An introduction to human trafficking for healthcare professionals

RACHEL ROBITZ, MD
DIRECT SERVICE CO-CHAIR, HEAL TRAFFICKING
ASSISTANT CLINICAL PROFESSOR, UC DAVIS
HEAL Trafficking

- Founded 2013
- >2000 multidisciplinary professionals
- Public health lens
- public health, international health, academia, government.
- clinical practice, including physicians, nurses, advance practice clinicians, public health professionals, psychologists, behavioral health professionals, social workers, as well as researchers, attorneys, administrators
Public Health & Trafficking

- Edu & Training
- Protocols
- Advocacy
- Direct Services
- Media & Technology
- Research
Objectives

- Define human trafficking
- Describe the demographics of identified trafficking victims
- Discuss how a trafficking victim may present in healthcare settings
- Discuss common physical and mental health problems experienced by trafficked individuals
Language

- Survivor v. victim
- Sex work ≠ Human trafficking
- Sex and labor trafficking
- Discussion of gender
Definition of human trafficking

- Trafficking Victims Protection Act of 2000 (TVPA)
  - Labor trafficking
    - Minors and adults induced to perform labor acts through methods of force, fraud, or coercion
  - Sex trafficking
    - A person inducing another to perform a commercial sex act through force, fraud, or coercion or if the person induced to perform such an act is a minor
Recruitment

- Coercion
  - “boyfriending”
  - “befriending”
  - Threats/blackmail

- Fraud
  - Promise of a new job

- Force
  - Rape, kidnap, other violence
Scope of the Problem

- Second largest criminal industry in the United States
- Estimated 40 mil victims worldwide
- Rarely identified


Demographics

- Data limited because of underground nature
- In the United States, we tend to over-identify sex trafficking cases
  - Need to focus identification efforts on labor trafficking
Who are identified trafficking victims?

- Labor trafficking
  - Age: More than half (62%) are older than 25yo
  - Race/Ethnicity: 63% Hispanic and 17% Asian
  - Citizenship: 67% undocumented and 28% “qualified alien” status

- Sex trafficking
  - Age: Only 13% are older than 25yo
  - Race/ethnicity: 40% black and 26% white
  - Citizenship: 83% are US citizens

Vulnerabilities

- Homelessness
- History of abuse or neglect
- Identify as LGBTQ
- Kicked out of home due to sexual orientation
- Lack of social support
- Special education
- Foster youth
- Mental illness
- More research needed about labor trafficking
- Immigration Status
- Disability

Protective

- More research needed
- Having a supportive adult
Trafficking victims do seek medical care

<table>
<thead>
<tr>
<th>Treatment Source</th>
<th>% Reporting (N=98)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any contact with healthcare</td>
<td>87.8%</td>
</tr>
<tr>
<td>Any type of clinic</td>
<td>57.1%</td>
</tr>
<tr>
<td>Hospital/ER</td>
<td>63.3%</td>
</tr>
<tr>
<td>Planned Parenthood</td>
<td>29.6%</td>
</tr>
<tr>
<td>Regular doctor</td>
<td>22.5%</td>
</tr>
<tr>
<td>Urgent care clinic</td>
<td>21.4%</td>
</tr>
<tr>
<td>Women’s health clinic</td>
<td>19.4%</td>
</tr>
<tr>
<td>Neighborhood clinic</td>
<td>19.4%</td>
</tr>
<tr>
<td>On-site doctor</td>
<td>5.1%</td>
</tr>
<tr>
<td>Other</td>
<td>13.3%</td>
</tr>
</tbody>
</table>

Identifying trafficking survivors: Case studies
25yo female with h/o heroin dependence presents with a URI

Moved to SD to “get clean”

Has had multiple rapes in the past 1-2 months while staying on the street
“If I leave the hospital I’ll kill myself”

- 22yo with h/o depression and anxiety presents to ED with SI after her pimp beat her up
- Reports ?paranoia regarding being followed
- Endorses hopelessness
- +SI with vague plan
16yo with h/o with h/o PTSD from a rape a year ago presents to discuss birth control and while there asks if you could also look at a rash
Red flags

- Delayed presentation to care
- Scripted history
- Inability to produce identification documents
- Accompanying individual who refuses to leave
- Tattoos or other marks
Red flags

- Recurrent STIs or pregnancies
- Frequent relocation
- Kids with access to material possessions that are more than one would expect
- Kids who are overly familiar with sexual terms
Screening

- Currently no validated screening tools to cover both labor and sex trafficking
- Goal ≠ Identifying
- Moving away from checklist screening tools -> creating an open door and providing resources
- Having a protocol for screening and referral important
Screening Safety

- Ask when patient is alone
- Patient knows safety better than you do
- Be careful about handing patients resource sheets
- If you are screening, have a plan for what to do with positive screens
How to ask

• You are not the detective

• Goal is not disclosure. Goal is creating a safe environment for disclosure

• Normalizing language is helpful

Photo by Mat Reding on Unsplash
How to respond to a disclosure

- Watch your language and facial expression
- Reporting obligations
- Know your resources
  - National Human Trafficking Hotline: 1-888-373-7888
Potential Screening Questions

- Were you (or anyone you work with) ever beaten, hit, yelled at, raped, threatened or made to feel physical pain for working slowly or trying to leave?

