

The Lighthouse

Two Year Outcomes Report & Review



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1. INTRODUCTION

The Lighthouse Two Year Outcomes Report and Review provides an overview of the first two years of Orangewood Foundation's The Lighthouse Transitional Living Program for survivors of sex trafficking. Within the report is our background story, detailed model of service provision, demographics of applicants, resident progress and success, as well as some of our unique practices for addressing the needs of survivors within a housing program.

The overall goal of this report is to share our service delivery model, so as to be replicated, inform current and future transitional housing program designs, improve and strengthen best practices and share our many lessons learned.

First we must acknowledge our many wonderful supporters and donors for providing the resources and means to operate The Lighthouse and of course our amazing current and former residents, who remind us daily that ***one's trauma and past doesn't define who you are today or who you can become.***

Four residents developed the following three questions to share some insight into their journey:

1. How has The Lighthouse assisted you?
2. What does success at The Lighthouse mean to you?
3. What accomplishments did you see yourself achieving before The Lighthouse? And what do you see yourself achieving now that you are here?

***Residents chose their favorite color for their story box.**

Resident #1 – 24 months

"Dreams and dedication are a powerful combination." – William Longgood

The Lighthouse has taught me to make goals and follow them, that it's ok to change your mind, but to always have a backup plan. When I first got to The Lighthouse, I was motivated by staff to continue with my education because that was the most important thing to me. I finished my GED the first couple weeks I lived here.

I worked two seasonal jobs at the same time and staff made it a priority to support me as much as they could every step of the way. After working at Target and Toys R Us, my Case Manager and I talked about my next steps. After a couple of weeks of talking through my options, we found a medical assistant program that fit everything I was looking for. My Case Manager helped me with the process, taking me on a tour of the program, what to write on my application and preparing for the interview. Staff and my Case Manager encouraged me to continue to work until I heard if I got accepted. I got into the program and started soon after.

Continued.....

I graduated eight months later as a Certified Medical Assistant, with a Certificate in HIPAA Compliance and was presented with an award for Perfect Attendance. I then spent time working at a doctor's office after my program.

Through the whole process, staff made sure to help me every step. From dropping me off at the bus stop at 6 in the morning, to picking me up again at 6pm. They made sure I had a quiet and comfortable space when I did my homework and to study. It made me so happy when all the staff came to my graduation. They came with flowers, hugs and support. I was so happy that I completed something that I thought was going to tear me down.

I then enrolled in community college to take my career further. My Case Manager was so supportive in helping me decide what classes to take, going with me to get my college ID and sign up for financial aid. After a couple of months I decided college wasn't working for me.

My Case Manager let me know it was okay to take a break and focus on myself. After some time to think, I decided to look for another job. I have now been working at Ross for about nine months and was recently promoted to Shift Manager.

The Lighthouse also helped me apply to a program for foster kids to get my braces and found a dentist to donate the treatment for my teeth. I now have a smile I have always wanted! I recently took driving school and got my driver's license. In the next couple of months I will reach my savings goal to buy a car. The Lighthouse has completely helped with anything that came in my path, from struggles to goals, to my healing and emotions. I am lucky to have accomplished as much as I have here. I don't think I would have accomplished as much if I was somewhere else.

Success for me has been finishing my GED and Medical Assistant Program, gaining work experience in the medical field, experiencing college, getting my driver's license and building a savings plan. All of which I did! Also, success for me has been learning skills to deal with my life such as coping and personal skills. I believe and I know, I succeed at all of this because of the help and support of staff.

I honestly didn't know what I wanted before coming to The Lighthouse. When I first came, my Case Manager and I brainstormed a lot and then made my plans come to life. Now two years later I've learned that I can accomplish anything as long as I try my hardest and stay focused. I plan on going back to college and furthering my career in the medical field and maybe get my cosmetology license. I plan to move out of The Lighthouse in the next couple of months and transfer to another housing program within Orangewood, where there is still a lot of support, but where I'll be more independent.

Leaving The Lighthouse with a car and savings is something I never dreamed possible and never expected in my life. I can never thank The Lighthouse enough for all the trial and errors we went through together these two years. I love The Lighthouse and wish I could live here forever. I will continue to keep in contact and know I can count on them in the future.

Love you Lighthouse!!!!!!!!!!!!!!



Resident #2 – 22 months



My Journey of Blooming Into a Butterfly

I view my journey here like the cycle of a butterfly. I start with laying the eggs. Since coming to The Lighthouse I started community college where I took law enforcement classes, finishing my first semester on the Deans Honor Roll. I paid off all debt, participated in therapy, held two jobs and am now currently working one full-time job, making above minimum wage. Most importantly it has assisted me through my healing process.

Next phase of my butterfly cycle is hatching into a caterpillar. Through this process I learned about myself. With the support of staff and therapy, I dug deep into my inner self and started to discover who I am and what I would like to be in society. I took back control of my life.

With all the support and love I have received at The Lighthouse, there isn't a doubt that being here led my process to turn into a caterpillar, growing and making a cocoon. This phase consisted of me making and feeling like The Lighthouse is my home, taking on challenges where sometimes it failed and sometimes it succeeded. I made short and long term goals and with motivation have experienced many successes like maintaining a job, getting college experience, opening and growing a savings account, building a safe support system and excelling in my career of being a professional Security Guard.

Also seeing my peers achieve their goals like graduating from school, getting employed, getting their driving license or permit and enrolling in college, has motivated and shown me that success is possible and regardless whether it's big or small, we always celebrate everyone's achievements!

Lastly, I have emerged into a beautiful butterfly. I have realized my support system is a big part of my success and have seen my long and short term goals falling into place. My dreams have become my reality. I have taken on leadership roles and started doing more of what I like. I'm learning how to enjoy life again. I'm currently in art therapy where I can express myself through art and writing, which has led me to want to go back to college to major in journalism. I have made progress in therapy, letting go of some of the pain that was holding me back. I feel I have taken back control of my life and it feels great!

My time at The Lighthouse has been amazing and I'm grateful I have had the opportunity to be a part of this program. When I think about what The Lighthouse means to me, I think of:

**HEALING, GROWTH, FAMILY, SUCCESS, WOMAN POWER, GAINING BACK YOUR VOICE
AND SUPPORT!!**



Resident #3 – 6 months

The Lighthouse has assisted me so much in every part of my life.

- *Educationally, I am able to continue my four year college degree with help from staff taking me to academic appointments, helping me get letters of recommendation, and even helping me academically plan my courses.*
- *Emotionally, I have an amazing therapist who has helped me tremendously. I've been able to process my past and plan my future the way I want it, and help me heal correctly.*
- *Financially, I have been able to get a real job, making great money. I've made the most money and worked more hours than I ever have in my life. More importantly, I've learned what it means to support myself and own my finances that I have worked so hard for.*

Success at The Lighthouse to me means moving forward and upward. To leave the past behind and do your best to have a better future.

I saw myself accomplishing independence and stability before entering The Lighthouse. However, now that I'm here I see much more than that. I see myself getting over my trauma, moving forward and growing. I truly see success in all aspects of my life including my happiness and self-worth.

