



American Academy of Nursing on Policy, Council for the Advancement of Nursing Sciences

Policy brief on the nursing response to human trafficking



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Executive Summary

Human trafficking is a public health emergency affecting an estimated 12 to 30 million people globally. Given that 85% of trafficked victims have contact with health care providers in any year, nurses are critical to: the identification of trafficked persons; effective promotion of their physical, mental, and cognitive health; development and implementation of practice guidelines; implementation of research to inform best practices globally; and championing public policy initiatives at local, state, and national levels.

Background

Human trafficking is a public health emergency (Krug et al., 2002; United Nations Office on Drugs and Crime, 2015) affecting an estimated 12 to 30 million people globally and is part of a \$32 billion illicit business enterprise (Meinert, 2012; U.S. Department of State, 2014). The United Nations defines human trafficking as “the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception...” (United Nations, 2000) (Article 3) with the primary purpose of exploitation for labor or sex.

The expanded definition adopted by the National Institute of Justice (NIJ), consists of the following four elements:

- (1) adult or child participates in commercialized sex, labor, organ procurement, or war, where induction for the adult (not necessary for child) is by force, fraud, or coercion;
- (2) recruitment processes involve obtaining persons through lure, ploy, harboring, capture, smuggling, and/or kidnap for recruitment;
- (3) procurement of services through force, coercion and/or fraud, involuntary servitude, peonage, debt bondage, identity theft, slavery; and
- (4) transport locally, regionally, nationally, and/or transnationally (National Human Trafficking Resource Center 2014; National Institute of Justice, 2014).

However, human trafficking is often defined very broadly, with documented reports of 25 different types of human trafficking (Anthony et al., 2017). There are no positive health outcomes from human trafficking (Anda et al., 2006; Anda et al., 2009; Gillies et al., 2016; Kiss et al., 2015; U.S. Department of State, 2016; Zimmerman, Hossain, & Watts, 2011), particularly for the children trafficked. The individual outcomes are costly to society-at-large, mainly within the health care and justice systems, with trafficking experiences resulting in poor immediate, intermediate, and long-term

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health outcomes (Anda et al., 2009; Argentieri et al., 2017; McEwen, 1998; Oram et al., 2012).

Despite difficulties in measuring the prevalence and incidence of human trafficking, it is clear that human trafficking is recognized as a public health emergency (Clawson & Dutch, 2008; Dovydaitis, 2010; Edmonson et al., 2017; U.S. Department of Health and Human Services, 2017). All states have legislation protecting children from trafficking (National Conference of State Legislatures, 2016), however not all states provide protection for sex-trafficked adolescents arrested for prostitution (Adelson, 2008). Coupled with the lack of recognition of the trafficked person, health care systems for adolescents seeking sexual health care have no mandate to report child sexual abuse because traffickers are not a parent, guardian, or caretaker (New York Civil Liberties Union, 2017).

Given the inconsistencies between and across federal and state legislation and regulations, health care professionals often are unaware of, or question, which protections apply in their practice areas: state legislation (i.e., child abuse reporting), federal regulations regarding Title X reproductive rights (i.e., confidentiality, emancipation, HIPAA) or federal human trafficking statutes (i.e., sex slavery) (Adelson, 2008; Price, 2017). The inconsistency in health care policy, procedure, practice, and state and federal regulation results in 87% of trafficked persons having contact with health care providers without recognition or rescue while being trafficked (Lederer & Wetzel, 2014).

National and Global Policy Responses and Options

National Legislative Action

Examples of national legislative initiatives include the Trafficking Victims Protection Reauthorization Act[s] (2013) (Polaris, 2017), which involved passage of an amendment in 2013 to the Violence Against Women Act (1994) regarding susceptible people at risk for human trafficking in disasters and emergencies, and prevention of child marriage. This legislation also created structure in the National Defense Authorization Act (2013) to prevent the use of business contracts when engaging in human trafficking practices (Polaris, 2017).

The Fight Online Sex Trafficking Act (H.R. 1865, 115 Cong. (2017-18)) was signed into law April 11, 2018, allowing investigation and prosecution of websites facilitating sex-trafficking; providing civil remedies for the children sex-trafficked on websites; and removing legislative protections for internet sites (Fonrouge, 2018).

