Human Trafficking in Kansas

Healthcare Providers

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Human Trafficking is based on recruiting, harboring and/or transporting people solely for the purpose of exploitation

- No freedom to leave situation

- Includes labor trafficking and sex trafficking

- Human Trafficking, a modern form of slavery, is the second largest and fastest growing criminal industry in the world

- Exploits a person’s vulnerabilities

- Trafficking industry thrives on ignorance and preys upon the uneducated.

**See Disclaimer**
Trafficking is NOT the same as Smuggling, but they can overlap

**Human Trafficking**

- Victims do not consent to their situations
- Entails forced exploitation of a person for labor/services
- Crime against each persons fundamental rights
- Occurs domestically—victims held captive in own country
- Crime Against Person

**Human Smuggling**

- Includes those who consent to smuggling
- Contract ends after border crossing
- Smugglers need only to entail physical movement of “customers”
- Is always international
- Crime Against Border

**See Disclaimer**
Human Trafficking in Kansas

- More than 80% of human trafficking involves domestic victims and the majority of these are children.

- Kansas has adopted new laws that seek to protect and rescue human trafficking victims.

- U.S. DOJ has identified Kansas as an originating state for human trafficking.

**See Disclaimer**
Why Kansas?

- Centrally located
- Intersection of major federal interstates: I-70 and I-35
- Hub of mid-western commerce
- Exchange points

**See Disclaimer**
Polaris Map

**See Disclaimer**
The Data

- Children represent 26% of the 20.9 million victims worldwide (International Labour Org. 2012)
- Each year, as many as 100,000 - 300,000 American children are at risk of being trafficked for commercial sex in the U.S. (U.S. Dept. of Justice, NCMEC)
- Many child victims of human trafficking are students in the American school system.
Kansas Stats

- Polaris hotline reported 225 contacts from KS, 92 “cases” in 2019.
- KBI received 59 reports of HT in 2019.
- DCF received 354 reports of HT that resulted in assessments between July 2015 - April 2018.

National Human Trafficking Hotline
1-888-3737-888

**See Disclaimer**
# HT Victims Served by OAG Grantees Per Fiscal Year, As Reported by Grantees

**See Disclaimer**
Urban v. Rural HT

- Use of internet and social media in recruitment and advertising similar.
- Exploiter/Trafficker often known to victim in rural areas. More likely to be a parent or relative.
- Trafficker to receive material goods or basic needs rather than money for sex with children in rural areas. (parental figure selling a child for food or shelter)

The Victim
Human Trafficking
Characteristics of a Sex Trafficking Victim

- Average age of entry is **12-14 years old**
- Majority are runaway and/or youth within the foster care system & child protective services: *some come from middle class, or wealth and prosperity*
- 70-90% of sexually exploited children have a history of child sexual abuse
- Most are female
- Not likely to consider themselves as victims

**See Disclaimer**
Characteristics of a Labor Trafficking Victim

- Can be U.S. citizens, foreign nationals, women, men, children.
- Vulnerabilities include immigration status, recruitment debt, isolation, poverty.
- Work as domestic servants, farmworkers, factory workers, traveling sales crews, food service/hospitality industry, construction, carnivals and health & beauty industry.

**Force, Fraud, Coercion**

**See Disclaimer**
Services Critical for Protection

- Medical needs
- Safety Planning
- Treatment for Major Trauma, Complex PTSD
- Long term counseling and assistance
- Housing
- Assistance dealing with and testifying against pimps/traffickers
- Addiction treatment
- Educational needs
- Employment assistance
- Specific Assistance

**See Disclaimer**
The Trafficker

Sex Trafficking
Characteristics

- Age 19-45 years old
- Average education is 9.3 years
- 50% completed high school or GED
- 95.5% had a history of drug or alcohol abuse
- 90.0% had a criminal record
- Made $220,000 - $500,000 a year

Convicted Kansas Traffickers
Source: EMCU

**See Disclaimer**
How Traffickers Control Victims

- **Physical abuse**
  - Depravation of basic needs
  - Physical restraint, captivity or confinement
  - Withholding medical care
  - Physical assault
  - Murder

- **Psych/emotional violence**
  - Intimidation/fear
  - Lies, deception, blackmail
  - Unsafe environments
  - Isolation/forced dependency (controlling victims personal docs)
  - Shame and self blame

- **Sexual abuse**
  - Rape
  - Forced prostitution
  - Sexual humiliation

**See Disclaimer**
Additional ways...

- **Substance abuse/misuse**
  - Forced and coerced use of drugs & alcohol which can create longer-term addiction and monetary dependency.

