



The Right Way

Right child. Right place. Right reason.

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CEO

The Road Ahead

Welcome to the first edition of 'The Right Way', a new quarterly publication from Youth Opportunity. We envision this newsletter as a platform to present our practices, methods, and opinions in the treatment of victimized and troubled young people to a broader audience.

We hope our thoughts might foster greater understanding of the seriousness of this problem and inspire others to join us in this mission. We aspire to contribute to the national knowledge base supporting juvenile rehabilitation. We humbly hope our successes might illuminate the path for others engaged in this critical work.



Transition Management: Success and Independence

By Jim Hill, President



When a young person leaves our care, we are hopeful. But we worry. We know that the progress we've made together can be undone in a matter of weeks. Studies show that if a young person reverts to the behaviors that brought them to rehabilitation, it is most likely to happen in the first 90 days after release.

What can we do to assure a smooth transition back to their lives – lives that are fraught with temptation and challenges? We can provide them with the fundamental tools of living. We can help their families and communities deliver the support they need. We can stay in touch, and be there for them. We can help them establish their identity with the necessities; the things all of us take for granted. *Continued on page 4.*

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The Price Is High

Juvenile delinquency has potentially high stakes for both individuals and society as a whole. Delinquency is linked to higher crime rates in adulthood and other negative outcomes. One estimate suggests that between 50 and 75 percent of adolescents who have spent time in juvenile detention centers are incarcerated later in life. - Childtrends



Using Dialectical Behavioral Therapy to Treat Human Trafficking Victims

By Marylou Erbland, PhD,
Director and Clinical Administrator



Many, if not most, of the problems troubled young people face are trauma-based. These behavioral or emotional struggles can manifest in many ways, including suicidal tendencies, self-harm, substance abuse, criminality, depression, and anxiety.

Dialectical Behavioral Therapy is a psychological treatment that was originally developed to treat patients diagnosed with Borderline Personality Disorder and chronic suicidal thoughts. It is now considered the first-line treatment in these cases. It has also been clinically proven to be effective in the treatment of substance abuse, depression, eating disorders, and Post-Traumatic Stress Disorder (PTSD).

At the Center for Success and Independence in Houston, we treat many victims of human trafficking. The essence of their rehabilitation must focus on the symptoms of Post-Traumatic Stress Disorder. Thus, we have adopted a Dialectical Behavioral Therapy model for our treatment of these young people.

Rebuilding Lives

Behavioral issues are typically ways that young people cope with problems. Similarly, psychological problems evolve from difficulties they can't handle on their own. DBT improves therapeutic outcomes by teaching behavioral skills and coping mechanisms that young people can use in their daily lives to develop an outlook that leads to a feeling that life is worth living.



In our treatment of human trafficking victims, who are subjected to extreme degradation, as well as physical and mental abuse, the results have been no less than miraculous.



The four modules of DBT:

Mindfulness: the practice of being fully aware and present in this one moment

Distress Tolerance: how to tolerate pain in difficult situations, not change it

Interpersonal Effectiveness: how to ask for what you want and say no while maintaining self-respect and relationships with others

Emotion Regulation: how to change emotions that you want to change



“Dialectic” implies an integration of opposites. In DBT, that means the juxtaposition of change and acceptance.

Through anecdotal evidence, psychological evaluations, and in-depth screenings, we assess the issues our patients have, map a treatment program, and begin individual and group therapy sessions. We believe follow-up efforts are important, both for the sake of the individual patient and for measuring the efficacy of our efforts.

Teaching Acceptance

Classical psychiatric treatments involve rigid conversational trajectories during sessions and a focus on change. For some patients, this is a viable structure. With PTSD patients, such as human trafficking victims, studies have found that they have a tendency to withdraw, stop their therapy, and even resent the treatment if there is too much focus on change.

PTSD patients must rebuild self-esteem and learn to cope with the past. Allowing patients to express themselves however they like, in whatever way feels comfortable, can lead to better outcomes.

