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Why Victims Remain Silent: Examining Stigma, Institutional Trust, and Barriers to Reporting Gender-Based Violence

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Abstract

The social problem of gender-based violence persists today, but many victims do not report due to stigma, lack of trust in institutions, and practical issues. The study explored how the social stigma, trust in institutions, and barriers to reporting affect victim silence in gender-based violence. The researchers used a quantitative cross-sectional survey design and the proposed sample was 300 participants selected through purposive sampling. Data were collected using a structured questionnaire with items on social stigma, institutional trust, reporting barriers and reporting intentions. In terms of analyzing responses, descriptive statistical techniques such as frequencies, percentages, means, and standard deviations were used. The findings revealed that social stigma had a mean score of 3.95 (SD = 0.82) and reporting barriers had a mean score of 3.80 (SD = 0.86). Mean score of Institutional trust was 3.01 (SD = 0.91) which signifies comparatively moderate trust in reporting institutions. The average score for reporting intentions was 3.02 (SD = 1.04). The findings suggest that fear of social judgment, worries about institutional responses and difficulties in accessing support can deter victims from reporting gender-based violence. According to the study, confidential reporting procedure, survivor-centered services, institutional accountability, and public awareness initiative were stressed. Enhancing confidence in support services and questioning stigmatizing attitudes might promote victimization and lead to access to justice. And support provides access to justice for victims. The results present important lessons for those interested in improving responses to gender-based violence policy makers and support organisations and institutions.

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Introduction

Gender Based Violence (GBV) was one of major social and human rights concerns, affecting the physical safety, psychological well-being, social relations and access to justice of a person's life. It encompassed ICHV in the context of intimate partner violence, sexual violence, harassment, psychological abuse and other forms of violence which is a consequence of disparity between men and women in terms of power and inequality. Legal changes, community awareness-building efforts and institutional actions all helped to foster awareness about GBV, while there were considerable barriers that must be overcome for victims to make the decision to report an instance of abuse. It was not just reporting the incident but also considering whether or not there was a social dimension to it, protection strategies for potential suffering, the potential of receiving support, and the likelihood of receiving a fair collective response to suffering from a collective authority. Violence against women has been declared by the World Health Organization as a public health crisis and a human rights violation and

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requires effective prevention, support and response measures (World Health Organization, 2021).

Stigma was one important factor which influenced victims on their decision to report gender-based violence. The victim may feel he or she is ‘somehow at fault', embarrassed, concerned about being rejected, anxious or pressured into being a victim of family members.Victim Victim may feel guilty, not blamed or responsible for what happened to them, embarrassed, afraid to be disapproved by the family/community. These issues became prominent when there were social expectations to uphold family honour or family relationships by the victim and not the perpetrator. Kennedy and Prock (2018) provided a general overview of how the negative attitudes and experiences of sexual violence stigma may contribute to further barriers to disclosure and help seeking among sexual violence survivors. Ullman (2010) spoke about the role of social reactions in survivors' recovery and the significance of culture and attitude of the respondents towards disclosure for the recovery of the survivors.

Another interesting factor in reporting behaviour was institutional trust – this gave victims a sense of confidence in police, health workers, lawyers and/or service providers that they will be treated properly and that the identities of victims will not be revealed. Formal reporting might be appropriate where no other means have been provided to deal with victimisation in the manner the victim wished. Other factors that might make it safe to withhold information, however, have to do with insensitive interrogation questions, confidentiality breaches, discrimination, delays, and inadequate investigations. Ahrens (2006) has studied and documented the impact of supportive responding on the disclosure process after sexual assault and identified supportive responding as one aspect of recovery. Patterson (2011) investigated survivors of sexual assault's interactions with the criminal justice system.

Background of the Study

Social stigma has shaped the experiences of the victims of GBV, their views on GBV, and what they value from people. Willingness of the victim to report abuse was influenced by gender role norms, family honour, and the cultural norms of sexuality and personal reputation in many communities. Many times victims were not supported but questioned regarding their behaviour, attire or relationships or decisions instead. Such emotions indicate going away from the issue of perpetrators and brought additional burden on victims. Kennedy and Prock, 2018 focused on the research related to stigma, and found three important areas of concern: Shame, self-blame, and anticipated negative reaction. Most recently, Maryn and Dover (2024) showed that formal rape reportants might be subject to greater negative social evaluations than non-reportant survivors.

