

Prevention & Public Health of Trafficking in Persons

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Disclosure Statement

Pediatric Grand Rounds
Riley Hospital for Children
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I have no relevant financial
relationships to disclose



Learning Objectives

Participants will be able to:

- Identify ways in which health professionals have a unique role in addressing human trafficking
- Apply principles of public health to prevent trafficking in persons
- List key aspects of human trafficking prevention programs



When you think of human trafficking,
what comes to mind?



Trafficking = Modern Slavery



Three Key Components

1. movement or confinement,
2. removing personal agency,
3. for financial profit or other gain



Where does it happen?

- Every country
- Any kind of person
- Cities & rural areas



How many people? 21 million?!?



Who is at risk?

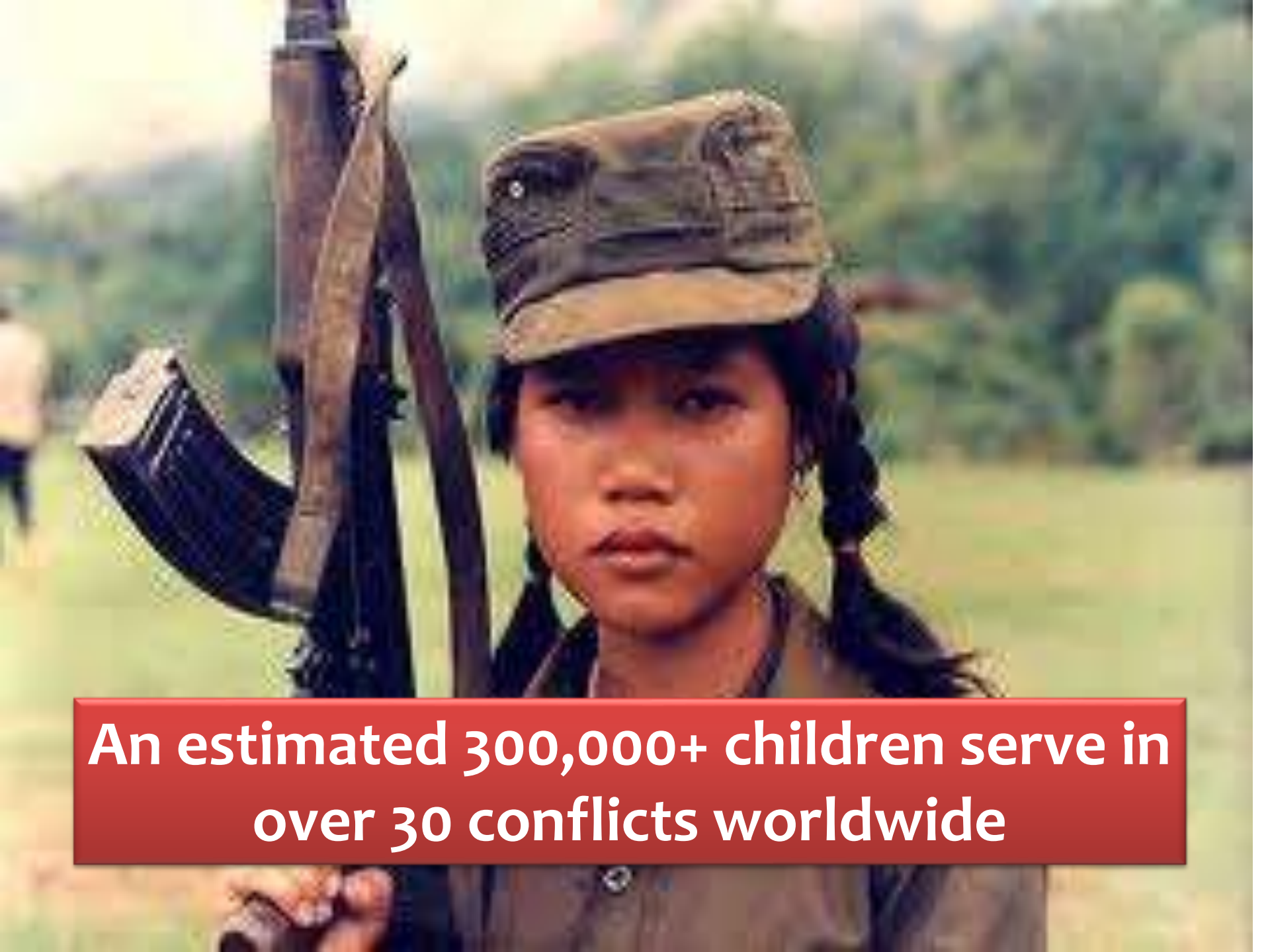


- Impoverished
- Migrants
- Minority groups
- People with disabilities
- Refugees, Internally Displaced Peoples, stateless people
- Victims of humanitarian crises: natural disasters, armed conflicts, etc

Forms of trafficking

- Involuntary domestic service
- Forced labor
- Debt bondage
- Sex trafficking
- Forced child labor
- Forced marriages
- Child soldiers
- Child sex trafficking and pornography





**An estimated 300,000+ children serve in
over 30 conflicts worldwide**

**BOYS
CANNOT BE
BAIT**





**Human trafficking
does not start
when people find
themselves
enslaved**





**Human
trafficking does
not end when
people are
rescued from
their trafficker.**



Stages of Human Trafficking

Pre-departure

Transit and Travel

Destination

Detention, deportation,
criminal investigation

Integration/re-integration



So, what can I do??

