

Human Trafficking

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Purpose

The purpose of this course is define human trafficking and to outline the risk factors, types, warning signs, screening, methods of approach, and resources available to provide assistance and services to victims. This course meets the Florida requirements for a 2-unit course of human trafficking.

Goal

Upon completion of this course, the nurse should be able to describe:

- Describe at least 6 risk factors for becoming a victim of human trafficking.
- The 4 primary types of human trafficking.
- List general indicators (warning signs) that a person may be a victim of human trafficking.
- Describe public and private social services available for rescue, food, clothing, and shelter referrals.
- List the hotlines for reporting human trafficking.
- Describe screening questions and validated assessment tools for identifying a human trafficking victim
- Discuss procedures for sharing information related to human trafficking with a victim.
- List referral options for legal and social services.

Introduction

The one constant in victims of human trafficking is fear. They fear those who control them, they fear trying to break away, they fear going without the drugs that keep

them enslaved, they fear losing the “family” created by the traffickers, the fear ICE, and they fear the police, who often arrest them for crimes they are forced to carry out, such as prostitution, despite “safe harbor” laws that have been passed to protect victims of trafficking.

Human trafficking, a modern-day form of human slavery, is a \$150 billion global business with an estimated 21 million victims that include children, adolescents, and adults. The Trafficking Victims Protection Act (2000) defines severe trafficking as sex trafficking and labor trafficking that involves force, fraud, or coercion. Victims are exploited for forced labor, debt bondage, and/or commercial sex. While many victims are female, males are also victimized.

In 2016, 7,572 cases of human trafficking were reported to the National Human Trafficking Hotline. The states with the highest number of human trafficking cases in 2016 were (1) California, (2) Texas, and (3) Florida. Of cases reported, 6340 were female, 978 male, and 70 gender minorities. Adults made up 4890 cases and minors 2387. Out of the total, 1417 were identified as foreign nationals.

While human trafficking and human smuggling are separate crimes under federal law, human trafficking may also involve smuggling. Smuggling is the illegal transport of a person across a national border, such as from Mexico to the United States. Smuggling is usually done with the consent of the person, who often pays the smuggler to help cross the border. Unfortunately, for many, the trip ends with the person in the hands of a trafficker.

Risk factors for becoming a victim of human trafficking

While in developing countries it is not uncommon for children to be kidnapped or sold into sex trafficking, in the United States, children most vulnerable to commercial sexual exploitation are:

- **Homeless or runaways**
- **LGBTQ**
- **African American**
- **Latino**
- **Those involved in the child welfare system**

FBI statistics shows that 52% of juvenile prostitution arrests are African American and a full 91% are African American or Latino. The average age of child victims is 13. About 40% of homeless youth are LGBTQ and 25% of those overall and 50% of those who are gay or bisexual males are victims of commercial sexual exploitation.

Substance abuse (drugs and/or alcohol) is another risk factor for human trafficking as the need for a constant supply of drugs to feed a habit keeps victims from seeking help. Substance abuse is present in between 40 and 85% of those selling sex.

Foreign nationals who came to this country with legitimate visas and overstayed or **illegal immigrants** who crossed the border are especially at risk of becoming victims because they cannot safely go to the authorities for help without risking imprisonment or deportation, and they cannot apply for public assistance. They are often forced into situations where they work for little or no wages for years on end or work as prostitutes. The majority of foreign nationals involved in trafficking in the United States are from Mexico and East Asia.

Types of human trafficking

There are many different types of human trafficking. According to the International Labour Organization, 68% of victims are trapped in forced labor, 26% are children, and 55% are women and girls. Polaris estimates that there are hundreds of thousands of human trafficking victims in the United States although only about 4000 cases per year are identified per the human trafficking hotline.

Poverty, lack of education, and desperation often leave both children and adults with few options. Even if they could escape human trafficking, they may have nowhere to go but to the streets and no other means of supporting themselves.