Other recent legislative initiatives include H.R.767 (115th Congress, 2017-2018) that introduced Stop, Observe, Ask, and Respond (SOAR) and Health and Wellness Act of 2017, establishing programs, training, and best practice processes. As of April 2018, the current bill is under

consideration by the Senate Committee on Health, Education, Labor, and Pensions (Cohen, 2017).

Global Organizations and Regulations

Nations around the globe report the impact of human trafficking (U.S. Department of State, 2016) and are engaged in activities to combat this complex issue that respects no borders. The United Nations General Assembly resolution on Transnational Organized Crime resulted in one toolkit and one protocol (King, 2008); a toolkit designed to assist those fighting transnational organized crime of firearms and human trafficking (United Nations, 2000); and a protocol to penalize traffickers while preventing and suppressing trafficking of women and children, and granting temporary or permanent residence to victims in destination countries (Polaris, 2017).

The number and types of transnational organizations that recognize, identify, rescue or facilitate elopement, and provide wrap-around services for trafficked persons are increasing (U.S. Department of Justice Office for Victims of Crime, 2014; United Nations Office on Drugs and Crime, 2016). Some examples include: Polaris, Heal Trafficking, Prajwila, Stop the Traffik, Children's Organization of Southeast Asia, Urban Light, Empower Foundation, Catholic Relief Services, Red Carpet Project, Not For Sale, GoodWeave, and A21.

Responses from Professional Organizations

- In 2008, 2010, and again in 2016, the American Nurses Association highlighted human trafficking as a public health and human rights crisis (American Nurses Association, 2008; American Nurses Association, 2010; ANA Center for Ethics and Human Rights, 2016), aiming to ensure nurses have skill sets properly identifying and referring victims of human trafficking, and to advocate and support protection and prosecution legislation.
- In 2014, Vera Institute of Justice completed research and published Trafficking Victim Identification Tool (Simich et al., 2014) and Toolkit to Combat Trafficking in Persons: Global Programme against Trafficking in Human Beings (United Nations Office on Drugs and Crime, 2006; United Nations Office on Drugs and Crime, 2018). Although these toolkits address the complexity of a comprehensive and coordinated community response to combating human trafficking, still lacking are examples of the implementation of well-developed health care responses (Barrows & Finger, 2008; Dovydaitis, 2010; Isaac, Solak, & Giardino, 2011).
- In 2015, the American Public Health Association published Expanding and Coordinating Human Trafficking-Related Public Health Research, Evaluation, Education, and Prevention (American Public Health Association, 2015). This policy statement advocates for the promotion of quality curricula, provision of guidance supporting survivor-centered and trauma informed care, and

recommends specific actions to disseminate knowledge through societies, funding, and certification bodies.

- In 2016, the *Association of Women's Health, Obstetric, and Neonatal Nursing* adopted policy ([Association of Women's Health Obstetric and Neonatal Nurses, 2016](#)), and published *Human Trafficking* to promote and enhance nurses' engagement in screening, familiarity with mandatory reporting, and efforts supporting human trafficking victims ([Association of Women's Health Obstetric and Neonatal Nurses, 2016](#)).
- In 2017, the *National Association of Pediatric Nurse Practitioners* provided support with a human trafficking web page ([National Association of Pediatric Nurse Practitioners, 2017](#)) and annual meeting promotion of awareness.
- In 2017, the *Nurse Practitioners in Women's Health* adopted policy recommending safety planning with community partnerships and developing evidence-based interventions ([Nurse Practitioners in Women's Health, 2017](#)).
- In 2017, the *Emergency Nurses Association (ENA)* published a resource web page ([Emergency Nurses Association, 2017](#)), including *ENA Connection* and *Human Trafficking: What Emergency Nurses Need to Know*.

The Academy's Position

The American Academy of Nursing (Academy) supports the promotion of health and safety in persons affected by human trafficking through closure of gaps in macro and micro systems of nursing education, reflective ethics, practice improvement, systems leadership, and ongoing research related to improvement of cognitive, physical, mental, social and spiritual health outcomes.

