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- Define human trafficking
- State the prevalence of human trafficks
- Define why awareness of human trafficking is such ar important topic for medical professionals
- Name 5 contributing factors that play into the typical patient profiles of human trafficking
- State who the "players" are in human trafficking



Objectives

- Restate what are the contributing factors as to why the victims DONT leave this lifestyle
- Name several reasons for victims to come to you medical facility
- Name several important considerations in evaluating and treating possible trafficking victims
- Note resources for trafficking violins





Types of Human Trafficking OLUNTARY DOMESTIC SERVITUD OUR PRIMARY Shipping
 Live Sex Sh FOCUS WILL BE ON Mail Order Bride
 Military Prostitut SEX TRAFFICKING Prostitution (Next value form of sex trafficking, but not all prostitution is sex trafficking).



Human trafficking is defined by the United Nations as

persons, by means of threat or use of the state of the forms of **Contractive** of abduction, of **Charge** of deception, of the abuse of power or of a position of vulnerability or of the giving or roceiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of **auguments**.

https://www.usudc.org/usodc/en/humon-trafficiesg/wout-is-humon-trafficiesg.html/net-so-

At least 1 element from each column must be present Action + Means + Purpose = Human Trafficking			
ACTION	MEARS	PURPORE	
 Induces 		Commissed Say Act	
Reckuits	• Froid	 Lobor or Services 	
• Harbors	 Colembon 		
• Transports			
Provides	"Neither force, m	or fraud, nor coercion	
a Cilifornia	Induced into co	mmercial sex acts.	





Statistics

- luman trafficking is found in all 50 states
- Sex trafficking crosses all socio-economic levels
 All ages are affected

- Average age of entry is in their teenage years
 Although the US highways are a contributing factor, trafficking occurs in all areas and NOT dependant on crossing state lines

Note: these numbers are only estimates since trafficking is an illegal activity

6



We have a unique opportunity to encounter human trafficking victims in their time of need.

• Up to 88% of trafficking victims access health care during their trafficking situation



Contributing Factors of Human Trafficking

(Seen in Typical Patient Profiles)

Risk Factors/Suspected Causes

Powerty/deare for a better life • LOW SELF ESTEEM

- Ignorance
- ant associated weblies
- Political and economic instability

 <u>RESELLION</u>
- Demond for cheop labor
- · High profits/"good money"
- · Abuse/neglect
- Homelessness
- Truency
 SEARCHING FOR LOVE AND BELF-VALUE
 - (Gen

Not all prostitution is sex trafficking. But make no mistake all of those who are being prostituted <u>ore victims of</u> <u>something</u>.

 That "something" may be addiction, low self-esteem, abuse, choices, poverty...Women and children are forced into prostitution through emotional pressure, force or financial desperation.

S.B. Satterfield. Cancel Appents of assertide Protitizions. M. Satert and A.M. Pres. Smarce etc. Protitizion. L. Las "the Physicant recomment."



When this happens, they enter an industry sustained through violence and exploitation. Examples:

- Bayfriend tells his girlfriend to go out and make enough means for their local second down of device
- A woman sells her body to pay for her electric bill

REPORTS INDICATE THAT UP TO 90% OF PROSTITUTED INDIVIDUALS ARE UNDER THE CONTROL OF A PIMP.

3.B. Datterfield. Carical Appents of Joverskie ProstRution. M. Schert and A.M. Press, Schaese etc. ProstRution, L. Lee "The Press and ProstRutions,"



- Victims: Minors (18 years and under) and Adults
- Controller: Pimps, intimate partners, family members
- Clientele (Johns or "Tricks"): Those who purchase set
- Price: \$200-\$300/hour





Traumatic-Bonding/Conditioning

Trauma Bonding: Strong emotional ties that develop when one person intermittently harasses, beats, threatens, abuses or intimidates the other.





- he following will be present
- An imbalance of power
- Sparadic highly intensive positives mixed in with abuse
- Denial for self protection
- Dependent of service profession. Dependent of Experience Read R is not hoppening to them (the exclusing or receip). Cognitive Dependence Self preservation that datasts and one rates the trait with a entity developing a talescate for the phase and complians the closers behavior.
- Distartion: can't accurately evaluate danger and can't perceive alternatives to the situation.



 High distrust of authority figures or outsiders (including you as the medical authority) Common Reasons for Victims to Come to the ED, Hospital, or Clinic

Red Flags: Force and Abuse

- Persistant or untreated SII's or UTI's
- Abnormally high number of sex partners
- Using language from "the life"
- Presence of cotton or debris in vagina
- Trauma to vagina or rectur
- Problems with jaw or neck
- Repeated abortions or miscarriages
- Unintended pregnacies or fertility problems



- Hematoma or contusions
- Lacerations, scarring, missing or broken teeth
- Injuries to the head or black eyes
- Dislocated limbs or fractures
- · Baid spots
- Burns (cigarette)
- Miscarriages caused by potential abuse



Red Flags: Force and Abuse

Inability to keep appointments or follow care instructions

- Unable to present identification documents
- Accompanied by a person that doesn't let the patient speak
- Mainutrition, untreated medical problem



Barriers to Accessing Services

- Fear of arrest, incarceration
- Fear of retribution by explaiter
- Control of movement by exploiter.
- For minors: fear of being returned to family, fear of placement in social services
- Don't understand that they are being trafficked (they think they are just with boyfriend)

Important Considerations in Evaluation and Treatment of Possible Victims





- trafficking victim, be aware of the "power dynamics" of the relationship between victim and controller:



- Once you are with the victim (without the controller), your biggest challenge is to **solid the control** and that may take some time)
 Helping a trafficking victim is not simply moving them from "point A to point B" (getting them to a safe hause)
 If presented with options for help, they need to think about it,
- For them, it's not so much what you DO for them as to how you make them feel (loved, accepted)-this will drive their response to you

Use a Strength-Based Empowerment Approach

- Remember that the age that they started in trafficking may be





- bid you ever feel pressured to do something that you didn't want to do or fell uncomfortable doing? How did you feel pressured?
 ba you feel you were ever tricked or lied to? Were you ever promised something, but it didn't happen?
 Have you ever had to trade sex for money or something else you needed (a place to stay or far faod)?





- Has anyone ever approached you asking you to get involved in prostitution?
- Do you get to keep your own money?
- Does anyone supervise or monitor your conversations with your family or friends?
- Did anyone take and keep your ID?
- What does that fattee mean?



- Don't give the trafficker any indication that you are aware of what's really happening Be respectful and act natural
- Be cautious in providing your personal information Best practice is an office number or agency that can hondle calls.



- Know your facility's protocols
- Prepare a resource list that you can give to the victim
- If you see them outside the facility, let them make the first move
- Be transporent with the victim. If calling law enforcement or social services, let them know.









OBN HUMAN	TRAFFICKING
HO	TLINE
855-6	17-2288
THE DRAGONFLY HOME 855-674-4767	DOMESTIC VIOLENCE INTERVENTION SERVICES 918-743-5763
YWCA 24 HR HOTLINE	THE SPRING
405-917-9922	918-245-4075









