



WASHINGTON  
**engage**

# Guidelines to Recognize Human Trafficking

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# Human Trafficking – What is it?

Human trafficking is modern day slavery

Victims of trafficking are exploited for commercial sex OR labor purposes

Traffickers use *fraud*, *force*, *fear* (coercion)

Cathro, A. (2014). *Domestic minor sex trafficking: Vulnerable children at risk* [PowerPoint presentation]. International Association of Forensic Nurses.

# HT Legal Definition

By U.S. law, human trafficking is defined in three categories:

1. Adults and children forced to perform labor and services as a result of force, fraud, or coercion;
2. Adults involved in commercial sex as a result of force, fraud or coercion; and
3. Any children (minors) exploited for sex (results in an automatic trafficking charge in WA state)

Polaris Project. (2014). Human trafficking. Retrieved from: <http://www.polarisproject.org/human-trafficking/overview>

# Fraud

- False and deceptive offers of employment, love, marriage, a better life.
- Victims are often “groomed” first, i.e., approached with false kindness (told they are pretty), caring (clothing and food bought for them or their family), and attention (given rides, tickets to events), in order to create an emotional bond with the victim.



# Instead they learn that

- Their ID, passports, visas, etc., have been confiscated.
- They are in debt bondage (told they have to do as ordered to repay the trafficker for their room and board).
- They are isolated and moved often to locations with which they are totally unfamiliar.



# Force

Controlled, confined,  
constrained:

- Told what to do and say, where to go, with whom to communicate (sometimes branded with ownership tattoos)
- Rape, beatings, punished with hunger
- Forced to use and become addicted to drugs





# Fear (Coercion)

- Psychological control used to keep victims in lives of servitude
- Threats to harm family members are common
- Victim told failure to obey will result in physical harm, deportation, or jail by legal authorities



# Criminal Business

In 2014, the International Labor Organization (ILO) cited human trafficking as the fastest growing criminal business, generating:

- \$150 billion globally
- \$99 billion from commercial sexual exploitation
- Emerging globally as the 2<sup>nd</sup> largest criminal industry

Exploded with the use of the Internet and cell phones, allowing business to be done anywhere and increasing communication.

Retrieved from: [http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\\_243201/lang--en/index.htm](http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_243201/lang--en/index.htm)



Today slavery generates more  
global revenue than...

