Reflections: HHS Service Mechanism for Foreign National Survivors of Human Trafficking

The Trafficking Victim Protection Act of 2000 provides the United States with a framework for prevention of the crime, prosecution of the traffickers and protection of the victims. The 10 year anniversary of the passing of this landmark legislation provides USCCB an opportunity to reflect on lessons learned and potential opportunities in the realm of victim services based on its unique role as a national victim services provider and its extensive experience in the areas of education, service and advocacy.
Executive Summary

United States Response to Human Trafficking
In 2000, Congress passed landmark legislation entitled the Trafficking Victims Protection Act (TVPA) which provides the United States (U.S.) government a framework to respond to the plague of human trafficking. In 2003, 2005, and 2008, Congress reauthorized funding for the TVPA and made major improvements to it, including improved access to services and benefits for foreign national child victims of trafficking.

United States Conference of Catholic Bishops’ Anti-Trafficking Efforts
The United States Conference of Catholic Bishops (USCCB) plays a key role in education, advocacy and services for survivors of human trafficking. USCCB’s advocacy helped ensure that labor trafficking be included as part of the federal definition of a severe form of human trafficking. Since 2002, USCCB has provided services to and advocacy on behalf of foreign national adult and child survivors of trafficking, serving more than 2,6321 victims of trafficking and their eligible family members. It also founded the Coalition of Catholic Organizations Against Human Trafficking in 2002 to work on advocacy and education. Members of the Coalition were instrumental in providing input on provisions of the TVPA and its subsequent reauthorizations.

USCCB is comprised of Catholic Bishops of the United States. USCCB’s Migration and Refugee Services (MRS) department identifies and assists vulnerable migratory populations including refugees, Cuban and Haitian entrants, unaccompanied children and survivors of human trafficking through policy, advocacy, education, and services2. MRS began assisting refugees during World War I and is the largest voluntary refugee resettlement agency in the world. In 1979, USCCB and Lutheran Immigration and Refugee Service designed the Unaccompanied Refugee Minor Program (URM)3, a culturally and linguistically appropriate foster care program and the only program of its kind in existence. MRS establishes partnerships with local service providers to administer its federally-funded refugee, Cuban-Haitian, family reunification, URM, and Anti-Trafficking programs.

Developing National Capacity for Assistance to Victims of Trafficking
Through a contract with the Department of Health and Human Services/Office of Refugee Resettlement (HHS/ORR), USCCB developed a national mechanism for delivery of social services to foreign national victims of human trafficking. USCCB subcontracts with social service agencies that work with similar populations to provide comprehensive case management to foreign national survivors of trafficking in the U.S. and its territories. USCCB offers case coordination and consultation, training, per capita funding and monitoring to more than 100 subcontractors. From April 2006-September 2010, USCCB’s subcontractors served 1,833 survivors of trafficking, including 51 child victims of trafficking, and 420 of their family members with derivative status through the HHS/ORR–USCCB Per Capita Victim Services Contract.

From Grant to Contract
Prior to 2006, services to trafficking victims were administered by the Department of Justice/Office for Victims of Crime (DOJ/OVC) and HHS/ORR through grants provided to social service organizations throughout the U.S. In 2006, HHS/ORR changed the mechanism through which it

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1 As of September 30, 2010.
2 http://www.usccb.org/mrs/index.shtml
provided services “in order to more efficiently fund services to victims of human trafficking and to provide support for services to victims in any location within the United States.”

The 10 year anniversary of the passage of the TVPA provides USCCB an opportunity to reflect on positive outcomes and potential opportunities in the realm of trafficking victim services based on its unique role as a national victim services provider.

**Positive Outcomes of a Centrally-Administered, Per Capita Mechanism**
- Builds national capacity of agencies in a position to identify and serve victims of trafficking
- National standardized data collection
- Quality assurance of service providers
- Quality assurance of physical care and fiduciary support to survivors of trafficking
- National point of contact for case coordination, consultation and education
- Efficient use of government funds
- Funding for administrative and victim services to subcontractors

**USCCB’s Recommendations for Trafficking Victim Services**
- Define goal of government-funded trafficking victim services
- Streamline all government data collection
- Increase funding for government-funded trafficking victim services
- Expand eligibility for benefits and services to the extent as a refugee to all victims of trafficking and to family members entering the U.S. as recipients of humanitarian parole
- Allow HHS to provide funding for legal services
- Create national coordination and service capacity for child trafficking victims
- Increase length and flexibility of services and access to HHS trafficking victim services
- Increase support for crime victims who are government victim/witnesses during criminal trials
- Flexibility of fund distribution

**Conclusion**
Since the passage of the TVPA 10 years ago, the U.S. has made significant progress in its response to the crime of human trafficking. In particular, the U.S. developed a solid foundation in the realm of trafficking victim services. The federal government has been able to maximize its funds to build a national network for response and provide direct service agencies with a national contact for education and consultation through a per capita mechanism administered by a mission-driven agency with established relationships and expertise. A centrally-administered program ensures efficiency and the ability for national, standardized data collection. By partnering with a Non-Government Agency (NGO) with experience in administering and monitoring federal programs, the government ensures accountability of funds and quality service delivery.

