June 1st, 2020

To Our Community and Supporters,

We at OPS continue to work hard to respond to survivors most urgent needs while Covid-19 remains a steady concern in our community. OPS will re-open our physical drop-in location in Burien Tuesdays - Thursdays once King County is approved to move to Phase II of Inslee’s Phased Re-opening Plan. Until that time, we will continue to provide essential services remotely, including: 1:1 case management and counseling, recovery and survivor support groups, and Direct Client Assistance (DCA) through financial support. For your convenience, we have included a flyer of our remote services at the end of this document.

We know you care about survivors in our community who are feeling the impacts of Covid-19 in their lives. OPS is striving to keep you, our supporters and community, informed on what survivors in our community are experiencing so that we may all respond with intention. We hope this briefing will be helpful in guiding your own responses to this crisis. If you are interested in volunteering your time to OPS to help us empower survivors through this uncertain time, please send an email to info@seattleops.org. If you can, please consider donating to OPS to support our work supporting survivors directly impacted by Covid-19 in our community.

With immense gratitude for your support,

Alisa Bernard
Executive Director of Education and Partnerships
HOW IS COVID-19 IMPACTING SURVIVORS?
OPS continues to perform monthly interviews with our direct service staff to stay abridged on the status of survivors in our community. These interviews have shown that sheltering in place continues to have negative mental and emotional impacts on our community. Survivors are reporting feelings of fatigue regarding the pandemic and are showing signs of increased desperation with regards to economic sustainability. Survivors are reporting oscillating between rage, fear, anxiety, restlessness, and depression and are increasingly expressing feelings of low self-esteem and suicidal ideation. Primary stressors reported are in relation to financial sustainability and healthcare accessibility for non-Covid-19 related health concerns. Many survivors are experiencing relapse, using drugs or alcohol as a means to cope with Covid-19 related stressors as these substances are more accessible now and official monitoring is minimal. Others are returning to or staying in abusive and/or exploitative relationships to maintain housing.

Technology has become both increased and decreased barriers to accessing services from OPS and other service providers. Survivors report lacking the means to afford or access audio/video capable technology hardware. However, technology has also proven to be an assistive mechanism for some survivors to access services. OPS Advocates are reporting some survivors reaching out more frequently through alternative means such as Facebook Messenger, Facetime, or text messaging.

Youth, in particular, are greatly impacted by Covid-19. Youth are reporting difficulties in finding temporary or permanent housing and are frequently in constant states of transit. This constant movement prevents them from sheltering in place for more than a few days at a time. Under these circumstances, it is not uncommon for youth to lose or misplace their phones or have unreliable access to assistive technologies. In addition to these struggles, some of the youth we have been in contact with having difficulty comprehending the dangers of Covid-19. One youth has had to leave two placements as they continue to break stay-safe/stay-healthy guidelines around physical distancing as they don’t see Covid-19 as a serious concern.

Compounding this, many youth in the sex trade are girls of color and as the majority of government recommendations for Covid-19 are delivered by older white men they are struggling to see the relevancy to their everyday lives, finding it unrelatable or untransferable to their experiences.

HOW ARE SYSTEMS ADAPTING TO THE NEED?
With the move to online based services, many government and community based agencies are facing infrastructure strain and are struggling to keep pace with the shifting demand for resources. Survivors report struggling to find resources that have remained open. Advocates and survivors alike report communications breakdowns between and internally with some agencies. With the now added challenge of navigating government based online systems (eg. unemployment, licensing, records, courts, etc.), survivors are also struggling to obtain basic resources such as unemployment or identification.
Most shelters are now requiring participants to get tested for Covid-19 before they can be placed into housing. Unfortunately, testing sites are not widely advertised and are frequently in areas where survivors struggle to access them easily. In addition to this, survivors report being unclear as to how long a negative test result is valid and find it difficult to get to shelters quickly after testing. The Covid-19 test itself is trauma inducing and survivors are reporting feeling triggered during the test.

