

Experiential Trauma-Informed Care for the Sex and Labor Trafficked Patient



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Institute for Healthcare and Human Trafficking

Disclosures & Acknowledgements

- This presentation was made possible in part by funding provided by an award from the Office On Violence Against Women, U.S. Department of Justice Grant No. 2016-TA-AX-K008
- The opinions, findings, conclusions, and recommendations expressed in this presentation are those of the authors and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women
- The planners, presenters, and content reviewers of this course disclose no conflicts of interest.
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The Institute on Healthcare and Human Trafficking

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Learning Objectives

- Describe the intersectionality of sex and labor trafficking among adults and children
- Use human trafficking screens to assess risk of exploitation.
- Apply concepts of trauma-informed, rights-based care to challenging situations in the healthcare setting.
- Describe ways to identify and manage biases relevant to human trafficking.

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Research. Educate. Lead.

Trafficking Examples

- Samuel is an 8-year-old male whose mother lost her job during COVID. The family is now facing eviction. The mother tells Sam to "go with the landlord and do whatever he wants..."
- Pat is a 16 y/o transgender female who ran away from home at age 15 to escape mother's drug addiction and violent boyfriend. She lives on the streets and exchanges sex to pay for food, hormones, and clothing...
- Mee is a 16 y/o Hmong female who answered an ad for a housekeeping position with a wealthy family in the US. The employment agency managed all aspects of her travel and hiring. She is now living in the basement of a family home, working 14-hour days and being sexually abused by the father in the home...

What is Human Trafficking?

Action

Recruits
Harbors
Entices
Transports
Provides
Obtains or maintains a person
OR
[patronizes /solicits sex]

Means

Force
OR
Fraud
OR
Coercion

Purpose

Involuntary servitude
OR
Debt Bondage
OR
Slavery
OR
Sexual exploitation

(Justice for Victims Trafficking Act, 2015; TVPA, 2000)



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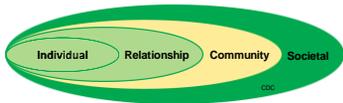
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Individual
Hx maltreatment
Homeless/runaway
LGBTQ+ status
Substance misuse
Hx with JJ, CPS
Unaccompanied minor

Relationship
Family violence
Familial poverty
Family dysfunction
Forced migration

Community
Tolerance of sexual exploitation
High crime rate
Lack of community resources/support
Transient male populations

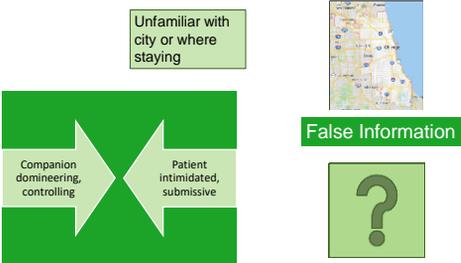
Societal
Gender-based violence & discrimination
Cultural attitudes/beliefs
Natural disasters
Political/social upheaval



How and where might Samuel, Pat, and Mee present for care?



Possible Indicators of Trafficking: First Impressions



Possible Indicators if Trafficking

- Consider adverse health effects of trafficking....
 - Work-related injuries
 - Malnutrition
 - Multiple STIs
 - Pregnancies, abortions, or miscarriages
 - Illicit drug use
 - Current or past history of:
 - Sexual or physical assault
- Visible signs of physical abuse





Health Consequences of Labor Trafficking

- Untreated chronic medical conditions
- Work-related injuries
 - Acute trauma
 - Chronic pain, strain
 - Exposure to chemicals, dust, toxins
- Significant weight loss
- Infection
- Consequences of sexual assault
- Physical violence



- PTSD
- Depression
- Anxiety
- Aggression, hostility
- Behavioral challenges
- High-risk behaviors



Thoughts?

What may be the functions of these behaviors?

