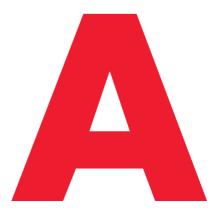
INDICATORS

of trafficking in hum_n beings for sexual exploitation







This document lists possible **indicators** of situations involving **trafficking in human beings** (THB) **for sexual exploitation**. This **practical tool** aims to facilitate the identification of potential THB victims by the professionals who might come in contact with them through their professions (e.g., health professionals, psychologists, social workers, and security forces).

Most of the other lists of indicators currently available address the different consequences of trafficking by providing some indicators for each type of trafficking. Instead, this list focuses only on the **specific indicators** for THB for sexual exploitation. It intends to provide a useful and complete resource by also including psychological indicators, which reflect the impact of trafficking for sexual exploitation on the **mental health** of the victims and are not usually addressed extensively in the other lists. It is important to note that only some of the indicators may apply in some cases and, therefore, it is not necessary to apply all the indicators

to verify a potential case of **THB for sexual exploitation**. Some indicators might not be enough to confirm or discard a potential case of THB. However, the presence of some of the indicators is a **warning sign** that should lead to **further examination** of the case. Example document for professionals

Name:	Age:
Date:	Entity:

HEALTH

Indicators referring to the consequences of THB for sexual exploitation on the victims' general health condition (both physical and psychological).

PHYSICAL INDICATORS

Poor general health condition. This includes a neglected aspect, poor personal hygiene, malnutrition and dehydration, problems resulting from unsafe pregnancy terminations, oral health problems, digestive, skin and neurological disorders, sleeping and eating disorders, vision problems. These are the consequences of violent situations and/or trafficking and sexual exploitation.

Health problems left untreated. Due to threats and constraints, victims cannot obtain medical assistance. Generally, they do not have any access to medical resources and they often cannot start or are forced to stop medical treatments even if they suffer from serious diseases (e.g., diabetes, cancer, heart conditions and hepatitis infections).

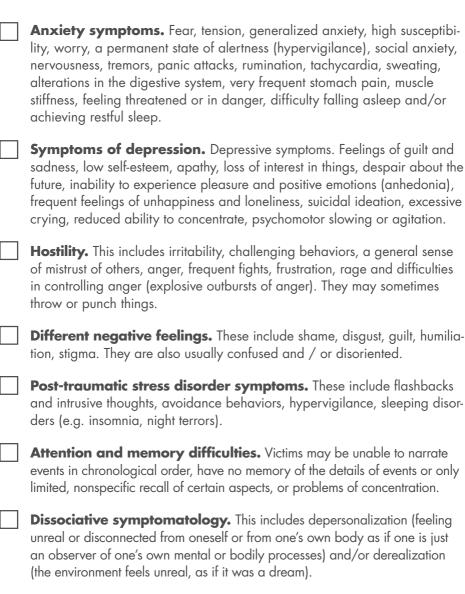
Signs of physical abuse. These include contusions, bruises, cuts, scars, burns (for example, cigarette burns), bone fractures or other physical injuries. They are often accompanied by explanations that are inconsistent with the observed signs or the victims can have difficulties in explaining how they happened.

Deprivation of sexual and reproductive rights. These include signs of sexual abuse and rape, unwanted or late detection of pregnancies, an inability to make decisions on whether to continue with the pregnancy, an obligation to exercise prostitution while being pregnant and forced or involuntary abortions.

Sexually transmitted diseases and infections. Sexual health problems are due to forced unsafe sexual practices. Victims may also experience vaginal pain, infertility, menstrual cycle disturbances and other gynecological problems as consequences of these diseases or abusive sexual practices.

Diverse psychosomatic disorders. These include headaches, back or chest pain, abdominal distress, extreme fatigue, dizziness, fainting, blurred vision, tremors, sweating, immunosuppression and generalized fatigue. All these disorders are consequences of the chronic stress, trauma and violence that the victims have experienced.

PSYCHOLOGICAL INDICATORS



Sudden behavioral changes. These include sudden changes in behavior, changes in social relationships (e.g., loss of contact with old friends, creation of new friendships, new partners, and age differences in their social

circle), changes in physical appearance and the way of dressing (maybe inappropriate for their age), victims being distant from their families, conflicts with parents, staying away from home and school absenteeism.



Substance abuse. This can lead to dependence, overdoses, infections from the use of syringes, risky behaviors, involvement in criminal activities and violence.



Sexual difficulties. Alterations and inhibitions occurring in any of the phases of sexual response and which prevent or hinder the enjoyment of sex.

Self-destructive behaviors. These include suicide attempts and self-harm.

Multiple traumas. Victims often have had other traumatic experiences before trafficking and sexual exploitation.

Comorbidities. The presence of one or more disorders at the same time.