It has been reported by some survivors that police presence has reduced in areas with high rates of street-based exploitation. This is likely in response to Covid-19 requiring increased police presence in areas where businesses have temporarily or permanently shuttered. This decrease in police presence has led to increased violence by both traffickers and sex buyers as they feel they can now act with impunity. OPS Advocates have received reports from survivors of traffickers openly carrying firearms and seen an increase in reports of sex buyers committing physical and sexual violence on those engaging in the street-based sex trade.

**Have traffickers changed?**

With the decreased police presence in areas of trafficking, OPS has received reports from survivors that traffickers feel emboldened to capitalize on the pandemic. Survivors are staying in abusive or exploitative relationships for survival and report high levels of domestic violence and isolation tactics. Survivors also report traffickers are imposing higher quotas on the women and girls they are exploiting while enforcing these new parameters with frequent and extreme violence. One of OPS CSE/C Advocates reported hearing that grooming and recruiting are also on the rise: “It’s a traffickers dream situation, it’s like their prime time essentially for recruiting and grooming women and girls. [Women and girls] are desperate now, and more vulnerable than normal.” Other advocates have reported that as traffickers are constantly nearby those they exploit, survivors have less opportunities to reach out for assistance. Many are resorting to text as a means of reaching out to service providers as texts can be easily hidden or masked. OPS Community Therapist reported that a participant called her but hung up almost immediately after she answered, within a few minutes of this brief exchange the therapist received another phone call from the trafficker himself to verbally berate her.

**Has sex buying changed?**

OPS has heard conflicting reports of both increased and decreased sex buying within the region. Likely, sex buyers are finding it more difficult to leave their homes and families for extended periods of time, leaving them with less opportunities to purchase sex. Due to this, survivors are reporting a shift from in-person based sex sales to remote based sex sales (eg. live cam shows and photo bartering). Consistently, OPS has received reports that the overall price for sex has dropped, requiring prostituted people to increase the number of sex buyers they see in a day in order to make quotas or maintain economic survival. OPS has also received reports that sex buyers soliciting sex on the street are much more violent. This increase in violence could be in response to the lack of law enforcement presence, but could also be an violent response to the increased health risk associated with sexual exchange during the pandemic. This heightened risk to reward paradigm is likely bringing out only sex buyers who already have an extremely low risk aversion and high tendency towards violence to engage within a context of increased health risk.

**Has the sex trade market changed?**

Due to Covid-19’s economic impact on the community, the sex trade is shifting and responding in unexpected ways. Live video shows are becoming much more common and photo bartering is also more prevalent. These forms of low barrier entry into the
sex trade are specifically appealing to young women whose income has been impacted and are seeing cam shows or photo bartering as a viable economic alternative. One OPS advocate reported feeling unease on seeing their friends who have never engaged in the sex trade advertising nude pictures for sale on social media. The normalization of the objectification of women and girls through this mainstreaming of the sex trade is creating a fresh avenue of entry into the sex trade that will likely impact the likelihood of entry into other forms of the sex trade later on. The normalization of this low-barrier avenue of entry is being reinforced by the glorification of the sex trade currently permeating our culture. It is likely that the repercussions of this will perpetuate long after Covid-19 has subsided. This renewed glorification and normalization of the sex trade also has the potential to create an environment where methods of future service provision will have to adapt to the current increased rate of entry into the sex trade.

**IS ANYTHING POSITIVE HAPPENING?**

Even amidst the many negative impacts of Covid-19, we have found that survivors continue to show inspiring resiliency and strength.

**GJ** Participant GJ lost her job at a local restaurant when stay-at-home orders first took effect, OPS was able to provide her financial assistance so she could maintain her housing through the end of May. GJ was able to find work as a delivery driver with a local company and was able to regain financial control of her living situation. Financial assistance like this fill an essential gap for survivors in situations that if not addressed could lead to relapse or re-entry in exploitation.

**YW** Participant YW received a Section 8 voucher for housing but was unable to fulfill the requirements of this due to Covid-19 impacts on transportation. OPS found her a hotel room so that she could shelter in place for 10 days while she waited for a bed to open up at a local shelter. Obtaining a hotel room was critical for this and other survivors to stay off the streets and provide them with safe, stable, healthy environments while they continue to work on their long-term goals.