There was a social stigma too as part of the response of the family, friends, colleagues and community representatives of the victim. Responsive responses can alert victims to the gravity of abuse and possible options they have, whereas blame/dismissive can signal to victims that they should be reluctant to share any additional experiences. Ahrens (2006) demonstrated the effects of negative responses to survivors by support providers that could lead to the silence of the survivors and the lack of person-to-person communication. This type of reaction occurred particularly when accessing one or more of the five service areas was made available

via the same social networks: financial support, housing, emotional support, and/or family stability support. Under such circumstances, a report might bring comfort that a meaningful relationship is lost or perhaps even more anxiety from this angle on avoiding the allegations. Themes that emerged in the women's narratives of why they did not report sexual violence were linked to self-blame, relationship with the perpetrators and lack of confidence in the criminal justice system by Stewart et al. (2024).

Trust in institutional systems were reported as victims' trust that institutional systems including the authorities and support organisations would deal with reports of GBV competently, with respect, will be fair, and confidential. This confidence influenced a victim's attitude towards reporting formally or not. If an experience has been advised against reporting or hasn't happened, seen in quite a critical light, or if a report does not lead to an investigation, this may seem useless or even damaging to the victim. Lorenz et al. (2021) explored the reasons why sexual assault survivors chose not to involve the police in their case and found that worries about police treatment, and experiences with law enforcement policies and practices, can impact a survivor's decision to report to the police. The response had a positive correlation with the perception of how fair the process was and the attitudes of police officers toward sexual assault, which led to higher response rates to report sexual assault, while lower response rates were found for the police officers' perceptions that the process was unfair.As college women's perceptions of police actions and attitudes became more positive, their intention to report sexual assault increased and as action and attitude perceptions become more procedural unfair, intention to report sexual assault decreased.

Holland et al studied public attitudes towards reporting to university and its to police policy showed that the degree of trust of police by survivors must also be incorporated. A systematic review by Wieberneit et al. (2024) of scientific studies on barriers to reporting and processes in the criminal justice are all important. Trust in the justice system, internal repercussions, social norms and perpetrator-related barriers. Explore Johnson and Lewis (2023) study that analyzed the impact of child sexual assault reporting to police and key reasons for victims to avoid reporting such incidents. Also discussed is magnitude of importance placed by victims on various reasons. According to Stewart et al., (2024), there are more interdependencies in the non-reporting decision than a single reason.

Earlier investigation looked into stigma, disclosure, police perceptions, and reporting barriers, which required a more in-depth analysis as interdependent dimensions of the decisions made by victims. The lack of faith in institutions makes them believe that reporting the incident won’t provide any protection or justice. The social stigma may lead them to believe that the community won’t support them. Practical barriers may amplify these assumptions by making the accessing or continuing of the reporting process harder. For example, a victim afraid of being rejected by their family and uncertain whether the police would help might not report, even when formal legal protection existed. Baert et al. (2024) studied what factors were associated with whether victims attending sexual assault care centres reported to the police. It pointed to the relevance of victimisation circumstances as well as informal support.

Research Objectives

1. To study the role of stigma (shame, victim blaming and fear of social ostracisation) in the decision of the victim to report the cases of gender-based violence.

2. To examine how institutional trust affects victims' willingness to report gender-based violence to police, legal authorities and relevant support organisations.

3. To find out the main factors, personal, social and institutional, to not report, and how these interacted with stigma and institutional trust.

Research Questions

1. How did the stigma, victim-blaming, and fear of social rejection affect the decision-making of the victims of gender-based violence to report them?

2. How did the offenders' trust in the police, the legal authorities, and the support organisations affect their reporting of GBV?

3. What was the interaction of stigma and institutional trust with the personal, social and institutional barriers that contributed to the victims' silence?