INTERPERSONAL RELATIONSHIPS

Indicators referring to the psychosocial aspects related to the interactions of the victim with their physical and social environment. **Language isolation.** Lack of knowledge of the local language (they know basic words or words related to prostitution) or an inability to communicate or difficulties with communicating in the local language.

Social isolation. Limited or no social interaction, lack of freedom to communicate with people outside the trafficking network, submission to measures of absolute control that limit contact with third parties and ensure that any contact that occurs is superficial or under the supervision of a third person, difficulties or inability to contact family, friends and acquaintances. Sometimes, victims don't know their location – for example, the name of the street, the city, the country, and so on. They usually have few contacts on their mobile phone; sometimes they don't have a phone, but it is increasingly common for them to have a latest generation phone and to have developed a certain dependency on it; allowing victims to have a phone and to make limited use of it enables traffickers to control them in a more subtle way, making them less aware of the fact they are being trafficked and sexually exploited.

Stigmatization. Victims are often rejected by their own families or communities because they have been prostituted, raped and sexually abused, or because they did not pay their debt. They also usually suffer from the same stigma in the countries they have been trafficked to. If they are sent home, there is a risk they will be rejected by their family and community for having failed to provide them with the prosperity they had expected; they are often trafficked again. All this makes them reluctant to talk about their families or to contact them; they may also feel ashamed to contact their families.

Threats towards the family in the country of origin. Due to this, victims cannot explain the situation that they are in or cannot ask their family for help. They establish a certain distance from their relatives or hide their real situation, in order to protect them and to prevent them from finding out that their life in Europe is not what they expected.

Weak family ties. These include a weak or non-existent social support network in the country of destination, and dysfunctional relationships within the family in the country of origin. Sometimes, they have a bad relationship with their parents.

Unequal interpersonal relationships. Victims mainly interact with members of the criminal trafficking organization – or with other victims of

the same organization – and these interactions are often subject to extreme control and surveillance. On many occasions, they tend to be submissive towards the traffickers.

The development of emotional bonds with the traffickers themselves. Sometimes the victims may be in a relationship with the traffickers, and this may encourage feelings of loyalty. Similarly, there may be situations of emotional dependence, and even affective ambivalence. All this can interfere with the reporting of abusive situations and encourage revictimization, even in cases in which the women are in contact with the police.

Inability to establish and maintain new meaningful relationships. This includes reluctance in meeting new people and a high level of distrust out of fear of being assaulted or violated.

Distrust towards the authorities and ignorance of the service network available to them. On many occasions, victims may be wary of contacting the authorities, due to previous negative experiences. The traffickers may threaten to return victims to their countries of origin, saying that they have contacts inside the authorities who are corrupt and will help them; this also generates distrust among the victims and distances them from possible sources of assistance.

Secrecy. Victims are reluctant to talk about their situation out of fear of reprisals. They usually alter their narrative and might give the impression that they are acting on instructions in front of professionals. They avoid eye contact due to fear and distrust.

TRAFFICKING CONDITIONS

Indicators associated with trafficking, journey conditions and the debt THB victims are forced into. **Automaticity in the victim's narrative.** Often there is a sensation that victims are repeating a learnt script when talking about the migratory process, as if someone had told them what to say and they are following instructions. Nor do they usually talk about their situation and they are vague about the conditions they live in, or how they travelled to the country of destination. Inconsistencies in their stories often appear; when asked how they feel, they claim that they're fine.

Situation of vulnerability. In their places of origin they may suffer situations of discrimination, violence and/or inequality. They are fleeing from situations of poverty, forced marriage, female genital mutilation, persecution due to sexual orientation, gender violence, and so on. They may also be fleeing from their families, desperately seeking the love they have not found in their homes. On occasion, they may have mild intellectual disabilities that make them even more vulnerable to trafficking and sexual exploitation networks. Age is also a factor of vulnerability that is exploited by criminal networks especially in cases of trafficking inside the same country, since victims are recruited mostly during adolescence.

Deception and/or false expectations. Victims know nothing about the conditions in which they will be moved to their country of destination, the conditions in which they will live or, frequently, about the work they will be expected to do when they arrive (they are usually told that they will have a decent job, that they will be able to study and that they will be able to send money to their family at home). There are cases in which they are aware that they will have to practice prostitution, but they have no idea of the conditions in which they will work. Nevertheless, they sometimes feel they are better off than they would be in their countries of origin.

Ignorance of fundamental details of the journey and inability to control this journey. Often victims are unaware of the routes they have followed, the situation in the country of destination, the total amount of money that the trip has involved, the number of people who have participated, etc. Nor have they had the opportunity to process permits and the necessary documentation.