Resident #4 – 4 months

The Lighthouse has helped me get an I.D., get my Social Security Card, write my first resume, fill out job applications, practice interviews, get my first ever job at El Pollo Loco, open my first bank account, start therapy, look into beauty school, get to appointments like my court dates, and they took me shopping to buy clothes when I didn't have any.

To me success means looking and being happy, working a job I enjoy, having positive people and vibes around me.

Before I came to The Lighthouse I wanted to give up. Now that I am here I want to go to college and work.



2. BACKGROUND

Human trafficking is the world's fastest growing criminal enterprise. It is an estimated \$150 billion-a-year global industry, profiting from the exploitation of society's most vulnerable populations¹. Commonly referred to as modern day slavery, it is a serious, complex human rights issue. California's Office of the Attorney General acknowledges that California is one of the nation's top destination states for human trafficking. The office attributes it to the state's population, location on the border, high immigrant population, and large economy. In 2017, the National Human Trafficking Hotline reported 1,305 cases of human trafficking in California; of which 1,009 were specifically sex trafficking².

There is a misconception that the majority of trafficked women and children come from South East Asia, Russia or Central America. Current statistics show sex trafficking is increasingly a domestic issue, with the vast majority of women and children sold for sex in the U.S. are American Citizens. The trafficking of women and children for the purpose of sexual exploitation has serious public health implications with direct

linkages between sexual exploitation and the prevalence of HIV/AIDS, STDs, reproductive issues, mental health, violence and abuse³.

Sex Trafficking

A form of human trafficking for the specific purpose of sexual exploitation, including the recruitment, transportation, transfer, harboring or receipt of persons, by means of force, fraud or deception. Including child sex tourism (CST), domestic minor sex trafficking (DMST) or commercial sexual exploitation of children (CSEC), and prostitution.

According to the Coalition to Abolish Slavery and Trafficking (CAST) in Los Angeles, the problem is not abating. Last year (2017) they saw a 31% increase in calls to their helpline⁴. These numbers only reflect those victims able to reach out for help and does not account for the hundreds, or possibly thousands, of women and children still trapped in what is referred to as 'the life' or 'the game'.

In Orange County, California sex trafficked women and children are exploited in multiple ways and are often forced to work on the streets, known as the 'track' or 'blade'. This is especially common near popular tourist destinations and theme parks. Others are advertised and sold via the internet and social media. Often, traffickers move victims from hotel to hotel in an effort to evade authorities, keeping victims in unfamiliar locations and following the demand for paid sex from attendees at sporting events and conventions.

¹ State of California, Department of Justice, Office of the Attorney General. Human Trafficking, <https://oag.ca.gov>

² National Human Trafficking Hotline. <https://humantraffickinghotline.org>

³ Ashbridge, T. (2008) The Public Health Implications of Trafficking (Masters Dissertation). Wright State University

⁴ Coalition to Abolish Slavery and Trafficking (CAST), <https://castla.org>

3. THE LIGHTHOUSE MODEL

The Lighthouse was developed as a community response to the severe gap in housing for Transitional Aged Youth (TAY), victims of sex trafficking ages 18 to 22 years within Orange County. The Lighthouse became a reality in October 2016 when Orangewood Foundation received a generous donation of a five bedroom house and start-up funding from a private donor. Before The Lighthouse, there were no TAY transitional housing programs within Orange County specifically serving survivors of sex trafficking.

Since opening in October 2016, we have served a total of **11** survivors, referred to within this document as 'residents'. The rationale behind specifically focusing on young women ages 18 to 22 years includes the following:

1. Reduce the rates of homelessness experienced by trafficked young women aging out of the foster care system.
2. Recognition that survivors ages 18 to 22 years may be less entrenched within 'the life', possibly increasing their chance to exit and reduce reentry.
3. Although technically adults, survivors ages 18 to 22 years, often experience trauma-related cognitive and developmental delays requiring specialist care and support, which the majority of adult services are unable to provide.

BEST PRACTICE

Trauma Specific Services

Evidence based prevention, intervention, or treatment services addressing traumatic stress as well as any co-occurring disorders (substance use and mental health) that developed during or after trauma.

BEST PRACTICE

Survivor Centered

An approach that applies a human rights-based perspective to designing and developing programming that ensures survivors' rights and needs are first and foremost.

The ultimate goal of The Lighthouse is to reduce resident's reentry back into sex trafficking, through gaining and retaining meaningful employment, increased educational outcomes, maintained positive behavior change and strengthened resiliency.

The Lighthouse is a six bed, two year (flexible duration depending on individual needs) voluntary program. We do not rescue nor save victims. Instead, we empower residents to make their own decisions, respect choices, encourage self-determination, and provide stability in a home environment built on mutual

respect, trust and safety for both residents and staff. Through trauma-specific and trauma-informed care, harm reduction interventions and the promotion of recovery and healing through a survivor centered

BEST PRACTICE

Trauma Informed Care

Strength- based service delivery grounded in an understanding of and responsiveness to the impact of trauma, emphasizing physical, psychological, and emotional safety for both survivors and providers, and creating opportunities for survivors to rebuild a sense of control and empowerment.



approach, we work in partnership with “*where each young woman is at*” regarding her readiness to change behaviors. This partnership ensures residents are not mere passive recipients of support and services, rather they are the primary source for expressing and defining their individual goals and needs.

Specific components of The Lighthouse model include individualized case management, safety planning, collaboration, authentic relationship development, cultural and developmental appropriateness, and the intentional focus on:

- Building trust
- Promoting autonomy
- Promoting positive behavior change
- Understanding & maintaining safety
- Empowerment
- Understanding victimization
- Goal development & attainment
- Leadership opportunities

#1. Lesson Learned – Labels Victim Vs Survivor

Lighthouse residents made it very clear they didn't want to be known as “victims,” feeling the word made them seem weak and broken. The term “survivor,” while embraced by some residents, was another label that reminded them of past traumas. The one commonality amongst all residents is they want to be like any other young person their same age, without labels or reminders of their past.

#2. Lesson Learned - Curriculum

During our first three months, we implemented a daily curriculum which was mandatory for all residents to participate. This included expectations of bed time, morning wake up, attendance in group therapy, group outings, life skill classes and 24/7 eyes on each resident. We quickly learned that residents were entering the program having been out of 'the life' for different lengths of time, were at different stages of their recovery and required different levels of care and support. They certainly didn't want to sit around the house with time on their hands 'healing'. They wanted to focus on their education, employment and getting on with their lives.

Our 'cookie cutter' curriculum, which we believed provided much needed structure, was not only holding residents back from societal re-integration, it was inadvertently causing re-traumatization due to our level of control, resembling that of a trafficker. With input and feedback from residents, we moved away from a structured daily curriculum and implemented programming that is individualized for each resident and reflective of life within the 'real world'.

