

## Identifying and Supporting Trafficked Youth

### Introduction

This Spark introduces your team to identifying signs of trafficking and sexual exploitation among youth in addition to educating about the misconceptions of trafficking, and how to best support victims.

### Objectives

By the end of this Spark training, participants will be able to:

1. Identify signs of trafficking and sexual exploitation among adolescent and young adult patients;
2. Describe strategies for providers and staff to support trafficked and sexually exploited adolescent and young adult patients.

### Supplies

Prepare these supplies prior to facilitating this Spark.

- Laptop
- Projector

### Additional Resources

If you or your colleagues would like to learn more about this Spark topic, take a look at these additional resources.

1. [The Polaris Project](#)- The Polaris Project is a non-governmental organization that works to combat and prevent modern-day slavery and human trafficking. This website has a lot of information about trafficking, links to other quality resources, and a 24/7 hotline for anyone that needs consulting on a suspected case of trafficking (works with the National Human Trafficking Hotline).
2. [National Human Trafficking Hotline](#)- The National Human Trafficking Hotline is a national anti-trafficking hotline that services survivors and victims of trafficking. Individuals can report a tip (can be anonymous), or be connected with anti-trafficking services in the area. The hotline provides support and services to get further help and to stay protected. It is available 24/7, every day of the year in more than 200 languages.
3. [The Life Story](#)- The Life Story is a support network that uplifts girls and women that have been in the sex trade or commercial sexual exploitation by elevating their voices about those experiences. The mission of the site is to support the emotional, physical, or psychological well-being of girls and women who have experienced trauma from trafficking and focuses on building “exit-ramps” to be free from exploitation and violence.

### Citation

If you plan to modify this resource, please cite or credit as: Identifying and Supporting Trafficked Youth in Health Care Settings. Spark Training developed by the Adolescent Health Initiative at Michigan Medicine; October 2018; Ann Arbor, MI.

## Key of Icons

 = Slide change     = Estimated duration of topic     = Script for facilitator     = Note for facilitator

**Intro/Hook**  (5 minutes) 1 – TITLE SLIDE- IDENTIFYING AND SUPPORTING TRAFFICKED YOUTH

 Introduce yourself/yourselves.

 Today we are going to do a 15-minute mini-training, also called a Spark. In this Spark we're going to talk about some of the ways that people of any role in a health care setting can identify signs of trafficking and sexual exploitation among adolescents and young adults. We'll also look at some of the misconceptions about human trafficking and consider ways we can best support victims here at our site. Talking about the ways young people are exploited can be uncomfortable for some people, so please take care of yourself as needed.

Sparks are short and are meant to “spark” thought instead of fully covering a topic, so we encourage everyone to continue the learning and discussion beyond today. There are a lot of challenges in identifying and supporting trafficking victims, and unfortunately, not a lot of easy answers. But we're going to do our best to consider what we can do in this brief discussion today.

 2 – HUMAN TRAFFICKING

 We'll start with a couple of basic definitions. There are two types of human trafficking, labor trafficking and sex trafficking. A lot of times, when people hear the term “human trafficking,” they think it only refers to people being moved across borders. While it's true that many people are brought from other countries to be exploited here in the U.S., much of what we see in human trafficking involves U.S. citizens – and many of them are teens.

 3 – HUMAN TRAFFICKING

 You can see from these definitions that both labor and sex traffickers use the same kinds of force, outlined in the green text as violence, threats, lies, and debt bondage, to get people to do sex acts or other kinds of work against their will.

**Key Concepts**  (5 minutes) 4 – SEX TRAFFICKING OF MINORS

 There are special laws and definitions for youth under the age of 18 who are involved in any kind of sex act for money. Adults who do sex work can be criminally charged for prostitution even if they're being forced to do it against their will. A minor does not need to have a trafficker (sometimes known as a pimp) to be considered a victim of trafficking.

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For instance, if a minor is engaging in what's called "survival sex," where they're acting on their own and using the income from sex to survive, they're still considered a victim of sex trafficking in the eyes of the law. The person who pays them for sex is considered the criminal. This is important to note, because minors doing sex work often don't want to come forward because they're afraid they'll be in trouble with the law.

### 5 – SEX TRAFFICKING

 There are many reasons that young people who are being trafficked might not come forward to us. Sometimes, young people who are doing sex work may feel they are in control and don't need help, which can be challenging for professionals. And people who are being forced into work by a trafficker are often coached not to draw attention to themselves, and certainly not to ask for help. This is partly why human trafficking is referred to as an "invisible" crisis. But is trafficking really that common, and are we really seeing trafficking victims?