Child labor

It is not unusual for young children to work grueling hours in developing countries where poverty is common. In September 2016, the Bureau of International Labor Affairs identified 139 goods produced by forced or child labor in 75 countries, including countries in the Middle East, Asia, and Africa. Child labor is common throughout Mexico, and countries in Central and South

America. Countries such as India, Bangladesh, China, and Thailand are notorious for using child labor.

While laws, such as the Fair Labor Standards Act (FLSA) restrict the use of child labor in the United States, some states have lifted restrictions on child labor or established a lower minimum wage for minors, encouraging businesses to hire them. Agricultural employers are exempt from many provisions of the FLSA regarding minors, which accounts for child field laborers in many areas of the United States, especially immigrant children. A Human Rights Watch report shows that children in tobacco-producing states often work up to 60 hours per week in tobacco fields, being exposed to nicotine and pesticides.

While some legitimately argue that working can teach children responsibility, many of the jobs children are employed in are dangerous and can result in injury or sickness from exposure to noxious chemicals. Unfortunately, OSHA's budget has been cut so that the number of federal inspectors has decreased, and many states have cut funding for safety inspectors and lowered labor standards, so most child labor goes unreported and unidentified.

Child sex trafficking

Estimates are that every 30 seconds somewhere in the world a child is sold into sex slavery, but only 1% of victims are ever rescued. Children are bought and sold through online auctions and ads everyday. Studies show that 63% of child sex trafficking victims are advertised online at some point, and 100,000 new escort/sex ads are posted every day, so many of these ads are for children.

Some victims are forced by parents or other family members into sex trafficking. Others become romantically involved with exploiters who groom them into selling sex. Exploiters usually meet victims in person on the street or elsewhere although increasingly younger victims meet the exploiter online in chat rooms, with the exploiter often posing as a younger person. The exploiter offers comfort, friendship, "love," and in the case of homeless youth, food, a place to stay, and drugs. The youths are groomed and ensnared to the point that they are willing to do almost anything or too afraid to resist.

Sex trafficking of children occurs primarily in street prostitution, escort services, strip clubs, nail salons, massage parlors, porn production, waitressing, and massage parlors. Those who resist or anger the

exploiters may be severely beaten or even killed. Some are forced to participate in pornography, both photos and videos. Child pornography is one of the fastest-growing online businesses, taking in about \$.3 billion dollars yearly, and 89% of all pornography and 55% of child pornography is produced in the United States.

About 40% of adult sex trafficking victims started as child victims or runaways and have been unable to escape. Adult victims are those who are involved in commercial sex because of force, fraud, or coercion. Many prostitutes (male and female) are under the control of pimps and forced to work on the street or in brothels.

Adult sex trafficking

Substance abuse may lead to prostitution, or prostitution may lead to substance abuse as a means of escape. Some victims are forcibly drugged to ensure they are compliant.

Victims of adult sex trafficking are often arrested for prostitution (sometimes repeatedly) but are far too dependent or fearful to ask for help even though studies show that 80% of prostitutes want to leave prostitution. Many adult victims of sex trafficking suffer from depression or other mental health problems for which drugs help to self-medicate. Victims often lack the emotional strength to seek help after years of exploitation and may resist detoxification and drug treatment.

Prostitutes suffer physical and emotional abuse at the hands of pimps and clients with up to 58% reporting violent assaults. They are at high risk of HIV and other sexually-transmitted diseases and may become pregnant and forced to have abortions. They may be moved from one place to another frequently to reduce the chance of coming to the attention of the authorities.

Sex trafficking involves:

- Initial act: Recruitment, transport, harboring or receiving the person.
- Methods: Threats, coercion, abduction, fraud, lies, abuse, and payments.
- Purpose: Prostitution or other sexual exploitation.