3.1 SAFETY AND SECURITY

The Lighthouse has strict security protocols in order to establish physical and emotional safety. The location of the house is never publicly disclosed; security systems monitor 24/7; all residents use a drop off/pick up location within the community; location identifiers on cell phones must be turned off and strict rules regarding the use of social media are in place; mail is delivered to an alternative postal address and residents are not to disclose the location of the house to family or friends. Violation of these protocols is grounds for immediate exit. Also, Orangewood Foundation does not share names of residents to ensure safety and confidentiality.

On admission, the Case Manager and resident develop an individualized security plan, including changing cell phone numbers, strategies to avoid contact with her trafficker, other traffickers or individuals still in 'the life', 'tracks', 'blades' and triggering locations. The security plan also contains an emergency response protocol to be enacted in the event that a trafficker identifies a resident's location.

During the first 30 days at The Lighthouse, curfew is 10PM. After 30 days, curfew is 12AM during the week and 2AM on the weekends. If residents wish to stay out past curfew or stay overnight away from the house, they fill out a leave form which is signed off by a staff member. The leave form encourages residents to plan ahead, including what time they are leaving and returning, how they are getting to their location, do they have enough money, cell phone charged, emergency contact, harm reduction conversations about the use of alcohol or drugs and a reminder to always immediately call staff if feeling unsafe or in an unsafe situation.

#3. Lesson Learned – Trust

Trust is often an unfamiliar concept for new residents, many of whom have never been shown trust or understandably have lost trust in adults. New residents often test the boundaries of the program and staff's trust. Testing boundaries is a healthy developmentally appropriate behavior for all young people, increasingly so for survivors of sex trafficking figuring out how trustworthy an adult (staff) is and how far boundaries can be pushed in order to test limits.

At The Lighthouse, we place a large emphasis on trust. We do this to maintain an environment of safety, security and ultimately to reduce behaviors that are risky or detrimental to the health of residents and the program as a whole. We trust residents when they tell us where they are going and who they are seeing. We don't drug test, search bags, belongings or rooms. Instead, we have non-punitive open and frank conversations with residents about our expectations, what we have observed or heard, and allow residents time to respond, process and rectify situations (if not putting other residents or program at risk), through a restorative justice approach.



#4. Lesson Learned – Cell Phones

Within our original first three month curriculum, the use of cell phones and social media was not allowed. We felt that by banning contact with the majority of the outside world (residents had a safe contact list and could use the house phone once a day), we were providing a safe environment for all.

When residents started attending school and work, we assigned them a flip phone to call staff for pick up. We quickly learned that residents were embarrassed to use the flip phone in front of new school friends and work colleagues. Again, our own good intentions and need to control was causing more harm by holding residents back from any feelings of normality. Our controlling actions were triggering and re-traumatizing, perpetuating resident's feelings of being back in 'the life'. In discussion with residents and staff, we decided to allow cell phones and the use of social media with an agreement that all locators on phones be turned off, and together we wrote guidelines for the use of social media, which all residents continue to follow to this day.

3.2 STAFF

The Lighthouse provides 24/7 staffing and on-call support. The staffing structure includes Program Supervisor, Case Manager, Advocate, five Youth Support Specialists covering three daily shifts (morning, afternoon and overnight) and an unofficial therapy dog. The **Program Supervisor** works primarily on-site, directly supervising staff and providing continuous feedback and coaching to ensure consistency and continuity in program delivery.

The **Case Manager** assesses the needs and strengths of each resident, provides information on available services, establishes comprehensive *Individual Life Plans (ILP)*, makes referrals, coordinates services, accompanies residents to appointments including court, advocates and provides emotional support.

The **Advocate** plays an important role in assisting residents to adjust to life outside of sex trafficking, through shared living experiences. The Advocate works with the Program Supervisor and Case Manager during the interview process, assisting with decisions regarding an applicant's suitability, coordinating admission, and supporting residents as they undertake a self-reflection within their first week. This initial self-reflection is used as a tool to develop goals which are included in each resident's ILP.

The Advocate undertakes a self-reflection with each resident every three months; provides ongoing support to achieve goals; provides transportation and support at appointments; assists with recreational outings; sets up rooms for new residents; and prepares welcome packs. The Advocate is an employee and role model and as such is held to the same standards and expectations as all Orangewood Foundation staff.

An integral part of The Lighthouse is our **Youth Support Specialists** who manage the day-to-day operations of the house by providing a clean, caring, safe and supportive home environment. The Youth



Support Specialists provide a positive and calm influence, using creative and developmentally appropriate ways to teach life-skills such as cooking, cleaning, personal hygiene, grocery shopping, laundry and grooming. Youth Support Specialists also assist residents with their daily routines, including transportation to activities, school, work, individual appointments and recreational outings, while providing behavioral redirection to support residents in following program guidelines. Our morning Youth Support Specialist is unofficially known as the ‘house mom,’ overseeing the running of the house, daily resident schedules and appointments, house maintenance and staff support.

The **Youth Support Specialists (Night Shift)** provide safety, security and companionship during nighttime hours. It is common for residents to experience sleep disorders and nightmares. Having spent years forced to be awake at night and sleep during the day, their bodies have become conditioned to be awake all night. Some residents feel safer at night sleeping on the couches to be closer to staff. The Youth Support Specialists (Night Shift) are responsible for the safety and security of the house at night, including responding to emergency situations both at the house and when situations arise with residents within the community during the night.

Wonton, the Pug (pictured right), was adopted by the Program Supervisor and quickly became The Lighthouse’s unofficial **Therapy Dog** providing cuddles, laughter and support. Wonton has endured her own past trauma and residents could relate with her anxiety attacks, learning to use calming and soothing words to calm her down. Wonton has been very spoiled with residents bathing and grooming her, dressing her up, taking her for walks, spending their own money on toys and treats and watching movies together on the couch.



To ensure staff are appropriately trained, Orangewood Foundation requires them to undertake Commercial Sexual Exploitation of Children (CSEC) 101 and CSEC 102, certification in CPR and first aid, and participate in a weekly Operations Meeting (attended by Case Manager, Youth Support Specialists and Advocate). In addition, they are required to attend monthly Staff Meetings (includes all Lighthouse staff and Management) and monthly process group/professional development sessions on topics requested by staff. Topics have included but are not limited to, the effects of trauma on cognitive development, attachment, self-care, team building and boundaries. Professional development sessions are facilitated by an outside Licensed Clinical Social Worker (LCSW), whose practice focuses on survivors of trauma, including sexual trauma.

Lighthouse residents are included in the staff hiring process. After the first interview, they have the opportunity to sit on the interview panel. The questions residents ask, coupled with their invaluable insight and ability to read body language, always makes for an interesting interview! We never hire a new staff member without the input and consensus from all residents and staff.

#5. Lesson Learned –Staff

It has taken two years to become fully staffed and to have the amazing team we have today. Our staff are secure in themselves, able to walk beside residents, provide guidance and suggestions without telling them what they must or must not do, and understand that all young people make mistakes. Most importantly, staff are compassionate, authentic, and present.

#6. Lesson Learned – Life Skill Development

We found the most effective and developmentally appropriate way to teach residents life-skills such as cooking, cleaning, personal hygiene, grocery shopping, laundry, and grooming, was not to hold life skill groups, but to have our Youth Support Specialists role model and support residents to undertake tasks together. For example, some residents had never washed dishes or used a dishwasher. The Youth Support Specialist washes the dishes and loads the dishwasher with residents working as a team.

