



Human Trafficking: **An Unseen Epidemic**

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What is
Human
Trafficking?

Myth: Human trafficking involves moving, traveling or transporting a person across state or national borders

•Reality: Human trafficking is often confused with human smuggling, which involves illegal border crossings. In fact, the crime of human trafficking does not require any movement whatsoever. Survivors can be recruited and trafficked in their own home towns, even their own homes.



It's the illegal trade of human beings. It's the recruitment, control, and use of people for their bodies and for their labor. Through force, fraud, and coercion, people everywhere are being bought and sold against their will—right now in the 21st century.

But phrases like 'slavery' and 'human trafficking' can still feel ambiguous. This is the reality: slavery is violence. It's physical, verbal, and sexual abuse. It's forced prostitution. It's barbaric working conditions.

**HUMAN
TRAFFICKING
GENERATES
AN
ESTIMATED
\$150.2
BILLION USD
ANNUALLY**

99%

**OF VICTIMS
ARE *NEVER*
RESCUED**

HERE'S HOW ↓

* You can sell a drug one time—but you can sell a person over and over again. Traffickers can potentially make tens of thousands of dollars off their victims while facing little to no risk of ever being held accountable.

* The victim of the crime is often the only witness, and the evidence is their experience. While material evidence of other crimes remains consistent, an already traumatized individual can easily be intimidated, threatened, and manipulated.





Recommended actions

- Identify non-governmental organizations (NGO's) and faith based community members that will provide victim service or advocacy
- Community awareness: bystander, local government, social services
- Healthcare community and first responder awareness

In order to best help victims, we must go beyond simply knowing the signs of trafficking to knowing the story.

[Polarisproject.org/training](https://polarisproject.org/training)



SEX TRAFFICKING —

Forcing, deceiving, or coercing a person to perform a commercial sex act.



FORCED LABOR -

Forcing a person to work in captivity for little or no pay.



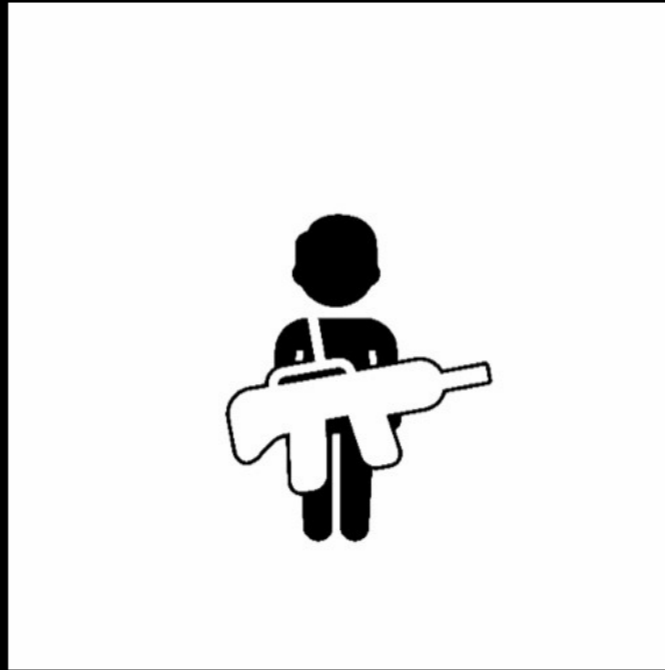
BONDED LABOR —

Forcing a person to work for low wages to pay back an impossible debt.



INVOLUNTARY DOMESTIC SERVITUDE -

Forcing a person to work and live in the same place for little or no pay.



CHILD SOLDIERS —

Forcing a child to participate in an armed force.

Myth: Human trafficking only happens in illegal or underground industries

- Reality: Human trafficking cases have been reported and prosecuted in industries including restaurants, cleaning services, construction, factories and more.

- Prior to their trafficking experience, survivors experienced poverty, abuse, substance abuse, family instability
 - 83% experienced poverty
 - 69% ran away from home
 - 96% experienced physical, sexual, or emotional abuse
 - 93% experienced substance abuse and mental health challenges
 - 91% lived with someone who experienced substance abuse and mental health challenges
 - 96% experienced other familial or household instability

(POLARIS)

Where does trafficking occur?