In its 30-year history of service provision to vulnerable migrants, USCCB has found a public/private partnership to be essential in fulfilling its mission to serve vulnerable populations. The government benefits from the unique position of the NGO to identify gaps in service, pool resources and advocate for necessary programmatic and legislative improvements. USCCB recommends the government continue to seek the expertise of NGOs as it focuses on improving trafficking victim services.

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4 From the HHS/ORR Request for Proposals Number 06Y007781, pg. 5.
Reflections: U.S. Service Mechanism for Foreign National Survivors of Trafficking

Builds national capacity of agencies in a position to identify and serve victims of trafficking

HHS/ORR provided grants to 28 organizations from 2001-2005 to assist victims of trafficking and to spread awareness through training and media activities. To address the growing reality that its service capacity must be nationwide, HHS/ORR changed its program design when the grant cycles ended to a national, per capita contract mechanism. USCCB was awarded the HHS/ORR Per Capita Victim Services Contract in 2006 (hereafter referred to as the Per Capita Program). This mechanism allows HHS/ORR to expand its geographic reach by “purchasing” services wherever a survivor is identified while maximizing its limited victim service budget.

A benefit of a per capita structure is that there is no limit to the number of subcontractors USCCB engages to provide direct services. One benefit of USCCB’s “bird’s eye view” as a national contractor is the ability to assess which areas in the U.S. are at risk for human trafficking, yet, have had little to no identified cases, or, which areas consistently have high levels of cases, but not enough capacity to serve all clients identified. USCCB has the flexibility to respond when a new case is identified in an area where there is no existing trafficking victim service provider. USCCB’s outreach efforts have resulted in the capacity to provide trafficking victim services in 43 states and 3 U.S. territories.

USCCB subcontracts with a diverse range of agencies that, based on the populations they serve, are in a position to identify and serve survivors of trafficking.

<table>
<thead>
<tr>
<th>Primary Affiliation of Program within Agency that Serves Trafficking Survivors* (as of September 2010)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Refugee Resettlement</td>
<td>41%</td>
</tr>
<tr>
<td>Domestic Violence/Sexual Assault</td>
<td>18%</td>
</tr>
<tr>
<td>Community-based</td>
<td>14%</td>
</tr>
<tr>
<td>Victim Services</td>
<td>10%</td>
</tr>
<tr>
<td>Immigrant Advocacy/Ethnic Group</td>
<td>10%</td>
</tr>
<tr>
<td>Other (mental health, survivors of torture program, farm worker program)</td>
<td>7%</td>
</tr>
</tbody>
</table>

*24 percent of the programs listed above also identify as faith-based.

National standardized data collection

A key question for government agencies, politicians, service providers, advocacy groups, and media is how many trafficking victims are in the U.S.? Although multiple sources have estimated the numbers of foreign national victims of trafficking brought to the U.S. annually, the State Department estimates the number to be as many as 17,500 people each year. This gives us an idea of the potential scale of the problem, but there is also a need to collect accurate data on victims who are identified. Data allows government, NGOs, and academics to analyze the needs of victims and outcomes of services and make adjustments as needed to funding, program designs, and methodology with the goal of supporting successful practices. Having detailed data on client needs,

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5 http://www.state.gov/g/prm/rls/rpt/2006/67941.htm#IIA
6 See attached maps which show the increase in coverage by USCCB subcontractors per year.
7 http://www.acf.hhs.gov/programs/orr/programs/anti Trafficking.htm
availability of services, types of trafficking, demographics and outcome measures assists the federal government in understanding the scope of the trafficking problem in the U.S. and ensuring accountability of money spent on anti-trafficking activities.

In 2002, USCCB created a standard method for data collection on survivors of trafficking assisted through its service programs and has improved on this methodology in subsequent years. Through a unique client identifier, USCCB tracks each client enrolled in the Per Capita Program — even if the client moves and is enrolled by a different subcontracted provider. USCCB’s client coding system allows client tracking without collecting client names, thus, protecting confidentiality. To assist in its data collection, USCCB designed and launched an integrated, web-based database which increases efficiency of real-time reporting, ensures quality assurance of data and collects client information for cross-relational reporting and analysis. Through the database, USCCB collects demographic data on clients enrolled as well as client needs, outcomes of case management activities, short-term objectives of services, and long-term goals. USCCB has made aggregate data available to researchers studying the needs of trafficking victims and gaps in care and also to government and NGOs for use in administrative advocacy for programming and legislation.

