

# Continuing the discussion...

- ▶ [PollEv.com/austinoberli006](https://PollEv.com/austinoberli006)
- ▶ Submit Qs throughout talk or afterward
- ▶ I will write up answers that will be available to the group



Scan me

# Human Trafficking A Public Health Approach

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# Conflict of Interest

- ▶ None

**TRIGGER  
WARNING  
EXPLICIT CONTENT**

# Where Are We Starting From?

- ▶ How many people have received any *education* on Human Trafficking?
- ▶ How many people have ever *identified* a survivor of Human Trafficking in a healthcare setting?
- ▶ How many people think they have *encountered* survivors of trafficking but did not recognize it or did not know what to do?
- ▶ How many people would feel comfortable *knowing how to identify and how to manage* a patient who they identified as being trafficked?

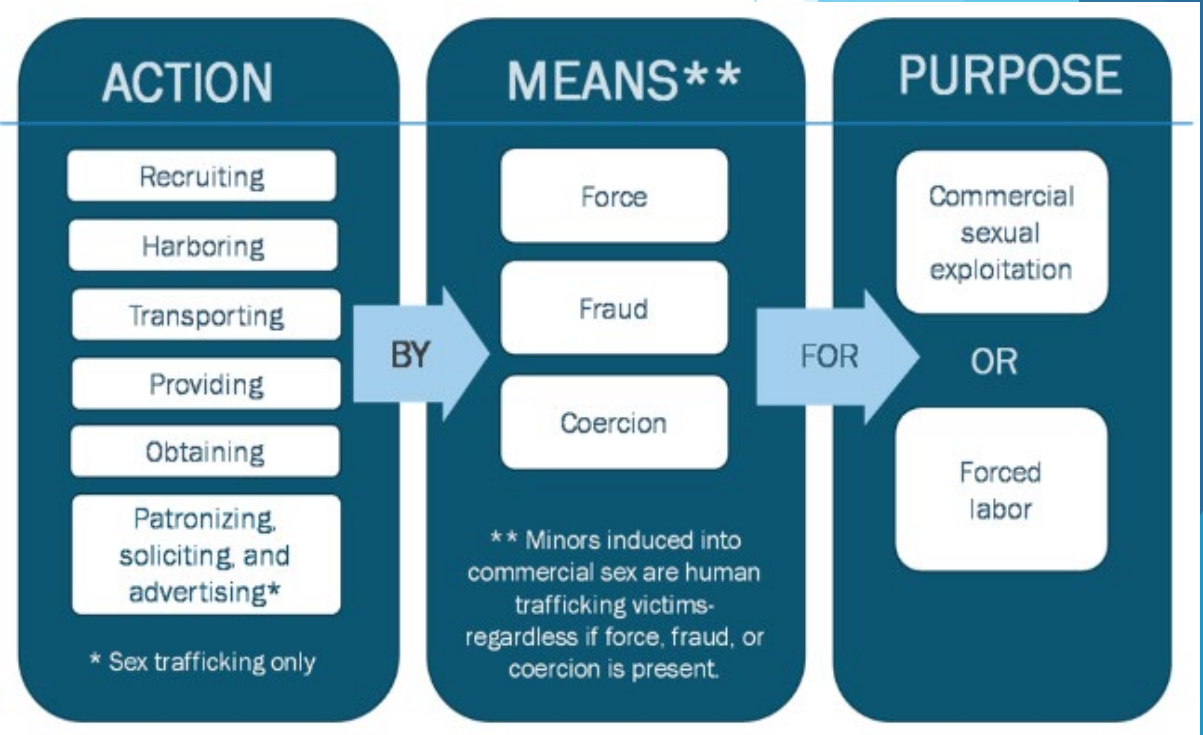
# Agenda

- 1) What is Human Trafficking?
- 2) What is the connection between Human Trafficking and healthcare?
- 3) Working with Trafficked Persons
- 4) Case-based examples
- 5) Resources

# Definitions

**Human trafficking** (TVPA) - a crime involving the *exploitation* of someone for the purpose of compelling labor or a commercial sex act through the use of *force, fraud or coercion*

- For a person younger than 18 induced to perform a commercial sex act, it is a crime regardless of whether there is any force, fraud or coercion



# If you've seen one survivor of human trafficking...

...You've seen one survivor of human trafficking

- All genders/sexual orientations, ages, races/ethnicities
- “Sex workers”
  - Street vs Internet
  - Pornography, Child abuse imagery
  - Stripping, massage parlors
- Farm workers, Fishing industry, Construction
- Textile manufacturing
- Hotels and restaurants
- Domestic workers (childcare, maid)
- Nursing/Care workers
- Door-to-door sales
- Nail salons
- Children trafficked by family
- Forced marriage
- Organ donation