#7. Lesson Learned – Resident Guidelines

Residents and staff collectively wrote the Resident Handbook, setting forth the guidelines of the program. Residents felt the word guidelines was ‘nicer’ than saying rules. Interestingly, we found residents punitive in their suggestions for guidelines, wanting restricted curfews and residents removed from the program for small indiscretions. When reminded that these same guidelines would apply to themselves and they would have already been removed from the program due to the same infraction, they softened their tone and expectations.

3.3 CASE MANAGEMENT

On admission, residents frequently presented with a number of complex co-occurring needs, such as medical, dental, mental health, substance use, legal, immigration, and security concerns. Such complexities required us to provide an individualized, coordinated approach to case management, including linkages to comprehensive services and treatments across multiple systems of care including Orange County Social Services Agency, Orange County Health Care Agency, Waymakers (victim advocates) and Legal Aid Society of Orange County.

BEST PRACTICE

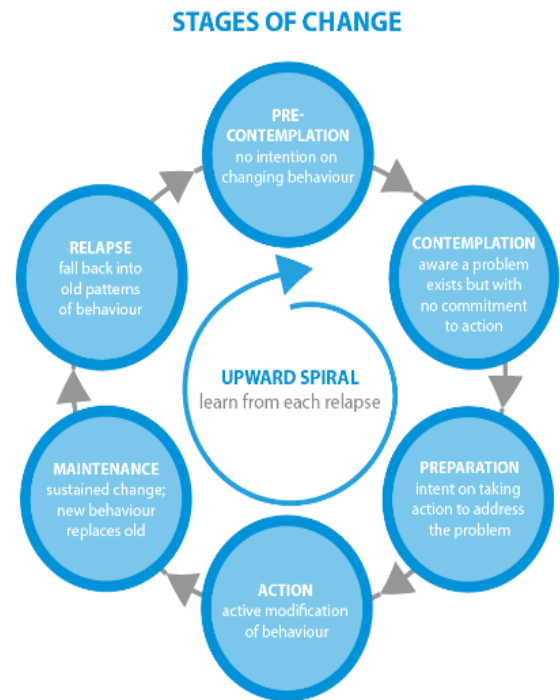
Stages of Change

A model of health psychology which establishes that people go through various **stages** when they are trying to **change** behavior. Often applied to a range of behaviors people want to change, but have difficulty doing so. It is well-recognized for its success in treating people with addictions.



At the core of case management is each resident's active involvement in the development of an Individual Life Plan (ILP). ILPs are reflective of where each resident is at in her stage of change. Given the disempowerment experienced while in 'the life', our Case Manager employs a strengths-based, survivor-centered approach, ensuring residents retain control and autonomy in determining their short and longer term goals within six core outcome areas:

1. Health and Well-being
2. Life skills and personal development
3. Education
4. Employment
5. Recreation
6. Permanent connections (family and community)



Ensuring continuity of care, each resident's ILP is collectively supported by all staff and reviewed monthly at staff meetings. Residents are encouraged to keep a copy of their ILP, using it as a tool for motivation and to refer to during case management meetings. Every three months, the resident, Case Manager and Advocate review progress; discuss successes, struggles, learnings from set-backs; and develop goals for the following three months. Case management meetings occur for a minimum of one hour per week.

#8. Lesson Learned – Case Management

Residents responded more favorably towards case management when meetings occurred offsite, such as at a coffee shop or while undertaking activities such as bike riding, kayaking or walking on the beach, where the focus wasn't directly on them.

3.4 HOUSE MEETINGS

Once a month all residents and staff come together to discuss issues within the house, provide updates and plan upcoming activities. House meeting facilitation is rotated among residents and supported by the Case Manager and Youth Support Specialists.

3.5 CELEBRATIONS

At The Lighthouse, we celebrate everything! We can't predict how long each resident will be with us, so we feel a responsibility to provide lasting positive moments and memories. Every achievement, success, milestone and national holiday is celebrated with decorations, food, presents and laughter. Celebrations have included:

Birthdays	Drivers Permit/License	4 th of July
Graduations	Easter	Thanksgiving
Employment & Promotions	Christmas	Halloween
Length of time at The Lighthouse	College Semester Completion	Super Bowl

Recently we celebrated a resident's birthday. She stated to staff ***"it was the best birthday ever"***, informing us that she wasn't allowed to celebrate her birthday while being trafficked and growing up her family was too poor to celebrate birthdays.

4. APPLICANTS

A total of **42** young women applied to The Lighthouse within our first two years. Among the total applicants, **55%** met our eligibility requirements and moved onto the interview stage. Twenty six percent (**26%**) then entered the program. Nine percent (**9%**) of applicants were provided a move in date but chose not to enter due to previous conflict with a resident, family emergency or returning to their trafficker. Twenty percent (**20%**) were placed on the waiting list due to program capacity (as of October 2018 - **15** applicants are on the waiting list).

There were numerous reasons **45%** of applicants were ineligible, including **12%** actively using drugs (excluding cannabis or alcohol), severe psychiatric disorders, extreme safety risks from their trafficker, displayed suspicious or recruiting behavior, or were not serious about making a change in their life, seeing The Lighthouse as just a roof over their heads. Another **33%** of applicants did not return phone calls, emails or did not attend their scheduled interview.

4.1 APPLICATION PROCESS

The Lighthouse admission process is intentionally **not** low barrier, nor a housing-first model for two reasons;

1. The Lighthouse is not a crisis shelter.
2. To minimize recruitment risks back into 'the life' from new residents (often recruiting on behalf of their trafficker).

During the first interview, the Program Supervisor and Advocate confirm the applicant's status as a trafficking survivor, discuss readiness to change, identify safety concerns regarding her trafficker or gang involvement and provide information and expectations regarding the program. A small care package arranged by Lighthouse residents with hygiene products, snacks and a letter of encouragement is provided to all applicants at their first interview.

The second interview is conducted by the Case Manager and Advocate, specifically focusing on goals, potential issues (e.g., living with five other young women, sharing bathrooms etc.), a review of program guidelines, and answering questions.

If the first and second interviews are successful and the applicant is assessed as safe, she is invited to tour the house. We start empowering applicants to make their own choices by providing the option to stay overnight or for the weekend, gaining a better understanding of how the program operates. Lighthouse residents arrange group outings to the movies, dinner, etc. to get to know the applicant. After the applicant's stay, the Program Supervisor receives feedback from her, specifically if she feels the program is a good fit, as well as from residents and staff regarding her suitability.

On a tour of The Lighthouse, an applicant walked into the house, looked around and burst into tears. She said;

"The house is so beautiful and the staff are so nice, I don't deserve to be here."

Celebrating a new resident's entry into The Lighthouse is an important and exciting event for the entire household. A lunch or dinner is arranged, with the new resident selecting the restaurant of her choice. One resident chose to go to Olive Garden, stating, ***"That was the fanciest restaurant I've ever been to."*** Another resident chose a Chinese restaurant, as she had never eaten Chinese food.

