



**HIDDEN IN PLAIN SIGHT:
THE IMPACT OF HUMAN TRAFFICKING**

Stacy Schaffer, Executive Director of 31:8 Project

**31:8
PROJECT**

31:8 Project focuses its programming in four areas:

- 1) We provide audience-appropriate **educational trainings** and conduct public awareness campaigns regarding human trafficking and its related issues.
- 2) **Bravery Backpacks Program** - We oversee the collection and distribution of supplies and backpacks to children ages 2 to 17. The Bravery Backpacks program helps law enforcement and service groups provide children, often separated from their families due to traumatic domestic situations, with a backpack full of necessary hygiene products, as well as comfort items, such as pajamas, slippers, blankets, coloring books, and more.
- 3) **Empowering Human Trafficking Survivors Mentorship Program** – We work with a diverse group of survivors across the state to provide comprehensive services to enable them to become familiar with necessary life skills and personal achievement goals.
- 4) **Demand Reduction Program** – Sentencing diversion program for Individuals who solicit others for sexual acts over the age of 18.

HUMAN TRAFFICKING

A form of modern-day slavery in which traffickers use force, fraud, or coercion to control victims for the purpose of engaging in commercial sex acts or labor services against his/her will.

- **Sex trafficking** is the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purposes of a commercial sex act, in which the commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.
- **Labor trafficking** is the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purposes of subjection to involuntary servitude, peonage, debt bondage, or slavery.

SEXUAL EXPLOITATION

UNDER 18-->involves exploitative situations, contexts and relationships where young people (or third person or persons) receive something (i.e., food, housing, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them sexual activities. Can occur through use of technology. An example is the persuasion to post sexual images on the internet/cell phone with no immediate payment or gain.

What is Exploitation?

Example: Johnny wants Kelly to have sex with him. Johnny tells Kelly, “if you have sex with me, I will give you \$20.”

What is Trafficking?

Example: Johnny says to Kelly that unless she has sex with his friend, he will tell everyone that they had sex. The friend gives Johnny drugs in exchange for having sex with Kelly.

SEXTORTION

- **Sextortion** is when a victim is threatened or blackmailed into providing more sexual imagery.
- National Center For Missing & Exploited Children (NCMEC) IN 2023 received 26,718 reports of financial sextortion up from 10,731 reports in 2022. Target is males ages 14-17.
- Between August 2022 and August 2023, NCMEC received an average of 812 reports of sextortion per week.
- While Instagram and Snapchat were the most common platforms used for sextortion, the report found that additional end-to-end encrypted messaging apps were being used to move victims to other platforms.



Hey 😡 i got ur nudes
and will ruin your life

ill send to all ur followers
and make it go viral

send me \$500 rn
and ill delete it all



FINANCIAL SEXTORTION IS A CRIME

BUT IT'S NOT YOUR FAULT,
AND YOU CAN GET HELP.
REPORT IT TO [TIPS.FBI.GOV](https://tips.fbi.gov).

31:8
PROJECT



50 million

people worldwide in modern slavery

2nd largest

criminal industry in the world behind drug trafficking

\$150 billion

per year business globally



1 OUT OF 150

People are trapped in modern slavery

Produces continues profits.

A person can be used over and over.

REFERENCE

International Labour Organization

A group of people, likely farm workers, are working in a field. In the foreground, a man is looking down with his hand on his forehead, appearing distressed or tired. Other workers are visible in the background, some wearing hats and work clothes. The scene is set in a lush green field.

RURAL VULNERABILITY

- Far apart doesn't = safer
- There are less jobs, which makes people vulnerable
- Victims are stigmatized
- There are few services

RURAL HUMAN TRAFFICKING VICTIMS AND RISK FACTORS

- Often females of all ages but can be males
- Minors, especially runaway or homeless youth
- American Indian or Alaskan Natives
- Temporary visa holders
- Prior physical/sexual abuse or neglect
- Behavioral health disorders
- Prior debt or economic challenges



RURAL SEX TRAFFICKING

- Familial or intimate partner recruitment
- Social media
- Gang recruitment
- Methods of Control
 - Demanding high quotas
 - Withholding medical treatment
 - Substance abuse
 - Physical or sexual assault
 - Psychological manipulation
 - Isolation and monitoring
 - Pornography

RURAL LABOR TRAFFICKING

- False job advertisements
- Outside recruitment agencies
- Familial Recruitment
- Methods of Control
 - Debt bondage
 - Isolation or controlled movement
 - Psychological, physical, and sexual abuse
 - Documents are confiscated
 - Threats against family or friends
 - False promises during recruitment

Case Example 1 Labor Trafficking

Chanda comes to the clinic with severe stomach pain. A man identifies himself as Chanda's brother-in-law and offers to translate for her. He explains that although she has had stomach problems recently, she has not been to a doctor because she doesn't have insurance. Chanda does not make eye contact with clinic staff or her brother-in-law. A nurse explains to Chanda's brother-in-law that she needs to examine each patient privately, and the brother-in-law says something harshly to Chanda in Hindi.

