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What is This?

Identifying Domestic and International Sex-Trafficking Victims During Human Service Provision

Rebecca J. Macy[1] and Laurie M. Graham[2]

Abstract

Children, youth, and adults of both genders are sex trafficked into and throughout the United States every day. Regrettably, little attention has been given to how human service providers might identify the sex-trafficking victims they are likely to encounter. To address this knowledge gap, the authors review 20 documents with the aim of detecting and synthesizing service identification recommendations in the scientific literature, government reports, and documents produced by organizations working with sex-trafficking victims. The review shows consensus regarding identification recommendations, including (a) trafficking indicators, (b) victim interaction strategies, (c) immediate response strategies, and (d) child-specific information. The review also shows consensus regarding screening questions that are important for service providers to use in identifying sex-trafficking victims. These questions relate to the victims' safety, employment, living environment, and travel and immigration status in addition to specific questions used with children and youth. The review results offer human service providers a preliminary set of screening strategies and questions that can be used to identify sex-trafficking victims in the context of human services. Building on the review findings, the authors offer policy and research recommendations.

Children, men, and women are sex trafficked into and throughout the United States every day. Regrettably, research has shown that sex-trafficking victims are infrequently identified by service providers who may have contact with these victims (Clawson, Dutch, Salomon, & Grace, 2009; U.S. Department of State [USDS], 2010). This under identification means that many victims are not able to access services and escape the horrors of trafficking.

Currently, no uniform system of data collection exists for tracking either the numbers of trafficking victims identified or the various efforts of law enforcement agencies targeted toward trafficking (Logan, Walker, & Hunt, 2009; USDS, 2010). Thus, the incidence and prevalence of sex trafficking in the United States remains largely unknown. The USDS's current conservative estimates of human trafficking for any reason (e.g., forced labor, prostitution) suggest between 14,500 and 17,500 individuals are trafficked annually into the United States (Clawson et al., 2009). However, even less is known about domestic sex trafficking (i.e., the trafficking of U.S. citizens within the country). Although the scope of sex trafficking is unclear, there is consensus that the trafficking of persons into and throughout the United States may be more prevalent than suggested by these initial findings (Caliber, 2007; Clawson et al., 2009).

This review adopted the USDS's (2010, p. 8) definition of sex trafficking: "sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age." Consistent with the USDS (2010), we note that prostitution by willing adults is not considered human trafficking. However, adults who are "coerced, forced, or deceived into prostitution" are considered trafficking victims (USDS, 2010, p. 9). Likewise, adults who are "maintained in prostitution through coercion" are also considered trafficking victims (USDS, 2010, p. 9), regardless of whether they initially entered into prostitution willingly.

Research has shown that human service providers in a variety of settings were likely to encounter sex-trafficking victims (Clawson et al., 2009; Logan et al., 2009). Beyond service settings such as sexual assault agencies in which encountering sex-trafficking victims might be anticipated,

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service providers are likely to encounter trafficking victims among clients of agencies that provide services related to child advocacy, child protection and welfare, criminal justice, domestic violence, health care, homelessness outreach and shelter, juvenile justice, and victim advocacy. Providers in any of these service settings might encounter sex-trafficking victims while delivering usual services. For example, adult or youth trafficking victims might be able to escape perpetrators and seek help at a domestic violence or homeless shelter. Child protection workers may be called to respond to sexual abuse cases that are actually sex-trafficking situations. Providers in community clinics may encounter trafficking victims who are receiving treatment for sexually transmitted infections, and mistakenly identify trafficking victims as victims of partner violence based on the type or history of physical injuries.

To avoid such misidentification and to help victims once they are identified, an emerging body of literature has focused on developing best practices for the delivery of aftercare services to trafficking victims (e.g., Busch-Armendariz, Nsonwu, & Cook, 2011; Clawson & Dutch, 2008a; Fong & Cardoso, 2010; Macy & Johns, 2011). In addition, the literature has given some attention to the development of community and organizational aftercare services (Boxill & Richardson, 2007). Unfortunately, less attention has been given to developing protocols or guidelines to assist service providers in identifying sex-trafficking victims among their clients. sex-trafficking victims could appear for services in any of the above mentioned service settings without ever explicitly describing their situations or identifying themselves as trafficking victims (Clawson & Dutch, 2008b). Victims might not report their situations to providers because they are unaware of their rights or the fact that there are protections for trafficking victims (Logan et al., 2009). In addition, victims might not self-identify because of fear or intimidation from traffickers. In the absence of full description or self-identification, service providers are likely to go about service delivery in the usual manner, without tailoring their services to the needs of this especially vulnerable group. In light of this serious knowledge gap, providers need a set of practice protocols and screening questions to help identify sex-trafficking victims, regardless of where and when they appear in the human services system.

