



Appendix A

Literature Matrix

Article	Adelung, M. R. (2020). Human trafficking: The efficacy of a mandatory training on the competency of emergency department providers. https://sigma.nursingrepository5.org/bitstream/handle/10755/21211/Adelung_Abstract.pdf
Study Purpose	To find out if health care staff in an emergency department who have participated in an education intervention have improved awareness and referrals for trafficked person encounters.
Sample Characteristics	N = 19, nurses, physicians, PAs, SW, NP, CAN, security. Rural ER in Virginia Majority nurses and CNA's
Method	Used the HEAL Trafficking and Hope for Justice Protocol Toolkit (An EBP tool) with a pretest, In person seminar
Study Results	Improvements in awareness, recognition of SxS, interviewing, intervention by median 1 point on the Likert Scale
Level of Evidence	Level 6
Limitations	Small sample, 1 setting
Would Evidence Support a Practice Change	Yes this study shows that by utilizing an EBP education tool, healthcare providers can improve knowledge on identification and intervention of HTV

Article	Berishaj, K., Buch, C., & Glembocki, M. M. (2019). The impact of an educational intervention on the knowledge and beliefs of registered nurses regarding human trafficking. <i>The Journal of Continuing Education in Nursing</i> , 50(6), 269-274.
Study Purpose	The purpose of this study: to determine the effect of an educational intervention on nurses self-reported knowledge and beliefs regarding human trafficking
Sample Characteristics	93 nurses who attended a human trafficking educational conference held in the Midwest
Method	A pilot study of quasi-experimental nature with pre and post-test design determining if education given during a conference was effective in educating nurses on human trafficking Intervention: 4- hour conference entitled, "Human Trafficking 101: A Practical Conference on Understanding the Issues and Responding to the Epidemic." PowerPoints used for education along with lecture style. 19 question pre- and post-surveys with a Likert scale response
Study Results	Education provided via a conference format was effective in increasing the nurses' knowledge and beliefs of HT. The self-reported improvement showed increased understanding about what HT, the vulnerable populations who are at risk, laws by state, knowledge of available resources, and increased belief that they could identify and intervene in potential HT victims. Recommendations for practice: -Standardized education and protocols for identifying and intervening in potential HT cases was given. Detailed workflow discussed.
Level of Evidence	Level 4: quasi-experimental cohort study with convenience sampling
Limitations	Limitations -Small sample size. Only one male participant. Knowledge was shown to increase but no way to tell if future behavior will.
Would Evidence	Yes it shows that education does improve knowledge of HT so if education is the goal it would help in addressing the knowledge gap.

Article	Chisolm-Straker, M., Baldwin, S., Gaïgbé-Togbé, B., Ndukwe, N., Johnson, P. N., & Richardson, L. D. (2020). Health care and human trafficking: We are seeing the unseen. <i>Journal of Health Care for the Poor and Underserved</i> , 27(3), 1220–1233.
Study Purpose	The purpose of the study was “to build the evidence base around human trafficking (HT) and health in the U.S. by employing a quantitative approach to exploring the notion that health care providers encounter this population” as well as to discuss what health care settings victims are most likely to be seen
Sample Characteristics	173 survivors of U.S. human trafficking. There were no restrictions on gender or age.
Method	Anonymous retrospective study. Utilized a survey in English, Haitian Creole, and Spanish in paper and online format. Over 24 organizations were contacted to participate in recruiting survivors and 9 agreed. These 9 organizations sent paper surveys while the online survey was placed on their websites, advertisements, blogs, and Facebook. No record of survivors who were approached but declined were kept. Participants were chosen if they answered affirmatively to the question, “Are you a survivor of slavery, or were you made to work or made to do sexual acts?” (p. 1222). Questionnaire content included basic demographics
Study Results	Out of the 173 participant surveys: 75 surveys were done on paper and mailed in; 10 were completed in Spanish. More females than males were citizens of the U.S. and reported being trafficked as minors (68% vs 18%; 44% vs 10%), mean age for being trafficked: US born 16.5 years, Non-US born- 23.3 years, 117 (or 68%) participants reported being seen “by a health care provider while being trafficked.” 105 of the participants reported being asked at least one screening question that has been nationally recommended by experts to be asked to identify potential victims But 56% reported that after being recognized as potentially trafficked, they were not offered interventions.
Level of Evidence	Level 4 retrospective cohort study
Limitations	Had instances where webpages for online surveys were not working correctly. If they were poorly literate or illiterate and did not have an advocate to help them with the survey, they would not be able to give their responses which also affects generalizability. Only Spanish and English-speaking surveys were received which limits the generalizability to others who speak different languages
Would Evidence	This provides a solid foundation for a change in practice because

