Sharing the voices of survivors of sexual exploitation. Revealing the opportunities we all have to create a better world for girls and women.

**MEDICAL EMERGENCY** 

# "I was in the ER 18 times and no one ever asked me if I was really okay."

- JERI, SURVIVOR

Violence is a constant in the lives of girls and women in the sex trade.

Physical injuries often bring a survivor to the hands of medical professionals.

This might be one of her best chances to get help. Unfortunately, however, her true needs are invisible to the system.

This invisibility is not surprising.

She has good reason not to tell anyone she is in the sex trade. By the time women in the Life need medical attention, they may have learned to use anger and denial as tools to survive.

In some cases, traffickers might be sitting within arm's reach to protect their "investment."

"I remember a doctor asking me 'Your story doesn't make sense. What really happened to you?" when my trafficker was less than two feet away, glaring at me. I knew that I would never be able to say anything, because if I did, there would be repercussions when I left."

- JERI, INDIGENOUS SURVIVOR AND SERVICE PROVIDER

## At higher risk.

From records that don't reflect their gender identity to lack of awareness among medical personnel, transgender women face barriers in the medical system even under ordinary circumstances. With the additional stigma of sexual exploitation, appropriate care can become even more remote.



I know that I'm treating exploited women. I've seen their tattoo brands, but I don't always know where to send them when they leave us. I don't want to re-traumatize a woman by asking her about her situation if I can't do anything for her.

- LEE, ADDICTION MEDICINE DOCTOR

"

80%

While 88% of survivors report they have been in contact with a healthcare provider, only six percent of healthcare workers report treating a victim of human trafficking at some point in their career.<sup>1,2</sup>

## The Life Story

MOMENTS OF CHANGE.

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#### **MEDICAL EMERGENCY**

#### STEPS TOWARD CHANGE

Emergency medical professionals are taught to heal bodies, not lives. However, there are new tools that can help caring practitioners help women when they suspect something is going on.

### Adopt screening and response protocols.

US healthcare systems have made great advances toward addressing domestic violence with training and protocols. The same can be done with trafficking. Heightened awareness and training can help practitioners understand the complexity of her situation and prepare them to act in trauma-informed ways when they suspect exploitation.

## Find support for victims of sexual violence.

Whether she has been raped by a date, abused by a boyfriend or husband, or assaulted by a man buying sex, any woman who has been a victim of sexual violence is in need of help. Sexual assault hotlines are available in many cities and victim advocates are available in hospitals.

#### Connect women to social services.

She may enter the ER seeking physical treatment, but she could leave with much more: a compassionate advocate, access to mental health services, a bed at a shelter or safe house, support from law enforcement and perhaps a renewed sense of hope.



I have been in emergency rooms only to be treated like a common criminal. From emergency personnel to EMTs, it didn't seem to cross their minds to offer a resource or even that I needed help.



- ROXANNE, INDIGENOUS SURVIVOR AND ADVOCATE

- 1. Lederer, L. J., & Wetzel, C. A. (2014). The Health Consequences of Sex Trafficking and Their Implications for Identifying Victims in Healthcare Facilities. Annals of Health Law: The Health Policy and Law Review of Loyola University Chicago School of Law, 23(1), pp. 61-91.
- 2. Chisolm-Straker, M., Richardson, L. D., & Cossio, T. (2012). Combating Slavery in the 21st Century: The Role of Emergency Medicine. Journal of Health Care for the Poor and Underserved, 23(3), pp.980-987. doi:10.1353/hpu.2012.0091.

#### WHO CAN SHIFT THE SYSTEM?

Medical emergencies are pivotal moments when she may be separated from her exploiter and given both physical and social assistance.

**PARAMEDICS** 

**NURSES** 

VICTIM ADVOCATES

**REGISTRATION STAFF** 

**DOCTORS** 

**HOSPITAL ADMINISTRATORS** 

HOSPITAL SOCIAL WORKERS



I believe that all staff at hospitals should be trained on what commercial sexual exploitation looks like in real life...These women need to be shown care and compassion just like a domestic violence victim.

- NOEL, SURVIVOR AND FOUNDER OF SURVIVOR SERVICES ORGANIZATION FOUNDATION PROGRAM OFFICER



#### **ABOUT THIS PROJECT**

**The Life Story: Moments of Change** shines a light on the realities of women in the sex trade, elevates their voices and experiences and highlights opportunity for change. This material is meant to inform and inspire those who work across the intersections of education, housing, public health, mental health and addiction services, economic and racial justice, and many other areas. **Learn more at:**