- **Manipulation/Romance**
  - Many use romantic relationships to access victims (Romeo pimps).

- **Cultural disorientation**
  - Movement across state or international borders may put victims in areas where they don’t speak the language = *vulnerability*.
Child Trafficking

Child Sex Trafficking
- Commercial sex trade
- Survival sex
- Forced prostitution
- Stripping
- Pornography

Child Labor Trafficking
- Involuntary domestic servitude
- Underage agricultural labor
- Peddling or begging
- Traveling sales crews

*See Disclaimer*
The Demand
Human Trafficking
What is Demand?

The desire for a particular commodity, labor or service.

In context of HT, demand is for labor that is exploitative or services which breach the human rights of the person delivering those services.
Sex Trafficking

**Demand**

These are the buyers of commercial sex.

**Victims**

**Pimps/Traffickers**

Source: Veronica’s Voice

**See Disclaimer**
Age Range of Buyers:

18-89

42.5 median age

- 19% of buyers’ professions involved working with children (teacher, sports coach, military recruiter, boy scout leader)
- 99% of sex buyers are male
- 22% involved a position of authority or trust (attorney, law enforcement, military or minister)

**See Disclaimer**
Demand an End public awareness campaign

- Kansas launched Demand an End which is a sex trafficking-specific public awareness campaign targeting the demand for commercial sex in KS.
- The campaign focuses on sex buyers – attacking the root of the problem - those who perpetuate the sex trafficking industry by purchasing individuals for sex.
- More than 3,500 Kansas signed online petition.

**See Disclaimer**
Big Concept

- Those who purchase sex fuel the sex industry.
- Most women in prostitution do not have a choice.
- Those who buy sex *always* have a choice.

*If there were no buyers, there would be no business for the traffickers and no victims of human trafficking.*
Kansas Law
New Developments
Human Trafficking Advisory Board

- Advise on creation and implementation of new laws

- Members include law enforcement, prosecutors, court personnel, advocates, service providers, survivors and relevant state agencies.

- The official state board for anti-human trafficking policy in Kansas under the oversight of the Attorney General. KSA 75-757
Human Trafficking Crimes- KS

**Victim under 18:**
- Commercial Sexual Exploitation of a Child
- Aggravated Human Trafficking

**Victim 18 and older:**
- Human trafficking if coerced into labor or sexual exploitation.
- Related crimes that can involve trafficking:
  - Buying sexual relations.
  - Promoting the sale of sexual relations.
  - Selling sexual relations

**See Disclaimer**
2017 New Crimes

► Use of any “communication facility”: Trafficker Level 7 Person Felony; Buyer Class A Misdemeanor

► Sex tourism: promoting and selling travel services for sexual exploitation. Level 5 Person Felony

► Internet trading in pornography involving children. Level 5 Person Felony; Aggravated - Level 3 Person Felony; Under 14 is Off-Grid

**See Disclaimer**
2017 Other Changes

- Those Promoting Sale of Sexual Relations (K.S.A. 21-6420) added to sex offender registration list.
- Expungement time for juvenile selling sexual relations made immediate.
- Crime Victims Compensation Board rules that disqualify HT victims are eliminated.
- Commercial driver license adds test on identifying/reporting HT.
- National Human Trafficking Hotline new name for NHTRC

**See Disclaimer**
Shared Hope Scorecard

- One of only six states to improve from F to A between 2011 and 2019.
- One of only 15 states to receive an A in 2019.
Federal Crime

The Trafficking Victims Protection Act (TVPA) of 2000 is the first comprehensive federal law to address trafficking in persons. The law provides a three-pronged approach that includes prevention, protection, and prosecution. The TVPA was reauthorized through the Trafficking Victims Protection Reauthorization Act (TVPRA) of 2003, 2005, 2008, 2013, 2018.
THE ROLE OF THE HEALTHCARE COMMUNITY

Human Trafficking
In a unique position to identify and help minor and adult victims of HT.