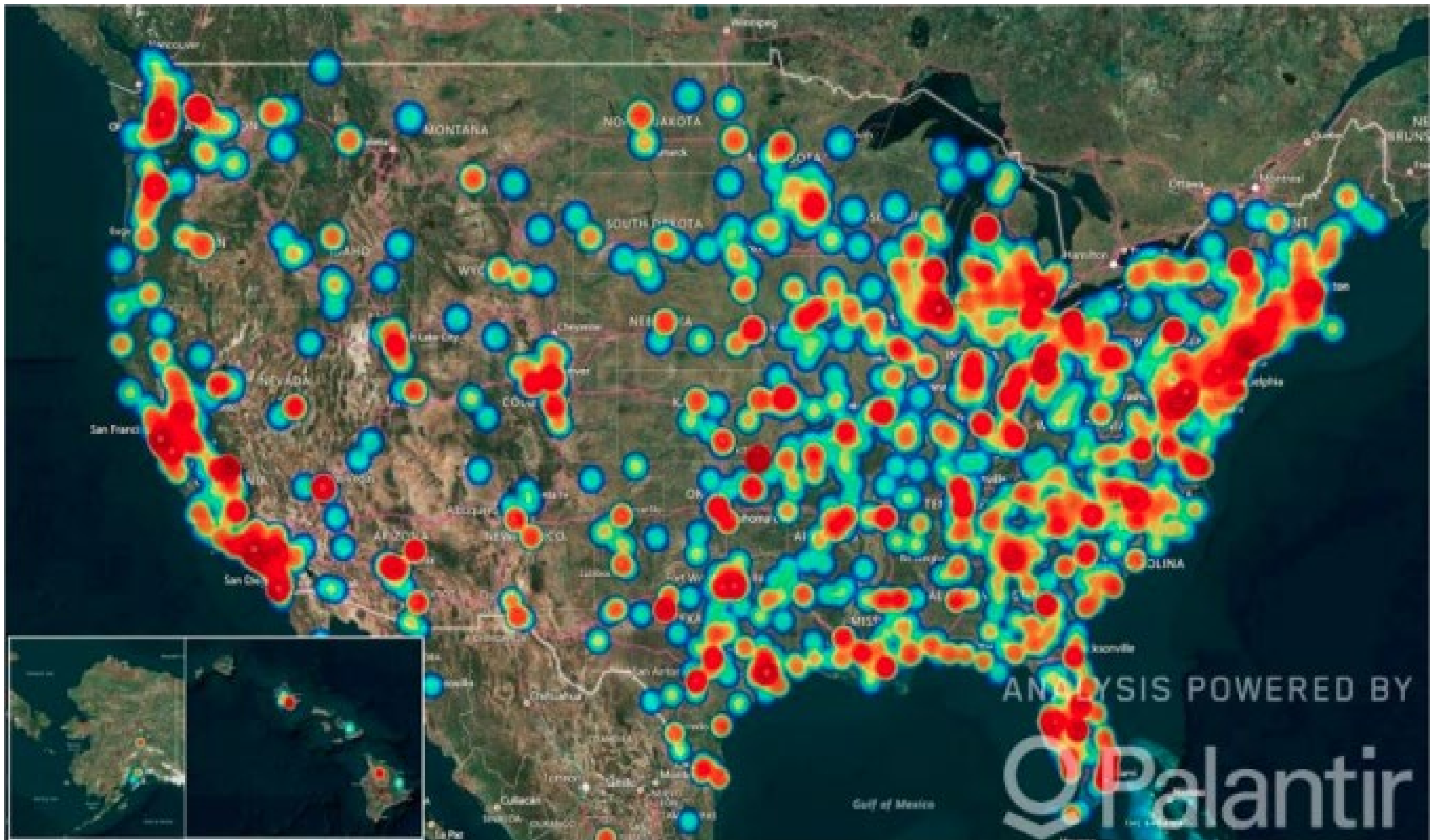
**Trafficked persons = LACK  
POWER or OPPORTUNITY in  
society.**

**Traffickers = EXPLOIT a RISK  
and/or FILL A NEED for those  
they traffic**

# Scope of the Problem

- ▶ 25 million people worldwide<sup>2</sup>
  - ▶ 20 million Labor Trafficking
  - ▶ 5 million Sex Trafficking
- ▶ 71% of survivors are female
- ▶ Prevalence: 1.3 per 1000 (Americas region)
  - ▶ Estimates of the US alone are limited





# Human Trafficking and Healthcare

1) Many trafficking survivors see a healthcare professional while being trafficked

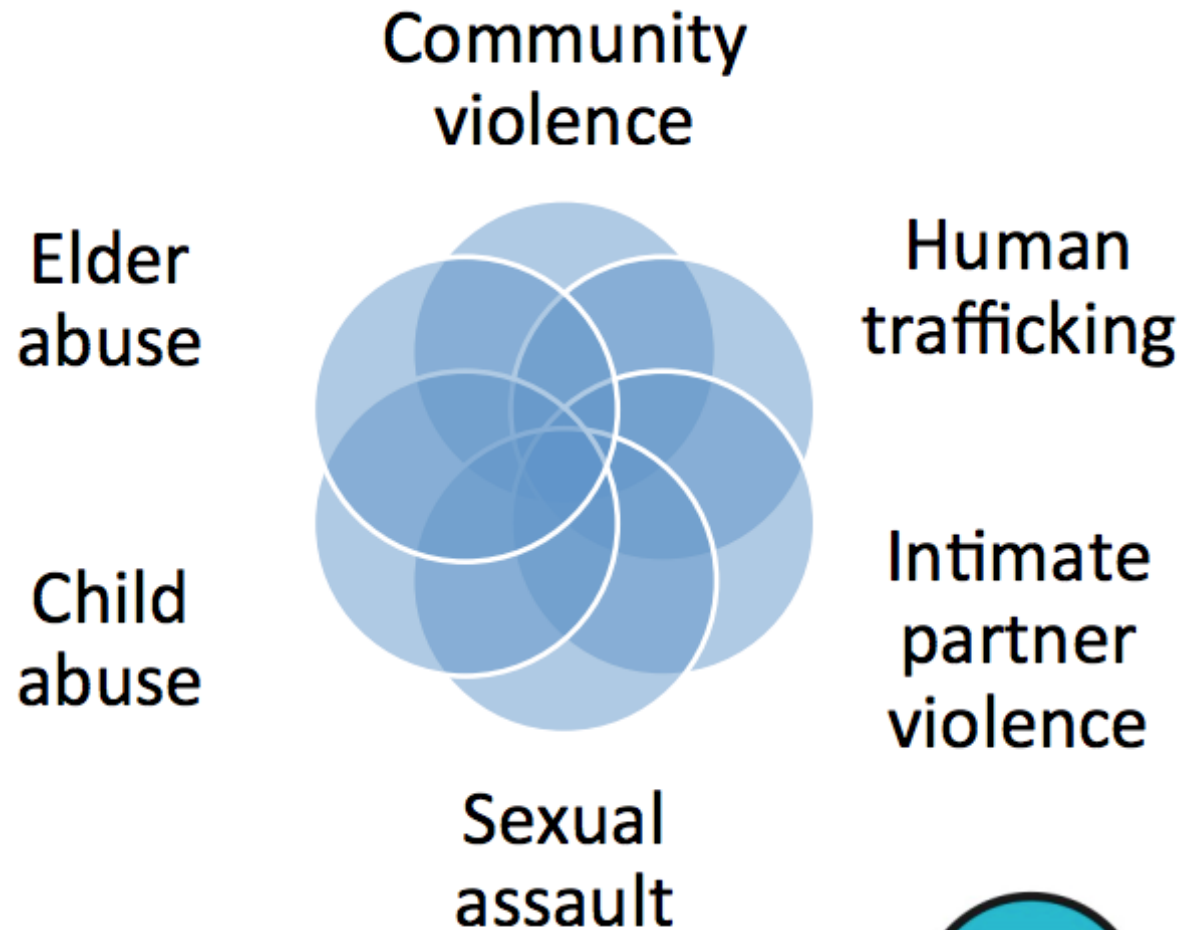
- ▶ 88%\* of survivors report seeing health professional<sup>2</sup>
- ▶ As many as 1% of patients presenting to the hospital