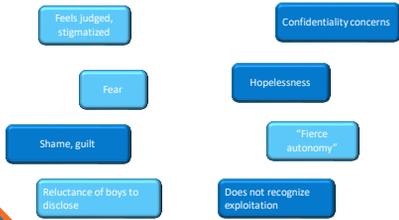
- Hostility and aggression
- Sexualized behavior
- Violent drawings or stories
- Using drugs
- Social withdrawal
- Extreme compliance

Functions of Behaviors

- Maximize chance of survival
- Reduce loneliness or anxiety
- Express anger
- Engage another person
- Feel in control
- Communicate a need or feeling
- Shape the behavior of others



Survivor Barriers



(Albright, 2020; Baldwin 2011; Barnett, 2019; Chisolm-Straker, 2016; Lederer, 2014; Ravi, 2017a; Ravi, 2017b)



Provider Barriers



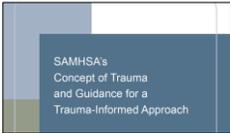
(Albright, 2020; Baldwin 2011; Barnett, 2019; Chisolm-Straker, 2016; Lederer, 2014; Ravi, 2017a; Ravi, 2017b)



Working With a Potentially Trafficked Person

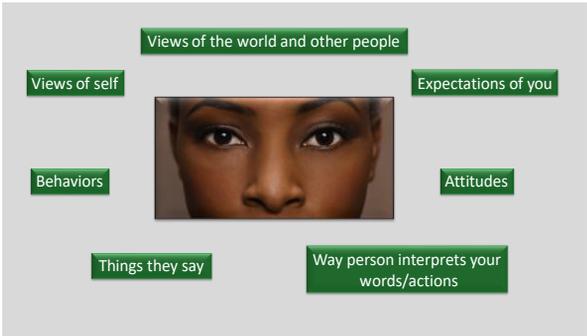


Key Components of Trauma Informed Care



Recognize Impact of Trauma
Respond Appropriately

Safety
Transparency
Respect
Empowerment



A Trauma-Informed Approach



(IOM, 2009; SAMHSA, 2014; UNHR, 1990; Zimmerman, 2003)





It's all about safety...



How do you help a person feel safe?



Avoid Re-Traumatization

- Out of control
- Uncertain of what will happen
- Threatened
- Coerced

Think about potential trauma triggers:
Situations in which child feels:

- Vulnerable/Frightened
- Shamed

How can you minimize triggers?

Thoughts?

What aspects of your work with trafficked and at-risk youth may be triggering for your clients?
How can you minimize re-traumatization of clients?

Considering Potential Trauma Triggers:

- Situations in which patient feels:
- Uncertainty
 - Lack of control
 - Threatened
 - Shamed
 - Coerced
 - Vulnerable

How can you minimize triggers?

Trauma-Informed Approach



- Transparency
 - Explanations
 - Consent
 - Review limits of confidentiality early on
- Respect
 - Nonjudgmental, open
- Empowerment and engagement

(SAMHSA, 2014; Zimmerman 2009)



How do you separate patient from companion?



Building Rapport

You get to your office. What do you do to make Pat feel comfortable, safe and empowered?



How can you empower Pat?

Offer	Offer choices, control
Encourage	Encourage her to ask questions.
Recognize	Recognize her role as an expert on herself
Focus on	Focus on her strengths as a survivor

(Greenbaum, 2015; SAMHSA, 2014; UN CRC, 1990; WHO, 2003)



Commercial Sexual Exploitation of Children (CSEC) Assessment

» Pat finally begins to talk to you, and you establish rapport. You are ready to transition to the formal evaluation and assessment.

- » Before you start, what do you say to,
1. Demonstrate respect,
 2. Provide explanations,
 3. Obtain consent and
 4. Maintain transparency

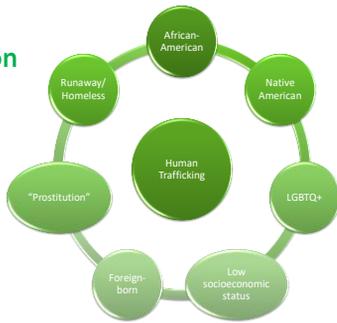


What if Pat states:

“I don’t wanna do this. I don’t wanna be here.”