Significance of the Study

According to the study, a key social condition undermining GBV case reporting and access to assistance was the lack of trust in authorities. Researchers examined social stigma, institutional trust and reporting barriers to better understand why people with reporting silence due to social stigma do not report and theirsituation and view of institutional fairness. This could help inform policymakers, law enforcement, healthcare workers, legal representatives and support services on where reporting can strengthen and develop a more victim-centred, accessible and confidential service. These results may also inform awareness-raising campaigns and counter-victim-blaming efforts while enhancing community and family support to members. Formerly, the study might also a permissible scholarly discussion about disclosure, help-seeking and access to justice, by linking social pressure and institutional confidence together in the discussion. In effect, it yielded insights that were able to and did inform approaches that respected the autonomy of victims, minimised secondary victimisation and enhanced their confidence in formal victim support mechanisms.

Review of Literature

A strong social stigma influenced victims' choice to disclose GBV incident, as offenders reveal that those who disclose this incident face shame, criticism, rejection and victim blaming. Victims expected family members or members of their community/clan to once again ask about their deception, rather than the perpetrators. Sometimes families or communities feel that it is safer to keep quiet than to report, particularly when the victim requires emotional, social, and/or financial assistance. According to Kennedy and Prock (2018), the stigma surrounding sexual assault and intimate partner violence (IPV) may impact

victims' emotional responses and their willingness to seek help. Recent Evidence Indicates that People Do Not Report Sexual Assault Due to Shame, Self-Blame, Fear of Negative Reaction and Concern about Social Judgement Wieberneit et al. (2024)

Nevertheless, even if someone recognises the severity of the event, blaming the victim or having a negative reaction may discourage the victim from speaking out about the violence. A victim may consider that others will query their testimony and choices or that they somehow deserve a part of the blame the abuse. In a study conducted by Luu et al (2025), the authors conducted a snapshot study on social media posts using the hashtag #WhyIDidntReport. According to them, reasons for not reporting incident were victim-blame, minimisation, cost of reporting, self-blame, protecting others. Moreover, their findings indicated that why individual survivors chose to stay silent much depended on their social support online. It has been proposed that the public response may confirm or conflict with the circumstances in which the disclosure was made. Afpe et al (2025) further anaysed how references to victim blaming, rape myths and meida representations of rape continue to be present in the reporting of sexual assault.

The confidence of the victim in police, the courts, the healthcare system, and in supporting organizations as a reliable source of safety and support was impacted by institutional trust. The victim's expectations will motivate them to report when they expect that they, too, will be believed and treated fairly, but not report when unsought disbelief and harsh interviewing will ensue or ineffective investigations will follow. According to Lorenz et al. (2021), police client exit was investigated and this uncover that a key ten factor to emerge as a non-reporter was that the police were problematic. Stanek and colleagues (2023) similarly examined the relationship between procedural justice, trust in the police and women's willingness to report sexual assault. Their study found that choice making by police requires trust and respect.

Practical obstacles contributed in that it may have cost them to report, take time to report, make them feel emotional distress and threaten their safety. People can get concerned about being victims of retaliation by the offenders, financial assistance or violence from family relations or repeated questioning in investigations. According to the different literature consulted by Wieberneit et al. (2024), 28 different studies combined identified a total of 70 barriers in the reporting process and the criminal justice system that followed. The interlocking influences of distrust in the justice system, individual attitudes, social norms and perpetrator factors were noted. In newer research conducted by Smith and Skinner (2026), which examined the reporting decisions of 586 victim-survivors in England and Wales, it was reported that decision not to report or report was made by victims about their safety, wellbeing and whether or not there will be consequences.

Recent literature suggests that the stigma, negative social responses, institutional mistrust and practical challenges might affect disclosure and reporting. The authors of the scoping review, Jones and Ashcroft (2026), explain the concept of disclosure. Disclosure is a complex process that is affected by power dynamics, institutional contexts, stigma and fear, and inequitable access to support. Similarly, the systematic review by Wieberneit et al. (2024) showed that

hurdles did not only exist during the reporting decision phase, but also during the investigation and prosecution phases. This research focused on social stigma, institutional trust and reporting barriers in their entirety, rather than separately. This all-encompassing approach aimed to "unpack" the effect of social expectations and institutional experiences in creating silence, as well as identifying concrete action needed in order to build greater confidence in reporting systems. Maryn and Dover (2024) further examined social reactions to victims disclosing rape experiences, focusing on the impact of stigma on social reactions in their context. In a 2024 study by Stewart and others, researcher's examined the reasons why sexual violence victims choose not to go to the police after an incident.