**JH** Participant JH was empowered to attend a conference that normally would have been held out of state but due to Covid-19 was held online. Attending this conference gave JH the agency to find validation, therapeutic resources, and community connection while sheltering in place. Opportunities to not only survive but to thrive and engage in growth and community building are crucial aspects of healing especially during a time of physical distancing.

**HOW IS OPS RESPONDING?**

Though helpful in slowing the transmission of Covid-19, shelter in place orders create additional barriers to providing services for survivors. Many survivors struggle to obtain assistance due to lack of

"Their self-esteem is down. They feel like they have no value. With any kind of assistance... it’s important to be able to just pay for something for somebody. For survivors, it’s such a significant thing... to have no strings attached or expectations of them, to receive money just because they deserve it.

That conversation always happens with every [Direct] Client Assistance, ‘You don’t need to feel bad or guilty or ashamed that you can’t take care of yourself right now.’”

*Martha Linehan, CIMT CDP ~ OPS Recovery and Clinical Support Supervisor*
access to technology. Many have limited privacy if they are staying in dangerous living situations. OPS has ceased all in-person services at our location in Burien until Phase II, however, we maintain a number of remote and low barrier service options for our community including online support groups, weekday helpline, 1:1 case management through phone/Zoom/text, telehealth counseling services and financial assistance. These services remain essential and consistent with slight variations to allow for remote based work. Covid-19 has additional subtle impacts to service provision outside of the vehicle for delivery. Our Advocates report having to provide increasingly creative harm reduction and safety

### Direct Client Assistance: April 2019 to April 2020 Comparison

<table>
<thead>
<tr>
<th></th>
<th>April 2019</th>
<th>April 2020</th>
<th>% Increase</th>
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</thead>
<tbody>
<tr>
<td>Total Participants Receiving DCA:</td>
<td>5</td>
<td>15</td>
<td>200%</td>
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<tr>
<td>Total Requests:</td>
<td>8</td>
<td>28</td>
<td>250%</td>
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<tr>
<td>Average DCA $:</td>
<td>$238.02</td>
<td>$339.51</td>
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<tr>
<td>Median Distribution:</td>
<td>$85</td>
<td>$199.50</td>
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<tr>
<td>Total Distributed:</td>
<td>$1904.17</td>
<td>$9506.15</td>
<td>399%</td>
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### Direct Client Assistance: April 2019 to April 2020 Comparison Detail

<table>
<thead>
<tr>
<th></th>
<th>April 2019 Total $/Type</th>
<th>April 2020 Total $/Type</th>
<th>April 2020 % of Total</th>
<th>April 2020 Avg Request</th>
<th>April 2020 Requests/Type</th>
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<tbody>
<tr>
<td>Utilities/Bills:</td>
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<td>$668.73</td>
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<tr>
<td>Housing:</td>
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<td>Food:</td>
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<td>Relocation:</td>
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<td>$1650.57</td>
<td>17%</td>
<td>$397.91</td>
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<tr>
<td>Connectivity:</td>
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<td>$252.94</td>
<td>3%</td>
<td>$111.47</td>
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<tr>
<td>Legal Advocacy:</td>
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<td>$514.54</td>
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<td>Education:</td>
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<td>$124.31</td>
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<tr>
<td>Covid-19 Related:</td>
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<td>$355.05</td>
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<tr>
<td>Non-Covid-19 Related:</td>
<td>n/a</td>
<td>$5625.70</td>
<td>59%</td>
<td>$240.75</td>
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<tr>
<td>Total:</td>
<td>$1904.17</td>
<td>$9506.15</td>
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</table>
planning measures in a time where both are becoming increasingly complicated approaches.

Though we may not be physically present, our staff continue to provide the best services possible. Our staff hosted almost 50-hours of 1:1 case management meetings and 21-hours of telehealth counseling with participants between April and May. We also held 13 online support groups with a total overall attendance of 51. OPS Art Workshop Facilitators provided 4 Facebook Live Art Workshops between April and May that had a reach of over 2,500.

Financial Assistance also continues to increase. In April, OPS fulfilled 28 requests for Direct Client Assistance from 15 individuals totaling to $9,506.15 going toward a variety of needs directly associated with and unrelated to the Covid-19 pandemic. This distribution of DCA is a 399% increase on our distribution during April of the previous year. Fulfilled requests ranged from assistance for paying bills, obtaining food and daily supplies, resources for remaining connected with community, through to financial assistance obtaining/maintaining shelter and housing.

