



SOAR to Health and Wellness



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office on Trafficking in Persons



**NATIONAL HUMAN TRAFFICKING
TRAINING AND TECHNICAL
ASSISTANCE CENTER**

SOAR to Health and Wellness Course Objectives

After you complete this module, you'll be able to:

1. Describe the types of human trafficking in the United States
2. Recognize possible indicators of human trafficking
3. Screen and identify individuals who have been trafficked
4. Assess the needs of individuals who have been trafficked and deliver appropriate services
5. Share the importance of human trafficking awareness and responsiveness with others in your work environment

Today's Training Facilitator

Annie Lewis-O'Connor PhD, NP-BC, MPH, FAAN

Senior Nurse Scientist

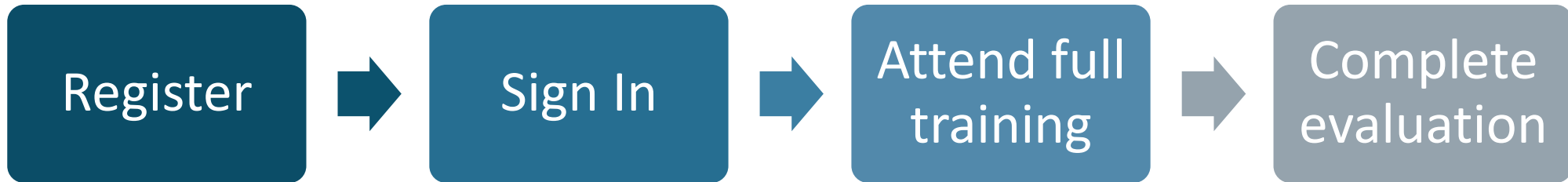
Founder and Director- C.A.R.E Clinic

Coordinated Approach to Resiliency and Empowerment

Co-Chair- Partners Trauma-Informed Care Initiative

Instructor- Harvard Medical School

Continuing Education Requirements





Pulse Check

- Could you identify a person who is at risk or may have been trafficked?
- Have you ever encountered a person who may have been trafficked?
- Do you know how to respond if/when you do encounter a person who is being trafficked?



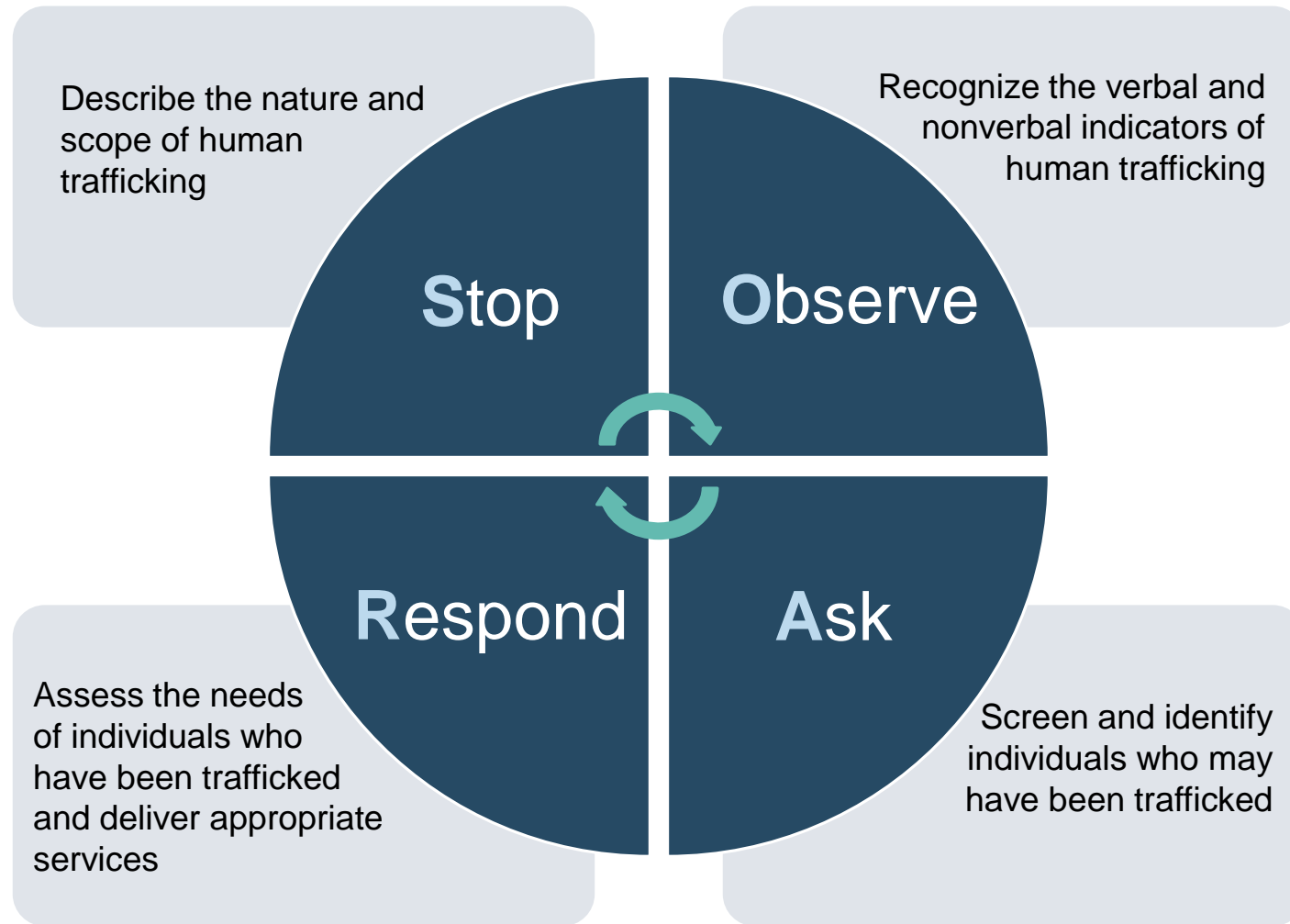


What is Public Health?

Public health is the science of protecting and improving the health of people and their communities. This work is achieved by promoting healthy lifestyles, researching disease and injury prevention, and detecting, preventing and responding to infectious diseases.

Centers for Disease Control Foundation
<https://www.cdcfoundation.org/what-public-health>

SOAR Framework



What Do We Mean by “Trauma”?

“Individual trauma results from an event, series of events or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional or spiritual well-being.”

Substance Abuse and Mental Health Services Administration
(SAMHSA) Health Resources and Services Administration (HRSA)
Center for Integrated Health Solutions
<http://www.integration.samhsa.gov>

Trauma-Informed Approach



[Substance Abuse and Mental Health Services Administration](#)

Culturally and Linguistically Appropriate Services (CLAS) Standards

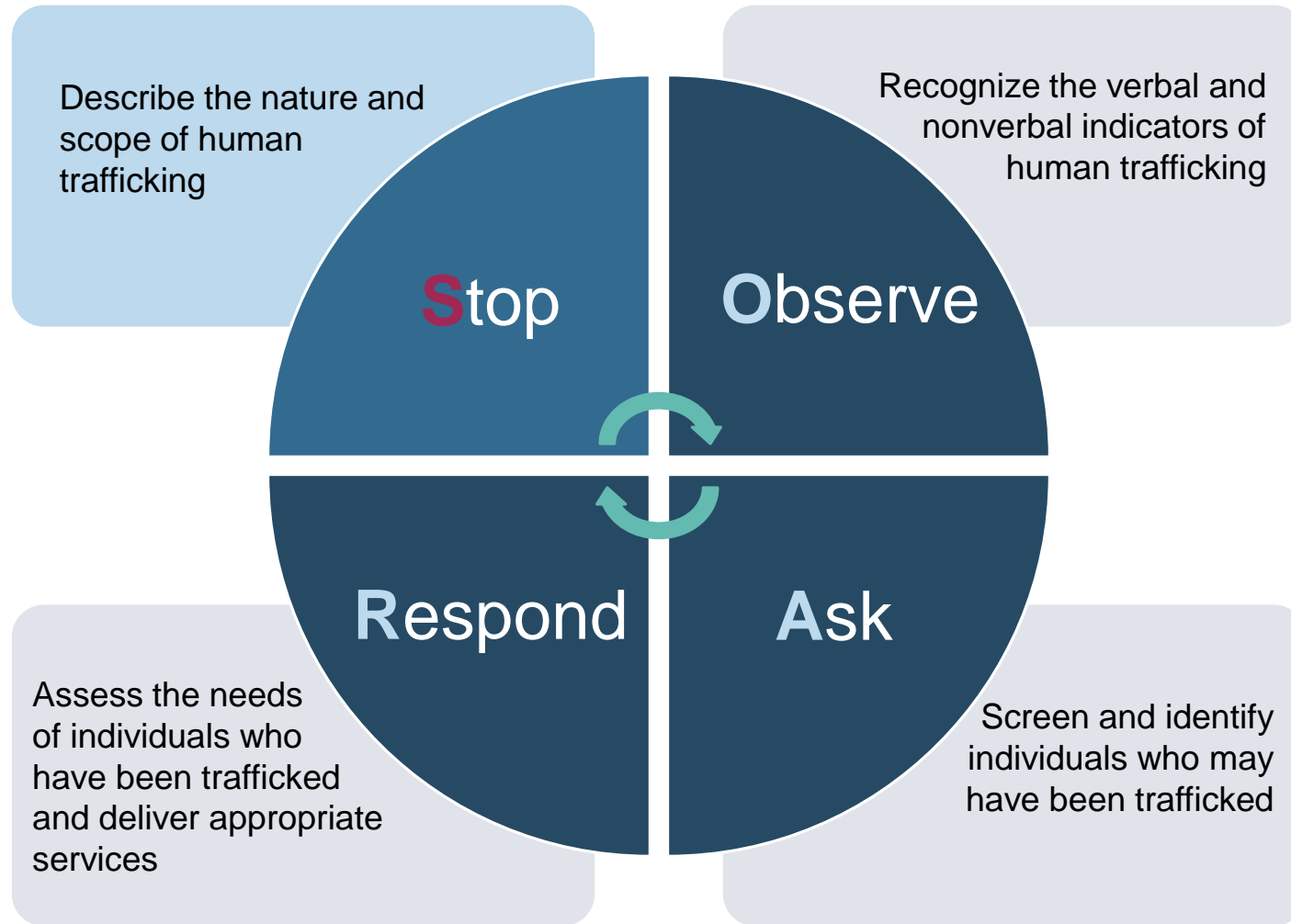
CLAS helps organizations be respectful of and responsive to:

