Episode: Author Interview: "How Should Health Care Organizations Limit Roles of Human Trafficking in Their Labor and Supply Chains?"

Guests: Hanni Stoklosa, MD, MPH and Mike Schiller, CRMP

Host: Tim Hoff

Transcript: Cheryl Green

Access the podcast.

[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Hanni Stoklosa, an assistant professor in the Department of Emergency Medicine at Brigham and Women's Hospital and Harvard Medical School in Boston, Massachusetts, and the chief medical officer of HEAL Trafficking, and Mike Schiller, the executive director at the Association for Healthcare Resource and Materials Management of the American Hospital Association in Chicago, Illinois. They're here to discuss their article, coauthored with Drs Mollie Gordon, Rebecca Chen, John Coverdale, and Phuong Nguyen, "How Should Health Care Organizations Limit Roles of Human Trafficking in Their Labor and Supply Chains?," in the April 2024 issue of the Journal, Global Medical Supply Chain Security. Dr Stoklosa, Mr Schiller, thank you so much for being on the podcast.

DR HANNI STOKLOSA: Thanks so much for having us.

MIKE SCHILLER: Yeah, it's a real pleasure to be here. Thank you.

[00:01:08] HOFF: So, to begin with, what's the main ethics point that you are making in this article?

STOKLOSA: Thanks, Tim. So, our article presents a critical ethical point regarding the role of health care organizations in addressing human trafficking within their supply chains. At HEAL Trafficking, we believe that health care is one of the most powerful forces to end trafficking, and we know the majority of trafficking victims interact with health care while they're being trafficked. And as this article highlights, there's a growing recognition of forced labor in the supply chains of the health care industry. We're talking about both goods and services. Or to say it another way, there may be forced labor in the production of the materials that we use in clinical settings, and the people employed by our systems may be trapped in forced labor. In fact, a recent report released by the Human Trafficking Legal Center found that in 2022, there were four new cases involving forced labor in the health care industry, the lion's share of which were nurses from the Philippines. In our article, we emphasize the ethical responsibility of health care organizations to ensure their operations do not indirectly support or benefit from human trafficking, and provide quidance about how to do so.

[00:02:30] HOFF: And so, what do you see as the most important thing for health professions students and trainees specifically to take from this article?

STOKLOSA: Yeah, I love that question. So, as the next generation of clinicians must not only be prepared to respond to human trafficking victims they encounter in the clinical environment, they also need to realize the significance of ethical supply chain management and the impact their

future workplaces can have on human rights globally. Our article really serves as a call to action for emerging health care professionals to advocate for and implement ethical practices within their organizations. We emphasize the need for awareness, education, and proactive engagement in addressing human trafficking risks, urging future health care professionals to ensure that their work environment not only refrains from contributing to human rights violations, but actively works against them. Students and trainees should think about their roles as ethical leaders in their respective fields, prioritizing social responsibility alongside clinical excellence.

[00:03:41] HOFF: And finally, if you could add a point to this article that you didn't have the time or the space to fully explore, what would that be?

SCHILLER: Hanni touched on this briefly that there could be forced labor that's involved in the manufacture of the products that we use in the care setting. And when you look at the supply chain continuum, you move from acquisition to consumption, acquisition being the acquisition of raw materials, and then those raw materials moving into the manufacturing sector to be processed into finished goods, which then go to distribution, then from distribution, they move into the hospital setting where the clinical teams use them in the use of patient care. So, you've got those key areas. You also have logistics and transportation that connect each of these key areas within the health care supply chain continuum. And there's definitely human trafficking that can occur in any one of these areas. I think it's more prevalent in the acquisition and manufacturing and maybe even a little bit on the transportation side if you think of some of the ports. So, we need to be cognizant of that. And as supply chain leaders, how do we work with our group purchasing organizations? How do we work with our manufacturers and our distributors to audit and identify those tiers upstream in the supply chain, where there might be aspects of forced labor or human trafficking involved in the manufacture of these goods?

To that end, AHRMM has developed a significant resource and repository with the work of Hanni and other leaders across the health care field. If you go to www.AHRMM.org, go to Resources, and then click Mitigating Human Trafficking Risks, you'll see a great repository there that breaks down into three key categories that has samples and templates for management systems, risk assessment tools, and supply chain mapping tools. [00:05:38] And within each one of these categories, there's a number of subcategories and folders that you can expand and access a number of links. We're going to continue to update this resource and this repository with the goal of number one, raising awareness, number two, educating the health care field on the risks of human trafficking, and number three, how do we move to action. And that's the part that we're moving into now. We feel that we've raised awareness. We've got the content to educate. Now it's all about moving to action. [theme music returns]

[00:06:11] HOFF: Dr Stoklosa and Mr Schiller, thank you so much for your time on the podcast today, and thanks for your contribution, along with your co-authors, to the Journal this month.

STOKLOSA: Thank you, Tim.

SCHILLER: Thanks again for the opportunity, Tim.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.