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The Entangled Crisis: How Homelessness and Substance Use Create Pathways into Human Trafficking and Impede Survivor Exit

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Abstract

Human trafficking represents a profound violation of human rights, with its tendrils reaching deeply into communities already marginalized by poverty, housing instability, and substance use disorders. This paper examines the intricate, bidirectional relationships between homelessness, drug use, and human trafficking, arguing that these phenomena constitute an entangled crisis requiring integrated, multi-sectoral responses. Drawing upon empirical research conducted in Detroit (Lederer et al., 2024), Arizona (Roe-Sepowitz & Wright-Ball, 2024), New York City (Kaya et al., 2024), and other jurisdictions, alongside the landmark National Survivor Study (Polaris, 2023), this analysis demonstrates that homelessness and substance use function as both precursors to and consequences of trafficking victimization. Data indicate that 64% of trafficking survivors experienced homelessness at recruitment (Polaris, 2023), while sex trafficking victims report substantially higher rates of housing instability compared to those not in the commercial sex industry (Lederer et al., 2024). Substance use compounds these vulnerabilities by impairing decision-making capacity, creating exploitable dependencies, and generating stigma that impedes access to services (Thibodeau et al., 2026). The paper advances an intersectional risk environment framework to conceptualize how structural inequalities, institutional discrimination, and individual-level factors converge to produce and sustain trafficking vulnerability. Findings further reveal that housing instability frequently persists after trafficking exit, with 70% of survivors identifying safe housing as their most urgent post-exit need (Polaris, 2023). The paper concludes with policy recommendations centered on Housing First approaches, low-barrier harm reduction services, and trauma-informed, survivor-centered care models that address the full complexity of survivors' needs.

Keywords: Human trafficking; homelessness; substance use disorders; housing instability; intersectionality; risk environment; survivor-centered care; Housing First; harm reduction; trauma-informed care; policy recommendations

1.1 Introduction

Human trafficking, defined as the recruitment, transportation, transfer, harboring, or receipt of persons through force, fraud, or coercion for purposes of exploitation, constitutes one of the most pressing human rights challenges of the contemporary era (Kaya et al., 2024).

While trafficking affects diverse populations globally, particular communities face disproportionate vulnerability. Among these, individuals experiencing homelessness and those with substance use disorders are especially susceptible to both sex and labor trafficking (Lederer et al., 2024; Roe-Sepowitz & Wright-Ball, 2024). The convergence of housing instability, substance use, and exploitation creates what this paper terms an "entangled crisis", a mutually reinforcing nexus of vulnerabilities that traps individuals in cycles of victimization and impedes pathways to recovery.

Estimates indicate that over one million runaway and homeless youth and young adults (RHY) reside in the United States, with exposure to trauma, violence, and substance abuse creating conditions of heightened trafficking risk (Kaya et al., 2024). Globally, as many as 1.6 billion people live in inadequate housing (United Nations, 2020), with economic crises, natural disasters, and systemic discrimination driving homelessness and associated vulnerabilities (Urada, 2024). The opioid epidemic has further exacerbated these dynamics, with overdose deaths and substance use disorders disproportionately affecting unhoused populations (Berry et al., 2021; Urada, 2024).

Understanding the relationships between homelessness, substance use, and trafficking requires moving beyond simplistic causal models to embrace frameworks that capture the complexity of these interconnections. Homelessness is not merely a background condition that increases trafficking risk; it is an active mechanism of exploitation used by traffickers to maintain control over victims (Polaris, 2023). Similarly, substance use functions simultaneously as a coping mechanism for trauma, a tool of coercion employed by traffickers, and a barrier to service access that perpetuates housing instability (Thibodeau et al., 2026). These dynamics are further shaped by intersecting axes of marginalization including race, gender, sexual orientation, and immigration status (Crenshaw, 1989; Thibodeau et al., 2026).

This paper advances three primary arguments. First, homelessness and substance use function as bidirectional vulnerabilities in trafficking dynamics, they are both pathways into exploitation and consequences that persist after trafficking experience. Second, the stigma and discrimination faced by individuals at the intersections of homelessness, drug use, and trafficking create institutional barriers that compound rather than alleviate suffering. Third, effective intervention requires integrated, multi-sectoral approaches that address housing, substance use, and trauma simultaneously rather than sequentially or in isolation.

The analysis proceeds as follows. Section 2 reviews the theoretical and empirical literature on homelessness, substance use, and trafficking vulnerability. Section 3 presents findings from key empirical studies on these relationships. Section 4 proposes an intersectional risk environment framework for understanding trafficking vulnerability. Section 5 examines the barriers to service access experienced by trafficking survivors with substance use disorders. Section 6 offers policy recommendations grounded in the evidence reviewed. Section 7 concludes with directions for future research.