#9. Lesson Learned – Interviews

As discussion of an applicant's past may provoke stress and anxiety, we provide assurance that she does not have to disclose details of her time in 'the life', minimizing risks of re-traumatization. We monitor signs of distress and take breaks when required.

#10. Lesson Learned – Applicants Under 18

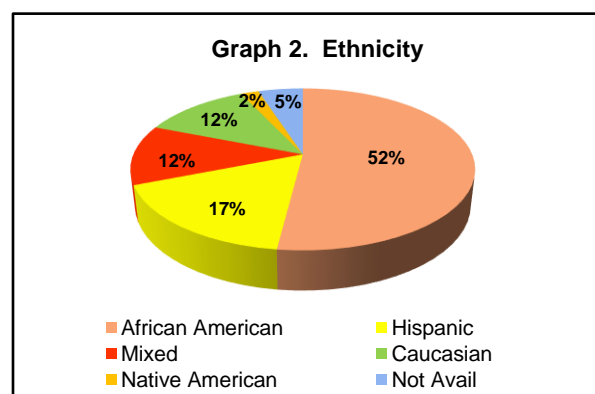
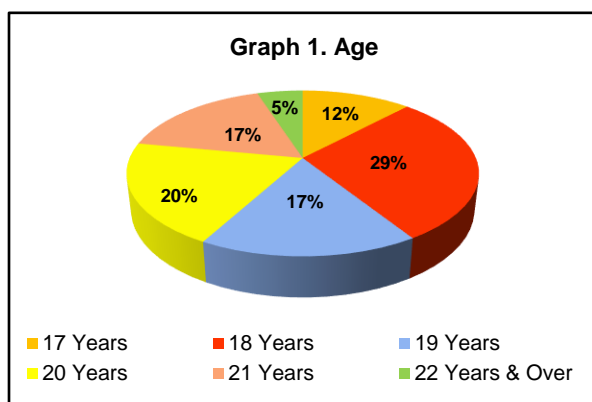
An applicant aged 17 years (turning 18 within the next month) has the option to spend her days at The Lighthouse, setting up her bedroom, spending time with staff and residents and starting case management. As a minor and due to licensing, she returns to her foster home/group home each night. On the day she turns 18, she can 'officially' move in. We have found this process relieves the stress and anxiety of moving to a new program, having already become familiar with staff and residents.

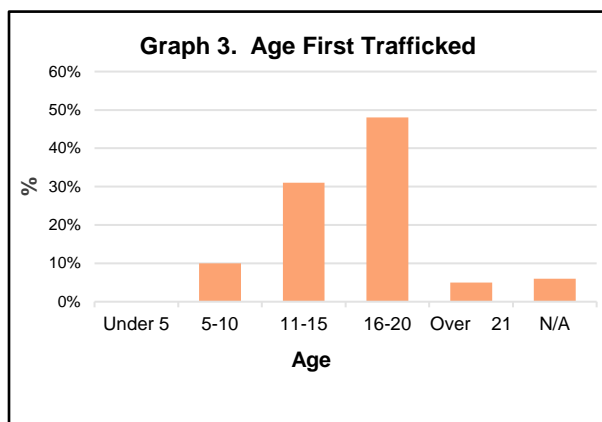
4.2 REFERRAL SOURCE

Referrals to The Lighthouse have come from other non-profits, emergency shelters, youth shelters, mental health services, government agencies, Police Departments, Public Defenders, group homes and peer recommendations.

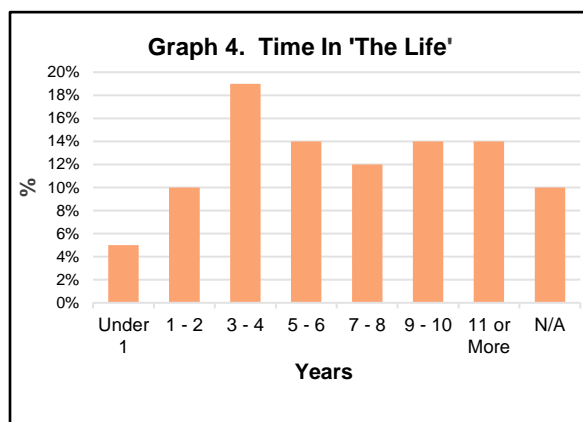
Referrals received from counties within Southern California have included Orange, Los Angeles, Riverside and San Diego. Referrals have also come from counties in Northern California including Alameda, San Luis Obispo, San Francisco, and Sacramento. We have also received referrals from other states including Nevada, Nebraska and Arizona.

4.3 APPLICANT DEMOGRAPHICS



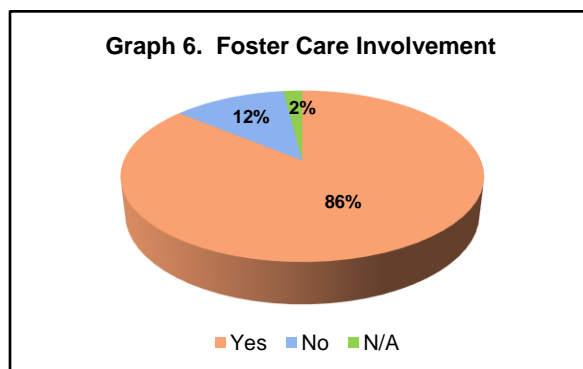
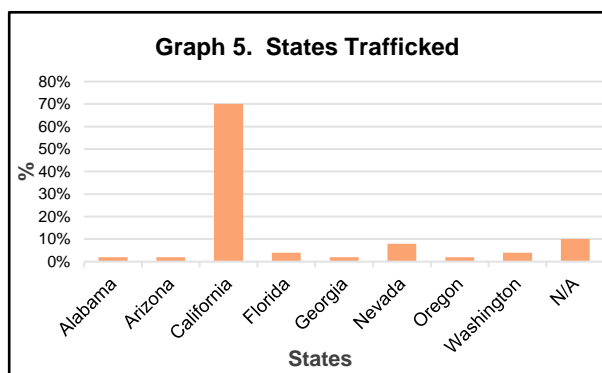


*Average 16 years



*Average 3 years

According to *Shared Hope International*, the common age a child enters sex trafficking is 14-16 years⁵. Our finding that the average age an applicant was first coerced into sex trafficking being 16 years (some applicants as young as 8 years) is consistent with their findings.



According to California Against Slavery Research & Education (CASRE), between 50 and 80 percent of commercially sexually exploited children in California are or were formally involved with the child welfare system. Our finding that **86%** of applicants had previous involvement with the foster care system, again aligns with current research findings.

