

Issues up close

The costly business of human trafficking

By Susan Trossman, RN



Education and intervention are keys to ANA's and nurse leaders' quest to halt human trafficking.

IT MAY SOUND LIKE THE PLOT of a television crime show or a hard-boiled detective novel, but human trafficking is real, extremely lucrative, and a growing problem that nurses and other humanitarian advocates are determined to stop. Human trafficking—coercing vulnerable people into situations of sexual or labor exploitation—doesn't happen just in remote areas of the world. It happens in the United States as well.

This past summer, more than 600 nurse leaders attending the ANA's House of Delegates (HOD) meeting approved two measures that build on the profession's long-standing work of meeting the needs of vulnerable populations. One measure addresses human trafficking; the other, intimate partner violence. What follows is the first in a two-part series on these vital HOD actions.

Who, what, where

A multibillion dollar industry, human trafficking generally is a hidden problem. Periodically, though, a few cases make their way into the mainstream media. In December 2007, a wealthy New York couple was convicted of enslaving and torturing two Indonesian domestic workers for several years. In September 2008, the Iowa attorney general successfully prosecuted a 37-year-old man under the state's



2-year-old human trafficking law. The man had recruited two Nebraska teenagers to work in strip clubs and prostitution while keeping the money they made.

"Human trafficking is an issue that ANA and nurses are addressing because first and foremost, it's the right thing to do," says Martha Turner, PhD, RN-BC, NEA-BC, assistant director of the ANA's Center for Ethics and Human Rights.

Outside of law enforcement, healthcare settings are among the few places where the lives of human trafficking victims may intersect with the rest of society's, if only for brief periods. According to Turner, it's the nurses who provide much of that direct care because so many nurses—some 2.9 million—work in so many different settings. It's important for RNs to understand the breadth of the problem as an individual and public health issue and to know how to identify and effectively intervene in these cases, say nurses who routinely advocate for human rights.

In a June 2008 *Trafficking in Persons Report*, the U.S. government noted that it's difficult to precisely determine the magnitude of human trafficking both nationally and globally because of its underground nature. It quoted estimates by the United Nations' International Labor Organization that at any given time, some 12.3 million people are in forced labor or bonded labor (where they must work to pay off high-interest employer loans), forced child labor, or sexual servitude.

Federally sponsored research found that roughly 800,000 persons are trafficked across national borders annually; about 80% of transnational victims are women and girls and up to 50% are minors. Typically, victims are promised a better life through employment, educational opportunities, or marriage. Instead, nurse advocates say, they find themselves entrenched in modern-day slavery, working as domestics, laborers, sweatshop workers, nail salon employees, or commercial sex workers. Victims generally don't identify themselves because many traffickers use physical, sexual or emotional abuse to control them, according to a background brief distributed at the September 2008 National Symposium on the Health Needs of Human Trafficking Victims held by the U.S. Department of Health and Human Services (HHS). Turner represented the ANA at the meeting, where she confirmed the importance of nurses working with government agencies and other healthcare professionals to address human trafficking.

Nurses taking action

In introducing the HOD measure, the New York State Nurses Association (NYSNA) reported that trafficking victims experience many social and health problems, including sexually transmitted diseases (STDs), malnutrition, substance abuse, and mental illness. The NYSNA noted that since 2000, national and state programs have

been implemented to provide support services to victims, raise public awareness, and promote outreach efforts to identify victims. Also, laws are in place (including one recently enacted by New York) that take aim at perpetrators. But more work is needed to win comprehensive legislation throughout the country.

The HOD resolution approved by nurse delegates asks the ANA to:

- affirm that the global issue of human trafficking is pertinent to the public health of our nation and therefore affects the profession
- encourage its largely state-based constituent member associations to advocate for and seek opportunities that provide RNs with the information and skills they need to properly identify and refer trafficking victims
- work collaboratively with state nurses associations to advocate for and support legislative activities that will decrease the incidence of trafficking.

Although she didn't write the resolution, NYSNA Board of Directors member Christine Saltzberg, PhD, PHCNS-BC, was instrumental in bringing the issue of human trafficking to the attention of her state association and the larger nursing community.

"When I first started talking about this issue with my nurse colleagues, I found that they were unaware of the extent of human trafficking, particularly in this country," says Saltzberg, an assistant professor of public health nursing and women's studies at the University of New Hampshire. "Having the resolution passed at the ANA meeting is very helpful, because it alerts nurses nationwide about this problem and the importance of addressing it through legislation, prevention, and healthcare interventions."

Alabama State Nurses Association (ASNA) member Helen Wilson, MSN, RN, spoke in support of the resolution at the ANA meeting. She has been an advocate on this issue through the ASNA, which signed on to the HOD resolution, and through the service organization Soroptimist International, which is combating the trafficking of women and girls through a comprehensive public awareness campaign.

"Nurses need to know that human trafficking touches their communities, their states," Wilson states. "As nurses, we're supposed to promote the humane treatment of all human beings. So we need to be a lot more aware of this issue as a whole because human trafficking is not only a public health issue but also an ethical, moral issue."

Identify, intervene, and advocate

For the second time, Barbara Glickstein, MS, MPH, RN, a public health nurse and producer and host of the radio program "Healthstyles," spoke at the NYSNA's business meeting. This year, she focused more narrowly on the nurse's role in combating human trafficking in society, such as helping RNs identify victims, assisting them in

accessing victim resources, and clarifying the nurse's role in the trauma recovery process.

When Glickstein speaks to nurses, she likens human trafficking to domestic violence in the early 1980s, when greater awareness and appropriate interventions were just beginning to take hold.

"Human trafficking is a difficult, painful topic, and like any social human rights issue, it's complex, enormous, and multilayered," Glickstein says. Although most victims have little or no access to health care, some come to emergency departments if they're victims of extensive violence or to maternal-child units, HIV-AIDS centers, and reproductive health clinics to be treated for STDs and other women's health issues.

The HHS document on the health needs of trafficking victims reports that nearly all suffer from at least one health problem, such as chronic pain, broken bones, infectious diseases, memory loss, ear pain, or unhealthy weight loss. Interventions include performing comprehensive assessments, ensuring culturally appropriate providers and interpreters, safely removing the victim from the situation, and collecting crime-related evidence, according to nurse advocates and federal resources. Although many victims lack the ability to trust, Turner believes nurses are skilled at quickly building trust with patients, which can allow them to effectively intervene.

Adds Saltzberg, "We can't say only ER nurses or public health nurses or forensic nurses must be adept at recognizing and assisting trafficking victims. We all need to be working on this together because it's part of our professional obligation to the public."

Saltzberg believes it's crucial to build a network of nurse experts in trafficking-related health issues. Every year she teaches a graduate course in which students become well versed in women's health issues, including human trafficking.

"These graduate nursing students will become resources and leaders for their institutions and agencies," Saltzberg says. This fall, she shared information on her graduate course at the American Public Health Association convention as a way to create an even bigger network of nurse experts.

Glickstein and Turner add that it's important for nurses to participate in government and healthcare task forces when human trafficking issues are being discussed and when potential educational programs and victim interventions are being designed.

To learn more about human trafficking, visit www.nursingworld.org/ethics. Other web resources on human trafficking include www.acf.hhs.gov/trafficking/campaign_kits/index.html#health and www.soroptimist.org/whitepapers/wp_womentrafficking.html. ★

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