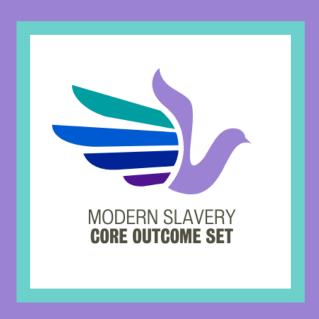
Outcomes used in Modern Slavery and Human Trafficking Interventions



A Rapid Review of Quantitative Studies













Introduction



The aim of the Modern Slavery Core Outcome Set Project is to identify priority outcomes to be reported across interventions that aim to support the recovery, healing and reintegration of survivors of modern slavery.

We know that survivors of modern slavery experience serious and long-term health, social, and economic consequences. But, high quality evidence is lacking about how policies and services can intervene effectively to support recovery, healing and reintegration. Comparing the effectiveness of interventions requires that the measurement of outcomes is standardised. Yet currently, there is no consensus on the definition and measurement of recovery, healing or reintegration outcomes for survivors of human trafficking and modern slavery. Building a consensus is vital. The development of a Modern Slavery Core Outcome Set (MS-COS) will enable this, providing a minimum set of standard and measurable outcomes that should be reported across interventions that aim to support survivor recovery, healing and reintegration.

In order to develop the MS-COS, our project has two phases. The first phase is generative in nature, generating a long list of outcomes and sorting these into a taxonomy or schema. To do this we have undertaken rapid reviews of the literature, analysed secondary qualitative data, collected primary data, and run two stakeholder workshops. This short report outlines our findings from the first rapid review undertaken.

What we did

We wanted to know what outcomes are used and measured by interventions working with people who have experienced human trafficking. To answer this question, we searched for all other reviews on the topic and used these to find the relevant papers to include in our review. We included 11 reviews and, from these, found 46 potentially useful studies.

After going through all 46 studies, only 8 studies had information relevant to our aim.

For this review, we were only interested in quantitative studies – studies that measured outcomes using numbers. Reviews since 2011 were included if they covered academic intervention studies working with adults who had experienced human trafficking.

Studies Included



This table summarises the characteristics of each of the 8 studies we included in our review, including the outcomes assessed in these studies.

LEAD AUTHOR	YEAR	STUDY COUNTRY	SAMPLE	OUTCOMES ASSESSED
Shareck	2020	Canada	 100 – 120 women est. all experience of sex trafficking 	 Health Addiction Housing Legal issues Social support networks Education and employment.
George	2020	USA	 5 men and 31 women mainly experience of sex trafficking 	 Physical and mental health (e.g., PTSD, hepatitis C, pelvic pain, depression)
Cerny	2019	USA	8 womenall experience of sex trafficking	 Meaningful activities Task behaviours (e.g., decision making, problem-solving) Executive functioning skills (e.g., planning, initiating) Occupational performance.
Magnum	2019	USA	15 womenall experience of sex trafficking	 Sensory modulation (e.g., self-regulation of emotions, self-esteem, resilience) Basic functions (e.g., cooking, using the telephone) Executive functions Occupational performance.
Munsey	2018	USA	11 womenall experience of sex trafficking	DepressionPTSDSelf-esteem
Robjant	2017	United Kingdom	10 womenall experience of sex trafficking	PTSDDistress
Ostrovschi	2011	Moldova	120 womenmainly experience of sex trafficking	 Psychiatric diagnosis (PTSD, depression)
Potocky	2010	USA	 6 undocumented migrant men and 37 women experience of sex and labour trafficking 	 Shelter/food Immigration issues Mental health Social and emotional health English language ability Employment/education



What we found

Most of the studies were conducted in North America

Five studies took place in the United States and one Canada. Two were conducted in Europe; one in Moldova (Cerny et al. 2019) and one in the UK (Robjant et al. 2017). There appears to be a geographical gap in intervention research, with no studies meeting the inclusion criteria in Asia, Africa, South America or Australasia. Though we accepted only English language studies and this may have excluded some studies from these countries.

Only three studies reported any country-of-origin data.

Only the George 2020, Ostrovschi et al. 2011, Potocky 2010 studies reported country of origin data, a worrying trend given the influence of nationality on important migrant experiences such as the asylum process (see Jannesari et al. 2020).

From the 240 participants, only 11 were men. No studies stated that they worked with non-binary people.

All the studies focussed on sex trafficking, with only two (Ostrovschi et al. 2011, Potocky 2010) including other forms of trafficking such as labour exploitation.

Half of all the studies focussed on diagnosable mental health outcomes.

The Munsey et al. 2018, Robjant et al. 2017, Ostrovschi et al. 2011, George et al. 2010 studies all focussed on diagnosable mental health outcomes, particularly Post-Traumatic Stress Disorder (PTSD). These were measured using standardised mental health tools such as the Posttraumatic Diagnostic Scale (Foa et al. 1997) and the Hamilton Depression Rating Scale (Hamilton 1960). Two studies (Magnum et al. 2019, Cerny et al. 2019) used the Canadian Occupational Performance Measure 'designed to capture a client's self-perception of performance in everyday living, over time', including 'self-care, leisure and productivity' (COPM 2021). Two studies (Shareck et al. 2020, Potocky 2010) used NGO developed measures that looked at a broad set of outcomes including items on housing, social health, employment, and legal/immigration issues.

How we are using these findings

Outcomes identified in the rapid review have been fed into a master list of outcomes from the other review, interviews, and our exploratory workshops. This master list of outcomes provides the foundation for the e-Delphi exercise where stakeholders will vote on a core outcomes set.

This rapid review identified a skew in the literature towards North America and Europe, as well as a lack of male participants. We have addressed this issue in our project by conducting supplementary interviews with male and gender non-conforming survivors of human trafficking, and by identifying international partners from Asia and Africa to participate in the e-Delphi consensus exercise.



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The Modern Slavery Core Outcome Set Project team includes:
Sharli Anne Paphitis, Sohail Jannessari, Olivia Triantafillou, Marzena
Zdrojkowska & Sian Oram (King's College London)
Bee Damara & Minh Dang (Survivor Alliance)
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Emma Howarth (University of East London)

Additional King's College London student involvement: Anitta Sritharan

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