 2003, The U.N. developed a different definition which states, “any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including but not limited to profiting monetarily, socially, or politically from sexual exploitation” (Gerassi, 2015, p. 592). Prior to this, the U.N. created a Protocol to Prevent, Suppress and Punish Trafficking in Person,
Especially Women and Children (referred to as the Palermo protocol) in 2000, which took effect in 2003 (Hodge, 2014). The Palermo protocol specifically defines human trafficking as the act of “recruitment, transportation, transfer, harboring or receipt of persons (ACTION), 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 (MEANS), for the purpose of exploitation (PURPOSE)” (Hodge, 2014, p. 112). Exploitation is defined as “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” (Hodge, 2014, p. 112).

It is important to point out that the inconsistency with the definition of what exactly counts as human trafficking and whom it affects may pose some difficulty to combat this injustice. The definition provided from Palermo accounts for all forms of human trafficking; however, it is estimated that 50% of human trafficking cases are in the form of sexual exploitation (Hodge, 2014). Sexual coercion and exploitation occur when an individual is forced to engage in sexual activity by means of both nonverbal and verbal actions (Karantzas et al., 2016). These actions can be in the form of sexual abuse and assault, but can also have a psychological aspect, such as violent threats and manipulation (Karantzas et al., 2016). For the purpose of this study, sexual coercion will be the focus in regards to the individuals discussed and the methods used to help them.

The italicized words above in the UN definition (action, means and purpose) represent the three components needed to have an act fall under trafficking (Meshkovska, Siegel, Stutterheim, & Bos, 2015). Regardless of the age of these individuals, one of the ways to tackle this epidemic is to first examine how these individuals are targeted. One way to understand how trafficking occurs is through what is called “push and pull” factors (Hodge, 2014). Factors that involve using a country or a region’s instability as a means to extort individuals fall under the “push” aspect; these include aspects that may promote an individual to want to escape the country they live in, such as poverty, gender-based violence, or an unstable political system (Hodge, 2014). Based on the “push” factors, those who fall victim are typically those who are young, poor, and female. On the other side, the “pull” factors are associated with perceptions and expectations one may have on the desired location, such as perceived opportunities for a better
COMPONENTS THAT PROMOTE RESILIENCE

life and an image generated by media and stories of success and growth (Hodge, 2014). Traffickers use dishonesty and fraud to recruit by promising work and the possibility for a better life in a new location.

**The Impact and Experience of Human Trafficking for Sexual Exploitation**

The “push and pull” factors are at the root of how individuals are targeted. Individuals are promised new opportunities and the ability to work and generate an income from which they may be able to send money to their families back home, who are struggling due to the economy or their living situation. Once they have arrived in the new country, they soon discover that what they were told were lies and are forced into the sex industry. Many factors contribute to how the traffickers maintain power; being surrounded in a new culture with a different language, they may not have the means to return home, and they likely fear for their family’s safety. Thus, lack of resources and fear are used in the power control (Jones, Engstrom, Hilliard, & Sungakawan, 2011).

One study interviewed four different women who were trafficked from Thailand to Japan and explored the different factors that aided in their recruitment and enslavement (Jones et al., 2011). With all the women, the promise of money and financial support they could provide to their families back home were major contributing factors to their decision to go; however, they were unaware of the financial debt they would be putting themselves in with the traffickers: “the traffickers lured the women with assurances that money would not be required of them and the lack of a passport and travel documents would not be obstacles” (Jones et al., 2011, p. 206). Of the four women, one was illiterate and although the others did have some education, poverty kept them from advancing further. Lack of education was utilized by the traffickers when describing the jobs that were available and the means of going from one country to another without the need of a passport (Jones et al., 2011). After arriving at their destination, the women quickly learned that their debt with the traffickers started with their travel expenses.

Once in the sex trade industry, the proverbial light at the end of the tunnel can seem to not exist. There are many different outcomes that can transpire when a trafficked individual is finally free from being trafficked. Some are left to continue working in different aspects of the sex industry, such as independently, simply because they do not know any other way to support themselves and their families. Others may have their debt paid off only to find that they were sold to another brothel. Some may try and escape only to be re-abducted and punished for trying
to leave or even killed to be made an example for others. Regardless of how they exit, they need a place where they can go to receive help and guidance while trying to rebuild their life. However, this is not always possible, especially if the individual has not received proper documentation for residency. Every country is different in regards to what they require in order for an individual who has been trafficked to obtain legal residency. The Netherlands was the country in which this research was conducted, therefore its legal requirements are taken into consideration. According to the website of the European Commission (n.d.), in the Netherlands, individuals are given a grace period by the government in which they receive temporary residency which provides them three months to decide if they want to press charges and go through the legal process. According to a leaflet provided by FairWork (n.d.), if the individual decides to press charges, they are issued a B9 permit by the Immigration and Naturalization Services (IND), which is valid during the police investigation. This can take any length of time, but in the event that it takes years, the individual is able to renew their B9 residency permit annually (FairWork, n.d.). If the police decide that there is not enough information to find and prosecute the trafficker, then the case will end, which also means that the B9 permit is also terminated; the individual in this situation may have their lawyer appeal this decision (FairWork, n.d.). In the event that the case is brought to court, the judge will decide if there is enough evidence and, if so, sentence the trafficker; once this happens the B9 permit is also terminated (FairWork, n.d.). If the individual’s trafficker is convicted, if the B9 permit has been renewed over the course of three years (during which the investigation was active), or if the individual is able to show proof that there is an immediate threat to them if they were to return to their native country, then the survivor is able to apply for permanent residency in the Netherlands (FairWork, n.d.). This process can take a considerable amount of time and may contribute greatly to the amount of stress that these survivors are already experiencing. However, it is important to also keep in mind that although there is this legal aspect, there are many other factors that play a major role in the promotion and sustainability of resilience.

Furthermore, there are many other necessities that need to be provided for these individuals, such as support services, assistance with employment, healthy and secure relationships, and education. The combination of these different elements is what helps these individuals to transform from victims to survivors. On a personal level, the road to recovery is a long one that takes time and guidance. There are external components that survivors may have to
battle almost immediately. We first explore some external obstacles (brought on by society) followed by internal components (within the survivors) that all play a crucial role in this process. For the purpose of this study, the term “victim” will be reserved for individuals who are still being trafficked and exploited, whereas “survivor” will be used to refer to individuals who are no longer being trafficked and are engaged in a program that aids in their recovery.

One focus when dealing with survivors is helping them to develop and harvest resilience. To develop a fully comprehensive outlook, attention also needs to be given to the advocates and care workers who dedicate their lives and work to helping to fight human trafficking by working directly with survivors. For the purpose of this study, the title “care worker” will represent an individual who is actively working with those affected by human trafficking, within the context of a support program in the Netherlands. As with those who are directly impacted from being trafficked, care workers are also exposed to different elements that may pose difficulty for the longevity in this field. This aim of this study is to examine how resilience is promoted and sustained for the survivors of human trafficking, specifically sexual exploitation, and for the care workers who work with such victims.

**Resilience**

Resilience is the key to overcoming negative experiences and begins the growth that one needs to learn to move on. While one’s level of resilience is partially due to their personal ability, it is also closely associated with social and physical resources that are provided for them (Hickle, 2017). Resilience is defined as the ability to adapt when exposed to adversity or trauma (Ledesma, 2014). While this definition may be typically what comes to mind when one thinks about resilience, it has been noted that outside of Western culture, resilience may have other layers to consider. When considering the culture surrounding one’s environment in this definition, these additional components have been addressed: “exposure to significant psychological and/or environmental adversity the capacity to find health-sustaining resources; opportunities to experience well-being; and family, community and culture providing these resources in ‘culturally meaningful ways’” (Gray et al., p. 364). This is particularly important since a majority of individuals being trafficked are from non-Western countries (Jones, Engstrom, Hilliard, & Sungakawan, 2011). This is yet another layer that needs to be considered when working with this population. In addition, a three-dimensional model has been developed to help integrate resilience. The three components involve how quickly one recovers from stress;
the ability to maintain self-purpose when in stressful situations; and the capacity to grow mentally (Castro & Zautra, 2016). In other words, one’s ability to develop resilience may stem from their ability to process the traumatic event and the way in which they view the situation (Peres, Moreira-Almeida, Nasello, & Koenig, 2007). When one looks at all of the different components associated with resilience, it is easy to understand that there is a lot of consideration and work involved in restoring an individual from a traumatic event.

**Internal factors that contribute to resilience.**

(Re)integration is one of the first steps when an individual has been identified and removed from a trafficking situation (Meshkovska, et al., 2015). This process involves “settlement in a safe and secure environment, access to a reasonable standard of living, mental and physical well-being, opportunities for personal, social and economic development and access to social and emotional support” (Meshkovska, et al., 2015, p. 390).

There are six internal components that will be examined that deal directly with resilience: physical activity, mental health, spirituality, emotional state, hardiness, and coping styles. Physical elements of resilience involve taking into account and implementing a healthy lifestyle with proper nutrition and plenty of sleep. These are important for one to keep a clear head and make sure that their body is being fueled properly. The mental aspect involves self-control, perspective, and one’s ability to focus. This also plays a role in anticipating a stressful situation. The emotional dimension of resilience focuses on being able to identify one’s emotions and work through them. When we are able to identify our emotions associated with an event, we are then able to work through them and come to a resolution. This also plays a role in keeping a realistic optimism about ourselves.

Spirituality can play a large role in helping survivors overcome their traumatic experiences. Regardless of which religion or form of spirituality is chosen by the individual, having faith in a higher power can help to build positive emotions, allowing survivors to learn forgiveness in themselves, and help to alleviate depression (Brewer-Smyth & Koenig, 2014). Additionally, spirituality can give hope and act a shelter. One study found that although spirituality was not a protector against developing PTSD after experiencing a traumatic event, it rather served as a coping mechanism (Connor, Davidson, & Lee, 2003). It also fosters an environment which allows the growth of bonds with other individuals (Brewer-Smyth & Koenig,
COMPONENTS THAT PROMOTE RESILIENCE

2014), who may have experienced similar traumatic events. These bonds are essential as they help build a support system for the survivor.

Hardiness is a definition used to describe an individual’s capacity to look at the positive side of a situation even when faced with extremely difficult situations (Ledesma, 2014). There are three components that encompass hardiness: “being committed to finding meaningful purpose in life; belief that one can influence one’s surroundings and the outcome of events; belief that one can learn and grow from both positive and negative life experiences” (Ledesma, 2014, p. 4). This is important when it comes to resilience as it is up to the individual to take control of the situation and try to see the positive and potential growth. In addition to all of these components, coping is essential to building and sustaining resilience. Coping is thought to be the result of a behavioral response to an event, based on one’s appraisal of that situation and their belief in dealing with it (Grych, Hamby, & Banyard, 2015). Over time, one can learn to implement healthy coping skills (i.e., removing themselves from a situation to gather their thoughts) to help overcome stressful situations.

**External factors that contribute to resilience.**

While all the components discussed above are internally felt, another important consideration is the external factors. Support systems are extremely important when it comes to building and sustaining resilience (Ledesma, 2014). Interpersonal strengths are important because they help one to build close relationships; these relationships are considered to be a protective factor against adversity (Grych et al., 2015). Within these relationships, there should be safety and strength, which are essential to have and maintain, especially when overcoming traumatic events. Developing a support system and network has a crucial part in helping an individual build and maintain resilience, especially after a traumatic event (Suzuki, Geffner, & Bucky, 2008). One study found that having a strong support system not only provided a safe and reliable relationship with another individual but it also allowed the exchange of ideas, beliefs, and suggestions; both of which were considered important aspects in the development of resilience (Suzuki et al., 2008).

