

16yr old female

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MISSED OPPORTUNITIES: THE MEDICAL RESPONSE TO SEX TRAFFICKING OF MINORS

- Presented to CHW ED for screening prior to Chapter 51 hold for suicidal ideation.
- Seen in an adult ED under a false name and age several days prior with "boyfriend" for head injuries from a fall.
- Prior contacts with medical for STIs and frequent AWOL behaviors.
- Disclosed she had been assaulted by her "boyfriend/pimp" because she refused to consent to continued sex for money.
- Mental health was the only safe place.

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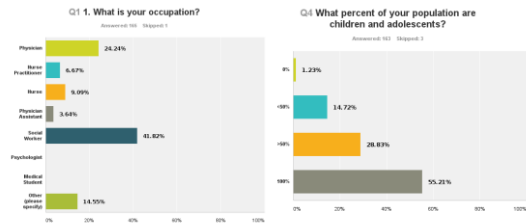
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Missed Opportunities

- Hidden in Plain Sight 2008- survey of Justice System (n=775) and Service Providers (n=558; 200 medical)
 - Confusion about what can be considered a trafficking victim
 - Only 39% of service providers received training, lack of training and knowledge were barriers to care
- WDOJ Baseline Assessment of Human Trafficking in Wisconsin 2013
 - Only 5% of victims were referred for healthcare services

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Healthcare Provider's Understanding and Experience with At-Risk Patients



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Survey- Training and Experience

- 90% of medical providers and 79% of social workers were only somewhat or not at all confident in their ability to identify victims.
- Lack of training and awareness are the biggest barriers to identifying victims.
- 95% of both would be interested in learning more

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Objectives

Participants will be able to:

- Define sex trafficking of minors
- Identify teenagers at risk for trafficking
- Identify actions providers can take if a teen discloses s/he is involved in trafficking

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What is Sex Trafficking?

<p>Trafficking is the:</p> <p>Recruitment or Transportation or Harboring or Receiving ... of a person (or and attempt to do so)</p>	<p>By means of:</p> <p>Threat or use of force or Coercion or Abduction or Fraud or Deception or Abuse of power or of a position of vulnerability or Giving or receiving of payments or benefits to achieve the consent of a person having control over another person</p>	<p>For the purpose of sexual exploitation:</p> <p>A commercial sex act (sexual contact for which anything is given to, promised, or received by any person) or Sexually explicit performance</p>
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What is **Child** Sex Trafficking?

- Child = <18yrs
- Proof of force, fraud, coercion is not required
- Mistake of age is not a defense

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Examples

- Child sold for sex by a "pimp".
- Child exchanging sex or sexual activities for drugs or survival needs.
- Child pornography.
- Exotic Dancing/Stripping.
- Does not require transportation across national or state borders.
- 83% are US born citizens.

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Child Abuse vs. Trafficking

- Trafficking is a form of sexual abuse
- Trafficking victims have unique medical and therapeutic needs.
 - Multiple levels of trauma
 - Higher incidence of sexual health problems
 - Poor living conditions
 - Poor access to health care
 - Must identify concerns for trafficking to alert investigators.
 - Correct identification highlights resource needs.

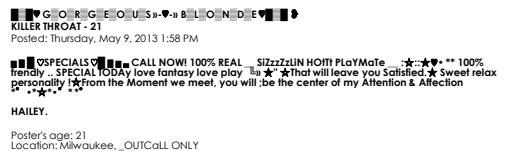
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Is this a problem in Wisconsin?

- 77 child victims identified by law enforcement in Milwaukee County 2010-2012.
- At CHW and JDC: 60 victims identified at JDC since January 2014, 35 identified in the Adolescent Medicine Clinic (with some overlap with JDC). Average 2/mo at CPC.
- 3.5% of US adolescents disclosed they had exchanged sex for drugs or money in their lifetime. (National Longitudinal Study of Adolescent Health- n=13,294)
 - 0.3% probability of developing cancer by 19yrs of age- SEER Program Data

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Backpage



HAILEY.
 Poster's age: 21
 Location: Milwaukee, _OUTCall ONLY

Ad 1/59 for this day

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Recruiting and Conditioning

"I was having sex before I even knew what it was, before I even knew the language, or had words to describe it. By the time I was a teenager . . . I had no idea what real intimacy was. I started selling sex – why not get paid for it?"