Article	Chisolm-Straker, M., Richardson, L. D., & Cossio, T. (2012). Combating slavery in the 21st century: The role of emergency medicine. <i>Journal of Health Care for the Poor and Underserved</i> , 23(3), 980–987.
Study Purpose	A pilot training intervention for emergency department providers on human trafficking, how to identify it, and how to treat these patients before and after education workshop.
Sample Characteristics	Sample included 104 staff from the emergency department. Professions involved emergency medicine residents, ED attending, ED nurses, and hospital social workers. U.S. northern states academic ED.
Method	Retrospective pre/post design. This is a cross-sectional study with two parts. The first has a random sample of health care providers in four institutions fill out a simple questionnaire. The second has an intervention with a 20- minute didactic training session. The pre and post questionnaire provided data for analysis of the intervention.

Study Results	Responses to knowledge of what human trafficking was equaled 79.4%, only 6.1% affirmed ever encountering a human trafficking victim, almost all of the subjects reported never receiving information on the clinical picture of a HT victim, and 95% reported never receiving instruction on treating a HT victim. 26.7% also reported HT does affect their population, 7.2% reported that it does not, and 59.4% reported unsure
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Article	Chisolm-Straker, M., Singer, E., Rothman, E. F., Clesca, C., Strong, D., Loo, G. T., Sze, J. J., d'Etienne, J. P., Alanis, N., & Richardson, L. D. (2020). Building RAFT: Trafficking screening tool derivation and validation methods. <i>Academic Emergency Medicine</i> , 27(4), 297–304.
Study Purpose	To explain Rapid Appraisal for Trafficking design and procedures and describe how to develop a screening tool for use in the ED
Sample Characteristics	N = 4,127 ER patients in 5 NY City hospitals
Method	Randomized Prospective Study Pre/Post Design utilizing the RAFT screening tool for adults.
Study Results	36/4,127 patients identified as possible HTV and 12 of those were identified as actual HTV.
Level of Evidence	Level 2
Limitations	Internal bias could be present but actions were taken to control
Would Evidence Support a Practice Change	Yes. This validated screening tool is one of the only tools in existence that has been validated for adults.

Article	Cole, M. A., Daniel, M., Chisolm-Straker, M., Macias-Konstantopoulos, W., Alter, H., & Stoklosa, H. (2018). A theory-based didactic offering physicians a method for learning and teaching others about human trafficking. <i>AEM Education and Training</i> , 2(Suppl 1): S25-S30.
Study Purpose	To train ED staff to both use and teach knowledge and skills necessary to identify and care for trafficked persons in the ED
Sample Characteristics	19 participants consisting of both attending (28%) and resident (72%) emergency physicians attending the 2018 Society for Academic Emergency Medicine Annual Meeting (SAEM) in Indianapolis, Indiana
Method	Retrospective pre-/post-survey study. 50-minute interactive workshop was developed and implemented at the 2018 SAEM - Intervention composed of a 10-minute introduction, a brief overview, and several interactive case-based sessions with HT patients - Participants rated their abilities before and after session on a 4-point Likert scale
Study Results	Significant improvements in self-reported confidence in ability to 1. Describe different types of HT 2. Identify high risk signs of trafficking 3. Employ interactive learning methods in the clinical environment to instruct others 4. Describe an effective approach for assessment and management of HT patients
Level of Melnyk	Level 3
Limitations	None noted
Would Evidence Support a Practice change	Yes, showed that this type of education per and post can be used to improved knowledge of HT.