- Cultural health beliefs and practices
- Preferred languages
- Health literacy levels
- Communication needs



[Department of Health and Human Services site for Culturally and Linguistically Appropriate Services Standards](#)

Stop



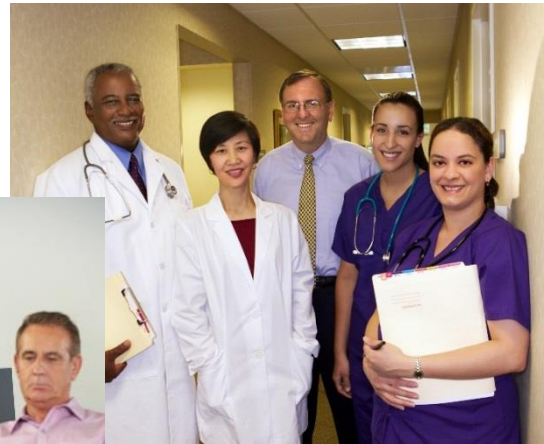
Your Role



Social Service
Providers



Public Health
Professionals



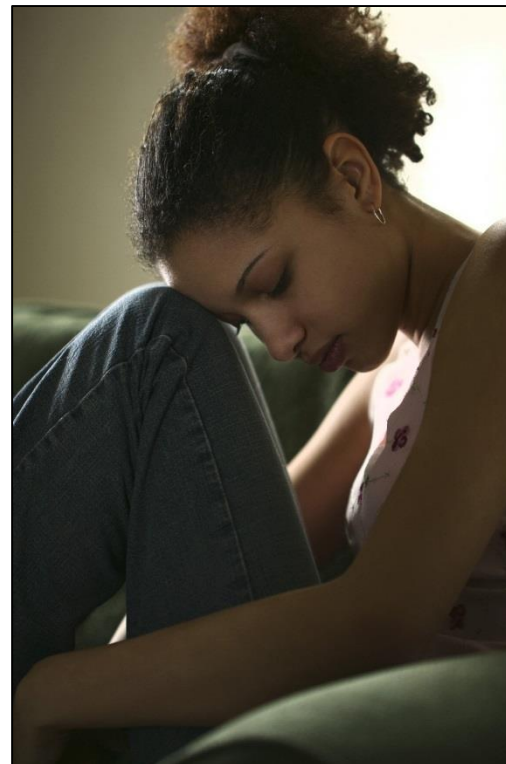
Health Care
Providers



Behavioral Health
Professionals

Case Study: Liza

- Grew up in foster care with abusive foster parents and was first forced into sex trafficking at age 11
- Ran away from foster home frequently
- Left foster home permanently at age 12
- Manipulated by trafficker into sex trafficking
- Abused physically and emotionally by her trafficker

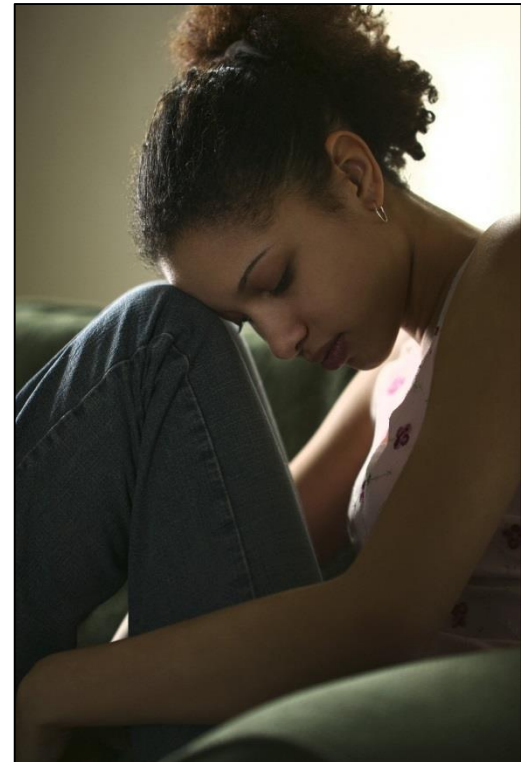


Case Study: Liza

If Liza came in to your office or emergency department, how would you proceed?

What indicators would alert you that she might be a victim of human trafficking?

What questions would you ask?



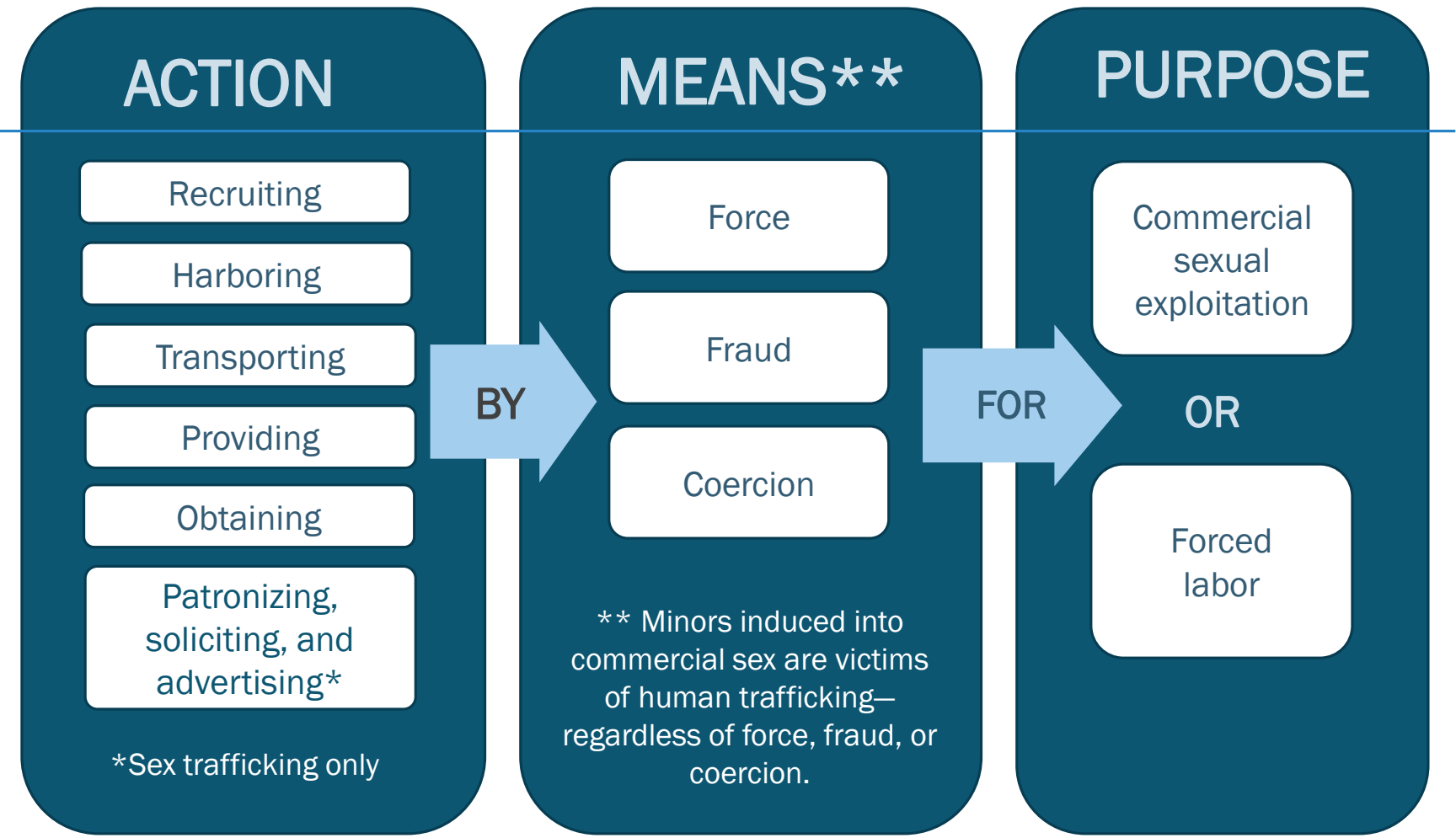
Definition

*What do we mean by **human trafficking**?*

Human trafficking is a crime involving the exploitation of someone for the purpose of compelled labor or a commercial sex act through the use of force, fraud, or coercion. Where a person younger than 18 is induced to perform a commercial sex act, it is a crime regardless of whether there is any force, fraud, or coercion.

