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**HEIGHT DEPTH, HOT, COLD**

*She was hung from a hook and beaten. This was Chong Kim's life as a victim of human trafficking. She was stuffed in a storage locker in the sweltering heat. She was tied in a bath tub full of ice, while her teeth were plucked, rendered from her mouth. This was the torture Chong overcame to become the cherished survivor and advocate that she is today. Having lived through the abuse, she now lives with the many medical problems that resulted from it – including a brush with cervical cancer. Her courage is an inspiration to many. Her story was the basis of the 2012 feature length film *Abduction of Eden*. Chong is now on a crusade to educate health care, legal, and law enforcement professionals about human trafficking: How to stop it, and how to help those recovering from it.*

### **The Horrors I Endured as a Sex Slave**

I'm a survivor of human trafficking. I was held hostage in various abandoned homes without available plumbing or storage units with no air conditioning. I was not allowed to take baths. I was not provided with appropriate toiletries when using the bathroom, which was a bucket, tucked in the far corner of the unit. When I was trafficked, health and hygiene were the least of my worries—staying alive was a full-time job—but little did I realize that poor hygiene could later turn into serious health problems. We wore dirty old hospital

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scrubs on a daily basis, without regular bathing and lived without air conditioning in the sweltering heat. We had a build-up of grime, bacteria, fungus, and other pathogens that we weren't aware of.

For women who were going through their menstrual cycles, conditions were extremely unsanitary. Instead of tampons or pads, we were given adult diapers when we weren't "working." When it was time to service the "customers," we were forced to use a make-up sponge instead of a tampon. We had to dip them in cold water, squeeze out the excess water, and then insert them into our vaginas. After servicing one or two men, we had to then dig the sponge out with our bare fingers. Without basic hygiene products like soap, don't you think this could cause infections? Servicing the "customers" was the only opportunity we had to take showers. I remember my first shower after being held in the storage units for a long time. The warm water made my skin feel like it was burning, maybe because of the acid from the men's urine that had dried and caked on my skin for so many days.

There was no toilet paper to keep us sanitized when we went to the bathroom. I was one of the girls that developed a bladder infection. It would burn so much to urinate. I remember feeling abdominal pains that were so severe I thought I was going to die. I sweated profusely and slept breathing in the fumes of my own body odor, which was mixed with fumes of other people's body odor, the stench of urine, and blood. Some of the girls developed bronchitis, suffered from chronic nausea, and other health problems. Without any physicians around, some of the girls got so sick we never saw them again. We never knew what exactly caused the sickness, but it wasn't hard to imagine. Other health issues weren't so immediately obvious. Some were delayed in their onset. As opposed to head injuries, delayed onset ailments do not immediately appear and may appear only now and then, so they just became part of our daily lives.

What about the physical trauma that most victims endure? The constant screaming in the ear can cause hearing loss. The constant blunt force trauma to the head can cause memory loss or hallucinations. I've even endured broken bones in both my knee caps. I've been hung on a hook from the ceiling and was beaten senselessly, to the point where the blows no longer hurt. I remember feeling like my heart was going to pop out of my chest. Because of the violent beatings I developed an anxiety disorder, which would

cause headaches that felt like a slow, sharp pain; as if a needle was going through my skull. I was also held naked in a porcelain clawfoot tub that was filled with ice. I honestly do not know how I survived that, but I remember feeling every prick from the ice cubes on my skin. I couldn't move. My wrists and ankles were bound to a belt that was tied to the feet of the tub. My right shoulder later dislocated. Then, pliers were used as a torture device to pull out my teeth. This is why most trafficking victims refuse medical treatment and won't share their trauma with their healthcare providers. There is so much shame in what we endured; what no human should ever have to endure.

### Violent Trauma and Chronic Health Problems are Linked

I've wondered how often violent trauma actually contributes to other health problems, like Parkinson's disease, blepharospasms (constant blinking), or other neurological problems due to persistent head trauma. Experts have said that when a person is violently struck in the head, especially during a car accident, the contusion in the brain can have a lasting effect on memory, cause blurred vision, and even result in constant migraine headaches. These symptoms are common in victims of human trafficking, who endure tremendous physical abuse from their pimps and clients. Has anyone ever done research about victims traumatized by head injuries from the violence of sex trafficking? We need more of it. I'm glad that some researchers, such as Vincent Felitti, M.D., are beginning to discuss their childhood trauma research in the context of sex trafficking (1). I'm also glad that Cancer InCytes magazine is devoted to wide-ranging and accessible discussions about the healthcare needs of disadvantaged populations, with an emphasis on trafficking victims (2).

