8-2019

Human Trafficking Education for Pre-Licensure Nursing Students: A Quality Improvement Project

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HUMAN TRAFFICKING EDUCATION FOR PRE-LICENSURE NURSING STUDENTS: A
QUALITY IMPROVEMENT PROJECT

by

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Paper submitted in partial fulfillment of the
requirements for the degree of
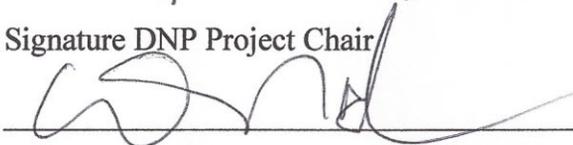
Doctor of Nursing Practice

University of Louisville
School of Nursing

August 7, 2019

_____ 8/7/19
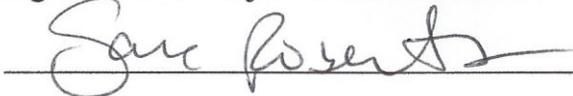Signature DNP Project Chair   Date
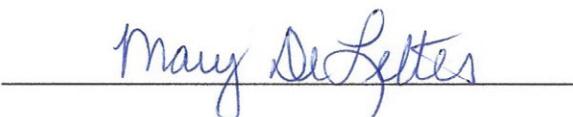
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Abstract

Human trafficking is a form of modern slavery and a violation of human rights (Scanwell, Macdonald, Berger, & Boyer, 2018). An estimated 40.3 million individuals are being trafficked globally at any one time with 14,500 to 17,500 being trafficked within the United States annually (Polaris, 2018; Mason et al., 2016; Richards, 2014). An estimated 87% of human trafficking victims were seen by health care professionals during the time they were being trafficked and went unrecognized. (Lederer & Wetzel, 2014). This project utilized the Plan– Do- Check -Act model for quality improvement. (Agency for Healthcare Research and Quality, n.d.). This project consisted of a 20-minute online education module for pre-licensure nursing students (undergraduate and Master's Entry to Professional Nursing [MEPN]) with a self-created, mock video simulation with pre-and post-test measures. Scored pre- and post-tests were analyzed through SPSS and a paired t-test completed. Pre-test mean for undergraduate participants was 58.38 (N= 15). Post-test mean score was 78.71 (N= 13). Pre-test mean for MEPN was 59.13 (N= 25), the post-test mean was 81.2 (N = 22) There is strong evidence (undergraduate: ($t = 3.92$, $p = 0.002$), MEPN: ($t = 5.303$, $p = 0.000$) the education module increased knowledge level based on scored pre- and post-tests. Based on the reported statistics, the use of educational sessions and training can statistically increase knowledge level and self-perceived ability to identify and refer victims appropriately in this population.

Key words: *human trafficking; human trafficking education; human trafficking training; human trafficking identification; health care; health care professionals; nurses; nursing students; quality improvement*

Human Trafficking Education for Pre-licensure Nursing Students: A Quality Improvement

Project

Human trafficking is a form of modern-day slavery and internationally recognized as a crime

and violation of human rights (Chaffee & English, 2014; Scanwell, Macdonald, Berger, &

Boyer, 2018). It is defined as the transfer, recruitment, receipt, or harboring of persons through

coercion, threats, or use of force for sexual servitude, commercial sex acts, or labor (Eguyd et al.,

2017). Labor and sex trafficking are the fastest growing form of organized crime. Victims have

been identified in all 50 of the United States including Washington DC (Grace et al., 2014). At

any one time, there are an estimated 40.3 million persons being trafficked globally (Polaris,

2018). An estimated 14,500 to 17,500 persons are trafficked into the United States every year

(Richards, 2014). The US Department of Justice (DOJ) estimates the annual profits being close

to $32 billion (Eguyd et al., 2017). Previous research shows traffickers target vulnerable

populations such as the homeless, runaways, refugees, domestic or sexual abuse victims, and

ethnic minorities (Long & Dowdell, 2018).

Victims of human trafficking are subject to controlling behaviors and abuse including

physical (kicked, hit, assaulted), sexual (forced into sexual acts, rape), economic (restricted or no

access to funds or earnings), and psychological (threats, intimidation, humiliation). These can

lead to a variety of health concerns including infectious disease (HIV/AIDS), STIs, malnutrition,

and psychological trauma that may lead to depression, anxiety, post-traumatic stress disorder

(PTSD), and suicide (Mason et al., 2016; Richards, 2014).