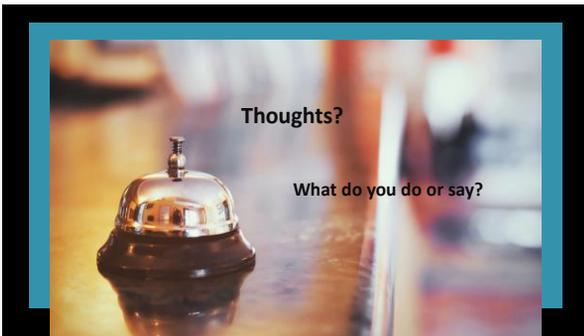
Bias & Discrimination



Victim Blaming

Sophia is a 14-year-old female. She's run away from home several times and is affiliated with a gang. She was identified by police as a victim of sexual exploitation when they conducted a 'sting' operation on a nearby hotel. You have been called to assess and provide services. You overhear one staff member say to another, "If she hadn't made such bad decisions, she wouldn't be in this situation."







You approach them in private and say,

"I overheard you talking about our patient, Sophia. It made me very uncomfortable. I think this child needs our help and support, not our blame and judgment. We all have our own biases, our own feelings. But we can't let them interfere with providing compassionate care. You're a great case manager who treats your patients with dignity and respect. Can you do that for this one, as well?"

What implicit bias do you have?

- Pat is a 16 year-old transgender youth who ran away from home to escape mother's drug addiction and violent boyfriend. She lives on the streets and exchanges sex to pay for food, hormones, and clothing...
- Samuel is an 8-year-old male whose mother lost her job during COVID. The family is now facing eviction. The mother tells Samuel to 'go with the landlord and do whatever he wants...'
- Sophia is a 14 year-old female who has a boyfriend in a gang. She is made to sell sex at a local motel as part of her affiliation with the gang. She also must sell drugs to her 'clients'.



So, how would you control your biases?



Let's talk more about identification of at-risk patients...



Keep Your Goals in Mind....



Adolescents: 6-Item Screen

- 1. Drug/alcohol use in past 12 months
- 2. History running away
- 3. History with police
- 4. History broken bones, knocked unconscious, cuts needing stitches
- 5. History STI
- 6. Number of sex partners (>5 is 'Yes')

≥ 2 Yes answers = positive screen



(Greenbaum, 2015; Greenbaum, 2018; Kalkin, 2018)

Follow-up After Screen

- 1) Follow up on positive answers from screen (open-ended questions)
- 2) Have you ever been in a position where you've had to consider exchanging sex for something you wanted or needed (money, food, shelter or other items)?
- 3) Has anyone ever asked you to have sex with another person?



Universal Education and Resources

- Talk about
 - Healthy relationships
 - Impact of violence on health
 - Harm reduction techniques
 - Human trafficking
- Community resources, national resources



(Futures Without Violence, 2017)



But keep in mind.....

It isn't so much 'what' you ask, it's 'how' you ask it.



Reporting and Referrals

- Be transparent with person, engage them in the treatment plan
- Use information you gathered to identify possible resources/referral
 - Typically patient has *Many* needs!
 - Know your community resources
- Respect right to confidentiality; obtain consent as necessary

(Greenbaum, 2015; IOM, 2009)



Reporting for Adults: Mandatory??

- Know your state laws
- May have mandated reporting for...
 - suspected exploitation of elder or disabled persons
 - suspected inflicted physical injury
 - Patient may decline to speak with police
- Need permission to make nonmandated referrals



A Critical Resource...