Article	Dell, N. A., Maynard, B. R., Born, K. R., Wagner, E., Atkins, B., & House, W. (2019). Helping survivors of human trafficking: A systematic review of exit and post exit interventions. <i>Trauma, Violence, & Abuse</i> , 20(2), 183–196. https://doi.org/10.1177/1524838017692553
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Study Purpose	To synthesize the evidence of exit and post exit intervention programs for survivors of human trafficking to inform practice and research
Sample Characteristics	155 Females and 6 male survivors of HT from 4 countries
Method	Systematic Review using a variety of research
Study Results	Not an EBP model consistently used for the interventions of m/b/s to help with HTV wide array of needs
Level of Evidence	Level 3
Limitations	most of the included studies did not use a comparison group and were assessed as high risk of bias, thus we cannot draw causal inferences of the effects of most of the included interventions
Would Evidence Support a Practice Change	Yes it gives good data for trauma informed care.

Article	Donahue, S., Schwien, M., & Lavalley, D. (2019). Educating emergency department staff on the identification and treatment of human trafficking victims. <i>Journal of Emergency Nursing</i> , 45(1), 16–23. https://doi.org/10.1016/j.jen2018.03.021
Study Purpose	The purpose of this study was to “educate ED personnel on the issue of human trafficking, to increase staff confidence in recognizing and treating possible human trafficking victims, and to develop and implement a screening tool with guidelines of care for anyone who is identified as a possible victim.”
Sample Characteristics	ER community hospital in suburban Pennsylvania (annual census 170,000) Pre survey n = 75; post n = 56 Nurses, physicians, NP’s, PA’s, registration, techs, majority was nurses w/>2 years’ experience
Method	This study utilized pre-and post-surveys with a Likert scale after an educational intervention and implementation of a screening tool. Education was given online with a PowerPoint presentation, two case studies, and guidelines to inform identifying and managing the care of a human trafficking victim. Participants began by learning facts about HT from the PowerPoint presentation, then moved to a flowchart for protocols related to identification tools. They practiced with 2 case studies and called the National hotline for practice.
Study Results	Pre: 89% had not received previous HT training and Pre: <50% had comprehensive understanding of HT; post: 93%. The average confidence level in identifying a victim of human trafficking increased from 4/10 to 7/10; average confidence in understanding treatment of victims from 4/10 to 8/10 96% of subjects reported that they felt the education would be helpful for their job. Having an assessment tool with questions that are used in all patient assessments increased confidence level of staff.
Level of Evidence	Level 4 Cohort Study
Limitations	75 employees participated in the pre-test with only 56 employees taking the postsurvey causing a 25% attrition rate. Subject to reporting bias by the staff. Post- surveys subject to participant bias and could be skewed rating of their actual ability.
Would Evidence Support a Practice change	Yes, it shows that this form of education is impactful

