

HEALTH AND TRAFFICKING

**What do we know?
What can we do?**



Trafficking cycle

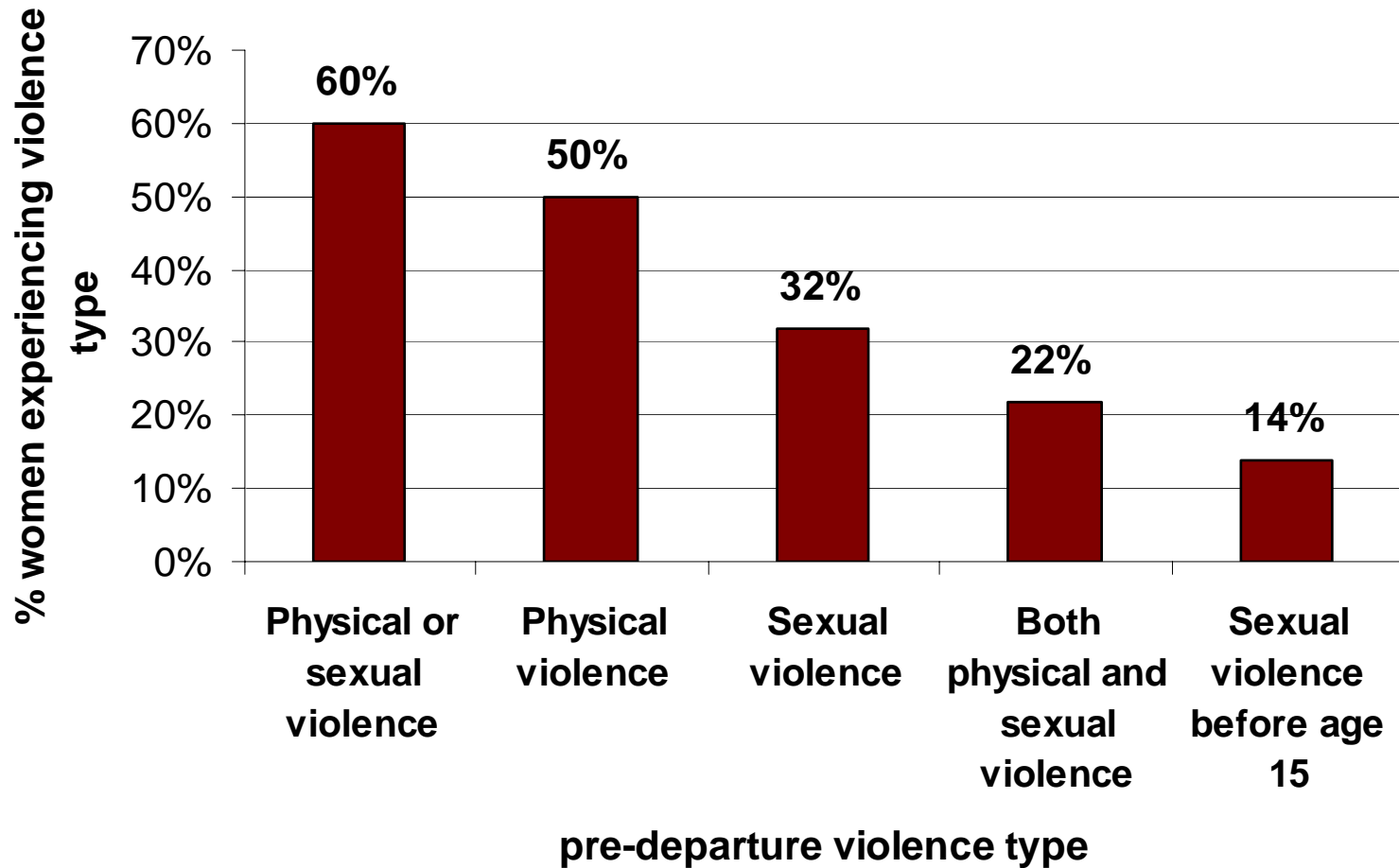


The *Stolen Smiles* Study


- 207 women ages 15-45 accessing services in Moldova, Ukraine, United Kingdom, Italy, Bulgaria, Czech Republic & Belgium.
- 92% were trafficked into forced sex work, 4% for domestic labour and 3% for both.
- 81% exploited for at least one month, 20% over one year.
- Women interviewed three times after entry into care: 0-14 days; 28-56 days: and 90+ days.