Though spirituality is an internal factor that may contribute to resilience, it also provides a social support system. Extrinsic support is the implementation of a community that one belongs to, such as a religious community (Brewer-Smyth & Koenig, 2014). This positive outcome of support manifests in both providing support and receiving it. Having a support system that
COMPONENTS THAT PROMOTE RESILIENCE

provides advice, understanding, and positive influences are believed to contribute to an individual’s resilience (Brewer-Smyth & Koenig, 2014).

While both the internal and external factors discussed can be applied to both survivors of human trafficking and the care workers that work within the field, another component should be taken into consideration in regards to the care workers. Not only are the care workers exposed to the traumatic stories of the survivors they are working with, they may also be exposed to other aspects of the job that can create difficulty in maintaining resilience within the field, which in turn can have an impact on their longevity of their career.

**Care Workers**

Compassion fatigue (CF) has been described as “a state of tension and preoccupation with the traumatized patients by re-experiencing traumatic events, avoidance/numbing of reminders, and persistent arousal associated with the patient” (Gentry, Baggerly, & Baranowsky, 2004, p. 4). While there has been some focus on the need for empathy to be implemented, CF has not been viewed as a by-product of this empathy. It also has the power to drain and lessen one’s drive to work in certain fields. CF can manifest in different ways, some of which can be intrusive thoughts and images, anxiety, and avoidance (Franza, Del Buono, & Pellegrino, 2015). Charles Figley, who has done much research into the effects of CF, once said “there is a cost to caring. Professionals who listen to clients’ stories of fear, pain, and suffering may feel similar fear, pain, and suffering because they care. Sometimes we feel we are losing our sense of self to the clients we serve” (Franza, et al., 2015, p. 321). As a result, professional errors, such as misjudgments and lacklustre treatment plans, can occur (Franza, et al., 2015, p. 321). In addition to CF, secondary traumatic stress (STS) can develop. SFS is defined as “the natural consequent behaviors and emotions resulting from knowing about traumatizing event experienced by a significant other- the stress resulting from helping or wanting to help a traumatized or suffering person” (Figley, 2002, p. 1435).

Another thing to consider is the resilience that the organization of the care workers employment has. The term ‘organizational resilience’ indicates the environment that the company provides that fosters and promotes career sustainability for their employees (Ledesma, 2014). For an organization to have resilience it should be able to provide feedback and support while also recognizing and rewarding their employees (Ledesma, 2014). These organizations strive to employ individuals that are able to response quickly to difficult situations while also
COMPONENTS THAT PROMOTE RESILIENCE

building patience and skills that help them to adapt to unforeseen circumstances (Ledesma, 2014). This is particularly important for individuals that work in the field of human trafficking, as they may be exposed to difficult and emotionally driven situations. It is the skills that these individuals develop that may aid in their resistance to CF and potentially secure the ability to sustain working with this demographic for an extended period of time.

The Current Study

The current study seeks to explore the components that promote resilience for survivors of human trafficking engaged in a support program within the Netherlands, as well as for their care workers. Specifically, what are the different aspects that promote resilience in both survivors of human trafficking and their care workers? While the literature cited above examines resilience and how it is developed for survivors of human trafficking, specifically sexual exploitation, there is not much that looks at how different elements (both internal and external factors) may help aid this process. This can include coping skills that they had prior to establishing their freedom from being trafficked, which could potentially be a stronger predictor of their ability to build resilience. Another element to take into consideration is the impact and influence external factors may have on building resilience, such as support systems. It should be noted that external factors also play a role in one’s perception of self-worth and personal strength.

There is some literature on how individuals who work with trauma victims can be affected by their work, for example, police officers and therapist. However, to the best of knowledge of the researcher, there is little to no research that explores how resilience is utilized and maintained for the benefit of the care workers and advocates working in the field of human trafficking. This is an extremely important aspect within this field, as these workers are subjected to compassion fatigue and burnout. It is of interest to see what these individuals have implemented into their lives to help combat the negative consequences of working within this field. In addition, it would be of interest to see if there is something provided or structured through their job that allows them to achieve the best possible outcome. This study aims to look at all of these components and determine how they can be implemented to benefit both parties involved. Therefore, this study seeks to answer the following research question: which components best promote resilience among victims of human trafficking for sexual exploitation, and among the care workers who work with such individuals?
Chapter 2: Methodology

Design
This is a non-experimental, qualitative research study. The data were collected through interviews conducted (one per participant). The decision to conduct this research as qualitative was based on the ability to develop detailed stories that describe the phenomenon that is resilience. It is the hope that through these detailed stories, that a better understanding can be developed on how resilience is promoted and sustained, from both a survivor and caregiver standpoint within the field of human trafficking. In addition, it is of interest to see how resilience is understood and experience by these individuals, as well as how it interacts with other factors in their lives. The focus will be on describing the subjective experiences of those involved (survivors and caregivers) as opposed to an experimental approach that observes behaviors in a natural setting.

Participants
The participants of the research consisted of two groups: survivors and care workers. Survivors were individuals who had been trafficked in the past and have since broken away from pimps and/or traffickers. The two inclusion criteria for survivors to participate in this study were: they must have been over the age of 18 and been involved in a support program in the Netherlands at the time of the interviews.

The survivors were recruited from a non-governmental organization (NGO) located in Amsterdam, NL. The NGO works directly with survivors of human trafficking, specifically undocumented individuals. This means that all of the individuals who were interviewed for this research were living in the Netherlands at the time of the data collection and have gone through the legal process unsuccessfully. As previously discussed, in the Netherlands, individuals are given a grace period by the government in which they receive temporary residency which provides them time to locate and produce their trafficker.

The survivors of this NGO were approached by the researcher and asked if they would be interested in being interviewed for this study. They were informed that all identifying information provided would be kept confidential. The survivors were informed that, with their permission, the interview would be audio recorded so that the interview could be transcribed afterwards. In addition, the survivors were informed that once the interview was transcribed, the audio recording would be destroyed. The survivors were informed that choosing not to be interviewed would not have any negative consequences to them or their participation in the
NGO. In addition, the survivors were informed that there would not be any financial compensation for participation in the study.

In addition, snowball sampling was introduced as a method of recruiting other survivors; the individuals in the NGO were asked if they knew of anyone in their network that would be interested in participating in the interview. Failure to recruit other participants would not cause any negative consequences to the existing survivors or their involvement in the NGO.

Care workers are represented as individuals who work directly with survivors of human trafficking. The inclusion criteria required for care workers to participate in this research were that they be over the age of 18 and that they be working directly with survivors of human trafficking in some capacity within a support program in the Netherlands. The care workers were recruited from various different NGO’s within the Netherlands. They were contacted via email and/or telephone call and asked if they were interested in being interviewed for the study. The care workers were informed that all identifying information provided would be kept confidential. The care workers were informed that, with their permission, the interview would be audio recorded so that the interview could be transcribed afterwards. In addition, the care workers were informed that once the interview was transcribed, the audio recording would be destroyed. The care workers were informed that there would not be financial compensation for participation in the study.

**Data Collection Procedures**

In-depth interviews were designed to address the phenomenon of resilience from two different angles; the perspective of the survivor and that of the care-taker. The questions were designed as open-ended and neutral, to guard against leading the participants to the desired response. The participants were interviewed individually, face-to-face, in a private setting. Before the interview began, the participants were provided with an informed consent form which explained the purpose of the study and the confidentiality expectations. Two separate informed consent forms were developed, one for the survivors (Appendix A) and one for the care workers (Appendix B). This was due to the nature of the questions and the background of the participant. In that, the survivors were being asked to describe three different time periods in their lives: before, during and after being trafficked. The care workers were asked about two separate time periods: before and while working in the field. Due to the difference in the structure of the interview, two informed consent forms were designed. In addition, the risk of emotional and psychological
stress was believed to be different based on the participant. This was taken into consideration, therefore the risks involved by the different participant group were explained thoroughly in the appropriate consent form. Both groups were asked to sign the consent of declaration, stating that received a copy of the informed consent form (Appendix C). The participants were provided with an audio recording consent form (Appendix D).

Interviews with the survivors:

**SURVIVORS**

<table>
<thead>
<tr>
<th>ID</th>
<th>Age</th>
<th>Sex</th>
<th>Nationality</th>
<th>Marital Status</th>
<th>Children</th>
<th>Education</th>
<th>Legal Status</th>
<th>Support Status</th>
<th>Age at Trafficked</th>
<th>Date of Arrival to NL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>50</td>
<td>Female</td>
<td>African</td>
<td>Widow</td>
<td>7</td>
<td>High school</td>
<td>Documented</td>
<td>Yes</td>
<td>41</td>
<td>2013</td>
</tr>
<tr>
<td>2</td>
<td>27</td>
<td>Female</td>
<td>African</td>
<td>Divorced</td>
<td>2</td>
<td>Bachelor+</td>
<td>Undocumented</td>
<td>No</td>
<td>26</td>
<td>2017</td>
</tr>
<tr>
<td>6</td>
<td>44</td>
<td>Female</td>
<td>African</td>
<td>Married</td>
<td>1</td>
<td>High school</td>
<td>Undocumented</td>
<td>No</td>
<td>19</td>
<td>2011</td>
</tr>
</tbody>
</table>

*Table 1: Demographics for the Survivors interviewed. *Bachelor + indicates completion of a program beyond Bachelor’s degree.*

The researcher implemented the use of an interview guideline which was designed to probe three main themes: Resilience prior to being trafficked; resilience while being trafficked; resilience after having been trafficked (Appendix G). Within each category, the following internal components were explored: physical activity, mental health, emotional state, spirituality, hardiness, and coping style, as well as the external component of support systems.

Interviews with the care workers:

**CARE WORKERS**

<table>
<thead>
<tr>
<th>ID</th>
<th>Age</th>
<th>Sex</th>
<th>Nationality</th>
<th>Marital Status</th>
<th>Children</th>
<th>Education</th>
<th>Currently Working</th>
<th>Duration of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>34</td>
<td>Female</td>
<td>Netherlands</td>
<td>Single</td>
<td>0</td>
<td>Bachelor</td>
<td>Yes</td>
<td>More than 5 Years</td>
</tr>
<tr>
<td>4</td>
<td>37</td>
<td>Male</td>
<td>Netherlands</td>
<td>Married</td>
<td>3</td>
<td>Bachelor+</td>
<td>Yes</td>
<td>More than 5 Years</td>
</tr>
<tr>
<td>5</td>
<td>60</td>
<td>Female</td>
<td>Europe</td>
<td>Married</td>
<td>1</td>
<td>Bachelor+</td>
<td>Yes</td>
<td>More than 5 Years</td>
</tr>
<tr>
<td>7</td>
<td>31</td>
<td>Female</td>
<td>Netherlands</td>
<td>Single</td>
<td>0</td>
<td>Bachelor</td>
<td>Yes</td>
<td>Less than 5 Years</td>
</tr>
</tbody>
</table>

*Table 2: Demographics for the Care Workers interviewed. *Bachelor + indicates completion of a program beyond Bachelor’s degree.*

The research implemented the use of an interview guideline which was designed to probe two main time periods: before beginning work in this field and while working in the field (Appendix H). Within each category, the following components were explored: physical, mental, emotional,
COMPONENTS THAT PROMOTE RESILIENCE

spiritual, hardiness, coping style, and support system. In addition to these categories, the care workers were asked questions regarding their career choice, specifically concerning the contributing factors that persuaded them to get involved in this field and their resilience while working in their career.

All interviews were designed to address several categories, both internal and external, as mentioned above. The categories were designed to try to identify common themes. For example, when asking about daily routines and physical wellness, the goal was to identify whether or not there is a connection with exercising and positive outlooks. All questions were open-ended, which provided meaningful answers based on the participants’ personal experience and feelings.