- SEX trafficking
 - Commercial-Front Brothels
 - Hotel/Motel Based
 - **Online Exploitation**
 - Street-Based
 - **Residential Brothels**
 - Escort Services
 - Truck-Stop Based
 - **Hostess/Strip Club Based**
 - **Massage parlors**
- Labor trafficking
 - Domestic Work
 - **Traveling Sales Crew**
 - Restaurant/Food Service
 - Agriculture
 - Health/Beauty
 - **Begging Rings**
 - Retail/Small business
 - **Landscaping**
 - Manufacturing

Health Indicators of Labor Trafficking

PHYSICAL

- Musculoskeletal/ergonomic injuries
- Malnutrition/dehydration
- Lack of routine healthcare
- Poor dental hygiene
- Untreated infections
- Chemical exposure/injuries
- Vision complaints
- Somatization

BEHAVIORAL

- Anxiety/panic attacks
- Conflicting stories
- Paranoid behavior
- Inability to make decisions
- Inability to speak without interpreter
- Affect issues/irritability

Chanda comes to the ER with severe stomach pain. A man identifies himself as Chanda's brother-in-law and offers to translate for her. He explains that although she has had stomach problems recently, she has not been to a doctor because she doesn't have insurance. Chanda does not make eye contact with ER staff or her brother-in-law. A nurse explains to Chanda's brother-in-law that she needs to examine each patient privately, and the brother-in-law says something harshly to Chanda in Hindi.

Through the interpreter, Chanda informs the nurse she helps clean her brother-in-law's house and provide child care. While she loves him and his children, Chanda is stressed because she works 12 hours every day. He supervises all of her phone calls and scrutinizes every phone bill.

Hospital staff diagnose Chanda with a stomach ulcer, and write her a prescription. Obviously troubled, Chanda says she's been to another ER before and had the same diagnosis. She stopped taking the medicine because she had trouble saving enough money to pay for the medication, and she is unable to go to a pharmacy without her brother-in-law's assistance.

95% of women in prostitution
ARE VICTIMS OF SEXUAL ABUSE

Health Indicators: Adult Sex Trafficking

PHYSICAL

- Multiple/recurrent STI
- Multiple partners
- Vaginal/rectal trauma
- Impacted tampons
- Physical trauma/ligature marks
- Somatization: recurrent headaches/abdominal pain, etc
- Suspicious tattoos/branding

