



Identifying Victims of Human Trafficking



In the healthcare
context



Trafficking Victims Protection Act --- 2000

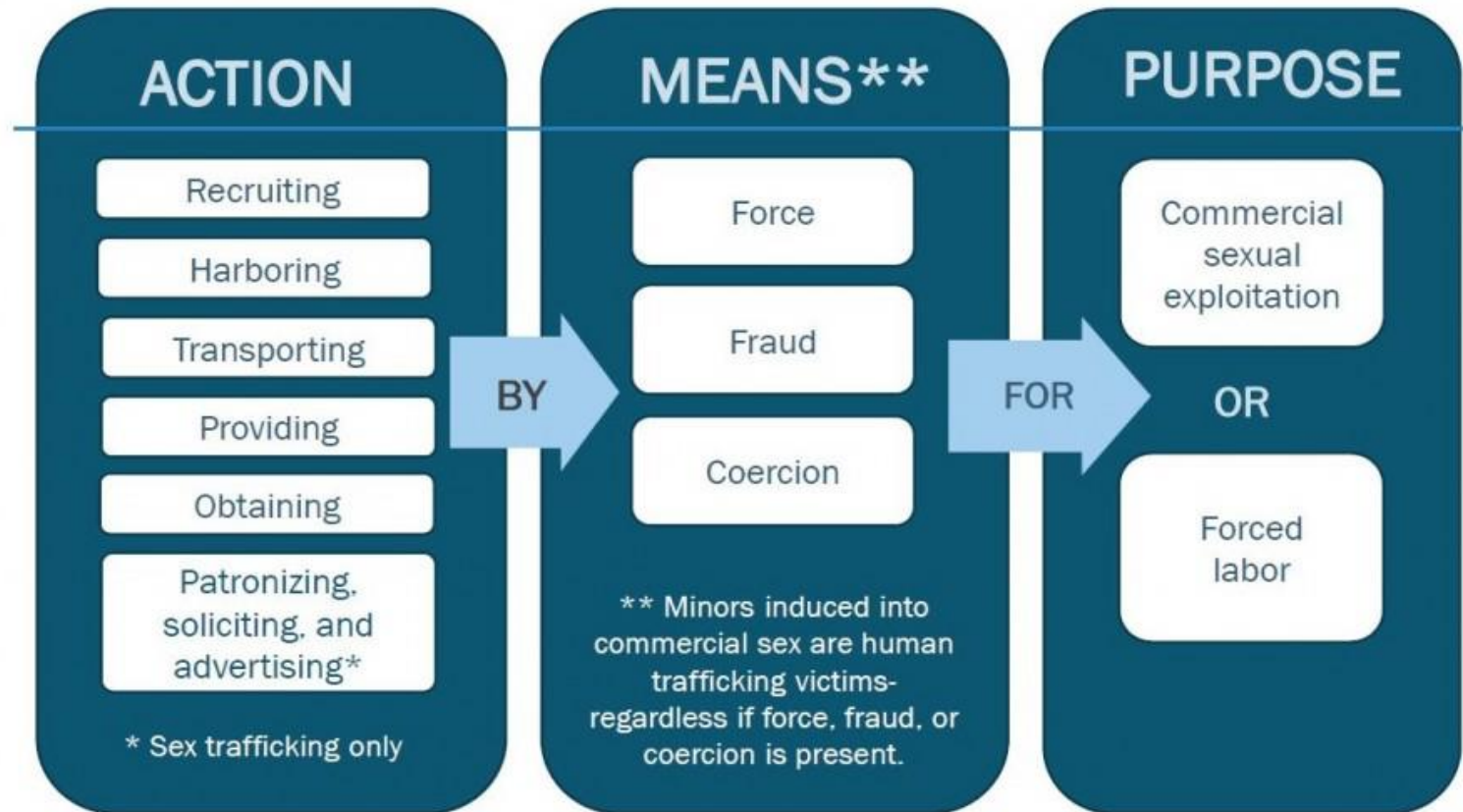
Sex trafficking is the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purposes of a commercial sex act, in which the commercial sex act is induced by **force, fraud, or coercion**, or in which the person induced to perform such an act has not attained 18 years of age.

Labor trafficking is the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of **force, fraud, or coercion** for the purposes of subjection to involuntary servitude, peonage, debt bondage, or slavery.



TRAFFICKING IN PERSONS REPORT

The Problem



MT Issues



International border

Major highways

Cities 2-3 hours apart on I-90



Easy access from Las Vegas on I-15 and
Seattle on I-90

Vulnerable communities



Large Native American population

Rural with lack of knowledge and
resources



Economy

Agricultural and ranching state

Tourism-based



Who are we talking about?