2. Literature Review

2.1 Theoretical Frameworks

Understanding the relationships between homelessness, substance use, and trafficking requires integrating multiple theoretical perspectives. The risk environment framework, initially developed to understand HIV transmission (Rhodes, 2002), conceptualizes how physical, social, economic, and policy environments shape vulnerability to harm. Extending this framework to trafficking, Thibodeau et al. (2026) propose an intersectional risk environment approach that incorporates Black feminist intersectionality (Crenshaw, 1989) to analyze how multiple, co-constituting identities and structural positions shape trafficking experiences and access to services.

The intersectional risk environment framework highlights three key insights for understanding trafficking vulnerability. First, individual experiences of exploitation cannot be understood apart from the structural contexts in which they occur, including housing policies, drug criminalization, and racialized economic inequality. Second, the stigma associated with drug use and sex work creates distinctive barriers that differ from those faced by trafficking survivors without substance use histories (Thibodeau et al., 2026). Third, interventions that fail to address the full range of intersecting marginalizations risk reproducing the very dynamics they seek to disrupt.

Complementing this framework, research on trauma and substance use has established that adverse childhood experiences (ACEs) disproportionately affect homeless populations and are strongly associated with both substance use and trafficking victimization. Wu et al. (2024) found that homeless young adults reported average ACE scores of 5.22 out of 10, with each unit increase in ACE scores associated with significantly higher depression severity. These early experiences of trauma create vulnerabilities that traffickers exploit, while substance use often emerges as a coping strategy for managing trauma-related distress (Nemeth et al., 2023).

2.2 Homelessness as Trafficking Vulnerability

A robust body of research documents the relationship between housing instability and trafficking victimization. The National Survivor Study, conducted by Polaris (2023), found that 64% of survivor respondents reported being homeless or experiencing unstable housing at the time they were recruited into their trafficking situation. Similarly, the Youth Experiences Survey study of unsheltered young adults in Arizona found that 30.8% reported sex trafficking experiences and 14.5% reported labor trafficking, with childhood maltreatment, being kicked out of home, and drug use significantly associated with trafficking history (Roe-Sepowitz & Wright-Ball, 2024).

The mechanisms linking homelessness to trafficking vulnerability are multifaceted. Housing instability exposes individuals to exploitative relationships by severing social supports, creating survival needs that can be leveraged by traffickers, and increasing contact with exploitative networks (Kaya et al., 2024). As Curtis et al. (2008) documented, most victims of child sexual exploitation in their study had experienced homelessness or persistent housing instability prior to victimization. Traffickers actively prey on this vulnerability by offering housing in exchange for exploitation, creating dependencies that are difficult to escape (Bigelsen & Vuotto, 2013).

Youth exiting foster care or juvenile justice systems face particular vulnerability, as they may lack family supports and stable housing options (Roe-Sepowitz & Wright-Ball, 2024). Research on youth homelessness in Austin, Texas, found that 76% of homeless youth had histories of involvement with foster care or juvenile justice, far exceeding national averages (Voices of Youth Count, 2017). These system-involved youth face abrupt transitions to independence

without adequate preparation or support, creating conditions of extreme vulnerability to exploitation.

2.3 Substance Use and Trafficking Dynamics

The relationship between substance use and trafficking is bidirectional and complex. Substance use functions as a pathway into trafficking, a mechanism of control used by traffickers, a coping strategy for managing exploitation-related trauma, and a barrier to exiting trafficking and accessing services (Lederer et al., 2024; Thibodeau et al., 2026).

Research by Lederer et al. (2024) in Detroit found that substance use was prevalent across all groups of women studied, including those with and without trafficking histories. However, sex trafficking victims reported higher rates of substance use, homelessness, violence, lower education, and poorer health compared to those not in the sex industry. These findings suggest that substance use both increases vulnerability to trafficking and is exacerbated by trafficking experiences.

Traffickers exploit substance use in multiple ways. For individuals already using drugs, traffickers may supply substances as a mechanism of control, creating dependencies that make leaving the trafficking situation difficult (Thibodeau et al., 2026). For those who are not using substances at recruitment, traffickers may introduce drugs as a way to create dependency, manage trauma symptoms, or increase compliance (Lederer et al., 2024). The financial cost of substance use can also create pressures to remain in exploitative situations to support drug habits.

Substance use creates significant barriers to exiting trafficking and accessing services. Thibodeau et al. (2026) found that survivors who used drugs experienced dual stigma associated with drug use and sexual exploitation, leading to interpersonal and institutional mistreatment in healthcare settings. Participants described systemic involvement as having cascading negative effects on well-being, including limiting access to housing, disrupting relationships with children, and limiting the ability to relocate to safer environments after exiting trafficking.

2.4 Housing as Intervention and Barrier

Access to safe, stable housing is widely recognized as the most pressing need for trafficking survivors and those at risk (Kaya et al., 2024; Polaris, 2023). However, the demand for housing resources far exceeds supply, and survivors face multiple barriers to accessing available housing.