Theoretical Framework

The current study was guided by the Theory of Planned Behavior (TPB) proposed by Ajzen (1991) as well as the concept of stigma and the institutional trust perspective. TPB describes the emergence of an individual's intentions and behaviour under the influence of attitudes, perceived social expectations, and perceived control. In the gender-based violence context, the social stigma may create negative expectations about disclosure, whereas the fear of blame and rejection can prevent victims from helping-seeking. The extent to which victims believe they will be treated fairly and have their confidentiality protected by police, legal authorities and support organisations is affected by institutional trust. The victim's limitation thought to reporting violence by the situation like tough reporting procedure, dependency on perpetrator and victim harmful effect and fear of indexing complaint. The framework thus argues that social stigma and reporting barriers add to the silence of victims whereas higher institutional trust may contribute to reporting and lesser silence. In the proposed model, stigma, institutional trust, and reporting barriers (independent variables) will serve as main predictors of victims' reporting intentions and silence (dependent variables). The framework shows how social expectations, institutional confidence, and practical constraints work together in making reporting decisions.

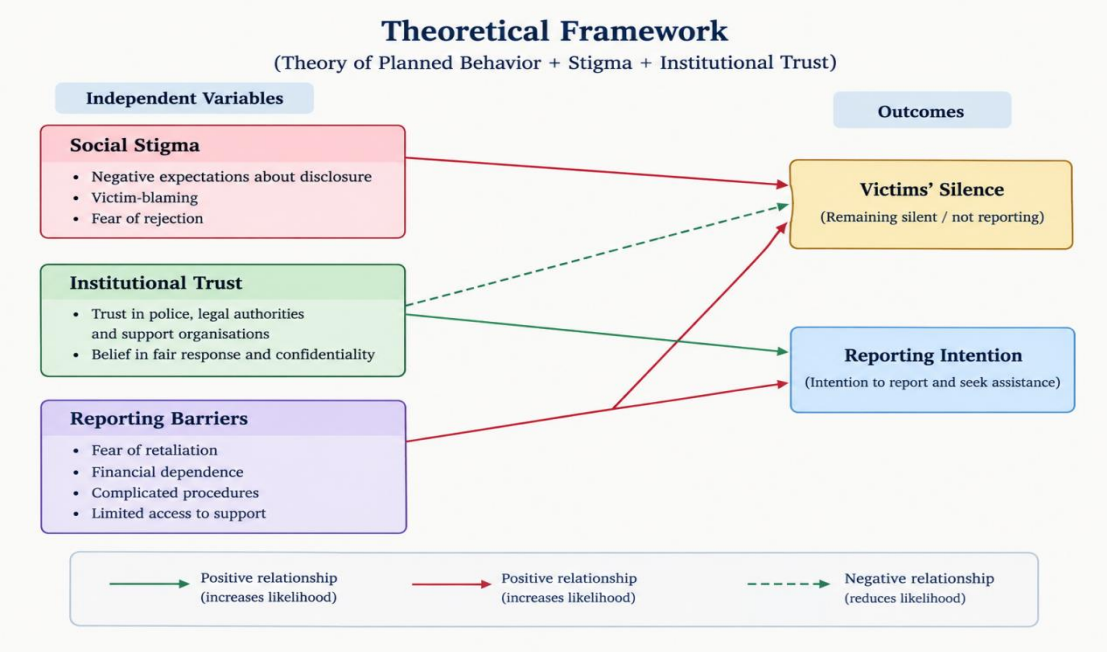


Figure 1. Theoretical Framework model

Research Methodology

Research Design

Using quantitative research design this research will analyse the reasons why victims of gender-based violence are silent. The silent will be analysed based on social stigma, trust and reporting. Researchers collected information on participants at a particular point in time using a cross-sectional survey approach. Through this design, the researcher is able to study the perception, experience and, attitude to report gender-based violence without a manipulation of any variables. The study examined social stigma, institutional trust, and barriers to reporting as independent variables. The intention to report or not report or remain silent was the key outcome.