The interviews were conducted and recorded (with permission) and then transcribed by the researcher. Great consideration was taken to maintain confidentiality. Any identifiable information was depersonalized and coded to ensure the anonymity of the participants.

Data Analysis
Once the interviews were completed, the researcher transcribed the content by using the audio recording. Once the transcription was completed, the audio recording was destroyed. Dedoose software was used to analyze the data from the interviews. The researcher coded the interviews to help organize ideas and concepts. The codes were divided into categories: parent codes and child codes. The parent code “internal factors that contribute to resilience” were grouped with the child codes: “physical activity”, “emotional state”, “hardiness”, “spirituality”, “mental health”, and “coping styles”; this code was used for both survivors and care workers interviewed. For survivors, the parent code “external factors that contribute to resilience” were grouped with the child codes: “support system” and “NGO support”, and “government support”. For care workers, the parent code “external factors that contribute to resilience” were grouped with the child codes: “support system”, “personal expectations of support system”, and “boundaries”.

During the progress of analyzing the data, another theme emerged: factors that contribute to the depletion of resilience. This theme was organized into external factors and internal factors. For the survivors, the parent code “external factors that contribute to the depletion of resilience” were associated with the following child codes: “past hardships”, “the process of being trafficked”, “physical abuse”, and “lack of resources”. “Internal factors that may contribute to depletion of resilience” for survivors were associated with the following child codes: “fear of telling their families” and “intense emotional sadness and guilt”. With regards to the care
workers, “external factors that contribute to the depletion of resilience” were identified and assigned child codes “cultural comparison”, “past hardships”, and “work stress”. There were no internal factors that contributed to the depletion of resilience in the care workers’ interviews.

The results of the interviews are presented in a cross-case analysis. Cross-case analysis provides the researcher with the ability to develop ideas by examining multiple sources of personal experiences (Khan & VanWynsberghe, 2008). This method was utilized in order to show common themes that were identified throughout all the interviews while connecting these themes to suggest the connection they have to the promotion and sustainability of resilience (Khan & VanWynsberghe, 2008). In addition, presenting the findings of the study in a cross-case analysis allows the researcher to develop a deeper understanding and knowledge of the phenomenon of resilience.

**Ethical Considerations**

Approval to carry out this study using human subjects was obtained from the International Review Board of Webster University (see Appendix I); Certificate of Completion from The National Institutes of Health (Appendix J).

Due to the nature of the study, much consideration was taken in regards to the safety and preservation of confidentiality of the survivors interviewed. The survivors that were interviewed were undocumented in the Netherlands. This meant that they did not have legal documents to be in the country and therefore further consideration was taken to maintain all identifying information was kept confidential. The survivors’ names were not associated with any part of the study. With the survivors’ consent, the interviews were audio recorded for the sole purpose of allowing the researcher to transcribe the material. The transcriptions of the interviews were coded to ensure privacy and confidentiality. Once the interview was transcribed, the audio recordings were destroyed; no one listened to the audio recordings except for the researcher. The survivors were given the option to listen to their recordings after the interview was conducted.

The same consideration and procedure were implemented for the care workers that were interviewed. The care workers’ names were not associated with any part of the study. In addition, the organization that the care workers were associated with was not included in the content of the research study. With the care workers consent, the interviews were audio recorded for the sole purpose of allowing the researcher to transcribe the material. The transcriptions of the interviews were coded to ensure privacy and confidentiality. Once the interview was transcribed, the audio
recordings were destroyed; no one listened to the recordings except for the researcher. The care workers were given the option to listen to their recordings after the interview was conducted.

All of the transcriptions of the interviews were stored and encrypted on a password protected laptop to prevent unintentional breaches of confidentiality in the event the storage device was lost or stolen. Once the study was completed, the transcriptions were handed over to Webster University to be archived.

Chapter 3: Results
The findings have been separated into two groups: survivors and care workers. The decision to separate the findings in this manner was determined based on the research question itself; what components promote and sustain resilience in survivors of human trafficking, specifically sexual exploitation, and the care workers that work in this field? The purpose of this study was not to see whether there was any overlap of these components between the two groups.

Cross-Case Analysis of Survivor Interviews

Figure 1: Map of all themes and related codes for Survivors.

The following cross-case analysis examines the two main themes distinguished by the design of the interview: external factors that contribute to resilience and internal factors that contribute to
COMPONENTS THAT PROMOTE RESILIENCE

resilience. As a result of the interviews, another theme emerged: factors that may contribute to the depletion of resilience. The purpose of this study was not to examine these aspects; therefore, it is not known if these factors did actually cause a depletion of resilience. It is believed that having these added stressors may have the potential to lessen one’s resilience. Since this study did not explore these factors further (as they emerged as a result of data analysis) they will be referred to as “factors that may contribute to the depletion of resilience”. These factors will be explored first (divided into internal and external), followed by the themes that are related to the research question: what external and internal factors promote and sustain resilience? The following quotes were selected to help illustrate the data collected, not all quotes related to each theme are presented.

Table 3: List of themes with frequency count totaled from all survivors’ interviews.

<table>
<thead>
<tr>
<th>External Factors That Deplete</th>
<th>Frequency</th>
<th>Themes</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of resources</td>
<td>9</td>
<td>External Factors that Contribute</td>
<td></td>
</tr>
<tr>
<td>Physical Abuse</td>
<td>7</td>
<td>Support System</td>
<td>21</td>
</tr>
<tr>
<td>Process</td>
<td>4</td>
<td>Government Support</td>
<td>2</td>
</tr>
<tr>
<td>Past hardships</td>
<td>9</td>
<td>NGO Support</td>
<td>6</td>
</tr>
<tr>
<td>Internal Factors that Deplete</td>
<td></td>
<td>Physical Activity</td>
<td>8</td>
</tr>
<tr>
<td>Fear of telling family</td>
<td>7</td>
<td>Spirituality</td>
<td>19</td>
</tr>
<tr>
<td>Intense Emotion</td>
<td>13</td>
<td>Coping Styles</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hardiness</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mental Health</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Emotional State</td>
<td>13</td>
</tr>
</tbody>
</table>

**External factors that may contribute to the depletion of resilience.**
External factors that may contribute to the depletion of resilience are defined as any outside influence that cause extreme stress to an individual. This was identified in several forms: past hardships, the process by which the women were trafficked, a discovery of their situation, physical abuse, and lack of resources.
1. Past Hardships. Hardships are defined as experiences resulting from a difficult situation. The following quotes are representations of different events the women went through, either prior to being trafficked or while they were actively forced into sexual exploitation. The purpose to providing the hardships is to allow the reader to have an understanding of the process these women went through.

“that was in Nigeria. I came from a poor family. A family of 9. My mother has 9 children, 6 boys and 3 girls. One of the girls died a few years ago, so now we are 8 in numbers. I am the 6th born of my mom. We find it difficult to feed and to go to school because in Nigeria you have to pay school fees from primary school to secondary school. You have to pay for the fees yourself, no help from the government. The situation was so difficult for me. I was managing going to school until I go SS3 (final year in secondary school). I have a friend who got this connection for travel and she told me about it and I accept it. I did not tell any of the family. So after the final year of my secondary school I have to travel with her to Lagos. That was my first time being in Lagos. Going to see the agent, he promised to take us abroad. They told us we are going to pay when we get abroad. The other truth that they didn’t tell us was that we were going to prostitution.” (06)

“The difficult situation is when I lost my daddy, that’s when the problem start. When my daddy died, he left some property, big company, church. Well the person like my daddy be, well he collect everything so that’s when I lost my mommy on the road, when the violence start. So, when this man killing people one by one, so everyone have to run. So that’s when we scattered.” (02)
“It is when I find my way that I met my friend. I say we can stay together, that’s when I started my friend. Before my husband caught two of us. That are the two problems I face. In Nigeria, when you do that kind of thing, because my husband is a Muslim, they have to throw you by stone. That’s when we split and they are still looking. Those are the two problems that I have to escape from Africa. Which is why I can’t go back home.” (02)

“That was when I lost my husband and we were living in Nigeria. So, after the death of my husband, I was having 4 children, so it was difficult for me to have the children alone. All of his family took all of his property away. Then, I was working as a hairdresser in a salon near my area in Lagos.” (01)

2. The process of being trafficked. The following quotes are provided to help explain the stories of the women interviewed as for how they discovered that they were victims of human trafficking.

“He brought me to Netherland. And then he told me that, yea we have come to Netherlands now, so you have to start working. And then I say ok, when are we going to your company. He said no. he say I have to work as a prostitute. Then I told him no. you didn’t promise me this and this is not our agreement. He say, no I have to work. So, then I started and he said I was going to pay him, the sum of 100,000, he said because that’s the money that he spent on me and my children when we were in Nigeria, and after we came here, he sent some money to my children. He said I’m going to do it, I’m going to pay 100,000. And that is why I started working and I started to give him the money. So, the decision was because I could not help it.” (01)

“When I get to Italy, they collected my passport, everything you had that you could contact your family, address. Then, there was no phones, so if you want to have contact with your family you play cassette with your voice and mail it to them or you write a letter. Everything that would make you contact your family was taken away. They told us that we had to do prostitution to pay our money back. They told us there was nothing we could do, because you don’t know anybody, you don’t have anybody abroad.” (06)
“So then that is when I met the man that became my trafficker. He came and said yeah, he working and living in the Netherlands. And that he has a company and if I can go to the Netherlands, then he can, he will help me and I will be working in his company. So, I don’t have any problem if I want to go. It’s better for me that I will send money to take care of my children. And then I say I will think about it. And then I think about it, I say its ok, I will do. And then he told me that he liked me and wanted me to be his girlfriend and that when we go there, he is going to marry me. So, we started dating, a relationship.” (01)

“you arrive in Italy, you will be sold to someone else. We were not sold to the same person. Somebody else came and buy her, and someone else buy me. What I mean by sold, the agent that brought you at the rate, for example, 10,000 euros. Then they will sell you at the rate of 20,000 euros to someone else in Italy. Then the person who bought you for 20,000 euros will ask for 40,000 euros from you. That is how it works.” (06)

3. Physical abuse. Traffickers often rely on physical and sexual abuse as a way to maintain power over the victims. The following quotes describe the abuse these women were subjected to once they had been trafficked.

“then he started beating and punishment, a lot of difficulties. So, I have no choice and he is telling me that, if you don’t go, if you don’t do it, you cannot go” (01)

“I don’t like to talk about it. Because when I talked about it, I feel so bad. Because I really went through a lot of difficulties; I passed through hell in the hands of these people. They really mistreat us by maybe you refuse to go to work, they call it work, they will send some guys, men, to beat you mercilessly...the stress was too much for me, the beating and the injuries and everything.” (06)

“when this man, that collect the properties, looking for everyone to kill. He was using people to look for me and also to kill us, the problem... this man sent those guys also before, before using the guns to look for me, they come to my working place when I was closing, during the
afternoon. So, they take me to rape me... bad thing that happened to me was they raped me. Like 3, 4 men sleep with me at once. It’s so difficult.” (02)

“he can come and get me so that I can go and take his children to school and when they are sleeping. It’s when I’m there with the man the wife always travel. This man forced to sleep with me.” (02)

4. Lack of resources. Lack of resources refers to being in a new country with no proper documentation and no support system to rely on. In addition, it also refers to the fear these women had in feeling safe seeking out guidance and help from police. The following quotes provide some examples of the fears these women had as well as the severe isolation that was forced on them.