"I was looking for love but not knowing how, or what it looked or felt like. I thought I loved the pimps, but they just used me. . . I was too young to know what it was, but it was all I knew . . . Since I was a baby, I was there to provide sex to men, in my family or anyone else." --Trafficking survivor, 2007. In: A National Overview of Prostitution and Sex Trafficking Demand Reduction Efforts.

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- Pimp = Trafficker
- May present as a boyfriend, intimate-partner, or a caretaker
- Recruits victims by giving gifts, love, promises of a better life
- Conditions the victim by introducing them to sexual exploitation
- Victims can form trauma bonds

Power and Control Tactics

- Promises love, money, fame, shelter
- May provide for basic needs better than caregiver
- Creates dependence by convincing victim they are the only ones who care for them
- Confuses victims by moving them frequently
- Hides identifying documents
- Denies access to children, family
- Normalizes violence
- Threatens harm to self or others
- Harms others to show force
- Makes victim feel guilt, blame, shame, for the situation
- Creates distrust of authority

Pimp Confessions: NY Times Interviews

"With the young girls, you promise them heaven, they'll follow you to hell."

Harvey Washington, Former Pimp

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Pimp Confessions: NY Times Interviews

"My job is to make sure she has what she needs, personal hygiene, get her nails done, take her to buy an outfit, take her out to eat, make her feel wanted,

... But I keep the money."

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"The Game"

ebook3000.com

[Home>Study>Hobbies & Leisure time>](http://www.depositfiles.com/files/3000eDa)

The Pimp Game: Instructional Guide
Author: ... Date: 14-Sep-2013, 19:00

The Pimp Game: Instructional Guide
Publisher: Shant Pub | ISBN: 0970598705 | edition 1998 | File type: PDF | 97 pages | 12,6 mb

The former Hollywood king reveals secret techniques with proven results on mastering the art of seduction. A look inside of the mind of the master as well as a chilling peek into the shadow world. A modern day guide parallel to The Prince by Machiavelli. This book gives a panoramic view of the psychology that goes into the complex world of street-level, body and spirit. The Pimp Game shatters previous myths by breaking down and analyzing every angle and aspect of the forbidden. The Pimp Game is an instructional guide. The first and only "How To" book of its kind. It offers detailed step-by-step instructions. Read how so few can control so many. Secrets known by a select sect and mastered by an elite few are finally exposed. The Pimp Game thoroughly explains how these methods are being practiced, performed, and perfected everyday, everywhere right up to, and including the Oval office.

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The Pimp Game...



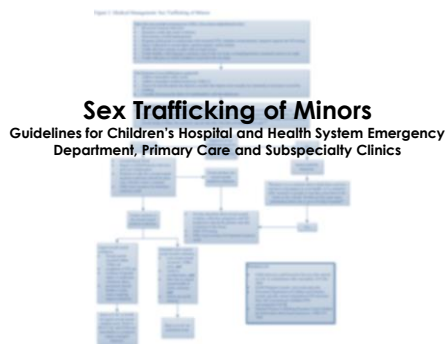
The Role of Medical Providers

“You’ll start to dress her, think for her, own her. If you and your victim are sexually active, slow it down. After sex, take her shopping for one item. Hair and/or nails is fine. She’ll develop a feeling of accomplishment. The shopping after a month will be replaced with cash. The love making turns into raw sex. She’ll start to crave the intimacy and be willing to get back into your good graces. After you have broken her spirit, she has no sense of self value. Now pimp, put a price tag on the item you have manufactured.”

- Identify children at-risk
- Provide opportunities for disclosure
- Identify common medical problems in trafficked youth
- Refer for services
- Educate community partners and legislators about healthcare needs

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Screening “At-Risk Youth”

- Recurrent runaway behaviors
- Homeless youth and youth in shelters
- Prior history of child maltreatment
- Pregnant adolescents or those with recurrent STIs, multiple sexual partners, frequent requests for testing
- Youth with money or gifts with no legal source
- Youth familiar with language commonly used in the sex trade
- Youth with peers or family members involved in the sex trade.