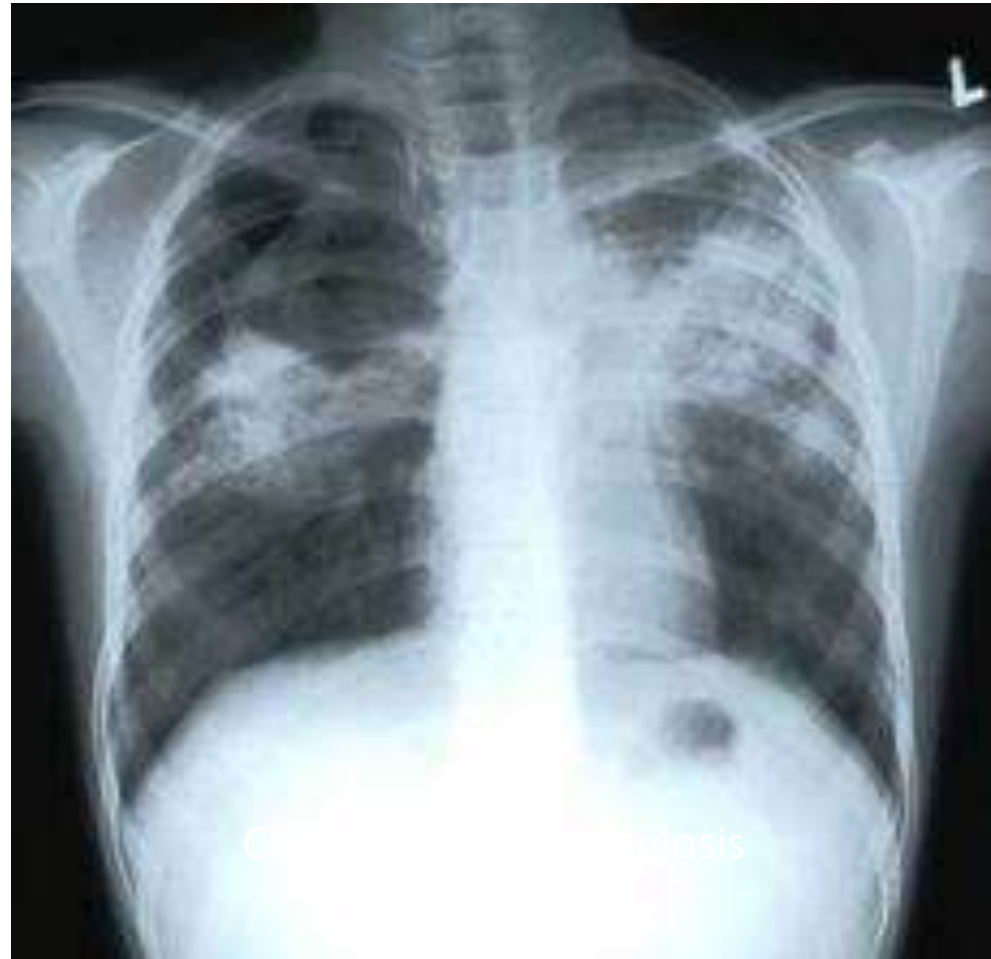


Caring for TIP victims involves **much** more than clinical care:



Health Risk Categories

1. Infectious
2. Non-infectious
3. Reproductive Health
4. Mental health
5. Substance abuse
6. Violence

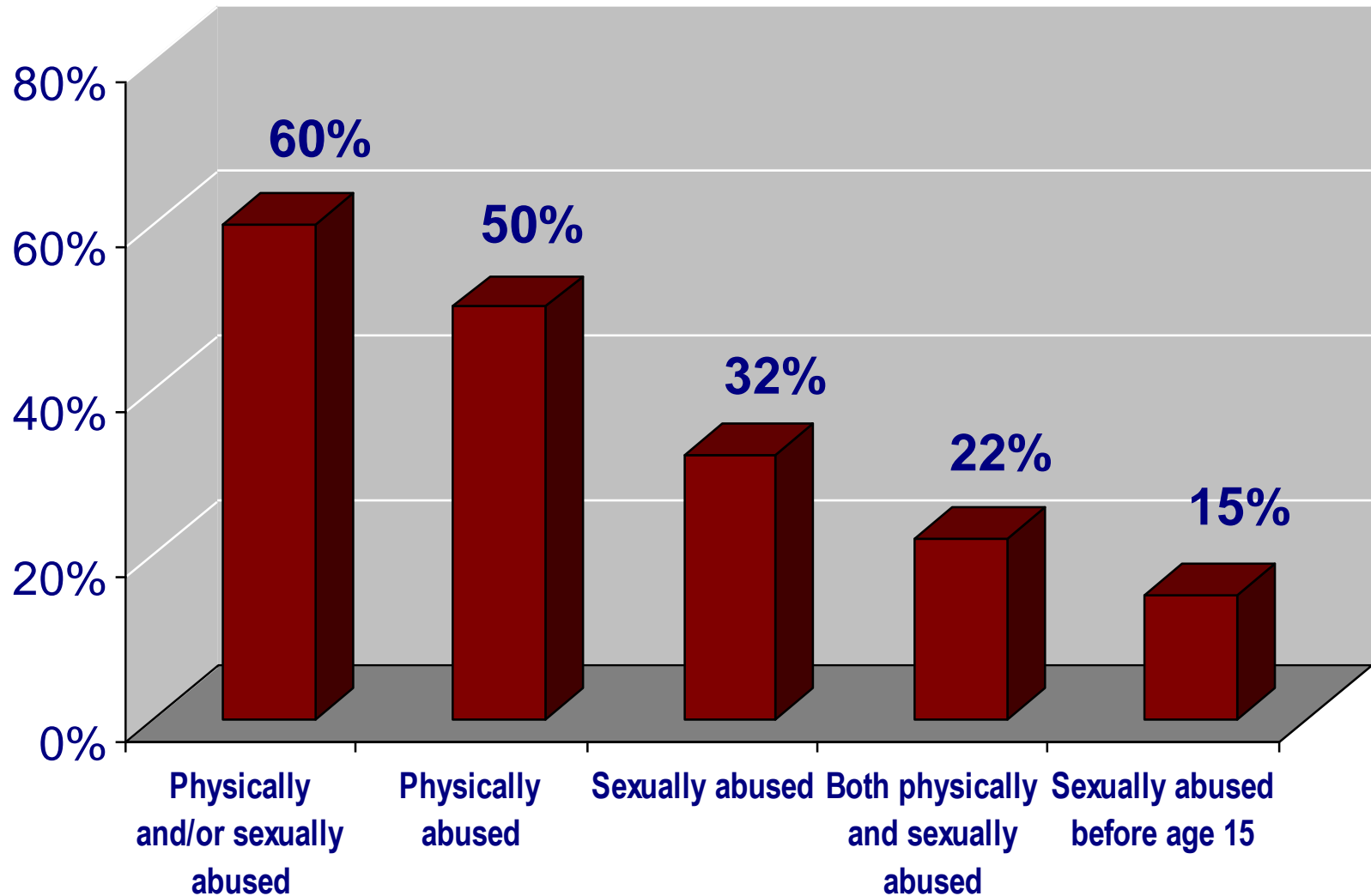


Child Health Issues

- Cumulative impact of health problems
- Toxic environments
- Developmental issues (cognitive, physical, emotional)
- May be under-recognized as victims
- May be separated from parent/caretaker