—The Trafficking Victims Protection Act

Trafficking Victims Protection Act of 2000 (TVPA)



Victims of Trafficking and Violence Protection Act of 2000 (TVPA), Pub. L. No.106-386, 8 U.S.C. §1101, §7101, 114 STAT 1464 (2000)

Types of Trafficking



Sex Trafficking



Labor Trafficking

Force, Fraud, and Coercion



Force—Physical assault, sexual assault, physical confinement, isolation



Fraud—False promises about work and living conditions, false pretenses for interpersonal relationships, use of fraudulent travel documents, fraudulent employment offers, withholding wages



Coercion—Threats of serious harm or psychological manipulation such as holding someone at gunpoint, threatening the life and safety of a person or their family and friends, withholding legal documents, debt bondage

Vulnerable Populations

- History of abuse and neglect
- Runaway and homeless youth
- Victims of domestic violence
- Lesbian, gay, bisexual, transgender, and questioning (LGBTQ) individuals
- Foreign nationals
- Racial and ethnic minorities
- Individuals with disabilities
- Low socioeconomic status
- History of substance use
- Communities exposed to intergenerational trauma

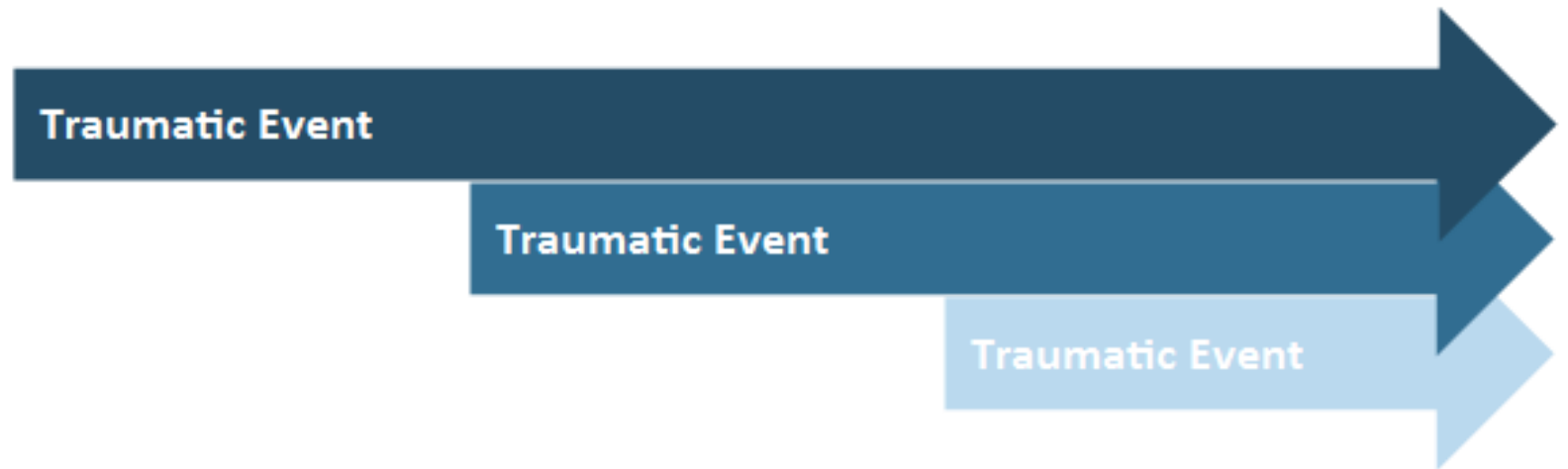
Pulse Check

Which vulnerable populations are you most likely to encounter during your work day?



Polyvictimization and Human Trafficking

Childhood



Adulthood

Impact of ACE



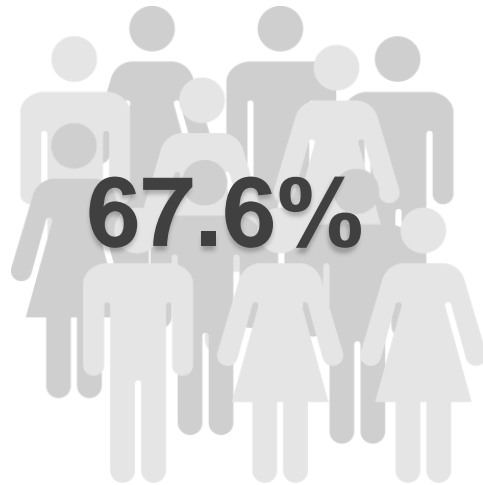
Possible Risk Outcomes



Encountering Individuals Who Have Been Trafficked

- Child welfare and family services
- Health care settings (especially hospital emergency departments)
- Advocacy work in immigrant communities (e.g., migrant farmworkers)
- Homeless shelters
- Substance use and addiction counseling
- Sexual assault services
- Elementary, middle, and high schools
- Outreach programs for homeless or runaway youth
- Resettlement programs for immigrants, refugees, and/or torture survivors
- Prison release programs
- Dental office

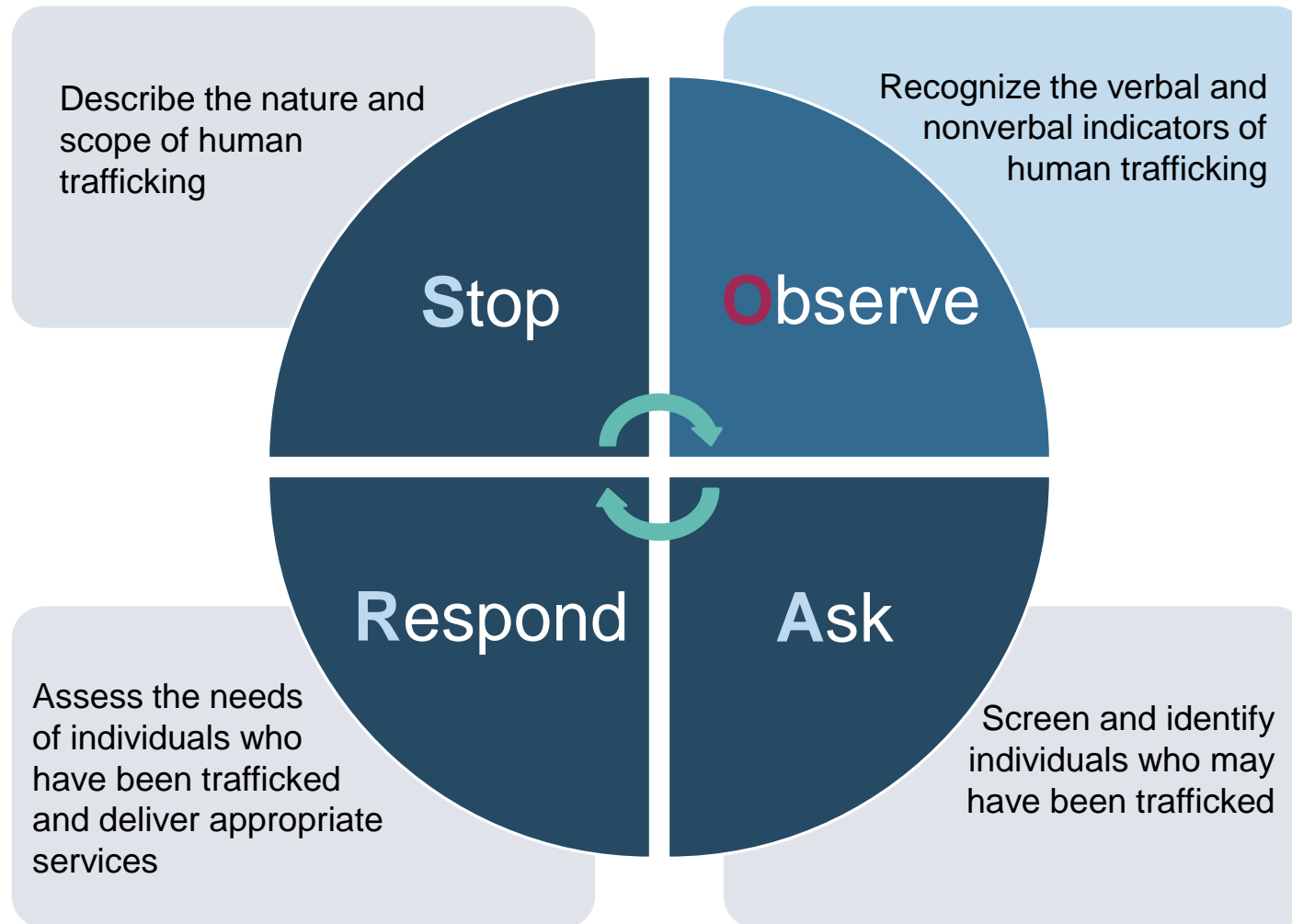
Identifying Trafficking in Health Care Settings



**Individuals who have been
trafficked are
highly likely to come into
contact with someone within
the health system**

Chisolm-Straker, M., Baldwin, S., Gaïgbé-Togbé, B., Ndukwe, N., Johnson, P., Richardson, L. (2016). Health care and human trafficking: We are seeing the unseen. *Journal of Health Care for the Poor and Underserved*, 27(3), 1220–1233. <https://doi.org/10.1353/hpu.2016.0131>

Observe



“Red Flags” That Indicate Human Trafficking

Physical Health

- Frequent treatment for sexually transmitted infections
- High number of sexual partners
- Multiple pregnancies/abortions
- Exposure to toxic chemicals
- Dental issues
- Bruising and burns
- Signs of self-harm
- Weight loss or malnourishment
- Respiratory issues
- Suicide attempts
- Physical and sexual abuse

Behavioral Health

- Confusing/contradicting stories
- Inability to focus or concentrate
- Unaware of current date, location, or time
- Protects person who hurt them
- Minimizes abuse
- Guilt and shame about experiences
- Suicidal ideations
- Extreme timidity
- Aggressive, antagonistic, or defensive
- Heightened stress response
- Posttraumatic stress disorder
- Withdrawn
- Depressed

Social/Environmental

- Absent from school
- Failing grades
- Sudden increase in substance use
- Change in dress
- Age-inappropriate romantic partner
- Change in friends
- Repeat runaway
- Not able to speak for oneself or share information
- Evidence of being controlled
- Wears inappropriate clothing for the weather
- Lives at worksite
- Multiple people in cramped living space

What are some of the patient/client-related barriers that prevent identification?