- National Human Trafficking Resource Center:
 - Hotline (24/7)
 - Interpreters for >100 languages
 - All types of trafficking, all ages



National Human Trafficking Resource Center (NHTRC)
1-888-3737-888
email: NHTRC@hainfo.net
 TOLL FREE | 24 Hours/Day, 7 Days/Week
 Confidential | Program available

Text Hotline: 233733 (BE FREE)
 Chat hotline: www.humantraffickinghotline.org/chat
 Submit a tip online: <https://humantraffickinghotline.org/report-trafficking>

Make Health-Related Referrals For Ongoing Care



Prevention

- Screen
- Educate

Resources

- Anticipatory guidance (harm reduction)
- LGBTQ
- Homeless shelters
- National Human Trafficking Center hotline
- Georgia Cares hotline
- Crisis hotlines
- Refugee organizations
- Teen clinics, free clinics
- Mental health services
- Drug rehabs

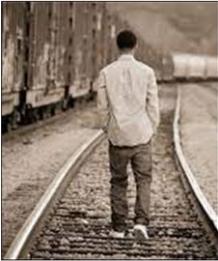
A Trauma-Informed Approach to Follow-Up Care



- Listen before you speak
- Use the expertise of your patient
- Informed consent is critical (except for mandatory reporting)



Conclusions



- Trafficked persons have adapted to very difficult conditions
- Their behavior may seem maladaptive in your environment
- Use a trauma-informed lens to assess the situation and respond







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What's New in Human Trafficking

New ICD10-CM Codes for Human Trafficking and Exploitation

On October 1, 2018, the Centers for Disease Control implemented new ICD-10-CM codes to specifically categorize sex and labor trafficking/exploitation. Tracking cases of exploitation is critical to monitoring incidence and recurrence, determining short- and long-term adverse effects on children and adults, assessing treatment modalities, and estimating cost of care. Such data are central to public health efforts to prevent and eradicate human trafficking and exploitation. ICD codes specifically focused on labor and sexual exploitation will support development of treatment and other services, positively impact research and data collection efforts, and drive the creation of new prevention strategies. Additional information and a list of relevant ICD-10-CM codes may be found here or under our "Medical Education and Healthcare Service Delivery" resource tab.

View the 2018 TIP Report

Increased Risk of Human Trafficking During and After COVID-19

The current global pandemic of SARS-CoV-2 has prompted extensive public health measures to mitigate the spread of disease. These measures facilitate social distancing and have major economic and social consequences that are likely to exacerbate the risks of sex and labor trafficking of children and adults. At the same time, social distancing practices create major challenges to those working to support and protect exploited persons and those at risk.

Learn more about how COVID-19 may impact the risk of human trafficking

Resources	
Boys as Victims of Sex Trafficking	▼
Demand for Human Trafficking	▼
General Adult Human Trafficking	▼
General Child Sex Trafficking	▼
Global Human Trafficking	▼
Labor Trafficking	▼
LGBTQ Community	▼
Medical Education and Healthcare Service Delivery	▼
Online Child Sexual Exploitation	▼

Healthcare Protocols and Guidelines ▲

- Adult Human Trafficking Screening Tool and Guide, 2018
- Dignity Health HT response program shared learnings manual, 2017
- Screening for victims of sex trafficking in the ED Pilot program, 2017
- Validation of the CSEC identification tool: Technical report, 2017
- HEAL Trafficking Toolkit for developing a response to victims of HT in healthcare settings, 2016
- Childrens Healthcare of Atlanta Clinical Practice Guidelines for Assessment and Treatment of Potential Victims of Child Sex Trafficking and Commercial Sexual Exploitation, 2015
- Short screen for children at risk for sex trafficking
- Screening for HT: Guidelines for administering the trafficking victim identification tool (TVIT), 2014

Printable resources ▼

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Access to telephone or personalized e-mail technical assistance from the International Association of Forensic Nurses.

Email: contact@safeta.org

Professional Resource Line: 1-877-819-7278





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