Clients Enrolled in Per-Capita Program: April 2006 – September 2010

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
<th>Adult</th>
<th>Minor</th>
<th>Sex</th>
<th>Labor</th>
<th>Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Certified Only</td>
<td>589</td>
<td>291</td>
<td>298</td>
<td>577</td>
<td>12</td>
<td>93</td>
<td>455</td>
<td>41</td>
</tr>
<tr>
<td>Certified Only</td>
<td>851</td>
<td>290</td>
<td>561</td>
<td>822</td>
<td>29</td>
<td>231</td>
<td>543</td>
<td>77</td>
</tr>
<tr>
<td>Clients originally enrolled as Pre-Certified who became Certified</td>
<td>393</td>
<td>214</td>
<td>179</td>
<td>383</td>
<td>10</td>
<td>30</td>
<td>323</td>
<td>40</td>
</tr>
<tr>
<td>Total Victims Enrolled</td>
<td>1833</td>
<td>795</td>
<td>1038</td>
<td>1782</td>
<td>51</td>
<td>354</td>
<td>1321</td>
<td>158</td>
</tr>
<tr>
<td>Percentages (based on total number of victims enrolled)</td>
<td>100</td>
<td>43</td>
<td>57</td>
<td>97</td>
<td>3</td>
<td>19</td>
<td>72</td>
<td>9</td>
</tr>
<tr>
<td>Family Derivatives</td>
<td>420</td>
<td>198</td>
<td>222</td>
<td>202</td>
<td>218</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>Total Clients Served</td>
<td>2253</td>
<td>993</td>
<td>1260</td>
<td>1984</td>
<td>269</td>
<td>354</td>
<td>1321</td>
<td>158</td>
</tr>
</tbody>
</table>

*Note: 81 percent of the 2,253 clients served are direct victims of trafficking; 19 percent were family derivatives.

Quality assurance of service providers
USCCB has created a standardized application process\(^8\) which requires interested agencies to complete a web-based application and undergo a programmatic and financial review. USCCB has found its measures to be successful in ensuring recruitment of quality service providers capable of providing comprehensive case management services to trafficking victims.

Quality assurance of physical care and fiduciary support to survivors of trafficking

USCCB has developed a standard of care founded in comprehensive case management to ensure that enrolled clients are eligible for the Per Capita Program, that quality case management services are provided, and that federal funding is spent appropriately.

HHS/ORR established the following criteria for eligibility for the Per Capita Program:

- client was screened by a professional trained in human trafficking who has determined the client’s experience qualifies him/her as a victim of human trafficking as defined by the TVPA, and
- requires comprehensive case management services related to the trafficking situation, and
- is certified or is pursuing certification by HHS/ORR through the filing of Continued Presence by federal law enforcement and/or filing of the T visa by an immigration attorney, or,
- is younger than 18 and is eligible or is pursuing a determination of eligibility by HHS/ORR.

In addition, those family members of trafficking victims that have derivative status through the T visa are also eligible for the Per Capita Program.

USCCB developed a screening form based on the one developed by HHS’s Rescue and Restore Campaign for identifying potential trafficking victims. This is an effective method for USCCB to document eligibility without collecting detailed information on the trafficking case.

USCCB’s quality assurance occurs through review of information provided monthly by subcontractors on standardized reports and through on-site monitoring. Such reporting allows USCCB to track the progress of clients. For example, information provided through these reports shows that at the time of discharge, 76 percent of clients were stabilizing, integrated, or thriving.

National point of contact for case coordination, consultation and education

Another benefit of the per capita structure is the ability to provide national, systemized training and education to an unlimited number of social services agencies. USCCB offers its subcontractors and other involved entities--such as law enforcement, attorneys and therapists--a national point of contact for case coordination, consultation, training, technical assistance, and resources. USCCB case management staff and partners, all graduate level professionals, provide coordination, training and consultation on cases from the point of initial identification through the processes of screening, rescue, emergency placement, and long-term placement and support. USCCB partners with Project Reach at the Justice Resource Institute’s Trauma Center for mental health technical assistance and training and with Catholic Legal Immigration Network (CLINIC) for legal technical assistance and training. In 2009 alone, USCCB and its partners provided training to 811 people and technical assistance to 1,556 people.

USCCB repeats its regular trainings each month for new subcontractors, new staff, or as a refresher. It offers introductory to advanced level training, as well as specialty trainings bi-monthly on topics based on subcontractor feedback and trends. Past specialty training topics include: Documenting Service Delivery, Safety Planning, and Building Trust with Survivors of Trafficking. In USCCB’s Year IV Program Evaluation, subcontractors were asked to evaluate USCCB’s support and assistance from April 2009-2010. Ninety-four percent of respondents stated that USCCB’s Specialty Trainings
Reflections: HHS Service Mechanism for Foreign National Survivors of Human Trafficking

helped them to provide better services to victims of trafficking. USCCB and its partners also provide on-site training to subcontractors, potential subcontractors, and community first responders. USCCB also has a Web site available to its subcontractors which contains program and informational materials.