Patient/Client-Related Barriers That Prevent Identification

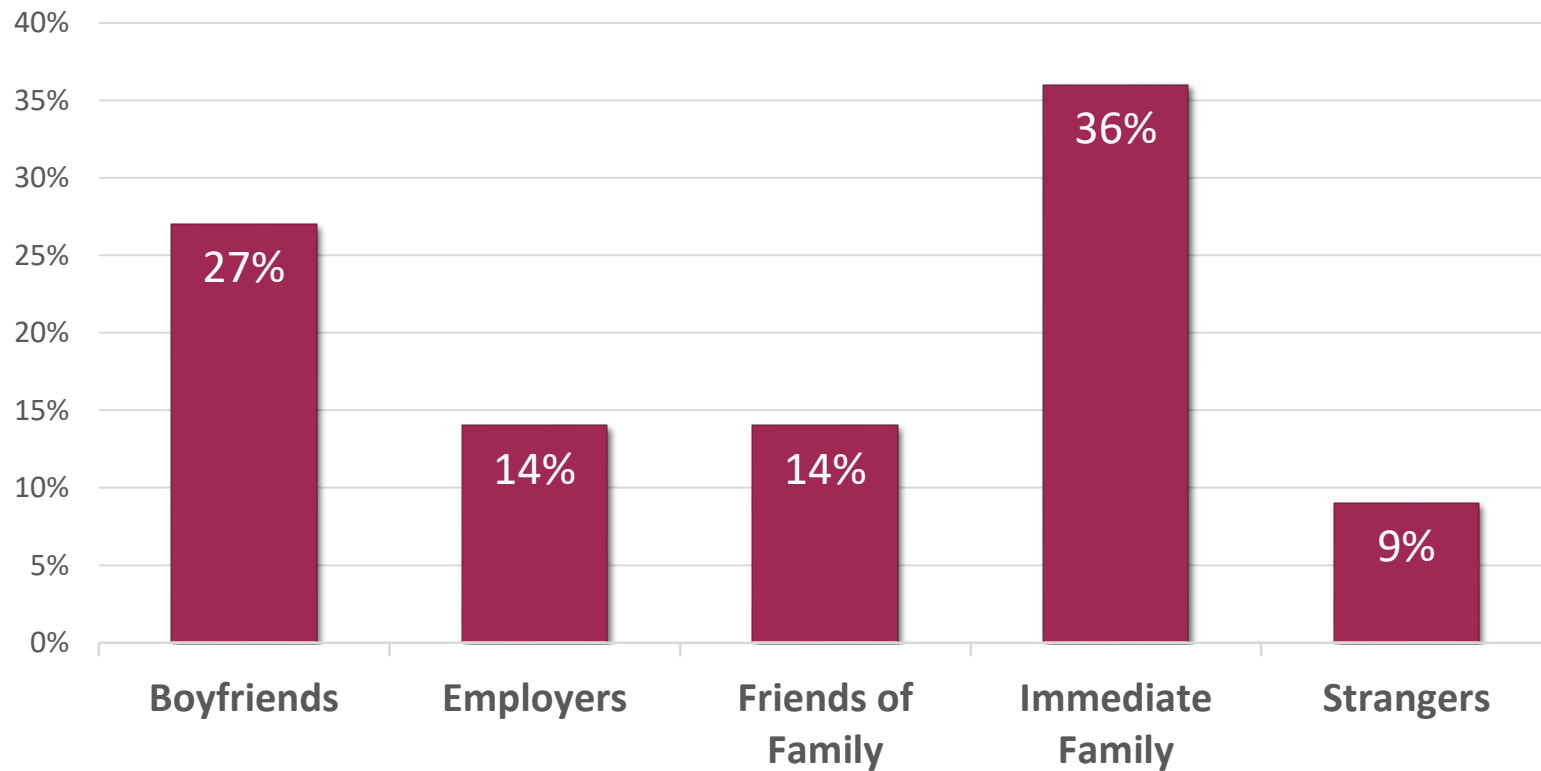
- Lacks awareness of victimization
- Lacks understanding of legal rights
- Lacks I.D. and other records
- Has a language barrier
- Fears deportation or law enforcement
- Has experienced trauma bonding with the trafficker or other victims
- Fears that reporting could lead to return to an abusive home, jail, or foster care placement
- Feels complicit in an illegal act
- Fears that traffickers will cause harm to self, family, or loved ones
- Has limited literacy and education that hinders the ability to communicate
- Distrusts the provider or those in authority
- Feels hopeless and helpless
- Feels shame or guilt

Source on importance of training: The Campaign to Rescue and Restore Victims of Human Trafficking. Resources: The mindset of a human trafficking victim. <http://www.acf.hhs.gov/programs/orr/resource/rescue-restore-campaign-tool-kids>. Published September 30, 2008. Accessed January 24, 2014.

Provider-Related Barriers That Prevent Identification

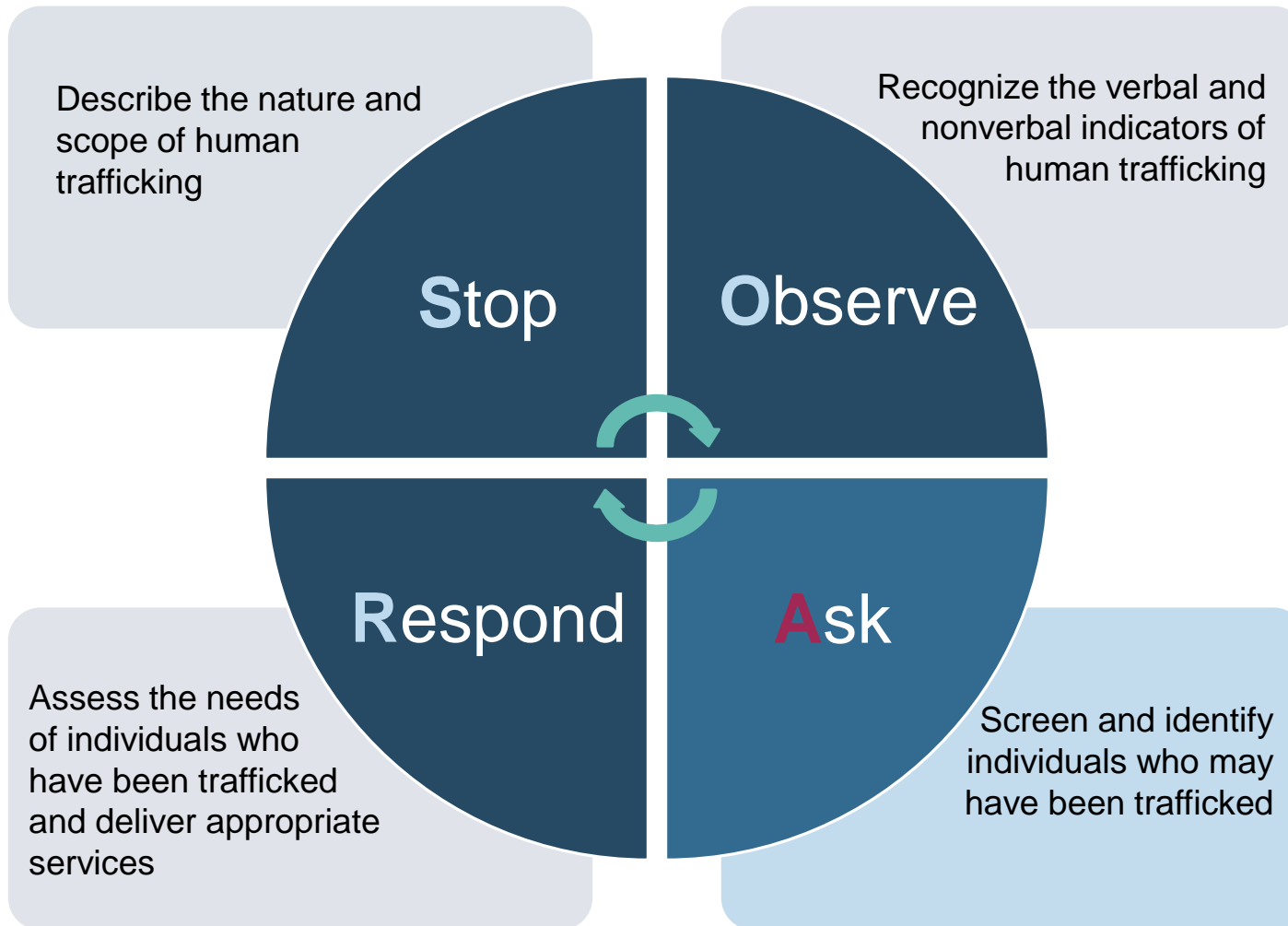
- Lacks knowledge about human trafficking
- Has inadequate understanding of federal, state, and local human trafficking laws
- Fears violating HIPAA rules
- Lacks trauma-informed care training
- Misidentifies the case
- Has preconceived notions of how a victim of trafficking will present
- Lacks access to neutral, professional interpreters
- “Checks off boxes” without seeing the full patient or client situation
- Thinks that asking will be time-consuming or too complex
- Feels the patient is unresponsive or hostile to questioning or tells a rehearsed story
- Lacks information on good referral options
- Attributes behavior(s) to harmful cultural stereotypes
- Does not believe it is his or her role to get involved

Common Relationships Between Victims and Traffickers



Covenant House New York and Fordham University's Applied Developmental Psychology Department. Homelessness, survival sex, and human trafficking as experienced by the youth of Covenant House New York. May 2013. <https://traffickingresourcecenter.org>.

