IDENTIFICATION OF HUMAN TRAFFICKING & SEXUAL EXPLOITATION FOR THE FORENSIC NURSE EXAMINER

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TRAFFICKING OF A MINOR (UNDER 18 YEARS)

• Exchange of sex for anything of value or the promise of anything of value
  • Money
  • Drugs
  • Shelter
  • Higher status in gang
• Third party may or may not be involve
SAFE HARBOR / NO WRONG DOOR IN MN

• Treats victims 24 years and younger as VICTIMS instead of criminals
• Provides dedicated shelters and beds
• Dedicated services and treatment programs
WHAT HUMAN TRAFFICKING/SEXUAL EXPLOITATION IS NOT
HIGH RISK POPULATIONS

Gang Involvement
Runaway / Throwaway
Drugs/Alcohol Use
Prior Abuse
PATHWAYS OF ENTRY INTO TRAFFICKING
Befriend
Love
Control
Exploit

DAMAGED
GOODS

I DIDN'T KNOW
MY BOYFRIEND WANTED ME TO HAVE SEX WITH HIS FRIENDS...
WHO ARE THE TRAFFICKERS?

- Employer: 2%
- Drug Dealer: 3%
- Girlfriend: 10%
- Stranger: 28%
- Boyfriend: 28%
- Relative: 29%
CONTROL TACTICS OF THE TRAFFICKER
RED FLAGS & INDICATORS OF TRAFFICKING

Appearance
- Afraid
- Overly submissive
- Anxious
- Presents with aggressive/dominant adult

False Info
- Demographics
- Does not know where they reside
- Inconsistent history

Multiple Visits
- STIs
- Pregnancies
- Chronic conditions/Somatic complaints
- Suspicious injuries
RED FLAGS & INDICATORS OF TRAFFICKING (CONT’D)

- Hx of Sexual Assault
- Drug Use/Withdrawal
- Visible signs of physical abuse*
- Suspicious Situations*
- Homemade Tattoos (pimp name, etc.)
MANDATED REPORTING TO CPS & LE

CPS Reporting

Patient < 18 years?

Suspicions of trafficking/exploitation?

Report to CPS
(county where child resides or where exam is being done if unknown)

LE Reporting

Patient < 18 years?

Suspicions for trafficking/exploitation?

Report to LE
(jurisdiction where crime occurring or exam being done if unknown)

Patient 18 years or older?

Suspicions for trafficking/exploitation?

Patient has choice to report to LE.
If safety concerns, involve other resources (navigator, BF, special detective, etc.)
SCREENING QUESTIONS UTILIZED BY SARS

• Have you ever broken any bones, had any cuts that required stitches, or been knocked unconscious?
• Some kids have a hard time living at home and feel that they need to run away. Have you ever run away from home?
• Kids often use drugs or drink alcohol, and different kids use different drugs. Have you used drugs or alcohol in the last 12 months?
• Sometimes kids have been involved with the police. Maybe for running away, for breaking curfew, for shoplifting. There can be lots of different reasons. Have you ever had any problems with the police?
• Have you ever had sex of any type? (penis in vagina OR penis/finger in ‘butt’ OR mouth on penis OR mouth on vagina)
• How many sexual partners have you had?
  • 0 partners 1-5 partners 6-10 partners >10 partners
• Have you ever had a sexually transmitted disease (STD), like herpes or gonorrhea or chlamydia or trichomonas?

Positive answers to 2 or more questions (EXCLUDING question 5) is considered a positive screen. Further questioning is indicated to determine if child is a victim.
FOLLOW-UP SCREENING QUESTIONS

• Has a boyfriend, a girlfriend or anyone else ever asked you, or forced you to do something sexual with another person (including oral sex, vaginal sex or anal sex with someone else)?

• Has anyone ever asked or forced you to do some sexual act in public, like dance at a bar or a strip club?

• Sometimes kids are in a position where they really need money, drugs, food or a place to stay. Have you ever traded sex for money, drugs, a place to stay, a cell phone, or something else?

• Has anyone ever asked you to pose in a sexy way for a photo or a video?

To obtain additional information from any “YES” answers, use the phrase, “Tell me more about that” or “Do you feel comfortable telling me about that?”
IDENTIFICATION AND SCREENING OF CHILD AND ADOLESCENT SEXUAL EXPLOITATION

PATIENT ARRIVES AT ED

REGISTRATION AND TRIAGE

CHIEF COMPLAINT IS ENTERED

BEST PRACTICE ALERT (TRIGGERED BY CC)

PRIMARY NURSE COMPLETES THE 7 QUESTION SCREENING TOOL

CHIEF COMPLAINTS THAT WILL TRIGGER A BPA:
- Depression
- Self Injury
- Suicidal Ideation
- Suicidal Thoughts
- Suicide
- Suicide Attempts
- Aggression
- Agitation
- Anger
- Behavior
- Altered Mental Status
- Addiction
- Ingestion
- Drug Overdose
- Alleged Sexual Assault
- Physical Assault
- Runaway