BEHAVIORAL

Depression/flat affect/suicidal ideations: neuropsychology of trauma

Anxiety/panic attack/hyper-vigilance

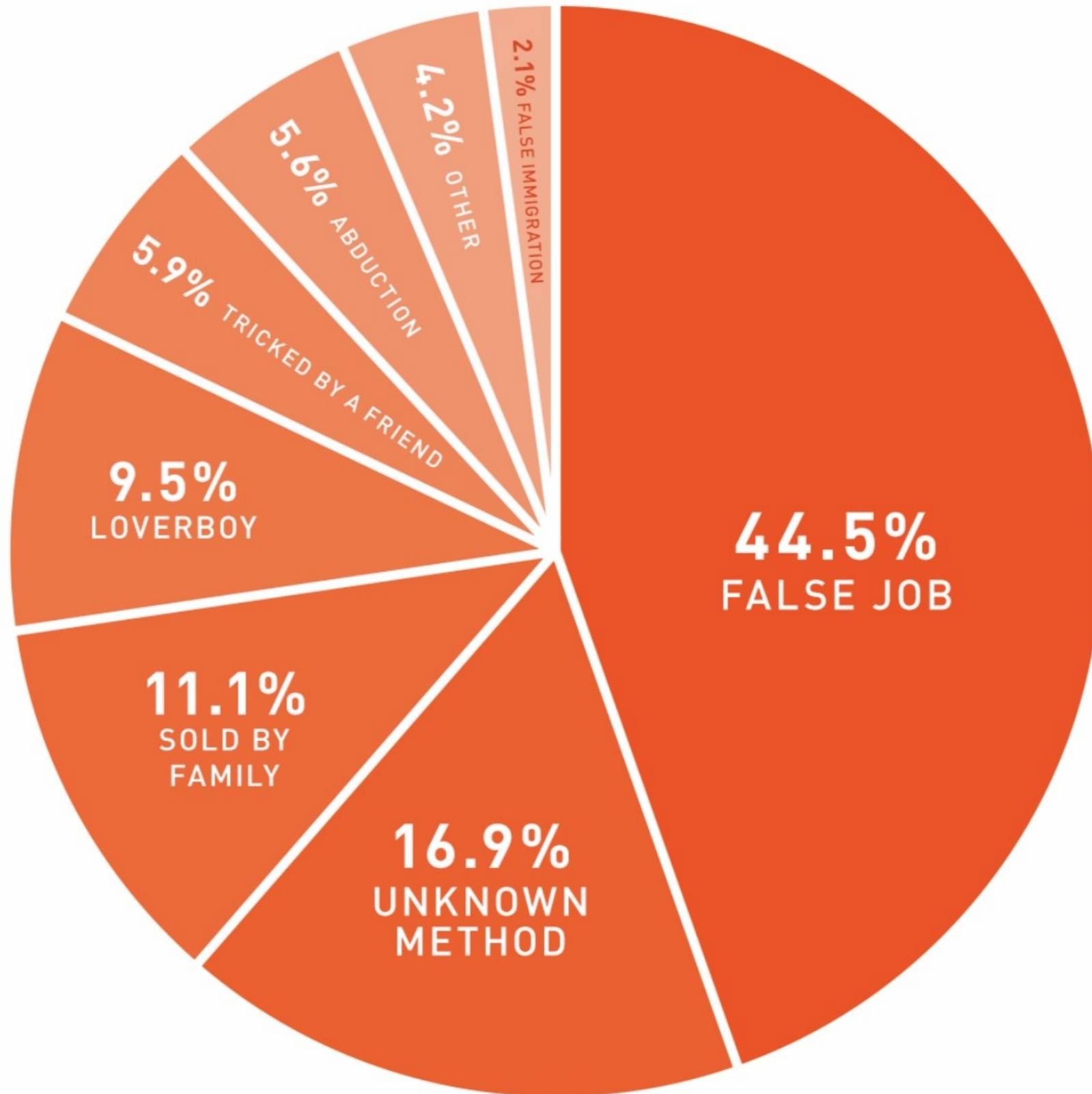
FREQUENT ED/EMS visits/calls

Conflicting stories

S/s drug/EtOH abuse

Myth: People being trafficked are physically unable to leave their situations/locked in/held against their will

•Reality: That is sometimes the case. More often, however, people in trafficking situations stay for reasons that are more complicated. Some lack the basic necessities to physically get out - such as transportation or a safe place to live. Some are afraid for their safety. Some have been so effectively manipulated that they do not identify at that point as being under the control of another person.



Myth: It's always or usually a violent crime

- Reality: By far the most pervasive myth about human trafficking is that it always - or often - involves kidnapping or otherwise physically forcing someone into a situation. In reality, most human traffickers use psychological means such as, tricking, defrauding, manipulating or threatening victims into providing commercial sex or exploitative

Barriers to seeking help

Shame/Guilt

Fear

- of retaliation
- of authorities (arrest)
- of deportation

Poor knowledge and access to resources

- Healthcare
- Advocacy

Lack of transportation

When do victims seek medical attention

In an
emergency

Post
assault

Post
workplace
injury

Gynecological
service

Prenatal
care

Mental
health

Addiction
services

Awareness by Healthcare Providers

- 87.8% of survivors have been evaluated by a HCP
- 68.3% were seen in ED
- Average victim branded 7-10 times
- MOST survivors rescued because of bystanders



“Since I was often taken to different doctors and to the ER to treat trafficking related injuries, I wish that someone would have taken me aside and asked those [screening questions] or even asked me if I was okay. Had they simply separated me from my mother, my father, or the people that they would send with me, and just ask me if I was okay... You know what, I might have been too scared to disclose the first time, but maybe if they would have done this several times in a row, I think I would have found that to be a place of safety and perhaps even divulged what was happening.”

Myth: Only women and girls can be victims and survivors of sex trafficking

•Reality: One study estimates that as many as half of sex trafficking victims and survivors are male. Advocates believe that percentage may be even higher but that male victims are far less likely to be identified. LGBTQ boys and young men are seen as particularly vulnerable to trafficking.

Human trafficking victims look like anyone: male, female, all ages, all demographics

Common indicators found in trafficking victims

- Bruises/wounds in various stages of healing or consistent with the application of physical restraints
- Scars, mutilations, or untreated infections
- Urinary difficulties, pelvic pain, pregnancy, or rectal trauma (from working in sex industry)
- Chronic back pain, hearing, eye problems, cardiovascular, or respiratory complaints
- Malnourishment, serious dental problems, or lack of healthcare
- Disorientation, confusion, depression, submissive behaviour, tense demeanor, or nervous/paranoid behaviour

Tattoos: Branding the Victims



**Myth: traffickers target victims they
don't know**

- Reality: Many survivors have been trafficked by romantic partners, including spouses, and by family members, including parents.

