

Human Trafficking and Pregnancy: Improving the Health Care Response Where Vulnerabilities Collide

Wendy Macias-Konstantopoulos, MD, MPH
Department of Emergency Medicine
Director, MGH Human Trafficking Initiative
Medical & Executive Director, MGH Freedom Clinic
Assistant Professor, Harvard Medical School
Boston, MA



April 24, 2018

Disclosures

No disclosures to report

Learning Objectives

- By the end of this session, participants should be able to:
 - Provide an overview of human trafficking, including socioecological factors of vulnerability
 - List at least 5 health outcomes associated with human trafficking
 - List at least 5 potential indicators of human trafficking, including special considerations in pregnancy
 - Describe the components of an appropriate response to potentially trafficked persons

Definition: Human Trafficking

- Modern form of slavery
- Force, fraud, or coercion
- Profit from the control and exploitation of others

- International and domestic laws

Copyright © 2018 Massachusetts General Hospital

Major Forms of Human Trafficking

- Forced labor
- Bonded labor (debt bondage)
- Sex trafficking
- Involuntary domestic servitude
- Forced or servile marriage
- Forced criminal activity
- Organ trafficking

- Child trafficking
 - Forced labor
 - Sex trafficking
 - Child pornography
 - Domestic labor
 - Child soldiers
 - Begging and peddling rings
 - Sales crews
 - Child laundering (illegal adoptions)
 - Child brides

Copyright © 2018 Massachusetts General Hospital

Labor Trafficking

Landscaping, construction, factory,
agricultural, and hospitality industries

Copyright © 2018 Massachusetts General Hospital

Sex Trafficking

Copyright © 2018 Massachusetts General Hospital

Child Trafficking

Copyright © 2018 Massachusetts General Hospital

Myths

- Only occurs in developing countries
- Only affects foreign nationals
- Only involves sexual exploitation

- Always involves physical restraint, force, or bondage
- Always involves transport across country borders
- Always involves organized crime networks

Copyright © 2018 Massachusetts General Hospital

U.S. Federal Law

Federal law defines "severe forms of human trafficking" as:

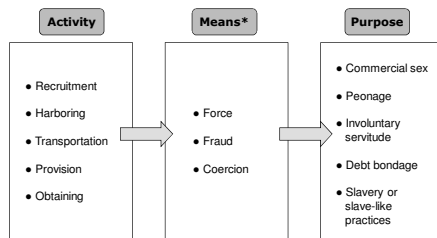
- (A) sex trafficking in which a **commercial sex act** * is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
- (B) the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

Trafficking Victims Protection Act of 2000 (P.L. 106-386)

***Commercial sex act** – a sex act performed in exchange for anything of value to any person

Copyright © 2018 Massachusetts General Hospital

U.S. Federal Law



*Exception: children < 18 yrs

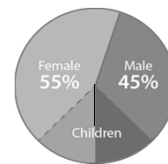
Trafficking Victims Protection Act of 2000 (P.L. 106-386)

Copyright © 2018 Massachusetts General Hospital

Forced Labor Globally

20.9 million persons worldwide (ILO, 2012)
(± 1.4 million, 68% CI)

\$150 billion USD per year (ILO, 2014)



Copyright © 2018 Massachusetts General Hospital

Human Trafficking Regionally

Copyright © 2018 Massachusetts General Hospital

(ILO, 2012)

Illegal Profits per Capita

Copyright © 2018 Massachusetts General Hospital

(ILO, 2014)

Modern Slavery Globally

- 40.3 million persons worldwide, including 24.9 million in forced labor (4.8 million in commercial sex industry) and 15.4 in forced marriage (ILO, 2014)
- 5.4 victims for every 1,000 people
- 1 in 4 are children
- Disproportionately women and children – 99% forced sexual exploitation and 58% other forced labor

Copyright © 2018 Massachusetts General Hospital

Human Trafficking in the U.S.

