HUMAN TRAFFICKING IN INDIANA:

CONSIDERATIONS FOR SURVIVOR-CENTERED RESPONSE AND REFERRALS IN A HEALTHCARE SETTING

Compiled by the IPATH Taskforce Healthcare Working Group
TRAINING

Objectives

• Define human trafficking under Federal and IN Statute;
• Recognize common vulnerabilities/circumstances that contribute to victims feeling trapped;
• Define trauma-informed, survivor-centered in a healthcare setting;
• Learn to recognize red flags of human trafficking;
• Review common service needs and referral considerations;
• Outline T Visa requirements and benefits;
• Highlight helpful resources for protocol formation and key community partnerships.
A COLLABORATIVE APPROACH

IPATH Co-Chairs: ICESA & USAO

Core

Regional Task Forces

Victim Services
- Adults
- Youth
  - Working Group: Outreach to Vulnerable Populations

Law Enforcement
- Youth
  - Working Group: LE Trainings

Labor Trafficking

CAPE (Community Awareness, Prevention, and Education)
- Healthcare
- Other working groups & leadership opportunities available
- Youth
IPATH TASKFORCE MISSION

Utilize a survivor-centered approach to more effectively Prevent, Detect, and Prosecute Human Trafficking in Indiana; and Empower and Support Survivors
HUMAN TRAFFICKING AND THE LAW
The TVPA was reauthorized through the Trafficking Victims Protection Reauthorization Act (TVPRA) of 2003, 2005, 2008, and 2013. Under U.S. federal law, “severe forms of trafficking in persons” includes both sex trafficking and labor trafficking.

**Prevention**
- Public Awareness, Outreach and Education

**Protection**
- T & U Visas, Certification, Benefits and Services to Victims

**Prosecution**
- Created Federal Crime of Trafficking, New Law Enforcement Tools and Efforts

IC 35-42-3.5-1 Promotion of human labor trafficking

Sec. 1. A person who, by force, threat of force, coercion, or fraud, knowingly or intentionally recruits, harbors, provides, obtains, or transports an individual to engage the individual in labor or services commits promotion of human labor trafficking, a Level 4 felony.


IC 35-42-3.5-1.1 Promotion of human sexual trafficking

Sec. 1.1. A person who knowingly or intentionally uses force, threat of force, coercion, or fraud to recruit, entice, harbor, or transport an individual with the intent of causing the individual to:
(1) marry another person;
(2) engage in prostitution; or
(3) participate in sexual conduct;
commits promotion of human sexual trafficking, a Level 4 felony.

As added by P.L.144-2018, SEC.21.
Indiana Law

IC 35-42-3.5-2 Restitution orders

IC 35-42-3.5-3 Civil cause of action

IC 35-42-3.5-4 Rights of alleged victims

Child in Need of Services (CHINS 3.5) available; guardian/parent relationship unnecessary for this CHINS

ANY MINOR ENGAGED IN COMMERCIAL SEXUAL CONDUCT IS A VICTIM OF SEX TRAFFICKING UNDER INDIANA LAW.

It is not a defense that the minor consented to engage in commercial sex.
Failure to provide human trafficking information IN Code § 25-1-9-4.5 (2018)

Sec. 4.5. (a) If a practitioner has been presented with evidence that, if presented to a practitioner of a similar background and training, would cause the practitioner to believe that a patient is a victim of human trafficking, the practitioner shall provide information to the patient concerning available services and resources, including the telephone number for the National Human Trafficking Hotline.

(b) In addition to section 4 of this chapter, a practitioner is subject to the exercise of the disciplinary sanctions under section 9 of this chapter if, after a hearing, the board finds that the practitioner failed to provide information required by subsection (a).

AMP MODEL: 3 ELEMENTS OF TRAFFICKING

ACTION

Recruiting, Harboring, Enticing, Transporting, Providing, Obtaining, Patronizing, or Soliciting, a person

MEANS*

Force, Threat of Force, Fraud, or Coercion

PURPOSE

EXPLOITATION of Labor, Services, or Commercial Sex

In 2008, Congress amended (expanded) § 1589 by adding 1589(c)

(c) In this section:

(1) The term “abuse or threatened abuse of law or legal process” means the use or threatened use of a law or legal process, whether administrative, civil, or criminal, in any manner or for any purpose for which the law was not designed, in order to exert pressure on another person to cause that person to take some action or refrain from taking some action.