There is a need for medical professionals and human rights advocates to collaborate on developing diagnostic approaches that specifically meet the needs of trafficking victims who often have a hidden history of abuse. I was diagnosed with a benign form of cervical cancer. The treatment for my cancer was done through a microscope tube that was inserted into the cervix to view whether the cells lining the walls were abnormal. The doctor said she scraped most of the abnormal cells out. After the diagnosis of my cervical cancer, the doctor simply told me that "It's benign," thinking that that was enough to console me. But I had so many questions. First was, what the heck does it mean in my context that it's benign? Are they aware of my history of sexual violence? Do I have a higher risk of it re-occurring in a malignant form? In 2005, my father was diagnosed with stomach cancer. It was detected at stage 4, even though he regularly saw a physician who kept reassuring him that it was nothing but heart burn. How did acid reflux disease

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turn into stage 4 stomach cancer in a matter of weeks? My father grew up in severe poverty in South Korea and even when he arrived in the United States as an adult, he was never taught healthy eating habits nor was his medical past investigated by his primary care physicians. His doctor did not take his health history into account, and my dad paid the price. Thus, I think it's important that my doctors, and those who serve victims of sexual abuse, know what ask and how to ask about a person's history of abuse. I may be at higher risk for recurrence of cervical cancer because of my past. It's something that my doctor should be aware of, in case what happened to my dad might happen to me. This type of training requires medical professionals to talk to human rights advocates like me, who have lived through the abuse.

Here is another example of my medical history due to my abuse. I have chronic stigmatism in both my eyes. I require some form of corrective lens in order to function in everyday life. I have worn contacts since I was 17, most of them being hard gas permeable ones. When I was trafficked in a hot storage unit that didn't have any air conditioning, my eyes were constantly dry, irritated, and itchy. Plus, I didn't have any solutions to change out my lens. I wore the same lens from 1995-97 and I could have become blind because of that, or my vision could have grown worse. I didn't think about vision care as a health concern until in 2011, when I was diagnosed with blepharospasm, or constant blinking. In the fall of 2011, I started to blink more than usual. I realized that it was affecting my daily life. I couldn't drive. I couldn't watch television. I couldn't even cook meals for my family. Not only was my blinking affecting my life, but I started to have constant headaches. My eye lids would seal shut to the point where I had to pull them open with my fingers. I sought out my regular optometrist and he assumed I was having dry eyes. Even though I wasn't familiar with "dry eye" symptoms I knew it wasn't that. So, I decided to visit other optometrists. I visited several of them until one in particular asked me about my contact lens usage. I eventually gave up. I was basically lying around the house feeling extremely frustrated until in the middle of the night, I typed in "constant blinking" and I ended up doing my own research. I saw the diagnosis of "blepharospasms," and I went back to the same doctors and told them what I found; that's when they referred me to see a neurologist. Who would've thought? I've been taking botox injections for the blinking, which has been working. However, the condition is spreading to my lower face, causing speech and breathing problems.

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## Doctor's Offices Need Better Medical History Questionnaires

In the past, when I told my primary care physician that I've been abused, the response I get is, "Do you have broken bones? Are you currently in a violent home?" My answer to those would be "no." So, as long as those concerns are not an immediate problem or if I'm not in a crisis, she does a routine check-up. In 2006, I had my annual pap smear and found that I had cancerous cells on the walls of my cervix. Not one physician stopped to ask me questions regarding my body's history. Have I given birth before? How often do I use a douche? Have I been sexually active? Have I endured any trauma, such as sexual abuse, commercial sexual exploitation, or rape?

A friend of mine passed away years ago from rectal cancer due to his sexual abuse as a child. He also had problems with his digestive system. Have you ever thought about how physical bullying might affect a person's digestive system? High stress levels are associated with stomach ulcers. I wonder if asking questions about a person's history of bullying might help improve their diagnoses. I remember when I wanted to donate blood and was asked a series of questions pertaining to my sex life. Now, what if we could create a series of tactful questions about past experiences of victimization? Patients would not be required to answer the questions, but at least they have the option to inform their physician about something that would help the diagnostic process. Today, I see more clinics asking more questions when you register as a new patient, but most of those questions are very general. Many patients with a history of abuse may not know the symptoms that they should be reporting or how to disclose that information. This is where we will need the cooperation of survivors and advocates in forming the proper surveys.

Can cancer be influenced by our past experiences of violent abuse? If so, where do we go from here? The ACE studies suggest that childhood trauma has a strong effect on chronic adult diseases such as autoimmune diseases and psychiatric disorders (3, 4). What is the role of the social worker, the triage nurse, human rights advocate, and the physician? Awareness of the problem is a good place to start. Better information for health care providers to identify the signs of human trafficking is a good next step, such as the informative article (5) by Michael G. O'Callaghan, D.D.S. More collaboration among advocates, survivors, and health care providers is needed.

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**Chong Kim** is a survivor of both human sex trafficking and cancer. Her life story is depicted in the motion picture *Eden*, starring Jamie Chung (*Hangover 2/Grown Ups*) and directed by Megan Griffiths. She now does public education and awareness programs for students in fields of psychology, law, and medicine. She also educates the community, and provides training to law enforcement globally. You can learn more about her advocacy work at <http://www.apbspeakers.com/speaker/chong-kim>.

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