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Featured Counter-Trafficking Program: ARPAN

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ABSTRACT

This invited article is one of several comprising part of a special issue of *Child Abuse and Neglect* focused on child trafficking and health. The purpose of each invited article is to describe a specific program serving trafficked children. Featuring these programs is intended to raise awareness of innovative counter-trafficking strategies emerging worldwide and facilitate collaboration on program development and outcomes research. This article describes a long-term psychotherapeutic intervention started by Arpan in 2010, in an institution named Advait Foundation. Advait runs a rehabilitation home, Project Bharati, in Vasai, Mumbai, India. Project Bharati serves adolescent females who have experienced commercial sexual exploitation and sexual abuse. The psychotherapeutic intervention uses group and individual therapy, employing trauma-focused cognitive behavioral and arts-based therapeutic techniques.

1. Programme description

This long-term psychotherapeutic intervention by Arpan was started in 2010 in the state of Maharashtra, India. The programme serves adolescent girls ages 13–17 years residing in an institution named Advait Foundation, which runs a rehabilitation home, Project Bharati, in Vasai, Mumbai. These adolescents have experienced commercial sexual exploitation and sexual abuse by known people, strangers or both. The institution is licensed to receive cases under the Immoral Trafficking Prevention Act of India. It also receives girls with a history of sexual abuse and assault referred by the Child Welfare Committee (CWC) and serves both Indian and foreign populations. The programme aims to support children and adolescents in their healing journey so that they can overcome the trauma of their past lives and lead dignified lives. In order to achieve this, individual therapy and group sessions are conducted with adolescents. The programme also simultaneously works with both caretakers, institutional staff and adolescents in order to create trauma informed institutions. The programme has been sustained through funding from individual donors as well as funding by private agencies and foundations.

2. Programme activities

2.1. The process

The programme is geared towards providing psychotherapeutic intervention to clients as well as build capacities of caregivers for

¹ Arpan is an award-winning organisation working hard to address the issue of Child Sexual Abuse in India. Based in Mumbai, Arpan is a team of over 100 social workers and counsellors providing prevention and intervention services to children and adults. Over the last 12 years, Arpan has reached out to over 2,45,000 children, adolescents and adults through its services of prevention and intervention and over 900,000 through training and capacity building of relevant stakeholders impacting over a million people. Arpan has won 6 National-level awards and 2 International award for its exemplary work.

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creating a trauma-free institutional environment. The programme structure encompasses - conducting group sessions, providing individual therapy/crisis intervention session and conducting capacity building sessions with institutional caretakers and relevant staff members.

Group sessions involve the therapists working with several people at the same time. It is used both as a stand-alone tool as well as part of a comprehensive treatment plan that also includes crisis intervention sessions and medication. Group sessions focus on three basic domains: psycho-education, skill building and need-based intervention based on key therapeutic principles of group psychotherapy – imparting of information, installation of hope, corrective recapitulation, and feeling of universality, existential factors, and development of socialization technique, interpersonal learning and group cohesiveness (Yalom, 1995). The therapeutic strategies employed for the group sessions use an eclectic mix of different therapies - ‘Trauma-Focused Cognitive Behavioral Therapy’ (TF-CBT) and Arts-based therapy. Group sessions happen for a duration of 2–3 h a week. The group sessions sequentially progress from dealing with basic settling down issues to more complex constructs. Skill building focuses on inculcating self-soothing techniques. Individual therapy focuses on reducing acute and complex trauma symptoms, to increase functionality and well-being. This started after the second year of programme intervention and was continued for 4 years. In the last couple of years, the individual sessions are geared towards crisis intervention. These sessions are scheduled weekly and are weaned off once the client has developed resources to handle the situation.

The individual/crisis intervention sessions use a solutions-focused approach to therapy (James & Gilliland, 2012) to stabilize an individual undergoing a temporary ‘upset’ along with Attachment theory (Fosha, 2000; Holmes, 1996), and Eye Movement Desensitization and Reprocessing (EMDR) (Wilson, Becker, & Tinker, 1995). Sessions range from 45 min to 1 h, taking place once a week.

2.2. Human resources involved

Advait Foundation, the partner organization sources the institutional staff and the implementing organization, Arpan sources the therapist. The caretakers are sourced through a missionary congregation of sisters and teachers for various subjects and vocational trainers are sourced locally. The caretakers are responsible for the overall management of the institution and taking care of the child residents, ensuring their basic needs are met. The teachers are responsible for guiding clients in their educational pursuits and vocational training. The staff undergo capacity building by the therapists. This is focussed on imparting psycho-education, inculcating new skill sets, providing feedback of their caregiving practices. The topics for the capacity building include – child development, attachment, trauma, neurobiology, insights into symptoms, transference, setting positive limits, responding to a crisis situation, understanding counselling/therapy and self-care and burnout. Capacity building sessions take place once a week.

Therapists from the implementing organization visit the rehabilitation home once a week for a full day. The therapists hold degrees in counselling psychology and are experienced in working with trauma victims and survivors of child sexual abuse. They are trained in trauma processing therapeutic modalities. The therapists also have been part of working groups on Trauma as well have mentors and peer supervisors to guide them on cases and also for their professional development. The therapists are also encouraged to undergo personal therapy to support them with burnout and vicarious trauma.

2.3. Programme outcomes and evaluation metrics

The outcomes of the programme have been measured through annual evaluations as well as two long term evaluations:

- ‘Rescue and Remedy: A Process Documentation of Psychotherapy with Children in Institutions’ in 2015
- ‘Case Studies of Long-term Psychotherapy in Institutional setting’ in 2018.