Study Population and Sample Size

The target population was adult people with experience of gender-based violence in addition to experience of reporting and support process. Three hundred participants are selected by purposive sampling. This sampling technique helped the researcher to approach people who fulfilled the inclusion criteria of the study and could provide relevant information on stigma, trust in institution and reporting barrier. They were recruited from appropriate community networks, support organisations, and relevant social settings, subject to access and ethical approval. The sample included people from different social backgrounds who had different experiences of making reporting decisions. People were not forced to participate, and they were told about the research before filling up the questionnaire. By working with a sample size of 300, it allowed for a practical basis for summarising responses and comparing patterns across groups of participants.

Sampling

Participants were recruited purposively based on their experience or knowledge of gender-based violence and reporting mechanisms. The investigator implemented predefined inclusion criteria to ensure participants would be able to meaningfully answer the research questions. Eligible participants of the study were adults aged 18 years or above who were either survivors of gender-based violence or have relevant direct experience of reporting, supporting and/or accessing services.

Research Tool

Data was collected using a structured questionnaire that was designed around the objectives and hypothesis of the study. The questionnaire included demographic and social stigma information, institutional trust, barriers to reporting and intentions of reporting or not reporting. The section examined fear of shame, victim blaming, social rejection, negative reactions from family members or community members. The institutional trust portion

examined the collaboration participants can expect to receive confidentiality, fairness, responsiveness from police, legal authorities, health professionals, and support organisations. The outcome section reflected on participants' willingness to report gender based violence and the choice of silence or non-reporting. Several items measuring attitude were measured using five-point Likert-type scales that ranged from strongly disagree to strongly agree. The questions were written in plain language and participants could skip any questions that they so desired.

Data Collection Procedure

After obtaining required institutional or organisational permission and ethical approval, data collection was done. Those who met the requirements were informed of the purpose of the study, that participation was voluntary, details about confidentiality, and an ability to withdraw at any point without any penalty. After providing informed consent, they filled the questionnaire on paper or online, depending on accessibility and personal choice. The researcher was clear in their instructions and did not push participants to offer information that was not needed in the study. When participants required clarification, volunteers provided an explanation though did not influence their responses. The completed questionnaire were examined for missing responses and inconsistencies prior to data entry. The collected information was safely stored by the researcher and was restricted to authorised research use only.

Data Analysis

The statistical tools were used to analyse and interpret the collected data. The demographic characteristics of participants and their responses to key questionnaire items were summarised in frequencies and percentages. Responses to the Likert-scale items were described using means and standard deviations to reveal overall patterns in social stigma, trust in institutions, barriers to reporting, and intentions to report. The distribution of responses has been tabulated, which highlights the major reason or reasons for silence. Statistical group comparisons were conducted, as appropriate, to assess differences in intentions to report across relevant participant groups, including age group, previous reporting experiences, and levels of perceived institutional trust.

Results and Analysis

Social Stigma and Victims' Silence

Table 1. Participants' Perceptions of Social Stigma (N = 300)

Social stigma statement	Agree/strongly agree, n	Percentage	Mean	SD
I feared being blamed for the violence.	231	77.0%	4.08	0.91

I worried about damage to my social reputation.	222	74.0%	3.96	0.94
I feared negative reactions from family members.	216	72.0%	3.91	0.97
I worried that others would not believe my account.	228	76.0%	4.02	0.89
I feared social rejection after disclosure.	204	68.0%	3.78	1.02

The findings revealed that the fear of victim-blaming was the most commonly reported concern with 231 participants (77.0%) agreeing or strongly agreeing. A total of 228 (76.0%) participants were fearful of being rejected by others. Fears regarding damage to their reputation concerned 74.0% of respondents while the reaction of their family members concerned 72.0% of respondents. Among the five items, fear of social rejection had the lowest percentage, but it still impacted 68.0% of the sample. The average scores from 3.78 to 4.08 show generally high levels of agreement for responses. People may not disclose important information due to fear of social judgement from perceived others. If victims expect to be blamed or disbelieved, reporting may seem like it will cause more distress than support.



