Do You See Me:

Education on Human Trafficking Victims for Future Health Care Providers

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Human trafficking (HT) is a modern-day form of slavery. It is the control of another person using fraud and coercion. Healthcare professionals are often unaware that they could be treating a victim of HT. A staggering number of victims encounter the healthcare system and go unrecognized. According to a recent study, "more than half of human trafficking survivors indicate that they have accessed health care services at least once while in captivity. Of those who have accessed health care, 96.7% indicated that they had never been provided with information and/or resources about trafficking" (Donahue, Schwien, & LaVallee, 2019). In addition, many healthcare providers who are able to recognize that these patients are "on the street," are then unable to identify them as having a pimp/ trafficker (Lederer & Wetzel, 2014). HT continues to be a growing problem worldwide. Currently, Florida and Michigan are the only two states that require their healthcare professionals to complete training on HT (Donahue, Schwien, & LaVallee, 2019). It is a growing need to provide future healthcare workers with education on HT. Presently, only two medical schools are using an original HT training program to educate their third-year students (Weiss, & Kiluk, 2018). Many nurses meet victims while working but do not have proper education on how to identify or treat these patients. While resources exist outside educational institutions to address the issue of HT, education on HT is still lacking for healthcare students. Undergraduate nursing students should be competent on this topic before they graduate to better understand: 1) how to identify and treat victims of HT in both the health care and community setting; 2) how to recognize the signs of potential trafficking situations; and 3) ways to identify a perpetrator.

Literature Search

A variety of articles were found through the resources at UC Libraries. CINAHL with Full Text and MEDLINE with Full Text (EBSCO) were the databases used to discover the articles used to conduct research on HT. The keywords that were used were "human trafficking," education, students, experiments, health, perpetrators, situation, identification, "sex trafficking," and nurse. The filters applied for the research included: articles between 2012 and 2019, and peer-reviewed academic journals. The primary focus was on HT and education for hospital staff. The search then led into education for students and the importance of this topic globally. There is insufficient data in academic journals related to identification of perpetrators and identification of potential HT situations.

Evidence for Practice Change

Identification

As mentioned in the introduction, one of the major reasons identification of victims is incredibly difficult is related to the limited education for hospital staff. According to a study conducted in 2017, "the DOJ reports that fewer than 1% of victims are identified because of the frequent movement of victims, knowledge deficit related to medical red flags among health care providers, and victim inability to escape." The lack of identified victims shows a greater need for an increase in education among healthcare providers. In addition to a need for education, an evaluation of personal bias needs to be conducted by health care providers. In a qualitative, descriptive study performed in an urban hospital, it was found that nurses had a preconceived vision of an HT victim being from a foreign country and typically a young woman or girl (Long & Dowdell, 2018). However, some facilities do recognize the rising issue of HT. After education

on HT and the implementation of a treatment algorithm in a level two trauma center, 38 people were recognized as potential victims (Egyud, Stephens, Swanson-Bierman, DiCuccio, & Whiteman, 2017). The increase in awareness of HT for healthcare providers at this hospital shows the importance of educating medical providers.

There is limited research regarding current education curriculums for HT for future healthcare providers while they are in school. One example of a school potentially implementing HT in their curriculum came from a study on a group of social work students that were tested using the Perceptions, Knowledge, and Attitudes toward Human Trafficking Questionnaire (PKA-HTQ). This study was conducted in order to understand how ready the students were to learn about HT. The results showed that using the PKA-HTQ was a useful way to measure the students' readiness to learn (Nsonwu et al., 2017). In an additional study that focused on educating future nurse practitioners on identification of HT victims, there were knowledge gaps for the nurses about 6 crucial education points. These education points included knowledge about laws, a definition of HT, the statistics on HT prevalence, an ability to identify and treat victims, and knowledge of community and social service resources. After just 1 hour of education, the pre survey's average responses went from a range of 1.51 to 2.29, with a post-survey response range of 2.10-3.62 using a Likert scale. This helped to demonstrate an increase in knowledge across all education points (Lutz, 2018). Through current evidence about identifying trafficked victims, the statistics show that there is still a high number of victims that enter the healthcare system who go unidentified despite efforts to educate current healthcare providers. The lack of effective identification of victims is further complicated by the number of victims who fail to self-identify as being trafficked (Koesters, 2019). This evidence points to a need to explore ways to increase identification amongst healthcare providers; a proposed way to do this would be by

implementing HT education in nursing curricula before professional practice so that students are

prepared earlier to identify and treat victims.

Treatment

Once a victim of HT has been identified in the healthcare or community setting, it is

imperative to begin treatment for the patient. Treatment for the patient begins with managing life

threatening issues such as infection or trauma and is followed by management of untreated

chronic issues (Becker & Bechtel, 2015).

After life threatening illnesses are treated, a thorough head to toe physical examination

should take place; important things to notice during this would be dehydration, malnutrition,

lacerations/bruising on the skin, genitourinary infections and trauma, fractures of bones, tattoos

or brandings, IV needle use markings, that indicate drug usage, etc. A thorough psychiatric exam

is often warranted for these victims as many suffer from anxiety, depression, depersonalization

and related issues (Becker & Bechtel, 2015).