Article	Egyud, A., Stephens, K., Swanson-Bierman, B., Dicuccio, M., & Whiteman, K. (2017). Implementation of human trafficking education and treatment algorithm in the emergency department. <i>Journal of Emergency Nursing</i> , 43(6), 526–531. https://doi.org/10.1016/j.jen.2017.01.008
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Study Purpose	The purpose of the study was to “implement a screening system and treatment algorithm in the emergency department to improve the identification and rescue of victims of human trafficking.”
Sample Characteristics	Conducted at a level 2 trauma center ED in Pennsylvania located near major highways. Participants were the medical staff, registration, ancillary staff, and security guards for the ED with 102 staff members completing a post-education survey (not the entire number who received the education)
Method	Nonexperimental descriptive study utilizing post education surveys of increased competency level after educational intervention was implemented after a gap analysis was completed showing a need an identification and treatment algorithm were used for the study which assessed (1) medical red flags created by a risk-assessment tool embedded in the electronic health record and (2) a silent notification process. Data was collected on the outcomes of the implemented treatment algorithm, but the main outcome was the educational result.
Study Results	Created an interprofessional team of ED nurses, administration, security, radiology, social services, patient registration, physicians, and community experts to discover the gaps in evidence-based practice versus their current practice. Mandatory education was developed and completed by ED staff including nursing, physicians, laboratory, social services, radiology, registration, security, and transport. Live training through meetings and huddles along with an informational binder was implemented. Post: 97% committed to changing practice Post: 74% stated education improved confidence and competence EMR evaluated >5 mos. identified 38 potential HTV
Level of Evidence	Level 6 Descriptive study
Limitations	The screening tools were useful in identifying potential victims of human trafficking. However, it was not possible to determine whether all victims who presented to the emergency department screened positive and were offered rescue.
Would Evidence Support a Practice change	Yes it shows that education across professions is a viable way to introduce education.

Article	Ford. S. (2017). Sexual trafficking: Developing a teaching strategy for emergency department registered nurses [Bachelor’s thesis, The University of Maine]. DigitalCommons@UMaine. https://digitalcommons.library.umaine.edu/honors/299
Study Purpose	To evaluate the role of the nurse in sexual trafficking, this pilot study aimed to assess the baseline knowledge level of emergency department (ED) registered nurses at Eastern Maine Medical Center about sexual trafficking and their ability to synthesize and learn from education provided on the topic.
Sample Characteristics Method	N = 19 nurses in the ER Pretest of baseline knowledge 5-minute huddle of key stats of HT and HTV signs/symptoms discussed Posttest of knowledge (same as pretest)
Study Results	Descriptive analysis was analyzed on demographic data and pre/posttest data. Registered nurses’ knowledge on sexual trafficking was compared based on their results from the pre and post tests administered. Using the Wilcoxon signed-ranks test, a significant improvement was found. ($z = -3.630, p < .001$)
Level of Evidence	Level 5
Limitations	Small sample/one location
Would Evidence Support a Practice Change	Yes. Demonstrates the huddle is a good avenue for improving knowledge on HT/HTV right before nurses start their shift. Could be used to generate more research on actual identification of HTV after education happens.

Article	Fraley, H. E., Aronowitz, T., & Stoklosa, H. M. (2020). Systematic review of human trafficking educational interventions for health care providers. <i>Western Journal of Nursing Research</i> , 42(2), 131–142. https://doi.org/10.1177/0193945919837366
Study Purpose	To study and disseminate provider knowledge base and attitudes towards those being trafficked
Sample Characteristics	Providers were from a variety of practice areas 168 hospital practices, 241 ER, 230 law enforcement, 196 NP and 178 HCPs
Method	Systematic Review of several types of studies
Study Results	A large majority of providers have low awareness and negative attitudes toward those being trafficked. Multiphase education is needed
Level of Evidence	Level 5
Limitations	Limitations of nonresponse bias included low overall survey response rates and low numbers of completion of both pretest and posttest surveys
Would Evidence Support a Practice change	Yes, shows education widely needed across professions

Article	Golberg et al. (2017). Domestic minor sex trafficking patients: A retroactive analysis of medical presentation. <i>Journal of Pediatric and Adolescent Gynecology</i> , 30(1): 109-115
Study Purpose	To describe the clinical characteristics of patients referred for domestic minor sex trafficking to improve identification and intervention
Sample Characteristics	Children's hospital division of child abuse 41 children/teens <18
Method	Retrospective cohort study
Study Results	These children had frequent contact with medical professionals and were seen within the last year 81%, All 41 had identified family dysfunction, 57% sexual abuse 60% parental substance abuse, 32% had STD's, 20% suicidal, 88% substance abuse, 63% had run away, 42% lived in group homes and 68% lived at home
Level of Evidence	Level 4
Limitations	The sample size of 41 patients limits a broader, more comprehensive depiction of this diverse patient population. In addition, there is an under-representation of male DMST victims. This study included patients who presented to medical providers in a single New England hospital; therefore, generalizations derived from the data likely cannot be applied to all medical settings in the United States.
Would Evidence Support a Practice change	Yes, shows how children/by default adults are falling through the cracks and gives insight into how to bridge that gap.