.... amazon.com®

Google and ebay

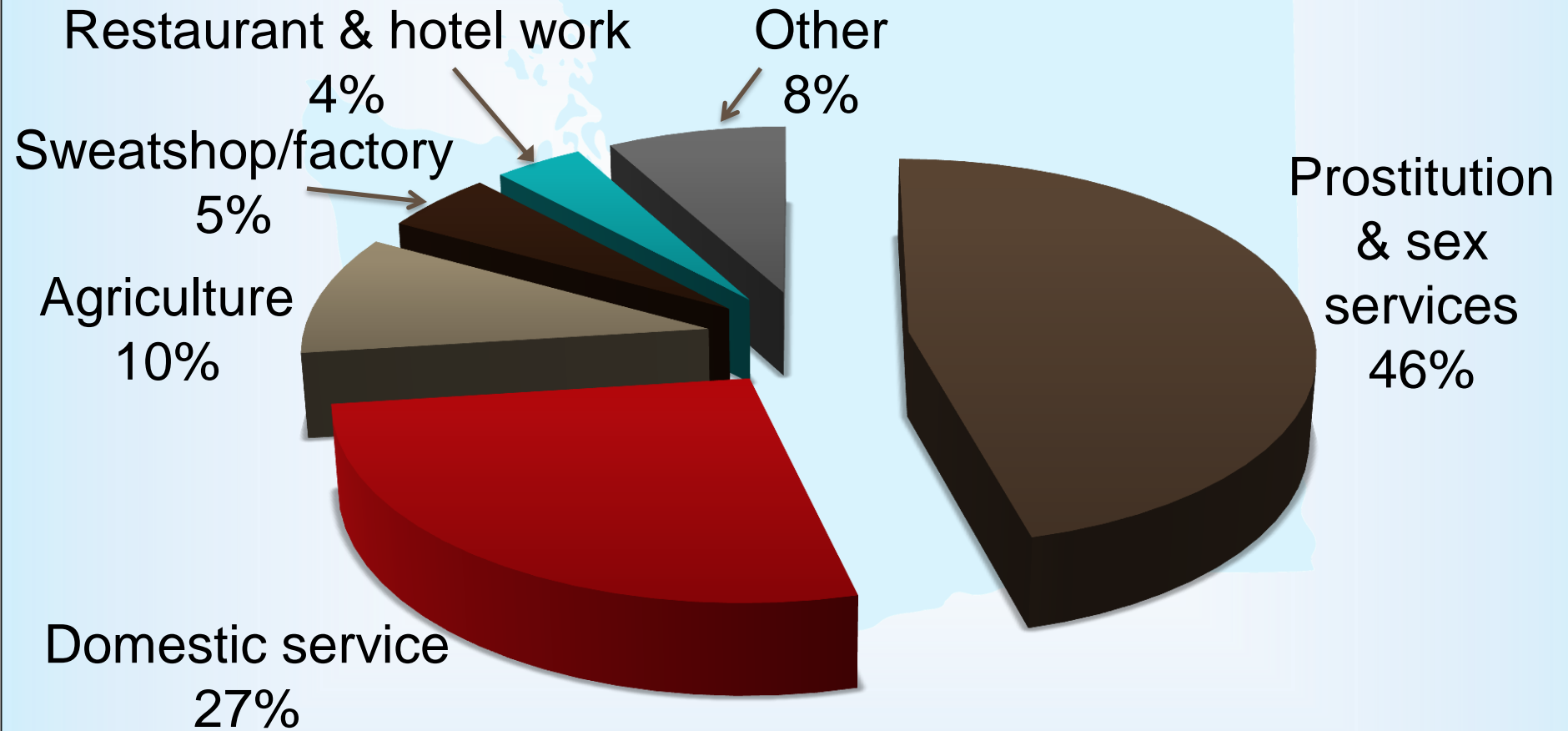
**COMBINED!**

# How bad is the problem?

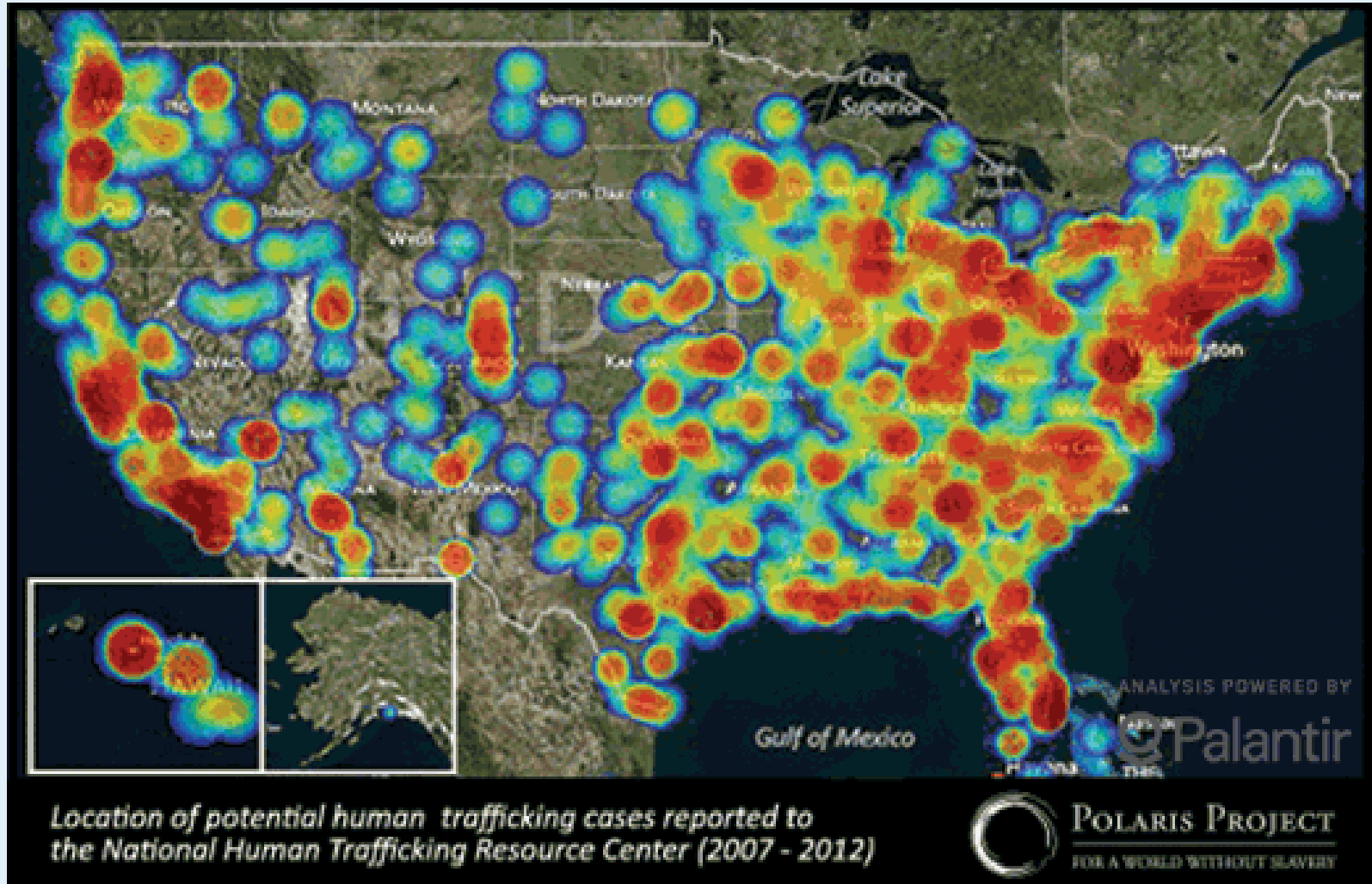
- A 2014 ILO study estimates globally the number of people in forced labor, trafficking or modern day slavery is 21 million.<sup>1</sup>
- In the U.S., more than 21,000 cases of human trafficking have been reported to the National Human Trafficking Resource Center in the past 8 years.<sup>2</sup>
- The ILO estimates that there are 4.5 million people trapped in forced sexual exploitation globally.<sup>3</sup>

1. International Labor Organization. Retrieved from: [http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\\_243201/lang--en/index.htm](http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_243201/lang--en/index.htm)
2. Polaris Project. Retrieved from: <https://polarisproject.org/facts>
3. Polaris Project. Retrieved from: <https://polarisproject.org/sex-trafficking>

# Where trafficked people work in the U.S.



# NHTRC Hotline Calls



# Who are the Victims?

**“Some form of vulnerability tends to be the common thread amongst all different trafficking victims.” *Polaris Project***

Both citizens and non-citizens fall prey to traffickers:

**And they are in Plain Sight**

Migrant and guest workers in restaurants, sweatshop factories, entertainment, nannies or maids, janitorial and construction jobs, farm work, massage parlors, strip clubs, escort services

Minors, especially homeless runaways, are at high risk

**The I-5 corridor is a hotspot of trafficking**

# Who are the Perpetrators?

- Anyone who operates in the sex trade – pornography, prostitution, illicit massage parlors, escort services
- And the people who buy those services
- Men and women who run other businesses such as cleaning services, farming, restaurants, factories, salons, or entertainment may lure, use and exploit vulnerable persons



# Vulnerable Youth

- Persons living in poverty are highly vulnerable, especially youth. In 2014, over 18% of children in WA state were living below the poverty level. <sup>1</sup>
- In 2015, an estimated 20% of endangered runaways reported to the National Center for Missing and Exploited Children were likely child sex trafficking victims. <sup>2</sup>
- LGBTQ youth are at increased risk: 40% of homeless youth identify as LGBTQ, and 26% of LGBTQ adolescents are rejected by their families. <sup>3</sup>