Potentially the only person a victim meets outside of their trafficking situation.
Indicators of Exploitation/Red Flags - healthcare providers

- Disoriented. Unaware of current location/city/town.
- Claims to be “just visiting” community.
- No healthcare coverage/pays in cash.
- Not in control of personal ID/few personal possessions.
- Someone accompanying them who speaks for them.
- Avoids eye contact with provider.
- Demeanor (fearful, anxious, submissive, flat affect)
- Inconsistent story (try re-wording their story and see if they correct you).
- Under 18 and in the sex industry/multiple sex partners

**See Disclaimer**
Red Flags (cont’d)

- Signs of malnourishment.
- Injuries (multiple, old & new).
- Signs of physical abuse (bruises, scars, cuts, burns)
- STIs/bacterial and/or yeast infections
- Tattoos they are reluctant to explain (branding).
- Behavior change when law enforcement is mentioned.
Additional Indicators

- Having been pregnant as a teenager
- Multiple sexually transmitted infections
- Confirmation that they have traded sex for something they wanted
- Multiple sex partners
- Substance Abuse
- Mental health issues
- History of child sexual abuse

Source: Dr. Jennifer Hansen, child abuse pediatrician, CMH, KS Human Trafficking Advisory Board member

**See Disclaimer**
Assessment

- Utilize existing assessment & examination protocols for victims of abuse/sexual (Via Christi protocol)
- Utilize existing culturally sensitive protocols
- Obtain appropriate consents (WHO Guidelines)
- Use age-appropriate language when working with minors
- If you ask about sexual history, be sure to distinguish between consensual experiences and non-consensual experiences
- Conduct in a confidential setting
- Separate patient from his/her belongings and escort/interpreter
- If patient is female, approach should be made by a female staff member (nurse, physician, psychologist, social worker)

**See Disclaimer**
Via Christi HT Protocol

Physical indicators (if present, proceed to step one):
- Signs of physical trauma
- Branding tattoos indicating “daughter,” “property of” or trafficker’s street name
- Unusual infections such as TB or immunizable diseases
- Multiple sexually transmitted infections
- Several somatic symptoms arising from stress
- Malnutrition, dehydration
- Multiple pregnancies or abortions
- Unusual occupational injuries

Red flags (if present, proceed to step one):
- Inconsistent or scripted history
- Discrepancy between the history and clinical presentation
- Unable to give address
- Doesn’t know current city
- Minor trading sex for something of value (food, shelter, drugs or money)
- Unusually high number of sexual partners
- Late presentation
- Carrying large amount of cash
- Appearance younger than stated age

Control indicators (if present, proceed to step one):
- Accompanied by a controlling person
- Controlling person doesn’t allow patient to answer
- Person interrupts or corrects the patient
- Patient exhibits fear, nervousness and/or avoids eye contact
- Patient not in control of passport (if a foreign national)
- Patient frequently receives texts or phone calls during the exam
- Patient exhibits hypervigilance or subordinate demeanor

HT assessment

REV 03/2014
Cont’d

**Step one:**
Follow child abuse or domestic violence protocols, depending on patient’s age:
- Attend to patient’s medical needs and treatment.
- Separate patient from the controlling person, including family members.
- If controlling person refuses to leave, take patient to the bathroom, X-ray or another location.
- If necessary, consider calling Security for assistance.
- Provide patient a comfortable, accommodating and safe area.
- Notify charge nurse of potential HT issue.
- Patient interview should be performed by a trauma-informed social worker, trauma-informed nurse, or forensic nurse.
- Forensic nursing is available 24/7 at 316.695.5005.
- Assessor builds rapport and assures patient of confidentiality.