“if you talk to police, you are going to die. We will kill you. If you go to police, the police are going to arrest you, you know. When you come to a place and you don’t know anybody, you are just a new and you don’t know what is happening. And I didn’t see anyone to talk to, because they don’t give me a chance. They wouldn’t let me go out. Like a slave.” (01)

“You can’t even go to the police, because they will make us understand that when you go to the police, they police will send you back to Africa. And then you will have problem with the sponsors there. Back home, you have a big problem with them, your family.” (06)

“I decided to get pregnant. When I’m pregnant, they discover, and they ask to take me somewhere to terminate the pregnancy. And I say no. I can’t because I don’t want to die. Then, they drive me out of the house. Then I have to go and stay in a church. And I was in that church until I deliver my baby, first girl.” (01)

“he drive me out with my son, we went out. That is when I slept in the metro before I went to the church. I saw someone that took me to the church. I was sleeping at the train station, I don’t know anybody, so I met somebody that brought me to the church so I started sleeping there. Until I delivered, so the church helped me during that time. They gave me a room for me with the baby. And I was sleeping there.” (01)
“Sometimes I couldn’t sleep I just be on the night train, up and down,” (02)

All of these quotes represent different aspects and situations that these women endured as a result of being trafficked. In addition, all of these situations were ones that were fueled by deceitfulness and lies, abuse and not having legal resources to rely on for help. In that, they are all aspects that are a product of these women’s situation; external. However, it is important to keep in mind that these external events have an influence on the women’s internal feelings and emotions. This important component can cause more stress and pain, which in turn can diminish the resilience of the women.

**Internal factors that may contribute to the depletion of resilience.**
Internal factors that may contribute to the depletion of resilience will be defined as emotions or feelings experienced by the individual that negatively impacts the overall stress of the situation. These factors will be presented in two ways: fear of telling their families (both due to shame they felt and fear for their family’s lives) and the intense emotions involved (specifically sadness, guilt and fear).

![Figure 3: Map of themes related to internal factors that contributed to the depletion of resilience for survivors.](image)

1. Fear of telling their families. A common theme with the women that was identified involved not telling their family back home in Nigeria what had happened to them. This was a result of shame of what had happened to them and fear for their lives and their families. The following quotes are provided to help to understand why these women feared telling their families back in Nigeria what had happened to them.

   “He (my trafficker) went to Nigeria and get my brother. And my brother called me and asked me what is happening. And I told him everything, that’s my younger brother. That this is what is
happening, that this man is doing. So, he and my brother they met. And my brother attacked him, that what you did is no good, this and that. So, from there, he invited my brother to a restaurant and he added poison to his drink so my brother got drink and he died. I lost my brother because of that. That was 2012, no 2010. Feb 17. Because of this issue. So, so yeah that is when that is when this got worse.” (01)

“to tell you the truth, I never told my family that I was doing prostitution because it would break their heart. Especially where I come from, in eastern Nigeria, when they hear that a woman is a prostitution, it’s a taboo...Your family will disown you, you will not find a husband, you will just be an outcast. So, I couldn’t tell any of my family. They never knew I did such a thing. I hide it from them.” (06)

“In Nigeria, the rich ones, when you call police for the rich men, the police will not even hear anything that you say. The rich men will pay you money and they will oppress you, even when you are right. So, I couldn’t say it, I didn’t want my family to go through that problem.” (06)

“I do not want my son to know everything that I went through. To know that his mother was a prostitute. I didn’t want him to know. K is very intelligent. So, I don’t want him to feel bad.” (06)

2. Intense emotions. Not only was it the actual series of events that the woman lived through, but also the creation of emotional sadness, fear, and guilt that became a result of the outcomes of being trafficked. The quotes provided help to explain some of the emotions involved that caused these women great sadness and fear.

“Each time I remember about my brother, I feel sad... He died because of me” (01)

“I lost everything because I cannot stay there because of this man. He even sent men to set my house on fire.” (02)

“if you got sent back because you haven’t paid the money. They will make a big problem with your family and involving killing. Physically killing and spirituality...a lot of people believe in
COMPONENTS THAT PROMOTE RESILIENCE

Voodoo. In Africa, there are 2 types of voodoo, there is one that believes in someone like we believe in Jesus. They don’t do evil with it, they just believe and it keeps them going and keeping them alive and helping them in whatever they need. And then there are a lot of people who believe in doing voodoo by hurting other people by poison them, killing. Out of jealous and wickedness.” (06)

“I do not sleep... And I know it’s because I cannot rest. So maybe too much of thinking, my mind is not at rest. Think of my children, the way I’m living here I’m no ok. So, I didn’t sleep good.” (02)

“I don’t sleep. Because every time my mind is there, this man is going to kill me. Even up to now, if you go to my address is secret. If you go there and ask, they won’t let you. Only I allow you to know my address or where I am living. Its confidential.” (01)

“they came one day, to fight me in my house. I said enough is enough, what is all of this. So, I have to face them also. My son heard everything that they were saying; ‘you don’t want to pay me, I will kill you. I will end voodoo to you and your son.” (06)

After hearing these women tell their stories, it was clear that there was more to the horrible situation that just being trafficked for the purpose of sexual exploitation. To feel shame from what had happened to you and not be able to communicate with your family deepens the pain of the experience. To internalize all of this suffering in order to protect their families’ well-being is a burden far greater than one can imagine. However, in going through these horrible events, these women were able to pull through and survive, enabling them with a new-found strength. This strength was developed as a result of the resilience these women have, which was nurtured through both external and internal elements.

External factors that contribute to resilience.
External factors that contribute to resilience are defined as any outside influences that provide relief from the stress an individual is experiencing. These factors were identified in two main categories: support systems and the influence of the government and/or the support program (NGO) that the women were involved with in the Netherlands.
COMPONENTS THAT PROMOTE RESILIENCE

1. Support systems. For the purpose of this section, support systems are defined in two ways: providing support to others and receiving support from others. The quotes below are provided to show different forms of these support systems that the women had either prior to being trafficked or after gaining their freedom from being trafficked.

“we (my husband and I) advised each other. He was going to his company, because he had his own company, and he was civil engineer. So, they build houses so he used to ask me for advice, can I do this like this? Is it good? Or is it no good? ...the communication was good.” (01)

“the only person that really knows what happened to me is my sons father. When I was pregnant by him in 2000, he was the one that kept me at home and taking care of me. Kept me safe, even when I escaped from them, he was the one that kept me safe and taking care of everything...He knows everything about me. He knows that I did that kind of job before, but he knows that it is not my fault. I did not do it intentionally or out of because I wanted to do this to get money. He knows that it is not my fault, it’s something that they forced me to do. I have no option.” (06)

“I go to sister G for advice because sister G is my sister. We know each other in Nigeria... she was also coming and we met. I asked her where do you come from, which area. And she said Lagos. And I said, are you the same person, and she said yea. I said I see my sister. She the only one. When she comes to me for advice, it all makes me feel better.” (01)
“I had a lot of friends growing up together. They would come to me for advice, to talk...We have this group, your age group, we walk together. Sometimes we would just go to my family’s farm, we would do work that needed to be done. We would go together and do it. And then another day we would go to someone else’s family farm and do some good jobs. We were growing up together by having this good character to help our parents. we all helped each other.” (06)

“I have friends I would talk to when I was in Nigeria...we always advise each other.” (02)

“Sometimes I go to sister B because she is similar to me and she give me some good advice. I talk to her sometimes...it makes me feel good (when she comes to me for advice), because I try to tell her and remind her of something she told me when, and I tell her you have to do the same thing because it helped me. So, it will help you too.” (06)

2. Government support. As mentioned before, all of the women that were interviewed as survivors for the study were undocumented living in the Netherlands. However, one of the women had just gained a five-year residency permit from the Dutch government, which came with some support. The quote below is provided to show that, although the majority of these women do not have proper documentation, if they are able to obtain their legal status in the Netherlands, support is available for them and their families.

“the first time, they give me one year a stay permit. Where you need to find him, but they could not find my trafficker. After court, they gave me a pardon. They give me 5 years. This is when my daughter was 7. So that it is. So now, I think I am getting better. I got a house now, then moving to the house. And the Netherlands government is going to help me to buy things for the house. So, I get 5 years to stay permit now. So, everything I think is getting better.” (01)

3. NGO support. All of the women interviewed were actively involved in an NGO in the Netherlands designed to help them to reestablish their lives and provide guidance and support. The following quotes describe different aspects, in the views of the survivors, on how the NGO has helped them.
COMPONENTS THAT PROMOTE RESILIENCE

“After the death of my brother. I met Pastor T and S. So, I give my story and Pastor T advise me to go to police so I went there and I give my story to them. That is why, I got a lawyer, they take the case.” (01)

“They help me in many ways. 1. We learn. This lesson is free, not that we pay. At least we learn these little things about the Dutch, which even though they are speaking it outside, I understand some of it. I mean not understand all of it, but now I can even speak the Dutch a bit. I can pronounce some. I can also speak little by little. They also, the change that they are giving us, is helping me. Maybe every Tuesday if I collect, I can get things I can eat. So this school is really helping me.” (02)

“(NGO name), yea at the beginning before we started the school, S and Pastor T, it was their advice, what they did with me. They cheer me up and make me strong, let’s go there, let’s do this and that. I stand up. They support us and they support us... I would wake up and I think we were coming to school twice or three times a week. So, I happy that I was going somewhere and I had somewhere to go.” (01)

“They helped us in their own way. New organization, they don’t have a lot of money, so they do to their own capacity, they try their best. Yea and they make us happy and we are making family, they support us like a family. So, if you get a little problem, you call them, they will answer.” (01)

These three aspects that represent external factors are indications that providing and receiving support all contribute to helping an individual rebuild their life and promotes the well-being of one’s resilience. However, these factors are only half of what an individual should have in order to maintain resilience and strength. The other component involves the individuals’ ability to manage through these difficult times by utilizing different aspects internally that may provide strength, optimism, and joy.

**Internal factors that contribute to resilience.**

Internal factors that contribute to resilience are defined as different components one may rely on or utilize in order to help promote and sustain personal strength. These factors are organized into
COMPONENTS THAT PROMOTE RESILIENCE

six categories: physical activity, spirituality, coping styles, hardiness, mental health, and emotional state.

![Diagram of components that promote resilience](image)

*Figure 5: Map of themes related to internal factors that contribute to resilience for survivors.*

1. Physical activity. Physical activity refers to any exercise resulting from their daily routine or as a way to relieve stress. The following quotes offer an idea of the physical activity that the women are involved with.

   “I walk a lot, every day... I walk maybe 30 minutes one hour a day. I do that every day.” (01)

   “I do a few jobs (to stay active). I do house cleaning to earn some money to take care of myself and K.” (06)

2. Spirituality. Spirituality is defined as having any personal belief in a higher power. The quotes below provide examples of how spirituality was utilized throughout the three different periods addressed in the interview, and the influence it had on their lives.

   “[did you go to church a lot in Nigeria with you and your husband] Yes. [did you sing in church] Yes. [did that bring you happiness] Yes.” (01)
“I go to church every week with my children.” “it was when I was in the church. So, I was singing in the church.” (01)

“I am Christian...God saved me from them. That's why I say, it is when I got here I have the courage. I was safe...God will help in any way.” (02)

“She (my mother) is catholic woman, my grandmother (her mother) was a catholic. So, my mother brought us up in a religion. We went to church, we were baptized... I try to bring him (my son) in a Christian way, the way my mother did with me.” (06)

“I went to church. In church, in Italy, I was an usher. When they need something, they asked me... I sang in church too.” (06)

3. Coping styles. Coping styles are defined as different tools or techniques that may be executed to help an individual calm down in stressful situations. The following quotes are provided to show some techniques the women use to help keep them calm.