1. National Center for Children in Poverty, Retrieved from: [http://www.nccp.org/profiles/WA\\_profile\\_7.html](http://www.nccp.org/profiles/WA_profile_7.html)

2. Polaris Project. Retrieved from: <http://polarisproject.org/facts>

3. US DHHS. Retrieved from: <http://www.acf.hhs.gov/blog/2013/06/lgbtq-youth-at-high-risk-of-becoming-human-trafficking-victims>

# And non-stereotypical as well:

- Teens from high-income families have also fallen prey to online charmers and been seduced, photographed, and blackmailed. Or young single mothers desperate for help are befriended and promised jobs with better pay.
- Once the trafficker has coerced the victim, they are threatened with harm to their families if they refuse to comply with the trafficker's demands.

# Migrant Workers

- 44% of farmworkers in Washington State are undocumented, compared to 26% nationally. <sup>1</sup>
- Out of fear of deportation or displacement, farmworkers remain unable to protest inadequate conditions or report an employer's violation of labor, health or safety laws to state authorities.
- Farmworkers under the H-2A visa Guest Worker Program are still vulnerable: High fees paid to private recruiters in their home countries can result in debt or collateral bondage to work contracts, despite abysmal work conditions. <sup>2</sup>
- Doctors diagnose between 10,000 and 20,000 farmworkers with pesticide poisoning each year (CDC data). <sup>3</sup>

1. Pew Research Study: Retrieved from: <http://www.pewhispanic.org/2015/03/26/appendix-a-state-maps-and-tables/>

2. Association of Public and Land Grant Universities. Retrieved from: <http://articles.extension.org/pages/9960/migrant-farm-workers:-our-nations-invisible-population>

3. Environmental Protection Agency press release. Retrieved from: <https://yosemite.epa.gov>

# Victims are in plain sight



# What is being done about this?

Since 2000 the problem of human trafficking has received increasing attention from:

- Federal government
- State legislators
- Local law enforcement
- Services providers

# Federal Laws

## Trafficking Victims Protection Act

- TVPA first passed in 2000.
- Focus on prevention through education of the public, protection for victims, and prosecution of traffickers.
- Protects foreign victims from deportation; funds victim services; makes human trafficking a federal crime; and encourages law enforcement agencies to investigate cases of trafficking.

Retrieved from: <http://www.state.gov/j/tip/laws>



# Legal Assistance

## T Visa

- Immigration benefit for foreign victims of sex or labor trafficking
- Victim is willing to assist law enforcement
- Victim must be admissible to the U.S. and in danger of harm if removed.

## U Visa

- Immigration benefit for foreign victims of certain crimes
- Has suffered physical or mental abuse as a victim of criminal activity
- Victims must provide assistance to law enforcement

**Both T and U Visas allow eligible victims to temporarily remain and work in the U.S. (approx. 4 years)**

Retrieved from: <https://www.uscis.gov/humanitarian/victims-human-trafficking-other-crimes>

# Department of Justice

- Funds 39 multi-disciplinary anti-trafficking task forces nationwide
- Each task force has federal, state, and local law enforcement, labor law enforcement, and a NGO service provider
- WA State's task force is called WashACT, Seattle based
- Washington Anti-Trafficking Response Network (WARN) is a coalition of WA State service providers.

Retrieved from: <http://www.warn-trafficking.org/resources/washact>

# State HT Laws

- WA State has consistently received an “A” rating by Polaris Project for its passage of human trafficking laws.
- Washington was the first state to enact anti-trafficking laws, beginning in 2003.
- The state now has some of the most comprehensive laws in the nation.



Since then most states have followed

# State and Community Levels

Anti-trafficking laws are only effective if they are implemented, enforced, and collaborative systems are created that embrace punishment for perpetrators and support for victims.