2) Trafficking puts them at risk for numerous health problems<sup>1</sup>

# Health Consequences of Trafficking

Outcome	Prevalence in trafficked persons
Depression <sup>3</sup>	17%
PTSD <sup>3</sup>	36%
Alcohol	60%
Marijuana	53%
Cocaine	51%
Opioids	???
STIs	67%
Sexual assault and unwanted pregnancy <sup>2</sup>	71%
Forced abortion <sup>2</sup>	55%
Late to prenatal care	???
Urogyn complications of chronic sexual assault	???
Higher rates of HPV-related cancers	???

# Spectrum of Interpersonal Violence



# Signs/Red Flags

- ▶ Controlling 3<sup>rd</sup> party (boyfriend, husband, uncle, brother, sister, mom or dad.)
  - ▶ If alone, patient constantly on phone
- ▶ Very poor historian
  - ▶ Does not know key details PMH
  - ▶ Does not know address, city, state
  - ▶ Doesn't have explanation for not knowing
- ▶ Late presentation to care
- ▶ Tattoos/Brands
- **Sense that something is off**

# Potential Questions

## ▶ Labor Trafficking

- ▶ What is your work schedule/hours?
- ▶ Can you leave when you want?
- ▶ Are there locks on the doors and windows?
- ▶ Where do you sleep and eat?
- ▶ Have you or your family been threatened if you left?

## ▶ Sex Trafficking

- ▶ Are you ever paid for sex?
- ▶ Has anyone taken sexually suggestive pictures of you to post on the internet? Backpage?
- ▶ Has anyone ever forced you to have sex while being recorded?
- ▶ Do you feel like you could safely leave where you're living? Safely leave your "boyfriend"?

# Common Challenges

- ▶ Not identifying as a “victim/survivor” of trafficking
  - ▶ Do not know that what they are experiencing is wrong
  - ▶ Do not want to admit to themselves
  - ▶ Sense of commitment to trafficker (trauma bonding)
  - ▶ Are afraid to reach out for help
  - ▶ Are resigned to their predicament
  - ▶ Believe that they have no better alternative
- ▶ Threatened reprisal against survivor, children or family members
- ▶ Potential criminalization of survivors

# Ethics of Mandatory Reporting

- ▶ Lead the conversation by noting your limitations as a mandatory reporter
  - ▶ Physically and mentally able adult (18-59 yo) health care providers are bound by confidentiality not to contact law enforcement or other agencies against a victim's will EXCEPT...
    - ▶ If wounds have been inflicted by specific weapons (firearms or knives)
    - ▶ OR if immediate threat to cause serious injury or death
- ▶ When a child (under 18 yo) or an elder (over 59 yo) is the victim of abuse or neglect or you suspect abuse or neglect, mandated reporting statutes apply<sup>4</sup>



# Case-Based Exercise

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# Case #1

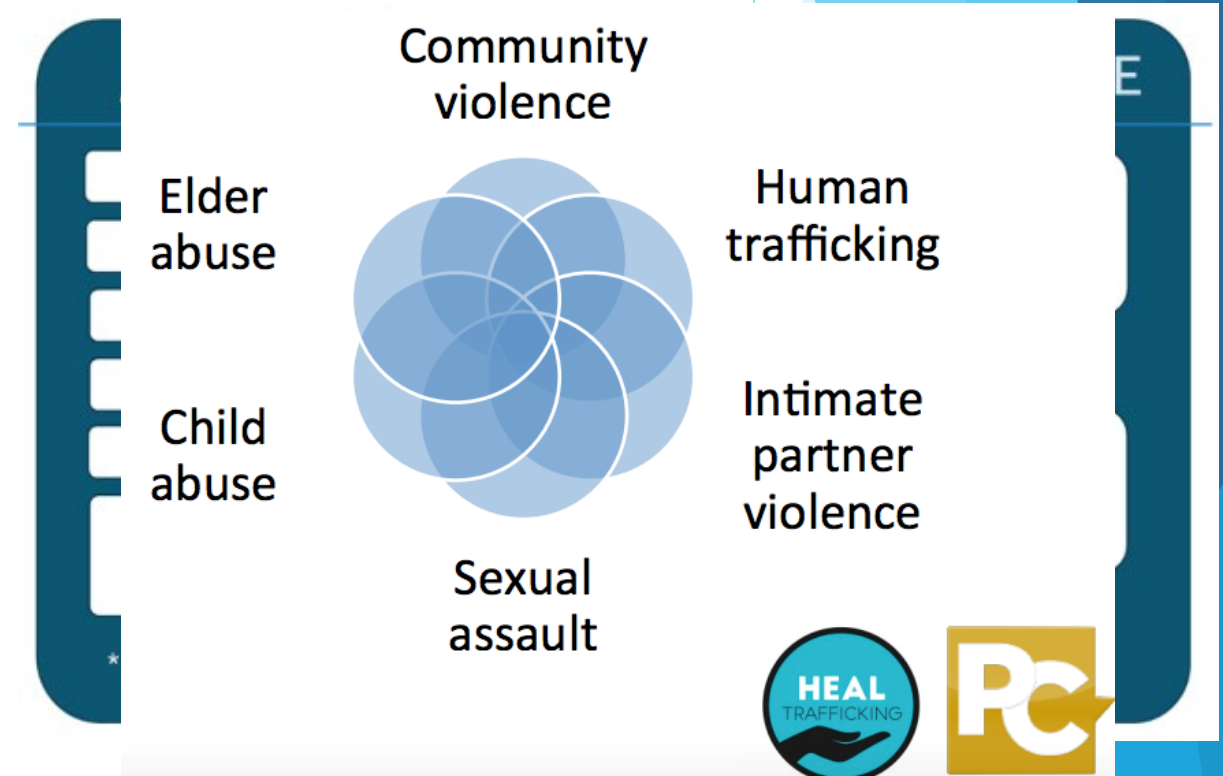
- ▶ 26 yo Filipino female presenting for prenatal care
- ▶ No health insurance, does not have Medicaid
- ▶ No ID/Passport but came to US legally working as RN
  