Article	Grace, A. M., Lippert, S., Collins, K., Pineda, N., Tolani, A., Walker, R., Jeong, M., Trounce, M. B., Graham Lamberts, C., Bersamin, M., Martinez, J., Dotzler, J., Vanek, J., Storf-Isner, A., Chamberlain, L. J., & Horwitz, S. M. (2014). Educating health care professionals on human trafficking. <i>Pediatric Emergency Care</i> , 30(12), 856–861. https://doi.org/10.1097/PEC.000000000000287
Study Purpose	The purpose of the study was to find out whether education of ER staff of HT victims/knowledge of treatments and resources will help manage cases of HT.

Sample Characteristics	20 largest San Francisco Bay area EDs randomized into interventions (10 of the EDs) or delayed intervention comparison groups (10 EDs) who had standardized educational presentation. 258 study participants from 14 EDs; 141 from 8 EDs in the intervention group and 117 from 7 EDs in the delayed intervention comparison group. Included physicians, nurses, and social workers.
Method	Group randomized controlled trial Anonymous survey was used to assess knowledge and changes in knowledge related to HT victims, treatment, and attitude. Tested on 77 random subjects before it was revised. Finalized survey was given as a pre and posttest design for educational intervention with data collected
Study Results	Intervention group had a higher increased in self-rated knowledge more than in the control group. Increased knowledge of who to contact in intervention group from 24% to 100%. Delayed comparison control group increased from 20% to 35%. The intervention group doubled their suspicions of HT victims based on learned identification tools. Delayed intervention group did not improve but stayed at 10%. Study also looked to see if a shorter (25- minute) versus longer (60-minute) educational intervention affected results. Was found to not affect results
Level of Evidence	Level 2 randomized control trial Limitations of nonresponse bias included low overall survey response rates and low numbers of completion of both pretest and posttest surveys
Limitations	Limitations –Administrators of the hospitals knew what hospitals belonged to each group, so they were subject to reporting bias with pre- and post-tests. The IRB would not allow identifying information to be gathered on the delayed intervention group.
Would Evidence Support a Practice Change	Yes as it shows learning occurs from education related to HT, HTV treatment.

Article	Greiner-Weinstein, G., Klopp, A., & Bacidore, V. (2021, March 19). Implementing an interprofessional human trafficking program in the emergency department: An evidence-based quality improvement initiative [Asynchronous poster session]. Loyola Palmer Research Symposium, Chicago, IL, United States. https://ecommons.luc.edu/loyola_palmerresearchsymposium/2021/Asynchronous_Posters/7/
Study Purpose	To develop, deliver and evaluate an interprofessional education program on HT/ screening, intervention and referral. Create a protocol in the ER.
Sample Characteristics Method	N = 37 (34 nurses/3 social workers) Pre post test: A paired sample t-test was done Program evaluation EMR documentation evaluated by red flag indicators Analysis validity index average used on EMR.
Study Results	34 nurses and 3 social workers completed the module. Pre and post scores improved by 16.47 points to show statistical significance of $p < 0.001$.
Level of Evidence	Level 1
Limitations	None noted
Would Evidence Support a Practice Change	Yes, this QI initiative proved the implementation of education/EHR flagging increased provider knowledge/usage of tools and identification

Article	Lamb-Susca, L., & Clements, P. T. (2018). Intersection of human trafficking and the emergency department. <i>Journal of Emergency Nursing</i> , 44(6), 563–569. https://doi.org/10.1016/j.jen.2018.06.001
Study Purpose	The purpose of the article is to examine implications that human trafficking has for ED nurses and the health care industry at large.
Sample Characteristics	The subjects are sex and labor trafficking victims globally and in the US.