**Efficient use of government funds**
The concept of HHS/ORR's program design is to build upon the capacity of existing social service agencies already providing comprehensive case management to other populations to serve survivors of trafficking. As trafficking is a hidden crime and trafficking case loads are unpredictable, HHS/ORR maximizes its available budget for trafficking survivor services by administering funding through a per capita mechanism.

<table>
<thead>
<tr>
<th>ORR Budget for Trafficking Victim Services</th>
<th>Contract Year 1: April 06- April 07</th>
<th>Contract Year 2: April 07 – April 08</th>
<th>Contract Year 3: April 08 – April 09</th>
<th>Contract Year 4: April 09 – April 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORR Budget for Trafficking Victim Services</td>
<td>$1,669,700</td>
<td>$2,113,624</td>
<td>$2,020,000</td>
<td>$2,947,300</td>
</tr>
<tr>
<td>USCCB Subcontractors</td>
<td>73</td>
<td>95</td>
<td>112</td>
<td>118</td>
</tr>
<tr>
<td>Percentage increase in geographic service coverage since 2005</td>
<td>62</td>
<td>71</td>
<td>75</td>
<td>76</td>
</tr>
<tr>
<td>Clients enrolled during contract year</td>
<td>461</td>
<td>642</td>
<td>552</td>
<td>912</td>
</tr>
<tr>
<td>Total clients served (cumulative)</td>
<td>461</td>
<td>933</td>
<td>1,254</td>
<td>1,900</td>
</tr>
<tr>
<td>Percentage increase in total client enrollments each year</td>
<td>n/a</td>
<td>51</td>
<td>26</td>
<td>34</td>
</tr>
</tbody>
</table>

**Funding for administrative and victim services to subcontractors**
USCCB designed the per capita rate based on HHS/ORR's annual funding ceiling for trafficking victim services. USCCB provides its subcontractors with an administrative rate and client expense budget in the total amounts of $900/30 days for certified victims and $1,300/30 days for pre-certified victims. In its calculations within the fiscal parameters set by HHS/ORR, USCCB also drew upon its experience administering trafficking victim services grants for HHS/ORR and DOJ/OVC in 2003-2006 as well as its decades of experience administering national case management programs for refugees, Cuban and Haitian entrants, and unaccompanied children.

A per capita mechanism assumes an agency has other funding sources for staff. Due to the unpredictability of trafficking victim case loads, a per capita mechanism allows a social service agency to flexibly assign staff to work with one or more trafficking survivor clients without having to operate and fund a separate anti-trafficking program.

**USCCB’s Recommendations for Trafficking Victim Services**

**Define goal of government-funded trafficking victim services**
Currently, the TVPA tasks programs funded by federal agencies to provide foreign national victims of a severe form of human trafficking benefits and services to “the same extent as an alien who is admitted to the United States as a refugee under section 207 of the Immigration and Nationality Act.”
Act” (Sec. 107 (B) (1) (a)). Thus, the indirect goal of federally-funded services for victims of trafficking is to provide assistance to the foreign national victim until s/he is enrolled in public benefits and connected to programs funded to provide Refugee Social Services (RSS)\(^9\) and Match Grant\(^{10}\) (the two latter programs are geared towards employment).

USCCB has found that in many areas of the U.S., RSS or Match Grant\(^{11}\) providers are not in close proximity to anti-trafficking survivors. USCCB subcontractors report that in areas where these programs are geographically available, they do not adequately address the unique and complex needs of survivors. In March 2010, USCCB distributed a survey to 37 subcontractors in the five regions with the highest caseload (California, Washington D.C./Northern Virginia, Florida, New York, and Texas). The survey assessed how often and to what degree of success subcontractors utilize RSS and Match Grant in their service provision to certified survivors of trafficking. With a 60 percent response rate, the survey achieved its goal of representing the views of a majority of subcontractors in these high volume areas. Analysis of the responses revealed that while many subcontractors were RSS and/or Match Grant providers and had some clients enrolled in these programs, the programs did not have the capacity to serve all the clients who were eligible. Some respondents mentioned that RSS was not suited to comprehensively meet the needs of a trafficking victim. Respondents also noted that there are a limited number of Match Grant slots available which are filled quickly by refugee clients. A conclusion to be drawn from this analysis is that although the vast majority of subcontractors are familiar with RSS and Match Grant, with many administering these programs in-house, they were unable to or declined to enroll trafficking victims due to enrollment capacity issues and the programs’ fundamental incongruity with the various needs of a survivor of trafficking, especially the needs unrelated to employment.