- Has anyone threatened your family?

- Does someone else control whether you can leave your house or not?

- Are you kept from contacting your friends and/or family whenever you would like?
Potential screening questions for labor trafficking

- How many hours per day do you work? What kind of time off do you have?
- Can you come and go as you please during time off?
- Can you quit your job or situation if you want to?
- Has anyone threatened or harmed your family?
- Where do you live, sleep, and eat?
Potential screening questions for sex trafficking

- Has anyone ever forced you to have sex when you didn’t want to?
- Have you ever exchanged sex for food, shelter, drugs, or money? Have you been required or forced to perform sex acts for work or to pay off a debt?
- Have you ever run away from home or from a program? What did you do in order to survive during that time?
Health Needs
Incidence of physical health problems in women who have been trafficked for sex

<table>
<thead>
<tr>
<th>Category</th>
<th>% of respondents reporting at least one symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any physical health problem</td>
<td>99.1%</td>
</tr>
<tr>
<td>Neurological (headaches, dizziness, etc)</td>
<td>91.7%</td>
</tr>
<tr>
<td>Diet-related (weight loss, loss of appetite, eating disorders)</td>
<td>71.4%</td>
</tr>
<tr>
<td>Physical injuries</td>
<td>69.2%</td>
</tr>
<tr>
<td>Cardiovascular/respiratory</td>
<td>68.5%</td>
</tr>
<tr>
<td>Gastrointestinal</td>
<td>62.0%</td>
</tr>
<tr>
<td>Dental</td>
<td>54.3%</td>
</tr>
</tbody>
</table>

Traumatic injuries

- In a survey of sex trafficked women
  - 92% experienced physical violence
  - 70% reported traumatic injuries
    - Most commonly to head or face
  - 43% had lost teeth

- Injuries related to poor working conditions/lack of personal protective equipment

Reproductive Health

- 67% had a sexually transmitted infection
- 70% had pregnancies while being trafficked
- 55% had an abortion
  - Only 34 respondents answered questions about forced abortions, but 18 of these respondents had a forced abortion
    - “in most [of my six abortions] I was under serious pressure from my pimps to abort the babies.”

Other acute symptoms

- General medical problems
  - Headaches
  - Abdominal discomfort
  - Dizziness
  - Skin conditions
  - Malnutrition

- Conditions related to poor working conditions
Chronic medical conditions

- Undiagnosed or uncontrolled medical problems
  - High blood pressure
  - Diabetes
  - Cancers
  - Overuse injuries
  - Respiratory disease

Photo by Cristian Newman on Unsplash
Mental health impacts

- High prevalence of PTSD and Depression
  - Similar in both sex and labor trafficking survivors

- 84% of women trafficked for sex report substance use in one study
  - More than ¼ report overdoses


Self Harm

- Roughly 40% of women trafficked for sex in one study attempted suicide
- >30% of youth trafficked for sex have engaged in self-harm behavior


Mental health impacts

- Mental health symptoms experienced by sex trafficked youth are different than those who have experienced sexual abuse
  - Higher PTSD
  - More avoidance and risky behavior such as substance use and running away
  - More research is needed on mental health impacts of labor trafficking

Complex trauma

“experience of multiple, chronic and prolonged, developmentally adverse traumatic events, most often of an interpersonal nature (eg, sexual or physical abuse, war, community violence) and early-life onset.”

-Dr. Bessel van der Kolk
Types of complex trauma

- “Concentration camps
- Prisoner of war camps
- **Prostitution brothels**
- Long-term domestic violence
- Long-term child physical abuse
- **Long-term child sexual abuse**
- **Organized child exploitation rings**

Herman, J. (1997). Trauma and recovery: The aftermath of violence from domestic abuse to political terror. New York: Basic Books.
Complex Post-traumatic stress disorder

- Problems with emotional regulation
  - Mood swings, sadness, suicidal thoughts, anger problems
- Changes in consciousness
  - Reliving traumatic events
  - Feeling detached from your body
- Poor thoughts of self or feeling different from others
- Distorted perception of perpetrator
- Difficulty in relationships with others
- Loss of meaning

Why is it important to understand complex PTSD?

- The impact of trafficking is profound and different from some other kinds of trauma.

- When you understand the impact of the trauma, it is easier to understand the feelings and behaviors of the survivor.
“...’Cause it’s really, like, it’s really traumatizing to just tell somebody what’s going on with them or what happened to them...And it’s like, “Why should I tell you?” Like, if I trust you, then that would be different. But a lot of people just force it, rather than listen. And they judge you before they even know you, just on what they heard.”
Recovery is possible

“A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential”

Assisting in recovery

- Trauma-informed
- Survivor informed
- Culturally responsive
- Individualized to meet diverse and unique needs

- Integrated with other medical services
  - Substance use treatment
  - Primary and specialty care
  - Mental health
“I think so much of their lives are so out of control that trying to also focus in on what do you have control over...maybe next week they’re gonna decide what group topic they want or what they’re gonna decide to disclose or share in group, you know, and then hopefully that expands out into their own life outside of group”
Bibliography


