Human Trafficking:
Informing the Healthcare Practice

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The Laboratory to Combat Human Trafficking

• Training and Education
• Research and Action
• CoNEHT hotline and resource directory
• Leadership development
Legal advocacy & representation for Colorado agricultural workers regarding various employment related issues, including:

- Wages
- Contracts
- Working Conditions - Pesticide poisoning, Work Related Injuries, Housing, Field Sanitation
- Civil Rights / Discrimination
- Immigration - VAWA, U visas, T visas, naturalization, and other limited cases
- Labor Trafficking
- And more.

Community education and training

Referrals to legal advocates for agricultural workers across the US
Why do healthcare providers need this training?

87.8% of survivors had contact with a healthcare provider while they were being trafficked.

63.3% of those were treated in an emergency room setting.

More than half (57.1%) of respondents had received treatment at some type of clinic.

(Lederer & Wetzel, 2014)

A recent cross-sectional survey of 180 U.S. emergency department workers found that only 5% had ever received formal training on human trafficking.

73% believed that their patient population was not affected by trafficking.

(Chisolm-Straker, Richardson, & Cossio, 2012.)
Today’s Agenda

Identification

• What does “human trafficking” mean?
• Who does it affect?
• Where does it happen?
• What does it look like?

Response

• What should I do if I suspect someone is a victim of human trafficking?
• What can I do to help those who have experienced human trafficking?
Human trafficking is the exploitation of someone for the purposes of compelled labor through the use of force, fraud, or coercion*. Commercial sex acts or services involving a minor are considered human trafficking regardless of the presence of force, fraud, or coercion.
<table>
<thead>
<tr>
<th></th>
<th>Human Trafficking</th>
<th>Human Smuggling</th>
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</thead>
<tbody>
<tr>
<td><strong>Who?</strong></td>
<td>Person</td>
<td>Border</td>
</tr>
<tr>
<td><strong>What?</strong></td>
<td>Exploitation</td>
<td>Transportation</td>
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<tr>
<td><strong>Where?</strong></td>
<td>Anywhere and everywhere</td>
<td>At a boundary or border</td>
</tr>
<tr>
<td><strong>When?</strong></td>
<td>Often unclear</td>
<td>After crossing</td>
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<tr>
<td><strong>Why?</strong></td>
<td>Labor</td>
<td>Travel or migration</td>
</tr>
<tr>
<td><strong>How?</strong></td>
<td>Force, fraud or coercion</td>
<td>Often consensual</td>
</tr>
</tbody>
</table>
Human trafficking is the exploitation of someone for the purposes of compelled labor through the use of force, fraud, or coercion.

What vulnerabilities can you identify in yourself?

Members of your community?

What factors limit their opportunities?
Common Vulnerabilities

**Biological**
- Age
- Gender
- Sexuality
- Disability

**Social**
- Adverse Childhood experiences
  - Relationships
  - Cultural expectations and perspective
    - Prejudice

**Economic**
- Poverty
  - Debt
  - Insecure work or housing situation

**Legal**
- Criminal or immigration history that limits work and housing opportunities
- Immigration status tied to trafficker (employer or family member)

**Other?**
- What do you see in your community?

**Biological**
- Age
- Gender
- Sexuality
- Disability

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**Other?**
- What do you see in your community?
Push and Pull Factors

Abuse, neglect, and isolation

Homelessness

Poverty, debts, and lack of access to formal markets

Marginalized identity and Discrimination

Relationship

Family and home

Income, dignity of work, and security

Acceptance, Opportunity
Systemic Vulnerabilities: The H2A/B Guest Worker Programs

- Recruitment
  - Fees, competition
  - Fraud

- Travel
  - Immigration status tied to employer
  - Debt

- Work in US
  - Lack of information
  - Obligations back home
  - Fear of harm
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Commercial sex involved trading sexual acts or services for a thing of value, not just cash.

Industries where human trafficking has been identified

- Agriculture
- Construction
- Domestic Work
- Illicit Activity
- Food Service
- Servile Marriages
- Commercial Sexual Exploitation of Children
- Sex Work
- Hospitality
- Agriculture
- Construction
- Domestic Work
- Illicit Activity
- Food Service
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- Commercial Sexual
- Exploitation of Children
- Sex Work
- Hospitality
Human Trafficking happens in Colorado.

“Fields of fear for Colorado illegal farm laborers”
– Denver Post, 2009

“Sean Crumpler, accused Aurora child sex trafficker, pleads guilty”
– Denver Post, 2017

2018 – Federal jury awards $330,000 to a family that was trafficked on a family farm in southeastern CO
- Colorado Legal Services
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**Force**
- Physical violence or restrictions
- Abuse
- Limiting movement or communication
- Withholding ID, medical care, or food and water

**Fraud**
- Misrepresentations, especially during recruitment
- Inconsistent work, hours, or pay
- Additional job responsibilities
- Nonpayment of wages (overtime)

**Coercion**
- Psychological persuasion or intimidation
- Exaggerations about trafficker’s power
- Direct or indirect threats of harm to victim or loved one
Human trafficking is the exploitation of someone for the purposes of compelled labor through the use of force, fraud, or coercion.