**Roughly 1 in 4
human
trafficking
victims are
children.**

- 27% of recently detected trafficking in the United States are minors.
- 1 in 6 runaway children reported to NCMEC in 2018 were likely sex trafficking victims.
- Approximately 1 of every 8 victims identified last year were male.

“

BY AGE 11, I KNEW MY
PURPOSE, AS A GIRL,
WAS TO BE **SEXUALLY**
VIOLATED BY MEN.

JEWELL, SURVIVOR

Health Indicators: Child Sex Trafficking

PHYSICAL

- Multiple/recurrent STI or UTI
- Pregnancy at young age
- Early sexual initiation
- Multiple partners
- Vaginal/rectal trauma
- Impacted tampons
- Physical trauma/ligature marks
- Somatization: recurrent headaches/abdominal pain, etc
- Suspicious tattoos/branding

BEHAVIORAL

Depression/flat affect/suicidal ideations: neuropsychology of trauma

Angry/aggressive

Running away/truancy

Highly sexualized behavior/dress

FREQUENT ED/EMS visits/calls

Conflicting stories

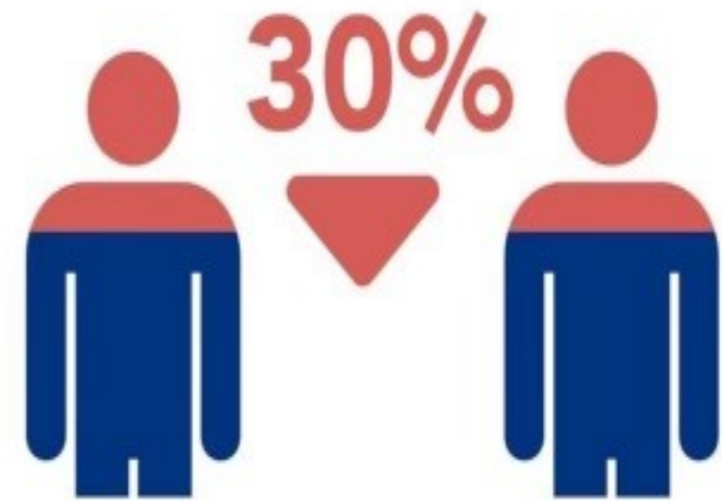
S/s drug/EtOH abuse

COVID-19 & SEX TRAFFICKING



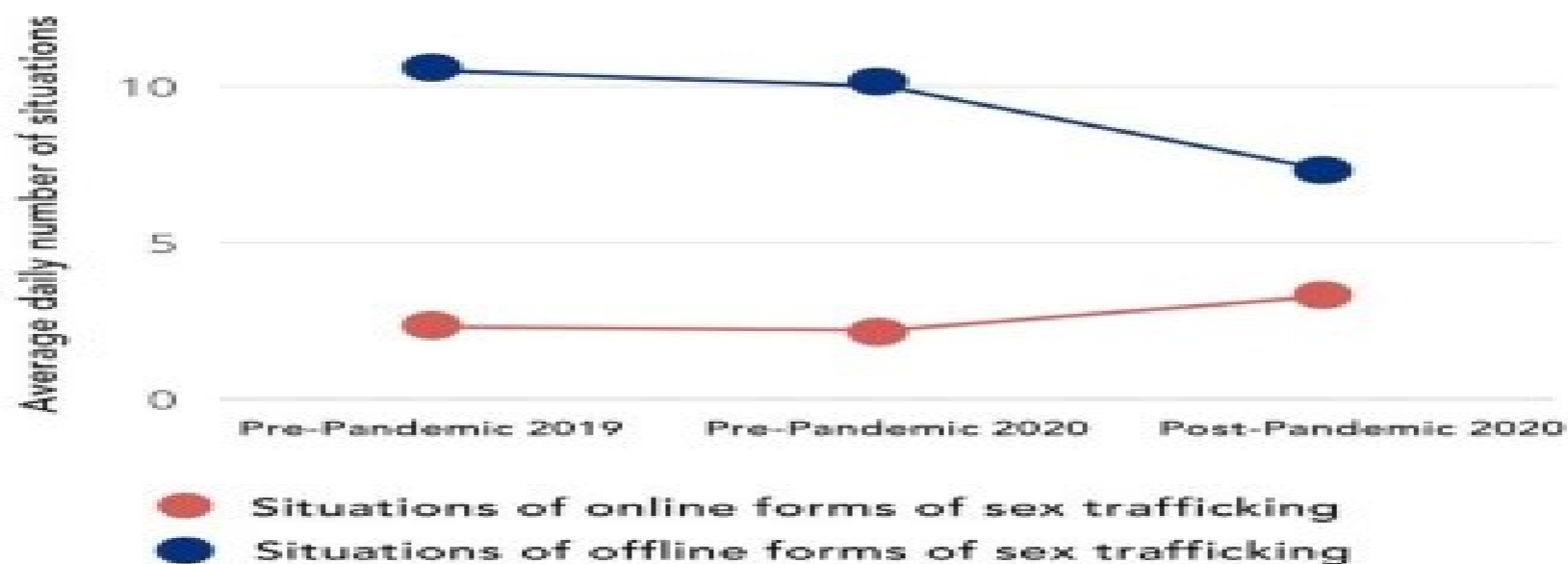
During the height of the pandemic, online forms of sex trafficking increased by more than 45%. ^p