Achieving access to public benefits, RSS and Match Grant (the latter two employment-based service programs) does not address the need for case management coordination for victim services. Thus, USCCB recommends that Congress consider the complex needs of survivors of human trafficking as victims of a crime, to include the need for coordination around the criminal justice component of the criminal case and provision of trauma-informed services. By considering the comprehensive needs of victims of trafficking when defining goals for federally-funded services to trafficking victims in the TVPA, an appropriate measurement of program effectiveness can be achieved.

**Streamline all government data collection**

Although USCCB developed a uniform method for data collection, not all survivors of trafficking identified in the United States are accounted for because HHS and DOJ programs that serve trafficking victims do not use the same data collection method and not all survivors are served by the DOJ and/or HHS funded programs. In addition, some states fund services for survivors and may have their own data collection methods.

USCCB is interested in merging its web-based database with systems used by other federal and state funded agencies collecting data on trafficking victims for research and funding allocations. USCCB’s methodology maintains client confidentiality and it uses a coding system to ensure no duplication.

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\(^9\) http://www.acf.hhs.gov/programs/orr/programs/ref_social_prg.htm
\(^{10}\) http://www.acf.hhs.gov/programs/orr/programs/match_grant_prg.htm
\(^{11}\) http://www.acf.hhs.gov/programs/orr/programs/mgpss.htm
Increase funding for government-funded trafficking victim services

Over the last five years, HHS/ORR’s Trafficking in Persons office expanded its outreach programs and served more trafficking survivors each year. Yet, the increases to HHS/ORR’s Anti-Trafficking budget, authorized in the TVPA, were not appropriated; thus, HHS/ORR did more with the same level of funding. HHS/ORR was compelled to limit client eligibility and the length of time victims of trafficking are served by the Per Capita Program. In the past four-and-a-half years, HHS/ORR could not enroll all of the survivors requesting assistance in its Per Capita Program. USCCB ensured no clients eligible for the Per Capita Program were un-served by staggering enrollment requests to HHS/ORR and by using more than $429,000 of USCCB’s funds to cover service periods that HHS/ORR was unable to authorize. This situation made budgeting for client needs difficult for the subcontractor, thus interrupting effective delivery of services to clients.

USCCB recommends that Congress authorize and appropriate $17 million to HHS for trafficking victim services. USCCB believes this increased funding level is necessary, regardless of the mechanism of service delivery or service provider, to ensure trafficking victims receive appropriate services. In addition, USCCB recommends that DOJ/OVC and its Budgeting Office improve coordination internally and with its grantees to shorten the time when an awarded anti-trafficking grantee can access its budgeted funds. HHS/ORR allowed DOJ/OVC anti-trafficking grantees to enroll their clients into the Per Capita Program while they waited for DOJ/OVC to permit them to draw down funds. This put an incredible financial strain on HHS/ORR’s funding, and contributed to the speed at which enrollment slots in the Per Capita Program were utilized.

Expand eligibility for benefits and services to the extent as a refugee to all victims of trafficking and to family members entering the U.S. as recipients of humanitarian parole

HHS/ORR’s criteria for determining eligibility of trafficking victims for public benefits, refugee social services, and the Per Capita Program is based on language in Section 107 (E) of the TVPA. This section explains that certification is available to a victim who has made a “bona fide application” for a T visa, or, “whose continued presence in the United States the Attorney General is ensuring in order to effectuate prosecution of traffickers in persons.”

Certification refers to the mechanism HHS/ORR created through which victims of trafficking can access public benefits, RSS and Match Grant. Currently, HHS/ORR issues certification letters to foreign national adults who have either received a temporary stay of deportation called Continued Presence from the U.S. Department of Homeland Security, a “bona fide” determination of a T visa or a T visa from the U.S. Citizenship and Immigration Services (USCIS). Through the TVPRA 2008, HHS/ORR has the authority to determine foreign national child survivors of human trafficking eligible for public benefits and RSS without their receipt of Continued Presence or the T visa. However, adult and child victims of human trafficking who are not pursuing Continued Presence, and who are pursuing alternate forms of immigration relief, such as the U visa or Special Immigrant Juvenile Status (SIJS), are not eligible for HHS/ORR certification. This means they are not eligible for the same public benefits, RSS and Match Grant programs as refugees, and, their service period in the Per Capita Program is restricted or ended upon notice that another form of immigration relief will be pursued. (An eligibility requirement set by HHS/ORR for the Per Capita Program is that clients are pursuing or have received certification.)

12 http://www.state.gov/documents/organization/10492.pdf
USCCB recommends that HHS expand its certification to include individuals who are human trafficking victims but who receive another form of immigration relief. This would allow all victims of trafficking access to the same public benefits as a refugee, RSS, Match Grant and HHS-funded trafficking victim services.