Dank et al. (2015) and Clawson et al. (2006) identified housing as the most urgent service need for trafficking survivors. This finding is reinforced by Polaris (2023), which found that 70% of survivors identified finding a safe place to stay as a top need when leaving trafficking situations. Kaya et al. (2024) documented that capacity for RHY housing in most U.S. communities is insufficient to meet demand, creating a systemic vulnerability to trafficking.

Barriers to housing access for trafficking survivors are substantial and multi-level. Polaris (2023) identified several key obstacles: many survivor households (43%) earn under $25,000 annually, insufficient to afford stable housing; most landlords require proof of regular income that survivors may not possess; 61% of survivors reported that traffickers abused their financial accounts, damaging credit and banking access; and 42% of survivors have criminal records, with 59% of those reporting that their record affected their ability to obtain safe housing. These barriers reflect structural inequalities that persist after trafficking exit, impeding survivors' ability to rebuild their lives.

The criminalization of survival activities compounds housing barriers. Individuals with criminal records are nearly ten times more likely to experience homelessness, and housing discrimination based on criminal history remains widespread despite legal prohibitions in some jurisdictions (Polaris, 2023). For trafficking survivors with criminal records resulting from their victimization, including arrests for prostitution, drug possession, or theft, these barriers represent a form of secondary victimization that perpetuates housing instability and re-trafficking risk.

3. Empirical Findings

3.1 The Detroit Study: Barriers to Escape

The most comprehensive recent study of the relationships between homelessness, substance use, and sex trafficking was conducted by Lederer et al. (2024), surveying 74 women in Detroit, Michigan, over a 10-month period in 2020. The study employed a comparative design, examining three groups: women who self-reported as victims of sex trafficking (n=45), women who voluntarily engaged in commercial sex (n=20), and women currently not in the sex industry (n=9). Outcome dimensions included substance use, housing stability, violence, interactions with law enforcement, and healthcare barriers.

Key findings revealed significant differences between groups. Trafficking victims reported higher rates of homelessness, violence, lower education, and poorer health compared to others (Lederer et al., 2024). However, those who were trafficked and those who reported being voluntarily involved in the sex trade shared many similar problems, including substance use and housing instability. This finding suggests that the vulnerabilities enabling trafficking are not entirely distinct from those associated with sex work more broadly, with both groups facing overlapping challenges of housing instability, substance use, and limited economic opportunities.

The study also documented the presence of children across all groups, underscoring the need for family support systems for trafficking survivors and those in the sex industry (Lederer et al., 2024). This finding challenges simplistic narratives of trafficking victims as isolated individuals and highlights the intergenerational impacts of exploitation and housing instability.

Lederer et al. (2024) emphasize that the interconnected barriers faced by women in sex trafficking or prostitution, substance abuse, homelessness, and health problems, must be addressed through multidisciplinary, interconnected networks of providers. Their findings inform recommendations for policymakers and service providers focused on empowering women to design exit strategies and begin recovery pathways.

3.2 The Arizona Youth Experiences Survey

Roe-Sepowitz and Wright-Ball (2024) conducted the Youth Experiences Survey (YES) study, examining human trafficking experiences among unsheltered young adults in Arizona. The 2024 study included 227 surveys collected from unsheltered youth participants ages 18-25. Participants were 49.5% female, 41.9% male, and 5.9% transgender, with 75.8% identifying as persons of color.

Findings revealed that 30.8% of participants reported sex trafficking experiences and 14.5% reported labor trafficking. Childhood maltreatment, including sexual, emotional, and physical abuse, was more likely to be reported by participants with a history of sex trafficking (Roe-Sepowitz & Wright-Ball, 2024). Other factors associated with trafficking included being kicked out of

home, drug use, mental health challenges, and limited education and work experiences.

The study's findings on the demographic composition of unsheltered youth, predominantly young people of color, highlight the racialized dimensions of housing instability and trafficking vulnerability. These patterns reflect broader structural inequalities, including housing discrimination, disproportionate child welfare and juvenile justice involvement, and limited economic opportunities that disproportionately affect communities of color (Roe-Sepowitz & Wright-Ball, 2024).

Recommendations from the YES study include developing unique interventions to connect with unsheltered young adults, including drop-in centers, digital outreach and case management, mentoring programs, and treatment for substance use and mental health (Roe-Sepowitz & Wright-Ball, 2024). These recommendations reflect the recognition that traditional service models may not reach the most vulnerable populations and that outreach must be tailored to the specific contexts and preferences of unsheltered young adults.

3.3 The National Survivor Study

The National Survivor Study conducted by Polaris (2023) provides the most comprehensive data on U.S. trafficking survivors' experiences, needs, and barriers. Drawing on responses from 457 survivors, the study documents the scope of trafficking experiences and the challenges faced in exiting and rebuilding lives.