Violence experienced by women prior to being trafficked

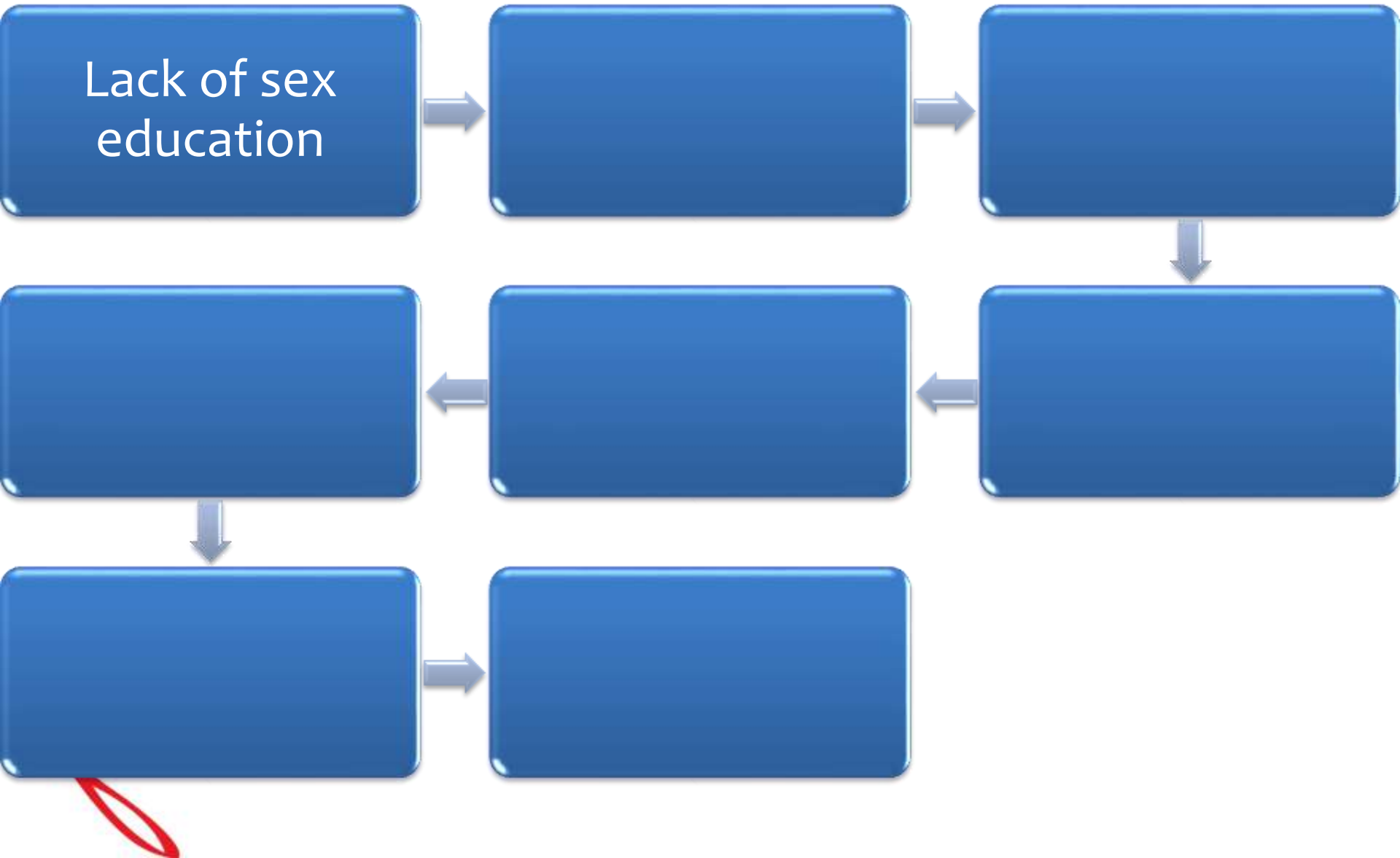


Trafficking IS a public health issue

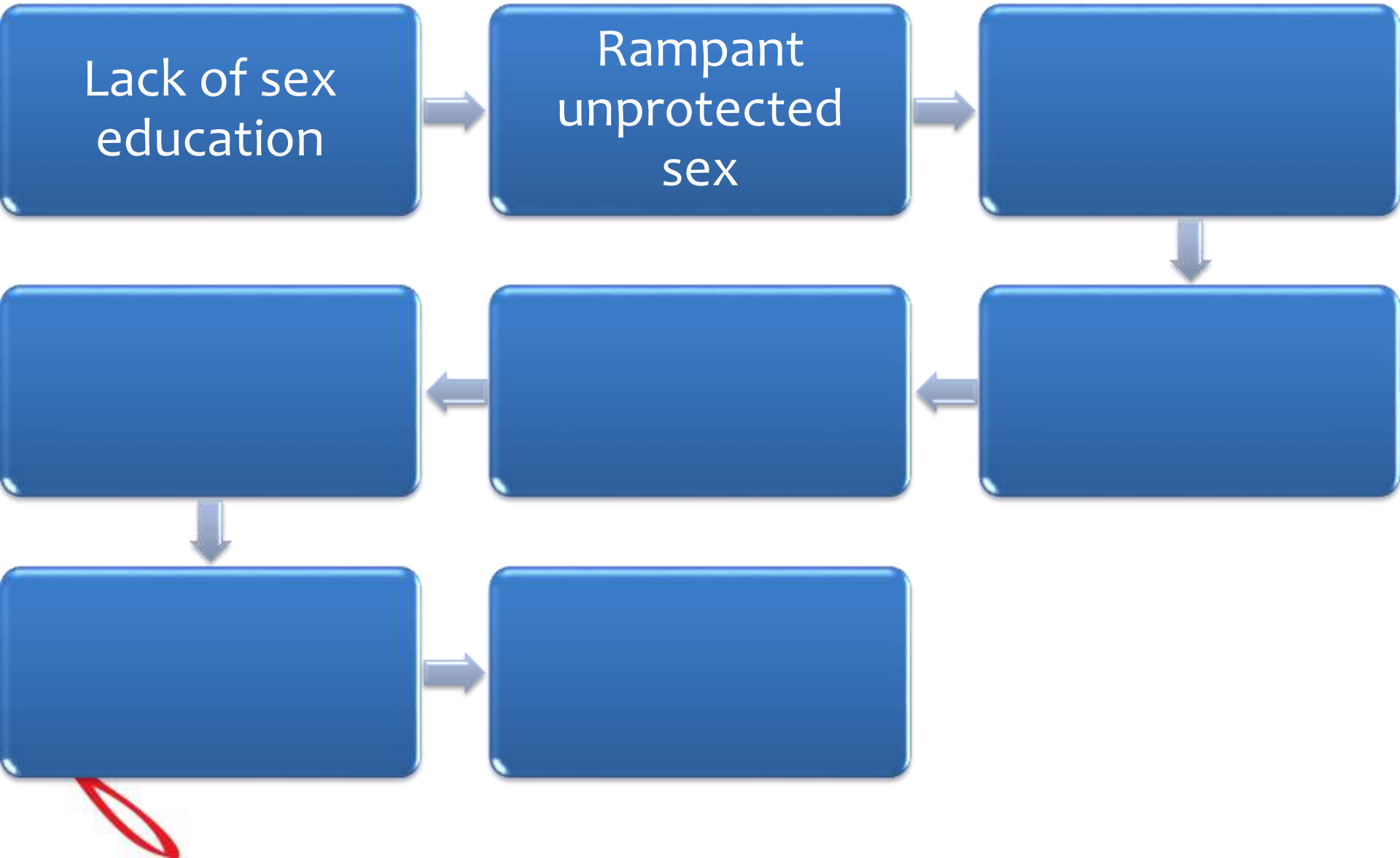
“Monitoring the health status of survivors of trafficking, the care they receive, and their access to medical services will be crucial in the future to hold signatories of the Convention [on the Rights of the Child] accountable and protect this vulnerable group.”