In addition, only those family members that have derivative status through the T visa are eligible for enrollment in the Per Capita Program. However, many family members are vulnerable in their home country due to urgent safety concerns and vulnerabilities (e.g. parent of child victim is in the home country or the child of the adult victim is in the home country). The U.S. government is able to bring these family members to the U.S. under Humanitarian Parole prior to their receipt of T visa derivative status; yet, they are not eligible for any government-funded assistance nor are work permits authorized. This increases the vulnerability of the trafficking victim and the paroled family member. USCCB recommends that HHS expand its eligibility criteria to include family members brought to the U.S. through Humanitarian Parole to reunify with a victim of trafficking. These family members are in this status temporarily and are not numerous; thus, fiscal limitations should not be a concern.

**Allow HHS to provide funding for legal services**

HHS/ORR has limited the use of its funding for immigration legal services for survivors of trafficking. As immigration legal services are a key case management need for survivors of trafficking, particularly for adult victims working towards the legal requirements that would make them eligible for the HHS/ORR Certification Letter, USCCB believes it should be an allowable victim services expense. Locating attorneys willing to provide legal services to trafficking victims on a pro-bono basis has posed a challenge to many subcontractors and creates significant delays in the legal case process.

**Create national coordination and service capacity for child trafficking victims**

Over the years, USCCB has drawn attention to the unequal assistance provided to foreign national child trafficking victims, in the areas of victim identification, legal custodianship, and capacity of services. Domestic child trafficking cases face similar inequalities.

**Victim Identification**

The U.S. Department of State estimates that approximately 50 percent of the foreign national trafficking victims in the U.S. are children, yet only 308 children have been “determined eligible” by HHS/ORR. This number accounts for a little more than 10 percent of all victims certified/determined eligible by HHS/ORR over the past ten years. A 2008 report on child survivors of sex and labor trafficking from Georgetown University’s Institute for the Study of International Migration (ISIM) explored the discrepancy of potential child cases referred to HHS/ORR and those determined eligible for assistance as child victims of trafficking. ISIM found that between 2004 and 2007, USCCB and LIRS referred an estimated 808 to 2,308 children (from 151 cases), who they believed to be victims of trafficking, to the federal government for determination of eligibility. Only 23 children (14 of the 151 cases) were determined eligible for assistance as trafficking victims by

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Reflections: HHS Service Mechanism for Foreign National Survivors of Human Trafficking

HHS/ORR. Of the remaining 787 to 2,287 child victims who were not determined eligible, ISIM found some of the following obstacles: “... federal law enforcement agents or US attorneys were not sympathetic to the children’s plight and/or deemed them victims of smuggling not trafficking...the children were reluctant to disclose detailed information about their experiences which led to insufficient evidence of the crime of trafficking...lack of sufficient evidence to support the endorsement of trafficking benefits led to the children being placed in removal proceedings and receiving deportation orders.”

As a national trafficking victim service provider for the past eight years, USCCB has witnessed some of the obstacles to identification, listed above, first hand. USCCB recommends the government increase resources for comprehensive training programs for federal and local law enforcement, non-governmental organizations and state service providers (to include educators, child welfare personnel, juvenile justice systems, social service providers and medical personnel) on identification of child trafficking victims and developmentally appropriate screening methods. Further, USCCB recommends decreasing reliance on pro bono attorneys and increasing funding available for paid legal providers to screen potential victims of child trafficking.

Legal Custodianship
Locating emergency placements for recently escaped or rescued unaccompanied, foreign national child victims of trafficking is a major challenge due to the need to establish legal custodianship. Emergency placements able to establish legal custodianship for unaccompanied, foreign national children include youth shelters funded by HHS/Family and Youth Services Bureau (FYSB), state child welfare systems (i.e. Child Protective Services), and shelters funded by the ORR/Division of Unaccompanied Children Services (ORR/DUCS).

Although HHS/FYSB shelters are recommended by HHS/ORR as an emergency placement option for unaccompanied, foreign national child victims of trafficking, it is USCCB's experience that few of these shelters will accept this population. In fact, a USCCB staff member was told erroneously by one HHS/FYSB shelter that a child must be eligible for Medicaid to be eligible for their shelter. For HHS/FYSB shelters to be a viable option, their mandate to serve unaccompanied, foreign national children must be clearly stated.

State child welfare systems are mandated to provide emergency placements for children who have been abused, abandoned, or neglected by their caretakers; yet, the staff who screen cases often interpret this mandate strictly, excluding children under the “care” of a trafficker. Some states, such as Florida, have changed their regulations to explicitly state that foreign national child victims of trafficking are eligible for state child welfare services. USCCB recommends that all states follow suit, and that HHS provide technical assistance to the states to achieve this.