Method	Meta-synthesis of scholarly literature on human trafficking
Study Results	Discusses Trafficker behaviors in obtaining persons to traffic so providers can educate parents/patients. Pregnancy in the trafficked increased their interactions with providers at various levels. Use interpreters and see patient alone. In depth signs and symptoms of those being trafficked. As of 2018, there were no validated screening tools for straightforward identification of trafficking victims. A major role of ED nurses is to provide preventative care and teaching to human trafficking victims as they may be the only healthcare they see.
Level of Evidence	Level 5 meta- synthesis of descriptive or qualitative studies
Limitations	No limitations were discussed
Would Evidence Support a Practice Change	No It could be used to build educational content.

Article	Lawrence, M., & Bauer, P. (2020). Knowledge base of nurses before and after a human trafficking continuing education course. <i>The Journal of Continuing Education in Nursing</i> , 51(7), 316–321.
Study Purpose	The purpose of the study is to discuss the need to educate nurses on human trafficking identification and to present the findings of an educational intervention
Sample Characteristics	Nurses who work within a healthcare facility with a focus on nurses working in EDs, urgent care, OB/GYN, and primary care
Method	Continuing education web course with outcomes of the nurse will demonstrate increased knowledge scores of assessments of signs and symptoms of trafficked victims on a post course survey, demonstrate increased knowledge scores of the incidence of human trafficking and laws in their own state on a post course survey, report contacting appropriate hospital supervisors when a patient was suspected of being trafficked in the 3- 6 month post course survey, and report using hotlines for reporting human trafficking at the National Human Trafficking Resource Center in the 3- 6 month post course survey and finally report using appropriate referral centers for legal and social services for trafficked victims in the 3-6 month post course survey.
Study Results	Course taught participants background of human trafficking, information about victims, traffickers and venues, state laws, trafficking laws, and what to do when talking to and assessing a victim. Only 15% of the participants reported that they were “extremely or very comfortable” in their knowledge of assessing a potential trafficking victim prior to taking the course but increased to 65% post course. 11% of participants responded that they were “extremely or very comfortable knowing what to say” when talking to a potential victim before the course and increased to 60% post course 65% did not know who they should contact for victims before the course and increased to 76% after the course. All three pre-test indicators improved after education. The researchers did not provide exact numbers for all three but did put it into a graph. Two out of 24 participants reported identifying and reporting a trafficking victim after within 3- 6 months following the education.
Level of Evidence	Level 6 Descriptive Study
Limitations	No limitations discussed.
Would Evidence Support a Practice change	Yes, showed how even small doses of education can improve knowledge and patient identification

Article	Mumma, B. E., Scofield, M. E., Mendoza, L. P., Toofan, Y., Youngyunpipatkul, J., & Hernandez, B. (2017). Screening for Victims of Sex Trafficking in the Emergency Department: A Pilot Program. <i>The western journal of emergency medicine</i> , 18(4), 616–620. https://doi.org/10.5811/westjem.2017.2.31924
Study Purpose	To determine the feasibility of using a screening survey to identify adult victims of HT in the ED and to determine the most effective question(s) for identifying victims of HT
Sample Characteristics	143 patients administered in 5–10 minutes - Sensitivity of the screening survey was better than physician concern - Tested on a sample of medically stable female ED patients, aged 18-40 year
Method	Observational cohort study -14-question screening survey based on published recommendations - A positive survey screen was defined as answering “yes” to any screening question(s).
Study Results	Specificity of physician concern was slightly better than the screening survey Screening questions were derived from tools designed for other settings and had not been validated in an ED setting 95% confidentiality
Level of Melnyk	Level 4
Limitations	Administered by both nurses and docs in triage who have different triage methods
Would Evidence Support a Practice change	Once of the few screening tools available