ASK



Your Role in Screening for Trafficking

- Gather information necessary to identify the services your patient/client needs
- Use trauma-informed screening; avoid asking for a detailed history of their exploitation
- Screen in a safe, neutral location
- Provide interpreter services as needed



Screening Questions



Human trafficking screening tools should collect information to determine:

- **Emergency needs**
- **Medium-term needs**
- **Long-term needs**

Avoid talking in depth about a person's exploitation. Screening should be focused only on assessing the person's needs and determining how you can meet them.

NHTTAC's Screening Tool



Screening tool to identify minors
who are being trafficked



**NATIONAL HUMAN TRAFFICKING
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Screening tool to identify adults
who are being trafficked

Separating the Patient or Client From a Possible Trafficker



When should an individual be separated from a suspected trafficker?

What reason should be given?

Who will do the separating?

What safety measures are needed?



Case Study: Sione

- Agreed to work a day job on a fishing vessel but was forced to remain aboard for 3 months
- Injured his foot while on board, received no medical treatment, and was forced to continue working
- When his foot became so infected he could no longer work, Sione's traffickers left him in Honolulu
- Traffickers left him without money or papers, and threatened that if he went to the authorities, he would be arrested for entering the country illegally

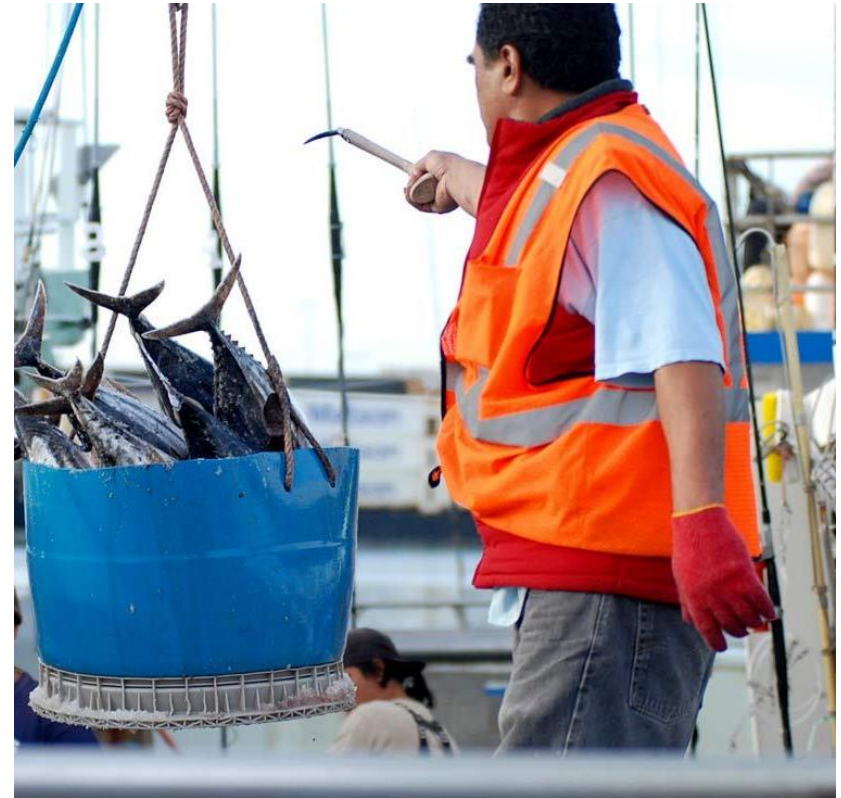




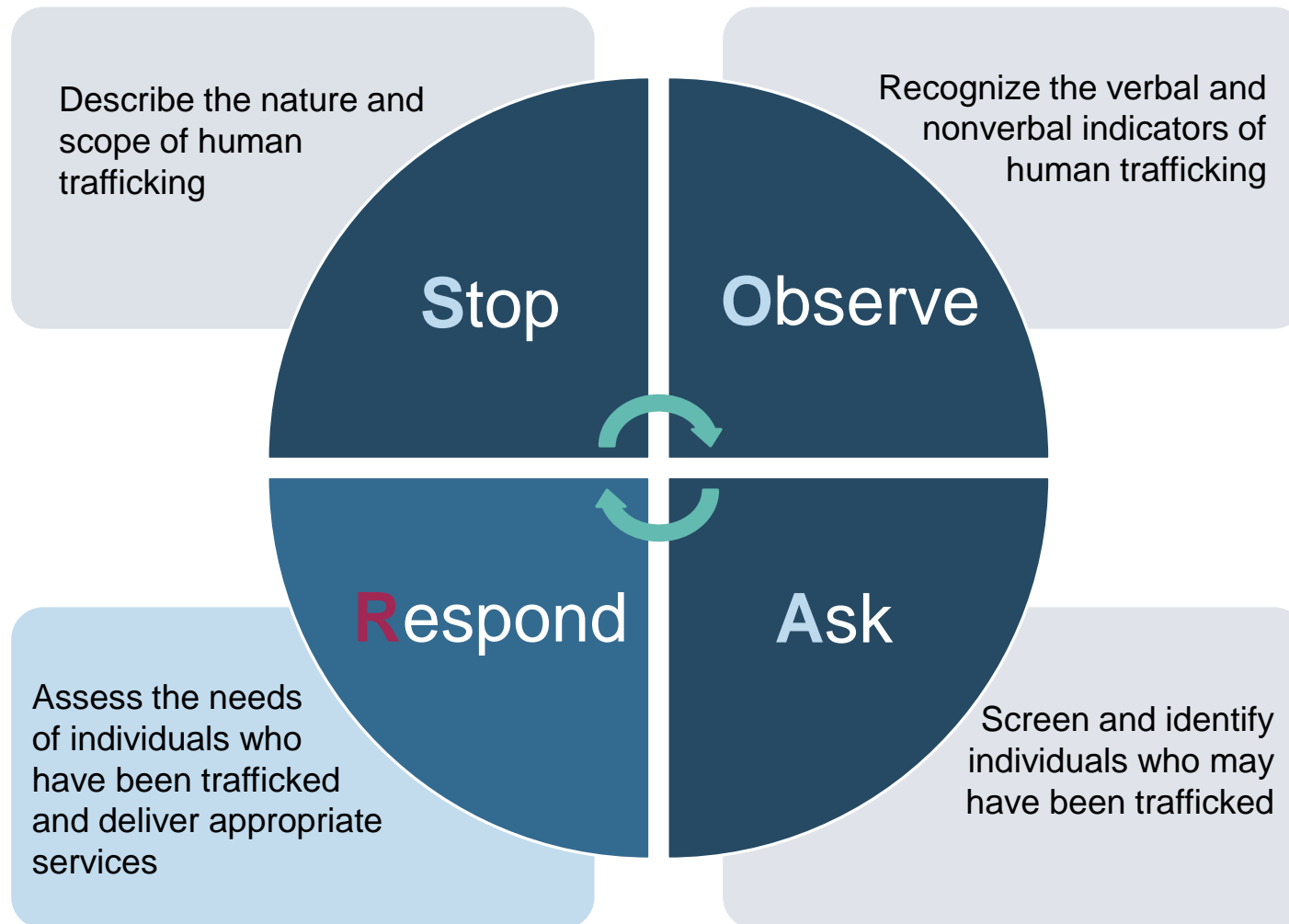
Case Study: Sione

Identify the force, fraud, or coercion used in this case.

What patient/client or provider barriers might influence the way you understand Sione's case?



Respond



Staff Training



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Screening and Identification

Safety Planning

- What patient/client and staff safety needs should be considered?
- What will you do if the trafficker refuses to be separated from the patient/client?
- How should you respond when you reach a level of certainty that the patient/client has been trafficked, but they refuse any intervention?



How will the response team differ for patients/clients who:

- **are at-risk of being trafficked**
- **have been trafficked**
- **have a history of trafficking**

Multidisciplinary Response and Referral Networks



Mandated Reporting

Human Trafficking

Child Abuse or
Neglect

Domestic Violence

Health Insurance
Portability and
Accountability Act
(HIPAA)

When to Report?

During the screening process for any of these crimes, if you are a mandated reporter, you are required to report suspected abuse. Many federal laws have expanded mandatory reporting requirements related to human trafficking.

Select each topic for information and resources on current federal and state laws that affect mandated reporting.