Many victims of sex trafficking work in the pornography industry, making films for the almost insatiable demand for porn. While 67% of young men and 49% of young woman believe that pornography is acceptable because people choose to participate, in fact, many do not

choose and those who watch pornography are participants in human trafficking. Even more chilling, the average age at which American children begin to watch porn is 11. To meet the ever-growing demand, 260 new explicit sites go online everyday. Many of those performing are addicted to drugs and alcohol and controlled by the need for a steady drug/alcohol supply.

Labor trafficking

A recent story in *The Atlantic* entitled "My Family's Slave," described a family who immigrated to the United States from the Philippines and brought their domestic slave with them. The educated, professional family (physician and lawyer) had "owned" the slave, Eudocia "Lola" Pulido since she was given as a gift to the mother when the mother was 18.

Lola lived with and cared for the home, children, and family without pay or a room of her own for most of the next 56 years, sometimes sleeping on the floor and being constantly scolded and mistreated. What is chilling is that there are many like Lola in the United States, hidden and mistreated. People look but don't see them because they are essentially invisible.

Labor trafficking, a form of involuntary servitude, occurs when threats, violence, lies, and debt bondage force people to work against their will. Employers may make false promises about high paying jobs and then force people to work long hours for little or no pay, often taking back wages for supplying food or shelter. Illegal immigrants, who are afraid to go to the authorities, are especially vulnerable. A study in San Diego County in California found that 31% of Spanish-speaking migrant workers have been victims of labor trafficking.

Some victims enter the United States legally and pay recruitment fees, expecting a well-paying job. Employers may confiscate passports or other forms of identification to maintain control. Labor trafficking occurs in many different industries in the United States, so this is not just a problem of developing countries or of agriculture. The American Farm Bureau estimates that 7 out of 10 field workers are without legal status, meaning that huge numbers of workers are vulnerable to labor trafficking.

In 2016, 1,057 cases of labor trafficking were reported:

- 201: Domestic work.
- 124: Agriculture.

- 100: Traveling sales crews.
- 75: Restaurants/Food service.
- 45: Health and beauty sales.

These numbers are just the tip of the iceberg, as most cases of labor trafficking are never reported.

Florida statute (2012) 787.06

Florida statutes define human trafficking as a form of modern-day slavery:

(a) Victims of human trafficking are young children, teenagers, and adults. Thousands of victims are trafficked annually across international borders worldwide. Many of these victims are trafficked into this state. Victims of human trafficking also include citizens of the United States and those persons trafficked domestically within the borders of the United States. The Legislature finds that victims of human trafficking are subjected to force, fraud, or coercion for the purpose of sexual exploitation or forced labor.

(b) The Legislature finds that while many victims of human trafficking are forced to work in prostitution or the sexual entertainment industry, trafficking also occurs in forms of labor exploitation, such as domestic servitude, restaurant work, janitorial work, sweatshop factory work, and migrant agricultural work.

(c) The Legislature finds that traffickers use various techniques to instill fear in victims and to keep them enslaved. Some traffickers keep their victims under lock and key. However, the most frequently used practices are less obvious techniques that include isolating victims from the public and family members; confiscating passports, visas, or other identification documents; using or threatening to use violence toward victims or their families; telling victims that they will be imprisoned or deported for immigration violations if they contact authorities; and controlling the victims' funds by holding the money ostensibly for safekeeping.

Hotlines to report human trafficking

National Human Trafficking Hotline

The toll-free National Human Trafficking Hotline is available 24 hours a day every day of the year in more than 200 languages. The Hotline was initiated in 2007 by Polaris, a non-profit,

non-governmental organization although funding is provided by the Department of Health and Human Services and private donations.

Access is by:

- Telephone: 1-888-373-7888.
- Email: help@humantraffickinghotline.org
- Online tip reporting form: <https://humantraffickinghotline.org/report-trafficking>
- Web portal: www.humantraffickinghotline.org

The hotline can provide information directly to victims but can also help nurses determine if they have encountered a victim of human trafficking and can assist with providing information about local resources and steps to take. This hotline does not result in automatic contact with law enforcement.