Article	Marcinkowski, B., Caggiula, A., Tran, B. N., Tran, Q. K., & Pourmand, A. (2022). Sex trafficking screening and intervention in the emergency department: A scoping review. <i>Journal of the American College of Emergency Physicians open</i> , 3(1), e12638. https://doi.org/10.1002/emp2.12638
Study Purpose	To identify gaps in knowledge and shortcomings in provider knowledge and understanding of HT/HT treatment to assist this vulnerable population
Sample Characteristics	23 Emergency departments of various sizes and in multiple states/locations performing different education methods.
Method	Review and meta-analysis of 23 studies that focused on adult human sex trafficking identification, screening, interventions, or education in the ED. Eight (35%) of the publications used a survey model to quantitatively assess outcomes. Many of the other publications were descriptive or qualitative in nature, with some using a structured interview approach. No validated or consistent screening tool exists for the identification of possible adult trafficked patients in the ED. Educational interventions and screening tools can improve health care practitioners' confidence, victim identification, and knowledge of “next steps” for victims. PRISMA format utilized.
Study Results	Most ED clinicians and staff have little or no formal training in HTV identification, support, institutional protocols, or available local resources. The review shows a paucity of formal training programs, validated adult screening tools, and standardized institutional protocols to aid in the care of HTVs in the ED
Level of Melnyk	Level 1
Limitations	None noted
Would Evidence Support a Practice change	Supports the research that providers lack education in HT and HTV support and that there is scarce evidentiary tools/algorithms/policies to aid providers in giving safe care.

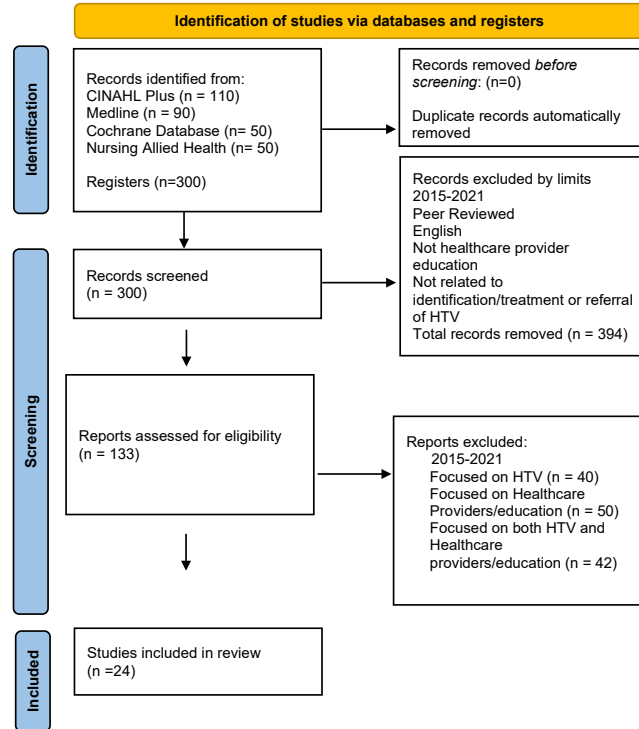
Article	Normandin, P. A. (2017). Child human trafficking: See, pull, cut the threads of abuse. <i>Journal of Emergency Nursing</i> , 43(6), 588–590. https://doi.org/10.1016/j.jen.2017.07.014
Study Purpose	To establish if an online training could increase confidence in HT identification and referral information.
Sample Characteristics	n=18 nurses (majority with >20 yrs. Experience). Urban pediatric trauma level 1 center in Boston
Method	Online training regarding HT and identification and referrals
Study Results	Pre showed 88.9% of pop had no previous HT training Pre mean score of 14.06 post score 28.16 (p<0.001).
Level of Evidence	Level 5
Limitations	Low sample number and one location
Would Evidence Support a Practice change	Yes for ongoing CEU training on HT identification and referrals.