- ▶ **Have you or your family ever been threatened if you left your job?**
- ▶ Threatened with deportation and repaying debt
- ▶ Recruited from the Philippines to work in US
  - ▶ Now owes \$12,000 to employer with high interest
  - ▶ Forced to rent at high rate from employer

# Case #1 Cont.

- ▶ Returns for all of her prenatal visits
- ▶ After 5<sup>th</sup> visit, she discloses that this child is the product of a sexual assault
  - ▶ Coerced by employer for sex
- ▶ She feels helpless and trapped in her situation

# What is Going on Here?

- Labor trafficking, sexual assault
- Trafficking can occur in any industry
- Trafficking does NOT need to include bondage or physical restraint
- Vulnerabilities put individuals at risk for multiple forms of exploitation
- Spectrum of interpersonal violence



## Case #2

- ▶ 19 yo AAF G1 presenting to L&D at 39wks w/ no prior prenatal care
  - ▶ Accompanied by an older female who she identifies as her mom
  - ▶ No explanation for lack of care, mother has no records
  - ▶ Mother initially refuses to leave for exam
    - ▶ Leaves after explaining that it is hospital policy

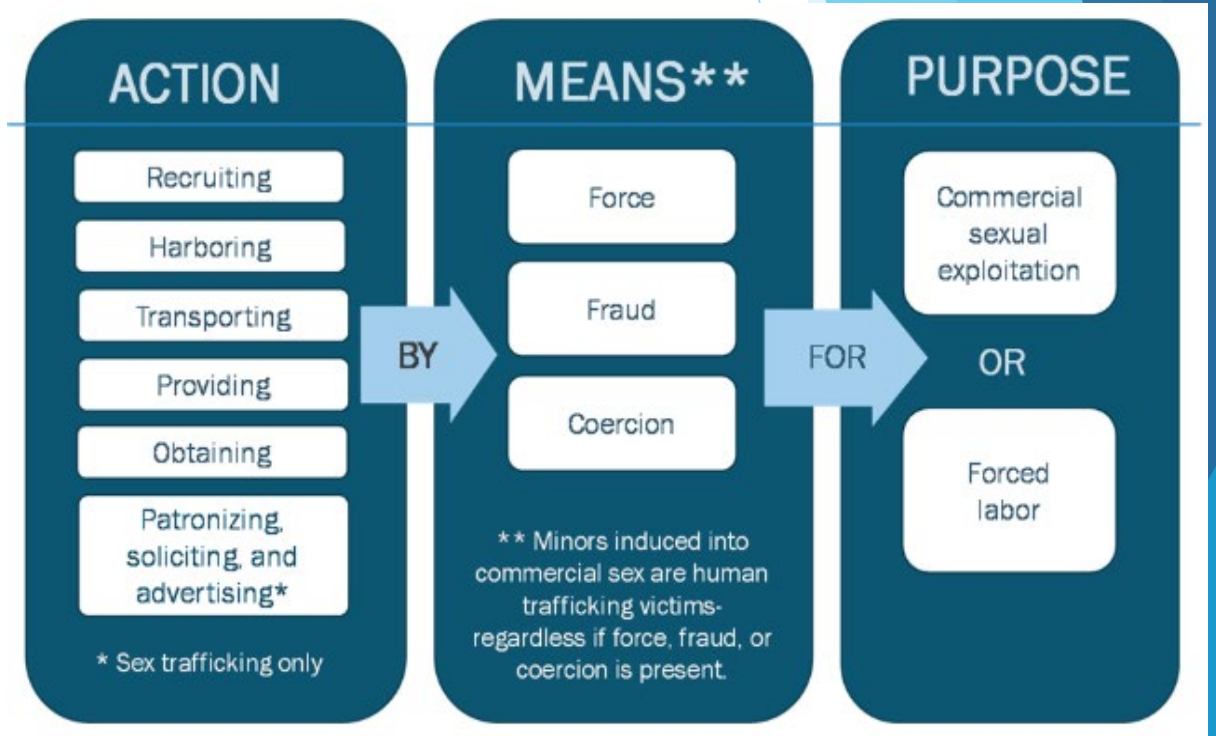
# Case #2 Cont.