**Step two:**
Patient interview questions:
- For U.S. citizens:
  - Have you ever exchanged sex for food, shelter, drugs or money?
  - Have you ever been forced to have sex against your will?
  - Have you ever been asked to have sex with multiple partners?
  - Do you have to meet a quota of money before you can go home?
- For foreign nationals:
  - Does anyone hold your identity documents for you? Why?
  - Have physical abuse or threats from your employer made you afraid of leaving your job?
  - Has anyone lied to you about the work you would be doing?
  - Were you ever threatened with deportation or jail if you tried to leave your situation?
  - Have you or a family member been threatened in any way?
- If patient is a foreign national, notify the FBI: 316.262.0031.

**Step three: (under 18)**
Answers yes to any of the assessment questions:
- Follow the child abuse protocol and comply with mandatory reporting statutes (see general policy G-P1-6).
- Assessor will update Security regarding security needs.
- If the minor is with a parent or guardian suspected of being a trafficker — and the minor does not want to be removed from their custody — the charge nurse should comply with mandatory reporting.

**Step three: (18 & over)**
Answers yes to any of the questions:
- Assessor obtains patient’s consent to notify law enforcement.
- Assessor updates Security on the situation and assists patient in calling Title.
- If patient is a foreign national, notify the FBI: 316.262.0031.

**Step four:**
Patient does not want to notify law enforcement:
- Consult with the charge nurse or forensic nurse to determine whether mandatory reporting is required.
- If mandatory reporting is not required, make sure the patient knows how to get help.
- Via Christi staff is available 24/7, at any hospital, to provide assistance.
- Local emergency phone number: 911
- WASAC 24-hour hotline: 316.262.3002
- National trafficking hotline: 888.373.7888
- FBi: 316.262.0031

For more information, visit vachrist.org/humantrafficking.
Screening Questions for Healthcare Providers

- How safe do you feel right now? Are there times when you don’t feel safe?
- Have you been physically harmed in any way?
- Is anyone forcing you to do something you do not want to do?
- Can you leave your job or situation if you want?
- Are you paid for the work you do?
- Can you come and go as you please?
- Where do you sleep and eat?
- How many hours do you work every day/week?
HIPAA - The Privacy Rule

- *Privacy Rule*: a set of guidelines and protocols for communicating patients’ info to ensure privacy is maintained.
- There is currently nothing in the *Privacy Rule* that addresses reporting HT victims.
- However, HT can be considered amongst one of the 12 national priority purposes:

  **(3) Victims of abuse, neglect, or domestic violence**

  SS 164.512 (C) Standard: Disclosure about victims of abuse, neglect or domestic violence.

**See Disclaimer**
Best practices

- Building trust is #1 priority.
- Reassure potential victim (you are there to help & you care about them, you are not police and won’t call police unless they want you to).
- One-on-one interactions are ideal.
- More in-depth assessment. (only if there is specific, immediate intervention available)
- Provide them with referrals for other services if appropriate.
- If victim is <18, follow child abuse protocol and comply with mandatory reporting requirements.
- If victim is >18 and wants to contact law enforcement, assist in calling 911.

**See Disclaimer**
Challenges in identification of trafficking victims

- Distrust of service providers (possible past bad experiences, grooming)
- Lies and false stories (protection of “safety”, not lying because they like the situation...)
- Untrustworthy interpreters (interpreter can be trafficker)
- “One Shot” (unlikely they will present again)
- Difference between intimate partner violence and HT
Among survivors, more than 65% reported going to a hospital or ED at some point during their trafficking.

Global Centurion study found that more than 85% of survivors of HT had contact with a health care professional while being trafficked.
MENTAL HEALTH CONNECTION
Human Trafficking
Adverse Childhood Experiences

Research shows that early trauma, ACEs, can be linked to sexual exploitation.