Pre-departure violence



Sexual health knowledge

Women were generally poorly  informed about sexual health, condom use, sexually transmitted infection, including HIV.

Pre-departure intervention?

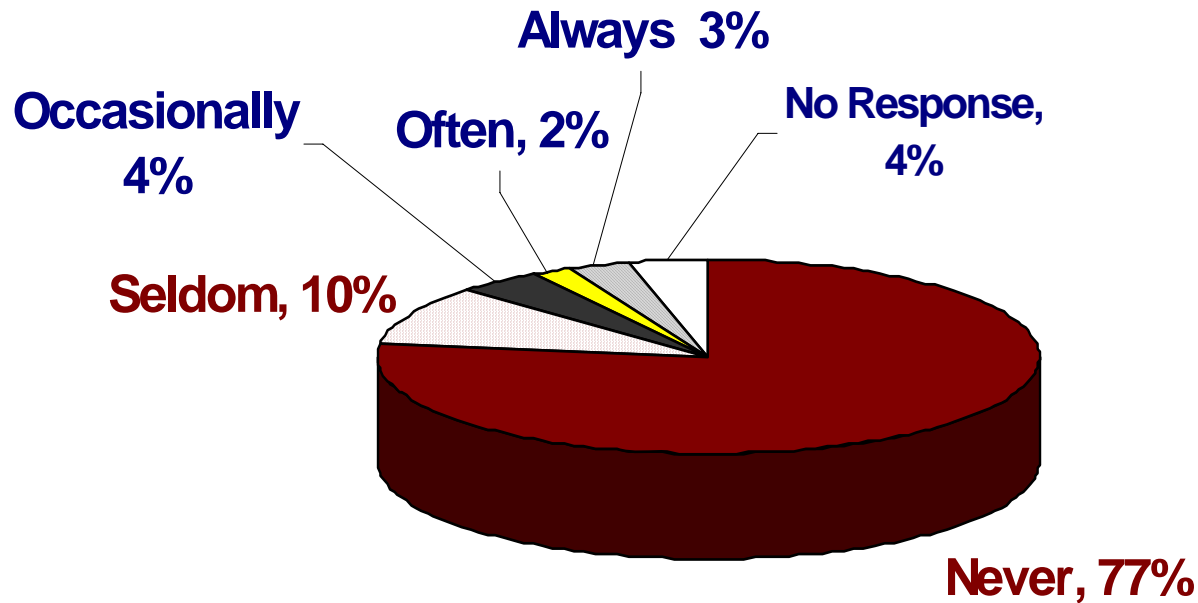
- Information materials that incorporate basic health and safety information for all migrating persons.
- Awareness campaigns that help individuals pose the right questions.
- Programming that links trafficking with other forms of violence (domestic violence, child abuse, sexual assault).



