Youth Survivor Perspectives on Healthcare and Human Trafficking
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BACKGROUND
- Human trafficking is a growing public health crisis that affects the pediatric population on a national, global, and local level.
- Despite current efforts, the incidence of trafficking remains significantly under documented.
- Challenges include:
  - Limited awareness of human trafficking,
  - Lack of identification by professionals, reluctance of disclosure by victims, and
  - Absence of a centralized database to track these occurrences.

• Human trafficking survivors require healthcare that is trauma-informed, culturally sensitive, and survivor-driven.
• Healthcare professionals must be aware of the risk factors of human trafficking but also in how to respond as we are providing direct care to this population.

PURPOSE
- This study aimed to assess youth perspectives on healthcare and human trafficking to improve care for this vulnerable population.

METHODS
- Qualitative study of youth survivors of human trafficking in Southern California
- Grounded theory approach was applied
- Recruitment through two outpatient service agencies that serve commercial sexual exploitation of children (CSEC) youth and survivors of human trafficking
- Purposive and snowball sampling
- Inclusion criteria: youth survivors ages 18-26, determined to be developmentally appropriate and in a healthy stage of recovery to discuss their history (as determined by the Youth Thrive Survey)
- Semi-structured focus groups, approx. 60 mins
- Interviews audio and/or video recorded (due to COVID-19, zoom platform was used per request), and transcribed verbatim
- Data collection methods included content analysis, narrative analysis, thematic and inductive coding

RESULTS
- Participants included 8 survivors ranging from 20 to 26 years of age who had healthcare experiences while they were being trafficked.
- The focus group interviews revealed the following themes: 1. unequal treatment, 2. barriers to patient care, 3. red flags/risk factors, 4. support, 5. survivor recommendations.

CONCLUSIONS
- Youth survivors reported multiple barriers based on their interaction with healthcare providers: lack of provider awareness, education, training, feelings of shame, judgment, racial biases, lack of empathy, and lack of identification and response.
- Survivor perspectives and recommendations should be integrated into human trafficking screening and response to ensure we are meeting the needs of youth in the community.

REFERENCE
Available upon request

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References