Figure 2. Participants' Perceptions of Social Stigma (N = 300)

Institutional Trust and Confidence in Reporting Authorities

Table 2. Participants' Perceptions of Institutional Trust (N = 300)

Institutional trust statement	Agree/strongly agree, n	Percentage	Mean	SD
I trusted authorities to treat victims respectfully.	126	42.0%	3.05	1.12

I believed authorities would protect confidentiality.	111	37.0%	2.91	1.15
I expected complaints to receive serious attention.	120	40.0%	3.00	1.10
I believed reporting could lead to meaningful action.	117	39.0%	2.96	1.13
I felt safe approaching formal support services.	132	44.0%	3.12	1.08

The results showed that less than half of the respondents were confident in the institution dealing with gender-based violence. Most people agreed (44.0%) they are confident to approach a formal support service while two-fifths (42.0%) expect respectful treatment when they do. Most of the people believed that authorities would take the complaining party seriously but only 40.0% thought so. While 39.0% people did not think that reporting would lead to any action. Most people had the lowest confidence transacting due to confidentiality – 37.0% of sample selects "agree." Moderate or rather uncertain institutional confidence of players in sample as observations on mean scores ranged from 2.91-3.12. A victim's unwillingness to utilize formal channels may be due to privacy, respectful treatment, or institution responsive concerns.



Figure 3. Participants' Perceptions of Institutional Trust (N = 300)

Barriers to Reporting Gender-Based Violence

Table 3. Major Barriers to Reporting Gender-Based Violence (N = 300)

Reporting barrier	Agree/strongly agree, n	Percentage	Mean	SD
Fear of retaliation from the perpetrator	240	80.0%	4.19	0.88
Financial dependence or lack of resources	207	69.0%	3.82	1.04

Limited knowledge of reporting procedures	183	61.0%	3.64	1.07
Fear of repeated questioning or further distress	213	71.0%	3.91	0.99
Concern about lengthy legal procedures	195	65.0%	3.72	1.02
Difficulty accessing support services	174	58.0%	3.51	1.11

Results revealed that the most common barrier reported by respondents was fear of retaliation, with 240 (80.0%) agreeing/strongly agreeing. At a rate of 71% respondents were worried about being interrogated or becoming upset while 69% were financially dependent or unable to do so. Most participants (65.0%) believed that the reporting procedures were lengthy, while 61.0% were concerned about limited knowledge. Generally, participants agreed that the barriers are important since the mean scores were measured between 3.51 and 4.19. The pattern indicates that safety concerns may be particularly strong because reporting could further harm victims. To the extent that victims relied on perpetrators for housing, household expenses, or support for family, financial dependence may also limit victim choices.