(2) The term “serious harm” means any harm, whether physical or nonphysical, including psychological, financial, or reputational harm, that is sufficiently serious, under all the surrounding circumstances, to compel a reasonable person of the same background and in the same circumstances to perform or to continue performing labor or services in order to avoid incurring that harm.
Human Trafficking Power and Control Wheel
Examples

### Force
- Battering
- Threats with Weapons
- Sexual Abuse/Assault
- Denial of Medical Care
- Isolation
- Torture
- Kidnapping
- Confinement
- Starvation
- Sleep Deprivation

### Fraud
- Promise valid immigration documents
- Promise sponsorship
- Victim told to use false travel papers/work outside visa class
- Fiancé/Student Visas
- Lying about nature of job/living/work conditions, See: Guestworker H2A/H2B employment contracts
- Wooing into Romantic Relationship

### Coercion
- Threat of harm to victim/family/loved ones
- Threat of arrest or deportation
- Debt Bondage/Illegal Fees: Visa/Living/Recruitment/Migration process
- Photos in Illegal Situations
- Induced to commit crimes
- Photos in humiliating situations
- Substance use/withdrawal
- Withholding ID/Travel Docs
- Scripted/Restricted Communication
- Reputation-based threats
DESCRIPTIONS OF THOSE INVOLVED
ROLE OF HEALTHCARE PROVIDERS

Healthcare identified as #3 of top 5 points of contact with victims of HT

As a provider, you are in a unique position to recognize, build rapport with, and refer victims.

Points of contact with healthcare represent rare opportunities for trauma-informed, patient-centered

• Victim identification,
• Positive system interaction,
• Referrals, and
• Interventions.

http://polarisproject.org/sites/default/files/2017NHTHStats%20%281%29.pdf
WHAT ARE WE LOOKING FOR?

WHY AREN'T WE SEEING IT?
RECRUITMENT

• Word of mouth
• Newspaper/Internet job ads
• Fake employment agencies/ads
• Front businesses
• Grooming
• Acquaintance or family
• Abduction

• 3rd Party Agents/Agencies:
  • Employment agencies for migrant/seasonal work in the US & visa sponsorship
  • Staffing agents
  • Farm Labor Contractors
  • Migrant Smugglers
  • Migration (or other) debt
Understanding the Organization, Operation, and Victimization Process of Labor Trafficking in the United States

LABOR TRAFFICKING
VICTIM CHARACTERISTICS

71% arrived with **valid nonimmigrant visas**

71% arrived on **airplanes**

69% unauthorized by the time **they escaped**

- Domestic Workers (G5, A3, B1/B2 and NATO7 visas)
- Agriculture Workers (H2A visas)
- Restaurant & Hospitality Workers (H2B visas)
- Construction Workers (H2B visas)
- Carnival Workers (H2B visas)

VULNERABLE POPULATIONS

- Youth
- Folks without access to stable housing
- Sex Industry Workers & Domestic Workers
- Folks with disabilities
- Migrant/Seasonal workers; Workers with temporary work visas
- Recently Resettled Refugees
- Folks from isolated/impoverished/underserved/oppressed communities (Racial, ethnic, or religious minorities; LGBTQI+; Indigenous communities)
- Folks with a personal or family history of abuse, neglect, substance abuse
- Undocumented workers; Unauthorized workers (e.g.: visitor or student visa)
- Workers who work in hazardous/dangerous industries
- Workers whose families depend on their remittances to survive
Survivor-Centered Anti-Trafficking Work:
Contextualizing the ‘reasonable person standard’

- Trauma-informed
- Intersectional***
- Culturally-sensitive
- Collaborative
- Multi-disciplinary
- Multi-dimensional

***See Kimberle Crenshaw
IMPACT OF TRAUMA, TRAUMA-INFORMED CARE, & RED FLAGS

- Behavioral
- Psychological
- Physical
- Social/Relational
- Economic
- Long-term Consequences

CONSIDER THE TRAUMAS EXPERIENCED BEFORE AND DURING EXPLOITATION
Objectives of Trauma Informed Care

- Aims to avoid re-victimization.
- Appreciates many problem behaviors began as understandable attempts to cope.
- Strives to maximize choices for the survivor and control over the healing process.
- Seeks to be culturally competent.
- Understands each survivor in the context of life experiences and cultural background.
HEALTHCARE PROVIDER’S ROLE IN TRAUMA INFORMED CARE

- Need to understand our own prejudices (prostitution, patient appearance, drug use, immigration status, etc.)