Article	Scannell, M., & Conso, J. (2020). Using sexual assault training to improve human trafficking education. <i>Nursing</i> , 50(5), 15–17. https://doi.org/10.1097/01.NURSE.0000657028.81053.2f .
Study Purpose	To improve HT education among emergency staff by using a sexual assault simulation course and to find out if the course could help ED nurses identify victims of HT, especially those who are being trafficked for sex exploitation
Sample Characteristics	36 ED nurses of which 28 completed the posttest
Method	Retrospective pre-/post-survey study The Sexual Assault Simulation Course for Healthcare Professionals (SASH), was comprised of 4 components: didactics, skills stations, simulated experience with a standard actor, and debriefing
Study Results	The pretest group scored a mean average of 64.27 The posttest group scored 81.60 (P = 0.00023), demonstrating a significant increase in baseline knowledge
Level of Melnyk	Level 3
Limitations	No limitations noted
Would Evidence Support a Practice change	Yes definitely to show effective use of this type of education via simulation in university teaching as well as new hire/ED job skill maintenance etc.

Article	Wright, N., Jordan, M., & Lazzarino, R. (2021). Interventions to support the mental health of survivors of modern slavery and human trafficking: A systematic review. <i>International Journal of Social Psychiatry</i> . https://doi.org/10.1177/00207640211039245
Study Purpose	To identify mental health needs and interventions for those persons rescued from human trafficking
Sample Characteristics	9 studies comprised of 532 people of whom 59.9% were female and the mean age is 18. Studies took place in African populations of DRC, Uganda, Liberia, U.S., UK and Haiti
Method	A systematic Review
Study Results	When treating HTV too much emphasis is placed on PTSD and not enough holistic care, personalized care, and lived experience (Trauma informed care).
Level of Evidence	Level 2
Limitations	None noted
Would Evidence Support a Practice change	Yes, brings trauma informed care to the forefront of education

Appendix B

PRISM Flow DIAGRAM



From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 2021;372:n71. doi: 10.1136/bmj.n71

For more information, visit: <http://www.prisma-statement.org/>

Appendix C

Collaborative Institutional Training Initiative Training Certificate



Completion Date 10-Feb-2022

Expiration Date 09-Feb-2026

Record ID 47208521

This is to certify that:

Bobbi McCarthy

Has completed the following CITI Program course:

Not valid for renewal of certification through CME.

Biomedical Responsible Conduct of Research

(Curriculum Group)

Biomedical Responsible Conduct of Research

(Course Learner Group)

1 - RCR

(Stage)

Under requirements set by:

Liberty University

CITI
Collaborative Institutional Training Initiative

Verify at www.citiprogram.org/verify/?wed85286b-b1ec-480f-9a27-e0820c250a1b-47208521

Appendix D

Institutional Review Board Letter

LIBERTY UNIVERSITY

INSTITUTIONAL REVIEW BOARD

March 22, 2022

Bobbi McCarthy
Cynthia Goodrich

Re: IRB Application - IRB-FY21-22-820 Educating Healthcare providers on Human Trafficking for Improved Knowledge, Identification and Referrals for Those Being Trafficked : An Integrative Review

Dear Bobbi McCarthy and Cynthia Goodrich,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study does not classify as human subjects research. This means you may begin your project with the data safeguarding methods mentioned in your IRB application.

Decision: No Human Subjects Research

Explanation: Your study is not considered human subjects research for the following reason:

(1) It will not involve the collection of identifiable, private information from or about living individuals (45 CFR 46.102).

Please note that this decision only applies to your current application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued non-human subjects research status. You may report these changes by completing a modification submission through your Cayuse IRB account.

Also, although you are welcome to use our recruitment and consent templates, you are not required to do so. **If you choose to use our documents, please replace the word *research* with the word *project* throughout both documents.**

If you have any questions about this determination or need assistance in determining whether possible modifications to your protocol would change your application's status, please email us at irb@liberty.edu.

Sincerely,

G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
Research Ethics Office

Reply
Forward