Homeland security

Homeland security provides hotlines to report human trafficking to **law enforcement**. The hotlines are available 24 hours a day every day in over 300 languages:

- Toll-free telephone: 1-866-347-2423
- Non-toll-free international telephone: 1-802-872-6199
- Online tip reporting form: <https://www.ice.gov/webform/hsi-tip-form>

Missing and exploited children

The National Center for Missing and Exploited Children is a Congressionally-authorized hotline operated by a nongovernmental agency to receive reports of crimes against children. The hotline is available 24 hours a day every day:

- Telephone: 8-200-THE-LOST
- Online tip reporting form: <https://report.cybertip.org/>

Hotlines, Florida

The following hotlines are specifically recommended by the Florida Department of Children and Families:

- Human trafficking of children/child abuse (Florida abuse hotline): 1-800-96-ABUSE (1-800-962-2873)
- Human trafficking of adults (National Human Trafficking Resource Center): 1-888-373-7888

- Exploitation of migrant and seasonal farmworkers (Florida Agency for Workforce Innovation, Migrant and Seasonal Farmworker Exploitation): 1-800-633-3572.

Warning signs of human trafficking

The nurse is most likely to come in contact with victims of human trafficking when the victims seek help for injury, trauma (such as after a beating), sexually-transmitted disease, and/or pregnancy. However, the patient is very unlikely to report that he or she is a victim of human trafficking.

In many cases, the victim will be accompanied by a perpetrator.

Warning signs that a patient may be a victim of human trafficking include:

- Another person speaks for the patient. Evidence of dominating relationship.
- The patient doesn't appear to know the current location, date, or time.
- The patient seems fearful, evasive, anxious, and submissive and may exhibit signs of PTSD (cringing at noise or movement).
- The patient shows indications of physical/sexual abuse, neglect, or torture (cigarette burns, bite marks, bruising around neck, wrists, ankles, vaginal tearing).
- The patient lacks ID or does not have own ID documents.
- The patient appears to be under the influence of drugs.
- The patient cannot or will not explain injuries or gives vague conflicting information.
- Unusual or unexplained tattoo (which may be branding).
- Wearing sexually-provocative clothing.

Other signs of human trafficking that may be observed in the community:

- Unexplained shopping trips or possession of expensive gifts, such as clothes, jewelry, and phones.
- Secrecy.
- The patient keeps late or unusual hours and is secretive about whereabouts.

Screening

When screening a patient for possible human trafficking, the nurse should first assess the potential for danger and follow hospital protocols (such as calling security). Concerns include:

- Is the trafficker present?
- Is it safe for the person to talk?
- What does the victim believe will happen if he/she does not return?
- Does the patient believe that anyone else (family, friends) is in danger?
- Is the patient a minor (<18)?

The **US Department of Health and Human Services** provides a short list of suggested screening questions:

Screening questions	
	<ul style="list-style-type: none"> • Can you leave your job or situation if you want? • Can you come and go as you please? • Have you been threatened if you try to leave? • Have you been physically harmed in any way? • What are your working or living conditions like? • Where do you sleep and eat? • Do you sleep in a bed, on a cot, or on the floor? • Have you ever been deprived of food, water, sleep or medical care? • Do you have to ask permission to eat, sleep or go to the bathroom? • Are there locks on your doors and windows so you cannot get out? • Has anyone threatened your family? • Has your identification or documentation been taken from you? • Is anyone forcing you to do anything that you do not want to do?

If the patient responds affirmatively to these questions, the patient is a potential human trafficking victim.

The National Human Trafficking Resource Center provides lists of screening questions related to specific types of human trafficking. Topics include:

Screening questions	
Fraud	How did you meet this person/find out about your job? Job information provided? Job met expectations? Deceived? Surprised about job/relationship? Conditions changed? Forced to sign contract? Knowledge of rights?