It is also important to establish trust and rapport with a victim when conducting a HT

interview since they often are experiencing "intense feelings of betrayal, guilt, and shame"

(Hemmings et al., 2016). Currently, research suggests using informal interview techniques in

order to reassure patients of the non-judgmental health care environment. In addition, HT victims

often fear disclosing their experiences due to the risk of repercussions threatened by their

perpetrators. To confront this issue, research has concluded that the use of open-ended questions

and spending additional time with patients can reduce their anxieties and ultimately help

establish a better rapport with healthcare providers (Hemmings et al., 2016).

Therapeutic relationships are also important due to the complex mental health needs of

trafficked victims. In a systematic review, research performed in a cross sectional survey of 164

(labor and sexually exploited women) by Tsutsumi et al. "reported a high prevalence of anxiety (87.5%) and depression (81.8%) among women trafficked for labor exploitation" (Oram et al., 2012). In addition to this, another study done by Ostrovschi et al. of 120 (labor and sex) trafficked women, used "the Structured Clinical Interview for DSM disorders to diagnose disorders among trafficked women 2–12 months after they had returned to Moldova and registered for post-trafficking support services [28,39]. The results of this showed 16.7% of women were diagnosed with depression and 35.8% were diagnosed with post-traumatic stress disorder (PTSD)" (Oram et al., 2012). These are just two examples of studies that have shown the impact of suffering that trafficked victims experienced in relation to their mental health. It also highlights the importance of counseling services and mental health resources needed for these patients in treatment.

Situations and Perpetrators

The current evidence available for identifying HT situations and perpetrators is limited in nature. Most of the evidence available addresses the identification of victims after they are rescued from their situations. However, specific groups of people at risk have been identified. In an electronic learning source developed for medical professionals, it discusses runaway and homeless children being at extremely high risk for sexual trafficking. "These adolescents are lured into the commercial sex industry by promises of emotional, economic, and domestic stability." The article also addresses that these adolescents are likely to be offered a life in the commercial sex industry within 48 hours of being on the street (qtd in Becker & Bechtel, 2015). In an article written by the Journal of Child Sex Abuse, the reasons exploiters are attracted to children in foster care is due to their "particular vulnerabilities including history of trauma, lack of family and/or social support, and insufficient parental supervision that make them more

susceptible to manipulation" (Landers et al., 2017). Although HT trafficking situations may be hard to identify, noting that "Pimps" target at risk youth specifically through means of promising some type of security and safety helps healthcare providers to identify situations in which they may witness this type of recruitment occurring.

Project Plan and Implementation

Once evidence was gathered, it was concluded that there is substantial support that the need for educating healthcare professionals on issues of identification, treatment and support of trafficked victims is important; however, the evidence presented a lack of resources and research for undergraduate healthcare students, specifically nurses on these same issue of education. In response to the lack of education resources for undergraduate nursing students, an exploration on whether educating healthcare students before they enter the workforce rather than after starting their career, has an impact on the identification, treatment and support of trafficked victims was started..

The education session was presented to a class of junior year nursing students at the University of Cincinnati on April 3rd, at 11am during their Continuum of Mental Health class. A thirty minute PowerPoint was presented that educated the students on identifying and treating HT victims. The presentation also educated the students on ways to identify a perpetrator and recognize a potential HT situation. The presentation included an original interactive case study that allowed the students to follow along and answer five questions that related to the learning objectives: 1) how to identify and treat victims of HT in both the health care and community setting; 2) how to recognize the signs of potential trafficking situations; and 3) ways to identify a perpetrator. The case study followed the storyline of a victim of sex trafficking and her interaction with the nurse in the emergency room. The presentation then led to education on

perpetrators and identifying HT situations. There was a nine question post-survey as well for the

students to measure their views on HT after the presentation. The post-survey included

statements that the students could then rate based on a Likert scale. The statements focused on

understanding the global impact of HT, explaining and identifying HT, whether it should be

implemented in education, treatment of victims of HT, identifying perpetrators and situations,

and if this topic was beneficial to learn about.

The purpose of this presentation was to educate junior year nursing student about HT and

gain their opinion on whether education on HT should be implemented in nursing schools'

curriculum. There was also emphasis to stress to the students the lack of research regarding

recognizing perpetrators and HT situation in the community.

Evaluation

During the interactive case study, 39 junior nursing students responded to five

questions (three select all that apply and two multiple choice) on a cloud-based student response

system that tested preliminary knowledge about identification and treatment of a potential HT

victim. The results for question one, which tested the ability to identify behavioral red flags of

HT, showed that 87% of participants answered correctly. This shows that students had a strong

preliminary knowledge of behaviors that would be consistent with HT. Question two tested

knowledge about the ability to identify physical red flags of HT, which 95% of participants

answered incorrectly. The contrast in results between behavioral and physical indicators of HT

answers was interesting; it showed that the students needed more education about the physical

indicators that were more specific to HT than other causes.