The Collective Impact Model ensures that everyone with an opportunity to impact human trafficking, at every level, is engaged in this fight:

- Legislative action at the state, county and city levels
- Prevention education for youth
- Specialized training for educators, health professionals, law enforcement and the criminal justice system
- Community outreach and awareness
- Victim support services and empowerment programs

# Community Partnerships

- Community youth centers
- Crisis centers
- Sexual Assault Centers
- Safe Shelters
- Juvenile detention centers & probation offices
- Schools and colleges
- Faith organizations
- Healthcare providers
- Emergency Departments
- Tribal Nations

# History of Health Provider Engagement

Over the decades health providers have stepped up to address and impact a series of public health problems. Human trafficking is today's public health and human rights issue.



# History of Health Provider Engagement

- Child abuse (1970s) <sup>1</sup>
- Domestic abuse (1980's) <sup>2</sup>
- Elder abuse (1990's) <sup>3</sup>
- Human trafficking/slavery (2000's) <sup>4</sup>

1. Retrieved from: [http://www.acf.hhs.gov/sites/default/files/cb/capta\\_40yrs.pdf](http://www.acf.hhs.gov/sites/default/files/cb/capta_40yrs.pdf)

2. Retrieved from: [https://en.wikipedia.org/wiki/Domestic\\_violence\\_in\\_the\\_United\\_States](https://en.wikipedia.org/wiki/Domestic_violence_in_the_United_States)

3. Retrieved from: <http://www.napsa-now.org/about-napsa/history/history-of-adult-protective-services/>

4. Retrieved from: <http://polarisproject.org/current-federal-laws>

# Frontline Health Providers

Play a VERY important role in identifying and helping trafficked persons.

There are very few places, other than EDs and clinics, where someone from the “outside world” has an opportunity to interact confidentially with the victim.

The U.S. Department of State, *2014 Trafficking in Persons Report*, recommends “Increased screening to identify trafficked persons, including among at-risk youth, detained individuals, persons with disabilities, and other vulnerable populations”.

Retrieved from: <http://www.state.gov/documents/organization/226849.pdf>

# Hospital or Clinic Personnel

**Front Desk Registration Personnel** - extremely important position to observe:

1. Patient interaction with accompanying person
2. Signs of HT others may not have the opportunity to see
3. Inspect patient ID (or lack of) and home address
4. Warn Triage for clinic or ED

**Triage or Clinic Aide** – another opportunity to observe:

1. Patient interaction with accompanying person
2. Identify chief complaint; try to earn the patient's trust by showing open, accepting and caring attitude

**All ED/Clinic Staff** - watch, examine, ask questions, offer help


# Signs of Human Trafficking

1. The potential victim is accompanied by another person who seems controlling.
2. The patient does not speak much, they are submissive or very “flat”, detached, stoic.
3. The patient has difficulty communicating because of language or cultural barriers.