Finally, in order to be placed in an ORR/DUCS shelter, child victims of trafficking must be put in deportation proceedings. Coupled with the problems that these shelters are often crowded, and that there are no paid legal services available, this puts the child in an especially vulnerable situation as there is potential the child will be deported before s/he has a chance to communicate the trafficking situation to shelter staff or to an attorney. Screening for trafficking by ORR/DUCS has improved and more children have been identified from this system than any other. USCCB recommends the U.S. government replicate the streamlined education and screening process, and not place any known trafficked children into the ORR/DUCS facilities.
Reflections: HHS Service Mechanism for Foreign National Survivors of Human Trafficking

Capacity of Services
Arrangement of appropriate services for child survivors of trafficking, regardless of nationality, differs significantly from adult trafficking cases and requires child welfare expertise. Most often, non-governmental service providers that have the experience and expertise to care for adult survivors of trafficking are not child welfare agencies, and thus, are inadequately trained on child welfare and the special needs of child survivors. On the other hand, the national and state child welfare and juvenile justice agencies with experience and expertise in caring for children are inadequately trained in identifying and serving survivors of trafficking. Further, there is no entity that has the authority to assist and coordinate the child welfare and trafficking matters in these complex cases. Increased resources and training on best practices for serving foreign national survivors of trafficking and child welfare matters is necessary to increase the capacity of anti-trafficking service providers and federal and state foster care systems to care for child survivors of trafficking.

USCCB recommends that the government prioritize child victims of trafficking as a population needing more attention. Both foreign-national and domestic populations are in need of increased identification, trafficking-specific funded services and programs, and uniform training for child welfare professionals.

A national point of contact to provide child trafficking case coordination, consultation, and training to those agencies in a position to identify and serve child victims of trafficking would be a start to narrowing knowledge gaps that currently impede identification of child trafficking victims and/or result in inadequate care. USCCB recommends that policy-makers, as well as federal and state programs that are in a position to identify or serve child victims of trafficking, reference the findings and recommendations made by ISIM in the above-mentioned report. Ultimately, the goal of such initiatives would be to build national capacity for effective response to child trafficking, and increase the number of foreign national child survivors of trafficking identified and served.

Increase length and flexibility of services and access to the HHS trafficking victim services
HHS tasks its Office of Refugee Resettlement (HHS/ORR) with issuing access to refugee social services and public benefits to certain types of trafficking survivors (i.e. those that receive federal law enforcement's Continued Presence or a T visa). Locating HHS's coordinated response to anti-trafficking efforts within ORR limits its ability to effectively serve all survivors of human trafficking.

Increasing length and flexibility of services
In its effort to use its budget efficiently in response to the growing number of cases, HHS/ORR found it necessary to set limits on service period lengths for trafficking victims to allow for enrollment for the greatest number of victims possible into the Per Capita Program. Although USCCB understands that limited funding to HHS/ORR for this program is a reality, it believes each client has different needs and circumstances which make it difficult to prescribe one service period length for all clients. USCCB's experience is that providers of trafficking victim services work effectively to help clients achieve self-sufficiency; yet, this process is sometimes delayed by circumstances beyond their control.

Over the past four-and-a-half years, USCCB has identified the following factors which can contribute to a long period of services before and after a victim of trafficking is eligible for certification by HHS/ORR.
Reasons for long pre-certified service periods

Training needed: multiple entities are involved in the identification and screening of survivors of human trafficking, with varying levels of training.

Trauma and mental health: trauma affects how quickly and how well a client can relay his/her story and sometimes, interviews must be postponed or ended early when the client becomes re-traumatized. The story of the trafficking situation is not always relayed chronologically, or completely.

Language barriers: foreign-national victims of trafficking often do not speak English, and it is often challenging finding a trusted and trained interpreter. Thus, it often takes time to get the entire trafficking story.

Safety concerns: keeping the client safe is of utmost importance, and thus, the interview process is often delayed to address immediate safety concerns.

Delays in the filing of Continued Presence by law enforcement agents

Law enforcement training needed: subcontractors have reported that local federal law enforcement agents are not always trained on trafficking and/or how to file for Continued Presence for a victim of trafficking. This is of special concern in areas of the country where very few victims are identified — law enforcement may not have any prior experience in dealing with a trafficking victim.

Limited funding for immigration attorneys: with the limited number of pro bono attorneys available to represent a trafficking victim’s best legal interest, the process of establishing a relationship with the client and then advocating for Continued Presence with law enforcement takes time.

No federal prosecution: subcontractors have reported that sometimes, when DOJ decides not to move forward with prosecution, law enforcement will decide not pursue an investigation, and thus, law enforcement will not file Continued Presence.

Concern that a certified victim’s eligibility for public benefits will harm the prosecution of the trafficker: sometimes, law enforcement agents delay the filing for Continued Presence at the prosecutor’s request due to the fear that the trafficker’s defense attorney will use the victim’s access to public benefits against the victim. Subcontractors have reported this to national federal law enforcement, who has said this argument would not stand up in court.