Chris Beyrer, The Lancet

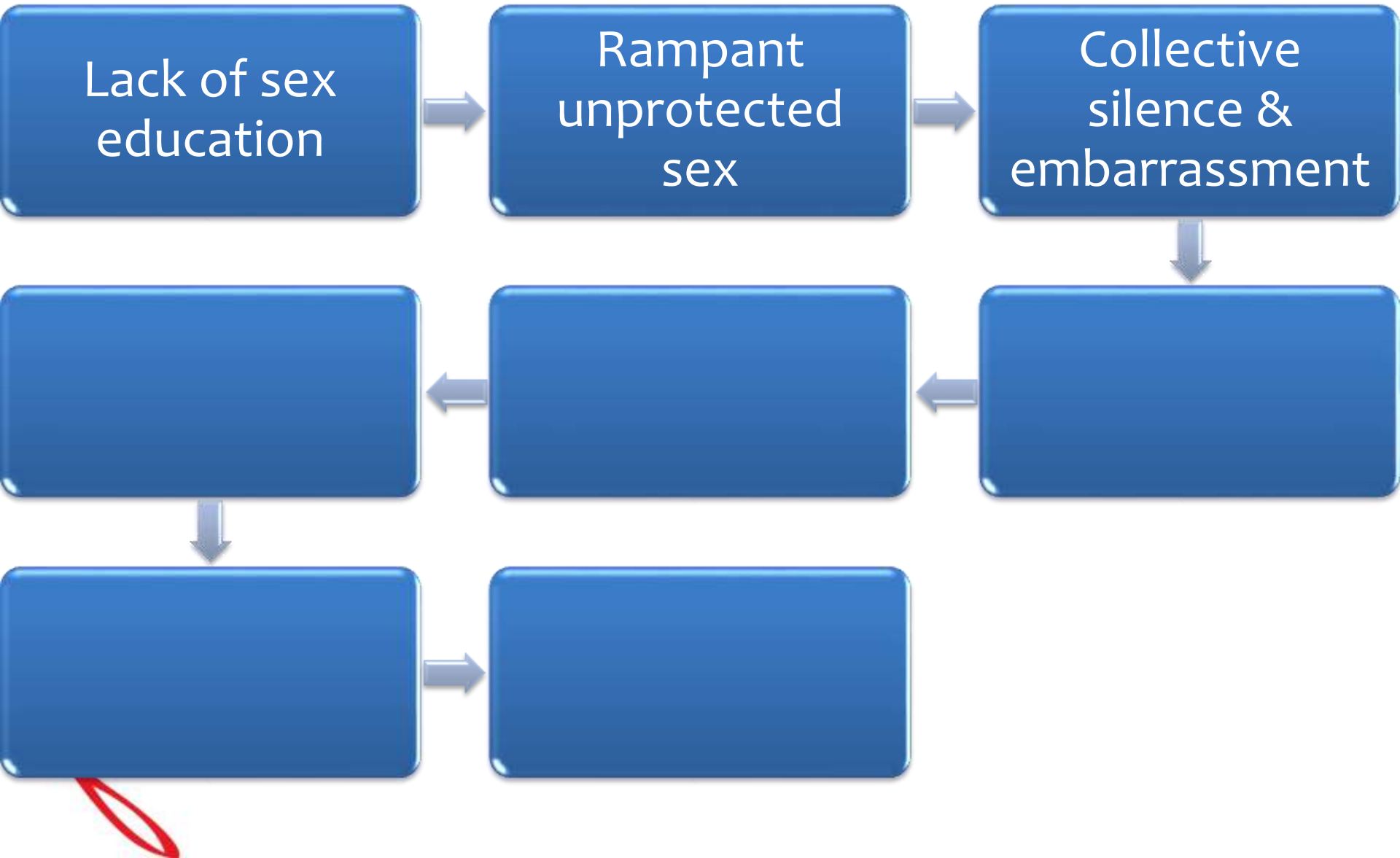
China, STIs, baby trafficking



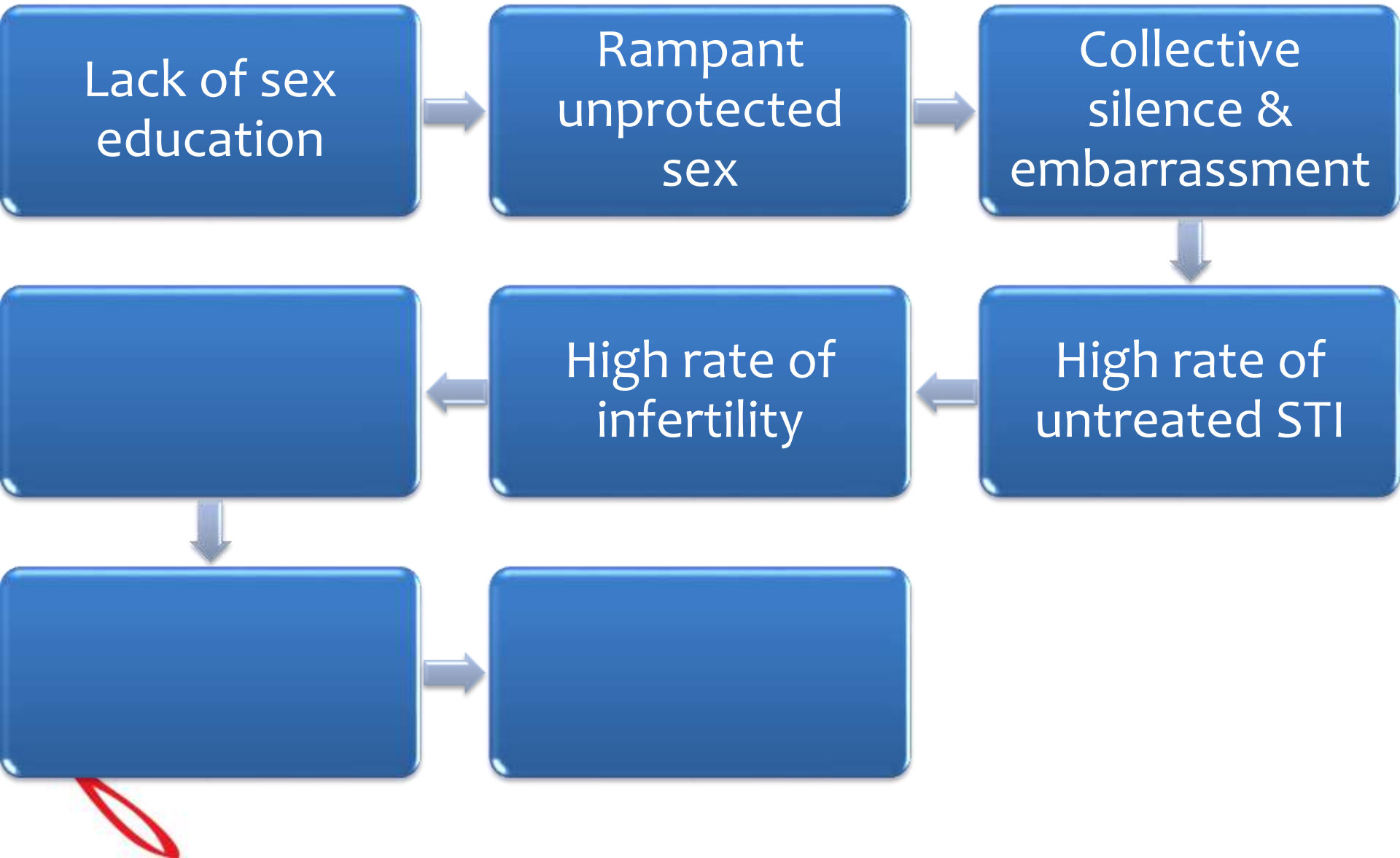
