

C3.6 – HUMAN TRAFFICKING

Purpose

The purpose of this policy is to ensure Iowa HHS along with contracted SRs (including grantee and subrecipient and service sites) have a policy in place that describes the process for ensuring that staff are trained to identify survivors of human trafficking, to make reports to authorities as needed and to refer survivors to the appropriate resources..

Policy

- All Title X staff will be trained at least annually on:
 - Human trafficking identification and response
 - Mandatory reporting requirements
 - Confidentiality
 - Trauma-informed care
- SRs will establish knowledge of and/or maintain relationships with:
 - [The National Human Trafficking Hotline](#);
 - State child protective services;
 - Local organizations that serve human trafficking victims; social service agencies; and human trafficking prevention coalitions; and/or
 - Law enforcement agencies, including relevant FBI task forces, police and/or sheriffs' offices.
- Family planning and requested services will be provided as requested and needed, regardless of a client's willingness to report human trafficking or other violence
- SRs will incorporate the expertise and experience of survivors when altering or developing protocols
- Procedures for responding to survivors of human trafficking should:
 - Use gender- and age-neutral language;
 - Use non-judgmental, non-blaming language to describe trafficking;
 - Refer to site protocols regarding other forms of violence and response; and
 - Use existing anti-trafficking resources from the [National Human Trafficking Hotline](#) or the [National Human Trafficking Training and Technical Assistance Center](#) (NHTTAC).
- SRs will distribute and post violence education and prevention materials in languages accessible to the client population. These materials can include human trafficking education and information on resources available to a client who may not be ready or able to disclose victimization or accept assistance. All client materials must be reviewed by the Information and Education (I&E) Committee per I&E policies.
- SRs will identify key personnel to be involved if human trafficking is suspected, based on site capacity.
 - Some sites may have specialized staff who can conduct more intensive interviews or assessments related to sexual assault, human trafficking, or other forms of violence. Sites with more limited expertise in this area can focus on referrals.
- SRs will consider safety concerns (for client and staff) that may be a part of assisting a victim of trafficking and will consider other organizational policies related to when to call security or law enforcement.

Definition and Overview

Human Trafficking

Human Trafficking is a crime that involves exploiting a person for labor, services or commercial sex. The Trafficking Victims Protection Act of 2000 and its subsequent reauthorizations outline two types of human trafficking:

- Labor Trafficking - Individuals are compelled to work or provide services through the use of force, fraud or coercion.
- Sex Trafficking - Individuals are compelled to engage in commercial sex through the use of force, fraud or coercion. When a person under 18 years old performs a commercial sex act, it is a crime regardless of whether there is any force, fraud or coercion.

SRs must assure that all staff members are familiar with federal and state human trafficking laws. SRs must develop written internal procedures for staff on how to address human trafficking incidents.

Procedure

Iowa HHS will monitor all contracted SRs to ensure that they adhere to the following protocols:

- SR clinicians and staff will work together to craft a statement of shared commitment to compassionate human trafficking response. SRs will post this agreement for public view. For example:

“(Insert Agency Name)” is committed to responding to the unique needs of human trafficking victims and survivors. It is our policy to support those who have been trafficked with a victim-centered and trauma-informed approach.”

- SRs will integrate human trafficking identification and response into existing staff workflows
 - At intake, SRs will:
 - Apply a client-centered approach;
 - Consider signs and indicators of human trafficking (refer to [Identifying and Referring Human Trafficking Victims and Survivors: Red Flags for Title X Clinicians](#) or National Human Trafficking Hotline materials); and
 - Maintain and enforce clinic policy that patients spend time alone with their clinician during the assessment
 - If signs of human trafficking are present during intake or clinical assessment, providers will take three steps:
 1. Notice red flags
 2. Establish trust and safety
 3. Take action

Step 1: Notice red flags

- Refer to “Identifying and Referring Human Trafficking Victims and Survivors: Red Flags for Title X Clinicians”

Step 2: Establish trust and safety

- Build trust by demonstrating warmth, care, and non-judgemental interest and concern
- Ensure client has time alone with providers and access to language interpretation
- Leverage your expertise to carry out patient-centered screening for violence, including intimate partner violence, trafficking, and sexual or physical violence

- Refer to existing institutional protocols for victims of violence
 - Remember: while human trafficking is a distinct federal crime, victims may experience trafficking as intimate partner violence, sexual assault, or child sexual abuse
- Be aware of incremental disclosure issues in human trafficking, similar to those in intimate partner violence or other abuse experiences
- *It is important to obtain client permission and consent before disclosing any personal information to others, including Clinical Service Providers.*

Step 3: Take action (Strongly encourage SRs to identify action steps listed below in their policies):

- SRs will follow institutional policies for reporting to law enforcement in situations of immediate danger
- SRs will consult protocols for human trafficking and mandatory reporting
- Call the National Human Trafficking Hotline at 1-888-373-7888 or text BEFREE (233733) for additional support and referrals
 - The National Human Trafficking Hotline can support clinicians and staff through patient assessment and shared decision-making with the patient about best next steps
 - Call local anti-trafficking organizations (***insert names and contact info here***)
 - If it becomes necessary to file a mandatory report, follow best practices for involving and empowering clients
- Follow up on the client's case. A potential victim may require fulfillment of some basic needs—such as food, clothing, or temporary shelter—in order to take next steps, and may not be ready to accept help right away.

Note About The National Human Trafficking Hotline

The National Human Trafficking Hotline offers confidential, round-the-clock access to a safe space to report tips, seek services, and ask for help. The Hotline is operated 24/7 and has access to more than 200 languages through a tele-interpreting service.

All communications with the National Human Trafficking Hotline are strictly confidential to the extent permitted by law, and callers need not disclose personal information to access services. The Hotline can also be used by health care institutions to help identify and connect clients with existing resources in their area or to guide providers through human trafficking assessments.

The National Human Trafficking Hotline maintains a database of service providers and resources throughout the United States; this database is available [here](#).

Contacting the Hotline will not fulfill mandatory reporting requirements, but it can facilitate a report to specialized law enforcement trained to handle human trafficking cases. When working with adults who have been trafficked, Title X providers must follow state and federal confidentiality and mandatory reporting rules.

Iowa HHS will review training compliance on an annual basis with each SR as part of their contract and monitoring compliance. *Required training is outlined in the required training tool as well as RHNTCs Federal Training Requirements.*

Date Revised	September 2023
References	<p>Title X Legislative Mandates https://opa.hhs.gov/grant-programs/title-x-service-grants/title-x-statutes-regulations-and-legislative-mandates</p> <p>Title X Program Handbook https://opa.hhs.gov/sites/default/files/2022-08/title-x-program-handbook-july-2022-508-updated.pdf#</p>
Additional Resources	<p>Adult Human Trafficking Screening Tool and Guide https://www.acf.hhs.gov/otip/training-technical-assistance/resource/nhhtacadultscreening</p> <p>A Screening Tool for Identifying Trafficking Victims https://nij.ojp.gov/topics/articles/screening-tool-identifying-trafficking-victims</p> <p>Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP) [2014] https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html</p> <p>Trafficking Victims Protection Act of 2000 https://www.govinfo.gov/content/pkg/USCODE-2010-title22/html/USCODE-2010-title22-chap78-sec7104.htm</p>