Discussion Question

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[Date]

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Human trafficking is a disturbing problem for discussion in society and also for health providers like nurses to discuss. In the modern age, the new name for the violation of basic human rights is Human Trafficking. It is the modern type of slavery in which clearly violates the civil and labour rights. It has been delimited for less than a period of 10 years; however, the conceptions are unwell assumed and often attached with a misinterpretation of the definition of human trafficking, misperception of human trafficking by anti-migration sentimentalities, and additional present and distressing border problems.

The role of nurses and healthcare provider is critical and important in the provision of human trafficking sufferers as the nurses, and health care providers are few of the professionals possible to encounter a trafficking sufferer, still in imprisonment. The nurses should observe their patients closely who are involved in this crime or other criminalities which might be known as the child protection system. Indicators that must provoke doubt highlight conduct described to individuals. The nurse must be able to respond to all the emotional and physical requirements of the victims or patients. It is outside the scope of the distinct provider conduct, as the patient might be in need of long-term care and treatment with a professional team of nurses or health care providers. The nurse or health care provider must provide support and care for any immediate requirements which might include cure and treatment of somatic trauma, infections that might be transmitted through infections, pregnancy diagnosis, and assessing for miserable ideation.

The nurse must build trust with its patient first in order to provide him or her better treatment. The trust-building with the sufferers of human trafficking might be a slow procedure. It requires a lot of determination and patience. Enchanting the time to shape relationship is dangerous as many class, power, racial differences and cultural differences exist previous to the pledge. The mechanism of self-protective might results in doubt in authority’s body and in turn to self-protective responses. In many cultures, discussion and debate on topics like sex or human trafficking might be a taboo subject. It is the duty of nurses that they should have enough modesty to acknowledge and accept that there might be enough knowledge about the culture of the victim, they do not comprehend, also that the influence of these taboos might be noteworthy in that culture (Human Trafficking eLearning, 2019).

Trust might be built by simple actions which might include open-ended queries, certain interruptions and talk or debate in privacy. The nurse's responses or messages in private communication with a patient might focus on getting healthy, focus on security. The welfare of the victim must be the highest priority of the nurse.

References

*Human Trafficking stories, statistics, facts, helpful articles for how to engage victims as well resources for how to recovery from human trafficking and more...*. (2019). *Human Trafficking eLearning*. Retrieved 25 January 2019, from <http://humantraffickingelearning.com/resources/>