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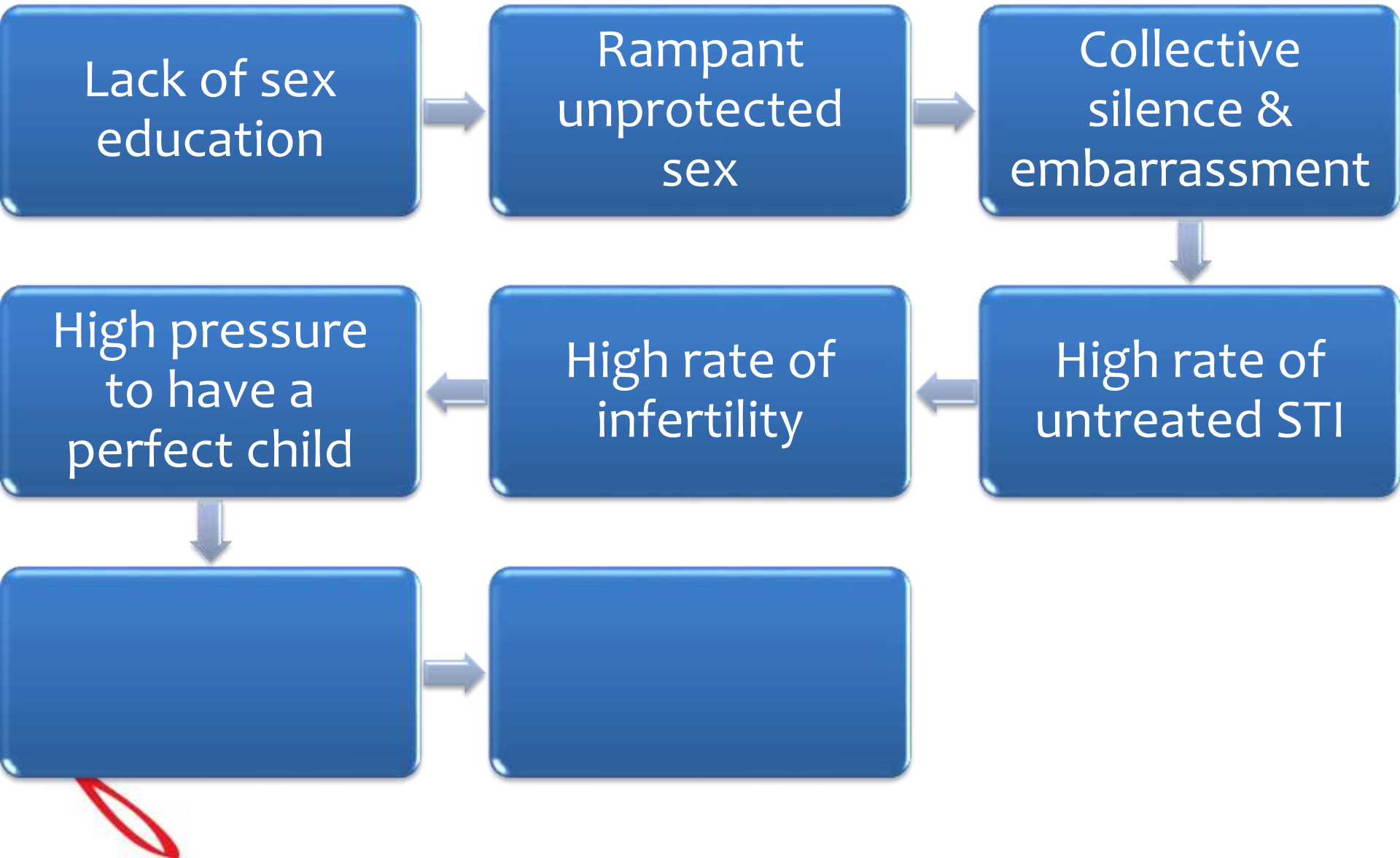
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