### 6 – DO WE SEE TRAFFICKING VICTIMS

 The image on the left illustrates that 88% of survivors report that they had contact with a health care provider while they were being trafficked. The figure on the right represents that 6% of providers report treating a victim of human trafficking at some point in their career. We are probably seeing more victims of trafficking than we are aware of. So how can we notice when someone is being trafficked?

### 7 – WHAT CAN TRAFFICKING LOOK LIKE?

 To help illustrate some of the signs of trafficking, we're going to see four slides, each profiling a few details about a young person's case. Each case will include details at the end that we may – or may not – learn about a patient during a visit. These scenarios represent only some of the possible signs of trafficking. You'll also notice that trafficking can look like many other problems, such as homelessness, drug use, and interpersonal violence.

In these scenarios, we'll focus on the possible signs of trafficking. After the scenarios, we'll talk more about what health care professionals can do in response to support youth.

## Application (5 minutes)

### 8 – 15 Y/O GIRL, EMILY

 15 year-old Emily comes in for her well visit. The person at the front desk and the MA both notice that she avoids eye contact and smells like marijuana. When the provider looks at Emily's completed risk screening tool, she notices that Emily has had sex before and has tried a drug of some kind. The provider asks a couple of follow-up questions to find that Emily has had sex with nine people and has tried alcohol and marijuana.

The points we see here may be all that we learn about Emily. Think to yourself for a moment about what you might notice in your role and whether or not you'd be concerned. Let's look at a little more information.

 9 – 15 Y/O GIRL, EMILY

 Emily met a guy on Instagram who told her she could be a model, and he offered to pay her for nude pictures of herself and her friends.

 Emily may or may not share this information with her provider. Let's talk for a minute about this case.

 Considering all of the information on this slide, does this appear to be a case of human trafficking? Why or why not?

 [Allow for brief discussion.]

Because Emily is a minor and because there is money involved, it definitely counts as sex trafficking. Okay, let's move on to the next scenario.

 10 – 17 Y/O BOY, LEO

 The items listed on this slide are all things that the front desk staff notices about Leo, who is waiting for a walk-in appointment for back pain. The front desk staff asks the social worker to talk to Leo. What might have made the front desk staff concerned?

 [Allow for brief discussion – answers might include that he is food insecure, might be hiding injuries or cutting with his long sleeves, and his inconsistent answers made her feel like he might be hiding something]

The social worker is able to meet briefly with Leo before he sees the provider for his back pain.

 11 – 17 Y/O BOY, LEO

 After building trust and asking some screening questions, the social worker finds out the rest of the information on this slide.

Do you think he's being trafficked? Why or why not?

 [Allow for brief discussion.]

It sounds like Leo's sponsor is his trafficker, because Leo does chores for him and his friends, and this is probably not Leo's choice. The fact that Leo is undocumented makes it more likely he's being trafficked because his sponsor could threaten to report Leo's immigration status. However, from just the information on this slide, it's not definite that this is a trafficking case. In many situations, it's not immediately clear if a victim is being trafficked, which can be challenging when we want to help. Let's consider another case.

 12 – 19 Y/O GIRL, ATHENA

 Athena has been in for pregnancy tests multiple times, and she has scars on her arm that look like cigarette burns. Think to yourself: from the information you can see on this slide, would you have concerns about Athena?

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 13 – 19 Y/O GIRL, ATHENA

 Now, considering all of the information we can see on this slide, do we know for sure if she is being trafficked? Why or why not?

 [Allow for brief discussion.]

Because Athena is an adult, she is not automatically considered a trafficking victim. However, if her boyfriend uses force, fraud, or coercion to get her to have sex with his friends, it is trafficking. This might look like him blackmailing her with nude pictures, telling her family she's been dancing, or taking part of the money she makes.

 14 – 16 Y/O BOY, JORDAN

 Jordan comes in for a walk-in appointment at a community clinic for an STI test. The front desk person takes note of the first two points, and the provider learns that Jordan has been having symptoms. From this information, what might you think is going on with Jordan?

 [Pause for response: probably homelessness.]

Remember that trafficking can often look like – and include – other problems. Let's learn more about Jordan.

 15 – 16 Y/O BOY, JORDAN

 The provider learns that Jordan's parents kicked him out of the house, and he has been having survival sex. We mentioned survival sex earlier, which means having sex for money in order to buy food and basic survival needs.

Is Jordan considered a victim of sex trafficking? Yes; even though there's not a third party trafficker, because he's under 18, he's considered a victim.

 16 – WHAT CAN TRAFFICKING LOOK LIKE?