HT Reporting System data between 2008-2010:

Suspect cases investigated = 2,515
Confirmed cases = 389
Confirmed victims = 527

Copyright © 2018 Massachusetts General Hospital

U.S. Labor Trafficking

- HT Reporting System data between 2008-2010:



(Banks and Kycckelhahn, US Dept of Justice, 2011)

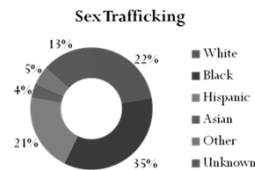
Confirmed LT victims:

- 95% foreign born nationals
 - 67% undocumented aliens
 - 28% legal aliens
- 68% female
- 38% <25 yrs old
- 10% <18 yrs old

Copyright © 2018 Massachusetts General Hospital

U.S. Sex Trafficking

- HT Reporting System data between 2008-2010:



(Banks and Kycckelhahn, US Dept of Justice, 2011)

Confirmed ST victims:

- 83% US citizens
- 94% female
- 87% <25 yrs old
- 55% <18 yrs old

Copyright © 2018 Massachusetts General Hospital

Reports of Human Trafficking Cases

Copyright © 2018 Massachusetts General Hospital

Polaris Project

The Victims

- Female, male, transgender
- Any race, ethnicity, religion
- U.S. and foreign nationals, including lawful permanent residents, refugee/asylum seekers, qualified aliens (visas)
- Any socioeconomic background

Copyright © 2018 Massachusetts General Hospital

Vulnerability Factors

- History of child abuse
- Family dysfunction (DV, MH, SUD, AP)
- Financial insecurity and lack of employment opportunities
- Housing instability or homelessness
- Runaway or throwaway episodes
 - LGBTQ (Duroso 2012)
 - Foster care and juvenile justice-involved children (NCEM 2016)
- Racial and ethnic minorities (including indigenous people)
- Immigrants and migrant workers
- Learning or cognitive disabilities
- Substance use, gang affiliation, community violence/corruption

Copyright © 2018 Massachusetts General Hospital

Homelessness: A Closer Look

- Elevated risk due to:
 - Need to survive on streets
 - Lack of support system
 - Difficulty accessing needed resources
- More than 40% of the homeless in U.S. are younger than 18 yrs
- 1 to 1.5 million “throwaway kids” in the U.S.
- As many as 20,000 children are forced into CSE each year
- 1 in 5 runaways reported missing in 2015 were sex trafficked and 74% were in foster care when they went missing (NCEM 2016)
- Homeless LGBTQ youth are almost twice as likely (58.7% vs. 33.4%) to report sexual victimization (Cochran et al. 2002)

Copyright © 2018 Massachusetts General Hospital

The Traffickers

- Individuals:
 - Intimate partner/boyfriend
 - Parent/legal guardian or other family member
 - Family acquaintance/neighbor
 - Authority figure
 - Peer/friend
 - Drug dealer
 - Gangs/organized crime syndicate
- Private enterprises
- Corporations and small businesses
- Gangs
- Organized crime syndicates



(Covenant House, 2013)

Copyright © 2018 Massachusetts General Hospital

Recruitment Mechanisms

- Familial induction - homeless LGBTQ youth (Dank 2015)
- Peer inculcation
- Psychological manipulation
- Once-in-a-lifetime opportunities
- Employment broker contracts
- Abduction (NISMART-3, 2011)

Copyright © 2018 Massachusetts General Hospital

Power and Control Mechanisms

- Threats against family
- Blackmail threat
- Deportation threats
- Display beatings
- Brandishing weapons
- Animal abuse
- Foster dependence
- Deny access to money
- Debt bondage
- "Violence with kindness"
- Humiliation
- Degradation
- Servanthood
- Damaging use of connections
- Frequent movement
- Communications monitor
- Distrust of authorities
- Violent sex acts
- Rope / gang rape
- Commercial sex
- Name calling
- Blaming, denying wrongdoing
- Commodification

Copyright © 2018 Massachusetts General Hospital

Polaris Project

Why should health care professionals engage?

