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Slipping Through the Cracks: Receptivity of healthcare professionals to an electronic screening tool for human trafficking

J. Albert1, K. Bolton1, G. Finogenov1, M. Hakim1, J. Shatten1, A. Suresh1, S. Thura1, S. Wheat1, E. Klimoski, MS3, T. James, MD, MS, FACS1,2

1University of Vermont College of Medicine; 2University of Vermont Medical Center; 3Give Way to Freedom

Introduction

• Human trafficking is the exploitation of an individual through force or coercion, for labor or services, including commercial sex.
• Healthcare providers are uniquely positioned to encounter trafficked people.1
• Prior research has found a need for increased sensitivity in identifying trafficked persons in healthcare settings, and for provider education about the issue.2

Objectives

• Assess healthcare worker receptivity to the implementation of an electronic screening tool for human trafficking in various clinical settings.
• Identify barriers to implementation of current screening practices.
• Promote awareness among healthcare workers about the prevalence of human trafficking and the potential signs of trafficking among their patients.

Methods

• Participants included 26 healthcare practitioners selected via convenience sampling.
• Surveys with Likert scale and open-ended responses were administered in person.
• Each participant encounter included an introduction to a prototypical electronic screening tool (pictured below),3 and an educational discussion about human trafficking.

Our sample included:
• 15 Primary care physicians
• 4 Emergency Dept. physicians
• 3 Nurses
• 3 Emergency medical technicians
• 1 Physician assistant

Results

Our clinic/hospital has an existing protocol for identifying people at risk of trafficking.

<table>
<thead>
<tr>
<th>Agreement Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Agree</td>
<td>34%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>4%</td>
</tr>
<tr>
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<td>23%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>3%</td>
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<tr>
<td>Strongly Disagree</td>
<td>5%</td>
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</table>

Applicability of an Electronic Screening Tool

<table>
<thead>
<tr>
<th>Agreement Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
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<td>31%</td>
</tr>
<tr>
<td>Somewhat Agree</td>
<td>16%</td>
</tr>
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<td>Neither Agree nor Disagree</td>
<td>35%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>9%</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>9%</td>
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</tbody>
</table>

The issue of human trafficking has been addressed in my professional training.

<table>
<thead>
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</tr>
<tr>
<td>Neither Agree nor Disagree</td>
<td>35%</td>
</tr>
<tr>
<td>Somewhat Disagree</td>
<td>9%</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>9%</td>
</tr>
</tbody>
</table>

Ease of Use of this Application as a Possible Screening Tool

<table>
<thead>
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<th>Percentage</th>
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</thead>
<tbody>
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<td>51%</td>
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<tr>
<td>Somewhat Agree</td>
<td>20%</td>
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<tr>
<td>Neither Agree nor Disagree</td>
<td>23%</td>
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<tr>
<td>Somewhat Disagree</td>
<td>4%</td>
</tr>
<tr>
<td>Strongly Disagree</td>
<td>2%</td>
</tr>
</tbody>
</table>

Discussion

• The healthcare providers had a positive opinion of the usefulness of the electronic screening tool, with 92% responding that such a tool would help providers identify victims.
• Implementation would need to address the time constraints, provider buy-in, and primary care ‘screening fatigue’ that some providers identified as barriers.
• The survey itself served as a valuable source of education for healthcare providers. However, educating healthcare providers remains essential.
• A shorter form of the screening tool with a few sensitive questions could prompt the use of more specific methods of identification.
• Future direction: pilot testing of the application in a clinical setting.

References:


Common themes in open-ended responses

Awareness and education:

“If nothing else, tools like this raise the awareness of providers who are then more likely to recognize the victims of human trafficking.”

Barriers for implementation:

“If providers feel it is not a problem that occurs frequently, they will not feel it is relevant.”

Suggestions for the screening tool:

“I think this has potential. It could be a good option on a mobile device to be administered while someone is waiting in the exam room. Sometimes private, sometimes the victims are accompanied by the perpetrator so giving them a safe place would be essential.”

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