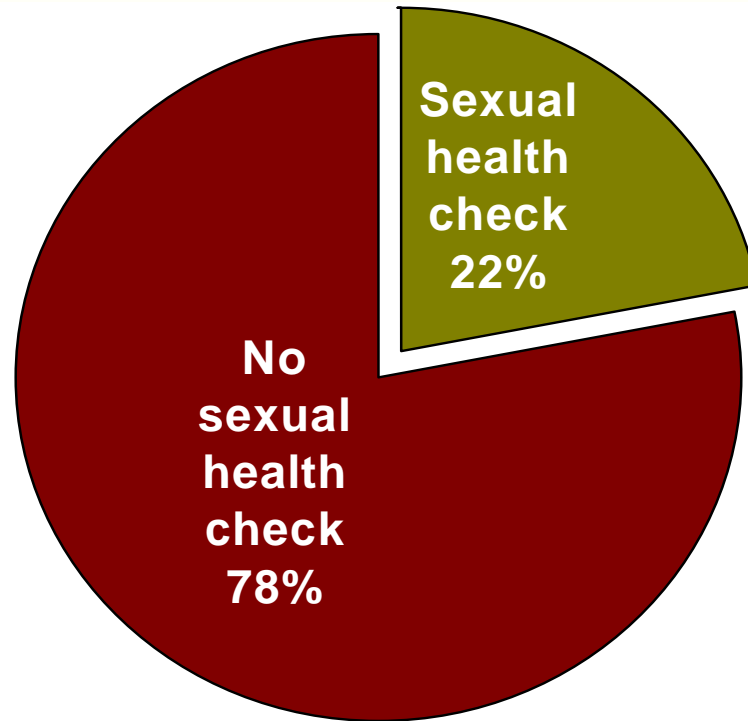
Violence at the destination stage

FORM OF VIOLENCE REPORTED	%
Either physical or sexual violence	95%
Physical violence	76%
Sexual violence	90%
Both physical and sexual violence	71%
Woman was threatened	89%
Woman's family was threatened	36%

“How often were you free to go where you wanted or do as you liked?”



Outreach programs help women stay healthy



Women reporting sexually transmitted infections

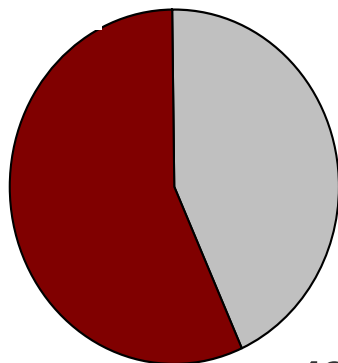
Destination-stage intervention?

- Health outreach services that discretely incorporate a trafficking assistance component.
- Indicators that take into account the varying degrees and changing methods of coercion to help frontline individuals to ask the right questions.

Physical health symptoms reduce with support services

0-14 Days

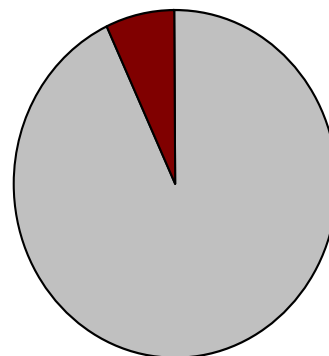
57%



43%

28-56 Days

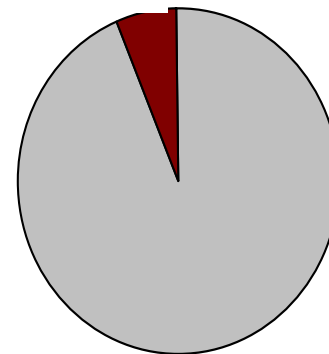
7%



93%

90+ Days

6%



94%

■ 0 to 11 symptoms
■ 12 to 23 symptoms

Most common physical health symptoms at 0-14 days

81% headaches

71% dizzy spells

**60-70% various
sexual health
problems**



63% memory problems

82% fatigue

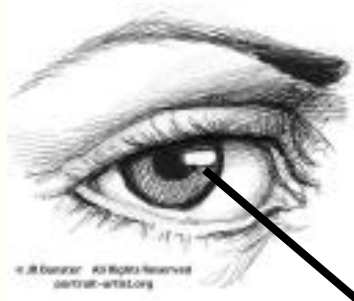
69% back pain

Torture and trauma

Uncontrollability and Unpredictability

- Severe or prolonged traumatic experiences or repetitive helplessness can result in an individual being unable to “turn-off” their basic biological and safety alarm mechanisms or cause them to have an “all-or-nothing” physical and emotional response to negative stimuli.