Health Outcomes

Physical health	Reproductive health	Mental health
Intentional traumatic injuries (e.g., fractures, cuts, disfigurement) and chemical/thermal burns	Vaginal, perineal, and rectal injuries (e.g., secondary rape/gang rape, foreign object use)	Stockholm syndrome (i.e., traumatic bonding with perpetrator)
Accidental traumatic and overuse injuries (e.g., joint sprains, disc herniations, muscles tears, eye strain)	Sexually-transmitted infections (e.g., HIV, HPV, GC, Chlamydia, Hepatitis B/C)	Affective disorders (e.g., anxiety, depression, panic attacks)
Chemical (e.g., pesticides, industrial glues) and environmental exposures (e.g., heat exhaustion, vision/hearing impairment)	Diseases due to untreated STIs (e.g., AIDS, cervical cancer, PID, infertility, liver disease, hepatocellular cancer)	Posttraumatic stress disorder (PTSD; symptoms include flashbacks, intrusive thoughts, memory difficulties, hyper-vigilance) and complex PTSD
Communicable diseases (e.g., Hepatitis A, intestinal parasites, typhoid, TB)	Poor access to barrier protection or other contraception	Dissociative disorders, involving varying degrees of detachment from self/reality
Untreated chronic diseases (e.g., anemia, cancer, CKD, CVD, DM, HTN)	Forced sterilization or use of contraceptive devices	Sleep disorders (e.g., sleep disturbances, nightmares, insomnia)
Poor oral health and injuries (e.g., tooth decay/fractures, mandibular dislocations)	Unplanned and high-risk pregnancies	Psychosomatic syndromes (e.g., chronic pain, fatigue, GI distress, headaches, dizziness)
Dehydration, malnutrition, and eating disorders	Unsafe, forced abortions	Low self-esteem, shame, guilt, self-blame, self-loathing, hopelessness, anti-social, learned helplessness, loss of identity/agency
Branding/tattooing and skin disorders (e.g., lice, scabies, mycoses)	Abortion-related complications	Forced or coerced substance use disorders
Substance use disorder complications	Forced pregnancy and childbirth	High-risk and self-injurious behaviors
Homicide and accidental death (e.g., fatal trauma)	Lack of prenatal care, including vertical HIV transmission prevention	Suicide and accidental death (e.g., drug overdose)

Copyright © 2018 Massachusetts General Hospital

(Mocsis-Konstantopoulos, *Ann Int Med*, 2016)

Health Outcomes Study

- Survey of 192 women entering post-trafficking services in Europe
 - 95% of the women and adolescent girls surveyed reported physical or sexual violence while in the trafficking situation
 - 76% reported physical abuse
 - 90% reported sexual abuse
 - Physical symptoms
 - Headaches (82%)
 - Feeling easily tired (81%)
 - Dizzy spells (70%)
 - Back pain (69%)
 - Memory difficulty (62%)
 - Stomach pain (61%)
 - Pelvic pain (59%)
 - Gynecological infections (58%)
 - Nearly two thirds (63%) of participants reported more than 10 concurrent physical health problems

(Zimmerman et al., 2008)

Role of the Health Sector

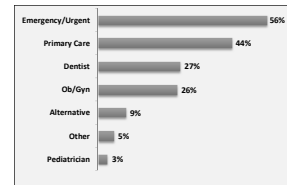
Up to 88% of trafficking survivors report encounters with health care professionals

(FVPP, 2005; Baldwin et al., 2011; Lederer & Wetzel, 2014)

Copyright © 2018 Massachusetts General Hospital

Health Care Access

- Emergency departments (6.3%)
 - Primary source of health care for victims
 - Less than 3% trained (Chisolm-Straker et al., 2012)
- PP/reproductive health clinics (29.6%)
 - Any stage of exploitation
- Primary care practices (22.5%)
- Urgent care clinics (21.4%)
- Community health clinics (19.4%)
 - Particularly important among homeless youth



(Lederer & Wetzel, *Ann Health Law*, 2014)

(Chisolm-Straker et al., *J Health Care Poor Underserved*, 2016)

Copyright © 2018 Massachusetts General Hospital

Pregnancy: An extra layer of vulnerability?

Kayla, sex trafficking survivor

"[While in forced prostitution,] I saw 10 to 20 men a day. I did what he [the pimp] said because he got violent when I sassed him. I took all kinds of drugs— even though I didn't really like most of them... I had forced unprotected sex and got pregnant three times and had two abortions at [a clinic]. Afterward, I was back out on the street again. I have so many scars all over my body and so many injuries and so many illnesses. I have hepatitis C and stomach and back pain and a lot of psychological issues. I tried to commit suicide several times."

