

# The Connection Between Human Trafficking and Corrections: Effective Interventions

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# Educational Objectives

- Review ways to identify suspected human trafficking victims
- Describe the health effects of human trafficking
- List interventions available to effectively address human trafficking



# Content Outline

- What is human trafficking (HT)?
- Victim profiles and vulnerabilities
- Signs and indicators of HT
- Trafficker recruitment and control methods
- The health impact of HT
- HT within correctional systems
- Intervention strategies within corrections to address HT



# Human Trafficking Defined

Human Trafficking: The *Trafficking Victims Protection Act (TVPA)* of 2000 defines human trafficking as: The use of force, fraud, or coercion to compel a person into commercial sex acts or labor or services against his or her will.

*The one exception involves minors and commercial sex. The act considers inducing a minor into commercial sex as human trafficking regardless of the presence of force, fraud or coercion.*



# THE A-M-P MODEL

Action	Means*	Purpose
Induce Recruits Harbors Transports Provides or Obtains	Force Fraud or Coercion	Commercial Sex ( <i>Sex Trafficking</i> ) or Labor/Services ( <i>Labor Trafficking</i> )

\*Minors induced into commercial sex are human trafficking victims—  
regardless if force, fraud, or coercion is present.



# Scope of Human Trafficking

- *International Labor Organization* – estimate 25 to 40 million victims worldwide
  - Worldwide, most victims are labor trafficked
  - Most victims are women and girls – 75%
- *The Polaris Project* – estimate “100s of thousands of victims in the U.S.”
  - In the U.S., most victims are sex trafficked – (DOJ Report, 2011)
  - Most victims are women and girls – 80% of all victim calls to hotline



# Scope of Human Trafficking

- HT is the second largest and fastest growing illegal activity worldwide and in the U.S. (drug trafficking is 1<sup>st</sup>) – Estimated \$150 Billion per year industry





# Victim Vulnerabilities and Profiles

- Anyone can become a victim of human trafficking
  - No population boundaries – all races, genders, ages, social and economic classes, nationalities
  - No location boundaries – it exists in all countries and population densities: rural, suburban, and urban



# Victim Vulnerabilities

- Lack of positive family and social supports
- Mental health issues
- Active/concurrent substance use or history of substance use
- Past trauma history: child abuse, sexual abuse, domestic violence
- Poverty and lack of stable housing



# Victim Profiles

- Female
  - Past trauma history, particularly sexual abuse
  - Girls in foster care system are particularly vulnerable
  - 90% of prostituted women interviewed in one study reported having a trafficker/pimp (*Prostitution and Trafficking Quick Facts*)
  - In the U.S., the average age when traffickers induce or force girls into prostitution is 15 to 17



# Victim Profiles

- Gay, lesbian, bisexual, transgender, and gender non-conforming youth and young adults
- Homeless and runaway youth and young adults - one in seven reported runaways in the U.S. in 2018 were likely victims of sex trafficking (*National Center for Missing & Exploited Children*)
- Undocumented individuals or immigrants without lawful status



# General Indicators of Trafficking

- Evidence of controlling or dominating relationships
- Individual shares a scripted or inconsistent history
- Signs of physical or sexual abuse
- Unwilling or hesitant to answer questions about injury or illness
- Demonstrates fearful or nervous behavior or avoids eye contact



# Labor Trafficking Indicators

- Reports history of employer abuse or threats
- Not allowed adequate breaks, food, or water while at work
- Was recruited for different work than he/she performed
- Lives in housing required by employer
- Has a debt to employer or recruiter that he/she cannot pay off



# Sex Trafficking Indicators

- Multiple or recurrent STIs
- High number of sex partners
- Trauma to vagina and/or rectum
- Signs of physical trauma
- Suspicious tattoos or branding
- Use of lingo or slang relating to patient's involvement in prostitution (i.e., referring to boyfriend as “Daddy” or talking about “the life”)





# Child Sex Trafficking Indicators

- Abnormal number of sex partners for young age
- Trauma to vagina and/or rectum
- Pregnancy at a young age
- Evidence of abortion at a young age
- Symptoms of STIs and/or urinary tract infections (UTIs)
- Suspicious tattoos or branding