Through the interpreter, Chanda informs the nurse she helps clean her brother-in-law's house and provide childcare. While she loves him and his children, Chanda is stressed because she works 12 hours every day. He supervises all of her phone calls and scrutinizes every phone bill.

Hospital staff diagnose Chanda with a stomach ulcer and write her a prescription. Obviously troubled, Chanda says she's been to another clinic before and had the same diagnosis. She stopped taking the medicine because she had trouble saving enough money to pay for the medication, and she is unable to go to a pharmacy without her brother-in-law's assistance.

Case 1: Intervention

Questions to ask:

1. Stomach ulcers are often exacerbated by stress and you seem to work a lot of hours. Are you able to take days off or get out of the house to do something for yourself? Why or why not?
2. Are you able to take adequate breaks, eat, or get plenty of sleep every day when you are working for the family?
3. If you wanted to stop working for your brother-in-law to get a different job, would you be able to leave?”
4. Is there someone else who can help you access healthcare services when needed? Why does your brother-in-law prevent you from getting care?
5. Your brother-in-law seemed to speak harshly with you earlier. Does he speak to you like that often? Has he ever harmed or threatened to harm you?
6. Notice that the questions are relatively neutral and not accusatory, so it is easier to establish trust with the patient.

Case Example 2 Sex Trafficking

Jasmine comes to a clinic for an HIV screening. Although her intake paperwork says she is 19, the nurse observes that developmentally, she seems far younger. Jasmine tells the nurse she's mature for her age and very experienced. She also has a tattoo of the name 'Li'l G' on one arm.

During the exam she constantly receives texts and calls to her cell phone. She answers the phone and says 'Daddy, don't worry, I'll be done soon.' She tells the nurse that her boyfriend, who is 30, is so in love he can't be away from her for even one minute.

The screening results indicate that although Jasmine is HIV negative, she has multiple other STIs. The nurse asks Jasmine whether she uses protection during sex, but Jasmine shrugs and says 'sometimes they don't want to.' When the nurse asks who 'they' are, Jasmine says that sometimes she has sex with other men, but won't say how many. She says she won't be in the life forever, just until she and her boyfriend can save up some cash."

Case 2: Intervention

Questions to ask:

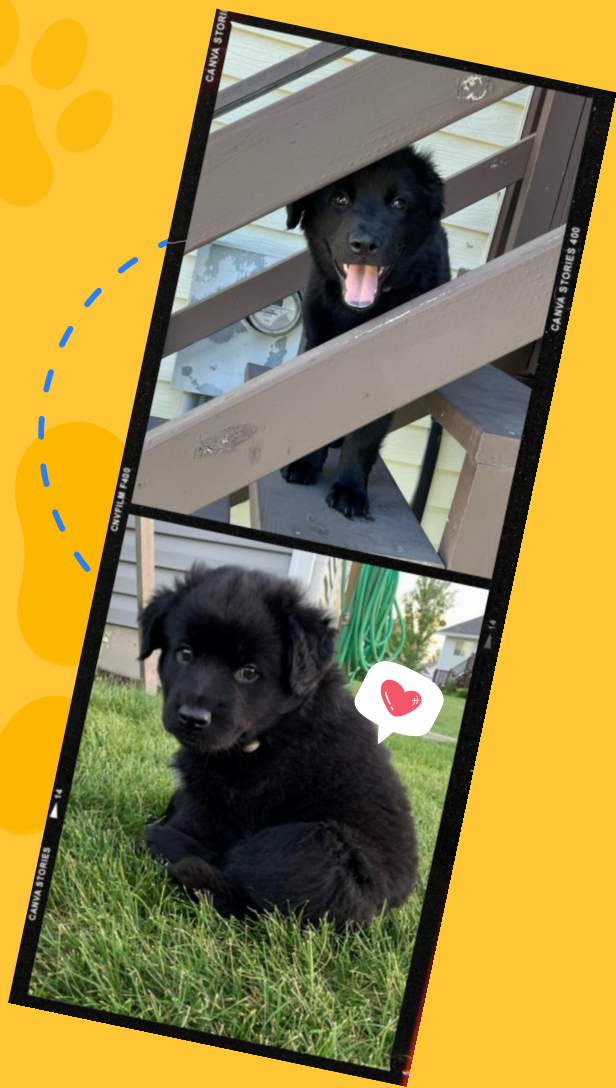
To engage Jasmine in a conversation about her potential involvement in commercial sex and potential exploitation by a trafficker, here are a few questions the healthcare provider could adapt for her conversation with Jasmine.