Copyright© 2018 Massachusetts General Hospital

Sexual & Reproductive Health Needs

- STI testing and treatment
- Forensic evaluation
- Contraception
- Prenatal care
- Miscarriages
- Pregnancy termination

Copyright© 2018 Massachusetts General Hospital

Special Considerations: Pregnancy

- Rape as a tool for induction and control
- Diminished ability to negotiate condom use
- Increased violence during pregnancy
 - Blaming, name-calling
 - Liability
 - Profit loss
- Forced abortions – 55% at least one, 30% multiple
 - >50% reported the abortion was not a choice
- Clandestine abortions

(Lederer & Wetzel, 2014; Gupta, 2009)

Copyright© 2018 Massachusetts General Hospital

Special Considerations: Pregnancy

- Pregnancy as a tool for blackmail and control
- Economic dependency
- Absence of prenatal care
 - Lack of fetal surveys
 - Vertical HIV transmission
 - Untreated substance use
- Neonatal abstinence syndrome
- Conflicted trauma of parenthood resulting from rape
- Involvement of child protection

Copyright© 2018 Massachusetts General Hospital

Comprehensive ♀ Health Services

- Counseling for best contraceptive method
 - Patch, oral, injection, implant, female condom, IUD
 - Emergency contraception
- STI testing and treatment (syphilis, hepatitis, HIV)
 - PrEP (90% risk decrease)
- Abnormal PAP smears, cervical dysplasia follow-up
 - HPV testing, colposcopy, cryotherapy and LEEP
- Prenatal care, L&D
- Pregnancy termination services

(Tracy & Macias-Konstantopoulos, 2017; Ching & English, 2015; CDC)

Copyright© 2018 Massachusetts General Hospital

What should we be looking for?

Blue Campaign www.DHS.gov

Recognizing the combined signs will help you accurately alert local or federal authorities for investigation. For a victim of trafficking, this may save a life.

Look for the following indicators:

- Is the patient accompanied by another person who seems controlling?
- Does person accompanying the patient resist or giving information freely?
- Does the patient have trouble communicating due to language/cultural barrier?
- Are the patient's identification documents (e.g. passport, driver's license) being held or controlled by someone else?
- Does the patient appear submissive or fearful?
- Is the patient noticeably depressed for the occasion/work they do?
- Are there security measures designed to keep the patient on the premises?
- Does the patient live in a degraded, unsuitable place/share sleeping quarters?
- Is the patient suffering from classical presentations found in trafficking victims?

Human trafficking is the use of force, fraud, or coercion to exploit someone for labor or commercial sex. Any minor exploited for commercial sex is a victim of human trafficking.

www.dhs.gov/bluecampaign

Victims of human trafficking may look like many of the people you help.

Classic presentations found in trafficking victims:

- Anxiety or severe stress of healing caused by physical abuse
- Scars, mutilations, or infections due to improper medical care
- Urinary difficulties, pelvic pain, pregnancy, or sexual trauma caused from working in the sex industry
- Chronic back, hearing, cardiovascular, or respiratory problems as a result of forced manual labor in unsafe conditions
- Poor eyesight and/or eye problems due to dirty, lit work sites
- Malnourishment and/or severe dental problems
- Disorientation, confusion, phobias, or panic attacks caused by daily mental abuse, torture, and culture shock

Report suspicious activity to local law enforcement, or call 1.866.347.2423

BLUE CAMPAIGN
The Blue Campaign for the Protection of Trafficking Victims

www.dhs.gov/bluecampaign

Copyright © 2018 Massachusetts General Hospital

Warning Signs of Grooming

Warning signs that a minor is being "groomed" (recruited) for CSE/trafficking:

- Truancy, unexplained absences from particular classes/activities
- Less appropriately dressed than before
- Sexualized behavior
- Overly tired in class
- Withdrawn, depressed, distracted or checked out
- Brags about making or having lots of money
- Displays expensive clothes, accessories or shoes
- New tattoo (often used by pimps as a way to brand victims. Tattoos of a name, symbol of money, or barcode could indicate trafficking)
- Older boyfriend or new friends with a different lifestyle
- Talks about wild parties or invites other students to attend parties
- Displays signs of gang affiliation (i.e.; a preference for specific colors, notebook doodles of gang symbols, etc.)