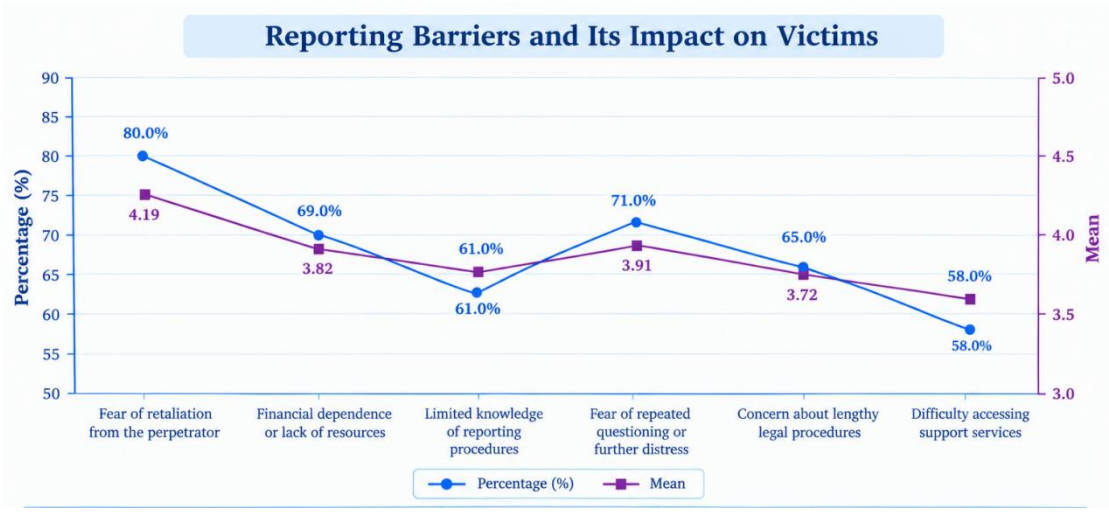


Figure 4. Major Barriers to Reporting Gender-Based Violence (N = 300)

Reporting Intentions and Reasons for Non-Reporting

Table 4. Reporting Intentions and Reasons for Non-Reporting (N = 300)

Reporting-related item	**Frequency**	**Percentage**
Expressed willingness to report future incidents	126	42.0%
Expressed uncertainty about reporting	ninety	30.0%
Expressed unwillingness to report	84	28.0%
Identified fear of retaliation as a reason for silence	240	80.0%
Identified fear of victim-blaming as a reason for silence	231	77.0%

Identified lack of confidence in confidentiality as a reason for silence	189	63.0%
Identified financial or family pressure as a reason for silence	198	66.0%

The 42.0% was the proportion of study participants who expressed their willingness to report a future incident. Further, 30.0% was the proportion who were uncertain and the 28.0% study participants were unwilling to report. The spread of responses indicated a good number of participants who were either reluctant or unwilling to approach formal authorities. The top reason for silence reported at 80.0% was fear of retaliation, followed by fear of victim-blaming at 77.0%. More than half of the family members strongly agreed that financial problems and pressure were barriers. Concerned about confidentiality were 63.0% while 66% reported financial or family pressure. The patterns suggest that a number of things come into play in making a reporting decision, rather than a single obstacle. Individuals in the study may think that formally reporting is handy in theory but may feel unsafe, socially disreputable, or concerned that others would hear what happened. The fairly large share of uncertain responses suggested that some would only consider reporting if they received greater confidentiality assurances, more practical support, and greater protection from retaliation.