Coercion	Did you ever feel pressured to do something you didn't want to do? Fearful of repercussions? Legal paper/documents withheld? Threatened? Advised regarding what to do if arrested or picked up by immigration? See something bad happen to others? Life difficult if left situation?
Debt-Monetary	Do you have access to money? Money kept? Required to make certain amount of money or pay fees? Money use restricted? Money owed? Debt incurred? Inability to pay debts? Repercussions for failure to pay?
Force	Did someone control you? Communication restricted? Access to medical care? Movement controlled? Forced to do things? Physically abused? Sexually abused? Drugged? Allowed freedom to leave? Afraid to leave?
Sex trafficking	Were you pressured to engage in sexual acts against your will? Photos taken/posted online? Sexual acts with friends/business associates of exploiter? Commercial sex? Required to earn certain amount of money? Commercial sex during menstruation? Transported for commercial sex? Decisions about condom use? Age when started?
Labor trafficking	How do you feel about your employer? Paid fairly? Working hours? Housing provided? Fee for housing? Monthly expenses? Transportation provided? Threatened? Promise to pay for/renew legal documents?

Extensive lists of questions for various special circumstances can be accessed at the National Human Trafficking Resource Center: <https://traffickingresourcecenter.org/sites/default/files/Comprehensive%20Trafficking%20Assessment.pdf>

More **extensive screening** may be carried out when the patient is in a safe environment. Any screening should be carried out in a comfortable location and never in sight of a trafficker. If law enforcement personnel are present, they should be dressed in civilian clothes with no weapons visible. Patients are often very frightened of the police, especially if they are illegal immigrants. Some patients may wish to be interviewed by someone of the same gender, so it's important to ask the patient. Patients will usually only divulge information if they feel safe.

During a screening interview, it's important that the nurse not suggest in any way that patients are responsible for their abuse or situation or appear shocked or judgmental. Some patients may be reluctant to discuss their experiences and may need recovery time before being able to do so.

Patients may have strong attachments to their exploiters and may be reluctant to think of themselves as victims. It's important to note that anyone under the age of 18 who is trafficked is considered a victim, even if the person believes no coercion was involved.

Some victims of intimate partner violence may answer screening questions in similar ways, but there is a difference between intimate partner violence and human trafficking, so the totality of the patient's responses and situation must be considered when determining whether a patient is a victim of human trafficking.

The **Trafficking Victim Identification Tool** (TVIT), provided by the Vera Institute of Justice has been validated for both sex and labor trafficking but may not be appropriate for a first interview because of the stress the patient is under. The TVIT has a long version (12 pages) and a short version (6 pages). The manual and both versions of the tool are available at a number of online sites, including: <https://www.ncjrs.gov/pdffiles1/nij/grants/246713.pdf>

Procedures for approaching victims

Because a victim may be accompanied by the perpetrator of human trafficking, such as a pimp, the same precautions used with victims of intimate partner violence should be used.

Initial interactions

Provide the patient space by not standing too close as this may be intimidating, and use approachable verbal and body language, maintaining good eye contact and engaging in active listening. Engage in casual conversation before attempting to gather further information. Try to avoid taking notes or typing into a computer when talking with the patient. If note taking is necessary, explain the reason to the patient.

The victim should not be confronted directly ("Did someone beat you?") because the victim's first instinct is likely denial. The nurse may

ask more neutral questions, such as about living or working conditions. Before asking any sensitive questions, the patient should be alone and ensured of confidentiality. Sometimes the perpetrator is reluctant to leave the victim alone, so the nurse may need to ask the person to leave for part of the examination or assist the victim to a bathroom. The nurse should mirror the language of the patient. For example, if the patient refers to a pimp as a "boyfriend," it's important to use the same term.