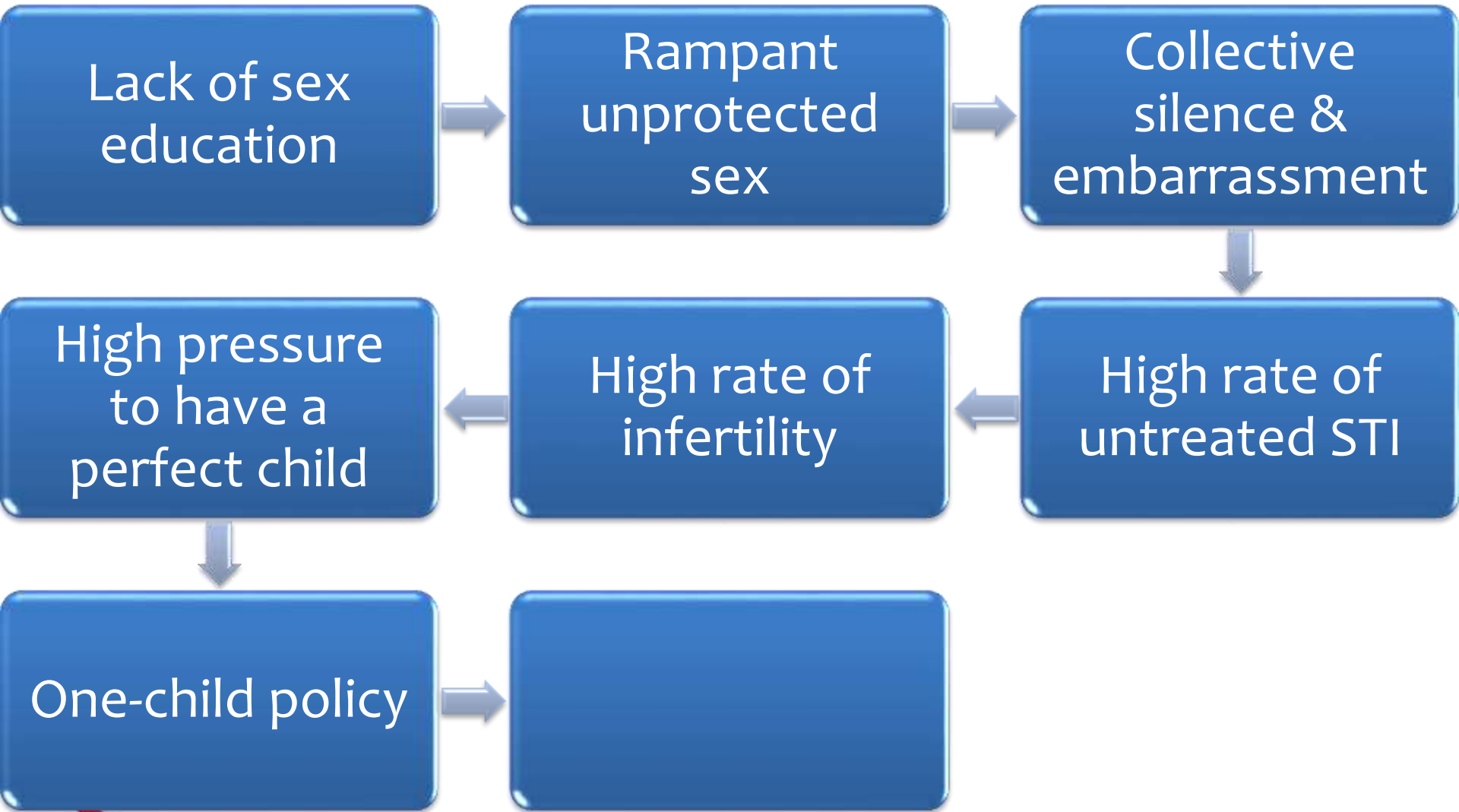
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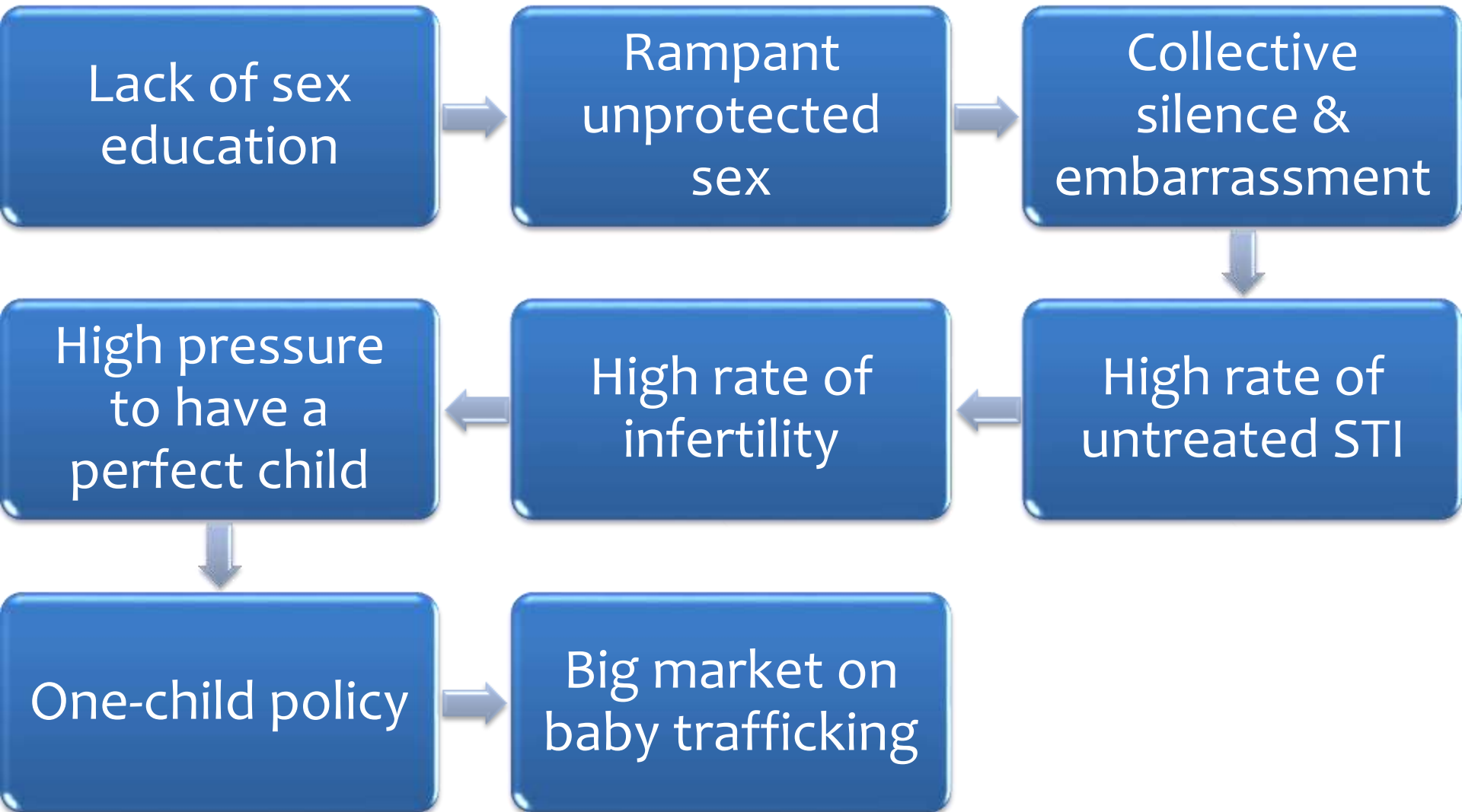
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