⁵ Shared Hope International. <https://sharedhope.org>

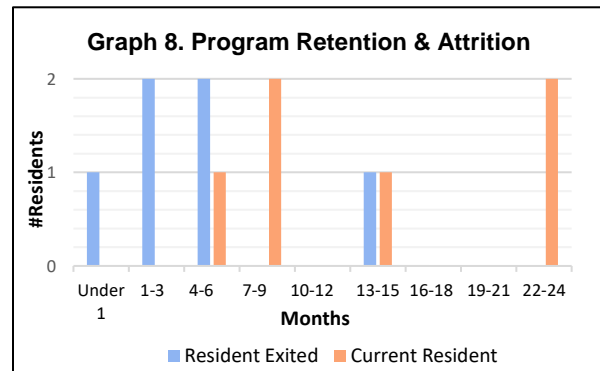
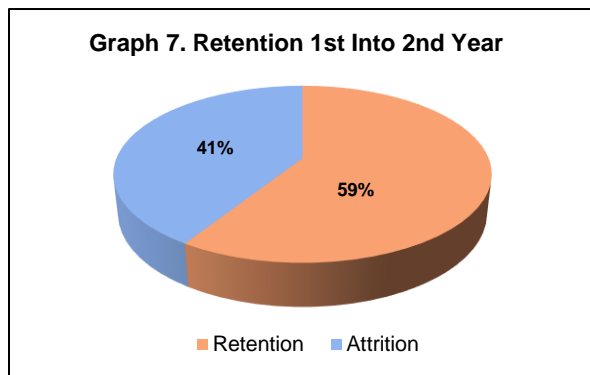


5. PROGRAM RETENTION & ATTRITION

In total, **11** residents entered The Lighthouse during our first two years. By the end of our second year (October 2018), **59%** of residents who entered during our first year had continued onto their second year. Our very **first** resident who entered on Day 1 in October 2016, and our **third** resident entering December 2016, have called The Lighthouse home for **24** and **22** months respectively. Overall retention in the program has ranged between **2** weeks and **24** months, averaging **9** months.

Table 1. Residents Served

Residents	Year 1 Oct 2016 – Sep 2017	Year 2 Oct 2017 – Sep 2018	Total
Program Admission	7	4	11
Exited/Self-exited	3	3	6
Exited/Self-exited and returned	-	1 (#included above)	1
Retention 1 st year into 2 nd year of program	4	-	59%



The majority of residents who were exited or self-exited (**83%**), did so during their first six months, as indicated in Graph 8. Despite concerted efforts by staff and other residents to support new residents to acclimate to the program and life outside of sex trafficking, we found a higher likelihood of residents exiting during this time period. Unfortunately, the first six months is one of the most crucial time periods in creating a foundation of stability, trust and relationships.

From the **6** residents who exited the program, **4 (67%)** requested and/or reapplied to re-enter. However, due to program capacity, readiness to change, safety of the resident or program, only **1** former resident has re-entered, returning **2** months after she self-exited.

#11. Lesson Learned – Reducing Length of Time Back in ‘The Life’

One resident chose to self-exit after six months at The Lighthouse. Before leaving, staff informed her that her bed would be held for a specific length of time. While out of the program, staff pro-actively remained in contact, checking in through text message, letting her know she was missed and cared about, and using her mail delivery as an intervention to meet up in person. Our goal was to reduce her length of time back in ‘the life’, through the provision of compassionate and unconditional support, ensuring she didn’t feel judged for the choices she had made. Two months later she asked to come “home.” Residents wrote a “welcome home” message on the whiteboard, helping her to feel at ease and at home again.

6. PROGRESS & SUCCESS

The level of trauma, exploitation and abuse the young women endured before coming to The Lighthouse is incomprehensible. Regardless of how long a resident has been in or out of ‘the life’, healing is a personal, individual, life-long journey. Expectations that after two years at The Lighthouse residents will be fixed, healed, cured, ready to tell their story and become a spokeswoman for the anti-trafficking movement, or have become self-sufficient is unrealistic. Such expectations can cause re-traumatization and unhealthy pressure on residents to *“look like they have their life together”*, increasing the risks of reentry and re-victimization through returning to ‘the life’.

Progress and success look different for each resident. In order to evaluate progress and success with some consistency, we use a number of methods including data entered into Orangewood Foundation’s Youth Information System (YIS), reviewing case notes, ILP’s, staff observation and most importantly self-reflections completed by residents every three months. A resident’s first self-reflection creates a baseline against which each subsequent self-reflection is measured. Our benchmarks and indicators of progress and success include:

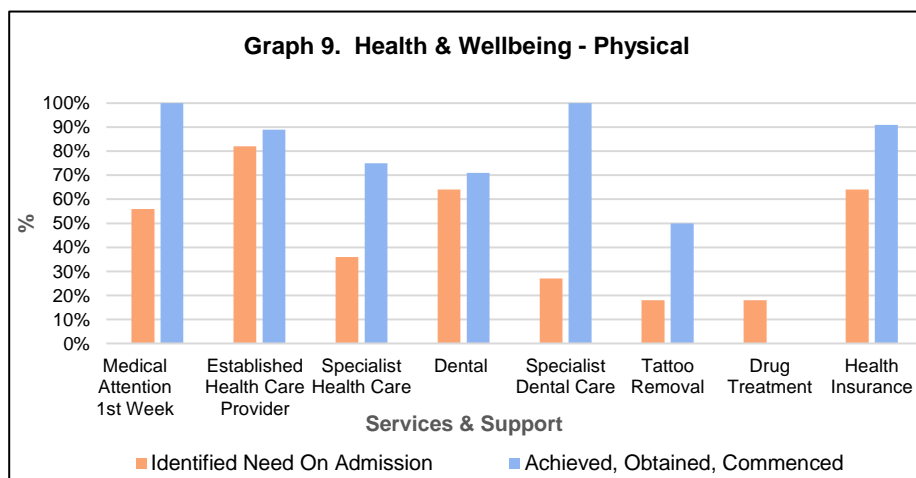
- **Changes in status** (e.g. from unemployed to employed, school enrollment to graduation).
- **Changes in affect** (e.g., health and well-being, reduced feelings of hopelessness and mental health symptoms such as anxiety, depression or sleep disorders, increased physical health, self-esteem and self-image).
- **Changes in knowledge** (e.g. increased understanding of their victimization, intimate partner violence, healthy relationships and boundaries, financial literacy, basic life skill knowledge and demonstrated application).
- **Changes in behavior** (e.g. reduced ‘at-risk’ behavior, increased self-regulation, demonstrated safety planning skills and program participation).



The following data was collated from our **11** residents who have called The Lighthouse home. For residents who were exited or self-exited, many of their goals were ‘in progress’ or had ‘commenced’.

6.1 HEALTH & WELL-BEING – PHYSICAL

On admission, **56%** of residents required medical attention for health screenings and other health related concerns. All residents (**100%**) who required medical care on admission received it within their first week in the program.



Specialist health and/or specialist dental care was required by **63%** of residents. Specialist dental (**75%**) and specialist medical (**100%**) was achieved. Residents were supported to enroll in medical insurance (**91%**) and establish a primary health care

BEST PRACTICE

Harm reduction

Practical strategies aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on, belief in, and respect for, the rights of people who use drugs.

provider (**89%**). Half (**50%**) of residents requiring tattoo and/or branding removal have started the process.