Non-English speakers

If the patient does not speak English at all or well and is of a different cultural/ethnic group, it's good to enlist a colleague who can better communicate with the person if possible. If using an interpreter, it's important to first ascertain whether the interpreter knows the victim or the perpetrator, as these should exclude the interpreter from working with this person. Whenever possible, a social worker or advocate should be included when talking with the victim.

Responses

If the patient expresses interest, information about the hotline or other resources, such as shelters should be provided (brochures should be available) and the hotline contacted for advice. If the victim does not express interest but screening indicates that the patient is likely a victim, the hotline should be contacted for assistance with assessment and the next steps to take. Generally, the most appropriate first hotline to access is the National Human Trafficking Hotline.

Patients may need concrete assistance in formulating an escape plan if there are reasons that their escape must be delayed or they refuse immediate help, such as when children or other family members are involved. Literature should be available in different languages to outline steps and provide lists of resources although keeping literature may not be safe if the person might be searched by a perpetrator.

If the patient asks for shelter and wants to escape at the time of the visit, then the next action is to call security if the perpetrator has accompanied the patient. Once safe, the victim should then decide which authorities to contact unless the victim has suffered an injury (gunshot or knife wound) that requires mandatory reporting to the police or is a minor and covered under mandatory reporting rules. For example, illegal immigrants may not want to notify the police or immigration authorities, regardless of the severity of injury or the type of trafficking. The hotline should be contacted for assistance. At this point, the nurse's primary concern should be the safety of the patient.

All doctor's offices, clinics, and hospitals should post notices that list the hotline numbers and local resources as not all local resources may be referenced in the hotline databases. Bathrooms are often ideal places to place posters because the patient usually goes into the bathroom alone.

See **Appendix A** for Framework for a Human Trafficking Protocol in Healthcare Settings by the National Human Trafficking Resource Center.

Public and private social services

Certification of victims of Human Trafficking

Adult victims of human trafficking who are foreign nationals may receive a Certification letter through the **US Department of Health and Human Services (HHS)** after the **US Department of Homeland Security** grants the person Continued Presence (CP), a T visa, or T visa application was not denied, in accordance with the **Trafficking Victims Protection Act (2000)**. The Certification letter certifies that the victim is eligible for Federal and State benefits and services commensurate with those received by certified refugees.

In order to receive **certification**, those who are 18 or older must:

- Be a victim of a severe form of trafficking (sex or labor trafficking),
- Be willing to assist with the investigation and prosecution unless physically or psychologically unable to do so.
- Have received **Continued Presence (CP)** from Homeland Security or have applied for a T visa and the application has not been denied.
- Be present in the United States as a result of trafficking.

The CP grants temporary immigration status for one year during an ongoing investigation or prosecution. The CP can be extended in one-year increments. The **T visa** allows victims to stay in the United States to assist federal authorities for up to 4 years and to receive an Employment Authorization Document (EAD). Once a victim has received the T visa, the person can apply for permanent residence after 3 years.

Foreign victims of severe trafficking under age 18 can receive benefits without certification and are not required to cooperate with law enforcement although HHS makes an independent determination if the minor is a victim of severe trafficking and is eligible for benefits and services. US citizens do not require certification to access specialized services for human trafficking victims.

Crime victims of a specified list of crimes, which includes rape, torture, incest, domestic violence, female genital mutilation, peonage, involuntary servitude, may apply for a **U visa** if they suffered severe physical or mental abuse as a victim of the specified crimes, has information about criminal activity and will assist in prosecution and have been certified by federal, state, or local officials. The visa is good for a 4 year stay but can be extended, and the holder may apply for apply for permanent residence after 3 years.

Federal law allows trafficked juveniles (unmarried and under 21 years of age) who are also undocumented immigrants to apply for **Special Immigrant Juvenile Status** if the juvenile is declared dependent on the court, in the custody of a state agency or court, is not able to reunify with one or both parents, and it would not be the in juvenile's vest interest to return to the country of nationality.