**Trafficker’s Toolbox**

**Coercion**
Psychological persuasion or intimidation

- Exaggerations about trafficker’s power
  - Threatened misuse of the legal system

- Direct threats of harm to victim or loved one
  - Retaliation

- Indirect threats of harm to victim or loved one
  - Brandishing a weapon
  - “Making an example” of a worker
Human trafficking is the exploitation of someone for the purposes of compelled labor through the use of force, fraud, or coercion.

What does this look like in a healthcare setting?

- Victim may be malnourished, dehydrated, or exhausted and/or have generally poor health
- Injuries can go untreated for long periods of time
- Traffickers often accompany victims to medical visits, often serving as the “interpreter”
- Victims may miss follow-up on major medical visits
- Traumatized victims may avoid eye contact, seem anxious or nervous
- May have a vague or pre-rehearsed response to questions about their job or the circumstances of their injury
- Victims don’t have an ID
- Victim (or accompanying trafficker) may be extremely reluctant to have injuries reported to authorities
During their trafficking experience, a victim may...

- Experience trauma
  - Threat to their life or physical integrity, or someone important to them
  - Overwhelming sense of terror, helplessness, and horror
- Normalize the experience of exploitation
- Be told lies about institutions and law enforcement

Which means that, even after escape, a victim may...

- Experience fear or anxiety, remember events nonlinearly
- Fear reprisals from the trafficker
- Not understand that they were the victim of a crime
- Blame themselves, feel ashamed or guilty
- Mistrust of institutions or law enforcement

So, when interacting with providers, the victim may...

- Be reluctant to tell their story, or tell their story in pieces
- Decline to seek services or assistance
- Remain uninterested in cooperation with law enforcement or other perceived “government-associated” service providers
Discussion topics

- After seeing the presentation so far, are there clients/patients you can think back to that may have been experiencing exploitation?
- What did you do in the moment?
- What might you have done differently now that you have been to this training?
Role of Health Care Providers

Mandatory reporting requirements:

Per Colorado law, the human trafficking of minors is child abuse and should therefore be reported as such.

Remember, any minor participating in commercial sex is seen as a victim of human trafficking regardless of the presence of force, fraud, and coercion (and their own perception!)
Protocols should address:

- Training and education for all staff on human trafficking and basic indicators
- Staff responsibilities for recording and reporting
- Communication and separation policies and procedures
- Safety planning for victims
- Local resources and referral processes
- Materials and policies for communication with at-risk patients

(Check out your handouts for more detailed information!)
Protocol 1: Direct Communication

**Separation Policy**
- Hang signs in waiting room
- Practice with staff

**Language Access Policy**
- Client-directed
- Document needs

**Appropriate Interpretation**
- Professional interpreters only
- Speak in first person
- Allot extra time

**Check in**
- Avoid speaking quickly or using slang
- Verify understanding

**Start the Conversation**
Don’t wait on the patient—normalize talking about exploitation by bringing it up yourself.
Protocol 2: Universal Education

Universal education is a process that normalizes conversations about IPV and provides information to all, not just those who are suspected of or disclose experiencing IPV.

The use of a universal, trauma-informed education intervention is recommended because:

- Point of Entry
- Trauma-informed and survivor-centered
- Does not rely on direct disclosure
- Intervention, as well as primary and secondary prevention
- Feasible, affordable, and straightforward to administer
Protocol 2: Universal Education
How to talk to clients about human trafficking

1. Address medical needs

2. Provide Privacy
   - Use your separation policy!
   - Explain limits of confidentiality

3. Educate
   - Nonjudgmental manner normalizes sharing
   - Use appropriate materials
   - Empower client to inform others
   - Connect to health outcomes!!

4. Ask
   - Set aside time for discussion
   - Share concerns

5. Respect
   - Allow the patient to make their own decisions
   - Remind the patient that they can come back in the future

6. Respond
   - Report if the situation requires it.
   - Connect client to appropriate resources

Adapted from Dignity Health PEARR Tool
Materials

For Staff

• Assessment card
• Look Beneath the Surface brochure
• PEARR Tool
• Today’s packet: https://combathumantrafficking.org/health/

For Patients

CLS MFWD has materials available in English and Spanish discussing:
• General services
• Human Trafficking
• H2A worker specific guidance
• Pesticide protection
• Workplace injury
• Workplace sexual harassment or assault
• Minimum wage
What might Human Trafficking Victims need?

**Safety**
- Crisis intervention
- Transportation
- Clothing and food
- Emergency or transitional housing

**Stabilization**
- Protection/safety planning
- Social service advocacy
- Medical/mental health services
- Legal Services

**Reintegration**
- Legal services
- Employment or education assistance
- Long term housing
- Emotional support and counseling