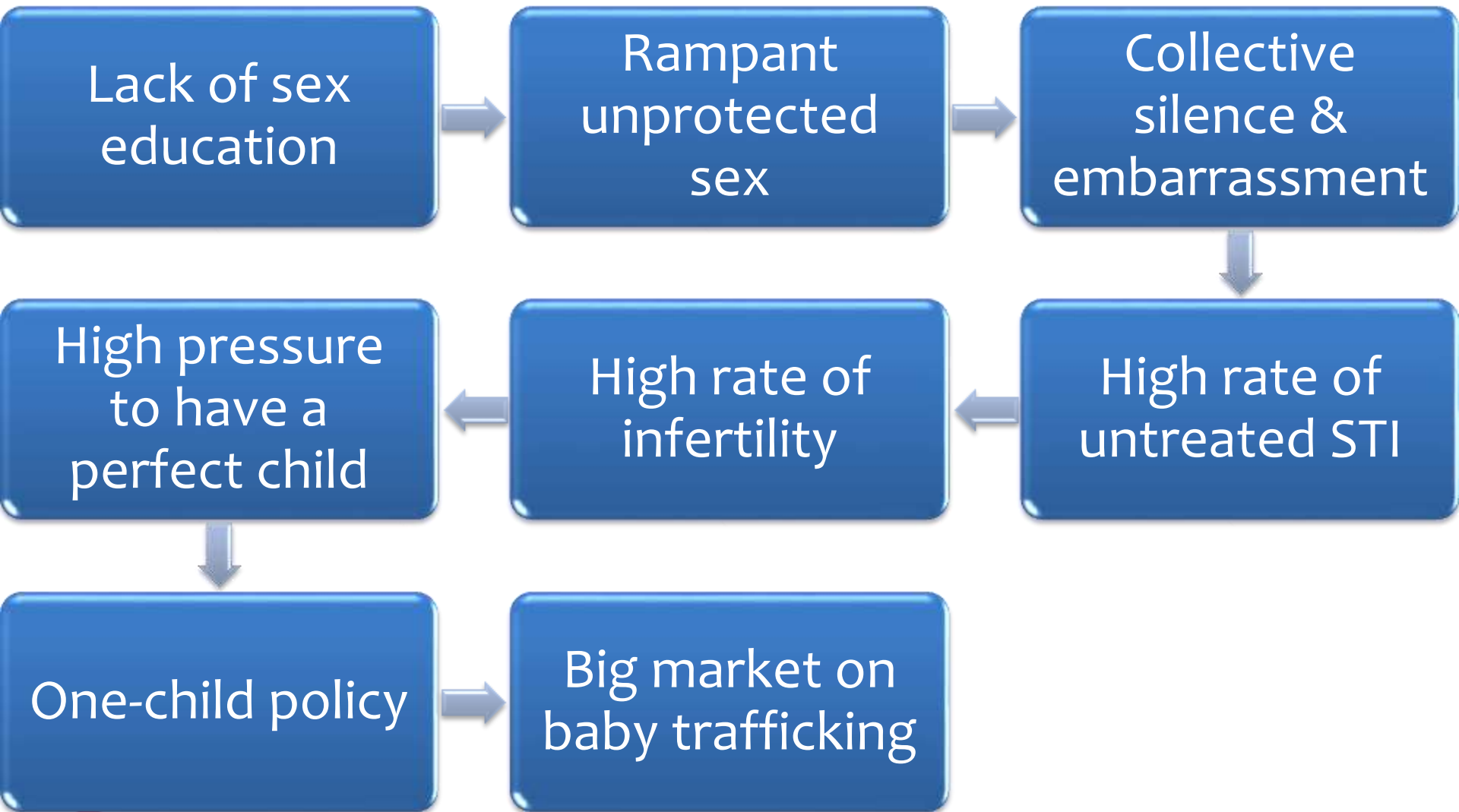
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China, STIs, baby trafficking



