

PROJECT THRIVE

Trafficking Healthcare Resources & Interdisciplinary Victim Services & Education

Providing Medical & Mental Health Services for Survivors of Human Trafficking

UNIVERSITY OF MIAMI
MILLER SCHOOL
of MEDICINE



THRIVE-

An Integrative Health Care Model for Survivors of Human Trafficking



- A Need/Gap for Medical Care Identified by Law Enforcement
- Lack of Trauma Informed - Survivor Centered Care Models
- Survivors Need Help Navigating Complex Healthcare Systems
- Lack of Finances for Health Care & Appropriate Housing Create Barriers to Access & Adherence

Complex Problem – Requires Multiple Disciplines Working Together

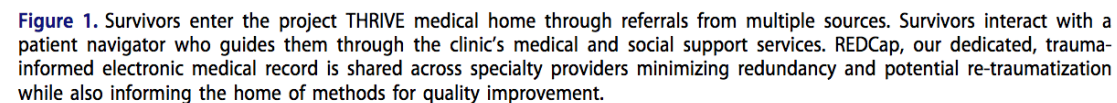


THRIVE

Innovative Approaches to the Model



- No Waiting Room Experience
- Navigator Chaperone for All Visits
- Admit & Discharge from Exam Room
- Appointments Monday-Friday All Day
- Providers & Staff Come to Same Clinic
- Single Intake Across Disciplines (Red Cap)
- Financial Classification for Health Care Access



THRIVE Network of Providers



- ❖ Primary Care (Caralis, Symes)
- ❖ Behavioral Medicine (Gould)
- ❖ Psychiatry (Nemeroff, Newport)
- ❖ OB/GYN (Karmin, Doyle, Diaz)
- ❖ Pediatrics (Wurm)
- ❖ Adolescent Medicine (Friedman)
- ❖ GI (Deshpande)
- ❖ ENT (Nicolli)
- ❖ Orthopedics (Dodds, Lebwohl, Conway)
- ❖ Neurology (Tornes)
- ❖ Dermatology (Kirsner)
- ❖ Oral Surgery (Albota, Sawatari, NOVA)
- ❖ Dental (Stiles)
- ❖ JMH ER (Ellis)
- ❖ Roxy Bolton Rape Treatment Center (Ellis, Daley)
- ❖ JMH Pharmacy (de Marchena)
- ❖ Social Work (Ana Garcia LCSW, PhD)
- ❖ JMH Financial Assessment (Williams)
- ❖ JMH Nursing Services (Nieves, Vargas)
- ❖ Bascom Palmer (Henao)

THRIVE: Demographics



- 65% US Citizens
- 89% Sex Trafficking
- 11% Labor Trafficking
- 29.8 Years- Average Age
- 83% Female (4% Male; 13% Trans)
- Traffickers- 19% Boyfriends; 14% False Recruitment; 11% Sold-Parents Involved
- Referral: 38% Homeland; 38% Shelters; 16% IRC; 8% Other

THRIVE: General Health Issues



- Common Multiple Morbidities:
 - PTSD Anxiety Depression
 - Chronic Pelvic Pain Cancer
 - Chronic Neck/Back Pain
 - GI Issues/Eating Disorders
 - Dental Caries / Dental Issues
 - Migraines/Chronic Headaches
- Less Common Morbidities
 - Hepatitis C HIV Substance Abuse

Medical Consequences of a Trafficked Victim

- ◆ Physical injuries
- ◆ Multiple pregnancies; Forced, unsafe abortions
- ◆ STIs-Rates of Syphilis 20%; Hepatitis B-4%, HIV 13-34% (higher rates in younger victims)
- ◆ Higher rates of TB
- ◆ Starvation/Nutritional deficits
- ◆ Lack Proper immunizations
- ◆ Drug addictions
- ◆ **Psychological Trauma**
- ◆ **Psychiatric disorders**
- ◆ **Physical Illness**

Human Trafficking and Health: Systematic Review

Ottisova, L, et al., *Epidemiology and Psychiatric Sciences*, 2016: 1-25

- N=1466
- CHRONIC PAIN SYNDROMES
 - Headaches 21-60%
 - Back Pain 19-69%
 - Stomach Pain 10-61%
 - Dental Pain 23-58%
- Fatigue 10-81%
- Memory Problems 13-62%
- Weight Loss 13-47%
- Dizziness 10-70%