# Signs of Human Trafficking

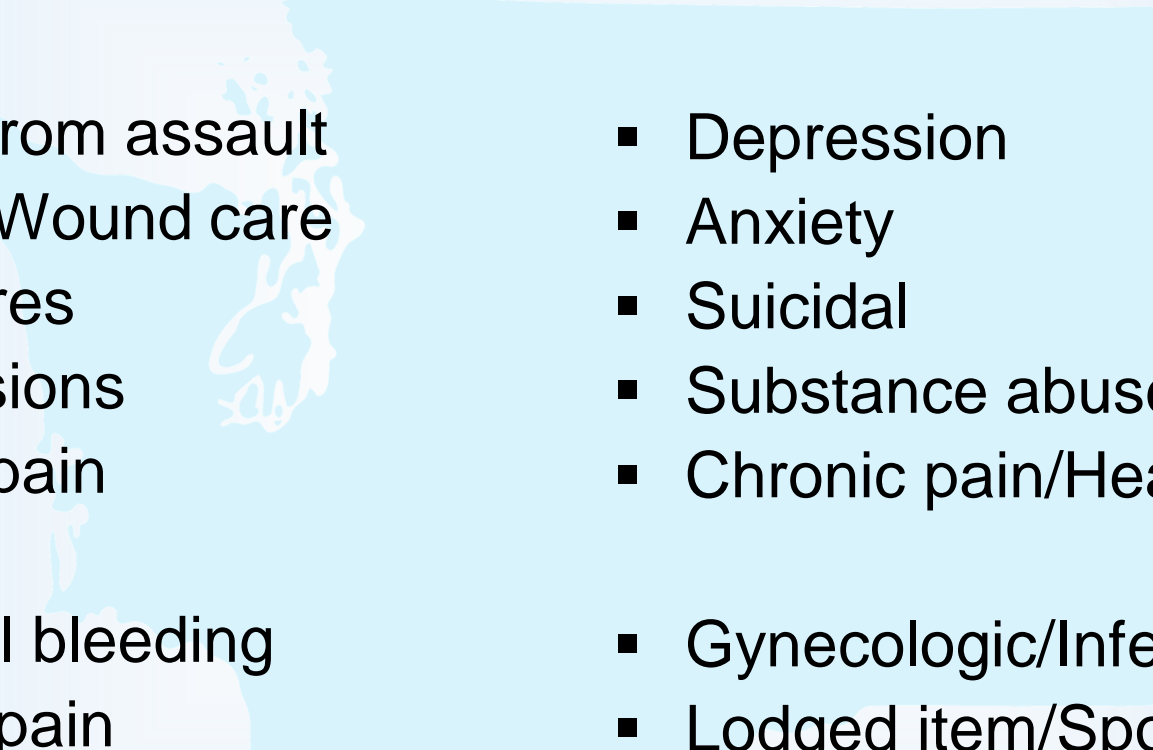
4. The patient OR accompanying person does not have official identification.
5. Beware of fake ID and fake ages – minors!
6. No insurance or cash pay.
7. The patient is unaware of which city or state they are in.

# Signs of Human Trafficking

- 
8. The patient seems isolated from family or community.
  9. The chief complaint seems minor and you wonder why the patient came in.
  10. There are complaints of possible trauma (pain), STIs or pregnancy.



# Common Presenting Complaints to the Emergency Department

- 
- Injury from assault
  - Burns/Wound care
  - Fractures
  - Contusions
  - Acute pain
  - Depression
  - Anxiety
  - Suicidal
  - Substance abuse
  - Chronic pain/Headaches
  - Vaginal bleeding
  - Pelvic pain
  - STI treatment/Testing
  - Unsafe abortions
  - Gynecologic/Infections
  - Lodged item/Sponge
  - Unwanted pregnancy
  - Evidence of sexual trauma

# Registration Process

- Try to get the full name and relationship of persons accompanying the patient.
- Be aware that traffickers often pose as:
  - “Friends”
  - Family members (brothers, uncles, husbands, aunts, etc.)
  - Partners, lovers
  - Employers

# Triage or ED/Clinic Nurse

- Get chief complaint and ask more questions
- Examine the patient generally
- Separate the patient from the accompanying person(s) without raising suspicion. Say it is facility policy (which it is/should be for all healthcare facilities).
- Spend time talking with the patient and try to gain their trust

# Physician or Provider

Before examining the patient, establish trust by:

- Ensuring the patient understands they have rights.
- Convey: “I am here to help you and my first concern is for your **health and safety.**”
- Tell the patient: “What you tell me will be **confidential.**”
- Ask questions about the complaint or injury.

# Be sensitive to the fact that:

- Victims do not consider themselves to be victims – instead they blame themselves or think they deserve nothing, or have no options.
- Some may have been forced into recruiting others, so they may fear authorities will accuse them; they have tremendous shame/guilt.
- They have been controlled utterly, and “broken down” by use of fear, force, and mental abuse.
- They have been told that they are worthless and powerless. They feel hopeless.

# Effectively responding to a victim:

- Show understanding, patience, and respect for the victim's dignity and attempt to establish trust and rapport.
- A supported patient may feel secure enough to disclose more to a healthcare provider.

# Victim-Centered Approach

Be familiar with the concept of a “victim-centered” approach.

- A broad approach that focuses on the needs and concerns of a victim
- Seeks to minimize re-traumatization associated with the medical process

# Do a Full Exam

Suspected victims should always be fully examined, since they will often come to the clinic or ED with relatively vague or small complaints.