The Academy advocates for the inclusion of Forensic Nurse experts with advanced nursing practice preparation for leadership appointments in federal and state government workgroups and national, state, and local organizations; for service on interprofessional teams; as leaders and team members in coordinated community responses to human trafficking victims; as advisors to government officials of practice area gaps; as subject matter experts serving on interprofessional community organization boards; as champions for raising awareness for screening in all nurse practice settings; as advanced nurse expert clinicians designing and implementing best practices; and as contributors to planning interventions with community partners that encompass immediate and long-term needs and health of the person trafficked.

The Academy supports routine screenings for violence against persons in all nurse practice settings, particularly for child maltreatment, including persons victimized through human trafficking by intimates and family members ([Amar et al., 2013](#)). The Academy also supports interventions that promote healthy growth and

development, particularly of children exposed to the toxic stress ([Gross et al., 2016](#)) of human trafficking.

The Academy advocates for the integration of forensic nursing content into all nursing practice guidelines by educational and practice organizations and institutions, such as emergency and primary health care settings (specifically to provide skilled forensic nursing care in response to the particular needs of human trafficking victims), and where advanced forensic nursing experts influence policy for populations at primary, secondary, and tertiary care levels, in institutions and organizations globally, and where nursing care of patients intersects with legal systems ([American Nurses Association, 2009](#); [Edmonson et al., 2017](#); [Speck & Peters, 1999](#)).

Recommendations

- Promote:
 - The inclusion of advanced forensic nurses with expertise in human trafficking as members of private business boards; commercial bank boards; not-for-profit service organizations; and, government and other organization task forces, advisory boards, and technical working groups, specifically to influence health care policy, advocacy activities, and legislation related to human trafficking and to promote justice for victims of human trafficking.
 - Faculty-led scholarship indexed in the Sigma Theta Tau International Virginia Henderson Repository to chronicle the intersection of nursing with human trafficking victims through qualitative, quantitative, and mixed methods research.
 - Awareness and education of human trafficking through collaboration with specialty nursing organizations, whose members are likely to encounter victims of human trafficking, on promoting awareness and education, particularly the organizations serving nurse practitioners and RNs intersecting with human trafficking patients.
 - Existing legislation, awareness, and continued appropriations, including passage of SOAR Training on Human Trafficking 2017, among nursing educators and education organizations to integrate a human trafficking curriculum to promote strengths-based workforce to advance the health of persons affected by human trafficking through recognition, identification, and management.
 - Advocate to place forensic nurses, acute care nurses, and community nurses on each state's and territory's Human Trafficking Task Force, joining attorneys, law enforcement, community programs responding to human trafficking, and organizations supporting the work of the interprofessional team committed to elimination of human trafficking.
- Advocate:
 - Promote nurse workforce development of human trafficking expertise with policy for foundation and commercial enterprises (National Institute of Nursing Research [NINR], Robert Wood Johnson Foundation, Johnson & Johnson, Dove and others) to fund development of expertise through scholarship and leadership voices condemning human trafficking.

- For closure of legislative and regulation gaps, wherever found, including the gap in Title X practice guidelines, to formally include sex-trafficking of adolescents as child sex abuse, reportable under all state and territory statutes.
- To federal and state legislators to enact funded legislation that protects and facilitates rescue or elopement of children and other persons ensnared in human trafficking and to support federal and state agencies mandated in the response.
- For legislation, in collaboration with the Academy of Forensic Nursing, American Association of Nurse Practitioners, Nurse Practitioners in Women's Health, American Academy of Emergency Nurse Practitioners, Emergency Nursing Association, and others to require every emergency department to have a competent registered nurse 24/7/365 who has advanced nursing education in general forensic nursing principles, concepts, content, and practice to facilitate identification and rescue of persons affected by human trafficking across all developmental stages and in all presentations.
- Encourage nurses to participate in review panels and technical working groups at the Health and Human Services/National Institutes of Health, NINR, Substance Abuse and Mental Health Services Administration, Department of Justice/NIJ/Office of Justice Programs to include programs that build strengths-based nursing workforce as collaborative members of response teams in the recognition, identification, and intervention strategies necessary to mitigate the biopsychosocial and spiritual impact on health following trafficking trauma.
- Identify advanced forensic nurse educators for, and consultants to, local, state, tribal, and military law enforcement and criminal justice communities.
- Urge Congress to support recommended appropriations with adequate funding and distribution in legislative initiatives for the Violence Against Women Act, Victims of Trafficking and Violence Prevention Act, and The Child Abuse Prevention and Treatment Act among others.

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