WOMEN AND MATERNAL HEALTH

REPRODUCTIVE HEALTH

To understand the barriers faced in accessing and utilizing reproductive health services in urban and rural areas of Tennessee, two of the largest minority populations participated in **focus groups.** The following are some of their thoughts and perceptions.



BARRIERS TO REPRODUCTIVE HEALTH SERVICES

AFRICAN AMERICAN GROUP

- Lack of awareness of all services provided
- Concern about confidentiality
- Adolescents unaware of services due to limited reproductive health discussion with parents

HISPANIC GROUP

- · Lack of insurance
- Lack of providers
- Travel time to providers

AFRICAN AMERICAN GROUP

- Education from local trusted community members
- More community education

AFRICAN AMERICAN GROUP

Presence at community events

HISPANIC GROUP

- Need Spanish speaking providers
- More providers in general
- More community education





REPRODUCTIVE HEALTH SERVICES OFFERED AT LOCAL HEALTH DEPARTMENTS

AFRICAN AMERICAN GROUP

- Birth control
- WIC
- Mammograms
- Vaccinations

HISPANIC GROUP

- Birth control condoms, pills, injections and sterilization
- WIC



WAYS FOR HEALTH DEPARTMENTS TO ADVERTISE SERVICES



• Education from trusted Spanish speaking community members





REPRODUCTIVE HEALTH EDUCATION RECEIVED AS AN ADOLESCENT

AFRICAN AMERICAN GROUP

- Did not receive impactful education
- Not comprehensive
- Did not teach healthy relationships

HISPANIC GROUP

- Many received no reproductive health education
- · Some received education in school
- Mostly learned through peers
- Would have liked information regarding risks

PERCEIVED REASONS BLACK AND HISPANIC WOMEN ARE LESS LIKELY TO HAVE PRECONCEPTION AND FIRST TRIMESTER PRENATAL CARE

AFRICAN AMERICAN GROUP

- Concern that family or community members will find out about pregnancy
- Anxiety around confirming a pregnancy
- Believe more whites seek care earlier to obtain abortions

HISPANIC GROUP

- No insurance
- · Unable to communicate
- · Don't know where to get services





WOMEN'S MATERNAL HEALTH

HUMAN TRAFFICKING

To better understand human trafficking in Tennessee, community organizations and law enforcement took part in key informant interviews. The following are their thoughts and perceptions.

OVERVIEW OF HUMAN TRAFFICKING

- More financial resources
- Ways of trafficking: force, fraud or coercion

DESCRIPTION OF KEY INFORMANTS:

- · Service location: urban and rural
- Types of services provided: long-term housing, employment, case management, advocacy, support to human trafficking agencies across the state



→ OVERVIEW

How to Build Trust and Prevent

· Be aware of triggering language

Re-Traumatization

Use empowering language

• Use survivor led team

Avoid victim blaming

Acknowledge efforts

• Provide consistent care

Description of Human Trafficking in the Organization's Service Area

- · Mostly sex but some labor
- People usually trafficked by a family member or "boyfriend"
- People trafficked usually have complex trauma history (childhood sexual abuse, etc.)
- Many people trafficked are females ages ~10-30 years old

SERVICE <

Service Opportunities

- Provide housing options
- Provide trauma-informed programs and therapists
- Provide education

Challenges in Providing Services

- Lack of trust
- · Lack of funding
- · Lack of programs for juveniles
- · Lack of safe, affordable housing
- · Lack of mental health services for survivors
- Law enforcement viewing people trafficked as criminals versus victims and survivors



HEALTH DEPARTMENT COLLABORATION

How the Health Department Can Help

- Provide pamphlets in local health clinics about organizations that can help
- Provide trauma-informed care
- Provide private room for person trafficked
- Provide medical appointments quickly
- Offer pregnancy tests and birth control prescriptions
- Provide sex education on reproductive health and healthy relationships
- Share state-level data

ADDITIONAL COMMENTS <



- Many people do not believe human trafficking is a problem in the state
- Human trafficking is a crime hidden in plain sight
- Anyone serving people trafficked should complete trauma-informed training
- Consistent care is needed
- Awareness and training lead to more victims and survivors coming forward