“We were doing knitting so the knitting calmed me down.” (01)

“the only thing I do, I think about not getting sick. So that I can live longer to enjoy the fruit of my labor. When my son gets married and has his own children. I always think about that... I always think that when you are under too much stress, your brain and everything can’t work and you don’t know if you can survive it or not. I just try to calm myself down.” (06)

4. Hardiness. Hardiness is defined as an individual’s capacity to look at the positive side of extremely difficult situations. The following quotes are examples of how the women take the negative events of their past and turn it into a positive outcome. This is especially evident in the women’s ability to understand their personal strength.

“I am strong now. I treat myself like a man, because I am the only one for my children and I am taking good care of them. So, I don’t think there anything that is more difficult as the past. I
COMPONENTS THAT PROMOTE RESILIENCE

know now that I have passed through a lot and there is a very difficult time for me, so there is nothing that will make it bigger than that or more difficult than that.” (01)

“I learned if no one tells me, I know that I am a strong woman. I am very courageous. I am also positive. That’s what I learned about myself.” (06)

“Because they just didn’t take me and brought me here. When they keep me, I was there, no food, nothing nothing. They brought me here. If I’m not strong, I would have died by now. But I need to be strong.” (02)

5. Mental health. Mental health incorporates self-control, perspective, one’s ability to focus and their motivation to continue. The following quotes provide insight into different factors that motivate the women to continue and not give up and their perspective on the future.

“this moment, I don’t feel too much stress. Because I think that all of my stressors is at my behind. So, I don’t see too much stress on me right now.” (01)

“because of my children. I need to be there for them...my children are my motivation to not give up.” (01)

“I have hope. Yes, very very very 100%.” (02)

“very hopeful. I am hopeful for the future because I believe that I’m still young, that I can still make it. I believe that I have a son here that will make a bright future... When I think about my son, he keeps me going.” (06)

“what kept me going was that I was making money. The truth is that, I was also making money for myself without letting the people know...To tell you the truth, I made a lot of money for myself. I helped my family back home...Right now, my family is not too poor like before. Not too rich, but not poor, they are in middle class. I was able to bring my family out. I was able to set
COMPONENTS THAT PROMOTE RESILIENCE

up some business for my parents, which they are living good. They now have their own family, doing well... That keeps me strong.” (06)

6. Emotional State. Emotional state is defined as the ability one has to identify their emotions in a certain situation and work through them. This is particularly important in identifying different aspects that bring joy and happiness to one’s life. The following quotes provide insight into different aspect of the women’s lives that encourage happiness.

“my children brought me happiness.” (02)

“watching him growing up, very tall. My son makes me very happy.” (06)

“I was happily married, my husband made me happy. My children also. I was having my own shop, doing a little business.” (01)

“I have resident permit, it is one of the happiness. And then, the house. So, yea, my children are the most happiness I have.” (01)

“When I started, when I know sister F, when she brought me to this school. Since I started this school at least I have a little rest of mind. yea I’m happy when I’m at the school...we come and play, we talk.” (02)

All six of these components of internal factors promoting resilience play a crucial role in developing a positive outlook on the future and one’s self. It was remarkable to hear the stories of these women and how they have overcome such horrible situations and crimes against them and yet have the capacity to look towards the future and know that they will be able to survive anything that comes their way. It is important to point out that all of these factors that were taken into consideration and explored further play a major role in the development and sustainability of resilience for the survivors of human trafficking. It is also important to keep in mind the care workers that are in the field working with these survivors and the necessary attention that should
be given to how they, as professionals in the field and in their personal lives, are able to overcome the stress of this career and maintain their resilience to continue.

**Cross-Case Analysis of Care Workers’ Interviews**

![Diagram](image.png)

*Figure 6: Map of all themes and related codes for care workers.*

The following cross-case analysis is comprised of two main themes organized according to the design of the interview: external factors that contribute to resilience and internal factors that contribute to resilience. As a result of the interviews, another theme emerged, factors that may contribute to the depletion of resilience. The purpose of this study was not to examine these aspects; therefore, it is not known if these factors did actually cause a depletion of resilience. It is believed that having these added stressors may have the potential to lessen one’s resilience. Since this study did not explore these factors further (as they emerged as a result of data analysis) they will be referred to as “factors that may contribute to the depletion of resilience”.

These themes will be explored first, followed by the themes that are related to the research question: what external and internal factors promote and sustain resilience. The following quotes were selected to help illustrate the data collected, not all quotes related to each theme are presented.
COMPONENTS THAT PROMOTE RESILIENCE

Table 4: List of themes with frequency count totaled from all care workers’ interviews.

<table>
<thead>
<tr>
<th>Themes</th>
<th>Frequency</th>
<th>Themes</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultural Comparisons</td>
<td>6</td>
<td>Physical Activity</td>
<td>15</td>
</tr>
<tr>
<td>Past Hardships</td>
<td>4</td>
<td>Spirituality</td>
<td>10</td>
</tr>
<tr>
<td>Work Stress</td>
<td>2</td>
<td>Coping Styles</td>
<td>16</td>
</tr>
<tr>
<td>Support System</td>
<td>24</td>
<td>Hardiness</td>
<td>12</td>
</tr>
<tr>
<td>Personal Expectations of Support System</td>
<td>10</td>
<td>Mental Health</td>
<td>22</td>
</tr>
<tr>
<td>Boundaries</td>
<td>5</td>
<td>Emotional State</td>
<td>7</td>
</tr>
</tbody>
</table>

External factors that may contribute to depletion of resilience
External factors that may contribute to the depletion of resilience is defined as any outside influence that causes extreme stress to an individual. This was identified in three forms during the interviews with care workers: cultural comparisons, past hardships and work stress.

Figure 7: Map of themes related to factors that contribute to the depletion of resilience for care workers.

1. Cultural Comparisons. Cultural comparisons are defined as differences between ones’ country of origin and the country that the individual may temporarily reside in. This is an important factor to consider when living and working abroad, as the cultural differences may play a role in how one is able to work through a stressful situation. The following quotes provide examples of different situations that the care workers were in when they were living abroad.
“When I stayed in Mozambique. I was living there for one year on the country side with a few people and I got into a relationship with a native guy. Because of the close community, it was very stressful to cope all the pressure from the community and being very lonely there. Without any support from family or friends, anyone. Without any support, being pressured from the community in a relationship black and white. that was quite stressful… they (the community) would try to manipulate or lie or tell stories about me. I couldn’t get a grip over the situation because it’s a different culture. You, yourself need to be able to cope with that. And then you got conflicts within your own norms and values, identity. Which made me struggle and losing a little bit of myself. I have no idea how I got through the situation.” (07)

“at that time, you are there and you cope with you and you do what you need to do. You have your children and stuff like that. When you start realizing it and how much pressure on you, it’s when you get back to the Netherlands… because I’m not locking the gate. I riding the bike at night in Amsterdam. You are not locking all the doors; your windows aren’t caged. Stuff like that. When you go to a shopping mall, you don’t have to go through a metal detector. Or when you go to church, your car doesn’t need to be checked with the booth open. That was the kind of situation, you know you are not alone. Everybody has to go through that. But it does give a lot of pressure and takes a lot of energy and emotion. But you realize it when you are back and then you go through a process.” (04)

2. Past Hardships. Hardships is defined an experiencing a difficult situation. The following quotes are responses to the care workers being asked to think of a difficult situation that occurred while working in this field. These quotes are provided to shed light on some of the situations that a care worker in this field may experience.

“I think it was in Hamburg. I will never forget, always for me that I went there. Too stressful of a situation…In Hamburg, they work in private houses, and I knock on the door… I say ‘miss Eva, miss Eva, I come from to talk to you. I come to help you’…eventually she opened. And she was trembling and shaking and shocked. And I say ‘what’s wrong’…and she tells me the story that she was unemployed, and her husband was unemployed. And then her husband tells her to go to prostitution to make money. In Germany they do this, they put their whole arm into your
COMPONENTS THAT PROMOTE RESILIENCE

“...and she says, I already work some and send some money to Poland so the husband can get some shoes for the children. And I had to really shallow my tears.” (05)

“I think the one where there was a terrorist attack on a mall. Two days before I was there with Jesse and his friend with a movie, so you know you were there, you know the whole mall. You are there sometimes to drink coffee. And then the whole city is in lock down. The army was, they said it was a hostage situation, so all kind of stories are going around. But it kept going on for a couple of days. They told the media that there was a hostage situation, which there wasn’t. but the army had the whole mall under their control, so they could take time to make the shops empty. At that time, we had friends, there you become friends and you do life together, you stick to each other and help each other. At that time, we just were there together. To heard this situation and then the next morning it’s still going, you are just like what is going on.” (04)

“there was one time, a person was so depressed and was feeling so much hopelessness, that she wanted to try and kill herself. I heard about it and we rushed to the hospital. I was not physically there when she took something inside her body that was passing her out. But that was a stressful situation. Also, knowing her story and her condition and all of those kinds of things. That has a lot of impact... the first concern is her health of course. But also, to know what happened. What were the events that occurred, why was she putting herself into this situation?” (03)

3. Work Stress. Work stress is defined as an amount of stress being put on an individual as a result of their career. The following quote is an example of such stress that was experienced by a care worker.

“What frustrates me, what makes me more stressed, is dealing with other partners. Not the clients... The working partners who are pressuring you on how to deal with things. The work pressure. The amount of work you have to do in one week.” (07)

It is important to consider the importance that a culture may have on an individuals’ ability to cope and maintain clarity in stressful situations. The quotes above are a great example on the occupational stress that may come along with working in this field. It is particularly important to
remember the impact that being involved in some of these situations may have, even if it is not happening directly to you. Sometimes we do not have control over the environment and the potential negative impact it may have, but we have may have control over other external factors that provide a relief from stress.

**External factors that contribute to resilience**

External factors that contribute to resilience are defined as any outside influences that provide relief from the stress an individual is experiencing. These factors were identified in three main categories: support systems, personal ideas of the expectations that a support program should uphold, and boundaries.

![Figure 8: Map of themes related to the external factors that contribute to resilience for care workers.](image)

1. Support System. A support system is defined in the ability to rely on trusted individuals to help get through stressful situations. Although support systems comprise both providing and receiving support, the main outcome of the care workers’ interviews involved how they utilize their system to help them to overcome stressful situations. The following quotes are examples of the importance of a support system.

   “to get through something was to talk about the situation. And to talk through with friends and family. A lot with friends…with people that you feel safe with, feel that you have a strong connection with. That it is safe to share your story… We talk through things here together, to reflect on things and situations. But I also have a coach outside. I’m living on a friends group, giving me support group. But that’s going through an organization that called ‘international teams’. They are also coaching me. So, I can also share my stories, hazards and problems with them.” (03)

   “I was a physical therapist, during treatment people talk. So, then you are right away on some level helping or supporting them.” (04)
“You want to have feedback on your behavior on your skills, on your acting. It’s good to have that feedback from the persons involved in that situation.” (03)

“surround yourself, make sure you are strong together... you make yourself strong and stay together and surround yourself with friends who just say you need to follow your heart. Who stand behind your decisions. Stand around you. Supportive.” (04)

“I’m a very independent woman, but I realized that I need people around me. To have that support from other people...being around other people, being with friends. that’s what helps me...just by telling them, I feel better. For me, sometimes I don’t need advice, I just need to explain the situation and by doing that I have my own thoughts on how to handle it.” (07)

“what is really important in these kind of jobs is to talk to your colleagues. To discuss all the cases and that I think helps. I am the only coordinator in this location, so I have to decide on my own and I can consult other colleagues.” (07)

“Friendship is also very important. I have some friends that are really good friends. Women friends, that are dear. Their friendship gives me very much satisfaction. Being together.” (05)

“discussed it with my boss, and so I just talked to her. I have to tell you this, I need some intervention, someone to talk to, or else I go crazy. We could talk about this in some situations. Not that she would give me advice, she listened to me. And that was important to me, that she listens and she understands.” (05)

2. Personal Ideas of Expectations. Since the care workers are actively involved in working with survivors of human trafficking, it was of interest to inquire about their personal ideas on what should be initially offered to individuals seeking help. The following quotes represent the care workers’ ideas and beliefs on the importance of program support and what is the most important factors that should be offered to victims/ survivors of human trafficking.
COMPONENTS THAT PROMOTE RESILIENCE

“first is safety. Safety and trust. That’s the first thing. To provide hope for a future, but be realistic. Not to build air castles. Be hopeful, hopeful for a future, wherever that may be. And trust of course. A place that they will feel welcome and safe as a person, without being judge on their past, on their behavior. Those are the main things.” (03)

“one is trust and two is consistency. Follow up what you say, consistency and trust, that is what it is. Those are the two ingredients that you can work from. That’s what I have experience. I have learned a lot with this street adventure. And they are everywhere, the behavior of people, everywhere it is the same around the globe. It’s so familiar, it’s the same.” (04)


3. Boundaries. Boundaries are defined self-imposed ideas and behaviors that enable them to distinguish between their personal and professional lives. The following quotes provide insight into how the care workers are able to maintain that balance.