How the memory gets disrupted



**Fight or flight
response to danger**

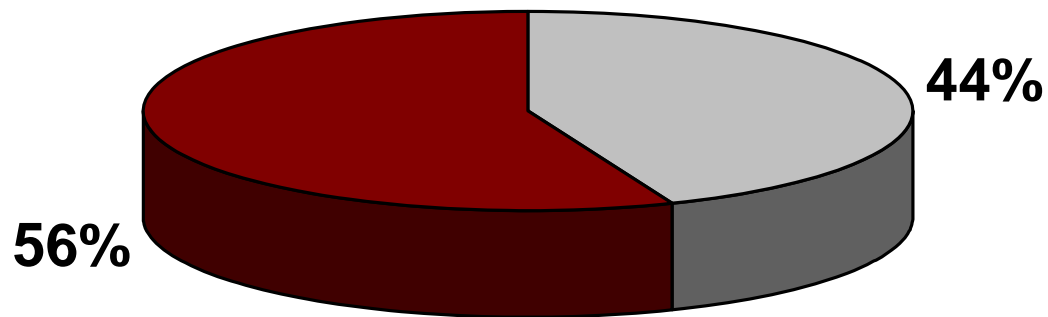
**Peritraumatic
dissociation**

Loss of details



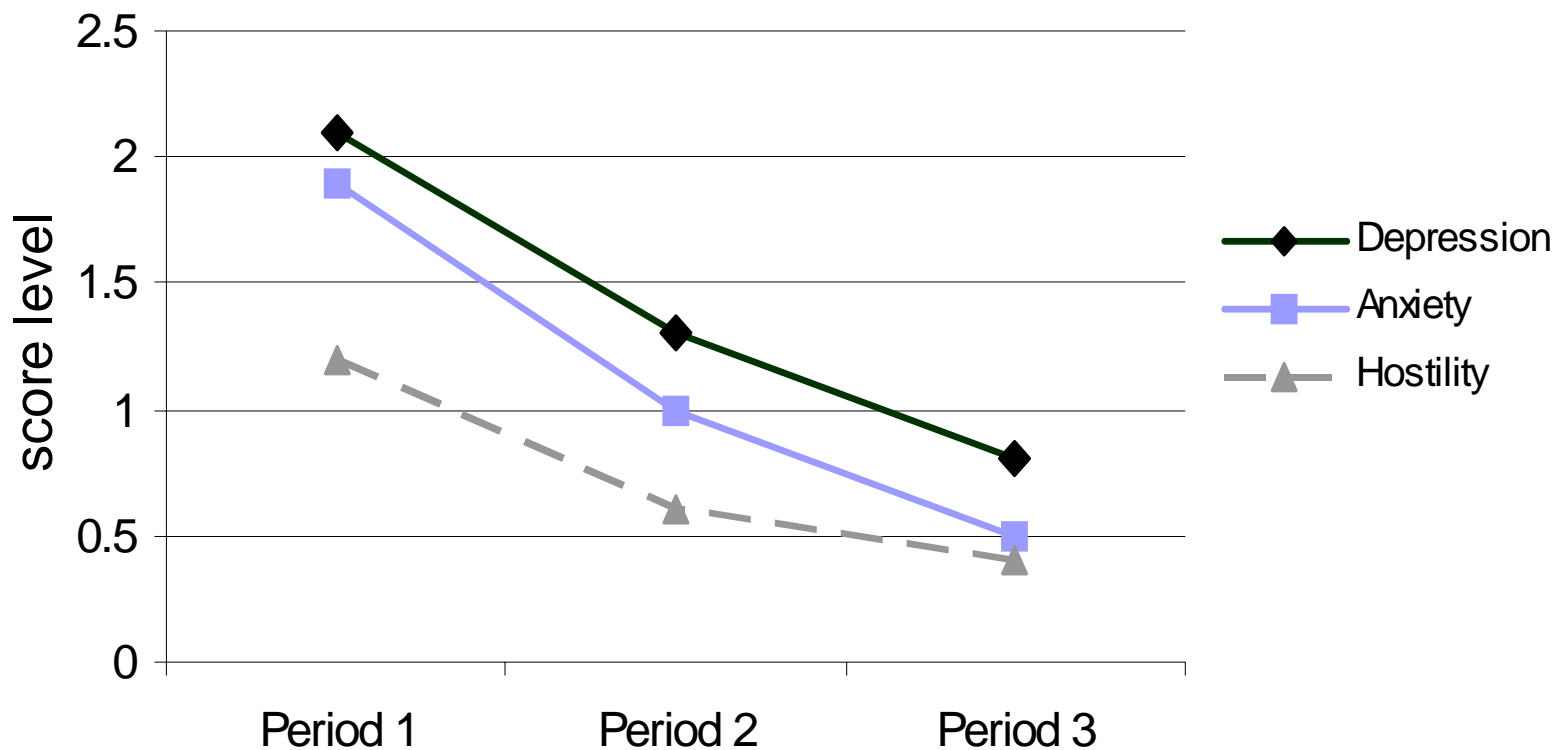
Post-Traumatic Stress Disorder

Percentage of women reporting symptom levels suggestive of PTSD

