Public Health and Human Trafficking
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ACF Response to Human Trafficking

ACF administers more than 60 programs with a $50 billion budget, making it the second largest agency in the U.S. Department of Health and Human Services

- **Office of Refugee Resettlement**: Anti-Trafficking in Persons (ATIP) program serves foreign national victims of human trafficking through grants providing case management, direct services, training, and public awareness
- **Family and Youth Services Bureau**: Serves human trafficking victims interacting with thousands of domestic violence and runaway and homeless youth programs across the country
- **Children’s Bureau**: Serves victims of child abuse and neglect through partnerships with federal, state, tribal, and local agencies, including the foster care and adoption systems
- **Office of the Chief Medical Officer**: Established in April 2012 to focus on intersection of social determinants of health, specifically those influenced by ACF services and programs, and health outcomes. Priorities include examining health outcomes for human trafficking victims, regulating uses of psychotropic medications in foster care, and maximizing health and development for young children in early childhood programs.
Physical and Mental Health Professionals’ Roles in Prevention: Unique role of health care providers can screen for at-risk individuals because they are privy to information crucial to effective prevention (e.g. history of physical, emotional, or sexual abuse can be incorporated into screening questions).

Challenges to Identification
- Misclassification
- Insufficient language capacity
- Lack of cultural competency
- Health illiteracy
- Re-traumatization within systems

Increase Training for:
- Physicians
- Medical Assistants
- Nurse Practitioners
- Health Educators
- Nurses (LVNs and RNs)
- Community Health Workers

Asian Health Services: Developing a Public Health Approach to Child Sex Trafficking (Oakland, CA)

“I started asking, ‘Are you having sex with new people?’” Dr. Chang, 37, recalled. “It was always, ‘No, no, no, no, no.’ Eventually she confided that she was worried about ‘a friend.’ That’s when I asked, ‘Are you trading sex for money?’”

• **Asked the right questions** when a 15-year old Cambodian-American girl came in regularly for STD treatments
• **Changed understanding** when the clinic started seeing youth as victims of child abuse, not as delinquents
• **Took responsibility** as doctors and first responders who can prevent future abuse
• **Shifted focus** to early intervention and counseling
• **Discovered patterns** when young patients brought friends to also be checked for STD’s
• **Provided support** through peer counseling, classes in women’s health, and exchanges with elders to strengthen cultural bonds
• **Became culturally competent** when 40 doctors, nurses, nurse practitioners and physician’s assistants learned the vocabulary (e.g. that “a date” can refer to the exchange of sex for money); outside of typical medical school education
• **Created systems** by developing a CSEC screening protocol (available online)

New York State Nurse’s Association:
Position Statement on Human Trafficking

The intent of this position statement is to heighten awareness, encourage education among Registered Professional Nurses and all healthcare providers regarding human trafficking; and to enhance nursing’s ability to advocate for public safety.

The RN has the responsibility to:

• Advocate for patients, families and significant others who may be inadvertently involved with traffickers;
• Advocate for the rights of the patient to receive adequate healthcare free of coercion from the trafficker;
• Advocate for the recovery and release of the trafficking victim through the available resources;
• Active participation in state and national initiatives that research, disseminate and demonstrate standards and codes that impact governments who do little or nothing to prevent and prohibit trafficking;
• Know the available resources or where to find such resources in the event of reasonable suspicion of a victim of trafficking;
• Document the subjective and objective assessment of the potential victim according to policy to ensure adequate information in collection of evidence;
• Seek continued education and competency in areas of forensic nursing and certification in areas of violence towards women, such as Sexual Assault Nurses Examination.

Source: http://www.nysna.org/practice/positions/human_trafficking.htm
Resource: National Human Trafficking Resource Center (1-888-3737-888)

National toll-free, 24 hour hotline

Subscribe to the newsletter to stay updated

Download Medical Assessment Tool

Take the online training: “Recognizing and Responding to Human Trafficking in a Health Care Context”

Recommendations

Do no harm
Know your subject and assess the risks
Prepare referral information: Don’t offer advice or make promises that you cannot fulfill
Adequately select and prepare interpreters and co-workers
Ensure anonymity and confidentiality
Get informed consent
Listen to and respect each woman’s assessment of her situation and risks to her safety
Do not re-traumatize a woman
Be prepared for emergency intervention
Put information collected to good use

Contact

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