COVID-19 & SEX TRAFFICKING



During the same time period, traditional, offline forms of sex trafficking decreased by 30%. ^p

Number of sex trafficking situations involving online vs offline sexual exploitation



Jasmine comes to a clinic for an HIV screening. Although her intake paperwork says she is 19, the nurse observes that developmentally, she seems far younger. Jasmine tells the nurse she's mature for her age and very experienced. She also has a tattoo of the name 'Li'l G' on one arm.

During the exam she constantly receives texts and calls to her cell phone. She answers the phone and says 'Daddy, don't worry, I'll be done soon.' She tells the nurse her boyfriend, who is 30, is so in love he can't be away from her for even one minute.

The screening results indicate that although Jasmine is HIV negative, she has multiple other STIs. The nurse asks Jasmine whether she uses protection during sex, but Jasmine shrugs and says 'sometimes they don't want to.' When the nurse asks who 'they' are, Jasmine says that sometimes she has sex with other men, but won't say how many. She says she won't be in the life forever, just until she and her boyfriend can save up some cash."

Impact of Trauma/Neuro-psychology of Trauma



- Recurrent thoughts/Re-living the event
- Recurrent nightmares/Trouble sleeping
- Feeling detached/Withdrawn behavior
- Memory Disruption
- Decreased/Disjointed memory
- Inability to recall traumatic events accurately
- Memories are triggered by related sensory information
- Trauma bonding (Stockholm Syndrome)
- Demonstrated loyalty and concern for the trafficker
- Unwillingness to report or testify against the trafficker
- Returning to the trafficker
- Neuro-psychology of trauma

Neuropsychological Effects of Trauma

Study conducted at the Medical University of South Carolina

- Children experiencing any form of abuse are 70% more likely to develop PTSD in adulthood
- Sexual abuse in childhood disrupts brain development, associated with onset of betrayal trauma

<https://web.musc.edu/about/news-center/2021/10/27/vand-an-ptsd>

Researchers from UCLA and University of Cambridge analyzed data from 1950's to present found that children who experienced sexual or physical abuse or neglect are more likely to die prematurely as adults.

Rogers NT, PowerC, Pinto Pereira SM. Child maltreatment, early life socioeconomic disadvantage and all-cause mortality in mid-adulthood: findings from a prospective British birth cohort. *BMJ Open* 2021; 11:e050914.doi: 10.1136/bmjopen-2021-050914