 Sometimes, victims will disclose information like we saw in the bottom bullet points, and sometimes they will not be able to or ready to. It can be frustrating not to have a checklist to identify when young people are being trafficked, or to suspect someone is being trafficked and not be able to help them leave their situation.

Do you feel like you might be more likely to suspect trafficking with any of these four cases? Why?

 [Allow for brief discussion.]

Now let's hear what some survivors say about their experiences in a health care setting.

 17 – SURVIVOR VOICES

 These comments from survivors touch on ways health center staff and providers can create a space where victims of trafficking can feel more comfortable, and maybe even be more likely to disclose if they need help. Would one of you volunteer to read these quotes?

Sometimes our own biases can get in the way of spotting problems. And sometimes, even if our gut says something is wrong, we don't know what to say or do, or we don't want to make a big deal

of something, or we think that it's someone else's responsibility to get involved. However, like we saw in the earlier scenarios, people in every role in a health center can notice signs of trafficking.

## 18 – WHO CAN PLAY A PART?

 We can pay attention to our gut feelings and work together to support victims. A security guard in the parking lot can notice a struggle or other conflict. Front desk staff might notice if an adult doesn't let a teenager speak at check in and takes the teen's phone aggressively. People in various roles might notice repeat visits for certain types of injuries, pregnancies, or STI tests. Providers can use additional risk screening questions to identify when adolescent patients are at high risk of being trafficked, as well as actual trafficking situations. We saw some examples of all of these in the scenarios. Being tuned in to red flags and communicating with our team when something doesn't feel right can make all the difference.

## 19 – TALKING TO VICTIMS: *ALL ROLES*

 What specific behaviors can people of any role do to encourage young people to come forward, either at an initial visit or in the future after they build trust with us? Read through the two lists to yourself for a moment. You may notice that some of these strategies are also relevant for interacting with victims of interpersonal or domestic violence.

Which of the strategies from either list feels like the hardest thing to do?

 [\[Allow for discussion.\]](#)

Now let's look at some additional strategies for providers and their one-on-one time with patients.

## 20 – TALKING TO VICTIMS: *PROVIDERS*

 The first bullet point in italics mentions that providers can mirror a patient's language when relevant, which means using the terms a patient uses. For instance, if a patient discloses that she is doing sex work by saying, "Sometimes I work for my boyfriend's friends," how might she respond

if you say, "When you're working as a prostitute, do you use condoms?" or "Are your trafficker's friends ever violent with you?"

Also, we can allow patients control over decisions when possible, like asking "How can I support you after this visit?" or "When would you like to check in again?", or ensuring they have a say in their treatment options.

Finally, in most settings, providers ask their adolescent patients standardized questions to assess for risk behaviors. When providers ask about things like sexual health, substance use, or interpersonal violence, they have the opportunity to notice red flags that prompt them to ask follow up questions. Let's look at some examples.

## 21 – SCREENING QUESTIONS: *PROVIDERS*

 Again, it's recommended that screening for risky behaviors be done for all patients, and if there is any suspicion of trafficking, questions like the ones on this slide can be added. As you read through these, notice how the tone is non-judgmental.

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 22 – WHAT CAN WE SAY?

 Now here are some examples of concrete things that someone can say to offer support to a person who is being trafficked. Consider which of these might fit best with your role, and if there are other things you could say to offer support as well.

 [Read quotes aloud or pause while people read to themselves.]

 23 – THE POLARIS PROJECT

 If we come across a patient who we suspect is being trafficked, we can also consult with experts to learn if there is anything else we can do. The Polaris Project, which is affiliated with the National Human Trafficking Hotline, has helpful information, including anonymous reporting, 24/7 support for victims, and links to other quality websites for more information. Bookmark the hotline on your computer, or keep hotline cards posted around your health center. And if a patient discloses that they are being trafficked, Polaris can help you and the patient navigate next steps.

Many communities also have local resources, either for direct services for trafficking victims, or to help with food, shelter, and intimate partner violence. Which ones do people know about in our area?

 24 – RESPONSE STRATEGIES

 Let's recap some of the strategies for supporting trafficked youth that we've talked about today and consider a few more.

 [Read through strategies.]

Similar to situations of interpersonal violence, even if we do all of these things, we can't guarantee that a victim will disclose they're being trafficked, or that they will be ready or able to leave. Sometimes, the best we can do is offer compassion and resources if they need them. There's not one perfect solution for every situation. Knowing this, which of these strategies can we strengthen or begin doing?

 25 – THANK YOU!

 Thanks for participating in this Spark today. I hope it accomplished its goals, to help people of any role identify some of the signs of trafficking and sexual exploitation among youth, and also to give us some ideas about how to support young people when we suspect they're being trafficked.