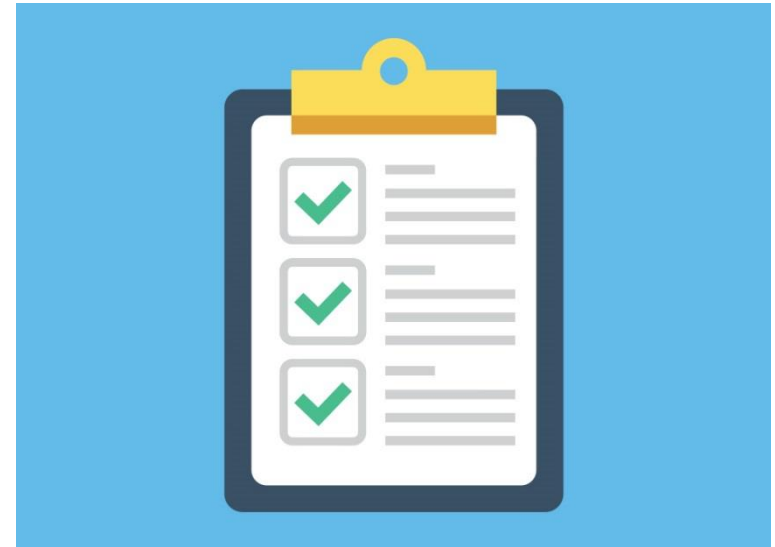
Follow-Up or Follow-Through Procedures

- Establish trust and receive buy-in from the client/patient.
- Engage the client/patient at every step of the follow-up process.
- Maintain high level of confidentiality.
- Empower the client/patient by including them in the development of their after-care plan.



Protocol Components

1. Staff training
2. Screening and identification
3. Interview procedures
4. Safety planning
5. Multidisciplinary treatment and referral process
6. Mandatory reporting and HIPAA compliance
7. Follow-up and follow-through



Identifying Champions for Protocol Development

Development of a protocol requires at least one person who has the authority to move the process forward. Who has the authority?

- Executive director
- Program manager
- School administrator
- Licensed social worker
- Emergency department director
- Hospital administrator
- Nursing director
- Dental clinic director
- Office manager



National Human Trafficking Hotline

- Comprehensive service referrals for potential victims of human trafficking
- Tip reporting to trained law enforcement
- Data and trends on human trafficking in the United States
- **Text HELP to 233733 (BEFREE)** to get help for potential victims of human trafficking or to connect with local services

**NATIONAL
HUMAN
TRAFFICKING
HOTLINE**

1-888-373-7888

National Human Trafficking Training and Technical Assistance Center



www.acf.hhs.gov/otip/training/nhttac



info@nhttac.org



NHTTAC Customer Support Center

844-648-8822

Monday through Friday

8:30 a.m. to 5:30 p.m. EST



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Pulse Check

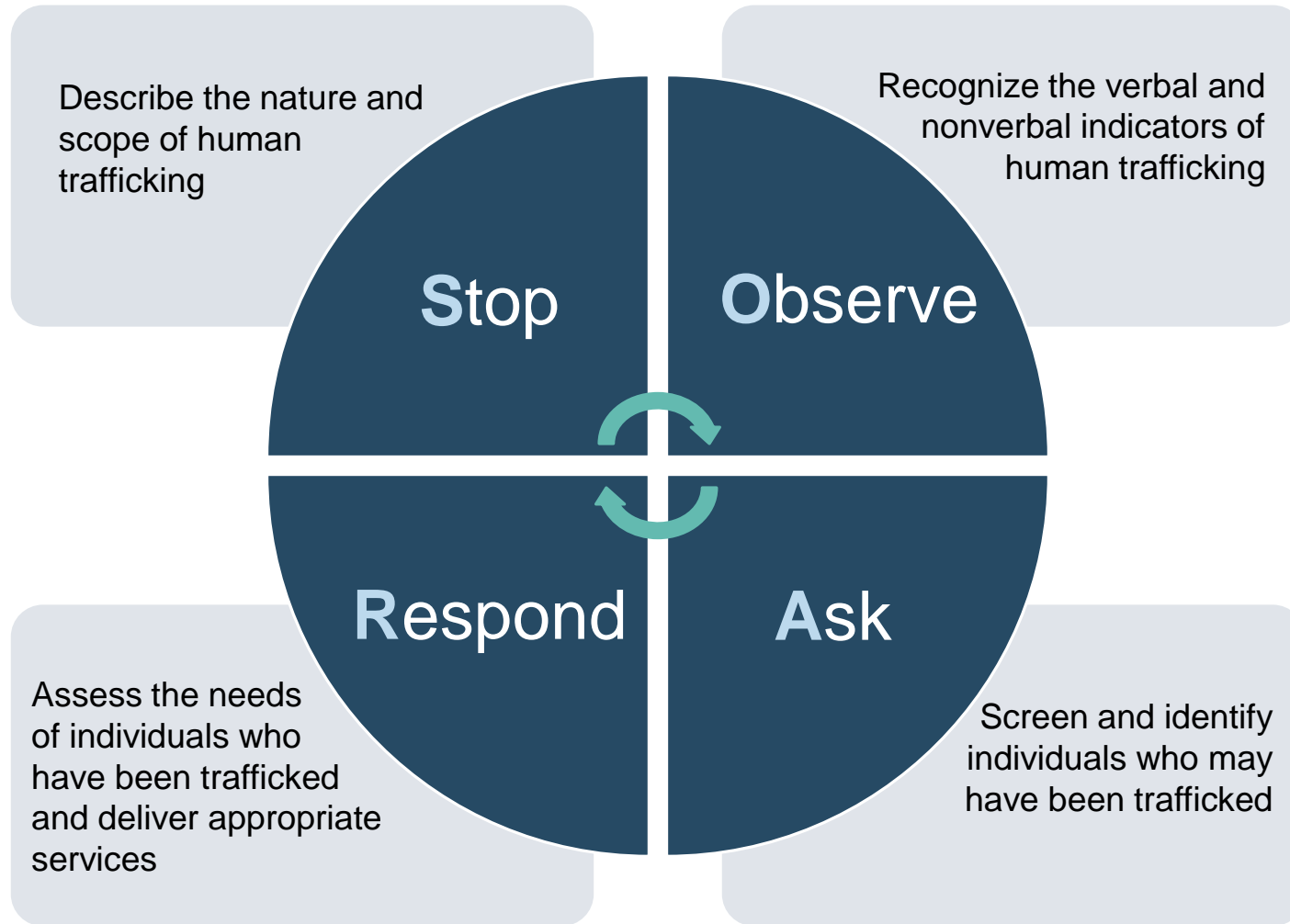
- **Could you identify a person who is at risk or may have been trafficked?**
- **Have you ever encountered a person who may have been trafficked?**
- **Do you know how to respond if/when you do encounter a person who is being trafficked?**

Training Conclusion

You should now be able to:

1. Describe the types of human trafficking in the United States
2. Recognize possible indicators of human trafficking
3. Screen and identify individuals who have been trafficked
4. Assess the needs of individuals who have been trafficked and deliver appropriate services
5. Share the importance of human trafficking awareness and responsiveness with others in your work environment

SOAR Framework



Trauma – Informed Care



Terminology



Client/Patient: an individual you encounter in a professional capacity



Victim: an individual who is currently being trafficked

- Term used when referencing laws or statutes that provide protections or resources



Survivor: an individual working towards healing in the aftermath of the trauma of trafficking

Trauma-Informed Care Learning Objectives

After you complete this module, you'll be able to:

1. Recognize the signs of trauma exposure which individuals who have been trafficked may present
2. Describe the impact trauma can have on individuals who have been trafficked
3. Define trauma-informed care
4. Identify basic trauma-informed interventions
5. Apply a trauma-informed approach to working with individuals who have been trafficked

Case Study: Janet

- Member of the Klamath tribe of American Indians
- Grew up with a physically, emotionally, and sexually abusive father
- Responded to the trauma of her home life by cutting herself and contemplating suicide
- Married a man who was abusive and eventually divorced him
- Coerced into sex trafficking by an acquaintance who used violence and the threat of harming her children to force her to cooperate



What Is Trauma?

“Individual trauma results from an event, series of **events** or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional or spiritual well-being.”

Substance Abuse and Mental Health Services Administration (SAMHSA)

<https://www.samhsa.gov/trauma-violence>

Who Experiences Trauma?

61% of men



51% of women

Substance Abuse and Mental Health Services Administration (SAMHSA)

<https://www.samhsa.gov/trauma-violence>

Signs of Trauma

Physical

- Low energy
- Hyperarousal
- Unexplained sensations or pain
- Pale
- Lethargy
- Somatic complaints
- Lack of coordination or balance

Emotional

- Detachment from other people and emotions
- Emotional numbness
- Social isolation
- Depression
- Guilt
- Shame
- Fear
- Avoidance

Behavioral

- Substance and alcohol use
- Eating disorders
- Compulsive behaviors
- Changes in interpersonal relationships
- Anger-related issues

Cognitive

- Inability to concentrate
- Memory lapses
- Learned helplessness
- Increased distraction
- Intrusive thoughts

Coping and Adapting to Signs of Trauma

- Obsessive behavior
- Hostility
- Depression
- Sexual promiscuity
- Self-injury
- Dissociative symptoms
- Alcohol and substance use
- Social withdrawal
- Aggression and violence

Complex Trauma and Polyvictimization

“A type of trauma that occurs repeatedly and cumulatively, usually over a period of time and within specific relationships and contexts.”

Courtois, C. A. (2008). Complex trauma, complex reactions: Assessment and treatment. *Psychological trauma: Theory, research, practice, and policy*, S(1), 86100.