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Reproductive health problems, including exposure to HIV and other sexually transmitted infections, fertility issues, and other gynecological diagnoses associated with sexual violence and rape
Pregnancy
Physical health problems associated with beatings and rapes- evidence of cigarette burns, untreated fractures, sexual abuse, bruises, lacerations, blood loss and shock; skin findings may be hidden by clothing
Self-injurious behavior such as cutting
Blood borne infections from tattoos or brandings
Untreated chronic medical conditions
Mental health issues- depression, PTSD, anxiety disorders, oppositional behaviors, attachment disorder, aggression, ADHD, and somatic complaints (headaches, chronic pain) associated with chronic stress and trauma
Malnutrition (may be thin or obese)
Substance abuse- this may be forced by the trafficker or used as a coping mechanism to deal with trauma and abuse

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Initial Response

- Consider immediate safety needs
- Consider immediate medical needs
 - Injuries may be covered by clothing
- Recommend discussing the limits of confidentiality with the adolescent prior to SHx.

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Table 3: Screening Questions for At Risk Youth	
Home	Who do you live with? Who can you talk to about things? What are the people you live with like? Do you get along with your family? What would you change about them? Can you come and go as you please? Have you ever been kicked out, run away or not had a place to stay?
Education/Employment	What grade are you in? What are your grades like? Do you ever skip school? What do you want to do when you are done with school? Do you have a job? How do you make your money?
Activities	Help me understand what a day in your life is like. What kinds of activities do you do throughout the day? What do you do on weekends? Do you have a boy/girlfriend? How old is this person? How did you meet?
Drugs	Do you smoke cigarettes, weed? Have you ever tried drugs? Do you drink alcohol? How much? How did you get it? Do you ever get sick, pass out or have a hangover? Do you ever use drugs or alcohol to escape from reality? Did you every do anything you didn't want to do when you were high, drunk, or passed out?
Suicide/Safety	Do you ever feel sad or lonely? Have you ever had thoughts of suicide? Do you ever get in fights with friends or with your boyfriend/girlfriend? What is it like when you fight? Ask about violence or abuse history (physical abuse, bullying).
Sev/Sexual Exploitation	How many people have you had sex with in your life? When was the last time you had sex? Have you ever been pregnant or had an STD? Do you use protection? Have you ever done sexual things even though you didn't want to? Over the years, we've heard about more and more young people turning to the streets to make money for themselves or for other people. Sometimes they tell us they trade sex or sexual type activities for money, clothes, a place to stay, drugs, or survival. Do you know anyone like that? Has anyone ever asked you to do sexual things for money or suggested it would be a good way to make money or get the things you want? <small>2014 Copyright: Angela Rabbitt, DO. Sometimes teens don't feel like they have any other options but to trade sex for money or survival or someone else has made them do it. Has that ever happened to you?</small>

Reasonable Suspicion?

- Consult social work (if not done)
- Child Advocacy (414-266-2090)
 - Help with reporting decisions, medical recommendations
 - Facilitate medical follow-up

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Mandated Reporting

- Follow local protocols for child abuse reporting.
 - CPS- to county of child's residence
 - LE- district where trafficking occurred, or of clinic/ED

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Mandated Reporting

- Sexual exploitation is an exception to adolescent confidentiality laws. (WI Stat ch 48, § 981)
- Can share confidential health records with CPS and LE when making a report or when relevant to an active investigation. (WI Stat ch 146.82(2)(11))

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Sharing Information with Caregivers

Medical providers may withhold information from caregivers if:

1. The minor has a legal right to consent to care (reproductive health care).
2. When the minor has judicial approval for medical care.
3. When the parent agrees to allow the minor to receive confidential medical care.
4. If disclosure of information to a caregiver may endanger the minor.

Committee on Child Abuse and Neglect, Child Abuse, Confidentiality, and the Health Insurance Portability and Accountability Act. Pediatrics. 2010;125(1):197-201.

