

Human Trafficking

**An Interview with Santhosh K. Paulus, MD, Senior Program Director,
Human Trafficking, Education, Advocacy, Response and Training Program, Northwell Health**

EDITORS' NOTE *Santhosh Paulus also serves as Site Director for Graduate Medical Education for the Family Medicine Residency Program and Hospitalist at Huntington Hospital, Assistant Professor at the Zucker School of Medicine at Hofstra/Northwell, and is the Founder and President of Cycling For Change (c4c), a not-for-profit that raises funds and awareness to fight human trafficking. During his 20 years at Northwell Health, Dr. Paulus has held various leadership positions in the Department of Family Medicine at Glen Cove Hospital, at Huntington Hospital, and for Northwell Health including serving as Chief Resident and Associate Program Director in the Glen Cove Family Medicine Residency Program, serving a term on the Glen Cove Hospital Medical Board, and creating and leading the Human Trafficking Response Program Task Force which evolved into a System initiative as the Northwell Health Human Trafficking Program. During the five years in his current role, Dr. Paulus has partnered and collaborated with local, national and international leaders in the anti-trafficking community to help shape and position the Human Trafficking Education, Advocacy, Response and Training Program as a resource and source of influence to an interdisciplinary audience. Dr. Paulus also serves on the Board of Directors for ECPAT-USA, a nonprofit that works on the issue of commercial sexual exploitation of children, and is a member of the Suffolk County Anti-Trafficking Initiative (SCATI). Dr. Paulus received his undergraduate degree from the University of Miami and medical degree from Ross University School of Medicine in the Commonwealth of Dominica, West Indies. He completed his Family Medicine Residency Training at Glen Cove Hospital.*



Dr. Santhosh K. Paulus

Will you provide an overview of your role and areas of focus?

I am the Senior Program Director for the Human Trafficking, Education, Advocacy, Response and Training Program at Northwell Health. Our areas of focus are in providing care and in education. We provide care to those who have been trafficked or are at risk of being trafficked and we offer this both inpatient and outpatient, in the emergency department and in urgent care, as well as longitudinally through

both behavioral services and medical care. Education is provided both within healthcare and in the community.

My areas of focus include expanding patient access to behavioral health services, both in the inpatient and outpatient setting, increasing the availability for dermatologic services for patients in need of tattoo removal services, and also developing our survivor job placement and mentorship opportunities.

The long-term plans include continuation and expansion of our regional and international symposiums being held, growing our school education programs, helping to create county-wide task force members and helping to develop these, increasing education to law enforcement and high-victim industries, and partnering with local community-based organizations to create funding opportunities and provide safe housing and work towards becoming a medical safe haven for victims of human trafficking and those at risk.

What has made the issue of human trafficking such a priority for you?

There are so many disparities that we see in society where this leads to inequity and injustice and being the father of four girls has put all this in perspective for me. I wanted to address these barriers in the hopes that we can get to a place where we value others and have inclusive policies. In healthcare, I feel we have a unique opportunity to help bridge many of these gaps in coordinating our efforts with law enforcement, the criminal justice system, and in working with the public to truly address this as a public health issue.

Human trafficking is a social justice and human rights issue of our generation. We need a coordinated response to this issue across all disciplines to give voice to those who are exploited physically and financially. When trafficking victims come through the healthcare system, but we don't identify them, it's a big missed opportunity.

What was your vision for creating the Huntington Hospital Human Trafficking Response Program taskforce and how do you define its mission?

The human trafficking taskforce started as a group of a dozen Huntington Hospital employees from several departments who have

been trained to identify and assist human trafficking victims, provide healthcare to survivors, and connect them to community organizations. The group trained the Huntington Hospital Emergency Department and Dolan Family Health Center staff in the initial training. We started this training initially provided by Restore NYC, an anti-trafficking group based in Manhattan, and later we expanded on this foundation and are in the process of rolling this out across Northwell.

When I first started putting together this group, there were staff members who are now part of the taskforce who thought that human trafficking is not an issue in the Huntington area, but after they received this training, we were able to identify five human trafficking victims who came to the hospital. Being able to identify people who are in these situations and having the tools and resources to help them will have a big impact on Suffolk County where the labor trafficking rates are more than twice the national average.

The goal for Northwell Health is to lead the way in healthcare by training its residents to identify victims and those at risk of human trafficking and provide longitudinal care for survivors that is trauma-informed, victim centered, and survivor led. Residents upon graduation will take this training and in turn educate patients and other physicians across the country and around the world, thus making an impact on society as a whole.

How do you measure success for the program?

We tend to measure success by looking at numbers. We have had 21 assessments completed with 12 individuals screening positive and 9 accepting resources. These numbers are the tip of the iceberg and our real success comes in delivering care that is trauma informed, meaning that it is non-judgmental and instead of asking patients what is wrong with them when caring for them, we ask, "What happened to you?"

An example is a patient encounter where nurses on Labor & Delivery suspected a patient was being trafficked, but did not disclose and declined resources. It was difficult for them to allow her to be discharged without getting connected, but they allowed her the freedom to have that choice. Several weeks later, the patient returned seeking assistance and stating she was in a trafficking situation. The fact that she came back and felt safe enough to voice her concerns and seek assistance is a measure of success. ●