Prevention:

Sokha's story



What prevention *could* be

“tightening the net”

Increasing awareness that leads to action

Decreasing demand

Tracking people/money



What prevention is NOT

Identification of victims (2nd/ 3rd degree)

Prosecution/better laws

Safe-harbor laws (2nd/ 3rd degree)

Building more shelters



Public Health Approach

- Evidence-based research
- Prevention
- Addresses root causes
- Addresses societal views & behaviours
- Engages all stakeholders - essential partners



Public Health Approach

society

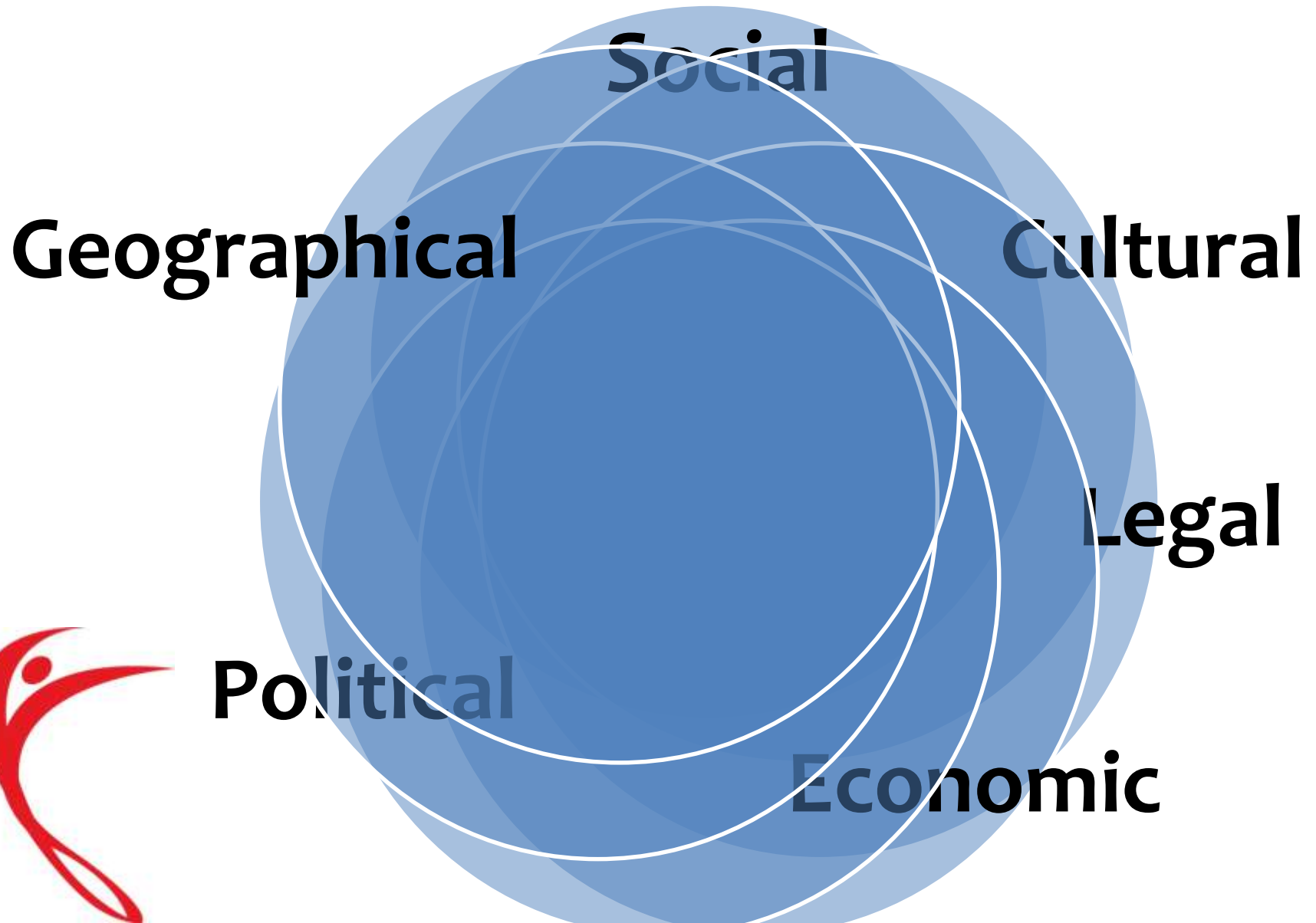
community

relationships

individual



Root Causes



Greater Mekong Subregion

- Thailand
- Burma
- Lao PDR
- Cambodia
- SW China
- Vietnam



Changing Dynamics in Moldova

- Source country (exporting slaves) ---→ Sex tourism destination (domestic slavery)
- “social orphans”
- Italy becoming slave destination
- Changing immigration & political realities



Public Health, Research, & TIP

- Few data document the nature of the health risks or the disease burden globally
- Needed to Identify the traffickers, root causes, and triggering events
- Evidence informs interventions and programs (evidence-based medicine)
- Research can drive policies and generate funding
- Knowing the situation of your community will inform you how to make appropriate contextual interventions
- Information gathered over time gives insight to trends





**“NO DATA,
NO PROBLEM”**



Estimating numbers of people affected is important in public health but problematic in trafficking situation

- Trafficked people and survivors hidden
- Different countries have different definitions
- Need to not make best guesses based on “similar” populations



Health, Prevention, & Research

- Must understand what puts populations at risk
- Prevention messages can be developed and targeted
- Develop safe, acceptable, reliable protocols for interviewing and forensic data collection
- Long-term studies with evaluation and monitoring components



Effective PH Campaigns

- Increase awareness of **nature & magnitude**
- Convey info about **what works & what we can do** about it
- Motivates individuals, orgs, communities to **take action**
- Provides info about **effective steps** and **how to carry out** successful programs
- Designed with **evaluation & monitoring**



WOMAN **TO** GO



**Raising awareness about the
commoditization of women**

“The health-care community must become more engaged in increasing the recognition of trafficked women and girls in health-care settings, in provision of appropriate services, and in helping shape public policy to address what is one of the most disturbing health issues of our time.”

Chris Beyrer, *The Lancet*¹¹



“The business of public health is to take what is accepted and make it unacceptable.”

- Bill Foege, former director of CDC



Guiding Principles



you're the best . . .

THX *many thanks*

..... GRAZIE
muchas gracias

THANK YOU

danke  MERCI

so thoughtful
YOU ROCK

GRATEFUL thanks a
MILLION

.. you're swell



Chiang Mai, Thailand





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What is Human Trafficking?	Legal	Personal Stories	Get Involved	Continuing Education	Trade of Innocents

Continuing Education

To access the modules and begin your journey [click here](#).

Online Education/Enduring Material

Trafficking in Persons: A Primer for the Health Care Professional

Planning Committee: The **Planning Committee Members** of: Jeffrey Barrows, DO MA (bioethics); Gloria Halverson, MD; Olydette Powell MD, MPH; Barbara Snapp; Katherine Welch, MD; Sharon Whitmer, EdD, **DENTAL Planning Committee Members:** Grace Ahn, DDS; Alan Carr, DDS; Michael O'Callaghan, DDS; Richard Topazian, DDS. do not have any relevant financial relationships with any commercial interests.

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Medium Used:

Educational materials are provided by PDF document links. Go [here to download](#) Adobe free software.

Method of Participation:

Medical/Dental participant will view the PDF documents and will complete a posttest evaluation for credit which will measure the potential effect of this educational material on their competence, performance, and/or patient outcomes.

Estimated time to complete the educational activity:

Each session should take 1 hour in length to complete