Safe Harbor Act

In 2012, the Florida Safe Harbor Act passed, similar to laws in other states. This law allows minors to be deemed dependents rather than delinquents, giving law enforcement officials the option of arresting a minor or delivering the minor to a short-term safe house.

In 2016, the law was expanded to include adoption of a screening tool to identify sexually exploited children, to set minimum standards to certify foster or group homes for sexually exploited children, and to require specialized training for child protective investigators and case managers. These certified shelters are now available to accept victims of trafficking.

Florida Statewide programs

- **Florida Coalition Against Human Trafficking** (FCAHT) has been helping victims of human trafficking since 2004 through outreach programs, support programs, training, service delivery, and referrals. The Coalition, through regional branches

- coordinates efforts among law enforcement agencies; human service providers; state, federal, and local government agencies; and non-profit organizations.
- **Florida Council Against Sexual Violence** is a resource for sexual violence issues.
 - **Florida Department of Children and Families, Refugee Services** offers services to victims of human trafficking through the Refugee Services Program to help victims obtain a CP or T visa.
 - **Florida Department of Health, Sexual Violence Prevention Program** operates a hotline and provides education and training for professionals.
 - **Florida Department of Law Enforcement** provides services as part of the Statewide Taskforce on Human Trafficking.

Shelters and Children's Homes

Shelters for victims of human trafficking are located in all states, including the state of Florida. In Florida, there are faith-based programs, including those by Salvation Army, Lutheran Services, Catholic Charities, and Wings of Shelter as well as a number of non-profit shelter programs. Some shelters have age restrictions and some gender restrictions. Some accept both certified and pre-certified victims of human trafficking. Minors may also be placed in foster homes under the supervision of the social welfare system.

Some of the **shelters available in Florida** include:

- Anchorage Children's Home (Panama City), which provides housing to victims under age 21, both pre-certified and certified.
- Lutheran Services (Pensacola, Tampa-Clearwater, Fort Meyers), which provides housing for adolescents ages 10 to 17.
- Salvation Army (Panama City, Cocoa Beach, Tampa-Clearwater), which provides emergency shelter to male and female victims of trafficking.
- Quigley House (Jacksonville), which provides emergency shelter for up to 8 weeks for pre-certified and certified victims of trafficking.
- The Women Center (Melbourne), Which provides emergency shelter and transition housing for 2 years
- Abuse, Counseling and Treatment Shelter (Naples/Fort Meyers), which provides unlimited stay for adult victims of labor and sex trafficking.
- Shelter for Abused Women and Children (Naples), which provides shelter for trafficking victims.

Many of the shelter programs offer a wide-range of other services, such as counseling and referral services. In some cases, the victim's criminal history (arrests for prostitution) or substance abuse may make placement in a shelter difficult, but some special short-term housing is available as well as placement in a recovery center, depending on the victim's needs.

Supportive Services

A wide range of supportive services may be necessary with guidance provided through the Regional Human Trafficking Coalitions. Services should be provided with a victim-centered approach that tries to minimize retraumatization through advocacy and support and a trauma-informed approach that includes understanding of the impact of violence and trauma on the individual. Supportive services may include:

- Transitional housing.
- Job training and employment assistance.
- Substance abuse programs.
- Support groups.
- Mental health assessment and treatment.
- Psychological counseling.
- Medical treatment.
- Legal services
- Advocacy.
- Comprehensive case management.
- Assistance with developing an escape plan.

Conclusion

Human trafficking cannot be curtailed without the vigilance of those who come in contact with the victims. Nurses have a responsibility to be alert for warning signs, to understand the different types of trafficking, and to report suspected cases of human trafficking. Federal, state, and local resources are available to provide guidance and assistance. The nurse should be familiar with local shelters and programs to aid victims. All healthcare providers must be alert to the methods used to control victims:

- Force: Physical or psychological restraint and physical violence.
- Fraud: False promises and advertisements to entice victims.
- Coercion: Threats or physical restraint or schemes to convince victims that failing to perform would result in physical or legal harm.