An estimated 87% of human trafficking victims sought medical treatment and were seen in a

health care setting during the time they were trafficked and went unrecognized. This lack of

recognition by health care providers makes it unclear how many victims present within the

healthcare setting each year (Eguyd et al., 2017). Given the unique opportunity healthcare workers have to encounter these victims, there is a sense of responsibility for identifying, treating, and referring these victims. While there is mandatory education for health care providers in Kentucky regarding intimate partner violence and child abuse, there is no such requirement for human trafficking education or identification (Grace et al., 2014).

Human trafficking is addressed as a violation of human rights on an international policy level. In 1948, the first document to discuss human rights was the Universal Declaration of Human Rights was adopted in Paris by the United Nations General Assembly. This document prohibits all forms of slavery and declares freedom as a fundamental human right. Human trafficking is a form of modern-day slavery. In 2000, the United Nations Office on Drugs and Crime published the first international legal instrument that defined human trafficking and addressed it as a crime. This Protocol to Prevent, Suppress, and Punish Trafficking in Persons was based on a 3P paradigm of prevention, prosecution, and protection of victims (Mason et al., 2016).

In the United States, the Victims of Trafficking and Violence Protection Act (TVPA) was passed in 2000. This act focused on the same 3P paradigm of the previously discussed international protocol. However, the emphasis was placed on identification of trafficking victims. In 2014, the action plan Coordination, Collaboration, Capacity: Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States was released by the White House. This 5-year federal plan focuses on goals and actions to increase human trafficking identification and promote services available for rescued victims (Mason et al., 2016) There is need for independent organizational policy to promote education and identification of human trafficking victims.

Theoretical Framework

This project utilized the plan, do, check, act (PDCA) model for project design. Improving nursing knowledge and implementing an annual education session were the goals of this project. This cycle focuses on continuous improvement and can be used to implement and carry out change (Agency for Healthcare Research and Quality, n.d.). The four components of this cycle are: the Plan which encompasses the identification of the clinical problem, the relevance to the healthcare community, literature review, providing a project purpose, identifying the target population, setting, conceptual framework, and planning the intervention and development of outcome measures. The Do section pertains to implementation of the human trafficking educational session for 100 undergraduate nursing students and collection of pre-test data. The Check portion refers to collection of data via written post-test. The Act portion refers to alterations in the educational program as needed to promote the sustainability and feasibility of this program as part of university curriculum.

Setting and Organizational Assessment

This project was implemented in a mid-western university within their nursing school. It was made available to undergraduate nursing students within their junior year and Master's Entry to Professional Nursing (MEPN) students.

Purpose

The purpose and aim of this quality improvement project were to implement a sustainable, educational training program pertaining to human trafficking for pre-licensure nursing students to increase awareness and knowledge as measured by a pre-test/post-test design and, in-turn, identify victims and provide resources. Long term aims for this project were for it to become part of university-wide curriculum for nursing students to further identify and refer human trafficking victims within their future careers in the health care field.

Intervention

For this quality improvement project, an online module consisting of a pre-test, 20-minute PowerPoint lecture, and post-test was made available to 140 pre-licensure nursing students. Participation was voluntary. This online session defined human trafficking, discussed the role of health care workers in identifying victims, identified potential red flags of trafficking, discussed victim-focused approaches to communication, and appropriate actions when trafficking is suspected. As an educational supplement, a self-developed, scripted mock simulation was added to the online content. This simulation includes a 21-year-old presenting with pelvic pain and vaginal bleeding and is under five minutes in length. This online simulation encouraged thoughtful communication and assessment skills with potential human trafficking victims. This intervention was self-developed and administered by one registered nurse. Prior to implementation, written approval was obtained through the organization and the Institutional Review Board (IRB) through University of Louisville. Implied consent by participants was obtained through completion of pre-test.

Participants

Participants for this project consisted of undergraduate nursing students within their junior year and Master's Entry to Professional Nursing (MEPN) students within their first year. All participation was voluntary, and consent assumed with completion of the pre-test. Recruitment of participants was through online learning announcements and emails. In all, there were 15 undergraduate and 25 MEPN students who chose to participate.