The reasons behind the co-occurrence of addiction and trauma are complex and not uncommon for people to manage the effects of trauma through self-medication using drugs and alcohol.⁶ On admission **18%** of residents requested and voluntarily enrolled in an outpatient drug treatment program (State issued insurance only covers one outpatient drug treatment service in Orange County, a daily intensive abstinence based 12 step program). Unfortunately, **0%** completed it.

The Lighthouse employs a harm reduction approach to drug use, specifically focusing on reducing risky or harmful behaviors associated with the use of drugs. We support resident's reduction in drug use, using motivational interviewing within a cycle of change framework, as opposed to being 12 step or abstinence based. For example a resident felt her cannabis use was interfering with her school grades. In conversation with her Case Manager they discussed the effects of

BEST PRACTICE

Motivational Interviewing

Motivational interviewing (MI) is a client-centered method for enhancing intrinsic motivation to change health behavior by exploring and resolving ambivalence.

⁶ Carrier Clinic, Trauma and Addiction, <https://carrierclinic.org>



cannabis and made a plan that the resident felt was realistic to reduce the amount she smoked on a weekly basis, till she was down to smoking once a week. At the same time, the resident chose to commence psychotropic medication and therapy, ensuring she was supported not only with her reduction in drug use, but also to process the returning trauma memories.

To be clear however, when drug use occurs within the house and conversations and cautions are not changing this behavior and other residents are being triggered, in the interest of our other residents and safety of the program, we have no choice but to exit the resident.

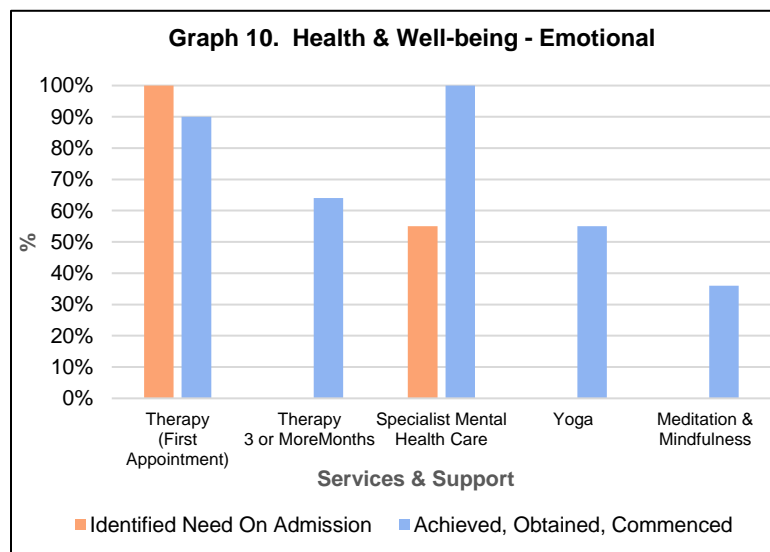
Overall, medical treatment and tattoo removal have been essential components of resident's mind-body healing, reducing the daily reminders of past trauma.

6.2 HEALTH & WELL-BEING – EMOTIONAL

A cornerstone of The Lighthouse's service delivery is the promotion of a holistic approach to recovery. As a result of the intense and prolonged psychological and physical trauma experienced while trafficked, many residents experienced significant psychological co-occurring disorders including post-traumatic stress disorder (PTSD), major depression, suicidality, anxiety, aggression, oppositional behavior, substance abuse and trauma bonding, also known as Stockholm syndrome.

Trauma Bonding

Traumatic bonding occurs as the result of ongoing cycles of abuse in which the intermittent reinforcement of reward and punishment creates powerful emotional bonds that are resistant to change.



Engagement in therapy is not a mandatory requirement of the program. In keeping to our commitment of providing trauma-informed care, we empower residents to make decisions regarding their own mind and body and within their own timeframe. We do encourage and support residents to meet with a variety of therapists **(90% of residents attended a first meeting)** to learn about different therapeutic modalities and make their own informed decision

whether to engage in therapy and if so, which form of therapy they may like to participate in. Currently The Lighthouse offers Cognitive Behavior Treatment (CBT), Eye Movement Desensitization & Reprocessing (EMDR), Trauma Release Exercises (TRE), Art Therapy, as well as linkages to specialist mental health care providers for psychotropic medication prescribing and maintenance.



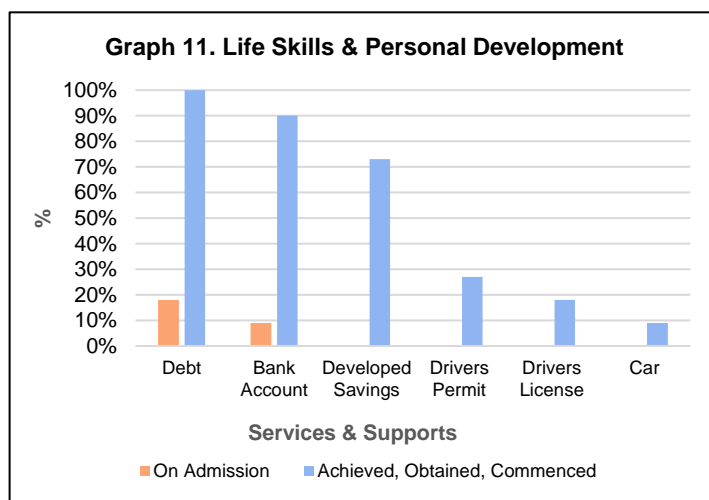
We found that as residents began to settle into the program and heard their peers discuss the benefits they were gaining from therapy, the majority (**91%**) chose to engage in mental health services. Specifically, **64%** of residents have consistently attended therapy for three or more months. If residents choose to take a break from therapy or not participate at all, they are strongly encouraged to choose another form of self-care such as yoga, meditation or mindfulness sessions or attend the gym.

All therapeutic services are provided off-site by highly skilled mental health professionals. It is intentional that we provide no services (e.g. therapy) at the house, ensuring a clear separation between triggering emotions during therapy sessions and residents coming home to a safe and familiar environment.

6.3 LIFE SKILLS & PERSONAL DEVELOPMENT

On admission, only **9%** of residents had an open bank account and **18%** were in debt. To date, **90%** of residents have opened a bank account, developed savings (**73%**) and cleared or reduced their debt (**100%**). Other types of financial literacy have included check/money order writing, budgeting, bank account management and learning to pay bills, such as a cell phone.

Just like most young people their age, for our residents becoming independent is strongly connected to obtaining their driver's license and purchasing a car. On admission **0%** of residents held a drivers permit, license or owned a car. To date, **35%** of residents have achieved their drivers permit or license and **9%** have purchased a car using their savings.



Although **100%** of residents have or had the goal of obtaining their driver's license and buying a car, trauma and assault experienced while in a car has proven triggering, requiring residents to work through specific traumas before feeling comfortable and ready to take their driving test.

Having experienced a violent crime, the Federal *Trafficking Victims Protection Act (TVA 2000)* allows trafficked victims to be protected rather than punished, even if they participated in illegal activities, such as prostitution, while being trafficked. On admission, **18%** of residents had criminal charges pending (trafficking related), half (**50%**) have since cleared their charges and half (**50%**) are actively working to clear them. Involvement in criminal procedures against their trafficker has been undertaken by **18%** of residents.