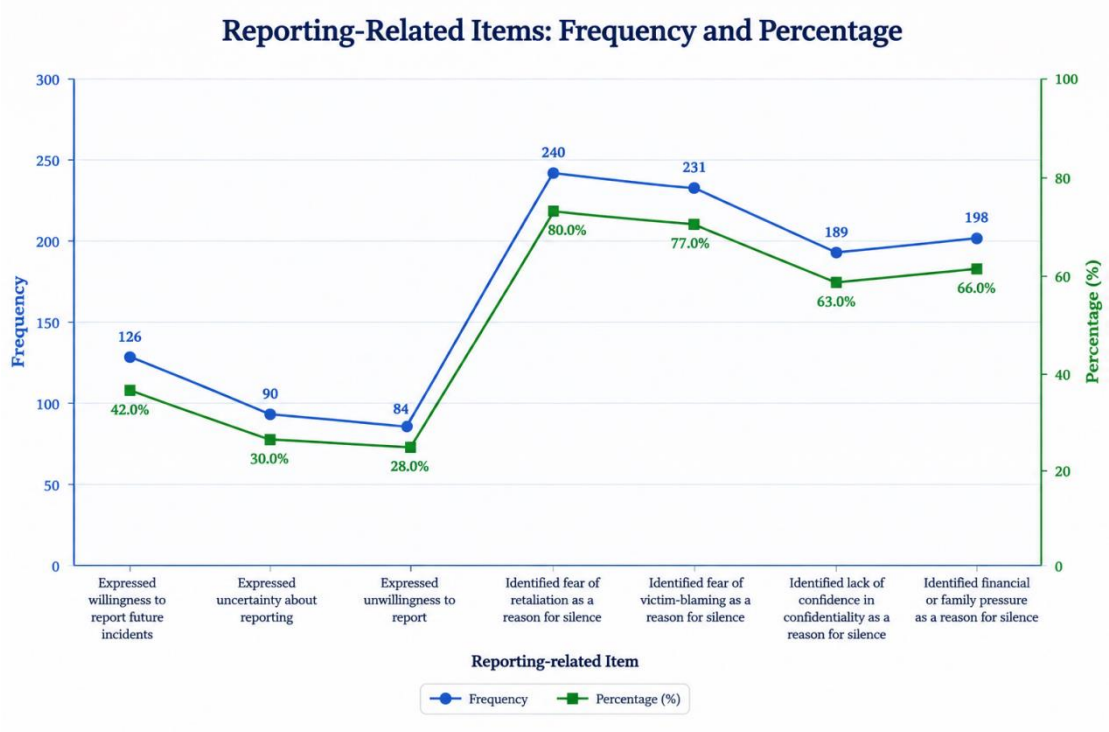


Figure 5. Reporting Intentions and Reasons for Non-Reporting (N = 300)

Discussion

The study found that social stigmas influence perpetrators' decisions to report gender-based violence (GBV) incidents. The results showed that these fears were significant; fear of being blamed, not believed, damaged reputation, and family rejection. The above trends align with what Kennedy and Prock (2018) say about stigma concerning sexual assault and IPV survivors. Maryn and Dover (2016) found that rape survivors who formally reported a rape

received more negative social evaluations than survivors who did not formally report. The findings indicate that reporting may subject the victims to further social judgement rather than the expected support.

Institutional trust also influenced decisions to disclose. The results show confidentially and respectful treatment likely taking complaints seriously and other concerns. Concerns, such as the ones raised by Wieberneit et al. (2024), who presented a systematic review which noted that many people do not report sexual assault due to distrust in the criminal justice system. Furthermore, they worry about being mistreated and holding people accountable. Survivors' relationships with institutions are not straightforward. For instance, some participants revealed or reported gender-based violence even if they distrust the institution concerned. It was argued that reporting behaviour stems less from trust than institutional dependence, personal circumstances, and availability of alternatives.

It also discovered practical obstacles, in particular the fear of retaliation, financial dependence, long legal process and concern about further suffering. When these factors appear in combination they can place victims at risk of harm. Wieberneit et al. (2024) concludes that self-blame, shame, fear of consequences, and fears of negative treatment were barriers that emerged often in the reporting and criminal justice processes. The evidence from Pakistan demonstrates the importance of examining the availability of formal support services. A UNFPA report mentions that there are certain barriers that limit the access and uptake of public-sector gender based violence services. Hence, there is need for survivor-centred institutional response.

The discussions highlighted that there is a need for reporting explanations whereby social stigma, institutional distrust and practical barriers to reporting is captured in an integrated account. All these factors may work together and influence whether a victim discloses, formally reports or seeks help. For instance, fear of rejection may mean a victim does not disclose, doubts about the what will happen at an institution may mean a victim lacks confidence to formally report, and safety or financial concerns may mean a report is unthinkable even when victims want more help or more support. Survey data on 46 research organisations across 15 European countries show that building institutional confidence and appropriate organisational responses are essential for addressing the consequences of gender based violence (Humbert and Strid, 2025). The report states that patterns of institutional trust and reporting decisions were not simplified (Bull, 2024). The research recommended a victim-centered approach to sexual violence which includes public education, fair institutional procedure, confidentiality, and easy-to-access supports. Consequently, the study’s proposed framework has presented a useful means of arranging the factors surrounding the reporting process.

Conclusion

In conclusion, stigma, mistrust of institutions and practical barriers played a crucial role in victim silence about gender-based violence. The victims didn't report out of fear of getting blamed, judged, or harming their family/own reputation. Clients' willingness to seek help decreased further due to concerns about the confidentiality of psychologists or specialists, disparities in treatment, and lack of clear support. The research findings highlight the significance of respectful reporting processes, confidential support services, tougher institutional accountability, and public awareness campaigns to challenge harmful attitudes towards survivors. Victims of trafficking need spaces where they feel heard and believed, where they can be protected from further harm. It is imperative to eliminate the social stigma and bolster trust in the reporting systems to encourage reporting, back survivors, and eliminate barriers to justice-seeking.

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