Data Collection

No personal identifiers were collected for this project. Completed pre/ post-tests were aggregate data cleared of any personal identifiers. All completed pre/post-tests were maintained

on an encrypted and password-protected project laptop. After completion of the project, any printed documents were shredded.

Measurement

This project consisted of a 20-minute online educational session regarding human trafficking identification with data collected from completed pre/post-tests. The 15-item, online, self-developed pre/post-test focused on nursing knowledge regarding human trafficking, red flags for potential trafficking, and confidence in identification of victims and next-steps. As an educational supplement, a scripted mock simulation was added to the online content. Measured pre/post-test items were a variety of true/false, multiple choice, and select all that apply.

Results

Utilizing the online module, the number of participants who accessed the online lecture was recorded. In the undergraduate cohort, 32 students accessed the online education module. For the MEPN cohort, a total of 27 accessed the online education module.

One question from pre/post-tests was based on if students knew who to contact if they suspected a human trafficking situation. For the undergraduate students, 60% (N= 9) didn't know who to call if they suspected human trafficking prior to the education module. Post-test scores indicated 100% (N=13) of participants reported knowing who to call if they suspected human trafficking. For the MEPN cohort, 36% (N= 9) did not know who to call if they suspected human trafficking. Post-test scores indicated 100% (N= 22) knew who to call if they suspected human trafficking after the educational module (Table 1).

Scored pre- and post-tests for the undergraduate and MEPN students were analyzed through SPSS and a paired t-test completed. There were 15 participants from the undergraduate cohort with 2 lost to follow-up for post-tests. The pre-test mean score for undergraduate

participants was 58.38 (N= 15). Post-test mean score was 78.71 (N= 13). There was one outlier

score noted. There is strong evidence that (t = 3.92, p = 0.002) that the education module

increased knowledge based on scored pre- and post-tests among undergraduate participants.

In the MEPN cohort, there were a total of 25 participants with 3 participants lost to follow-up for

the post-test. Pre-test score mean was 59.13 (N= 25), the post-test score mean was 81.2 (N = 22).

There is strong evidence (t = 5.303, p = 0.000) that the education module increased knowledge

level based on scored pre- and post-tests among the MEPN participants (Table 2).

Discussion

Interpretation

Based on the reported statistics, the use of educational sessions and training can

statistically increase knowledge level and self-perceived ability to identify and refer victims

appropriately. In order to break the chain of human trafficking, victim identification needs to

occur. Health care personnel are in a unique situation to come in contact, care, identify, and

potentially rescue human trafficking victims (Scanwell, Macdonald, Berger, & Boyer, 2018).

Limitations

This project was implemented later in the semester for the participants and that may have

impacted the number of participants. This project was also only administered to two classes. It

would have provided further data if it had been administered to multiple classes. A suggestion

would be that this project be worth a grade in future implementations as an effort to increase

participation.

Conclusion

Human trafficking is a quickly- growing form of modern-day slavery and a violation of

human rights. In order to combat the growing numbers, there is a need for increased

identification. An estimated 87% of human trafficking victims were seen by health care personnel during the time they were trafficked without being recognized or rescued (Lederer & Wetzel, 2014). Due to the diverse nature of the health care field, personnel are in a unique situation to encounter victims of trafficking and potentially rescue them. A literature search in this field highlighted the need for education and training among health care workers. In order to meet this goal, an educational project focused on nursing knowledge and ability to identify victims was introduced. Aims for this project were to increase nursing knowledge, confidence, and provide an educational resource that could be implemented for nursing student at the university. This quality improvement project showed a strong correlation between the implemented education module and knowledge levels. In order for this project to be sustainable, all documents and access to the online lecture will be given to the university in the hopes that this education can be implemented as part of the coursework for pre-licensure nursing students. Next steps for human trafficking education would be integration into nursing school curriculum and an increase in research.

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Table 1

Self-Reported Ability to Refer Human Trafficking Victims

Item: "I know who to call if I suspect human trafficking"	Pre-Test: # of "yes" responses	Post-Test: # of "yes" responses
Undergraduate Students	6 (40%)	13 (100%)
MEPN Students	16 (64%)	22 (100%)

Table 2

Summary of Pre-test/ Post-test Results

Group	Pre-test Mean Score	Post-test Mean Score	t-value	p-value
Undergraduate Students	58.38 (N= 15)	78.71 (N=13)	3.92	0.002
MEPN Students	59.13 (N=25)	81.2 (N=22)	5.303	0.000