Support:

OPS would like to thank you, our supporters, for your unprecedented level of giving during this difficult time! We know times are tough for everyone, and your support is appreciated now and always. Your generous gifts make it possible for us to shift our resources in ways that will have the most meaningful impact in the lives of the women and girls we serve. With your support, we have increased our pool of Direct Client Assistance, making even more low barrier financial assistance and relief available for survivors in our community. Your support has given OPS a platform to bring our services to the interwebs, we are now hosting up to three online support groups a week during stay-at-home orders and continue to provide telehealth and video-based counseling and advocacy. You’ve also emboldened us to continue the conversation with our new *OPS Talks* weekly virtual engagement series, giving us the space to bring the conversation around commercial sexual exploitation directly to our audiences. We thank you for your continued support of our work and survivors in our community!

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*Your Gifts Can Make Double or Triple Impact!*

In other big news, OPS has received a matching opportunity from The Jensen Project! If you can, please consider donating between now and June 26th to double or triple your impact for survivors in our community!

- If you have donated to OPS within the past 13 months, your donation will be equally matched 1:1 through **June 26th**
- If you haven’t donated in the past 13 months or have never donated before, your donation will be doubly matched 2:1 through **June 26th**!

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Thanks to our staff!!!

We want to recognize all our staff at OPS (survivors and allies)! This job isn’t easy! It can be rough at the best of times, and when you are a survivor you get a double dose of primary and secondary trauma when doing this work. In normal times, we all get to put our work down (eventually) and take a step back, go home and leave work at work. Unfortunately, leaving work at the office is not possible right now and some days it feels like we are live streaming trauma directly into our homes.

OPS wants to acknowledge our staff doing the work on the ground, and behind the scenes…

We see you. We love you. We honor you.
Remote Services

Though we may be far apart... we are here for you

**HELPLINE:** 206-853-6243 M-F 10AM-6PM

**Zoom Recovery Support Group**
Tuesday's 4-5:30pm
contact your advocate or the helpline for login

**Zoom Survivor Support Group**
Thursday's 4-5:30
contact your advocate or the helpline for login

**1:1 Zoom Remote Counseling & Advocacy**
contact your advocate or the helpline for login

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MARTHA LINEHAN, CIMT CDP: RECOVERY & CLINICAL SUPPORT SUPERVISOR
(206) 931-4805 martha.linehan@seattleops.org

MILLE BYRD-LEMON, MS LMFTA: COMMUNITY BASED THERAPIST
206-504-1444 mille.byrdlemon@seattleops.org

CHELSEA OLSEN: CSE/C ADVOCATE
206-931-8155 chelsea.olsen@seattleops.org
**TALKS**
A Virtual Engagement Series

**Fridays @ 2PM**

<table>
<thead>
<tr>
<th>DATE</th>
<th>TOPIC</th>
<th>SPEAKER(S)</th>
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<tbody>
<tr>
<td>05/29/2020</td>
<td>A (Re)Introduction to OPS</td>
<td>Alisa Bernard</td>
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<tr>
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<td></td>
<td>Noel Gomez, CDP</td>
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<tr>
<td>06/05/2020</td>
<td>Impacts of COVID-19 on CSE Survivors in King County</td>
<td>Alisa Bernard</td>
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<tr>
<td>06/12/2020</td>
<td>Remote/Virtual Harm Reduction and Safety Planning</td>
<td>Mille Byrd-Lemon, MS LMFT</td>
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<td>Martha Linehan, CDP CIMT</td>
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<tr>
<td></td>
<td></td>
<td>Chelsea Olsen</td>
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<tr>
<td>06/19/2020</td>
<td>Navigating Personal Safety and Boundaries</td>
<td>Mille Byrd-Lemon, MS LMFT</td>
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<td>Nykki Canete, MSW</td>
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Two ways to tune in:
**ZOOM & FACEBOOK LIVE**

Weekly Registration Links @ http://seattleops.org/ops-talks/