## ▶ Physical Exam

- ▶ General: Thin appearing female appears younger than her stated age. She completely disengages during the exam and does not react, simply staring off at one wall
- ▶ Lungs: CTA b/l
- ▶ CV: Normal S1 and S2 w/ RRR. No peripheral edema
- ▶ Gyn: Gravid uterus measuring 38cm, fetus in longitudinal cephalic position. FHTs 150s. Red, erythematous cervix with whitish exudate coming from the cervical os

# What is Going on Here?

- Some concerning findings but nothing specific to trafficking
- Patient did not disclose
- **Are you ever paid for sex?**
  - “Yes, sometimes but just to help us out. I live with my boyfriend and some other girls. That is actually not my mom, I just live with her.”
  - If she admits that she is <18 yo, then this would be sex trafficking



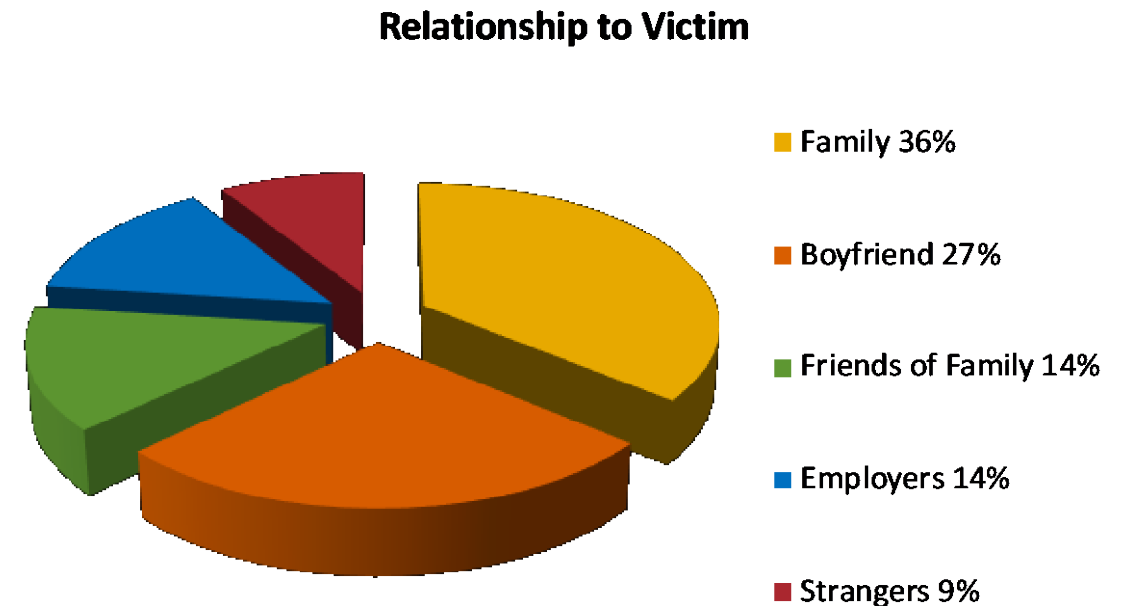
## Case #3

- ▶ 12 yo Caucasian F presents to Planned Parenthood with her mother who requests daughter be started on birth control
  - ▶ Mother requests Depo shot
  - ▶ After mom leaves room, patient states that she is not sexually active, she did not want to come today to get birth control but her mother insisted
  - ▶ **Has anyone ever forced you to have sex while being recorded?**
    - ▶ No, but her uncle has recorded her older sister before and these videos are sold on the internet for money
    - ▶ Concerned her mother will make her do this now that she is older



# What is Going on Here?

- ▶ Familial sex trafficking
  - ▶ Traffickers are almost always known to survivors
- ▶ Make it policy to speak with patients alone
- ▶ Mandatory to report to CPS



Practical Knowledge

The background features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. These shapes are primarily located on the right side of the frame, creating a modern, layered effect against the white background.

# Approach to a Trafficked Patient

- ▶ Disclosure of a trafficking experience should NOT be the goal
- ▶ Apply a Trauma-informed approach
  - ▶ Share information and control, respect boundaries, patience, build rapport
  - ▶ Develop a safe-space that survivors may return to when ready
  - ▶ Policy to ALWAYS take time to speak with patients alone
  - ▶ Avoid re-traumatization
- ▶ Refer when concerned about a patient
- ▶ Note concerns in the medical record (**ICD-10 codes**)

# Our Experience at VCU

## ▶ **Education**

- ▶ Yearly medical symposium on trafficking
- ▶ Simulation-based series

## ▶ **Clinical**

- ▶ Human Trafficking Screening Tool and Protocol
- ▶ SANE Nurses team - adult survivors of trafficking
- ▶ Child Protection Team - pediatric survivors of trafficking

## ▶ **Research**

- ▶ Understanding prevalence and pathology

- ▶ Nurses conduct violence assessment
  - ▶ Every patient in the ER (eventually all units)
  - ▶ 4 question HITS tool
  - ▶ Automatic page/consult to SANE/CPT team
- ▶ More extensive screening tool (19 questions)

**Is someone you are intimately involved with, live with, or work for:**

1. Physically **H**urting you?
2. **I**nsulting or talking down to you?
3. **T**hreatening to harm you or your family?
4. **S**creaming or cursing at you?