Screening information and questions should be posted where staff have easy access to them, and information about help, including hotline numbers, should be posted prominently in emergency departments, treatment rooms, waiting rooms, clinics, and bathrooms. In areas with large minority populations, the information should be posted in both English and other appropriate languages, such as Spanish, Russian, or Chinese.

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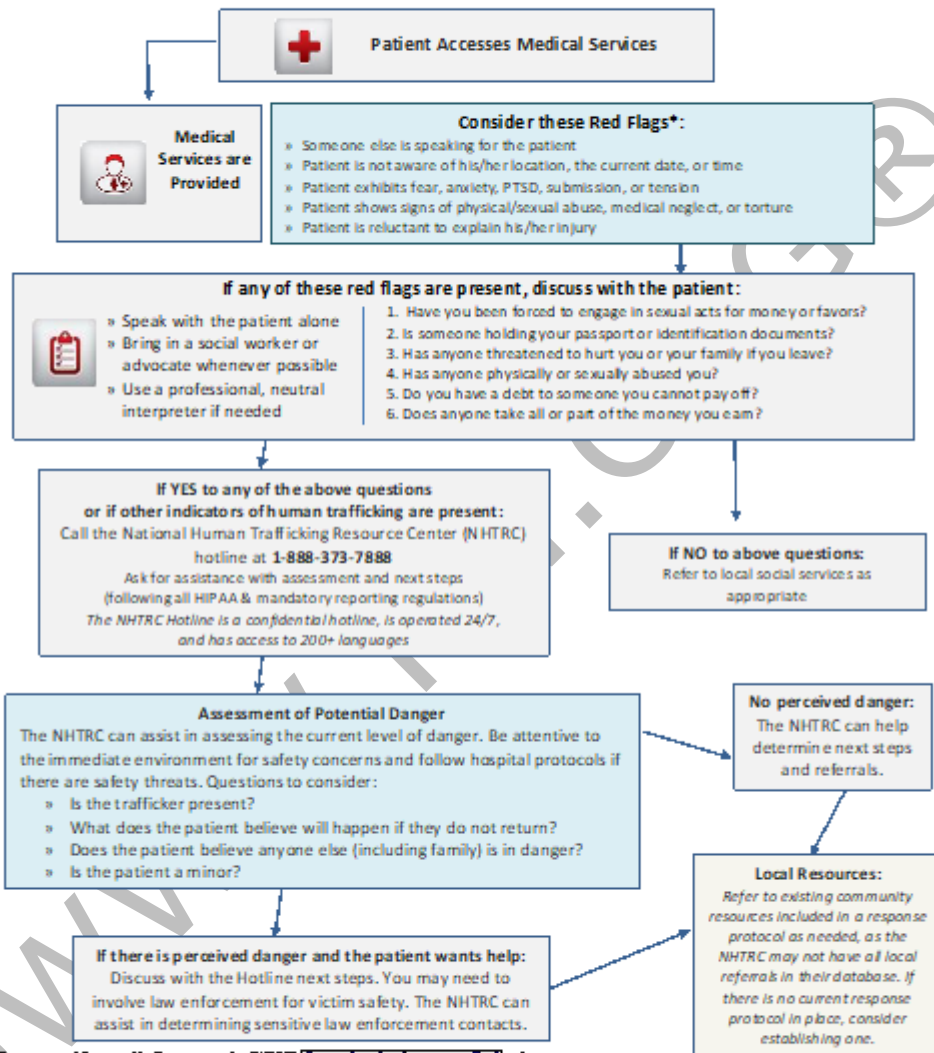
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*For more red flags and indicators see the NHTRC's ["Recognizing and Assessing Trafficking Indicators in Healthcare Settings"](#) and ["Identifying Indicators of Human Trafficking"](#) resources for healthcare providers.

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