The American Medical Association has a policy (H-65.966, "Physicians Response to Victims of Human Trafficking") that specifically encourages its member groups to raise awareness about human trafficking. The policy states that “physicians should be aware of the definition of human trafficking and of resources available to help them identify and address the needs of victims” [1]. Although the Code of Medical Ethics does not explicitly address human trafficking, it addresses violent harm to patients more broadly.

Specifically, Opinion 8.10, “Preventing, Identifying and Treating Violence and Abuse,” states that “physicians have an ethical obligation to take appropriate action to avert the harms caused by violence and abuse” [2]. Outlined in this opinion is the physician’s obligation to familiarize him- or herself with strategies for violence and abuse detection, resources available to the patient, and legal requirements for reporting. The opinion further states that physicians should “obtain the patient’s informed consent when reporting is not required by law.” In the case of minors, reporting to an appropriate agency, with or without the consent of the child, is required by law in all 50 states [3]. When the patient is an adult, however, physicians should inform the patient about his or her legal requirements to report any suspected violence or abuse and should obtain the adult patient’s informed consent to do so [2]. Exceptions are appropriate when a physician believes that an adult patient’s refusal to authorize reporting is coerced. As always, physicians should protect adult patient privacy when reporting by disclosing only the minimum necessary information. This information might vary depending on what applicable laws or policies are valid where the physician is practicing. (See also Opinion 3.2.1, “Confidentiality” [4].)

Opinion 2.2.2, “Confidential Health Care for Minors,” has limited applicability to human trafficking as the framework of the opinion assumes that a lawful parent or guardian is involved in the life of the child. However, some guidance may be useful to physicians who are caring for minor patients whom they believe might be victims of trafficking. The opinion states that “In some jurisdictions, the law permits minors … to request and receive confidential care to prevent, diagnose, or treat sexually transmitted disease, substance use disorders, or mental illness.” It also states that “Physicians should be aware that states provide mechanisms for unemancipated minors to receive care without parental involvement under conditions that vary from state to state” [5].
Physicians in these jurisdictions should be aware of applicable laws and possible exceptions to them.

In all circumstances, physicians should follow state, federal, and institutional reporting guidelines when trafficking or any other violence or abuse is suspected.

References

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ISSN 2376-6980