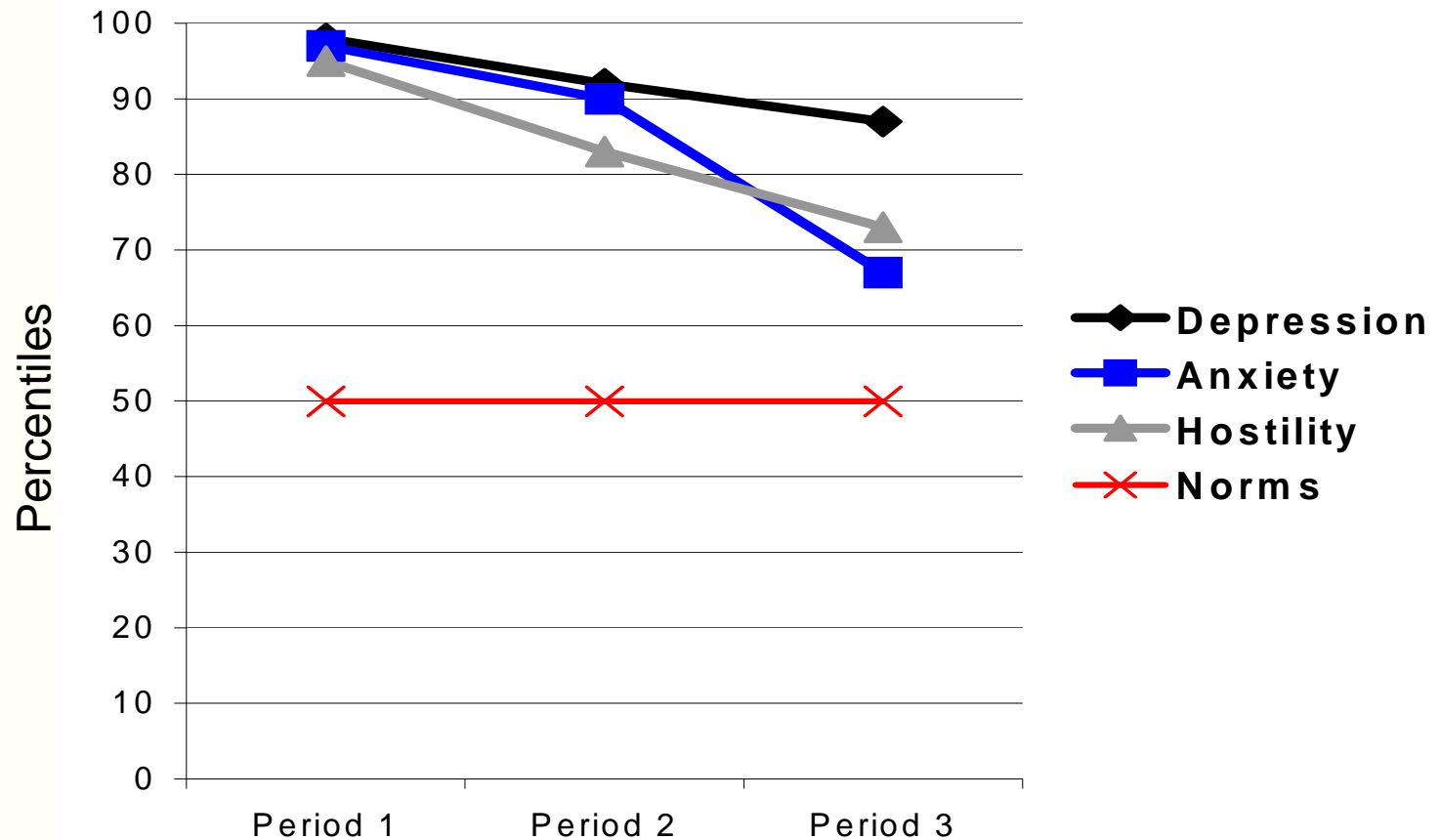


□ Lower symptoms levels ■ PTSD symptom levels

Mental health improvements



Trafficked women's mental health compared to an average population



Suicidal ideation

38% of women reported having considered suicide within the past two weeks at the first interview (0-14 days of entering services)

