Human Trafficking: Regulations and Implications for Health Care

Holly Austin Gibbs, Dignity Health
Learning Objectives

- **Recognize** common misconceptions of HT
- **Describe** impact to healthcare orgs and front line workers
- **Consider** regulations and implications for compliance

Child of indentured family working in brickworks, Uttar Pradesh, India (ArtWorks for Freedom)
Introduction

Human trafficking is crime based on exploitation\(^1\)

Traffickers prey on vulnerability. Crosses all age, economic, cultural, gender, sexual orientation, racial, and social lines.

International Labor Organization (ILO) estimates:\(^2\)

- 40+ million victims worldwide
- 71% women and girls
Many Forms of Exploitation Worldwide

Organ trafficking in Philippines (“Tales from the Organ Trade” by Associated Producers Ltd)

**Child soldiers** in Uganda, **child brides** in India, **sex trafficking** of women and children in Thailand.⁴

Forced labor & human trafficking fuel **$150 billion industry worldwide.**³ How can WE make a difference?
Healthcare professionals come in contact with trafficked persons.

2017 survey report:\(^5\)

- Surveyed labor and sex trafficking survivors
- Over half reported healthcare encounter during victimization
- Nearly 97% received no information about human trafficking

Medical care providers too often unprepared to identify victims.

We can change that!
Hello humankindness

Dignity Health, with Dignity Health Foundation, launched program to identify trafficked persons in healthcare settings and assist with trauma-informed care.

Aligns with core mission and values:

• Deliver **compassionate**, high quality, affordable health services

• **Serve and advocate** for our sisters and brothers who are poor, disenfranchised

• **Partner with others** in community to improve quality of life

Access HT 101 and other resources here: [dignityhealth.org/human-trafficking-response](dignityhealth.org/human-trafficking-response)
Myth #1: Human trafficking only happens overseas.
Shyima Hall’s Story

Every country is affected, including the United States.

- Traded into slavery by parents, in Egypt, age 8
- Moved/forced into domestic servitude
- Cooked, cleaned, cared for children 12+ hours daily
- Forced to wash clothes in bucket, slept in garage

Age 12, recovered by law enforcement.

From HIDDEN GIRL by Shyima Hall. Copyright © 2014 by Shyima Hall. Reprinted with the permission of Simon & Schuster Books for Young Readers, an imprint of Simon & Schuster Children’s Publishing Division. All rights reserved.
National Statistics on Human Trafficking

National HT Hotline: Human trafficking reported in all 50 states, D.C.\textsuperscript{7} 2017 Statistics:

- **Arizona**: 181 reports of human trafficking, 49 underage victims\textsuperscript{8}
- **California**: 1,305 reports of human trafficking, 378 underage victims\textsuperscript{9}
- **Nevada**: 199 reports of human trafficking, 45 underage victims\textsuperscript{10}

Areas affected by human trafficking, 2017 (Polaris, national anti-trafficking organization, operates National HT Hotline)
Federal legislation outlaws:

- **Sex trafficking**
- **Labor trafficking**

**Commercial sex**: sex act in which something of value is exchanged (e.g. money, drugs, survival needs).\(^{11}\)

AMP Model (National HT Hotline)
Angela Guanzon’s Story

Angela **recruited** from Philippines to work in nursing facility
- Passport confiscated
- Told she owed $12,000
- Restricted from leaving work facility
- Slept on floor
- Threatened, forced to work with little pay

After two years, Angela recovered by law enforcement. Examples of A-M-P in her story? Questions?

Angela is member of National Survivor Network, program created by CAST in Los Angeles, CA. (Photo courtesy of Angela Guanzon, Leslie Menocal, and Runaway Girl, Inc.)
Force, Fraud, and Coercion

**Force** can involve physical restraint, physical harm

**Fraud** involves false promises regarding employment, wages, working conditions

**Coercion** can involve threats against any person, abuse/threatened abuse of legal process\(^{13}\)
EXCEPTION: Sex Trafficking of Children/Youth

**Force, fraud, coercion NOT required** in cases involving minors (<18) induced to perform commercial sex

- Minors easier to manipulate
- Sex traffickers *lure* minors into relationships or *running away from home* with false promises of new, glamorous life

(Photo Source: Truckers Against Trafficking; Photo Credit: Sherry Dooley)
Three Victim Populations

TVPA: Three victim populations of criminal human trafficking

- Any minor (<18) induced to perform commercial sex under any circumstance
- Any adult induced to perform commercial sex via force, fraud, coercion
- Anyone, of any age, induced to perform labor/services via force, fraud, coercion. Labor trafficking includes debt bondage (Angela’s story), forced labor, and involuntary child labor (Shyima’s story).

If you suspect a patient may be a victim, refer to Abuse, Neglect, and Violence Policy, which includes PEARR Tool.
Follow JC and CMS Requirements

Examples for Acute Care Facilities:

- **Prevent and investigate reports** of abuse/neglect of patients by staff or any other person on-site;
- **Educate staff** about child abuse/neglect, abuse/neglect of vulnerable adults, IPV/DV, and sexual violence, including written criteria for identification;
- **Maintain a list** of community agencies to assist with referrals

JC Source: Elements of Performance for PC.01.02.09
Reflect Guiding Principles of TIC

Trauma can affect how individual engages in major life areas, including health care. Health systems and professionals encouraged to practice SAMHSA’s guiding principles in all aspects of patient care and services:

• **Safety**: Throughout organization, staff and people they serve should feel physically and psychologically safe.

• **Trustworthiness and transparency**: Organizational operations and decisions are conducted with transparency and with goal of building and maintaining trust among staff, patients, and family members.

• **Peer support and mutual self-help**: These are integral to organizational and service delivery approach and are understood as key vehicle for building trust, and for establishing safety and empowerment.

• **Collaboration and mutuality**: There is true partnering and leveling of power differences between staff and patients and among staff.
Guiding Principles, Continued

• **Empowerment, voice, and choice:** Throughout organization and among persons served, individuals' strengths are recognized, built on, and validated.

• **Consideration of cultural, historical, and gender issues:** Organization actively moves past cultural stereotypes and biases, offers gender responsive services, leverages healing value of traditional cultural connections, and recognizes and addresses historical trauma.

By practicing principles, health professionals can promote patient-centered experience and **resist re-traumatization** of patients.
In partnership with **HEAL Trafficking** and **PSC**, with support from Dignity Health Foundation, **Dignity Health** developed “PEARR Tool.”

PEARR Tool offers guidance to physicians, **social workers**, nurses, other health professionals on how to provide trauma-informed assistance to patients who may be victims of ANV, including HT.

**Download** PEARR Tool here: [dignityhealth.org/human-trafficking-response](dignityhealth.org/human-trafficking-response)
PEARR stands for:

- **P**rovide privacy
- **E**ducate
- **A**sk
- **R**espect and **R**espond

Double asterisk ** indicates points at which conversation with patient may end. Once this occurs, refer to double asterisk in PEARR Tool for additional steps, i.e., report safety concerns, complete mandated reporting, continue health services.
Holly Austin Gibbs
HT Response Program Director, Dignity Health
holly.gibbs@dignityhealth.org
References and Notes (1)


References and Notes (2)


12. Email correspondence between Angela Guanzon and Holly Gibbs, Patient Care Services Program Director, Dignity Health, November 22, 2015
References and Notes (3)