If the T visa is the only route towards HHS certification

When a victim is unable to obtain Continued Presence, filing for and receiving a bona fide T visa is the only other route for certification. Case Managers have reported that this route often proves difficult because of limited funding available to immigration attorneys and limited access to pro bono services.

The formulation for the T visa application response is complex and can take months to complete. This time can increase when waiting for law enforcement to complete the 914b Law Enforcement Endorsement Form.

Once the application for the T visa has been filed, receipt of the T visa can be delayed if the United States Citizenship and Immigration Services (USCIS) send Requests for Evidence.
Below are contributing factors for long service periods for certified adults or children who are determined eligible as survivors of trafficking:

- financial and physical support during ongoing law enforcement investigations
- preparation and support (e.g., additional counseling) in advance of the victim/witnesses testimony at the criminal trial of the trafficker
- financial support for the victim/witness during the criminal trial of the trafficker (e.g., travel expenses, rent and support for basic needs due to the client’s inability to work during criminal trial)
- medical, mental, or dental health issues that were unable to be addressed during the pre-certified phase due to lack of public insurance
- lack of stable, affordable housing
- coordination and planning for family derivative arrival

These issues are often not addressed by other community programs, RSS or Match Grant programs. Additionally, these programs often lack training, language capacity, and/or staff to provide the type of case management needed by trafficking survivors as victims of crime. USCCB is concerned about the effects of limited service periods on survivors, in particular, the potential that the survivor may be vulnerable to re-exploitation.

**Access to HHS trafficking victim services program**

DOJ/OVC recently awarded three anti-trafficking grantees authority to serve “domestic” victims of human trafficking. However, there are many “domestic” victims of trafficking who are identified in areas where they have no access to services specific for trafficking victims. USCCB recommends that HHS expand eligibility of its trafficking victim service programs to include all survivors of human trafficking, regardless of their legal status (e.g., U.S. citizens, Lawful Permanent Residents, refugees, parolees, U visa recipients).

This concern for appropriate care for survivors emphasizes the need for increased funding for trafficking victim services, flexibility in service periods, and increased access to programs. USCCB recommends HHS and DOJ develop and provide services to all survivors of trafficking, regardless of nationality and cooperation with law enforcement, for at least one year. As the main federal and state entity that provides health and human services, HHS must move beyond the role of providing access to public benefits, Match Grant and RSS, and develop a coordinated response, including programs and services for all victims of human trafficking in the U.S.

**Increase support for crime victims who are government victim/witnesses during criminal trials**

One of the long-term needs of survivors of human trafficking is supportive counseling, coordination and financial assistance during the criminal prosecution of the trafficking. The issue of victim-witnesses needing care and support during the trial phase should be of importance to DOJ, who is responsible for prosecuting traffickers. However, DOJ/OVC-funded trafficking services end upon the client’s receipt of certification/eligibility from HHS/ORR. USCCB recommends that DOJ have financial assistance and trial case management available to its victim witnesses.

**Flexibility of fund distribution**

Currently under the Per Capita Program, funds can only be reimbursed from the date the government authorizes the enrollment of a client. This poses difficulty for social service agencies preparing for and responding to law enforcement raids or when moving clients for safety reasons.
USCCB recommends that law enforcement offer “emergency funds” to social service agencies, who must prepare for housing and supplies in advance of a raid. HHS should also include an “emergency fund” to support such emergency situations prior to the authorized enrollment of a client in the program.

**Conclusion**

Since the passage of the TVPA 10 years ago, the U.S. has made significant progress in its response to the crime of human trafficking. In particular, the U.S. has developed a solid foundation in the realm of trafficking victim services. The federal government has been able to maximize its funds to build a national network for response and provide direct service agencies with a national contact for education and consultation through a per capita mechanism administered by a mission-driven agency with established relationships and expertise. A centrally-administered program ensures efficiency and the ability for national, standardized data collection. By partnering with an NGO with experience in administering and monitoring federal programs, the government ensures accountability of funds and quality service delivery.

In its 30-year history of service provision to vulnerable migrants, USCCB has found a public/private partnership to be essential in fulfilling its mission to serve vulnerable populations. The government benefits from the unique position of the NGO to identify gaps in service, pool resources and advocate for necessary programmatic and legislative improvements. USCCB recommends the government continue to seek the expertise of NGOs as it focuses on improving trafficking victim services.
HHS Human Trafficking Program 2003-2005
(prior to Per-Capita Contract)

Rescue & Restore Coalitions, Street Outreach Grantees, Intermediary Contractors and Regional Grantees

Updated March 2008
HHS/USCCB Anti-Trafficking in Persons Program

USCCB Per Capita Subcontractors (2009-2010)

Updated August 2010

New Subcontractors
Returning Subcontractors
HHS /USCCB Anti-Trafficking in Persons Program

USCCB Per Capita Subcontractors (August 2010)

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