Shared Hope International
www.sharedhope.org

Indicators of Human Trafficking

Table 3. Indicators of Human Trafficking*

Physical Indicators	Abuse and Control Indicators	Other Indicators
Delayed presentation for medical care	Accompanied by a person who answers questions, corrects the patient, and attempts to control the encounter	Inability to answer simple questions, such as name, age, home address, work, school, current city location
Signs of physical, sexual, or dental trauma	Accompanied by a person who insists on translating	Reported age is older than apparent age
Signs of medical neglect	Scripted or restricted patient communications	Discrepancy between history and clinical presentation
Signs of malnourishment	Patient frequently glances to the accompanying person for approval after speaking	Possession of multiple fake forms of identification, many hotel keys, or large sums of cash
Multiple, recurrent sexually transmitted infections	Patient avoids eye contact with accompanying person or provider	Inappropriate clothing for the weather
Foreign bodies to stop menstrual flow	Other signs of submission, fear, or hypervigilance	Truancy or absenteeism from school at certain times of day
Multiple pregnancies ending in abortion	Frequent calls or texts and inability to delay response	Someone else is in possession of identification or immigration documents
Atypical communicable diseases	Hyperstartle reflex	Distrust of authority
Occupational injuries easily preventable with access to personal protective equipment		Excessive work hours
Substance use		Payment in cash
Tattoos or branding indicating ownership		

Copyright © 2018 Massachusetts General Hospital

(Mocsis-Konstantopoulos, *Am J Int Med*, 2016)

How should we respond?

A Framework Definition:

Trauma-Informed Care

A systems-level approach to care that recognizes the pervasiveness and impact of trauma on the individual across the lifespan, acknowledges the vulnerabilities and triggers of trauma survivors that traditional service delivery approaches may exacerbate, minimizes retraumatization, and fosters physical, psychological, and emotional recovery, health, and well-being.

Copyright © 2018 Massachusetts General Hospital

The Impact of Trauma

- Even a single, isolated traumatic event can bombard the senses and exceed a person's ability to cope
- May lead to seemingly 'maladaptive' behaviors
 - Think of these as "adaptive coping strategies"
- The more understood and safer they feel, the more likely they will access health care services
- Without a trauma framework, services can be retraumatizing

<http://www.samhsa.gov/>

Copyright © 2018 Massachusetts General Hospital

The Impact of Trauma

- Trauma affects how individuals access /respond to assistance
 - Distrust of health care providers (historically, trust has been betrayed)
 - Avoidance of trauma triggers
- Triggers in the health (dental) care setting: (Mendelsohn, 2014)
 - Sights (blood)
 - Noises (drills)
 - Smells (latex)
 - Touch (physical exam, tightening of the BP cuff)
 - Exposure and/or vulnerable physical position
 - Physical pain, invasive procedures
 - Power differential and/or gender of provider
 - Confined space
 - Lack of privacy

Copyright © 2018 Massachusetts General Hospital

Trauma-Informed Approach

The Impact of Trafficking
✓ Loss of safety
✓ Loss of agency
✓ Loss of predictability

- Respect, patience, and dignity
- Minimize retraumatization
- Promote safety, healing, and recovery
- Highlight strengths and resiliency (empower)
- Share in decision-making
- Transparency and predictability
- Understand behavior and manage our own reactions!

(Elliott 2005; Wagner 2009; Warshaw et al. 2009; Warshaw 2014; Mendelsohn 2014; NCDVTMH-ACDVTI 2014)

Copyright © 2018 Massachusetts General Hospital

Stigma Leads to Mislabeling

"What happened to you?" instead of "What's wrong with you?"