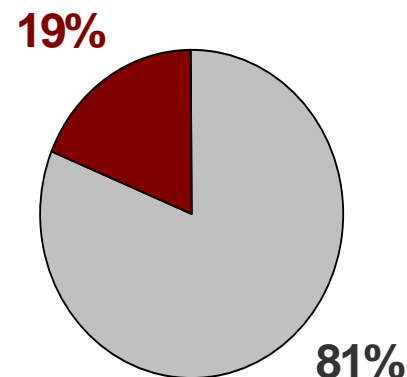
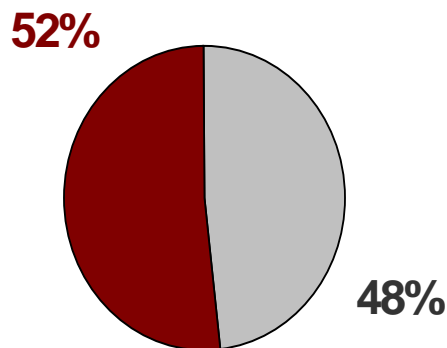
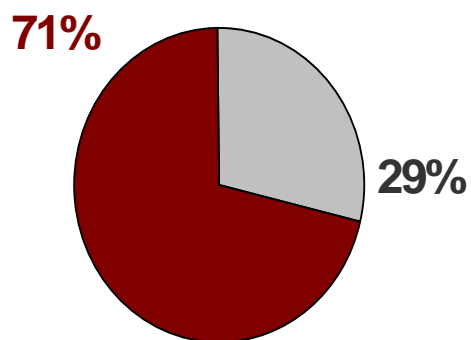


Mental health symptoms reduce with support services

0-14 days

28-56 days

90+ days



■ 0 to 9 symptoms
■ 10 to 17 symptoms

Recovery and Reflection?

- Victims require 90+ days to recover sufficiently to make sound decisions about their safety and well-being




Post-trafficking intervention

- Include health professionals in anti-trafficking programs / referral mechanisms.
- Trained medical and health contact points for physical and psychological support
- Funding and resources for comprehensive diagnostic testing and treatment for physical and longer-term mental health support.
- Trauma-informed care



The ABC's of trauma informed care

- **A**cknowledging the violence within clinical care. 
- **B**uild a safe space
- **C**onnect to other resources



Trauma-informed investigation and prosecution

- Protocols that recognise physical and psychological harm. 🗨️
- Good support → Good evidence
- Give control → Establish trust

Trauma-Informed Investigation

- **A**dequate explanations and information
- **B**e on her side and ask about her well-being and needs
- **C**onsider timing of interviews



Lies...why would she lie?

Embarrassment
Shame

Guilt over
perceived
complicity

Guilt for
being
'stupid'/naive

Protection of
others, e.g.,
boyfriend

Gain
sympathy

Fear of
retaliation
traffickers

Distrust of
officials



RESEARCH

1. Intervention studies to evaluate post-trafficking treatment approaches for psychological symptoms.
2. Intervention study to explore treatment approaches for children.
3. Prevalence study of victims of different forms of labour and from different regions.

Do's and Don'ts of collecting data on trafficked persons

- Do prioritise ethics and safety over information. Don't interview people unless you can be sure it will not cause harm.
- Do work in collaborative teams of service providers and research professionals. Don't interview people without having a means of offering assistance.
- Do research that actually informs a potential policy or service. Ensure that resources are in place to respond the issues you ask about.

Improvements are possible

The strongest feeling is that of wanting to die. I feel tired of fighting.

I am not so nervous and anxious. I am not scared and I believe in myself and in my own forces.

