

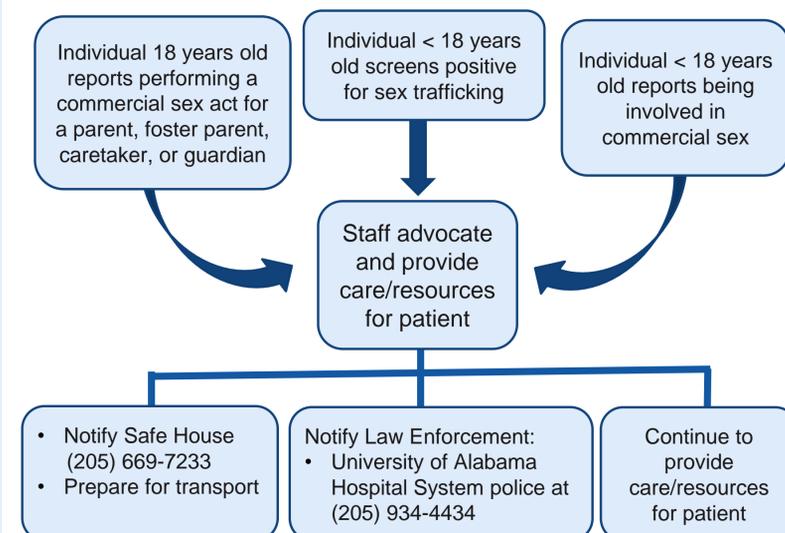
Background

- The average age victims report they are pressured into sex trafficking (ST) is between 15 and 17, while grooming starts earlier
- **Force, fraud and coercion need not be present** when identifying victims of sex trafficking (ST) who are under 18 years of age
- Up to 88% of victims report contact with a healthcare provider while being trafficked, but **few reported having been questioned or screened**
- Victims rarely self-report to healthcare workers
- The Short Screen Child Sex Trafficking tool has been validated & successfully implemented in an emergency department, leading to the rescue of adolescent victims of ST

Purpose

- To provide pediatric sex trafficking **education** for nurses and staff in a freestanding emergency department in Gardendale, AL
- To adapt a brief ST **screening tool** for adolescents, the Short Screen for Child Sex Trafficking (SSCST), for relevance to the population at the ED
- To create an **algorithm** specific to the same adolescent population who access Gardendale ED

Algorithm

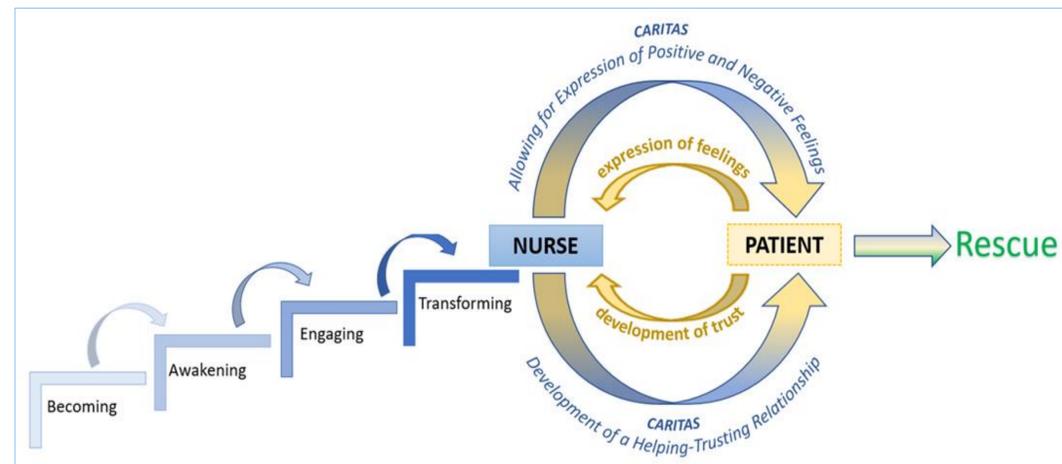


Theoretical Framework

A Combination of Two Theories:

Jean Watson's *Conceptual Model of Caring*, focusing on the patient through allowing the expression of positive and negative feelings and the development of a Helping-Trusting relationship with the nurse &

Robin Walter's midrange *Theory of Emancipatory Nursing Practice*, guiding the nurse's approach to caring for the patient by a stepped transformation from becoming aware to transforming into an advocate



Screening Tool

A **positive screen** = answering **YES** to **2** of these questions:

- Do you have a history of ...
- STD's?
 - > 5 sex partners?
 - running away from home?
 - involvement with the police?
 - using drugs or alcohol in the last year?
 - needing stitches, or going unconscious?

Evaluation

- A post-education survey evaluated the effectiveness of the ST education in meeting the learning objectives
- Formative feedback was provided by the nurse manager and staff who collaborated in the screening tool
- Future Implementation: The leadership plans to employ project in both freestanding and the main emergency departments

Implications for Practice

- The planned project aims to:
- impact patient care by identifying adolescent ST victims in an ED so they may be rescued and referred to safety and resources
 - alter healthcare workers' assumptions and dispel myths about adolescent ST victims, increasing the likelihood of screening patients who may have been overlooked in the past
 - increase nurses' knowledge gained from the ST education
 - construct a resource for ED nurses to provide trauma-informed care to prevent re-traumatization and increase the victim's likelihood of disclosure

Acknowledgements

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- Team Member, H. Franklin Wallis, DNP, NP-C, NEA-BC, Senior Director Emergency Services at UAB Healthcare
- Team Member, India Alford, RN, MSN, Director of Nursing Services at Gardendale Freestanding ED, UAB Healthcare

Methodology/Design

Phase 1 Education	Phase 2 Screening Tool	Phase 3 Algorithm
<p>1. Provide education as outlined by the SOAR program and the Alabama Board of Nursing</p> <p>Objectives:</p> <ul style="list-style-type: none"> > Define ST to include differentiation based on age > Identify factors placing a patient at greater risk for ST > Recognize the role of the nurse/healthcare provider in identifying & intervening for victims under age 18 > Understand the principles of providing trauma-informed care > Identify requirements for mandatory reporting of ST in Alabama 	<p>2. Choose the best way to incorporate the validated screening tool with the adolescent population at Gardendale ED</p> <ul style="list-style-type: none"> > Adapt the screening tool to meet the needs of the department > Consideration will be given to specific triggers for screening, such as chief complaints statistically associated with ST > Evaluation of the best way to administer the SSCST ✓ Embedded in EHR? ✓ Self-administered using electronic tablet? ✓ Paper and pencil? 	<p>3. Adaptation of an existing algorithm to meet the needs of patients who screen positive for ST</p> <ul style="list-style-type: none"> > Include a decision tree for the option of under or over 18 years of age in patients who screen positive for ST > Inclusion of patient resources specific to Gardendale ED that can be used for mandatory reporting and rescue of patients who have been trafficked