We Have That Here!

Human Trafficking in Rural America and the Rural Health System Response

Lisa Davis, MHA Director, Pennsylvania Office of Rural Health and Outreach Associate Professor of Health Policy and Administration, Penn State







Human trafficking is modern-day slavery

and involves the use of force, fraud, or coercion

to obtain some type of labor or commercial sex act.

U.S. Department of Homeland Security



The Five Myths of Human Trafficking

- Myth 1: Human trafficking means sex trafficking
- Myth 2: Human trafficking and human smuggling are the same
- Myth 3: Victims will blame their traffickers
- Myth 4: Human trafficking victims will seek help if they can
- Myth 5: Sex trafficking involves an exchange of money





Labor Trafficking and Labor Exploitation



NHTRC



Rural Human Trafficking



Rural Vulnerability

- Far apart doesn't = safer
- There are less jobs, which makes people vulnerable
- Truck stops are common
- Victims are stigmatized
- There are fewer services

"I am a detective for a small department in a small town of about 4,000. We hear rumors of people in our jurisdiction that operate prostitution rings, but due to our small town it is hard to get information to prosecute because the ring is so small (i.e., they know who to sell to and who not to). Plus, with limited resources we focus our efforts in other areas."

Tennessee Rural Law Enforcement Representative





Rural Human Trafficking Cases

Reported to the National Human Trafficking Resource Center December 7, 2007 – June 30, 2014



NHTRC



Rural Human Trafficking Victims

Rural Victims

- Often women and girls, but not exclusively
- Minors, especially runaway or homeless youth
- American Indian or Alaskan Natives
- Temporary visa holders

Risk Factors

- Prior physical/sexual abuse or neglect
- Drug dependencies
- Prior debt or economic challenges

NHTRC



Rural Sex Trafficking

Recruitment

- Familial or intimate partner recruitment
- Social networking
- Gang recruitment
- Venues
 - Commercial sex
 - Commercial front brothels
 - Truck stops

Methods of Control

- Demanding high quotas
- Withholding medical treatment
- Forced drug dependency
- Physical or sexual assault
- Psychological manipulation
- Isolation and monitoring



Rural Labor Trafficking

Recruitment

- False job advertisements
- Outside recruitment agencies
- Familial recruitment

Venues

- Agriculture
- Restaurants
- Domestic work
- Construction
- Traveling sales crews
- Carnivals and tourism

Methods of Control

- Debt bondage
- Isolation or controlled movement
- Physical or sexual abuse
- Document confiscation
- Threats against family or friends
- Psychological manipulation
- False promises during recruitment



NHTRC

Indicators of Human Trafficking

- Does the person appear disconnected from family, friends, community organizations or houses of worship?
- Has a child stopped attending school?
- Has the person had a sudden or dramatic change in behavior?
- Is the person engaged in commercial sex acts?
- Is the person disoriented, confused or showing signs of mental or physical abuse?
- Does the person have bruises in various stages of healing?
- Is the person fearful, timid or submissive?
- Does the person show signs of having been denied food, water, sleep or medical care?
- Does it appear that the person may have delayed care for an injury or illness?

U.S. Department of Homeland Security



- Is the person often in the company of someone to whom he or she defers? Or someone who seems to be in control of the situation, e.g., where they go or who they talk to?
- Does the person appear to be coached on what to say?
- Is the person living in unsuitable conditions?
- Does the person lack personal possessions and appear not to have a stable living situation?
- Does the person have freedom of movement? Can the person freely leave where they live? Are there unreasonable security measures?

Not all indicators are present in every human trafficking situation and the presence or absence of any of the indicators is not necessarily proof of human trafficking.

U.S. Department of Homeland Security



The (Rural) Health Care System Response







Medical emergencies are pivotal moments when she may be separated from her exploiter and given both physical and social assistance.