- Abuse
- Neglect
- Parental detachment
- Exposure to addiction
33% of women with a trafficking history had ACE scores of 4-7 while 48% had scores of 8 or higher.
Realities of Victims/Survivors

Victims of HT have often witnessed or have first-hand experience of events involving actual or threatened death or serious injury, threat to physical integrity of self or others.

Response -- INTENSE FEAR, HELPLESSNESS or HORROR.

PTSD diagnosis

Source: HHS
Other co-existing diagnosis

- Dissociative disorders
- Anxiety/depression
- Substance abuse
- Memory loss
- Complex trauma

Long term, comprehensive therapy needed.

**See Disclaimer**
Complexity of Cases

Many HT victims present with medical, mental health and substance use disorder needs.

Need trauma informed approach to care.
Recommendations

- Trauma informed interpersonal violence protocols.
- Multidisciplinary response teams
  - Social workers
  - Emergency clinicians
  - Behavioral health professionals
  - Substance use disorder specialists
  - OB/GYN practitioners

*Comprehensive and integrated model of care should facilitate ID of victims, promote their recovery and reduce possibility of re-traumatization.*


**See Disclaimer**
New ICD-10 Codes

2018, new codes to specifically categorize sex & labor trafficking/exploitation.

Tracking cases is critical to:

- Monitoring incidence & recurrence
- Determining short & long term adverse effects on children and adults
- Assessing treatment modalities
- Estimating cost of care

**See Disclaimer**
ICD-10-CM Code/ Subcategory

T74.51* Adult forced sexual exploitation, confirmed
T74.52* Child sexual exploitation, confirmed
T74.61* Adult forced labor exploitation, confirmed
T74.62* Child forced labor exploitation, confirmed
T76.51* Adult forced sexual exploitation, suspected
T76.52* Child sexual exploitation, suspected
T76.61* Adult forced labor exploitation, suspected
T76.62* Child forced labor exploitation, suspected
Y07.6 Multiple perpetrators of maltreatment and neglect
Z04.81 Encounter for examination and observation of victim following forced sexual exploitation
Z04.82 Encounter for examination and observation of victim following forced labor exploitation
Z62.813 Personal history of forced labor or sexual exploitation in childhood
Z91.42 Personal history of forced labor or sexual exploitation

**See Disclaimer**
Data is central to public health efforts to prevent & eradicate human trafficking and exploitation.
Many victims do not self-identify as HT victims.

Conditioned not to trust you.

Canned stories are common - true story may not emerge until later.

**See Disclaimer**
Mandatory Reporter

Kansas Reporting Laws:

*Mandated reporters are required to report child abuse or neglect under the Kansas reporting law (K.S.A. 38-2223) as follows:*

When any of the following persons has reason to suspect that a child has been harmed as a result of physical, mental or emotional abuse or neglect or sexual abuse (*includes suspicion of HT*), the person shall report the matter promptly.

*Teachers, school administrators or other employees of an educational institution which the child is attending* and persons licensed by the secretary of health and environment to provide child care services or the employees of persons so licensed at the place where the child care services are being provided to the child.

**See Disclaimer**
Other mandatory reporters - KS

- Doctors, dentists, nurses, psychologists & other mental health providers, social workers, health care administrators
- Firefighters, EMS providers
- Law Enforcement Officers
- Juvenile intake & assessment workers, court services, community corrections officers

KSA 38-2223
Report Human Trafficking

- 911 (local law enforcement)
- 1-800-KSCRIME (KBI tip line)
- Polaris Project National Hotline: 1-888-3737-888 or TEXT INFO or HELP to 233-733 (24 hours, 7 days a week)
- To report a sexually exploited or abused minor, call the National Center for Exploited and Missing Children (NCMEC) hotline 1-800-THE-LOST or cyber tip reporting http://www.cybertipline.org.
- KSAG Victim Services Division: 1-800-828-9745

**See Disclaimer**
Resources

NHTRC Hotline 1-888-3737-888  
polarisproject.org  
sharedhope.org
Questions?

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