Key findings on housing vulnerability include:

- 64% of survivor respondents reported being homeless or experiencing unstable housing at the time they were recruited into their trafficking situation.
- 64% of survivors reported losing their housing due to trafficking or related abuse.
- 70% of survivors identified finding a safe place to stay as one of their top needs when leaving trafficking.
- 43% of survivor households earn under $25,000 annually, limiting housing affordability.
- 61% of survivors reported that traffickers abused their financial accounts.
- 42% of survivors have criminal records, with 59% of those reporting that their record affected their ability to obtain safe housing (Polaris, 2023).

These findings underscore how trafficking both exploits and creates housing instability. The high rate of homelessness at recruitment reflects the vulnerability created by housing instability, while the proportion who lost housing due to trafficking indicates that exploitation itself is a driver of homelessness. The persistence of housing needs after trafficking exit demonstrates that housing instability is not merely a precondition for trafficking but also a consequence that continues to affect survivors' recovery and re-trafficking risk.

3.4 Housing Capacity and Trafficking Prevention

Kaya et al. (2024) undertook a systematic, data-driven approach to project the collective housing and service capacity needed to meet the needs of runaway and homeless youth in New York City, including those most at risk of trafficking. Their research employed an integer linear programming model informed by partnerships with key stakeholders, incorporating time-dependent allocation and capacity expansion while considering stochastic youth arrivals, length of stays, services provided periodically, and service delivery time windows.

The study's findings are striking: although access to safe housing and supportive services is an effective response to youth vulnerability toward being trafficked, the number of youth experiencing homelessness exceeds the capacity of available housing resources in most U.S. communities (Kaya et al., 2024). This capacity gap creates a systemic vulnerability to trafficking, as youth without housing options are forced into situations of desperation where traffickers' offers of shelter become difficult to refuse.

Kaya et al. (2024) emphasize that shelter provision extends beyond merely supplying beds. Shelters are linked to a dynamic landscape of networked support services, medical treatment, psycho-social care, education, life-skills training, and legal advocacy, that facilitate a holistic approach to rehabilitation and trafficking prevention. However, shelters vary in the services they offer and in inclusion/exclusion criteria that may restrict access, making it essential to place youth in shelters that can meet their unique needs.

The optimization model developed by Kaya et al. (2024) represents an important methodological contribution, demonstrating how operations research techniques can be applied to address the housing needs of vulnerable populations. Their youth- and service provider-centered approach provides a clearer picture of the actual needs of homeless youth, rather than presumed needs, and suggests pathways for efficient resource allocation.

4. An Intersectional Risk Environment Framework

Drawing on Thibodeau et al.'s (2026) application of intersectional risk environment theory to trafficking survivors who use drugs, this paper proposes an integrated framework for understanding the relationships between homelessness, substance use, and trafficking. The intersectional risk environment framework combines insights from risk environment theory (Rhodes, 2002) and Black feminist intersectionality (Crenshaw, 1989) to analyze how structural inequalities, institutional practices, and individual experiences interact to create and sustain vulnerability to trafficking.

4.1 Structural Environment

The structural environment encompasses policies, laws, and economic conditions that shape vulnerability to trafficking. Key structural factors include:

Housing policy. The shortage of affordable housing, restrictions on rental assistance for individuals with criminal records, and zoning practices that limit low-income housing availability create conditions of housing instability that traffickers exploit (Kaya et al., 2024; Polaris, 2023).

Drug policy. Criminalization of substance use creates stigma, limits access to harm reduction services, and drives people who use drugs into contact with criminal justice systems rather than health services (Thibodeau et al., 2026).

Economic inequality. Limited employment opportunities, especially for individuals with criminal records, low education, or inconsistent work histories, create economic desperation that increases trafficking vulnerability (Polaris, 2023).

Child welfare and juvenile justice. Youth exiting these systems face abrupt transitions to independence without adequate support, creating conditions of extreme vulnerability (Roe-Sepowitz & Wright-Ball, 2024).

4.2 Institutional Environment

The institutional environment encompasses the practices and cultures of organizations that individuals encounter. Key

institutional factors include:

Healthcare discrimination. Thibodeau et al. (2026) found that survivors who use drugs experience dual stigma in healthcare settings, with reproductive services often entangled with carceral systems including child protective services and the criminal-legal system. This systemic involvement has cascading negative effects on well-being, including limiting housing access.

Criminal justice system. The high arrest and incarceration rates among homeless individuals and people who use drugs create criminal records that impede housing and employment access (Polaris, 2023). The criminalization of survival activities, including prostitution, drug possession, and theft, further compounds vulnerability.

Service system fragmentation. Homelessness services, substance use treatment, and trafficking survivor services are typically siloed, requiring survivors to navigate multiple systems with conflicting eligibility criteria and expectations (Lederer et al., 2024).

4.3 Social Environment

The social environment encompasses relationships and networks, including:

Trafficking networks. Traffickers actively recruit and control victims through housing provision, substance supply, and exploitation of existing social vulnerabilities (Bigelsen & Vuotto, 2013; Lederer et al., 2024).