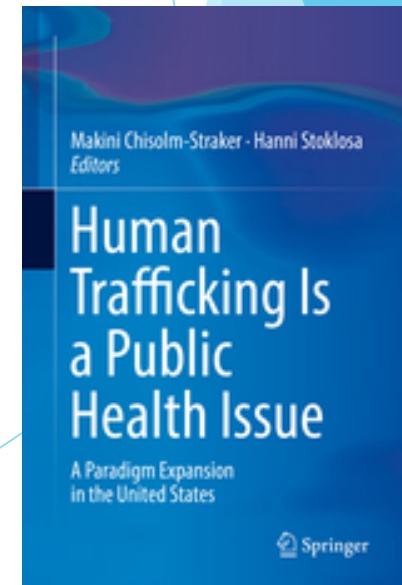


**Is someone you are intimately involved with, live with, or work for (or have been in the past) ...**

- 1) Physically harm you in any way (beat, slap, hit, kick, punch, burn)
- 2) Physically harm or threaten a family member or friend or coworker
- 3) Restrict or control where you went or who you talked to
- 4) Threaten to harm you or your family or pet
- 5) Deprive you of sleep, food, water, or medical care
- 6) Not let you contact family or friends, even when you weren't working
- 7) Physically force you to do something you don't feel comfortable doing
- 8) Force you to do something sexually that you didn't feel comfortable doing
- 9) Lock you up, restrain you, or prevent for you from leaving
- 10) Keep your ID documents from you (ID card, license, passport, social security card, birth certificate)
- 11) Keep all or most of your money or pay
- 12) Threaten to get you deported
- 13) Refuse to pay you or pay less than they promised
- 14) Trick you into doing different work than was promised
- 15) Make you sign a document without understanding what it stated, like a work contract
- 16) Put your photo or the internet to find clients to trade sex with
- 17) Force you to engage in sexual acts with family, friends, or business associates for money or favors
- 18) Encourage or pressure you to do sexual acts or have sex, including taking sexual photos or videos
- 19) Force you to trade sex for money, shelter, food, or anything else through online websites, escort services, street prostitution, informal arrangements, brothels, fake massage businesses, or strip clubs

# Learn More

- ▶ Become a member of HEAL Trafficking
  - ▶ <https://healtrafficking.org/>
  - ▶ Listserv, Webinars, Protocols
- ▶ Dignity Health
  - ▶ <https://www.dignityhealth.org/hello-humankindness/human-trafficking>
- ▶ Human Trafficking Symposium at VCU Resources
  - ▶ <http://www.impactvirginia.org/>
- ▶ Human Trafficking is a Public Health Issue  
by Makini Chisolm-Straker and Hanni Stoklosa



# Conclusion

- 1) We are ALL seeing people who have experienced human trafficking
- 2) Human Trafficking is part of a larger spectrum of interpersonal violence
- 3) You do not need to do this alone
  - Create systems to identify and triage trafficked persons to better treat patients while *reducing* the burden on providers

**The steps you take do not need to be big.  
They just need to be in the right  
direction.**

# Thank You

- Fidelma Rigby MD, FACOG
- Robin Foster MD
- Fay Chelmow
- Shelly Brown FNE, SANE



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**GET HELP**

**REPORT TRAFFICKING**



# Sources

- 1) Human Trafficking is a Public Health Issue: A paradigm expansion in the United States. Editors Makini Chisolm-Straker and Hanni Stoklosa. Book. 2017.
- 2) ILO Global Estimates of Modern Slavery 2017
- 3) “The Health Consequences of Sex Trafficking and Their Implications for Identifying Victims in Healthcare Facilities.” Lederer, L., Wetzel, C. A. *Annals of Health Law*, Volume 23, Issue 1, 61-91. 2014.
- 4) Oram, S., Stöckl, H., Busza, J., Howard, L., Zimmerman, C., & Jewkes, R. (2012). Prevalence and Risk of Violence and the Physical, Mental, and Sexual Health Problems Associated with Human Trafficking: Systematic Review. *PLoS Medicine*, 9(5), E1001224.
- 5) <https://www.vacc.org/docs/laws/LAW-%20Graphical%20Representation-%20Virginia%20Reporting%20Laws.pdf>

# Appendix Slides

The background features a complex, abstract design of overlapping, semi-transparent blue triangles and polygons. The colors range from light sky blue to deep navy blue. The shapes are layered, creating a sense of depth and movement. The overall aesthetic is clean, modern, and professional.

# Human Trafficking is not new

**1500 BC:** Forced labor/Indentured servants build pyramids

**1619:** First Slave brought to Jamestown, VA

Estimated 12 million people brought to America's as slaves

**1865:** 13<sup>th</sup> Amendment abolishes slavery

**1910:** White-Slave Traffic Act

**2000:** Palermo Protocol/Trafficking Victims Protection Act (TVPA)

Currently **40 Million** people estimated to be Trafficked

# Trafficking is more common than...

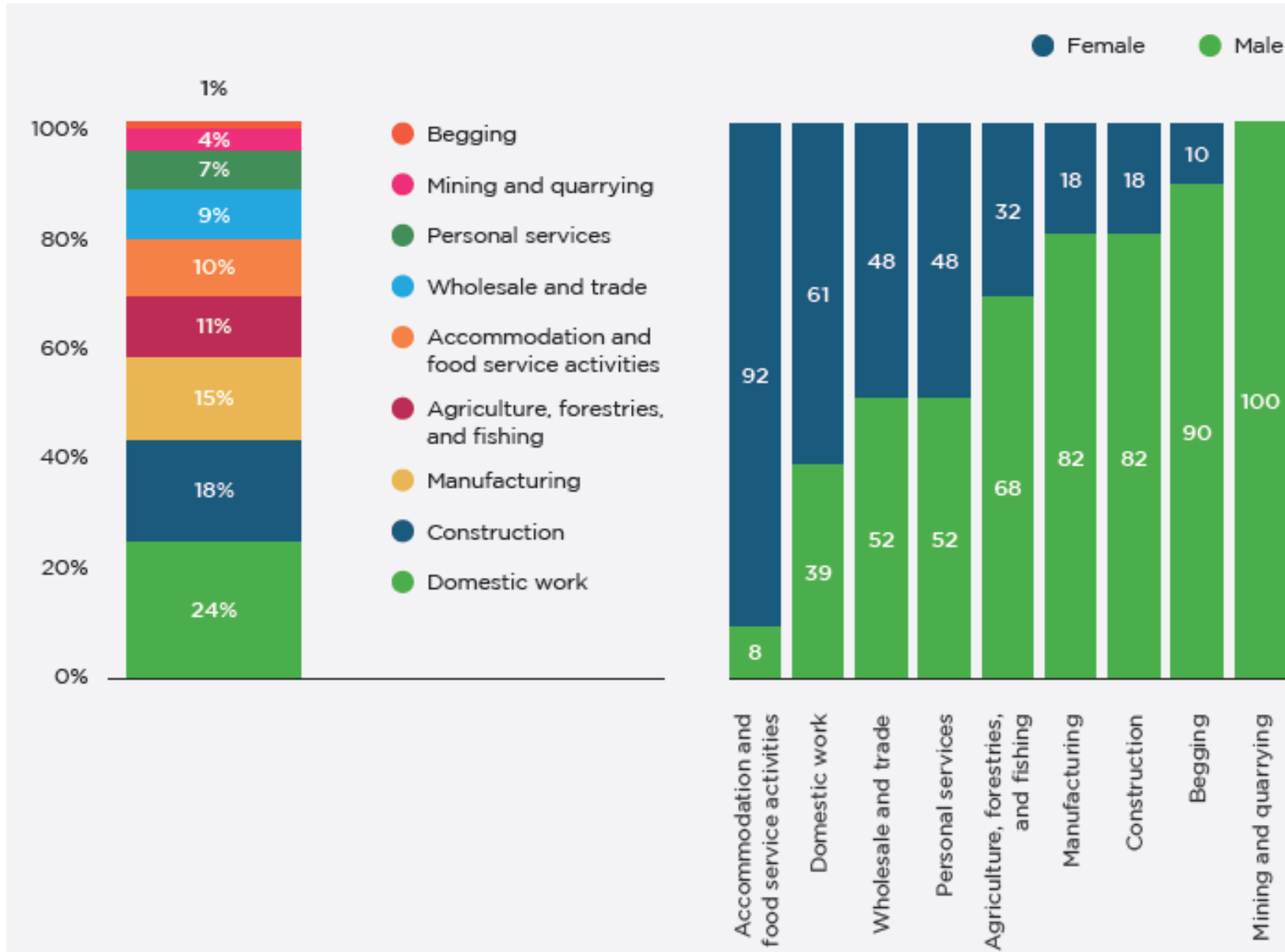
- ▶ Incidence of
  - ▶ Trafficking 1.3 per 1000
  - ▶ Sexual assault 2.2 per 1000 (women)
  - ▶ Domestic violence 4 per 1000 (women)
- ▶ Incidence of ...
  - ▶ Cervical cancer 0.07 per 1000
  - ▶ PID 10 per 1000
  - ▶ PreE 20-50 per 1000