MOTIONAL EVALUATION (Medical Team/SARS if indicated):
- Acute/Chronic Medical Conditions?
- Nutritional Status – Dehydration, Starvation?
- Dental Status - Caries, Pain, Abscesses?
- Toxicology – UA, ETCH
- STI Testing - ORDER PANELS - ED SAFE
- Prophylaxis for STI, Emergency Contraception
- Document Injuries & Provide Treatment
- Consult with Center for Safe & Healthy Children and Social Work as needed

MAKE A REPORT TO CHILD PROTECTION AND LAW ENFORCEMENT

ADDITIONAL RESOURCES
- Runaway Intervention Program (RIP) Coordinator
- Contact 851-220-6550
- Fax 651-220-4776
- Regional Navigator: (612) 222-5428
- https://www.1800runaway.org/
- http://www.theadvocatesforhumanrights.org/

CONTINUE WITH MEDICAL EXAMINATION

2 OR MORE POSITIVE RESPONSES

SARS REFERRAL (612) 873-9932
WHAT DOES EVERY NURSE NEED TO DO?


   - 1. SARS: 612-873-3000

3. Contact your unit Social Worker.

4. Contact patient physician immediately. Treat medical needs.

5. Document a brief note with your concern and your actions and plan.

6. Collect first urine if patient needs to urinate. Label and keep with patient for the SANE.

7. Keep patient in clothing they arrived in, if possible.

8. Make patient CONFIDENTIAL.

9. Remove phone from patient room.
WHAT DOES SECURITY NEED TO KNOW IF CALLED?

1. Is the patient on a hold?
   1. Does Patient need a 1:1/Sitter while in the ED?
2. Do staff need assistance removing a visitor from the department?
3. Do staff need standby assistance for a safety concern?
4. Do staff want increased patrols in their department while patient is receiving medical care?
WHAT DOES SOCIAL WORK DO WHEN CALLED?

• Contact the primary nurse and physician.
• Coordinate with SANE, provide support with mandated reporting as needed.
• Contact and coordinate with OBTC SHC.
• Assist with safe housing and safe discharge options.

1. **National Human Trafficking Resource Center** phone number 1-888-3737-888
2. **Day One Services** 1-866-223-1111: 24/7 shelter, housing help
3. Regional Navigator
4. Runaway Intervention Program (RIP) – MCRC
RESOURCES FOR HEALTH CARE AND PATIENTS

Day One (Shelter & Housing) 866-223-1111

Cornerstone Advocacy 952-884-0376

Breaking Free 651-645-6557

National Human Trafficking Resource Center 888-373-7888

SARS Resources
Youth Services Network (YSN) MN
Will Provide You With:

- Current open beds in the state for youth and their requirements
- Food shelters
- Medical clinics
- Outreach workers
- Much more
WEST METRO REGIONAL NAVIGATOR FOR TRAFFICKING RESOURCES (PATIENTS 24 YEARS & YOUNGER)

Contact the “Navigator” Phone number FIRST

Counties Covered by West Metro Regional Navigator:
- Hennepin
- Carver
- Scott
EAST METRO REGIONAL NAVIGATOR FOR TRAFFICKING RESOURCES (PATIENTS 24 YEARS & YOUNGER)

- Children’s Hospitals and Clinics of MN - St. Paul
  - Midwest Children’s Resource Center (MCRC)
    - 651-220-6650 (phone)
    - 651-220-6770 (fax)

Counties Covered by East Metro Regional Navigator:
  - Ramsey
  - Dakota
  - Washington
  - Isanti
  - Chisago
  - Anoka

Also, provide Runaway Intervention Program (RIP)
READY TO GO HOME?

GREYHOUND® AND THE NATIONAL RUNAWAY SAFELINE CAN HELP.

If you’re a runaway, homeless, or exploited youth between the ages of 12 and 21 and you need help returning home or someone to talk to.

CALL 1-800-RUNAWAY
CLICK 1800RUNAWAY.org
TEXT 66008

NATIONAL RUNAWAY SAFELINE / HOTLINE
ONGOING INITIATIVES & COLLABORATION

• HCMC Wide Education
  • LMS
    • All Nursing Staff; Social Services
  • In-Person
    • OB-GYN; Emergency Department; Public Health, EMS, Social Services

• Community Education
  • North Memorial Grand Rounds
  • Trauma Conference
  • Long Hot Summer Conference

• Task Forces & Committees
  • Minneapolis Super Bowl Planning Subcommittee
  • Office on Trafficking in Persons Pilot Project – U.S. Department of Health and Human Services
  • Hennepin County Safe Harbor Committee
  • MN Statewide Human Trafficking Task Force

• Community Partners
  • FBI
  • Homeland Security
  • Minneapolis Police – Trafficking Division
THANK YOU
WHAAAAA?!??!
REFERENCE & SAVE THE DATE

Jordan Greenbaum, MD
Stephanie V. Blank Center for Safe and Healthy Children
Children’s Healthcare of Atlanta
Presentation: Child Sex Trafficking in the United States

SAVE THE DATE: Dr. Greenbaum is coming to MN in January for two days – Jan. 17th & 18th – agenda forthcoming