“You can grief together, you cry together, but then it’s also their process...The main thing is that you pray for them and then you leave it. That’s it. I don’t take it along or take it home...natural boarders.” (03)

“What I have seen and experienced is that these women are so vulnerable you need someone who has a little bit of experience supporting and helping this target group. If not, you get involved too much, and it’s hurting them again... You need to be more professional and see where the boundaries are. And if not, they get too involved and they take it home.” (07)

It is important to acknowledge the three major components represented in this section. One of these is recognizing the significance of having a support system, especially in regards to working in this field. The ability to trust and feel safe to communicate about stress or difficult situations is something that these care workers not only have for themselves, but also hold to the highest standard when it comes to helping victims/survivors of human trafficking. Lastly, understanding the need for establishing healthy boundaries is something that can promote resilience and can be
considered to be extremely helpful. Aside from these three aspects, in order to be able to fully help victims/survivors, the care workers also need to be able to maintain resilience from within themselves.

**Internal factors that contributed to resilience**

Internal factors that contribute to resilience are defined as different components one may rely on or utilize in order to help promote and sustain personal strength. These components are organized into six categories: physical activity, spirituality, coping styles, hardiness, mental health, and emotional state.

![Figure 9: Map of themes related to internal factors that contribute to resilience for care workers.](image)

1. Physical activity is defined as any sort of exercise. This can be as a result of their daily routine or as a deliberate way to relief stress. The following quotes provide examples of how physical activity is used by the care workers.

   “I just need to have some sort of sport activity to release some of my emotions or stress in a general way…Especially now the last few years I know it helps me a lot to relieve stress…To do fun things, to be active and to focus on other things.” (03)

   “it was a competitive level that I was playing on (basketball). At that point, it’s part of your identity. It was just to feel good. I wanted to feel something, I need to do something with my body…I just did it and felt good. And probably relief stress by it…I now know sport is more...
COMPONENTS THAT PROMOTE RESILIENCE

connected to my stress. I know it’s important. Sometimes it’s difficult to make the decision to take
time for myself and do it.” (04)

“sports is what has helped me…dancing. I realized a couple of months ago that dancing really
helps me to process all the information that I am getting from people.” (07)

In addition, one care worker noted the importance she felt physical activity had for the
survivors that she directly worked with.

“I also know of a person, who tried running and also lying down on her bed and not to be
motivated for a lot. But she was eager to put her shoes on and go running to relief stress and be
active, to clear her mind. It is possible.” (03)

“our participant is now working on the farm outside. She is doing physical activity on the field. I
think it is very helpful for her. But it’s not really raising her heart beat that much that she will
release endorphins. But I think it is very good for her to be outside with the air and the sun.
sunlight is good for you.” (03)

2. Spirituality. Spirituality is defined as having any personal belief in a higher power. The quotes
below provide insight into the role that spirituality has in the care workers personal and
professional lives.

“to talk, to pray together. Not only pray myself, but also being prayed for or together...To find
guidance, to find rest, to find peace…I am aware that for me it helps...over the last 20 years it
has been a huge part of my life. And especially to be part of a community, a Christian
community. So, it’s not just going to church or service, but to part of a bigger community that
just your family or friends. That’s one of the things that is really helpful for me.” (03)

“There is much more in life more important and that is to help people...that is religious part. I
have a relationship with God so he is my father, so he has a big heart for me. And he is asking
me to also love others. I get sometimes this feeling out of this heart towards these people...ifI
really listen to my relationship with god, and feel through his feelings or look through his eyes, he is just looking at the one and then I am also looking at the one... we need to help each other. That is what is giving me motivated to keep going. When I’m in need, I don’t care who is helping me, I’m happy when someone is helping me.” (04)

“To pray about it. For me, it helps for to talk to God in situations... helps to calm me down” (03)

“I was raised in a Christian family and then I started studying and you just become 15-25 or something, I think there it became a little bit less. Around 25, when I met my wife, that’s where it all starts. That’s also where the whole religious thing got to another level. A much more practical level which I, what influenced my decision, but also influenced my practical life.” (04)

3. Coping styles. Coping styles are defined as different tools or techniques that may be executed to help an individual calm down in stressful situations. Coping styles also are important in regards to one's ability to problem solve. The following quotes are provided to show different ways the care workers interviewed calm down in stressful situations, and how they solve problems.

“I try to stay calm by listening and breathing. Breathing is very important. Stress levels don’t get higher, breathing helps. it gives you the opportunity to listen and respond to that situation.” (07)

“to get away from the situation, to take a little bit of distance. That helps me, in the first step to handle a situation. To be on my own, to reflect on it sometimes. To become aware of the situation, ok what is happening, why do I feel this, this emotion or stress.” (03)

“some music that helps me to relax sometimes. Maybe to go outside to get some extra air, some oxygen. Some sun on my skin. Sometimes small things.” (03)

“I will probably just look at it. Just see what is happening and maybe the fire will put itself out. For instances, if it’s on a physical level, it is out of reflex, I am just doing what I need to do. So
it’s not that I am freezing. Sometimes it is just out of reflex. And sometime it is just, sometimes I am just being quiet and taking a look at what is happening.” (04)

“I did some physical activities…listen to music…to drink a glass of wine with my wife or sometimes watch some easy, light, silly stuff on TV.” (04)

4. Hardiness. Hardiness is defined as an individual’s capacity to look at the positive side of extremely difficult situations. The following quotes are examples of how the care workers interviewed are able to handle various stressful situations while working in this field.

“I think it’s different when the situation is about someone else or when I’m panicking or someone is attacking me. Then it’s a different situation when someone else is being battered by someone or situations. I can stay pretty calm and emotionally pretty flat and act on it...Sometimes you just have to act and then reflect on it afterwards. Most of time that’s how things occur. You react and act on it.” (03)

“I can still be at ease in difficult situations...What I have learned, you can manage, go through a lot. You just need to keep breathing and keep your eyes on what you have.” (04)

5. Mental Health. Mental health incorporates self-control, perspective, one’s ability to focus, and their motivation to continue. The following quotes provided different aspects of how the care workers interviewed are able to maintain a positive perspective of the future and what helps them to refocus, and provide motivation to continue working in this field.

“I think in general that you overcome, that you find hope again. That you can give it somewhere a place, you honor the life that has been there…but together you also find hope again.” (03)

“To live, to live life. I think hope is one of the strongest things that drives us... I think I found out that people have a lot of resilience, they can handle a lot. And overcome that and continue life.” (03)
“I think it helps when we can celebrate moments where we see that somebody is growing or overcoming a fear or sharing life, sharing food together. Also, focusing on things to be grateful for. So that also keeps me continuing.” (03)

“working for this organization. The experience of working with people and seeing what it’s doing to me as a person and adding something to their lives... and seeing them happy, relief that there is someone that hears them and really helps them to get through this struggle over and over again. It’s a very satisfying job. good for your overall development and every week I am learning more.” (07)

6. Emotional State. Emotional states are defined as the ability one has to identify their emotions in a certain situation and work through them. This is particularly important in identifying different aspects of life that bring you happiness and joy. The following quotes highlight different things that brought happiness to the care workers lives, this could be through activities or the act of getting involved in this field to being with.

“become happy again, I think distraction. To do fun things, to be active and to focus on other things.” (03)

“riding a motorcycle, sports especially playing ball, or with a peer doing some fitness. Movies, just going out.” (04)

“The moment I knew this is what I had to do. At first it was the hotline and then yea, I thought, this is what I want to do, I want to help people. It was this, help people, either way.” (05)

“go out for a drink, go to an outing with a club, and sometimes I play ball there in a slum area, it was fun. And work with the local street team was also fun. We had tears but we also had a lot of fun. They work gave a lot of laughter.” (04)
“when I was young, I wanted to help other people who were in miserable situations...that was somewhere in my heart... the problem of the undocumented migrants grew in Holland. In the process then I really found out that these people, they are really stuck here. And there are a lot of big problems that they are facing. And I also found out about the women that were trafficked here and had to possibility to have a permit for a short period and then afterwards they were back on the streets again and on their own. And that really caught my heart. Then something in me said, ‘these are the people that I want to focus on and help out’... I just started working with other organizations and asked God, where to lead me to. And I know this is the demographic, the group, that I will be working with for a long time. This is where I need to be.” (03)

“I was a simple person, and I am still simple. Small things make me happy, nothing big. Good music, especially good film, small things. And I think that that...I like to go to Greece, I have a house in Greece. I am going there at the beginning of May. When I sit at my terrace and look at the sea, I am very happy.” (05)

Each of these internal components is extremely important to keep in mind when thinking about resilience for care workers. Being able to discover different avenues that may help one to overcome stress and stay focused and determine is essential to the longevity of ones’ career in this field, as well as discovering what brings happiness to one’s life.

Chapter 4: Discussion and Conclusion

Discussion
This qualitative study examined different components, both external and internal, that contribute to the promotion and sustainability of resilience among survivors of human trafficking, specifically for the purpose of sexual exploitation, as well as among care workers who work with such individuals. The study was designed to identify several themes within each category. In terms of internal factors that contribute to resilience, themes that were addressed were: physical activity, spirituality, coping styles, hardiness, mental health, and emotional state. These themes were consistent for both the survivors and the care workers interviewed. In terms of external factors that contribute to resilience, themes that were identified for the survivors involved support systems and the influence of assistance from both the government and the support
program the survivors were involved with. For the care workers, the external factors that contribute to resilience produced the following themes: support systems, personal ideas of expectations that should be provided by a support program, and boundaries needed to help maintain resilience in the career.

While it is important to consider all of the different components involved in both the external and internal contributors of resilience, several themes were represented more frequently than others. In addition, each group interviewed (survivors and care workers) produced different frequency results. Spirituality and mental health produced the highest frequency in the interviews with survivors. It is difficult to state whether the spiritual beliefs of the individuals helped them to develop resilience or if it was utilized as a way to cope with difficult situations. The findings associated with spirituality and coping relates to another study that found that utilizing one’s spiritual beliefs has a positive effect on one’s mental health (Peres, Moreira-Almeida, Nasello, & Koenig, 2007). The current study’s results agree with this, as all of the survivors provided information that they consistently practiced their faith and had positive outlooks in terms of coping styles and their mental health.