# Common Misconceptions

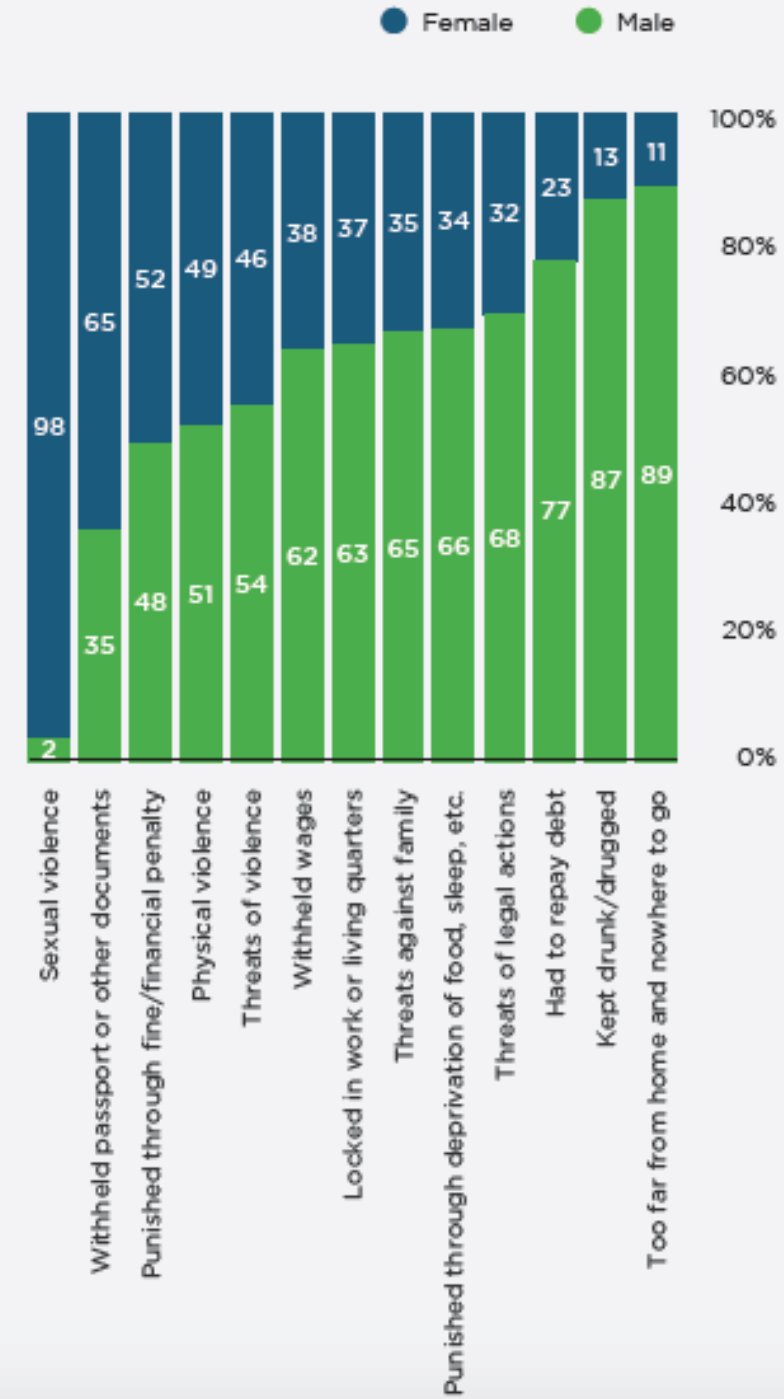
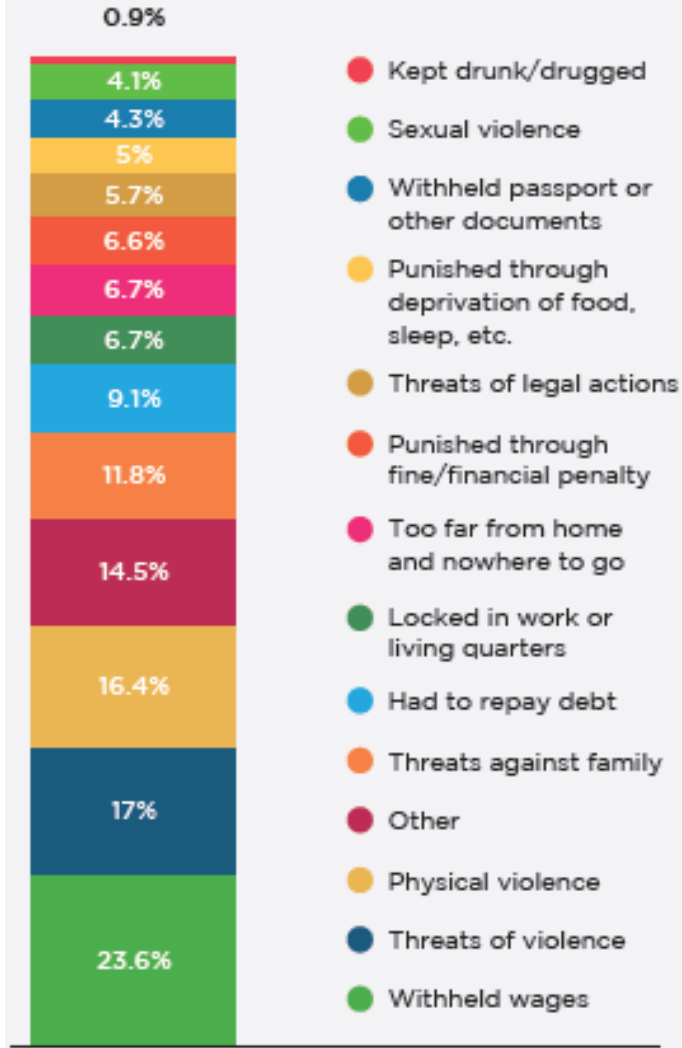
- 1) Survivors of human trafficking are mostly illegal immigrants brought to this country...
  - ▶ In fact, the USA is the number one origin of trafficked survivors in the US
  - ▶ BUT, this may not be the case in all areas or in all situations
- 2) Most traffickers are unknown to survivors and take them away from their home
  - ▶ Only a small proportion of traffickers are strangers to the survivor
  - ▶ Trafficked individuals may still reside in their own home, with family, still attending school or a job while being trafficked
- 3) Sex trafficking occurs in large urban areas, labor trafficking in rural areas
  - ▶ Survivors of sex trafficking can be found everywhere in the US, including in RVA
  - ▶ Survivors of labor trafficking are found in numerous industries, not just farming