Of residents who entered The Lighthouse on probation (**18%**), half (**50%**) fulfilled their terms and conditions, thus terminating probation.

Immigration issues have specifically affected **18%** of residents, all of whom are currently working on their TVISA applications.

TVISA

A type of visa allowing certain victims of human trafficking and immediate family members to remain and work temporarily in the United States for up to four years.

#12. Lesson Learned – Rent Vs Savings

Originally, residents paid rent after residing at The Lighthouse for three months. Rent started at \$50, then increased in \$50 increments every three months. Rent was paid between the first and fifth of each month. In the days leading up to paying rent, staff noticed residents' behavior changed to being hostile, angry and avoiding staff. Residents informed they felt triggered handing over their rent money, as it reminded them of handing over their daily earnings to their trafficker.

In consultation with residents, we changed the word 'rent' to 'savings plan' and created a new system whereby residents have the option to choose how much they deposit into their savings account each month. Residents have the option of depositing a minimum of \$100, in which \$50 goes to Orangewood Foundation and \$50 into their savings account. If they deposit \$200, again \$50 goes to Orangewood Foundation and \$150 into their savings account. As an incentive to deposit \$300 or more, all \$300 or more goes into their savings account and Orangewood Foundation receives none.

Residents have informed they feel more in control, choosing how much they deposit and being able to keep the money they have earned. Savings can only be withdrawn to make a purchase if it is a goal within their ILP, for example buying a car. All savings are given back to residents when they complete or exit the program. To date the highest amount a resident has saved is \$8,000.

6.4 EDUCATION

On admission, less than half (**45%**) of residents had completed their High School Diploma or General Education Development (GED). Given the differences in residents' trauma-related cognitive abilities, past school experiences, issues with concentration, processing and recall, we support but do not insist on educational completion while at The Lighthouse.

The majority (**90%**) of residents felt ready to continue their education, with **18%** enrolling in GED, High School Diploma (**18%**), Vocational School (**18%**) and Community College (**36%**). Of residents who enrolled in their High School Diploma or GED, **50%** have graduated. Residents who undertook Vocational School, including Medical Assistant Certification and Culinary School, achieved **100%** graduation rate. Two residents achieved amazing results their first semester of Community College, including 4.0 GPA and making the Deans Honor Roll.

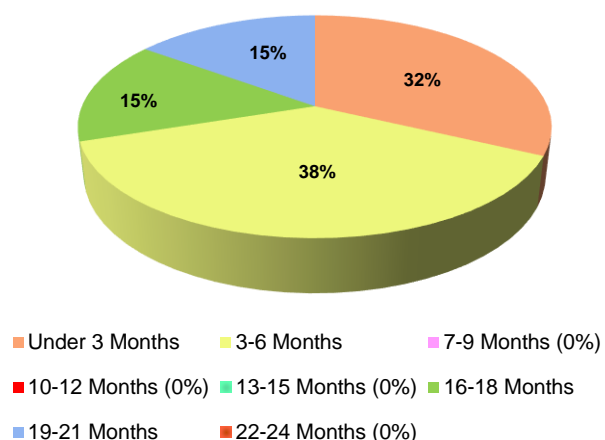


6.5 EMPLOYMENT

Residents not wishing to return to education are supported in gaining and retaining employment. On admission, **18%** of residents held employment. To date, a total of **73%** of residents have been employed while at The Lighthouse, **66%** gaining employment within their first three months in the program.

For **22%** of residents, this was their very first job and **33%** held two jobs at once. Employment retention varied from under three months (**32%**), 3-6 months (**38%**), 16-18 months (**15%**) and 19-21 months (**15%**).

Graph 12. Employment Retention



Residents gained employment within retail, fast food, warehouse packaging, security, and as an office assistant. Some residents chose to work night shifts due to their reversed body clocks.

#13. Lesson Learned – Money

Residents' relationship with money is complicated on multiple levels. One priority of The Lighthouse is to empower residents to believe they can be successful through meaningful employment without the need to put themselves at risk. They can get paid and keep their money.

After years of earning \$1000s a night (money given to their trafficker), residents often find working for minimal wage (such as \$10.00 per hour) incomprehensible, especially for residents who recently left 'the life'. One of the most common questions posed by residents is, *"Why should I work for \$10 an hour, when I can get \$1000s a night?"*

Redirecting to a health, safety and risk reduction perspective is one way staff assist residents on refocusing on their journey of healing. However, due to the complexities of resident's relationship with money, long-term support around money will be required.



6.6 RECREATION

The Lighthouse has always prioritized transformative new experiences, fun activities and outings, as many residents missed out on these experiences while being trafficked. Residents decide the activities and outings. After a house outing to Six Flags over the summer, one resident stated, ***“That was the best day of my life.”*** Residents and staff also organize fun activities at the house, including movie and slumber parties, cupcake wars, BBQs, gardening, house decorating and game nights.

Table 2. Activities & Outings

Paddle boarding	Bike riding	Kayaking
Rock climbing	Hiking	Swimming lessons
Disneyland	Whale watching	Beach volleyball
Six Flags	Movies	Go karting
Miniature golf	Shopping	Dinner at restaurants
Electric scooters	Ice hockey	Art walk
Karaoke	Bootcamp	Body combat



6.7 PERMANENT CONNECTIONS

While the majority of residents maintain some form of contact with their biological family members, these relationships are not always healthy. Residents understandably want to share their successes and achievements with family members. Unfortunately, the original reasons residents were removed from their families as minors and placed within the foster care system do not necessarily dissipate once they become adults and turn 18.

Family relationships have been detrimental to the point of actively encouraging residents to return to 'the life', to make *'better money'* than holding a job. Such comments are heartbreaking, causing confusion, anger, and setting back months of hard work, healing and achievements.

With limited support networks, it has been important for residents to make connections with healthy and supportive people outside of their families and former peer networks. This has included making friends through school and work, mentors, support groups and church connections.

7. CONCLUSION

Orangewood Foundation's The Lighthouse has bridged a critical housing gap within the community: specifically providing housing for transitional aged youth ages 18 to 22 who are survivors of sex trafficking within Orange County. Two years after opening in October 2016, we reflect back on our original service models, ideas and approaches, recognizing that as service providers we don't always have the answers or know what is best for those we intend to serve.

It has been imperative we learn from our residents, be open to change and have programmatic flexibility. Essential components of our model have included community collaboration across multiple systems of care, developmentally appropriate case management, a safe and stable home environment, and a compassionate, empowering and relational approach to meeting the needs of these young women.

Residents of The Lighthouse have not only achieved amazing success and personal growth, they have also been at the forefront in developing a survivor-informed transitional housing service model.

Thank you to all our Lighthouse supporters. Every donation from gift cards, groceries, tickets to events, hygiene items, knitted blankets and financial contributions has made an enormous impact in the lives of these amazing young women. We would not be The Lighthouse without your support!



"It represents what we have achieved".

Artwork designed by a Lighthouse resident