The transfer took place in extreme conditions. Victims are usually repeatedly mistreated and suffer abuse and rape during the journey. They have to live in humiliating and vexatious conditions and are forced to accept them. In many cases, they risk their own life and health.

Debt. Victims can fall into debt, such as with people who they work with or people who have helped them enter the country of destination. Generally, the debt is a large amount of money, which is very likely to increase with time (for example, because of punishments for misbehavior or the prices they have to pay for rent, clothing, food, etc.). The traffickers usually take advantage of victims' ignorance of different currencies; the latter may associate the value of the euro with their local currency and so accept the amount that the traffickers claim they owe them, even if it is exorbitant.

Voodoo. Before starting the journey and "accepting" the debt, a voodoo ritual is often carried out as a method of psychological and spiritual coercion. Voodoo is a fundamental coercive means in the sexual exploitation of Nigerian women, since it establishes a system of abuse based on the religious beliefs of the victims of this nationality. It constitutes the basis of the relationship between the victim and the traffickers, who thus have an extra mechanism of control (even when they remain in the country of origin) since the victims are predisposed to cooperate so as to avoid supernatural reprisals. These rituals may be repeated throughout the process of sexual trafficking and exploitation.

SEXUAL EXPLOITATION CONDITIONS

Indicators related to the living conditions of the victims during sexual exploitation. The main characteristic is the victim's lack of freedom to control their own life. **Lack of documentation.** Victims do not hold any documentation. Traffickers hold on to the identity papers of the victims and constantly threaten to expose them to the authorities, putting the victims at risk of imprisonment and deportation for not possessing any documentation. If they are accompanied by their child(ren), they do not have their documentation either.

Lack of control on the conditions of prostitution. Victims cannot control the conditions under which they are forced to prostitute themselves, such as the hours of practice (usually excessive, they work every day without any time for rest), the type of client, the sexual practices, the place where the prostitution takes place and the use of contraception.

Inability to escape their situation. Victims are sexually exploited daily without any rest. If they refuse to prostitute themselves, they are pressured, threatened (along with their family) and physically and sexually assaulted.

Economic extortion. There is little or no remuneration; the victims do not carry cash (or have very little money), they cannot freely use the income from their work, they have no access or control over their own finances, they cannot send money to their families at home, they do not know how much money their work produces, their standard of living is far lower than would correspond to the profits they generate, they are forced to earn a certain amount of money every day, their identity is used to contract telephone subscriptions or to buy cars, and so on. In many cases, they report malnutrition due to the conditions imposed on them (for example, they may be given only one meal per day, or their allocation of food and drink may depend on the profits they generate).

Physical, psychological, sexual and economic violence. Victims repeatedly suffer psychological abuse, physical violence and sexual assaults. Traffickers also repeatedly steal their earnings.

Pressure to commit crimes. Occasionally, if victims cannot provide the amount of money required on a daily basis, they may be forced into committing petty thefts or burglaries to keep paying their debts or increase their earnings.

Threats and constraints. These include threats of being reported to the authorities for being in the country illegally or for the crimes they have been forced to witness or commit, with death threats and reprisals towards the victim and their family. Threats are also made to publically repudiate or dishonor the victims for prostituting themselves. They may also be pressurized to recruit new victims and/or take charge of them.

Extreme measures of surveillance. Security measures in their place of work to prevent escape (bars on the windows, video surveillance, secured doors, etc.); they are moved to their place of work under surveillance, they are observed while working, they are constantly accompanied if they have to go to hospital or some other service, they are kept under surveillance by someone who acts as a translator and speaks for them, etc. However, there are some indications that these control mechanisms are changing: victims may be subjected to more subtle surveillance measures (for example, they are not locked up, but their actions and movements are constantly controlled by mobile phone).

Restriction of movements. Little opportunity to move around: there is permanent surveillance of everything they do and everyone they see or contact.

Use of tattoos. Occasionally, some traffickers may mark victims with symbolic tattoos (numbers, bar codes, names, etc.) to indicate that they are their "property".

Poor housing conditions. These include confinement, accommodation in poor conditions and no choice in where to live. Victims sometimes live in the same building where they have to work in and they may be regularly moved from place to place. They are usually unable to provide their address and only know the itinerary from where they live to the place/area where they are forced to prostitute themselves.

Difficulties in identifying the trafficking situation they have experienced. In many cases, victims have serious difficulties in realizing that they have been the victims of THB for sexual exploitation. They do not identify as such because they do not conceive Human Trafficking as a crime. They sometimes believe that they have had bad luck, a bad job or even that what they have been through was normal and necessary to have a better future.

Cultural differences. The victim's cultural background can explain differences in their narratives or their experiences of trafficking and sexual exploitation, and is essential to consider when identifying potential cases of THB for sexual exploitation. It is imperative to consider the victim's cultural background because it can reflect distinct situations of trafficking and sexual exploitation.