Adverse Childhood Experiences (ACE)

Childhood

Traumatic Event

Traumatic Event

Traumatic Event

Adulthood

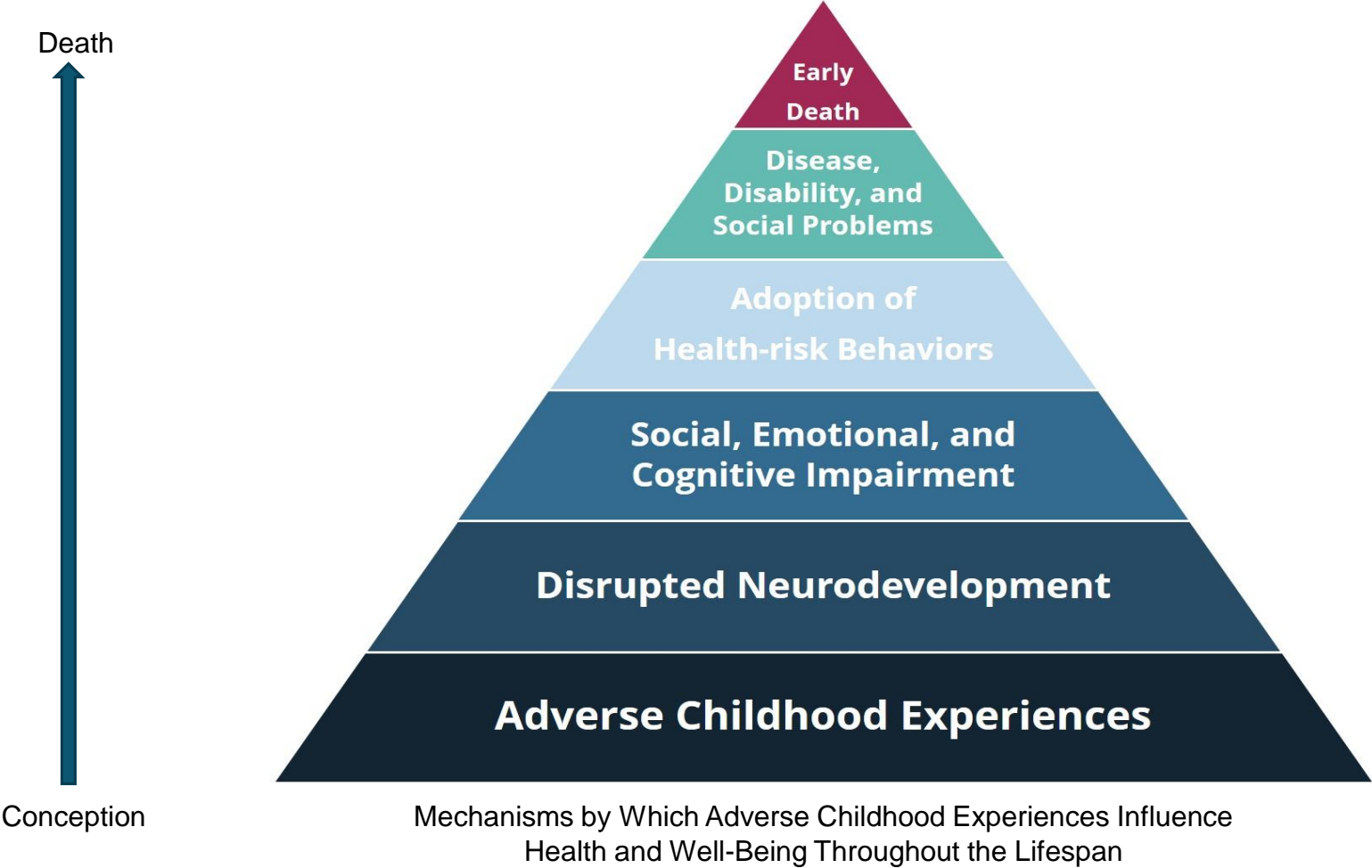
The ACE Study

Types of ACE

Prevalence of ACE

Impact of ACE

In the mid-90s, the Centers for Disease Control and Prevention (CDC) and Kaiser Permanente surveyed 17,000 participants on childhood maltreatment, family dysfunction, and current health status and behaviors for a study on Adverse Childhood Experiences (ACE). The ACE Pyramid represents the conceptual framework for the ACE Study, noting how strongly related ACEs are to the development of risk factors for disease, as well as a person’s well-being throughout their lifespan.



<https://www.cdc.gov/violenceprevention/acestudy/about.html>

Types of ACE

Abuse



Emotional



Physical



Sexual

Household Challenges



Mother Treated
Violently



Substance
Use



Mental
Illness



Separation or
Divorce



Criminal Household
Member

Neglect

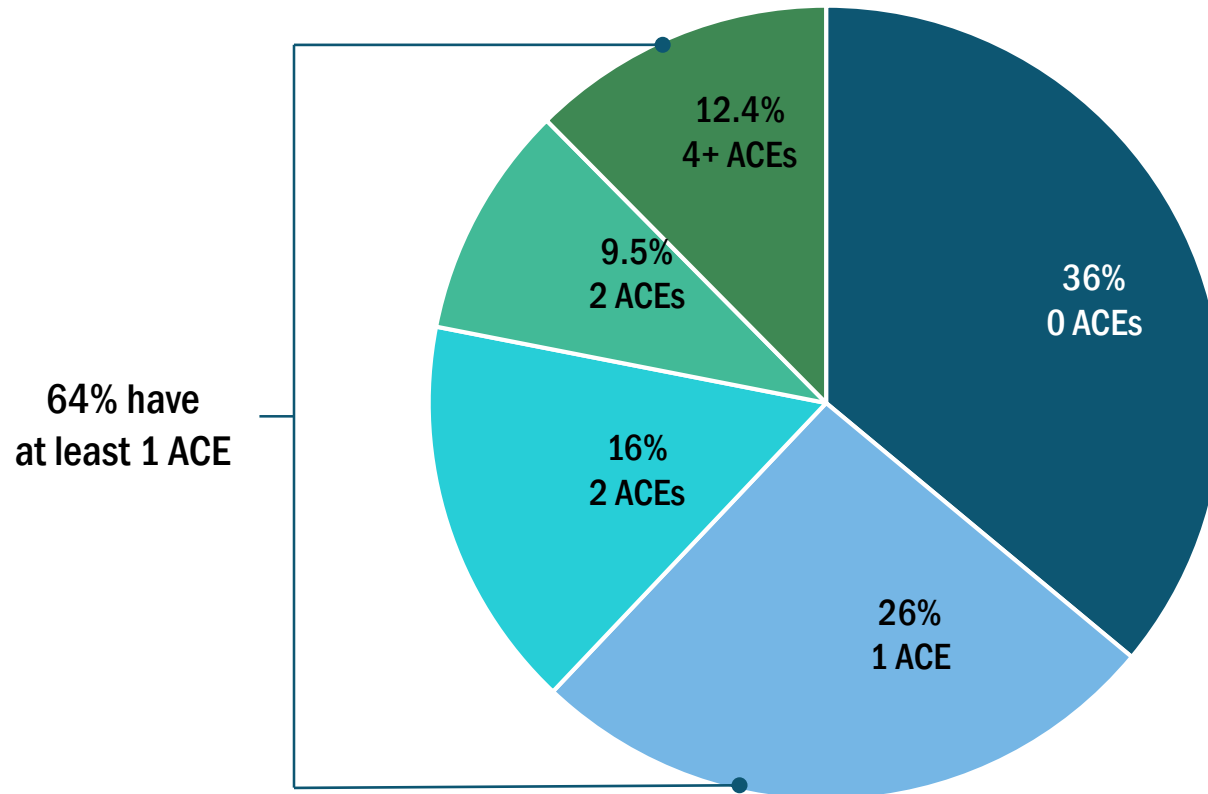


Emotional



Physical

The ACE study found that ACEs are common. Of the 17,000 participants, almost two-thirds reported at least one ACE. More than one in five reported three or more ACEs. For the full study results, visit [About the CDC-Kaiser ACE Study](#).