- Real discrimination

- Perceived discrimination

- Victims have an inherent lack of trust in system-associated personnel (versus other patients who generally trust healthcare providers)
THE VICTIM IN TRAUMA INFORMED CARE

● Victim needs to know exactly what is going to happen – go above and beyond in explaining what and why

● Victim has been subjected to unpredictable and uncontrollable events

● Promote patient decision-making to return a sense of self-control – offer to discuss safety/safety plan

● Change your framework: “What happened to you?” versus “What is wrong with you?”

● Strengths-based, Culturally Sensitive: Recognize resiliency and successful survival techniques where others see antisocial or harmful/unhealthy behaviors
RED FLAGS FOR HEALTHCARE

- Exhibits behaviors indicating trauma--including hyper-vigilance or paranoia, anxiety, submission, inability to make eye contact, numerous inconsistencies in story, etc.
- Signs of abuse: injuries, bruises, burns, or other wounds in various stages of healing
- Inability to access dental or health care; poor dental hygiene; signs of malnutrition or dehydration; illness resulting from untreated respiratory, STI, or UTI related-issues
- Work-related injuries (with no workman’s comp/insurance)
- Lack of knowledge about where they are and why and/or frequent relocation
- Someone else has control over identity documents/visa work
- Not in control of own money
- Potential victim is accompanied by another person who seems controlling and/or insists on speaking for the victim; Scripted or restricted communication
- Possession of multiple cell phones, hotel rooms keys, marbles, poker chips
- Engaged in commercial sex
- Chronic runaway or homelessness
- Residing in degraded, unsuitable living conditions
- Been threatened with detention/deportment; family threatened
- Not allowed to leave their place of work/ must ask permission to eat, sleep, use toilet
- Not paid for their work or services or only paid in tips
WHY DON’T TRAFFICKED PERSONS LEAVE?

• Trafficker has a strong psychological/physiological hold
• Trusted someone who lied to them; still hopeful situation will improve
• May have nowhere else to go
• Believes they have a real debt to pay and takes this very seriously
• Doesn’t know their legal rights and/or has been lied to about their rights
• Isolated – no meaningful social network, language barriers
• Embarrassed about what is happening to them
• Afraid of detainment or deportation
• Distrust of law enforcement
• Their documents have been taken or have expired
• This current exploitative situation is “better” than the one they came from
• Can’t see a way out; threats or danger to family back home

It is our responsibility to protect and assist people being exploited.
REFERRALS

connecting with regional and statewide survivor-centered, trauma-informed, culturally sensitive resources and services across disciplines
REFERRALS FOR DIRECT SERVICE PROVISION

• **Survivor-centered:** survivor-led services, inclusive, culturally sensitive
• **Multi-disciplinary:** collaboration among civil and criminal law enforcement & legal services; mental health, healthcare, housing, and case management
• **Trauma-informed:** utilize creative and dynamic therapeutic practices, understand the impact of trauma on the brain and body, expect behavioral effects
• **Strengths-based:** acknowledge, honor, and build on resiliency factors
• **Rights-based:** establishes rights and responsibilities
• **Empowerment-based:** promotes autonomy & self-sufficiency in all aspects of life

**Considerations on Rights and Empowerment**

Are they aware of their legal rights and responsibilities as a victim of crime?
   As a minor? As an adult? As a citizen? As a non-citizen?
Are they aware of resources available to them? (service provision, protection, legal services, option to call National HT Hotline)
Are they able to access the resources available to them on their own?
Are LE victim specialists/local victim advocates aware of the rights and opportunities afforded foreign born victims of trafficking?
COMMON HUMAN TRAFFICKING SERVICE NEEDS

• Basic needs (i.e. medical attention, food, toiletries, clothing)
• Emergency shelter and transitional housing
• Legal, immigration, and visa services, (including law enforcement certification for U and T visas)
• Ongoing culturally-sensitive support to deal with the effects of trauma (e.g.: counseling, therapy, case management, substance abuse treatment, etc)
• Community connections
• Life skills, educational, and vocational training
• ESL training
• Interpretation
• Long term housing/placement
Survivor-Centered Anti-Trafficking Work

ASKS SURVIVORS: WHAT DOES JUSTICE MEAN TO YOU?

