Neuropsychological Consequences of Human Trafficking

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ABSTRACT

The effects of human trafficking can lead to significant cognitive impairment & memory loss for victims. Children and adolescents, with developing brains, are at a greater risk. Cognitive functioning has important implications for successful daily activities for trafficking victims and can be predictive of factors associated with recovery and quality of life, such as educational performance, employment, social functioning, and overall health (Jak et al., 2016). With 40.3 million estimated victims, there is an urgent need to understand the neuropsychological consequences of trafficking (ILO, 2018). However, there is scant literature on this topic. Given the lack of evidence regarding the neuropsychological profiles of trafficking victims, synthesizing research pertaining to populations with similar characteristics may provide valuable insight as there is substantial overlap regarding the consequences of many forms of violence against women (VAW).

PTSD & COGNITIVE FUNCTIONING

PTSD has important implications for cognitive functioning and has been indicated as a significant consequence for females sex workers, trafficked and non-trafficked, as well as women who have experienced other forms of VAW (Brown et al., 2015; Oram et al., 2017; Ottisova et al., 2016; Patel et al., 2016; Rahil et al., 2015; Rössler et al., 2010; Sagatani et al., 2013). PTSD may be associated with reduced processing speed (Wrocklage, 2016), especially in emotional working memory and implicit and explicit episodic memory (Schweizer & Dalgleish, 2011). Symptoms in victims of VAW also include involuntary control of trauma memories, impaired recall of traumatic events, difficulty concentrating, and attentional bias to a potential threat or emotionally relevant situations (Oram et al., 2018). PTSD is also associated with attention bias toward trauma-related or emotionally relevant material, which may affect overall attentional functioning (Honzel et al., 2015).

Further, decreased performance on measures of auditory attention and working memory have been found in sexual assault-related PTSD when compared to victims without PTSD and non-trauma controls (Aupperle et al., 2012). Furthermore, neuropsychological research has provided evidence for impairments in PTSD patients regarding inhibition of automatic responses and the regulation of attention in both emotional and non-emotional contexts (Aupperle et al., 2012).

~ Work must be done to implement appropriate neuropsychological screening measures as a standard of care among trafficking victims ~

REFERENCES

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NEUROPSYCHOLOGICAL IMPLICATIONS

While there is no consensus regarding executive functioning in VAW victims, Daughtery et al. (2018) noted that 25% of IPV victims suffered mild neuropsychological deficits, and 5% suffered severe deficits in memory and executive function. Research has also indicated that female victims of IPV often have difficulties with memory and concentration (Wong et al., 2014). Additionally, Twamley et al. (2009) concluded that women with PTSD-related IPV exhibited slower than normal processing speed and reduced attention that may be due to the involuntary need to reallocate resources to cope with the psychological and emotional distress of trauma.

In neuropsychological testing, cognitive control deficits in PTSD patients can often manifest as intrusion errors during memory tasks, loss of attention due to visual distractions, impaired working memory on assessments that require multi-tasking, and false-positive responses on continuous performance tests (Honzel et al., 2014). Research indicates that there are few differences in neuropsychological test results between patients with PTSD and women who have experienced IPV (Brown et al.,2015). Regardless of PTSD status, IPV victims have shown deficits on tasks of speeded, sustained auditory attention and working memory, such as the Paced Auditory Serial Addition Test, as well as deficits in response inhibition and set-shifting tasks (Stein et al., 2002). Inconsistencies across studies have indicated that the neuropsychological deficits associated with cognitive dysfunction may exist without PTSD symptoms in populations of abused or trafficked women (Daughtery et al., 2014), indicating the need for further comparisons because cognitive deficits in victims without PTSD symptoms may go undetected.

CONCLUSION

Studies have shown that PTSD is highly comorbid with major depressive disorder and other medical conditions such as traumatic brain injury, chronic idiopathic pain, and fatigue in female sex workers and trafficking victims which can be challenging for treatment planning and forensic investigations, as these problems share similar effects (Schultz et al., 2018). While literature regarding the neuropsychological consequences of trafficking is scarce, evidence indicates that cognitive functioning may be impaired in women who have experienced domestic violence or IPV, suggesting that trafficking victims may suffer similar effects. Neuropsychological functioning plays a crucial role in a woman's ability to recover from trauma, especially in the areas of cognition that pertain to educational success, employment, and interpersonal and professional relationships. A woman's ability to gain security in these areas is a vital factor in determining appropriate treatment and quality of life. Understanding the neuropsychological consequences of trafficking is a significant area of concern as we work toward rehabilitation and intervention methods for this growing global health crisis.