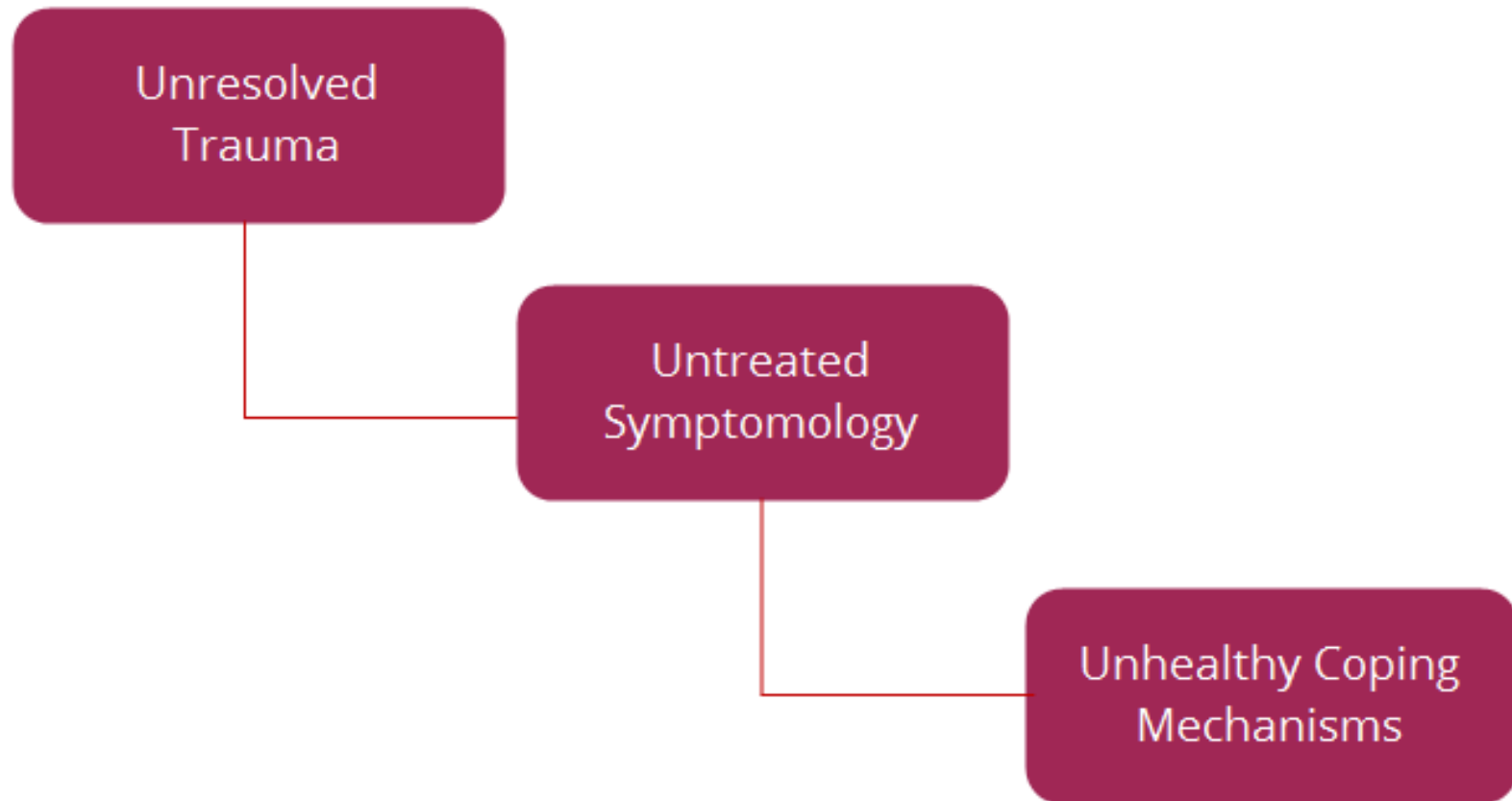
The study found that as the number of ACEs a person has increases, so does their risk for negative health outcomes, such as those shown below, as well as human trafficking and other crimes. Not all individuals who experience ACEs will develop negative health outcomes or become victims of crime.

Possible Risk Outcomes



Graphic adapted from: [Robert Wood Johnson Foundation](#)

Trauma and Trafficking



Posttraumatic Stress Disorder

“Post-traumatic stress disorder (PTSD) is a **mental disorder** that can occur when a person has seen or lived through trauma. Most people have a natural response to trauma, called the **fight-or-flight response**. The response can protect a person from harm by causing changes in the body to help **defend** against danger (fight) or **avoid** it (flight). In some cases, a person has a third type of response (**freeze**) and cannot do anything.”

Substance Abuse and Mental Health Services Administration (SAMHSA)
<https://www.samhsa.gov/treatment/mental-disorders/post-traumatic-stress-disorder#definition>

Posttraumatic Stress Disorder and Human Trafficking



Psycho-Physiological Impacts of Trafficking



Symptoms of PTSD

Compounding Factors for Trauma



Knowledge Check

Janet began to experience traumatic events as a young child. Trauma that occurs repeatedly, usually over a period of time and within specific relationship and contexts is called:

- Traumatic Event
- Posttraumatic Stress
- Complex Trauma

Case Study: Janet

- Once, a social worker visited Janet's apartment to perform a child welfare check.
- She asked Janet if she was being abused and Janet, fearful of her trafficker, lied and said she wasn't.
- The social worker then asked Janet if she was Native American.
- When Janet said she was, the social worker gave her a referral for drug treatment program, even though Janet wasn't using any substances



What Is Trauma-Informed Care?



Definition



Goal



Challenges

Trauma-Informed Care

Trauma-informed care can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing.

Trauma-Informed Approach



Victim and Survivor-Centered Response

Avoid:

- Activities that ostracize the Individual
- Mirroring the behavior of traffickers by limiting or not offering choices



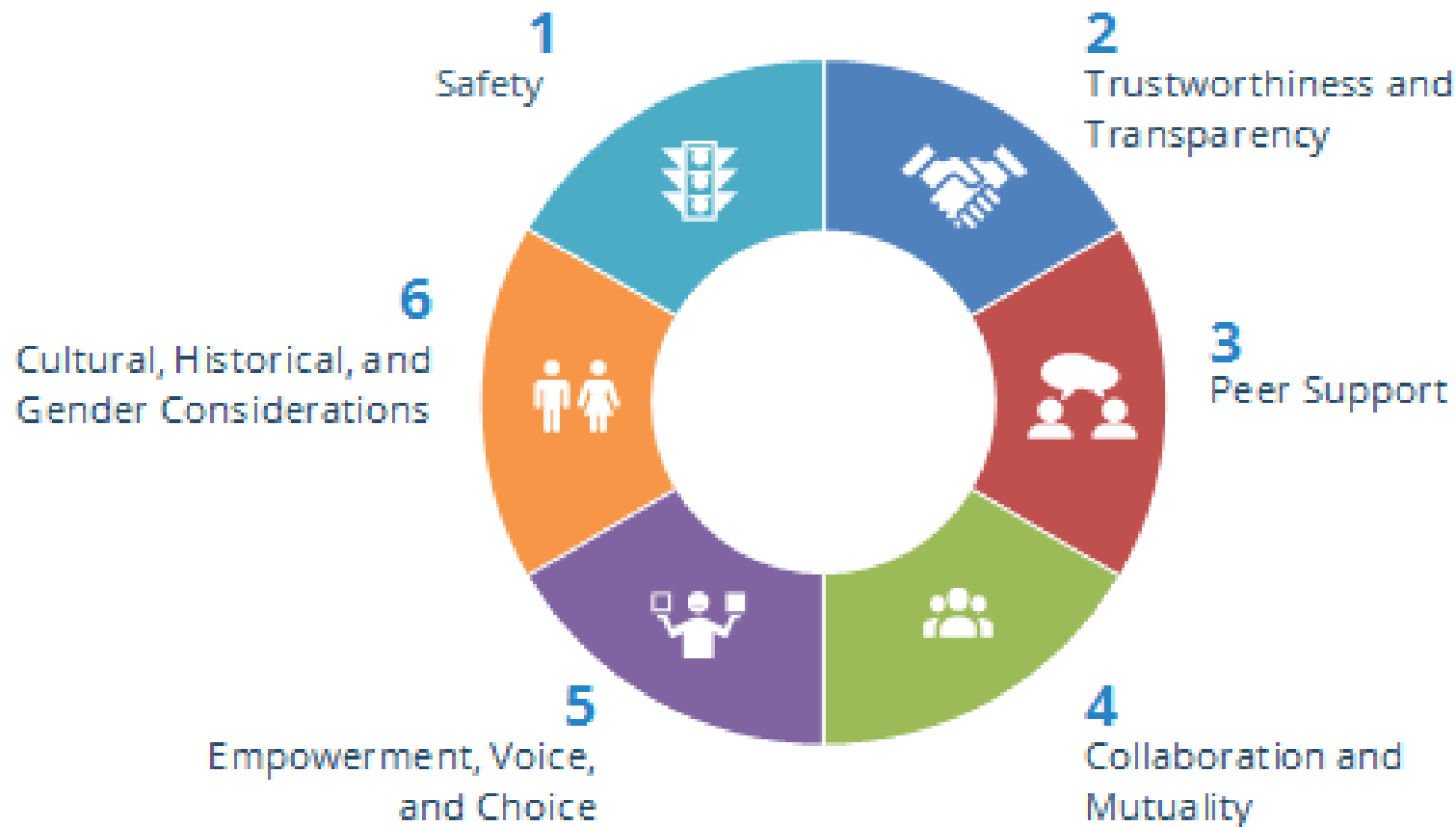
Victim and Survivor-Centered Response

Their Wishes

Their Safety

Their Well-Being

Six Principles of a Trauma-Informed Approach



SAMSHA's Concept of Trauma and Guidance for a Trauma-Informed Approach (2016)

Self-Assessment

Rate how well your organization does in each of the following.	1	2	3	4	5
Ensure survivors feel respected when they seek services from you or your program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Create a warm, hospitable, inviting environment, free of any items or stimuli that may be stressful or uncomfortable for survivors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ensure patients/clients will feel physically safe and emotionally secure when talking with staff on the phone or meeting in person in your offices.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ensure survivors receive the information they need about trauma and the various treatment options.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Create opportunities for peer support, leadership, and mentoring.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1 = Very Well 5 = Needs Improvement

Empowering Survivors

- Let survivors know you will provide all the support you can to help them cope with the trauma.
- Avoid referring to or viewing patients or clients as “my victims” or “my survivors” or “our girls.”
- Take every opportunity to acknowledge that your patients/clients are individuals capable of self-determination.
- Let survivors determine their own futures, even if you do not agree with them.
- Survivors should know they are free to not answer a particular question or even stop and resume services at a later date

Basic Trauma-Informed Interventions

Outreach and Engagement	Mental Health and Substance Abuse Services
Crisis Intervention	Resource Coordination and Advocacy
Parenting Support	Trauma-Specific Services
Screening and Assessment	Health Care

Women, Co-Occurring Disorders and Violence Study

Knowledge Check

The social worker who visited Janet's apartment didn't use a trauma-informed, victim-centered approach when working with Janet. What could a social worker in this situation have done differently to use a trauma-informed approach? Select all that apply.

- Ask Janet if she needed help
- Avoid making assumptions based on Janet's ethnic heritage
- Try to build a rapport with Janet and check in again later to see if she and her children are alright

Trauma and Trafficking