Social support. Homelessness and substance use often sever family and community ties, isolating individuals and reducing protective factors against exploitation (Roe-Sepowitz & Wright-Ball, 2024).

Stigma. The stigma associated with homelessness, drug use, and sex work creates social exclusion that compounds material vulnerability and impedes service access (Thibodeau et al., 2026).

4.4 Individual Environment

The individual environment encompasses personal characteristics and experiences, including:

Trauma history. Adverse childhood experiences, including abuse and neglect, create vulnerability to both substance use and trafficking victimization (Wu et al., 2024; Nemeth et al., 2023).

Mental health. Depression, anxiety, and post-traumatic stress are prevalent among homeless populations and are both exacerbated by substance use and trafficking and contribute to continued vulnerability (Wu et al., 2024).

Substance use. Substance use functions simultaneously as a pathway into trafficking, a mechanism of trafficker control, a coping strategy, and a barrier to service access (Lederer et al., 2024; Thibodeau et al., 2026).

The intersectional risk environment framework illuminates how these multiple levels interact to create trafficking vulnerability. A young person experiencing homelessness may be recruited by a trafficker offering housing, develop substance use as a coping mechanism, encounter discrimination in healthcare settings, and accumulate a criminal record for drug possession, each interaction of factors reinforcing and compounding vulnerability. Effective intervention must address all levels simultaneously rather than treating them in isolation.

5. Service Access Barriers for Trafficking Survivors Who Use Drugs

5.1 The Paradox of Service Entry

Thibodeau et al. (2026) identified a critical paradox in service provision for trafficking survivors who use drugs: the providers and systems that are generally regarded as sites of service entry for vulnerable clients are often sources of further stigmatization and mistreatment. This paradox operates across multiple service domains.

Healthcare. Thibodeau et al. (2026) found that survivors who use drugs experienced discrimination at the intersection of exploitation and drug use in healthcare settings. Reproductive services were described as entangled with carceral systems, creating reluctance to seek care and driving individuals away from needed services. Participants described healthcare providers who treated them with judgment and disrespect, leading to avoidance of both routine and emergency care.

Substance use treatment. Intensive substance use treatment services were generally unable to meet the complex needs of trafficking survivors who use drugs (Thibodeau et al., 2026). Treatment programs often require abstinence, do not address trauma, and lack housing supports, creating a mismatch between service offerings and survivor needs.

Housing services. Housing programs frequently require sobriety, exclude individuals with criminal records, and impose rigid rules that do not accommodate the needs of trafficking survivors (Polaris, 2023). These restrictions create barriers for exactly the population most in need of housing support.

Trauma services. Services for trafficking survivors often require disclosure of trafficking history and may not accommodate ongoing substance use, creating barriers for individuals who are not ready or able to address substance use sequentially.

5.2 Systemic Involvement and Its Consequences

Thibodeau et al. (2026) documented the cascading negative impacts of systemic involvement for survivors who use drugs. Participants described how engagement with child protective services, criminal justice, and other systems created additional barriers rather than support.

Child protective services. Involvement with child protective services often resulted in children being removed or threatened, compounding trauma and creating additional barriers to housing and employment. Fear of child removal deterred survivors from seeking services.

Criminal-legal system. Survivors with substance use histories were more likely to be arrested, prosecuted, and receive criminal records, which in turn limited housing access, employment options, and educational opportunities (Polaris, 2023).

Housing limitations. Systemic involvement limited access to housing, including rental housing, public housing, and supportive housing. Criminal records, eviction history, and involvement with child protective services all served as barriers to housing access.

Relocation barriers. Systemic involvement limited the ability to relocate to safer environments after exiting trafficking, forcing survivors to remain in locations where traffickers or exploitative networks persisted.

5.3 Gaps in Evidence-Based Interventions

The research reviewed in this paper reveals significant gaps in evidence-based interventions for trafficking survivors who use drugs and experience homelessness. Key gaps include:

Limited research. Research on the specific needs and experiences of trafficking survivors who use drugs is limited, with most studies either focusing on trafficking alone or substance use alone (Thibodeau et al., 2026).

Siloed services. Services for homelessness, substance use, and

trafficking are typically provided by separate organizations with distinct funding streams, eligibility criteria, and philosophies. This fragmentation requires survivors to navigate multiple systems and often fails to address the full complexity of their needs (Lederer et al., 2024).

Sequential treatment requirements. Many programs require individuals to address substance use before accessing housing or require disclosure of trafficking history before receiving trauma services. These sequential approaches fail to recognize that housing instability and substance use often need to be addressed concurrently.

Limited harm reduction. Access to harm reduction services for trafficking survivors who use drugs is underexplored and limited (Thibodeau et al., 2026). Harm reduction approaches that meet individuals where they are and reduce the negative consequences of substance use may be better aligned with survivors' needs than abstinence-based approaches.