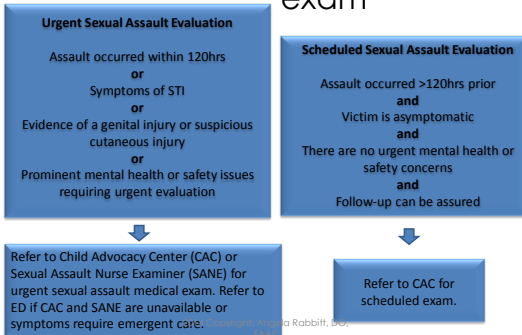
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The Forensic Medical Evaluation

- Purpose:
 - Diagnose and document trauma
 - Collect and document forensic evidence
 - Identify and treat associated medical conditions
 - Reassure the patient and family
- Possible locations:
 - Emergency Department
 - Child Advocacy Center
 - Sexual Assault Treatment Center
- Only with the child's consent!

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Triage for the forensic exam



Special Considerations

- Will collect forensic evidence up to 120hrs- even 2wks.
- More aggressive about STI and pregnancy prophylaxis. HIV testing should include both HIV ab and HIV RNA PCR.
- Ask about drug facilitated sexual assault, drug testing if history within 4 days
- Follow-up at CAC in 2 weeks for acute assaults, especially with injury.
- Remember follow-up is poor.

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If the victim declines medical evaluation...

- Offer Resources
 - Teens: What to Expect During an Exam for Suspected Sexual Assault
 - Resource List for Teens
- Offer STI and pregnancy testing and prophylaxis

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If there is risk, but not reasonable suspicion. . .

“Because it is so common and we think these activities can have a big impact on your health, we’ve started to offer resources to people in case they need them in the future or for a friend. Would you like some more information about who to go to for help if needed?”

- Teaching sheet and Resource List
- Consider offering STI and pregnancy testing and prophylaxis

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Helpful Tips

- Use quotes when documenting disclosures
- Clearly identify concerns for trafficking to law enforcement and CPS
- Avoid making distinctions between youth who state they are “pimped” and those who say they are independent.
- Emphasize that the child is a victim in need of services, not a juvenile offender. Avoid the term “prostitute”.
- Educate co-workers and team members.
- Document steps taken to ensure safety and what resources were provided.

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Resources for Providers

Webinars and Training Materials
Modern-Day Slavery in America: Recognizing and Responding to Human Trafficking in a Healthcare Setting. National Human Trafficking Resource Center Policy Project. http://www.policiesproject.org/what-we-do/national-human-trafficking-toolkit/online-training/online-training .
Rescue & Restore Campaign Tool Kits. U.S. Department of Health & Human Services Office of Refugee Resettlement. http://www.acf.hhs.gov/programs/orr/resource/rescue-restore-campaign-tool-kits . Published July 23, 2012.
Human Trafficking: The Role of the Health Care Provider. National Health Collaborative on Violence and Abuse. http://chcva.org/2014/04/15/webinar-human-trafficking/ . Published April 15, 2014.
Child Sex Trafficking Webinar Series. Children’s Healthcare of Atlanta. http://www.chca.org/ccsvwebinars .
Screening Tools and Guidelines
Out of the Shadows: A Tool for the Identification of Victims of Human Trafficking*. VERA Institute of Justice. http://www.vera.org/pubs/Special/Human-Trafficking-identification-tool/ . Published June 10, 2014.
American Professional Society on the Abuse of Children. The Commercial Sexual Exploitation of Children: The Medical Provider’s Role in Identification, Assessment and Treatment. http://www.apjac.org/practice-guidelines . Published 2013.
Confronting Commercial Sexual Exploitation and Sex Trafficking of Minors in the United States. Institute of Medicine. http://www.iom.edu/Reports/2013/Confronting-Commercial-Sexual-Exploitation-and-Sex-Trafficking-of-Minors-in-the-United-States.aspx . Published September 25, 2013.
Asian Health Services & Bartheay Srei. Commercially Sexually Exploited Children (CSEC) Screening Procedure Guideline. http://asianhealthservices.org/docs/CSEC_Protocol.pdf . Published March 2012.

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