1. Have you engaged in sexual acts with someone in exchange for favors, money, or goods?
2. Do you know if your boyfriend or someone else has ever received something in exchange for a sexual act with you?
3. Has anyone threatened to hurt you, your family, or friends if you refused to provide sexual acts?
4. Has anyone ever taken sexually suggestive photos of you to post on the Internet?"

WHAT SURVIVORS WANT YOU TO KNOW...

- Think about things from our point of view, never say you “understand,” because you haven’t been there. But still try to put yourself in our shoes.
- Language counts. The words you use make a difference. Calling us “prostitutes” hurts us.
- We may act “hard” but we have to have the “wall” up for survival. Deep down we know we need help.
- We need more information about your services, and we need it to be in places where we can see it (public restrooms, bus stops, shelters, clinics, etc.)
- Don’t give up on us!

INTRODUCING
GRIZZLY



McKenzie Huska

Director, Marissa's House
and Outreach Services

Mary Jackson

Survivor Service & Program
Coordinator

Call To
Freedom



INDICATORS IN HEALTHCARE SETTINGS

Physical

- Broken bones
- Bruises
- Scars
- Burn marks
- STIs
- Missing teeth/poor dental hygiene
- Trauma to reproductive organs
- Chronic back pain
- Patches of hair pulled out
- Malnutrition
- Addiction
- Tattoos—gang-related or name of trafficker(s), typically on neck, face, lower back, between legs

Behavioral

- Appears tense, uncomfortable, fearful, particularly during breast or pelvic exam or when asked to disrobe
- Is unwilling or hesitant to answer questions about illness/injury
- Inability to focus/concentrate
- Defers to accompanying person before answering
- Leaving against medical advice or refusing care
- Doesn't know date/time

Environmental

- Patient lives at his/her work
- Lacks fixed home address
- Accompanying person claims to be related but doesn't know critical details about his/her medical history or identity
- Fragmented, missing, or inconsistent health records
- Accompanying person has possession of patient's documents and/or money
- Pays large bills in cash



Common Health Issues Seen in Human Trafficking Victims

- Sexually transmitted infections
- HIV/AIDs
- Pelvic Pain
- Rectal trauma and urinary difficulties
- Multiple pregnancies
- Infertility from chronic sexually transmitted infections, botched or unsafe abortions
- Infections or mutilations caused by unsanitary and dangerous medical procedures performed by the trafficker's "doctor".
- Chronic back, hearing, cardiovascular or respiratory problems
- Weak eyes and other eye problems
- Malnourishment and serious dental problems
- Infectious diseases such as tuberculosis
- Undetected or untreated diseases such as diabetes or cancer
- Bruises, scars and other signs of physical abuse such as on the lower back
- Substance abuse problems or addictions from being coerced into drug use
- Psychological trauma from daily mental abuse
- Feelings of helplessness, shame, humiliation, shock, denial or disbelief
- Cultural shock from finding themselves in a strange country



HUMAN TRAFFICKING LOOKS LIKE.....



WHEN DO SURVIVORS SEEK MEDICAL CARE?

EMERGENCY BASIS – abdominal pain, vaginal bleeding, etc.

POST-ASSAULT – broken bones, bruises, sexual assault, etc.

GYNECOLOGICAL SERVICES – contraception, pregnancy, etc.