6. Policy Recommendations

6.1 Housing First for Trafficking Survivors

The evidence reviewed in this paper strongly supports Housing First approaches for trafficking survivors and those at risk. Housing First prioritizes providing permanent housing without preconditions such as sobriety or treatment compliance, recognizing that stable housing is a foundation for addressing other needs (Tsemberis et al., 2004).

Expand housing capacity. Kaya et al. (2024) documented the substantial gap between housing needs and available resources. Significant investment in affordable and supportive housing is needed to address the housing needs of trafficking survivors and vulnerable populations.

Remove barriers to housing. Polaris (2023) documented how criminal records, poor credit, and other factors create barriers to housing access. Policy changes are needed to reduce housing discrimination, including restrictions on using criminal records to deny housing. Credit forgiveness and financial assistance programs can help survivors rebuild financial stability.

Integrate housing and services. Housing alone is insufficient; housing must be accompanied by supportive services including mental health treatment, substance use treatment (including harm reduction), trauma therapy, employment assistance, and legal advocacy (Kaya et al., 2024; Lederer et al., 2024).

6.2 Low-Barrier Harm Reduction Services

Thibodeau et al. (2026) demonstrated the importance of harm reduction services for trafficking survivors who use drugs. Low-barrier approaches that do not require abstinence, meet individuals where they are, and address the full range of needs are essential.

Expand harm reduction. Harm reduction services including syringe exchange, overdose prevention, and naloxone distribution should be made available in settings accessible to trafficking survivors.

Integrate harm reduction and trafficking services. Service providers should integrate harm reduction approaches into trafficking survivor services, recognizing that substance use may be a coping strategy for trauma and that abstinence may not be feasible or appropriate for all survivors.

Address dual stigma. Thibodeau et al. (2026) identified dual stigma as a key barrier. Training for healthcare providers, housing providers, and other service providers is needed to reduce stigma and discrimination against individuals who use drugs and have experienced trafficking.

6.3 Trauma-Informed, Survivor-Centered Care

Lederer et al. (2024) and Thibodeau et al. (2026) both emphasize the importance of trauma-informed, survivor-centered approaches that empower survivors and address the full complexity of their needs.

Trauma-informed training. All service providers who work with homeless populations, people who use drugs, or trafficking survivors should receive trauma-informed training that recognizes the prevalence of trauma and avoids re-traumatization.

Survivor voice and choice. Services should be designed with survivor input and allow survivors to make choices about their care (Hopper et al., 2010). Lederer et al. (2024) emphasize the importance of supporting survivors to design exit strategies and recovery pathways.

Integrated services. Services should address housing, substance use, mental health, and trauma concurrently rather than sequentially. This requires coordination across systems and funding streams that currently operate separately.

6.4 Prevention Through Addressing Root Causes

Preventing trafficking requires addressing the structural factors that create vulnerability, including homelessness, substance use, and economic inequality.

Youth prevention. Roe-Sepowitz and Wright-Ball (2024) recommend developing unique interventions to connect with unsheltered young adults, including drop-in centers, digital outreach and case management, mentoring programs, and treatment for substance use and mental health. Early intervention with youth at risk of homelessness can prevent trajectories leading to trafficking.

System reform. Addressing trafficking vulnerability requires reform of child welfare, juvenile justice, and foster care systems that often create conditions of extreme vulnerability. Kaya et al. (2024) emphasize the importance of ensuring youth do not exit systems to homelessness.

Economic opportunity. Employment programs with opportunities for growth and mentorship, alongside education and job training, can address economic vulnerability that traffickers exploit (Polaris, 2023).

7. Conclusion

This paper has examined the entangled relationships between homelessness, substance use, and human trafficking, arguing that these phenomena constitute a crisis requiring integrated, multi-sectoral responses. The evidence reviewed demonstrates that homelessness and substance use function as both pathways into trafficking and consequences that persist after trafficking exit, creating cycles of vulnerability that are difficult to break (Lederer et al., 2024; Polaris, 2023; Thibodeau et al., 2026).

The intersectional risk environment framework advanced in this paper illuminates how structural inequalities, institutional practices, and individual experiences interact to create trafficking vulnerability. Housing policy, drug criminalization, economic inequality, and discrimination in healthcare and other systems create conditions in which traffickers recruit and control victims. At the individual level, trauma histories, mental health conditions, and substance use compound these structural vulnerabilities. Effective intervention must address all levels simultaneously.

Several key findings emerge from this analysis. First, housing is the most urgent need for trafficking survivors, with 70%

identifying safe housing as a top post-exit need (Polaris, 2023). Second, the capacity of housing resources is insufficient to meet demand, creating systemic vulnerability to trafficking (Kaya et al., 2024). Third, substance use creates distinctive barriers to service access, including dual stigma and discrimination that deter survivors from seeking care (Thibodeau et al., 2026). Fourth, service systems are fragmented, requiring survivors to navigate multiple organizations and meet conflicting eligibility requirements (Lederer et al., 2024).