**But we don't really know...**

# Industry of Trafficking



# Means of Trafficking



# New ICD-10 codes

ICD-10-CM Code/ Subcategory	Title
T74.51*	Adult forced sexual exploitation, confirmed
T74.52*	Child sexual exploitation, confirmed
T74.61*	Adult forced labor exploitation, confirmed
T74.62*	Child forced labor exploitation, confirmed
T76.51*	Adult forced sexual exploitation, suspected
T76.52*	Child sexual exploitation, suspected
T76.61*	Adult forced labor exploitation, suspected
T76.62*	Child forced labor exploitation, suspected
Y07.6	Multiple perpetrators of maltreatment and neglect
Z04.81	Encounter for examination and observation of victim following forced sexual exploitation
Z04.82	Encounter for examination and observation of victim following forced labor exploitation
Z62.813	Personal history of forced labor or sexual exploitation in childhood
Z91.42	Personal history of forced labor or sexual exploitation



# Key Terms in Documentation

## ***Key Terms***

### Key Terms Related to Human Trafficking Found in Medical Documentation

- Human trafficking
- Labor trafficking
- Sex trafficking
- Commercial sexual exploitation
- Forced commercial sexual exploitation
- Forced prostitution
- Forced sexual exploitation
- Forced labor exploitation
- Exploitation of manual labor
- Exploitation of sexual labor
- Exploitation for manual labor
- Exploitation for commercial sex
- Domestic servitude
- Labor exploitation for domestic work
- Force labor exploitation for domestic work

# Comparing Approaches

**Table.** Potential Impacts of Focused vs Comprehensive Medical Assessment and Documentation of a Left Arm Infection

Factors	Focused Medical Assessment and Documentation	Comprehensive Medical Assessment and Documentation
Diagnostic coding	In order of presumed causation:  L02.414: Left arm abscess L03.114: Left arm cellulitis	In order of presumed causation:  Y07.0: Spouse or partner abuse and violence Z59.0: Homelessness F32.9: Depression F19.10: IV drug use L02.414: Left arm abscess L03.114: Left arm cellulitis

# Comparing Approaches

Factors	Focused Medical Assessment and Documentation	Comprehensive Medical Assessment and Documentation
Health care response and treatment offered	<ul style="list-style-type: none"><li>• Incision and drainage</li><li>• Antibiotics</li></ul>	<ul style="list-style-type: none"><li>• Incision and drainage</li><li>• Antibiotics</li><li>• HIV counseling and testing +/- treatment</li><li>• Hepatitis testing +/- treatment</li><li>• Addiction counseling and referral to treatment</li><li>• Suicide screening</li><li>• Psychiatry consultation +/- treatment</li><li>• Social work consultation for danger assessment, safety planning, housing/shelter assistance, and referral to domestic/partner violence services</li></ul>

# Comparing Approaches

**Table.** Potential Impacts of Focused vs Comprehensive Medical Assessment and Documentation of a Left Arm Infection

Loi ne	Factors	Focused Medical Assessment and Documentation	Comprehensive Medical Assessment and Documentation
			<ul style="list-style-type: none"><li>• Resources and reimbursement for screening, brief intervention, referral, and treatment efforts for substance use and suicide</li><li>• Funding for prevention strategies, treatment programs, and community services</li></ul>

