Review Title: Health Implications of Human Trafficking

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Article Summary:

Brief Overview

There has been a significant awakening to the reality of human trafficking over the last 10 years with much of the initial work focusing on women and girls being forced into sex work. More recent attention has included the recognition of men, women and children who are exploited through unfair and unsafe labor, and other non-voluntary forms of servitude. Given the international significance of human trafficking, United Nations policy discussions focus on 4 P’s: prevention, protection, prosecution and partnership. The challenge with this framework is that it predominantly focuses on law enforcement strategies and does not recognize the potential impact of the health sector or the health implications for the trafficked individuals. Given the migratory nature of human trafficking, provision of healthcare is often elusive for this vulnerable population.

The authors of this paper sought to develop a conceptual framework which addresses health disparities as they relate to the migratory and exploitative nature of human trafficking. Specifically, the framework describes chronological involvement in trafficking, including concepts...
related to exploitation, abuse and trauma, and ensuring that the social, psychological and physical health implications are included in policy discussions.

**Relevant findings**

The conceptual model of the human trafficking process includes the following stages: 1. Recruitment; 2. Travel and Transit; 3. Exploitation; 4. Detention; and, 5. Integration and Re-integration. The progression of these stages invariably results in a cumulative risk of harm from multiple physical and/or psychological hazards.

In the **Recruitment stage**, the individual is vulnerable to deceptive opportunities to migrate for employment, or are abducted and exploited. Recruitment often occurs by someone known to the individual, including family, friends and parents. Many of the same factors that influence health can contribute to the individual’s vulnerability to being recruited. For example, political or economic insecurity, history of interpersonal violence, and other forms of familial abuse often have negative impacts on health and increase risk of being recruited for trafficking. For example, the authors report that over half of women in post-trafficking centers reported preceding physical or sexual abuse, with 15% reporting sexual abuse before the age of 15 years old.

The **Travel-transit stage** begins once an individual agrees to or is forced to leave with the trafficker, and often includes immigration violations and hazardous travel conditions. This period also frequently involves sexual abuse, especially for women and children.

The **Exploitative stage** is the period in which the individual is subjected to labor or service such that their work and/or body are exploited or abused. The authors describe examples such as “forced labor, and debt bondage, sexual abuse, physical violence, psychological coercion or abuse, deprivation and confinement and usurious financial arrangements.” These abuses may also include threats against individuals and members of their family. During this stage, access to health services is rare unless severe conditions exist such as severe injury or illness such that the individual is unable to perform their tasks. Additionally, if they are provided medical care, it may be delivered by poorly qualified providers, adding further risk to the trafficked individual.

Only a minority of human trafficking involves the **Detention stage**. This is characterized by a period in which the individual is in the custody of a state authority. They may feel obligated to cooperate with law enforcement in exchange for temporary residency, thus continuing the exploitative nature of their existence. This stage can be particularly dangerous to the individual’s health and safety, with individuals often exposed to unsanitary conditions, poor nutrition and limited or no health care.

Finally, the **Integration and/or re-integration stage** is the long-term periods of either integrating into the host country (or re-integrating into one’s home country). This stage is not achieved until the individual has been accepted as an active member of the economic and social life of the culture. The majority of trafficked individuals will have some physical and behavioral health needs such as chronic headaches, fatigue, dizzy spells, vaginal discharge, back pain and high symptom levels for depression, anxiety and PTSD.

The authors provide a review of the trafficking-related abuses and potential health consequences. Mental health concerns is the most dominant...
health issue in trafficked individuals, and their symptoms are similar to those observed in individuals exposed to repetitive trauma or chronic abuse. In addition, the authors report research which identified high levels of hostility and aggression in trafficking survivors. Physical violence is the most recognized feature of human trafficking. Sexual abuse and associated reproductive health risks are notable in this population, regardless of whether or not they are forced into prostitution. Other health risks are associated with the high risk working and living conditions and include excessive sun exposure, musculoskeletal injuries from repetitive movements or heavy lifting, and pesticide exposure to treated crops or water supplies. Overcrowded and unhygienic living conditions increase risks for a variety of infectious illnesses. Finally, issues such as social restriction (i.e. unable to move about freely), economic exploitation and debt bondage, and legal insecurity including immigration violations are additional factors which can negatively impact the health and well-being of trafficked individuals.

**Authors’ conclusions**
The authors conclude by stating that their theoretical framework provides opportunity to target intervention strategies to address the human trafficking problem. They focus on the importance of the healthcare community being represented in national and international strategies to address human trafficking and the need for healthcare providers to be adequately trained to provide appropriate and safe care for trafficking survivors. Including questions to explore adverse health exposures including violence and abuse experiences in the medical history is an important first step. Second, the authors recognize the public health implications of human trafficking, and describe the need to continue to utilize the knowledge gained from the prior research on violence, abuse, and other vulnerable (refugee) populations. Coordinated efforts should include the health implications of human trafficking to be effective in addressing the problem with effective prevention interventions.

**Reviewer’s Comment:**
This article provides a good overview of the framework of the issue of human trafficking and broadens our understanding of the health implications of this vulnerable population. The authors have provided a nice review of the literature and acknowledge that the literature is relatively “nascent” as it relates to our understanding of the public health implications of human trafficking. With that said, the authors set the stage for policy discussions and offer a framework in which researchers can utilize and begin to target specific research questions. Development of evidence-based interventions to reduce the vulnerability and subsequent health sequelae of human trafficking seems a most worthy goal.