MENTAL HEALTH & ADDICTION SERVICES



Source: National Human Trafficking Resource Center, "What to Look for in a Healthcare Setting" (2010)



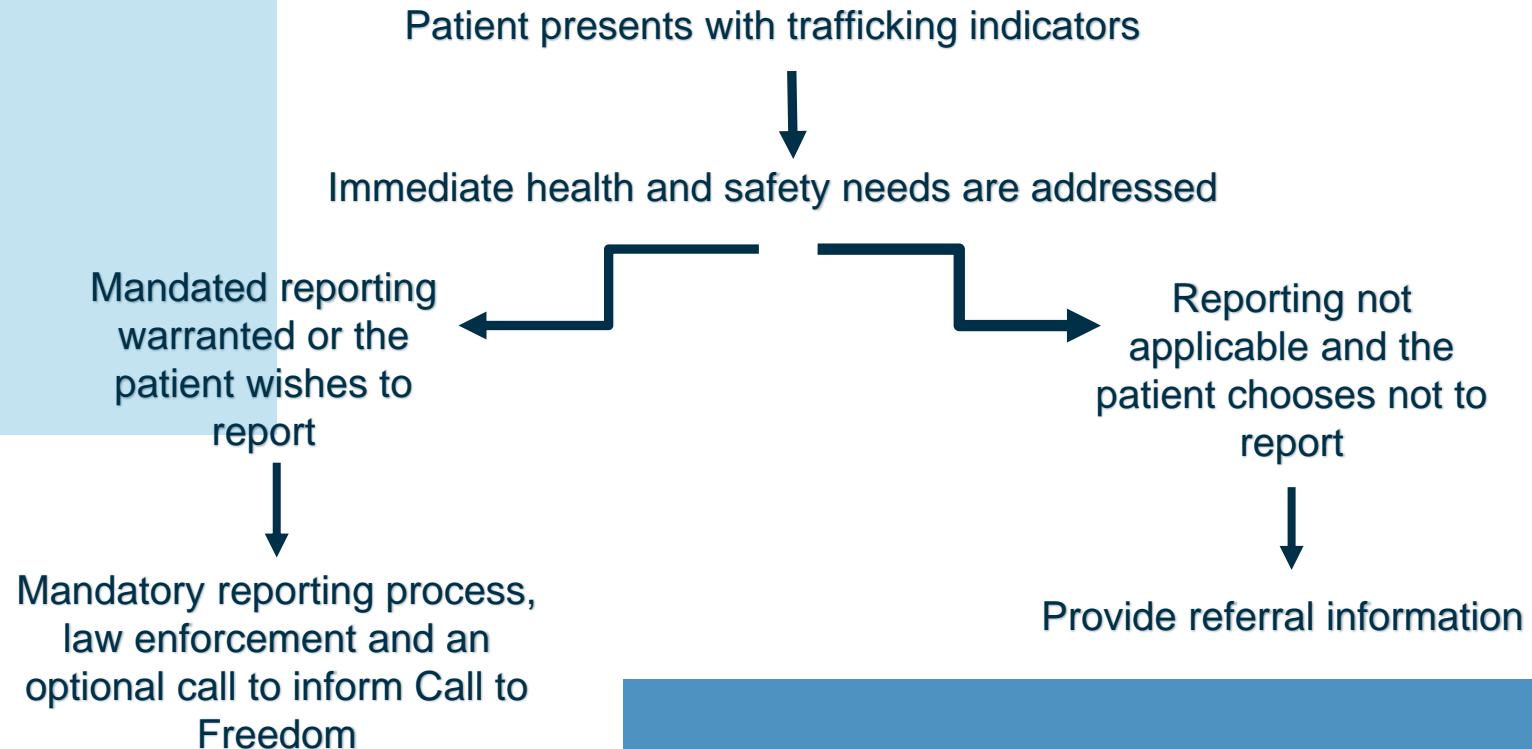
- ❖ Lacks awareness that what they are experiencing is trafficking
- ❖ Lacks understanding of victim and legal rights
- ❖ Lacks identification and other records
- ❖ Has a language barrier
- ❖ Fears deportation or law enforcement
- ❖ Fears that reporting could lead to being returned to an abusive home, jail, or foster care placement
- ❖ Feels complicit in an illegal act
- ❖ Fears that traffickers will cause harm to self, family, or loved ones
- ❖ Has limited literacy and education that hinders ability to communicate
- ❖ Has experienced trauma bonding with the trafficker or other victims
- ❖ Distrusts the provider or those in authority
- ❖ Feels hopeless and helpless
- ❖ Feels shame or guilt