Copyright © 2018 Massachusetts General Hospital

Principles of Inquiry

- Maintain a high index of suspicion!
- Trauma-informed and culturally-appropriate approach
- Privacy and confidentiality
- Limits of confidentiality
- Professional interpreters
- Normalize inquiry
- Neutral language
- Convey an open door policy
- Respect decisions not to engage/answer

Copyright © 2018 Massachusetts General Hospital

Potential Screening/Interviewing Questions

Potential Screening Questions

With whom do you live? Where did you sleep last night?
 What type of work do you do? Are you being paid?
 Do you feel safe where you sleep? Where you work?
 Is anyone hurting you emotionally or physically?
 Has anyone threatened to hurt you or your loved ones?
 Have your identification or immigration documents been taken from you?
 Have you ever exchanged sex for food, shelter, drugs, money, hormones, or anything else?
 Has anyone asked you to have sex with multiple persons to make money?
 Have you been threatened with deportation, jail, beatings, or death if you tried to leave?

(Mocsis-Konstantopoulos, Ann Int Med, 2016)

Asking the right questions will help you determine if the person in front of you may be a victim of trafficking who needs your help.

- Did you ever feel pressured to do something you didn't want to do?
- Are you being paid what you were promised?
- What would happen if you left your work situation?
- Were your communications or movements ever restricted or monitored?
- Have you or someone you know been threatened?
- What are your working, living, and sleeping conditions like?
- Have the conditions of your work changed from what was promised?
- Did you have to give any fees to get your job or stay in your workplace?
- Did anyone ever promise to give money or anything of value to you or someone else in exchange for a sexual act?
- Is someone else holding your money, identification documents, or other personal possessions?

Call the National Human Trafficking Hotline, 888-373-7888, if you think you have encountered a victim of trafficking.

Key Questions to Ask:

- What type of work do you do?
- Are you being paid?
- Can you leave your job if you want to?
- Can you come and go as you please?
- Have you or your family ever been threatened?
- What are your working and sleeping conditions like?
- Where do you sleep and eat?
- Do you have to give someone a fee to get your job?
- Are there locks on your door/windows so you cannot get out?
- Has your identification or immigration documents been taken from you?

Call 1.888.373.888, the Trafficking Information and Referral Hotline, if you think you have encountered a victim of trafficking.

Asking the right questions will help you determine if the person in front of you may be a victim of trafficking who needs your help.

- Did you ever feel pressured to do something you didn't want to do?
- Are you being paid what you were promised?
- What would happen if you left your work situation?
- Were your communications or movements ever restricted or monitored?
- Have you or someone you know been threatened?
- What are your working, living, and sleeping conditions like?
- Have the conditions of your work changed from what was promised?
- Did you have to give any fees to get your job or stay in your workplace?
- Did anyone ever promise to give money or anything of value to you or someone else in exchange for a sexual act?
- Is someone else holding your money, identification documents, or other personal possessions?

Call the National Human Trafficking Hotline, 888-373-7888, if you think you have encountered a victim of trafficking.



Response to Admission/Disclosure

- Protocols are critical!
- Thank the patient for trusting/confiding in you
- Determine need for mandatory reporting
- Danger assessment and alert security personnel
- Assess needs and priorities of the patient
- Share decision-making
- Safety planning
- Engage hospital and refer to community resources
- Offer to contact law enforcement *

Copyright© 2018 Massachusetts General Hospital

National Human Trafficking Hotline



1.888.3737.888

Or text INFO or HELP to BeFree (233733)

Polaris Project and US Department of Health & Human Services
www.acf.hhs.gov/trafficking

Copyright© 2018 Massachusetts General Hospital

Comprehensive Response

Key = **Interdisciplinary**



Copyright© 2018 Massachusetts General Hospital

Multidisciplinary Team Response

- Multi-disciplinary team approach
 - Engage social workers, addiction specialists, sexual assault nurse specialists, mental health providers, child protection teams, etc.
 - Better positioned to help meet the immediate and long-term needs of trafficked persons
 - Safety
 - Emergency housing
 - Food/clothing
 - Law enforcement
 - Legal assistance
 - Transitional living assistance (housing, job skills, GED, etc)
- Collaboration with anti-trafficking partners
 - Know your local resources
 - Develop cooperative response strategies

Copyright© 2018 Massachusetts General Hospital

Thank You

wmacias@mg.harvard.edu

Twitter: @WMaciasK

MMS-MGH Guidebook:

<http://www.massmed.org/humantrafficking/>
 #VWVATD9LyvIU