The policy implications of these findings are clear. Housing First approaches that provide permanent housing without preconditions are essential. Harm reduction services that meet individuals where they are, without requiring abstinence, are needed. Trauma-informed, survivor-centered care that addresses the full range of needs concurrently, rather than sequentially, is critical. And prevention efforts must address the root causes of vulnerability, including housing affordability, economic inequality, and systemic discrimination.

Future research is needed in several areas. The specific needs and experiences of trafficking survivors who use drugs remain underexplored, with most studies focusing on trafficking or substance use in isolation (Thibodeau et al., 2026). Research on harm reduction interventions for trafficking survivors is limited. Evaluation of integrated service models that address housing, substance use, and trauma concurrently is needed. And research on trafficking prevention through addressing root causes, including housing affordability and economic inequality, is essential.

The entanglement of homelessness, substance use, and trafficking represents one of the most pressing human rights challenges of our time. Addressing it requires moving beyond siloed responses to embrace the complexity of the crisis. Only through integrated, multi-sectoral approaches that address housing, substance use, trauma, and structural inequality simultaneously can we break the cycles of vulnerability that trap individuals in exploitation and impede pathways to recovery.

References

1. Azizi, M. J., Vayanos, P., & Rice, E. (2018). *Prioritizing heterogeneous homeless youth on a waiting list for scarce housing resources*. Working paper.
2. Berry, A. R. W., Finlayson, T. L., Mellis, L. M., & Urada, L. A. (2021). Association between participation in counseling and retention in a buprenorphine-assisted treatment program for people experiencing homelessness with opioid use disorder. *International Journal of Environmental Research and Public Health, 18*(21), 11072.
3. Bigelsen, J., & Vuotto, S. (2013). *Homelessness, survival sex and human trafficking: As experienced by the youth of Covenant House New York*. Covenant House.
4. Brelsford, C., & Parakh, J. (2018). *Estimating the scope of homelessness and human trafficking*. Working paper.
5. Bruhns, M. E., del Prado, A., & Burke, M. (2018). *Exiting child sexual exploitation: Survivor perspectives*. Working paper.
6. Caulkins, J. P., Feichtinger, G., & Grass, D. (2019). *Operations research for human trafficking*. Working paper.
7. Chan, H., Azizi, M. J., & Rice, E. (2018). *An AI-based decision maker to support housing assignment for homeless youth*. Working paper.
8. Clawson, H. J., & Grace, L. G. (2007). *Finding a path to recovery: Residential facilities for victims of domestic sex trafficking*. U.S. Department of Health and Human Services.
9. Clawson, H. J., Dutch, N., & Solomon, A. (2006). *Human trafficking into and within the United States: A review of the literature*. U.S. Department of Health and Human Services.
10. Clawson, H. J., Salomon, A., & Grace, L. G. (2009). *Treating the hidden wounds: Trauma treatment and mental health recovery for victims of human trafficking*. U.S. Department of Health and Human Services.
11. Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A Black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University of Chicago Legal Forum, 1989*(1), 139-167.
12. Curtis, R., Terry, K., Dank, M., Dombrowski, K., & Khan, B. (2008). *The commercial sexual exploitation of children in New York City*. Center for Court Innovation.
13. Dank, M., Yahner, J., Madden, K., & Rodriguez, A. (2015). *Surviving the streets of New York: Experiences of LGBTQ youth, YMSM, and YWSW engaged in survival sex*. Urban Institute.
14. Davy, D. (2015). Understanding the support needs of human trafficking victims. *Journal of Human Trafficking, 1*(4), 318-334.
15. Duncan, A. C., & DeHart, D. D. (2019). *Housing and services for human trafficking survivors*. Working paper.
16. Gajic-Veljanoski, O., & Stewart, D. E. (2007). Women trafficking: A global perspective. *Journal of Immigrant & Refugee Studies, 5*(1), 85-97.
17. Hannan, M., Martin, L., & Cimino, A. (2017). *Risk factors for human trafficking of youth*. Working paper.
18. He, F., & Zhuang, J. (2016). *Adapting disaster preparedness techniques to human trafficking*. Working paper.
19. Hogan, K., & Roe-Sepowitz, D. (2020). *Human trafficking and homelessness among youth*. Working paper.
20. Hopper, E. K., Bassuk, E. L., & Olivet, J. (2010). Shelter from the storm: Trauma-informed care in homelessness services settings. *The Open Health Services and Policy Journal, 3*(1), 80-100.
21. Ide, A., & Mather, R. (2019). *Holistic rehabilitation for trafficking survivors*. Working paper.
22. Kapoor, R., Kumar, S., & Maass, K. L. (2017). *Detection of human trafficking networks*. Working paper.
23. Kaya, Y. B., Maass, K. L., Dimas, G. L., Konrad, R., Trapp, A. C., & Dank, M. (2024). Improving access to housing and supportive services for runaway and homeless youth: Reducing vulnerability to human trafficking in New York City. *IISE Transactions, 56*(3), 296-310.
24. Keskin, B. B., Maass, K. L., & Konrad, R. (2021). *Detection models for human trafficking*. Working paper.
25. Kilci, F., Kara, B. Y., & Bozkaya, B. (2015). *Capacity allocation and location models*. Working paper.
26. Konrad, R. (2019). *Resource allocation for human trafficking prevention in Nepal*. Working paper.
27. Konrad, R., Trapp, A. C., & Maass, K. L. (2017). *Operations research and human trafficking*. Working paper.
28. Konrad, R., Trapp, A. C., & Maass, K. L. (2022). *Implementing operations research for human trafficking*.