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**PREVENT SELF
DISCLOSURE**

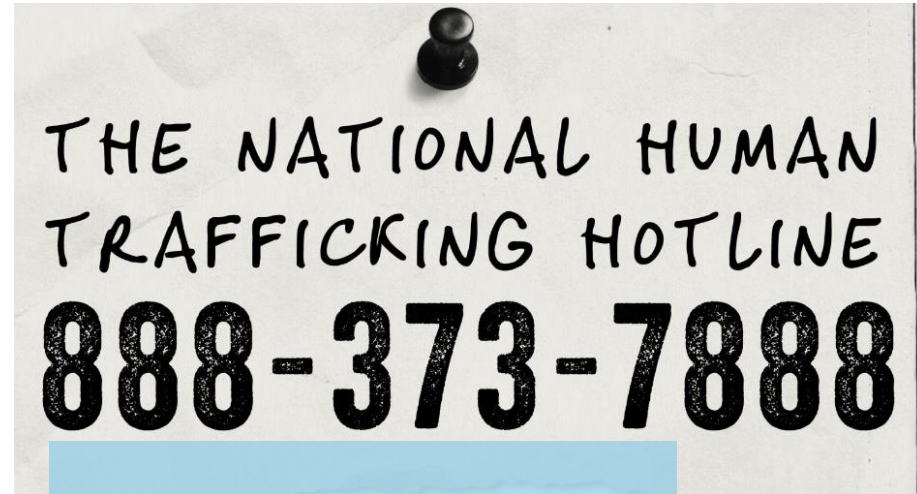


What to do if you suspect Human Trafficking



WHAT SHOULD WE DO?

- ❖ In emergencies, call 911. Do not intervene.
- ❖ Call the National Human Trafficking hotline at: 1-888-373-7888 or text INFO to BEFREE (233733).
- ❖ In Sioux Falls, call Crime Stoppers:
605-367-7000
- ❖ If you or someone you know needs CTF's services, call or text our intake line at 605-759-3565





**CTF HAS
SERVED OVER
1300 CLIENTS
SINCE 2016**

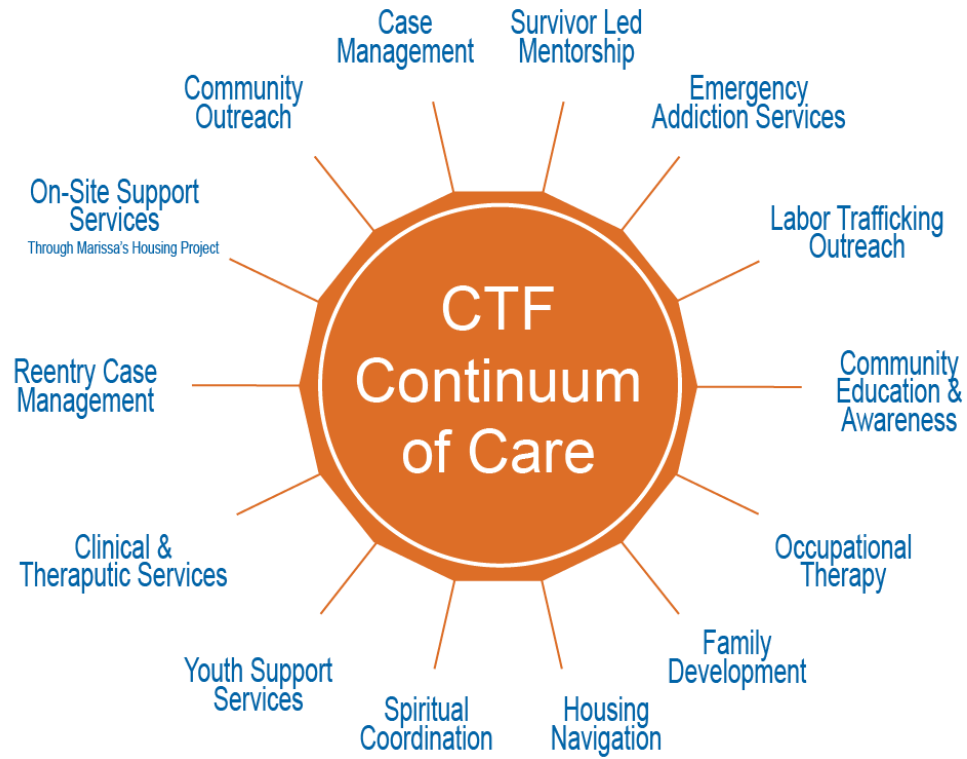
In 2023, CTF served 419 clients, of whom 77 were youth (0-24).

216 new referrals came through CTF's door;
47 were youth referrals.

From January-June 2024, CTF served 324 clients, of whom 61 were youth (0-24).

129 new referrals came through CTF's door; 32 were youth referrals.





CALL TO
FREEDOM
SERVICES



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