

VIEWPOINT

COVID-19 and Human Trafficking—the Amplified Impact on Vulnerable Populations

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The coronavirus disease 2019 (COVID-19) pandemic has not only revealed inequities, it has also exacerbated them. Already-vulnerable populations are bearing the brunt of the health impacts of COVID-19 and also experiencing educational and economic consequences. This amplified impact of COVID-19 on vulnerable populations has important implications for individuals at risk of or exploited in human trafficking.

Human trafficking inflicts a breadth of harms on those exploited, including physical, emotional, and sexual violence.¹ The COVID-19 pandemic has created circumstances that may increase the risk of trafficking, inhibit identification of those who are trafficked and those who survive trafficking, and make it harder to deliver comprehensive services to support survivors' recovery.

To begin, COVID-19's impact implicates many of the risk factors for human trafficking. Homelessness and a history of child maltreatment are 2 significant risk factors for trafficking of young people.² The economic impact of COVID-19, including widespread job loss, has left many people unable to pay rent. Despite moratoriums on evictions for some, others have been left unprotected.³ In addition, when moratoriums end, individuals may still be unemployed and unable to pay rent. These factors heighten the vulnerability of already-struggling families and can result in adults and children ending up homeless. This can leave youth in particular at heightened risk of various forms of exploitation, from survival sex to exploitation in various labor sectors.

Similarly, there is widespread agreement among child advocates that COVID-19 has spurred an increase in child maltreatment. Although reporting is down (primarily because mandatory reporters, including teachers and pediatricians, are not seeing some children), hospital reports of child abuse injuries have increased.⁴ The trauma of child maltreatment, increased time on the street, or the combination of both leaves young people at greater risk of human trafficking.

The pandemic appears to be spurring other risks. With school closures, children and adolescents are spending more time online, increasing risks that could lead to trafficking situations. The National Center for Missing and Exploited Children noted an increase from 2 million to 4.2 million reports of online exploitation from March to April 2020.⁵

For those already in trafficking situations, COVID-19 has worsened circumstances. Protecting against exposure to the virus in trafficking situations can be more challenging. In forced labor and commercial sex settings, those who are trafficked may have little access to or choice of whether to wear masks or to insist that others nearby do. And social distancing may be difficult, if not impossible, in these settings. Given the inequitable distribution of COVID-19's

impact, trafficked individuals may also live in neighborhoods with higher rates of infection.

Moreover, COVID-19 makes identification of trafficked individuals and survivors more challenging. School closings have foreclosed opportunities for teachers and other education personnel to identify at-risk or exploited youth. In addition, as COVID-19 has burdened hospitals, and particularly emergency departments, individuals with less significant symptoms have been urged to stay home. This guidance, which can help hospitals avoid being overwhelmed, can have unintended consequences for many trafficked youth who are uninsured and often rely on emergency departments as their primary source of health care. Delays in seeking care risk both adverse consequences for trafficking survivors' health and missed opportunities for identifying individuals trapped in trafficking situations.

Even when trafficked individuals present at hospitals, some of the protocols made necessary by COVID-19 present new barriers for health care professionals who aim to build a care relationship with patients. For example, many trafficked youth have experienced significant trauma and have a history of negative experiences with authority figures, leaving them reluctant to trust yet another new adult. Wearing masks and other personal protective equipment may make it harder for health care professionals to connect with trafficked youth and build the trust that enables them to open up and share what they are experiencing.

When survivors are identified, COVID-19 can affect services. Because of the breadth of harms inflicted on trafficking survivors, they typically need a range of services—physical and mental health care, education and job training, legal services, and more.¹ Shutdowns associated with the pandemic have constrained the ability to deliver the comprehensive, integrated care that survivors need. Moreover, stay-at-home and shelter-in-place orders can increase social isolation, which can adversely affect mental health recovery.

Given the various ways that COVID-19 has affected individuals at risk of and exploited in human trafficking, there is a need for a focused strategy on how to respond to human trafficking during this pandemic. General guidance, such as "if you show symptoms, call your physician," may be unhelpful to a population in which many are uninsured and do not have a regular health care practitioner.

Although measures must be taken to minimize the risks of COVID-19, we also must recognize that COVID-19 may exacerbate the conditions in which human trafficking can flourish. This is not merely about addressing online exploitation but also about mitigating housing and food insecurity, which push vulnerable individuals into riskier situations. Children experiencing maltreatment

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must be identified, and that necessitates new strategies for ensuring we reach children who are now isolated.

In care settings, health care professionals must think creatively about how to overcome COVID-19–related barriers to building trust. This step is essential both to providing quality care and to maximizing opportunities to identify trafficking survivors.

We also must adapt services so that we can deliver the comprehensive, integrated services that survivors need and deserve. Prior to the pandemic, many trafficking survivors' entry point into the health care system was to present with an acute medical problem. Often it was during that visit that mental health needs were identified. If survivors were interested, they were connected to mental health services. Given this pattern of health care use, an integrated health care model, in which mental health staff and medical staff work side by side with open schedules, was more likely to meet the needs of survivors. Not only could survivors receive mental health services during a medical visit, but they could also be connected with other important services, including legal services. However, this integrated model has become more difficult to deliver as a result of COVID-19–related business closures or work-from-home policies.

Adaptive strategies, like the increased use of telehealth services, may not work as successfully with trafficking survivors as they have with other populations. Some trafficked youth have lifestyles that make it difficult to attend scheduled telehealth appointments. Also, their living arrangements may not permit the privacy and confidentiality appropriate for patient care, or they may lack necessary computer equipment for telehealth visits. Language and cultural barriers may add further challenges. Health care entities must think creatively about how to provide the integrated services that trafficked individuals need while working within the constraints of the pandemic. That means not only addressing immediate health needs but also collaborating with other service providers to ensure trafficking survivors have access to safe housing, are not isolated in abusive situations, and have the support they need.⁶

The impact of COVID-19 on trafficking survivors is significant. The virus has disrupted their lives and support networks while increasing financial stress, food insecurity, interpersonal violence, and grief over the loss of loved ones. In response, it is essential that we develop tailored strategies to meet the needs of individuals at risk of or exploited in human trafficking.

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