Victim-Centered Approach

01

Meet basic
needs first

02

Reassure the
potential
victim

03

Build trust and
rapport

04

Be conscious
of language

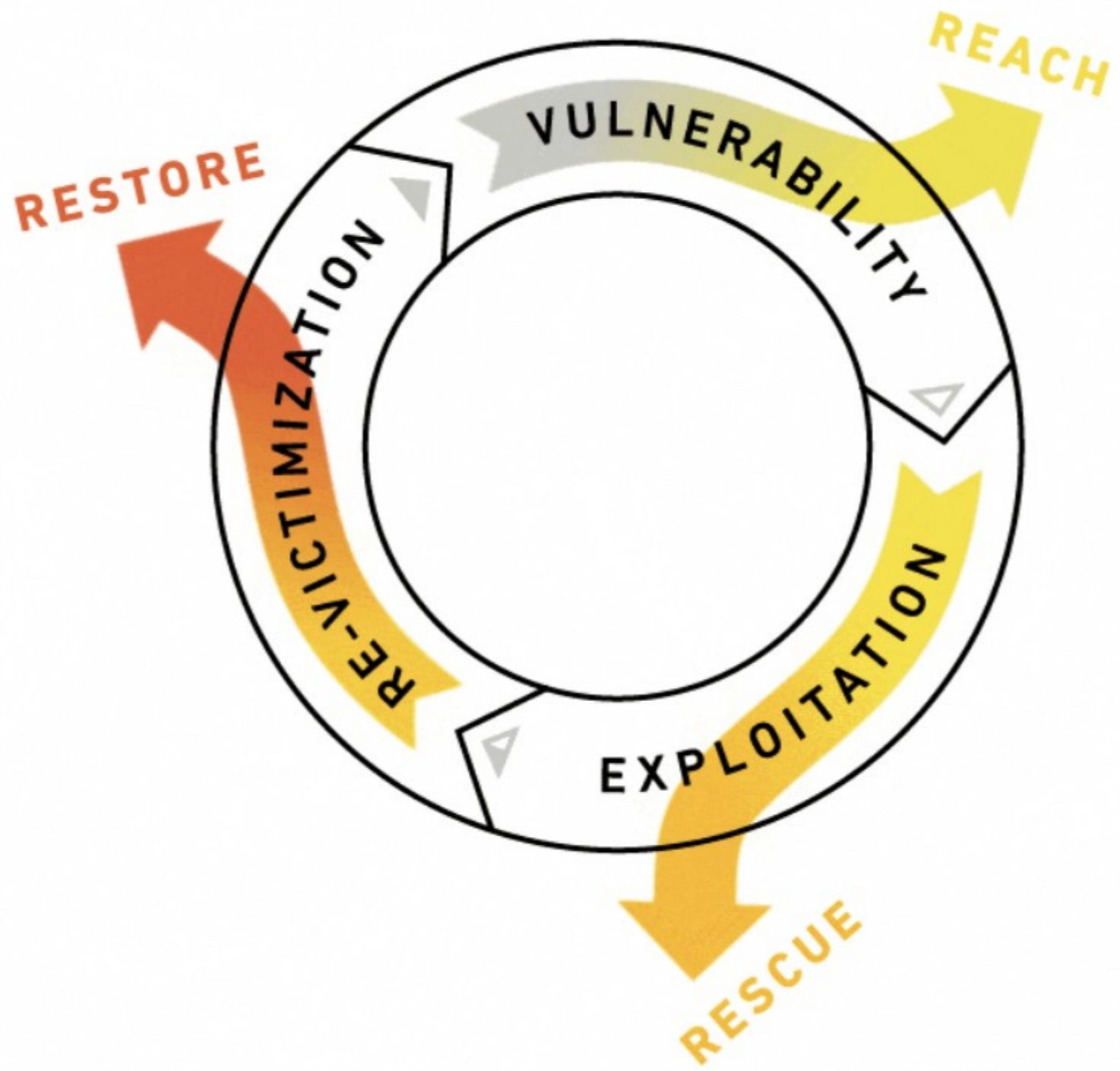
05

Remain
sensitive to
power
dynamics

06

Avoid re-
traumatization

NHTRC medical assessment tool





“Once this generation goes from Apathy to Action, we will see Human Trafficking End in our lifetime”



WALK
FOR
FREEDOM

SAVE THE DATE

OCTOBER 19 • 2024

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Additional Resources

- [SOAR to Health and Wellness](#), U.S. Department of Health and Human Services
- [HEAL Trafficking](#): Health Professional Education, Advocacy, and Linkage
- [PATH](#): Physicians Against Trafficking in Humans
- [Child Family Health International: Conversations in Global Health](#)
- [Child Sex Trafficking Webinar Series for Healthcare Professionals](#), Children's Healthcare of Atlanta
- [Confronting Commercial Sexual Exploitation and Sex Trafficking of Minors in the U.S.](#), Institute of Medicine/National Research Council Report
- [Human Trafficking: Guidebook on Identification, Assessment, and Response in the Healthcare Setting](#), Massachusetts General and Massachusetts Medical Society
- [Caring for Trafficked Persons: A Guide for Health Providers](#), The International Organization for Migration and UN Global Initiative to Fight Human Trafficking
- [The Role of the Nurse in Combatting Human Trafficking](#), Donna Sabella in the *American Journal of Nursing*
- [Online education modules for the healthcare professional on human trafficking](#), Christian Medical & Dental Associations