Services/Care regardless of situation
Leave abusive situation
Fresh Start; Access; Opportunity
Criminal prosecution of trafficker
Civil suit
Humanitarian Immigration Relief
T VISA (USCIS FORM I-914)

Requirements

- Report trafficking to law enforcement
- No certification from law enforcement required but having one is better for the case. Can get another special status pre-T visa called Continued Presence.
- Victim of a severe form of human trafficking
- Would suffer hardship if forced to return to home country
- Requires presence in the US on account of the trafficking
- Generally takes 7-9 months for approval (U visa can take > 8-10 years)

Benefits

- 4-year visa to live in U.S., allowing work authorization, SSN, driver’s license
- Eligible for many public benefits, FAFSA, TANF, SNAP, Medicaid, etc.
- Can apply for permanent residency after year 3 of visa, or some circumstances, before
- Can apply for immediate family members in and outside U.S.
WHAT IS CONTINUOUS PRESENCE (CP)?
CP AFFORDS TRAFFICKING VICTIMS A LEGAL MEANS TO TEMPORARILY LIVE AND WORK IN THE US (EAD)

WHO CAN APPLY FOR CONTINUOUS PRESENCE (CP)?
Federal law enforcement officials:
HSI—Homeland Security Investigations
FBI
US Attorney’s Offices
Department of State

WHAT ABOUT STATE LAW ENFORCEMENT?
All CP applications are submitted to the ICE Law Enforcement Parole Branch (LEPB). When state or local law enforcement officials identify a victim of human trafficking, they should coordinate with their federal law enforcement partners to submit an application for CP. An application for CP should be submitted immediately upon identification of a victim of human trafficking.
**T & U VISA CONTRASTED**

**T VISA**
- No Law Enforcement Cert. Required
- 7-9 month processing time
- Must be victim of severe form of trafficking
- Must prove hardship to return to country of origin
- Eligible for C.P. if working with criminal law enforcement
- Temporary immediate financial assistance available to survivors—pre-visa issuance
- Must be present in the U.S. to apply

**U VISA**
- Law Enforcement Cert. Required
- 8-10+ year processing
- 1-2 year wait for initial work permit
- Must be victim of a particular type of crime enumerated by statute
- Must show physical or emotional injury
- Can apply from outside the U.S.
What’s Next?

Looking Inwards

1. HT Protocol formation at your agency/site and/or throughout your network
2. Identify Protocol Response Team
3. Disseminate red flags and protocols

Partnerships

✓ Identify Community Partners for referrals (shelter, interpreters, advocates, legal, social, mental health and other social services, etc)
✓ Identify LE Partners
HELPFUL RESOURCES

- HEALTH, EDUCATION, ADVOCACY, LINKAGE (HEAL): https://healtrafficking.org/
- Coalition to Abolish Slavery and Trafficking (CAST) LA: http://www.castla.org/
- Human Trafficking Legal Center: http://www.htlegalcenter.org/
- Request FREE HT Materials from HSI's Blue Campaign: https://www.dhs.gov/blue-campaign/request-materials

Indiana Protection for Abused and Trafficked Humans (IPATH) Taskforce
Webpage hosted by ICESA: https://indianacesa.org/human-trafficking/
IPATH Taskforce Coordinator: Kate Kimmer
   Email: Kate@indianacesa.org   Office Phone: 317.624.2370
If you believe someone is a victim of Human Trafficking:

If there’s immediate danger, call 911

National Human Trafficking Hotline
Call - 888-3737-888,
Text - BeFree(233733)

If a minor is involved also contact the Indiana Child Abuse and Neglect Hotline
1-800-800-5556
Use the term ‘human trafficking’