It is believed that mental health scored high on frequency because it was also associated with the survivors’ perception of the future and their motivation to continue. One studied looked at the importance of attaching meaning to a difficult situation as a way to make sense of it (Grych, Hamby, & Banyard, 2015). The outcomes of attaching meaning to events can help to define the person as a whole and give them a sense of purpose and drive (Grych, Hamby, & Banyard, 2015). This was similar to the findings of this study. The survivors all stated that as a result of being trafficked and subjected to different forms of abuse, that they are now stronger than ever and can accomplish anything. They view their past as a motivation to continue into the future and believe that nothing can stop them.

Throughout the interviews with the care workers, there was a great deal of importance that was put on a support system; this had to the highest frequency of all of contributing factors of resilience. This lines up with an article written by Figley (2002) which states that a main component to overcoming CF is implementing a support system. As the data expressed from this study, all of the care workers had a support system of some kind that they felt safe to go and discuss various aspects of their work life in order to sort through the events or just to clear their mind.
While these were the main themes that were of interest for this study, another theme emerged as a result of the interview, factors that may contribute to the depletion of resilience. In regards to the survivors, internal factors that contribute to the depletion of resilience involved past hardships, the process in which they were trafficked and the discovery of their situation, physical abuse, and lack of resources. Internal factors that contribute to the depletion of resilience involved fear of telling their families and the intense emotions imposed on themselves due to their circumstances. It was interesting that throughout the research conducted for this study, the researcher was unable to find articles that took into consideration any factors that may contribute to the depletion of resilience. One possible explanation for this could be that the previous studies did not ask questions that could have brought up these different themes. The data provided from this study that helped to develop this emerged theme involved reflecting on a situation before and while being trafficked. These stories involved difficult situations that the individuals went through, therefore provided obstacles they faced. Previous studies may not have looked at these time periods.

For care workers, themes that emerged concerning the potential depletion of resilience involved external factors, such as cultural comparisons, past hardships, and work stress. While some of the literature discussed the importance of support systems as a way to lessen the impact of CF, to the best of the researchers’ knowledge, there was not a study that looked at cultural differences as a contributor to a depletion in resilience. The cause of this may be that other studies did not interview care workers that may have worked in different countries other than their country of origin.

**Limitations**

There are some possible limitations that should be considered in regards to this research study. Since the interview guidelines for the survivors and care workers consisted of the same questions for each of the different time periods, it was difficult to see a more detailed explanation for how the different components of resilience play in role in their lives. In addition, developing an interview guideline that had more specifically designed questions could have provided greater differences in different time periods for resilience and allowed for a cross comparison. For example, it would be interesting to explore the area of spirituality in a more in-depth manner to gather a bigger picture and understanding of all areas that spirituality played in their lives in different time periods.
Another possible limitation that should be taken into consideration involved the country of origin of the survivors that were interviewed. All of the women were from Africa, specifically Nigeria. There were cultural aspects of this that were not addressed in the interview, as there was not a specific region that the study was interested in. As previously stated, the only exclusion criteria for survivors were age (had to be over 18 years old) and actively involved in a support program in the Netherlands at the time of the interview. By not addressing cultural differences, some important information may not have been obtained.

Although there was one survivor interviewed that had recently received a five-year residency permit by the government, all of the other survivors interviewed were undocumented. This potentially limits some of the data as it only looks at one group of individuals; undocumented. It would be of interest to have a mixed pool of survivors, documented and undocumented, in order to see if there are similarities or differences between the different components of resilience.

All of the interviews were based on the participants’ personal experience and thoughts surrounding these events. While this is important for qualitative research, as it provided an in-depth story, it also relies on the individual being honest during the interview. While analyzing the data, the researcher was aware that the stories provided, especially by the survivors, may have brought up painful memories and emotional stress. Extra caution was provided to ensure that the survivors felt safe and were able to take breaks at any time. However, it should be considered that the interviews are memories of their personal experience and other information may have been withheld.

Lastly, all of the survivors were associated with the same support program, the care workers were not. This potentially poses two limitations. The first being that having all of the survivors from the same support program may have limited the information provided in regards to the support program benefits. Another consideration to take into account could be that the care workers were all from different support programs. While the scope of the research was strictly personal based and not on the organization that the care workers were employed by, this potentially limits the information regarding support provided by their organization.

**Future Research**

During the process of this research, several implications for future research became evident. The first recommendation would involve expanding the population. This would be particularly
important in terms of the survivors interviewed. It would be of interest to have individuals from different parts of the world, not just Africa, as it might highlight different cultural aspects that may contribute to resilience. While culture was not taken into consideration during the development of this study, it would be interesting to see if there are cultural differences and experiences that may influence the individuals view on the various components addressed in the interview. In addition, it would be interesting to see if there are differences between documented and undocumented individuals. While the studies exclusion criteria did not restrict whether the survivor was documented or undocumented, having both demographics represented could have provided some interesting findings.

A second recommendation would be to design the interview guideline to be different for each time period. By having each time period associated with the same questions, it limited the ability to potentially gather a more in-depth understanding of how each component may have played a role in the development and sustainability of resilience. By creating an interview that asked different questions each time period, it might bring about a deeper understanding, thus allowing for a comparison between the time frames addressed.

Finally, although this research did touch base on the concept of CF within care workers, it did not go in-depth. Future research could use this study as a base and expand on exploring different components of CF and the risk of burnout for care workers. It would be of interest to also incorporate former care workers to see how their experiences altered their careers.

**Conclusions**
The aim of this study was to explore different components that help to promote resilience in survivors of human trafficking, specifically sexual exploitation, and the care workers that work with such individuals. The study was designed in such a manner that it addressed both external and internal factors that are believed to help an individual develop resilience. Resilience is extremely important for the survivors of human trafficking to be able to overcome their past. All of the components explored in this study proved to provide assistance in doing just that. It is also important to keep in mind the individuals that work with this demographic, the care workers. As with the survivors, the care workers interviewed were able to rely on the different factors addressed in order to maintain their resilience, which enables them to continue working in this field. Although the purpose of this study was to address and explore positive influences of resilience, factors that contribute to the depletion of resilience emerged as a result of the
interviews. Despite the obstacles that these individuals endured, the amount of determination to continue and the personal strength that they developed is a strong indication of the power of resilience.
COMPONENTS THAT PROMOTE RESILIENCE

References


COMPONENTS THAT PROMOTE RESILIENCE


Appendix A: Informed Consent: Survivors

A qualitative exploration of components that promote resilience for survivors and care-workers of human trafficking engaged in a support program within the Netherlands.

I am Amanda Mauro and I am a Psychology graduate student at Webster University, located in Leiden, NL. For my Master’s Thesis, I am conducting research to explore components that promote resilience for survivors and care workers of human trafficking engaged in a support program within the Netherlands.

For the purpose of this study, ‘resilience’ refers to one’s ability to overcome, push through, and cope during difficult times. This study is designed to explore three stages in your life: before being trafficked, while being trafficked, and after you got your freedom.

Please read the following information before deciding whether to participate. You are free to decide not to participate without there being any negative consequences. No financial compensation is provided for participating in this project.

If you agree, you will participate in an interview that will take approximately two-three hours with a break.

The purpose of this study is:
To gain insight and greater understanding of what promotes resilience in both survivors and care workers of human trafficking.

Types of participants:
As the researcher, I am inviting survivors (who have broken away from pimps or traffickers) and are involved in a support program in the Netherlands, as well as the care workers that currently work in the field, to participate in this study.
Survivors can be either “documented” or “undocumented” within the Netherlands. No personal information will be given that may cause difficulty or legal action based on their participation in this study. All information will be kept confidential.

What participants will do:
If you agree to participate in this project you will be asked to participate in a confidential interview to discuss your experiences of resiliency (the ability overcome traumatic experiences by enabling yourself to develop healthy coping skills). This is not a test and there are no right or wrong answers.

You are encouraged to ask questions or raise concerns at any time about the nature of this study and/or the methods being used. Please contact me at amauro755@gmail.com or by telephone +31687747509. My research supervisor, Madeleine van de Steege can also be reached if needed by email, mvandersteege72@webster.nl

With the permission of the participant, the confidential interview will also be audio recorded to help me to find common themes across all the interviews and to analyze the research. The interviews will be transcribed (typed up) by myself and your identifying information is replaced.
with a participant number to protect your identity. The details of your interview will be coded which further guarantees confidentiality.

You have the right to change your mind and withdraw from the study at any time. In the event you choose to withdraw, there will be no penalty. In addition, you may ask to have your data withdrawn from the study after the research has been conducted.

**How will the data be used:**
All responses will be kept confidential. Once collected and examined, it is the hope of the study to be able to see if by adding different components to one’s life (for example social support) can help one to build resilience and overcome horrible past experiences. These different components can help to maintain a better quality of life, for both survivors and those who work within the field of human trafficking.

**What are the risks to the participants?**
The study will take you back to adversity you have experienced and how you coped with this. Within the interview, you will be asked to describe a difficult situation before being trafficked, while being trafficked, and after gaining your freedom, followed by questions that address how you overcame the situation and what kept you going. An example of this would be “how did your spirituality help you during this time in your life”. Due to the nature of this topic, and your personal experiences, there is a risk of emotional stress. Some of these risks involve high levels of stress and anxiety, depressive feelings, flashbacks, and/or post-traumatic stress. As a precautionary measure, in the event that a participant has emotional stress from this interview, psychological services will be provided by Webster University Leiden campus through the psychology masters internship. The intern will be supervised under a licensed professional in the Netherlands. If further therapy is requested by the participant, a referral will be made to another professional within the area. For further information about these services, please contact the researcher at amauro755@gmail.com.

This project has been approved by the Institutional Review Board at Webster University, Leiden, NL. Information on Webster University policy and procedure for research involving humans can be obtained from the Institutional Review Board, mail irb@webster.edu.

You will get a copy of this consent form.

Sincerely,
Amanda Mauro
Appendix B: Informed Consent: Care-Workers

A qualitative exploration of components that promote resilience for survivors and care-workers of human trafficking engaged in a support program within the Netherlands

I am Amanda Mauro and I am a Psychology graduate student at Webster University, located in Leiden, NL. For my Master’s Thesis, I am conducting research to explore components that promote resilience for survivors and care workers of human trafficking engaged in a support program within the Netherlands.

For the purpose of this study, ‘resilience’ refers to one’s ability to overcome, push through, and cope during difficult times. This study will address two different times in your life, before working in the field of human trafficking and the present (currently working in the field). While working in this field, it is believed that you are exposed to personal stories of the victims, which in turn influence your personal resilience.

Please read the following information before deciding whether to participate. You are free to decide not to participate without there being any negative consequences. No financial compensation is provided for participating in this project. If you agree, you will participate in an interview that will take approximately two-three hours with a break.

The purpose of this study is:
To gain insight and greater understanding of what promotes resilience in both survivors and care workers of human trafficking. It is hoped that by examining the phenomenon of resilience that there might be future research conducted and the possibility of improving already existing programs.

Types of participants:
As the researcher, I am inviting survivors (who have broken away from pimps or traffickers) and are involved in a support program in the Netherlands, as well as the care workers that currently work in the field, to participate in this study.
Care workers are individuals that work directly with survivors, providing support programs on behalf of the government, Non-governmental Organizations (NGO) or church organizations.

What participants will do:
If you agree to participate in this project you will be asked to participate in a confidential interview to discuss your experiences of resiliency (the ability overcome traumatic experiences by enabling yourself to develop healthy coping skills). This is not a test and there are no right or wrong answers.