Vulnerable populations

Children in the welfare and juvenile justice system

Individuals living in poverty

Migrant laborers

Persons with intellectual and physical disabilities

Runaway and homeless youth

LGBTQ+ individuals

Those with limited English proficiency

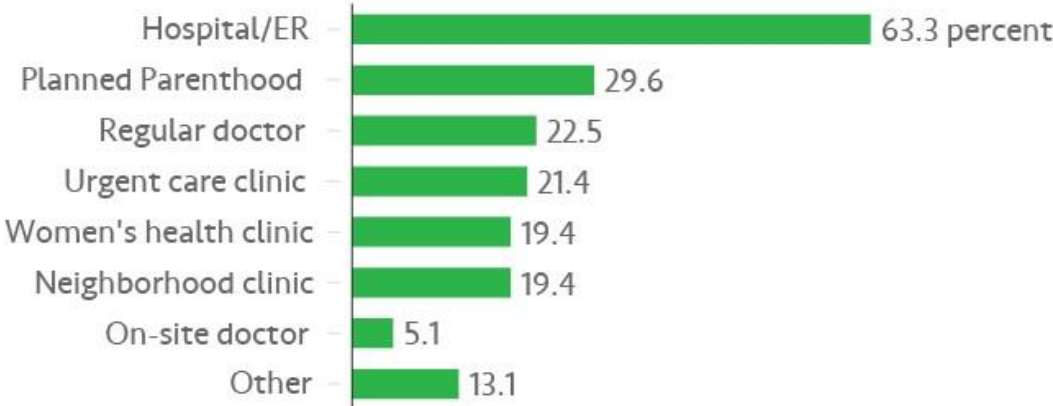
Those who have experienced trauma

Native Americans

Contact with Healthcare Providers

87.8%

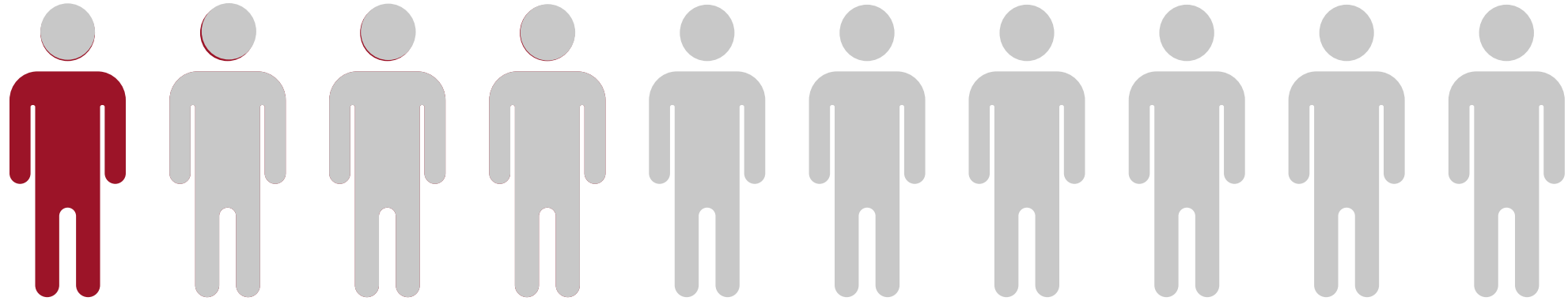
of sex trafficking victims say they had some contact with health care while being trafficked



Source: Laura J. Lederer and Christopher A. Wetzel, "The Health Consequences of Sex Trafficking."



Invisibility of Exploitation



5%

Only 5% of emergency room personnel in the U.S. are trained to treat trafficking victims.

Chisolm-Straker, M., Richardson, L. D., & Cossio, T. (2012). Combating Slavery in the 21st Century: The Role of Emergency Medicine. *Journal of Health Care for the Poor and Underserved*, 23(3), pp.980-987. doi:10.1353/hpu.2012.0091.

Red Flags



Does not know the city or state they're in



Fearful or submissive manner



Unusual tattoos – names; 'property of'; \$\$; crowns



Controlling companion who answers for patient or won't leave their side



Story of illness or injury that does not match what you see



Workplace abuse and restrictions



Does not have control of their identification or money



Signs of physical abuse, sexual abuse and drug use



Avoidance of eye contact

Self-Identifying Barriers

Shame or Guilt

Controlled movement
by the trafficker

Lack of understanding
the healthcare system

Fear of retaliation
by the trafficker

Juvenile fear of
social services

Fear of arrest or
deportation

Role of HCPs



Jane Doe Case Review

Support

- Resources
- Follow Up



Clinical Care

- Medical
- Physical Safety



Recognition

- Receptionist Red Flags
- Nurse Red Flags



Data Collection

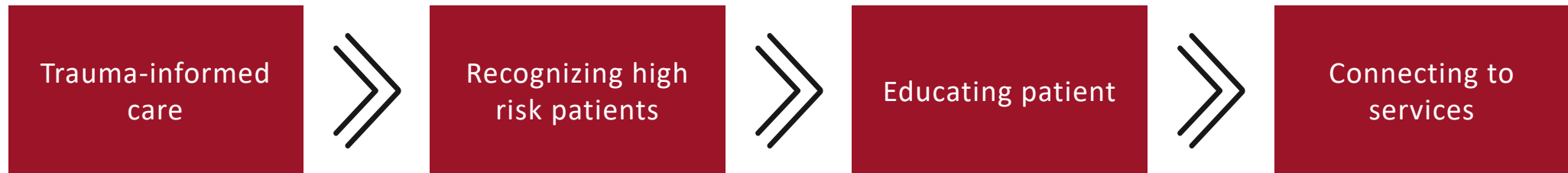
- Medical Hx
- Current Needs



Victim-Centered Approach

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- 1. Meet Basic Needs (food, water, etc.)
 - 2. Reassure them their healthcare needs will be met
 - 3. Build Trust and Rapport
 - 4. Provide translation in native language
 - 5. Be mindful of power dynamics involved

What is **Success**?



Success ≠ Rescue or Disclosure

Success does NOT depend on patients' actions or reactions!

Recognize-Respond-Report



✓ 911

✓ MONTANA HUMAN
TRAFFICKING HOTLINE
833-406-STOP(7867)



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