NOTES

BIBLIOGRAPHY

APRAMP (2015). Guía de intervención con víctimas de trata para profesionales de la salud. Recuperado de https://www.caib.es/sites/salutigenere/f/204052

Dols, A. & Cortés-Bechiarelli, E. (2017). Tratamiento jurídico-penal de los abusos vinculados a la creencia y ejercicio de la brujería y vudú en España (Especial referencia al delito de trata de seres humanos) (tesis doctoral). Universidad de Extremadura, Extremadura, España.

Florida Department of Children and Families (2009). *Human Trafficking of Children Indicator Tool.* Retrieved from http://www.dcf.state.fl.us/programs/humantrafficking//docs/HumanTraffickingOf-ChildrenIndicatoTool0109.pdf

Fundación Abogacía Española (2015). Detección y defensa de víctimas de trata. Guía práctica para la abogacía. Recuperado de https://www.abogacia.es/wp-content/uploads/2015/12/GUIA-VICTI-MA-DE-TRATA-VERSION-FINAL.pdf

Greenbaum, V.J., Dodd, M., & McCracken, C. (2015). A Short Screening Tool to Identify Victims of Child Sex Trafficking in the Health Care Setting. *Pediatric Emergency Care*, 34(1), 33-37. doi: 10.1097/PEC.00000000000602

Hossain, M., Zimmerman, C., Abas, M., Light, M. & Watts, C. (2010). The relationship of trauma to mental disorders among trafficked and sexually exploited girls and women. *American Journal of Public Health*, 100(12), 2442-2449.

International Labour Office & European Commission (2009). *Operational indicators of trafficking in human beings*. Retrieved from http://www.ilo.org/wcmsp5/groups/public/@ed_norm/@declaration/documents/publication/wcms_105023.pdf

International Organization for Migration (2012). Caring for Trafficked Persons: Guidance for health providers. Retrieved from http://publications.iom.int/system/files/pdf/ct_handbook.pdf

Macy, R.J., & Graham, L.M. (2012). Identifying Domestic and International Sex-Trafficking Victims During Human Service Provision. *Trauma, Violence and abuse*, 13(2), 59-76. doi: 10.1177/1524838012440340

Muftic, L.R., & Finn, M.A. (2013). Health outcomes among women trafficked for sex in the United States: a closer look. *Journal of Interpersonal Violence*, 28(9), 1859-1885.

Mumma, B., Scofield, M., Mendoza, L., Toofan, Y., Youngyunpipatkul, J. & Hernandez, B. (2017). Screening for Victims of Sex Trafficking in the Emergency Department: A Pilot Program. *Western Journal of Emergency Medicine*, 18(4), 616-620. doi: 10.5811/westjem.2017.2.31924

OIM (2006). *La trata de personas. Aspectos básicos.* Recuperado de https://www.oas.org/atip/ reports/trata.aspectos.basicos.pdf

Polaris Project (2016). Recognise the signs. Retrieved from https://polarisproject.org/recognize-signs

Polaris Project (2016). What to look for in the health care setting. Retrieved from http://traffickingre-sourcecenter.org/resources/what-look-healthcare-setting

UNODC (n.d.). *Human Trafficking Indicators*. Retrieved from https://www.unodc.org/pdf/HT_indicators_ELOWRES.pdf

UNODC (2008). *Toolkit to Combat Trafficking in Persons*. Retrieved from https://www.unodc.org/ documents/human-trafficking/Toolkit-files/08-58296_tool_6-4.pdf

Williamson, E., Dutch, N.M., & Clawson, H.J. (2008). National symposium on the health needs of human trafficking victims: Post-symposium brief. Office of the Assistant Secretary for Planning and Evaluation U.S. Department of Health and Human Services. Washington, DC.

Zimmerman, C., Hossain, M., Yun, K., Gajdadziev, V., Guzun, N., Tchomarova, M.,...Watts, C. (2008). The Health of Trafficked Women: A Survey of Women Entering Posttrafficking Services in Europe. *American Journal of Public Health*, 98(1), 55-59.

Zimmerman, C., Hossain, M., Yun, K., Roche, B., Morison, L., & Watts, C. (2006). Stolen smiles: A summary report on the physical and psychological health consequences of women and adolescents trafficked in Europe. London: London School of Hygiene & Tropical Medicine. Retrieved from https://www.icmec.org/wp-content/uploads/2015/10/Stolen-Smiles-Physical-and-Psych-Consequences-of-Traffic-Victims-in-Europe-Zimmerman.pdf

Zimmerman, C., Hossain, M., & Watts, C. (2011) Human trafficking and Health: A conceptual model to inform policy, intervention and research. *Social Science & Medicine*, 73(2), 327-335.

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