First, they must accept that the source of their trauma – in our case human trafficking – is not their fault. It is difficult for some to accept the role of victim, but it is necessary for recovery. It helps when we accept their chosen method of self-expression first.

Balance in Treatment and Life

“Dialectic” implies an integration of opposites. In DBT, that means the juxtaposition of change and acceptance, which seem to be diametrically opposed.

Many victims begin by saying they feel like they are “in hell”, or that people don’t understand the depth of their despair. Next, they begin a period of quiet desperation.

We work to move them to defining goals and thinking of taking control of their lives by building self-respect and learning to live. Lastly, we try to help them find the deeper meaning to their lives, whether that is spirituality or simply living a happy, useful life with friends and family.

Throughout therapy, DBT teaches us to embrace the opposites: change and acceptance, emotion and reason, passion and logic. We work to move clients from extreme emotional positions to a healthy

view of all the complexities of life. In this way, DBT illustrates that their therapy is like life itself: contradictory. But within those conflicts and opposites, there can be beauty and meaning.

An Evidence-Based Practice

Dialectical Behavioral Therapy has depth and possibilities that cannot be covered in a short article. I would encourage anyone involved in the treatment of clients presenting with Post-Traumatic Stress Disorder, or the other challenges that can be addressed by DBT, to learn more about it. Clinical evidence shows remarkable efficacy.

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It's Worse Than You Think

It happens everywhere. In 2016, the National Center for Missing & Exploited Children estimated that 1 in 6 endangered runaways reported to them were likely sex trafficking victims. Globally, the International Labor Organization estimates that there are 4.5 million people trapped in forced sexual exploitation globally.

Between 14,500 and 17,500 people are trafficked into the U.S. each year. Human trafficking is the third largest international crime industry (behind illegal drugs and arms trafficking). It reportedly generates a profit of \$32 billion every year. Of that number, \$15.5 billion is made in industrialized countries.

- The National Center for Missing & Exploited Children



The Big Picture

By Ronald D. Hunter

We must look beyond our daily tasks and see the larger issues. There are causes and effects, with emotional and medical pretexts. There are societal backdrops, family behavioral patterns.

The challenges we face are complex and theories abound as to the reasons and solutions. The problem of lost and broken young people is a societal crisis of critical dimensions, touching American life with increased homelessness, crime, and endless tragedies of lost potential.

It's time we accept the fact that juvenile crime, and the plague of suicide, addiction, and behavioral abnormalities destroying the lives of so many vulnerable young people is a challenge we must face together.

It is not hopeless. Every day we see the profound difference we can make in the lives of lost young people. The Right Way is our way to share what we learn and to contribute to the national dialog surrounding this mission.

Please be in touch and let us know anything you would like to discuss.

Transition Management *continued from page 1*

We stay in touch. These troubled young people need to know we will always be here for them.

Most of our young people are without the simple documentation that all of us take for granted. We help them assemble a personal portfolio, which includes identification, their driver's license, their social security card, any certifications or diplomas they have, a record of their treatment, references, and contacts.

It's always a touching moment when we realize that these young people have never had most of these items – simple proof of who they are. The look on their faces when they hold their portfolio reminds us why we do this work. It's as if for the first time, they have proof that they exist.

We don't stop there. A Transitional Services Manager is assigned when a young person leaves our care. Their job is to maintain contact with everyone and every organization involved in the youth's progress, identified by a detailed transitional plan. This plan includes records and contacts with all support services in the client's community; contact information with

parents, guardians, or foster parents; juvenile probation officer, if necessary; the conditional release service provider; and school officials. We also make sure appointments are kept and transportation is arranged.

Importantly, we never forget that it's all about individual attention. Our Transitional Services Manager meets with each youth regularly to identify transition needs and to make sure they receive the right services at the right time. We also make sure they have what they need at home, in terms of both resources and necessities.

Helping victimized and troubled young people is a gratifying mission. It's also a process that can be monitored and improved. It can be difficult and frustrating. It takes time, patience and effort. But then, there are the moments we wait for and work toward: the good news, the accomplishments, the smiles of pride and achievement. And it's all worth it.