

Child trafficking: AAP policy calls for training, advocacy, research to halt exploitation

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In a recent FBI operation, 120 suspected human traffickers were arrested across the U.S., and 84 child victims recovered. In 2015, Interpol and other organizations launched Operation Akoma to target traffickers in the agricultural and trade sectors of the Ivory Coast, recovering more than 48 child victims of forced labor exploitation between 5 and 16 years of age.

Child trafficking violates basic human rights and constitutes a major global public health problem. It adversely impacts the physical and emotional health of the child; causes grief, trauma and disruption to the family; alters the social cohesiveness of communities; and erodes the basic human rights underlying societies.

Pediatricians and other health care professionals (HCPs) may encounter victims who present with a variety of physical or behavioral health conditions. They may come across children at high risk for trafficking, who need resources and guidance to avoid exploitation. As such, HCPs have a role in preventing child trafficking, recognizing victimization and intervening appropriately to offer victims assistance.

Call to action

The Academy has released a new policy statement that outlines major issues regarding public policy, medical education, research and collaboration around child labor and sex trafficking and provides recommendations for future work. The policy, *Global Human Trafficking and Child Victimization*, from the AAP Committee on Child Abuse and Neglect and Section on International Child Health, is available at

<https://doi.org/10.1542/peds.2017-3138> and will be published in the December issue of *Pediatrics*.



Effectively addressing child trafficking requires a public health approach that incorporates rigorous research on the risk factors, health impact and effective treatment options for child exploitation as well as implementation and evaluation of primary prevention programs. HCPs need training to recognize possible signs of exploitation and to intervene appropriately. They need to adopt a multidisciplinary approach to service provision, working with nonmedical professionals in the community to assist victims. Pediatricians

also need to advocate for legislation and policies that promote child rights and victim services as well as those that address the social determinants of health, which influence the vulnerability to human trafficking.

Recommendations

The policy's recommendations, which apply to AAP chapters and all HCPs serving children, include the following:

Public policy

- Support antitrafficking legislation and policies, including increased access to services for all victims; increased interagency collaboration; improved screening for human trafficking among immigrants detained at national borders; and assistance on immigration issues for foreign nationals.
- Support legislation and policies that facilitate primary prevention of child trafficking through education of children and parents.
- Support efforts to address the social determinants of health.
- Advocate for policies that protect children who are victims of any type of trafficking from prosecution for related offenses, emphasizing treatment and services instead.
- Work with other medical organizations to facilitate a public health approach to human trafficking and empower HCPs to use a culturally sensitive, rights-based, victim-centered approach to human trafficking.
- Advocate for U.S. ratification of the Convention on the Rights of the Child.

Medical education

- Encourage the American Board of Pediatrics to include child trafficking in its content specifications.
- Encourage curricula to include strategies for addressing social determinants of health.
- Advocate for financial support and resources for development and global dissemination of culturally appropriate, trauma-informed curricula for HCPs addressing human trafficking.

Research

- Rigorous, empirically based research on child trafficking is necessary to identify risk factors; improve victim identification; estimate prevalence; understand experiences during exploitation; evaluate adverse health consequences; identify resiliency factors; understand the connections between child trafficking, toxic stress and long-term health outcomes; and assess the effectiveness of treatment interventions.
- Advocate for the development of intervention strategies and rigorous empirical evaluation of their impact on child health and well-being; research on trauma-informed care and on effective ways to implement this approach into a busy health care setting; centralized surveillance and data collection on identified trafficked persons; and adoption of International Classification of Diseases codes to report the types of human trafficking.

Collaboration

- Advocate for HCPs in larger health care facilities to identify victim service providers and organizations in their communities and those working in solo or small practices to collaborate with local, state or national partners.
- Speak out for development of clinic and hospital protocols outlining processes to help recognize and respond to child trafficking of all types.
- Advocate for easily accessible, victim-centered, culturally appropriate medical homes for trafficked persons.
- Promote outreach and awareness at the community, state, national and international levels.

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Resources

- [National Human Trafficking Hotline, 1-888-373-7888 or https://humantraffickinghotline.org](https://humantraffickinghotline.org)
- [Polaris](#)

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