The process documentation in 2015 involved different data sources (case files/documents, project pre-post analysis, documented interviews with key adult informants and child survivors). The 2018 evaluation was completed in the form of an explanatory case study. In both the studies, to document the outcomes in the client’s own words, responses on a predefined set of open-ended questions pertaining to the domains addressed were recorded through face-to-face interviews using a semi-structured interview schedule. Five-point Likert rating scales were included in the tool to allow the clients to articulate the degree or intensity of emotions, assess particular skill development and provide feedback on the process. All data were transcribed. The descriptive data were coded and categorized for analysis.

The process documentation was conducted with 22 clients who were then residing in the institution and 5 ex-clients who could be contacted – 19 clients attended group sessions and 8 clients attended both group and individual sessions.

Some significant outcomes (Arpan, 2015) were:

- All 19 clients, except 2, attending only group sessions irrespective of their time span in the therapeutic process, indicated that therapy was useful by selecting a 4 or 5 on a 5-point scale. Most clients (14) felt that sessions on understanding and managing emotion benefitted them the most.
- Before embarking on the process of counselling, the majority of the clients reported feeling sad, scared and angry because of sudden displacement and chronic trauma history. However, after engagement in group sessions, clients reported being predominantly happy (57.89%). 42.8% of clients reported the maximum positive shift.
- All clients reported to have seen a shift in at least one aspect of their life due to counselling; some even reported to have seen

transformations in multiple arenas. The significant themes that emerged from their narratives were— knowing better how to keep oneself safe, how to maintain safe relationships, being more confident in expressing one's own needs and in seeking help, and developing skills and resources in order to build a future.

- Based on the counsellor's assessment within a month of participation in group sessions, girls expressed themselves without using abusive language or abusive behaviour for example hitting. The children learned to identify their own feelings and create a safe space around them either by distancing themselves during intense emotional arousal or using self-soothing techniques to calm down before responding. Reduction in self-harm behaviour was reported through observing that girls had decreased number of self-injury markings on their bodies.

Testimony of the clients also reflect the outcome of the intervention:

"Earlier (She laughs)...when I was sad I did not understand...I did not understand what I am going through; I used to run away from my feelings. I used to fight with people. ...I used to harm myself... I even tried to commit suicide.... But nowadays I don't do all this. Sometimes thoughts do come, but then I talk to myself, I listen to music, I dance as it's my passion, I write journal and all of these settle me."
– Ex-client having undergone therapy for 2 years (Arpan, 2015)

The 2018 evaluation was based on interviews with 17 girls from a group of 22, as they had spent more than six months in the home during the interview. Some significant outcomes (Arpan, 2018) were:

- Self-reported accounts from clients showed acquisition of resources that led to better self- control, improved management of impulsive thoughts, actions, emotional outbursts and other behavioural issues along with an increased capacity to identify personal triggers. Clients commonly identified creative expression of negative thoughts through various art forms, whether it be music or drawing as therapeutic.
- Increased help-seeking behaviour among the girls, wherein they were able to identify the support system available in their lives and were willing to approach them for the support needed.
- Improvement in behavioural issues, where they were able to regulate their speech and actions, refrain themselves from using profanity or from reacting negatively to an undesirable situation.

3. Reflections

3.1. Programme strengths

The strength of the programme lies in recruiting a therapist trained in trauma therapy. This therapist's training equipped her to set realistic goals and boundaries and accept limitations which helped to stimulate and sustain motivation. Concentrated focus was placed on stabilization so that clients could develop hope about their present and future before beginning to engage in trauma processing. Therapist working with trauma survivor can develop compassion fatigue and burnout. Compassion fatigue or vicarious trauma refers to a gradual shift and decline in an individual's ability to feel empathy and compassion towards others. Burnout is a prolonged response to chronic emotional and interpersonal stressors on the job. It helped to take pre-emptive steps to combat compassion fatigue and burnout by ensuring therapists participate in professional circles for example, Study Circle on Trauma, EMDR study circle and peer supervision. The coordinated effort between the institutional management and the implementing organization based on their common understanding of the importance of therapeutic work and being creative in the face of challenges have helped to strengthen the programme and sustain it for 9 years. Last but not least, the faith and resilience of the clients themselves have been quintessential in the success of the programme.

3.2. Programme challenges and solutions

- There has been frequent shifting of clients in and out of the institution. This impacts the effectiveness of group sessions and the nature of it as the requirement of newer and existing clients are different. In order to respond to this challenge, the senior housemates and the newer ones have been separated into two groups.
- A critical part of trauma recovery for victims involves the development of trusting, long-term relationships. The rotation of caretakers thus poses a challenge. The shifting of a longstanding staff member presents difficulties in the stabilization of clients.
- A lack of child protection policy in the institution in the initial days made it difficult for the therapist to change the culture of the staff to utilize positive disciplinary tactics

3.3. Lessons learned that could benefit other programmes working with similar goals

The most significant lesson learned is "in the work of trauma healing, slow is fast." Additionally, effective coordination, trust and alignment of goals between key players as well as receptivity and flexibility to learning help to carve an effective programme. The programme provides a reference to a model that evolved to work with children and caretakers simultaneously to create trauma-informed services. It lays down recommended key areas of focus for therapy with children through group sessions and individual crisis intervention sessions. Ultimately, this model is an example of the hope that can arise from a group of dedicated people working together, and provides encouragement for those working in the field to remain persistent.

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