PARAMEDICS

Gain valuable information about her situation at the scene of her injuries, able to share this information with ER staff

NURSES

Spend more time with patients and their companions and may notice physical or behavioral indicators

VICTIM ADVOCATES

Available in cases of sexual assault or domestic violence, able to speak confidentially with women who may exhibit signs of trafficking and connect them to services

REGISTRATION STAFF

Uniquely positioned to observe warning signs like when a woman doesn't have control of her own money or identification

DOCTORS

In a position to see signs of exploitation and intervene

HOSPITAL ADMINISTRATORS

Positioned to adopt screening protocols and fund support staff

HOSPITAL SOCIAL WORKERS

Connect women to social services

Challenges in Identifying Rural Victims

- Accessibility
- Social isolation or exposure
- Language and technology
- Building trust and rapport





Challenges for Services

- Limited resources
- Language needs
- Transportation and limited mobility
- Relocation of victims
- Social isolation and limited support networks
- Small caseloads to provide necessity for resources or commitment of authorities



The Health Care System Response

- Accept that this is an issue for your hospital or clinic
- Identify appropriate training resources
- Develop or expand partnerships with local, regional, and state agencies
- Talk to law enforcement and the FBI
- Get support from leadership and commitment to provide resources
- Train everyone: ER physicians and staff, nurses, intake clerks, janitorial and maintenance staff, anyone who comes into contact with a patient
- Adopt a sexual assault forensic nurse examiner protocol
- Learn the signs and remove the fear of asking questions



The Importance of the Frontline Staff

Frontline Staff: those who are the first personnel to meet a patient at the point of entry into the health care system. Frontline staff may be clerks, nurses, physician assistants, physicians, security personnel, volunteers, triage, and any other staff who have first contact with the potentially trafficked persons.





Frontline Staff Goals

- Understand the elements of human trafficking
- Learn red flags and questions to ask to identify potential human trafficking victims in a health care setting
- Refer potential victim to Human Trafficking (HT) Point Person



... educated about all aspects of human trafficking so as to make appropriate decisions about the movement of the potentially trafficked person through the health care system. If necessary, they will make referral to appropriate local law enforcement and services for survivors.



Who Is An HT Point Person?

- The health care staff who are ultimately responsible to guide the potential victim through the human trafficking protocols
- Can be a frontline staff or a health care provider
- They are the most critical staff for the recommended protocol to be successful
- The HT Point Person may be given a different title to perform this specific duty
- HT Point Person(s) may be expanded to a team, if necessary, depending on the size of the facility



Point of Entry

- Any health care setting where injured or sick persons will go to receive health and/or urgent care, i.e.,
 - Hospital Emergency Department
 - Freestanding clinic
 - Community Health Clinic/Center, Migrant Health Centers
 - Urgent Care Centers
 - Municipal, state, and federal health clinics





Philadelphia Anti-Trafficking Coalition (PATC) Center for the Empowerment of Women Nationalities Service Center

Partnership for Victim Services

Emergency Services	Social Services	Legal Services
 Crisis intervention and counseling Emergency shelter and referrals Urgent medical care Safety planning Food and clothing 	 Case management Interpretation Housing Job training and education Court accompaniment Employment assistance Transportation Health care Certification 	 Immigration status Criminal case against trafficker Witness protection Legal representation Vacatur of convictions

NHTRC



Resources



National Resources

Agency	Contact Information
National Human Trafficking Resource Center Hotline	1-888-3737-888
National Human Trafficking Resource Center	www.traffickingresourcecenter.org
Office on Trafficking in Persons	www.acf.hhs.gov/endtrafficking
Polaris	www.polarisproject.org
Physicians Against the Trafficking of Humans	www.doc-path.org
National Human Trafficking Resource Center	www.traffickingresourcecenter.org
HEAL Trafficking	www.healtrafficking.org
Truckers Against Trafficking	www.truckersagainsttrafficking.org
FBI	Check for state listings



Pennsylvania Office of Rural Health

- Rural Human Trafficking Initiative
 - Webinar and statewide summit
 - Targeting CAHs, other small rural hospitals, RHCs, FQHCs, others
 - Dedicated website
 - Partnership development
 - Stay tuned for more ...



Human trafficking is a crime.

We can be part of the system that stops it.



Pennsylvania Office of Rural Health 118 Keller Building University Park, PA 16802 Telephone: (814) 863-8214 Fax: (814) 865-4688

> Lisa Davis: lad3@psu.edu porh@psu.edu www.porh.psu