You are encouraged to ask questions or raise concerns at any time about the nature of this study and/or the methods being used. Please contact me at amauro755@gmail.com or by telephone +31687747509. My research supervisor, Madeleine van de Steege can also be reached if needed by email, mvandersteege72@webster.nl
With the permission of the participant, the confidential interview will also be audio recorded to help me to find common themes across all the interviews and to analyze the research. The interviews will be transcribed (typed up) by myself and your identifying information is replaced with a participant number to protect your identity. The details of your interview will be coded which further guarantees confidentiality.

You have the right to change your mind and withdraw from the study at any time. In the event you choose to withdraw, there will be no penalty. In addition, you may ask to have your data withdrawn from the study after the research has been conducted.

**How will the data be used:**
All responses will be kept confidential. Once collected and examined, it is the hope of the study to be able to see if by adding different components to one’s life (for example social support) can help one to build resilience and overcome horrible past experiences. These different components can help to maintain a better quality of life, for both survivors and those who work within the field of human trafficking.

**What are the risks to the participants?**
The study will take you back to adversity you have experienced and how you coped with this. Within the interview, you will be asked to describe a difficult situation before beginning to work in the field of human trafficking and while working in the field followed by questions that address how you overcame the situation and what kept you going. In addition, questions will be asked about the program that you work for and its strengths in regards to promoting and sustaining resilience. Due to the nature of this topic and your personal experiences there is a risk of emotional stress. Some of these risks involve high levels of stress and anxiety, depressive feelings, flashbacks, and/or post-traumatic stress.

As a precautionary measure, in the event that a participant has emotional stress from this interview, psychological services will be provided by Webster University Leiden campus through the psychology masters internship. The intern will be supervised under a licensed professional in the Netherlands. If further therapy is requested by the participant, a referral will be made to another professional within the area. For further information about these services, please contact the researcher at amauro755@gmail.com.

This project has been approved by the Institutional Review Board at Webster University, Leiden, NL. Information on Webster University policy and procedure for research involving humans can be obtained from the Institutional Review Board, mail irb@webster.edu.

You will get a copy of this consent form.

Sincerely,
Amanda Mauro
Appendix C: Consent Declaration

Consent Statement
I __________________________ agree to take part in this project. I understand the purpose of this research and that I can stop at any time.

I am also aware that all information gathered will be coded to ensure my privacy and anonymity.

If I have any questions, I know how to get in contact with the appropriate individuals to help.

_________________________________________  _______________
Signature                                           Date
Appendix D: Audio Consent Addition

I agree to audio recording at __________________ on ________________.

_________________________                   Date   ____________
Signature

I have been told I have the right to hear the audio recording before they are used. I have decided that I:

_____ want to hear the recording

_____ do not want to hear the recording

Sign below if you do not want to hear the recording. If you want to hear the recordings, you will be asked to sign after hearing them.
Appendix E: Demographic Questions for Survivor Participants

1. Gender:
   Female     Male

2. Age Range:
   18-24     25-31     32-39     40-50     50+

3. What country are you from? ________________

4. What is your home language?

5. Do you speak Dutch?
   No
   A little
   Well

6. Highest level of education/schooling? ________________

7. Marital Status:
   Single     Married     Divorced     Widow

8. What date did you arrive in the Netherlands? ____________

9. What is your Legal Status:
   Resident permit/Documented_____ Undocumented/illegal____

10. Do you have children?
    Yes     No

11. If yes, How many? __________

12. Ages of children? __________

13. Are your children in this country?
    Yes     No

14. Do you currently have friends and family nearby? (Same city or country)
    Friends_____________ Family_____________

15. Where you trafficked and forced to work in prostitution?
    Yes     No
16. At what age did you trafficked into forced prostitution? ________
   18-24  25-31  32-39  40-50  50+

17. How many years were you working for a pimp or traffickers? ______

18. Do you currently get any government support or subsidy?
   Yes   No

19. Do you currently sometimes work for a pimp?
   Yes   No

20. Do you get any support or help from any organizations? E.g.
   Church
   NGO
   Governmental Organization
   Police
   School
   Job
   Other

21. What kind of support and help (e.g. programs or courses) did you receive from these organizations?
Appendix F: Demographic Questions for Care Worker Participants

1. Gender:
   Female  Male

2. Age Range:
   18-24  25-31  32-39  40-50  50+

3. Where are you from? __________

4. Highest level of education? __________

5. Marital Status:
   Single  Married  Divorced  Widow

6. Do you have children:
   Yes  No  If yes, how many? __________

7. When did you begin working in this field? __________

8. How long have you been working with this demographic (survivors)? __________

9. What is the name of your agency? __________

10. How long have you been working for this program? __________

11. What is your role within this program? __________

12. How big is your organization? __________

13. How many individuals work at this organization? __________

14. Do you work within a group or on your own? __________

15. How many survivors in total are under the care of your organization? __________

16. How many survivors do you directly work with? __________
Appendix G: Survivors Interview Guideline

Pre-Trafficked:
Prior to being trafficked

Internal Factors

Hardiness
Can you tell me about a situation that was extremely difficult? How did you overcome this? What was something positive about yourself that you learned from going through this?

Physical
Were you an active person? Can you tell me about some things you use to do that kept you active? How did that make you feel?

Mental
What was something that brought you happiness/joy? Can you think of a time when you felt horrible or sad and you did this activity? How did it make you feel? How did you prepare for a stressful event?

Emotional
Can you describe a stressful situation? What emotions did you feel? How did you express them?

Spiritual
Were you religious during this time in your life? Explain the role that religion/spirituality played in your life during this time.

Coping
What were some things that you did to calm yourself down? When you were faced with a challenging situation, were you able to figure out a way to solve it? Can you describe a certain situation as an example?

External factors

Who was your support system back then? Did you feel safe going to them when you needed help? How did you feel afterwards? Did you have people come to you when they were stressed and needed help? How did that make you feel? Can you think of a time that someone came to you for help? How did you help them calm down?
COMPONENTS THAT PROMOTE RESILIENCE

During:
Why being trafficked

Hardiness
During this horrible time in your life, what was something that kept you going? Can you describe how this helped you?

Physical
Throughout this time, was there an activity that helped you to clear your mind? Can you explain? Was there anything that you did to recover your energy? During this difficult time, what would you say was the most important thing that kept you going?

Mental
How did you mentally prepare for stressful events? Was there anything that helped you to “put it behind you”? Did you learn a new technique to help you? Can you describe this?

Emotional
Was there something that brought you happiness? I can imagine there are a lot of emotions that are involved during this time in your life, can you describe how you were able to keep going and not give up?

Spiritual
Can you explain how religion/spirituality played a role in your life during this time? What were some ways it helped you?

Coping
Can you explain a time that was extremely difficult? How were you able to cope and get through it?

External
During this time in your life, did you have a support system? Can you describe who they were? Did you feel safe going to them? Did you have people come to you when they needed help? How did this make you feel?

Post

Hardiness
Since gaining your freedom from being trafficked, what do you think is your purpose in life? Is there something about yourself that you learned since going through all this? How does this help you to view yourself and the world? Are you hopeful for the future?

Physical
Is there some form of physical activity that you now do to help clear your mind and focus? Can you describe how this makes you feel? On average, how many hours of sleep do you get a night?

Mental
Today, what brings your happiness? Can you explain an event that happened recently that make you happy? Are you able to take mental breaks throughout the day? Are you active in any form of therapy? If so, how does that help?

Emotional
Can you describe a stressful situation that occurred recently? What were some emotions that you felt? How did you work through them?

Spiritual
How does religion play a role in your life today? Are you active in your church?

Coping
When you are faced with a problem, are you able to determine the best way to work through it? Can you describe a situation that happened recently? When you feel overwhelmed or stressed, is there something that you do to help you calm down?

External
Who is in your support system? Do you feel safe and comfortable going to them for help and guidance? Do people come to you for help and guidance? How does this make you feel?

PROGRAM
What are some ways that this program has helped you to grow? Can you describe some things that you have learned since being involved in this program? What are some strengths that you believe you have developed due to this program? Can you think of a situation recently that you handled differently than you would have before? What do you believe is the reason for this change?
Appendix H: Care Worker Interview Guideline

Pre-working in the field

Internal

Hardiness
Prior to working in this field, can you tell me about a difficult situation? How did you overcome this? What was something positive about yourself that you learned from going through this? Did you have an idea of what your purpose in life was (work wise)?

Physical
Can you explain some physical activities that you did to help lower stress? How often did you do this?

Mental
What was something that brought you happiness? Can you think of a time/situation that you were sad and you did this activity? How did you prepare for stressful situations?

Emotional
When you were in a stressful situation, were you able to maintain a level of optimism? How did you do this?

Spiritual
Were you religious doing this time in your life? If so, please explain how religion played a role in your life? Were you active in church?

Coping
What were some things that you did to calm yourself down? When faced with a challenging situation, were you able to figure out a way to solve it? Can you describe a certain situation as an example?

External
Who was your support system back then? Did you feel safe going to them when you needed help? How did you feel afterwards?
Did you have people come to you when they were stressed and needed help? How did that make you feel? Can you think of a time that someone came to you for help? How did you help them calm down?

Now working in the field

Internal

Hardiness
Can you describe an extremely stressful situation that occurred recently while working in this field? In what ways were you able to see the positive side of this event? Is there a specific time/event that happened that made you know that you were in the right line of work?

Physical
Do you think that physical activity is important for the survivors you work with? Is there some form of physical activity that you now do to help clear your mind and focus? Can you describe how this makes you feel? On average, how many hours of sleep do you get a night?

Mental
In your personal life, what is one thing that brings you happiness? In your work life, what is one thing that brings you happiness? Are you active in any form of therapy? If so, how does that help? When you get home from a long day at work, what are some ways that you destress and relax?

Emotional
When you are exposed to something horrible at work, how does that make you feel? Can you describe a recent situation where you became emotional at work? What was something that helped you to calm down?

Spiritual
How does religion/spirituality play a role in your life today? If it does, can you explain?

Coping
When you are faced with a problem, are you able to determine the best way to work through it? Can you describe a situation that happened recently? What keeps you coming back to work every day?

External
Who is in your support system at work? Do you feel safe and comfortable going to them for help and guidance? Do people come to you for help and guidance? How does this make you feel?

Who is your support system outside of work?

PROGRAM
What are some ways that the program you work for has helped you to grow as a person? What are some things/resources that your job offers for you and the others that work there? Is there something that you believe would be helpful in addition to what is already available?

What would you say is the most rewarding part of your job?

What was a driving force for you to start working in this field?
Appendix I: IRB Approval Letter

TO: Amanda Mauro

FROM: Webster University Institutional Review Board

RE: A qualitative exploration of components that promote resilience for survivors and care workers of human trafficking engaged in support program within the Netherlands

STATUS: Approved

NOTES:

- The IRB Proposal Number for this research project is FA 17-50.
- The proposal has been approved through April 1st, 2018. You are required to submit a summary of your findings upon completion.
- Complete the Periodic Review/End of Project form upon completion of your research project. You may reapply for a project extension if needed.
- You are also required to promptly notify the IRB Chair of any problems that arise during the course of the research.

________________________________________

Eric Goedereis, Associate Professor,
Psychology
Mary Preuss, Associate Professor, Biological Sciences
Co-Chairs, Webster University Institutional Review Board
470 E. Lockwood Ave. St. Louis, MO 63119-3194 USA Phone: 314-968-6962
Fax: 314-968-7076 www.webster.edu

Home Campus: St. Louis, MO, USA
Appendix J: Certification of Completion

Certificate of Completion

The National Institutes of Health (NIH) Office of Extramural Research certifies that Amanda Mauro successfully completed the NIH Web-based training course "Protecting Human Research Participants".

Date of completion: 11/07/2017.

Certification Number: 2554315.
## Appendix K: Tables

### Survivors

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<th>Themes</th>
<th>Frequency</th>
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### Care Workers

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