

resident physicians will encounter youth at risk of being trafficked or active victims of human trafficking. Nevertheless, in the field of psychiatry, we lack formal education on the subject or a standardized assessment for identifying youth at risk or those who may be involved in human trafficking. The objectives of this presentation are to: 1) highlight the need to increase education regarding human trafficking in psychiatry residency training; and 2) identify risk factors and red flags for human trafficking when assessing children in the emergency department. The author will highlight opportunities to build rapport with victims and work collaboratively with other health workers and sectors to build an adequate course of action.

Methods: A retrospective review of a clinical case, which was conducted before receiving education about human trafficking identification and assessment, will be revisited through a human trafficking-informed lens.

Results: Education about human trafficking during residency training can increase awareness of this phenomenon's high prevalence and the need to move beyond simple notation of risky behaviors in favor of a more in-depth assessment when assessing vulnerable children.

Conclusions: Resident physicians' education about the issue of human trafficking can make a difference in patient care via increased identification and treatment of both at-risk and involved youth.

REST, PRE, OTH

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65.3 A SOCIO-CULTURAL FORMULATION FOR VULNERABLE CHILDREN



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Objectives: Social determinants of health that increase vulnerability toward childhood exploitation have been identified. During our work in assessing, understanding, and treating trafficked or commercial sexually exploited youth, it is important to appreciate the social and cultural factors involved in their development and presentation for treatment. This presentation aims to:

1) and adolescent psychiatric clinicians identify social determinants of health that are important to address the complex needs of vulnerable children. This content would help in communicating with the multiple disciplines needed to assist in the recovery of the victim.

RF, REST, DEMF

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65.4 THE OPIOID EPIDEMIC AND CHILD TRAFFICKING: VIEWPOINTS FROM A COMMUNITY PSYCHIATRIST



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Objectives: The media has reported that the opiate crisis has been "fueling" human trafficking. Child trafficking is another public health problem affecting children locally. In the state of New Hampshire in 2019, experts agreed that the opiate crisis was "exacerbating" human trafficking. Despite the detrimental effects that both opiate use disorder and child trafficking have on childhood development, and the finding that more than 80% of human trafficking victims will be evaluated by a health care worker while being exploited, the discussion about the education of mental health practitioners working with children and families remains limited. This

presentation aims to raise awareness among mental health practitioners of the urgent need for an interdisciplinary and collaborative approach to address the complex interplay with the opiate epidemic. Interdisciplinary and collaborative approaches are needed to tackle these synergistic epidemics.

RP, CC, RF

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CARING FOR THE FORGOTTEN CHILDREN: REBUILDING PUERTO RICO AFTER HURRICANE MARIA, EARTHQUAKES, AND COVID-19



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Objectives: The objectives of this session are as follows: 1) to appreciate the experience and vulnerabilities of communities experiencing recurrent disaster events; 2) to understand the circumstances faced by already-disenfranchised communities when impacted by multiple natural disasters and to learn about disparities in the ability to recover among different sectors of the population; 3) to learn about actions and strategies taken by child and adolescent psychiatrists and other child mental health professionals to mitigate the ill effects of a disaster on communities in Puerto Rico (PR) and to facilitate recovery and resilience; and 4) to learn about engagement of community stakeholders to promote acute and long-term recovery peridistaster, and how to provide mental health support and clinical expertise to these groups.

Methods: Throughout the session, multimedia (audio/music, video, photos, and newer technologies as appropriate) will be used to help the audience engage in the presentations. Also, audience members will have the opportunity to share their own disaster-related stories/cases/experiences and contribute to discussions in response to the faculty presentations and live stream session. Linda Chokroverty, MD, will present the audience with her experience as a deployed mental health clinician/child and adolescent psychiatrist after recent earthquakes and more recent follow-ups during the pandemic, in advocating for the needs of children/adolescents, an often-neglected group in the peridistaster period. Karen G. Martinez, MD, MSc, will describe efforts by the local academic and clinical community in PR to provide multilevel peridistaster mental health care to the most impacted residents of PR over the last several years. Rosaura Orrego-Aguayo, PhD, and Regan Stewart, PhD, will describe collaborations between the Medical University of South Carolina and island-based partners in providing a multitiered approach (including telehealth) to support the mental health of children, teachers, parents, therapists, and general community members in PR at different stages following Hurricane Maria, earthquakes, and now COVID-19. Laura Gonzalez-Conty, MD, will present her experience in establishing a telepsychiatry service in the disaster-affected earthquake zone and the subsequent disruptions and challenges in implementing the provision of clinical consultation during the pandemic. New innovations in telepsychiatric applications during the pandemic-related lockdown in PR will then be described, especially with regard to at-risk children/families and caregivers. Finally, Melissa Brymer, PhD, PsyD, an expert in disasters and traumatic stress, will provide a synthesis and