If the complaint does not fit the situation, or if the physical exam does not fit the history, then:

**SUSPECT**

and look more, ask more, give more



# Signs of physical abuse are mostly Hidden

- Check lumbar area and buttocks
- Check trunk, front and back
- Check extremities
  
- Look for **scars**, burns or lacerations
- Bruises
- Branding – Victims may have “ownership” tattoos or even tracking devices (subdermal chip)

# Screening Questions for Human Trafficking

If there are ANY suspicions of trafficking or abuse, ask the HT screening questions:

- After caring and trust established;
- After patient is told conversation will be kept confidential from all except the people helping; and
- After interpreter has been arranged by phone or in person, if needed

# Eight General Questions

- Are you going through something in your life that you want to talk about or get help with?
- Do you feel safe?
- Where do you live? Tell me about the place.
- Who lives with you?
- Who holds your identity papers (driver's license, passport)
- Describe your work.
- Can you leave anytime or are you afraid to leave?
- Has anyone threatened you with harm, jail or deportation?

# If sex trafficking is suspected:

- State: “Sometimes people trade sex for money or because they have to survive, has this happened to you?”
- Convey: “I will not judge you or anything you tell me. I'm here to listen if you want to talk or want support getting out.”

# Strict Confidentiality

It is of extreme importance to stress:

- For the victim's safety, confidentiality is critical. If the trafficker hears anything or becomes suspicious, the patient's life may be in danger.

# What to do

If the victim is under age 18 and you have ANY suspicions:

- Immediately call Child Protective Services. They may send an advocate to be present and help.
- Call the **National Center for Missing and Exploited Children at 800-843-5678**

There may be family members looking for their missing child.

# National HT Hotline

**For immediate assistance after conducting an exam and suspecting trafficking:**

- **Call the 24-hour** toll-free confidential national hotline operated by the National Human Trafficking Resource Center (NHTRC).
- Hotline counselors are available to speak with the patient and assist with a trafficking assessment.
- Interpreters are available to speak with non-English speaking patients (in most languages)
- Hotline staff will have a list of resources and services for your community

**National Human Trafficking Hotline**

**888-373-7888**

**Texting number: 233733 (BE FREE)**

# National HT Hotline

- NHTRC staff can talk with the patient anonymously and confidentially –
- **No** name or information is tracked except the local area the call is coming from, and the general nature of the call.
- The NHTRC can help assess the situation, needs of the patient, and give them the appropriate **local** numbers to call for support



# When an adult patient does not wish to talk:

- Reiterate that there are services available for them and their family, and they may be protected by law from prosecution and deportation
- Advise they can return to the hospital or clinic whenever they are ready to accept help
- Give the patient the National Human Trafficking Hotline number, telling them it is toll-free with interpreters in their language; no names are asked. Encourage the patient to call for help when they are ready and at anytime.

# Provider Response Protocol

Hospitals and clinics should have:

- A formal protocol that determines how trafficking cases should be handled, including how patients are linked to services. *Please visit the WA Engage website to download the NHTRC response protocol template.*
- A verified, up-to-date list of local resources. Use Social Services in your hospital and local area to create a streamlined system:
  - ✓ Crime Victim Advocacy Center
  - ✓ Sexual assault clinic
  - ✓ Shelters
  - ✓ Food banks
  - ✓ Counseling

# Call the Police:

- If the patient agrees to make a police report or press charges, or
- If the patient is at risk of imminent harm, or
- If the victim is a **minor**.

# For every suspected Human Trafficking patient:

- Whether or not they have acknowledged it
- Whether or not they are ready to do something

ASK the patient if they feel safe carrying the Hotline number with them, if so:

**SEND THEM OUT WITH THE NATIONAL  
HOTLINE NUMBER**

**888-373-7888**

**Texting number 233733 (BE FREE)**

# Everything you do helps:

- Even if the patient does not want to discuss anything or do anything, you have helped them by opening up the subject - telling them that special national laws protect them, and that there are free services and safe places for them.
- And leave the patient with the knowledge that **your ED is always open to them and they may come back for assistance –**  
**when they are ready**



# CONTACT US

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