The most common physical health symptoms reported by women at 0-14 days

81% headaches

71% dizzy spells

60-70% various sexual health problems

63% memory problems

69% back pain

82% fatigue



Case # 12

- Chief Complaint- I have a “rash and sore throat”
- 22 year old male from eastern Europe, recruited to come to the United States to model, on arrival he, along with other young males, was forcibly detained, locked up and forced into sexual activity up to 18 hours per day. Activities included being made to wear high heels, feminine dress, oral sex, receptive anal intercourse. Given drugs, restricted access to food. Gender identity is male, gender expression is male, sexual attraction is men. A few weeks after rescue, developed generalized rash and sore throat
- Physical: chronic headaches and neck pain, abdominal pain with eating, soreness and discomfort in the legs/ calves
- Psychological: some insomnia but improving, feels hopeful, depression and PTSD screen – mild, working towards schooling and employment.

Case # 4



- ❖ Left El Salvador for temporary work in PR & was labor trafficked- brought to MIA by affluent family under work visa for domestic work.
- ❖ Sexually abused by step-mother's brother in El Salvador from age 5-16.
- ❖ THRIVE (26 visits) btw Mar 2016- Sept 2018
- ❖ Dx- PTSD, MDD, Constipation, Cervicalgia, HPV

Case # 23



- ❖ Signed contract w/international agency to work as nanny, 1st in Hong Kong, then Russia. Russian family brought her to MIA & stopped paying her/held her against her will.
- ❖ THRIVE (67 visits) btw Mar 2017-Nov 2018
- ❖ Dx-pleomorphic adenoma of palate, PTSD, dental caries, ASCUS pap smear, R/O carcinoma of breast - primary vs metastasis from palate

Case # 30



- ❖ From Ecuador, family gave her to traffickers for at age 4, raised by them, not treated as family, brought to US at 18 to clean & care for household, did so for 20 years. Forced to have sex with others to cover cost of living, never taught to read/write- illiterate.
- ❖ Seen in THRIVE (15 visits) btw May 2017-Mar 2018
- ❖ Dx- PTSD, OCD, Bulimia, Trichotillomania, syphilis, suicide ideation, acute eczema, insomnia, onychomycosis, acute bronchitis, binge eating disorder

Case # 31



- ❖ Came from Brazil with a work visa with a family to work as a nanny; upon arrival they took her legal documents & forced her to work in home & care for children. Burned with cooking oil by patriarch.
- ❖ THRIVE (45 visits) btw May 2017-Sep 2018.
- ❖ Dx- PTSD, MDD, pelvic pain, chronic migraines, acute bronchitis, acute cystitis, constipation.

Case # 59



- ❖ Born in the Bahamas, at age 4 brought to US to live with great aunt, raised as a domestic slave for family, not provided w/basic needs & never received medical care, sexually abused by cousin for years. Able to escape in teens.
- ❖ Seen in THRIVE (12 visits) btw Jun- Sep 2018
- ❖ Dx- PTSD, MDD, insomnia, chronic sinusitis, fibroids, hemorrhoids, back pain

THRIVE: Behavioral Medicine



- Priority Despite Tremendous Physical Health Issues
- Some Require Daily Intervention due to Anxiety
- Mindfulness, Relaxation, Meditation & Yoga
- Stabilize Anxiety & Depression with Medication
- Medication Side Effects May Cause Anxiety

What is Needed?



- Stable & Appropriate Housing
- Insurance & Financial Assistance for Health Care
- Services for Women, Men & Transgender Victims
- Shelters for Men & Boys Lacking – (a significant proportion of victims)
- Specialized Programs for those Over Age 18
- Services Designed to Protect Victims & Staff from Retaliation by Traffickers

Critical Issues Related to Medical Adherence



- Stable Housing
- Insurance & Financial – Co-Pays
- Medical Social Worker / Resource Acquisition

Gaps in Services in our Community



- ❖ Coordinated Behavioral & Mental Health Services-Acute & Long Term
- ❖ Effective Behavioral Therapeutic Interventions
- ❖ Primary Care, Dental-Eye Care & Specialty Care
- ❖ Long Term Stable Housing with Programming
- ❖ Models of Care that support a Trauma Informed Approach

Concluding Remarks



- ❖ Information on the health care needs of human trafficking survivors is extremely limited.
- ❖ Trauma informed, survivor centered models of care to manage their complex medical & psychiatric comorbidities seems to improve their recovery trajectory.

“ I can see the stars, now”