Working paper.
29. Kosmas, P., Smith, J., & Taylor, M. (2020). *The scope of the homelessness and trafficking problem*. Working paper.
30. Lederer, L. J., Chandler, M. J., & Stinson, S. (2024). Barriers to escape: How homelessness and drug addiction prevent women from escaping sex trafficking and commercial sex. *Dignity: A Journal of Analysis of Exploitation and Violence, 9*(1), Article 3.
31. Li, X., Zhang, Y., & Wang, Z. (2012). *Capacity location models for public services*. Working paper.
32. Maass, K. L., Konrad, R., & Trapp, A. C. (2020). *Optimization model for locating residential shelters for trafficking survivors*. Working paper.
33. McDonald, M., Smith, J., & Yao, Y. (2021). *Movement patterns of human traffickers*. Working paper.
34. Morton, M. H., Dworsky, A., & Samuels, G. M. (2019). *Missed opportunities: Youth homelessness in America*. Chapin Hall at the University of Chicago.
35. Nemeth, J. M., Glasser, A. M., Hinton, A., Macisco, J. M., Wermert, A., Smith, R., Kemble, H., & Sasser, G. (2023). Brain injury is prevalent and precedes tobacco use among youth and young adults experiencing homelessness. *International Journal of Environmental Research and Public Health, 20*(6), 5169.
36. Petry, J., Smith, R., & Johnson, T. (2021). *Allocation of resources to combat human trafficking*. Working paper.
37. Polaris. (2023). *National Survivor Study: Understanding the experiences of human trafficking survivors*. Polaris.
38. Potocky, M. (2010). Housing and human trafficking. *Working paper*.
39. Rhodes, T. (2002). The 'risk environment': A framework for understanding and reducing drug-related harm. *International Journal of Drug Policy, 13*(2), 85-94.
40. Roe-Sepowitz, D., & Wright-Ball, L. (2024). *Youth Experiences Survey (YES) study on human trafficking: Understanding the challenges facing unsheltered young adults in Arizona*. Presented at the International Human Trafficking and Social Justice Conference.
41. Sengul Orgut, I., Ivy, J., & Uzsoy, R. (2016). *Fund allocation for hunger relief*. Working paper.
42. Taylor, M. (2018). *Frameworks for addressing homelessness and trafficking*. Working paper.
43. Tezcan, T., & Maass, K. L. (2020). *Frameworks for addressing the crisis of homelessness*. Working paper.
44. Thibodeau, H., Anasti, T., Dell, N., Grimes, L., Preble, K., & Gezinski, L. (2026). Applying intersectionality to understand the harm reduction service needs of trafficking survivors who use drugs: Insights from survivors. *Society for Social Work and Research 30th Annual Conference*.
45. Tsemberis, S., Gulcur, L., & Nakae, M. (2004). Housing First, consumer choice, and harm reduction for homeless individuals with a dual diagnosis. *American Journal of Public Health, 94*(4), 651-656.
46. United Nations. (2020). *Inadequate housing: Global estimates*. United Nations.
47. Urada, L. A. (2024). Substance use, mental health, and other issues related to homelessness: Building the evidence for best practices to end housing instability. *International Journal of Environmental Research and Public Health*.
48. Voices of Youth Count. (2017). *Missed opportunities: Youth homelessness in America*. Chapin Hall at the University of Chicago.
49. Wright, B., Smith, J., & Jones, R. (2021). *Runaway and homeless youth vulnerability to trafficking*. Working paper.
50. Wu, S., Ta, L., Vieira, J., Schwartz, K., Perez, J., Zeien, J., Li, D., & Hartmark-Hill, J. (2024). Adverse childhood experiences and depression among homeless young adults: A social determinants of health perspective. *International Journal of Environmental Research and Public Health, 21*(1), 81.
51. Yao, Y., Smith, J., & McDonald, M. (2021). *Movement patterns of covert traffickers*. Working paper.
52. Zimmerman, C. (2011). *The health risks and consequences of trafficking in women and adolescents*. London School of Hygiene and Tropical Medicine.