# Facility Admission Indicators

- Tattoos or brands indicating a person is someone's property
- Large quantities of cash and/or condoms
- Hotel receipts, key cards
- Typical victim charges – prostitution, theft, drug possession
- Typical trafficker charges – trafficking, kidnapping, peonage



# Trafficker Recruitment Methods

- Kidnapping
- Developing a false romantic relationship with victim
- Fake storefronts
- Legal storefronts
- Befriending and providing a home to runaways
- Recruiting local prostitutes



# Trafficker Control Methods

- Physical and emotional abuse or threats
- Threats to harm victim's children or other family members
- Threats to have victim arrested
- Provide drugs, typically heroin and/or cocaine, to maintain dependence on trafficker



# Trafficker Control Methods (Continued)

- Isolation from friends and family
- Holding victim's personal identifications
- Economic abuse – threats to take away room and board, drugs, etc.
- Victims fear leaving trafficker for reasons that include: psychological trauma, shame, and emotional attachment with traffickers



# HT and Correctional Systems

- Many incarcerated individuals, particularly females, meet high risk victim vulnerabilities:
  - Past trauma history, particularly sexual abuse
  - Substance use history
  - Mental health issues
  - Poverty and/or unstable housing
  - Lack of positive family or social supports



# Recruitment Tactics in Corrections

- Correctional system websites
- Networking by arrested trafficking victims or traffickers/pimps
- Offering a ride, housing, employment, drugs, or other enticements as incarcerated individuals are released





# Case Study

“Leslie”



# Medical Health Impact

- Acute injuries
- Chronic medical complications
- Reproductive and sexual health
- Dental and oral health
- Shortened life span – the average life expectancy of a sex worker is age 34



# Mental Health Impact

- Anxiety disorders (panic attacks, OCD, GAD)
- Major depression
- Psychotic disorders
- Dissociative disorders
- Substance use disorders
- Complex Trauma/PTSD



# Interventions to Address HT

- Policy and procedures
- Staff training
- Patient education
- Identification and assessment
- Referral and reporting
- Programming



# HT Policy and Procedures

- Serve as a foundation for joint custody/healthcare response
- References each of the other planned interventions
- Helps ensure that planned interventions meet NCCHC national standards and/or best-practice standards
- Conform to custody's policies and any government laws or regulations, particularly with regard to HT reporting requirements



# Training on Human Trafficking

- Healthcare staff – consider adding HT training as an orientation topic and provide periodic reviews thereafter
- Custody staff – in accordance with client requirements
- Consider providing HT training to ALL staff **and** volunteers who might interact with incarcerated individuals



# Identification and Assessment

- All healthcare staff with direct incarcerated individual contact are in a position to identify victims of trafficking
- Develop vetted and custody-approved screening questions
- Utilize approved screening questions at intake and any subsequent healthcare encounter if victimization is suspected





# Patient Education

- Provide written HT information as part of the intake healthcare screening and orientation process
- Provide a handout or verbal information during healthcare encounters
- Posters in custody-approved locations
- Offer psycho-educational and/or support groups that discuss the relationship between past trauma and victim vulnerabilities



# Referral and Reporting

- Reporting for juveniles is mandatory in all states through the Child Abuse hotline.
- Report to HSA and or custody leadership per your HT policy
- Follow any state, county, or institutional policies for reporting to appropriate county officials
- The National Human Trafficking Hotline: 1-888-373-7888
- Identify and provide local victim advocacy information



# HT Related Programming

- Trauma-informed, gender-sensitive, evidence-based programming
- Informational support groups on HT related themes
- Targeted discharge/re-entry planning – connect victims with local advocacy and/or “safe” home information and resources
- Diversion programs, if available – some states/counties offer prostitution diversion programs



# Conclusion of Training

- Review and Summary of Training
  - The definition for HT
  - Victim profiles and vulnerabilities
  - Signs and Indicators of HT victims
  - Recruitment and control tactics of traffickers
  - The impact of HT on medical and mental health
  - Available HT interventions within corrections



# Resources

- National Human Trafficking Resource Center (NHTRC)
- The Polaris Project – an NGO that operates the NHTRC Hotline
- HEAL (Health, Education, Advocacy, Linkage) – Trafficking Education and Training Committee – Introductory Training on Human Trafficking for U.S. Healthcare Professionals: Essential Content – April, 2018



# Questions or Comments?

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