Eighty-four percent of students responded to question three incorrectly which tested on

knowledge about follow up treatment based on the physical symptoms of the patient. Students

gravitated to answers that met other needs of the patient but failed to meet the priority physical and safety needs of the patient. Question four tested knowledge about how to properly conduct a HT interview; 50% of students answered this question correctly. The fact that only half of the students knew the appropriate questions to ask based on client information indicates a need for further education. The last question, which tested knowledge about treatment, was answered 100% correctly. Students successfully identified the appropriate time to provide resources and to report the victim. Overall, the interactive case study proved to be a useful resource in collecting data about preliminary knowledge of the students being educated and identified the need for further education.

  After the presentation about HT was given to the junior nursing class, students were asked to complete an eight question post-survey with an additional open-answer question at the end. On a scale of one to five (one being strongly disagree and five being strongly agree), students rated how likely they agreed with statements regarding identification, perceptions, and the value of learning about HT. Out of the 44 students who participated in the post-survey 86.36% of the students strongly agree that HT should be included in their nursing curriculum, 68.18% strongly agree that they better understood the global impact of HT, 65.91% strongly agree that they could better could explain HT to another person, and 56.25% strongly agree that they could better identify a victim. In addition to this, 54.55% strongly agree that they could better treat a victim, 59.09% strongly agree that they could better identify a perpetrator and situation of HT, 75% strongly agree that the interactive case study helped them learn about HT, and 79.55% strongly agree that HT education will be beneficial to their careers as nurses. No one chose strongly disagree or disagree in the post-survey. 36 of the students who took the post survey also indicated in the last question, which was an open statement question, some of the

most important features they gained from the education session. One student stated "my perception has changed in the fact that I know there is a possibility that I will be put in the situation to identify human trafficking in my career." The overall opinion from the junior class was there should be more education for students before entering the workforce.

Recommendation for Future Work Needed

After analyzing the data from the students' responses and collecting current research regarding education for future providers, the recommendation from this project would be to make HT a part of nursing schools' curriculum. Nursing schools should educate on the identification of HT victims through case studies so students are learning about real-life situations. Along with identification, students should be educated on the treatment of HT victims. The National Human Trafficking Resource Center has created a flowsheet to help healthcare providers understand the steps to take to treat a victim of HT while they are in the healthcare setting. This flowsheet, or others created by resource services, should be introduced to students while in school to better understand treatment protocols. Also, more research should be conducted on recognizing perpetrators of HT, and students should be educated on recognizing perpetrators of HT and potential situations of HT. There should also be increased research on the benefits of implementing earlier education in schools for students before they enter the workforce. In order to create a stronger project and more evidence regarding a need for change, this presentation could have been given to a larger group and should be considered for future presentations. These recommendation should be taken into consideration in order to create safer, and better equipped hospitals, healthcare offices, and communities.

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Appendix A

Taylor Hopkins

Researching the topic of Human Trafficking has been the most eye opening and enriching self-education I have participated in my whole nursing career. It seems to be that I can't help but talk about and apply what I have learned to my everyday situations. Whether it's looking in all the nooks and crannies as I drive through the city at night to look for suspicious behavior, or telling friends to not joke about the concept of "Pimps" because of the severity and reality of their existence. The more we researched about what HT is and looks like, the deeper desire I had to educate everyone I could about it. I gained a deeper personal responsibility as a nurse as well since, as healthcare professionals, we may be the only point in contact a trafficked person has to be able to get out of a situation. This makes me feel like it is a huge undertaking but also makes me want to be vigilant in paying attention to my patients and their healthcare/ psychosocial needs.

Meggie O'Hara

Throughout doing research for this topic, I have been introduced to many heartbreaking and eye opening statistics about HT. I have grown very passionate about the topic and would love to see the topic included in nursing curriculums. From doing this project, I have learned the value of knowing how to recognize a victim. I never realized how many victims pass through the system on a daily basis without ever being recognized for HT. I also learned more about what pimps and perpetrators are looking for and how they can get the victims under their control. This is information I can teach my future patients who might be in a vulnerable population or teach parents as well to help their kids understand the risks of social media and their safety. Using evidence to back up our stance on this project has been so helpful to prove that the

implementation of education in more nursing schools would be so valuable for countless students. I enjoyed doing research and working with the other students in my group.

Megan Surovjak

This project has honestly been life changing and extremely influential on my future nursing career. Through our research on HT I have been able to take on a completely different way of assessing people both in and outside of the health care setting. When I am out in the community, I fully take in my surroundings, making sure to be aware of any potential trafficking or otherwise dangerous situations. Through this self-education, I have also made it my duty to fully assess the people I come in contact with on a daily basis because I have learned that it only takes one person to recognize the signs in order to help someone. I have become very passionate about the topic of HT and have taken on a personal responsibility to make sure that other health care providers and people of the community are also aware of its prevalence and can in some way have the potential to recognize a victim. This project has somewhat become the center of my world. I speak about it with a new person almost every day. This project has inspired me to be a better nurse, educator, and overall contributor to my community. Before starting my own HT research and education journey, I never thought I could be influential in bringing about change in my chosen career field, but this project has allowed me to see my own potential and strive to be an innovator.