However, efforts to develop screening questions to help identify sex-trafficking victims have been hindered by the dearth of empirical research on sex trafficking (Kaufman & Crawford, 2011; Macy & Johns, 2011). To date, little empirical research has been conducted on best practices for identifying sex-trafficking victims in the context of human services. Thus, a comprehensive and systematic literature review is a needed first step toward developing an evidence-base of strategies for identifying sex-trafficking victims during the provision of human services. Accordingly, this study sought to detect and synthesize all service identification recommendations in the scientific literature, government reports, and documents

prepared by organizations working with victims and survivors of sex trafficking in the United States.

Method

The review was organized using a three-prong strategy to compile literature relevant to the identification of sex-trafficking victims in the United States. First, we completed a systematic review of computerized journal databases, including PsycINFO, PubMed, Web of Science, Social Work Abstracts, Social Services Abstracts, Sociological Abstracts, and Public Affairs Information Service (PAIS) International. The following search strings were used in the initial searches: *sex trafficking, sex trafficking and identification, sex trafficking and assessment, sex trafficking and screening, slavery and assessment, slavery and identification, slavery and screening, prostitution and assessment, prostitution and identification, prostitution and screening, sexual violence and assessment, sexual violence and identification,* and *sexual violence and screening*. Six of the search strings were eliminated from subsequent searches because these strings yielded only articles irrelevant to the narrow focus of our review (i.e., *sexual violence and assessment, sexual violence and identification, sexual violence and screening, prostitution and assessment, prostitution and identification,* and *prostitution and screening*). Each search was systematically tracked in a spreadsheet, which enabled compilation of data on the total articles yielded by each search and the number of articles identified (based solely on their abstracts) as potentially relevant to this literature review (i.e., identification of sex-trafficking victims in the United States by human service providers). These searches yielded 102 potentially relevant journal articles for review.

The research team outlined specific article inclusion criteria to focus the review toward gathering information most pertinent to the identification of sex-trafficking victims encountered in the context of human service delivery. The three inclusion criteria were (a) the article's primary focus was the identification of sex-trafficking victims, including both domestically or internationally trafficked victims; (b) the article provided explicit practice recommendations for identifying victims of sex-trafficking that could be used by human service workers in the United States; and (c) the article was written in English. Only two of the 102 peer-reviewed journal articles satisfied these inclusion criteria and were selected for the review (Barrows & Finger, 2008; Dovydaitis, 2010).

Given the low number of relevant peer-reviewed articles, we expanded the systematic search to include documents available on the Internet. Using the Google search engine, the research team used the broad search term *sex trafficking* to conduct an extensive search and identify relevant literature. This strategy provided 28 potential sources of information, including reports and reference guides from government entities (e.g., USDS, Department of Health and Human Services [DHHS], U.S. Department of Justice [DOJ]), nongovernmental organizations (NGOs) and nonprofit organizations (e.g., Polaris Project, Advocates for Human Rights, Grace Haven House). Each

document identified was evaluated using the inclusion criteria given above. Of the 28 Internet sources, 11 documents met the inclusion criteria, and were included for further review (A21 Campaign, n.d.; Bortel, Ellingen, Ellison, Phillips, & Thomas, 2008; Grace Haven House, 2009; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2006, 2009, 2010; U.S. DHHS, 2008a, 2008b, 2008c, 2008d).

The research team's third strategy was to conduct a backward literature search by reviewing the references of the articles and documents already selected for review. This backward search yielded an additional 15 articles and reports. Of these, seven documents were retained for further review based on the inclusion criteria (Anti-Slavery International, 2005; Clawson & Dutch, 2008b; Florida Coalition Against Domestic Violence [FCADV], 2004; Hughes, 2003; R.I.P.P.L.E., 2007; U.S. Department of Education [ED], 2009; Zimmerman & Watts, 2003).

In all, 20 documents were assembled for review. The research team first developed a standardized review form, and then a research team member systematically reviewed each document using that form. The review form enabled the research team to systematically scrutinize each document for (a) strategies used to identify sex-trafficking victims and (b) specific screening questions for victim identification, while focusing on recommended practices for human service providers in U.S. practice settings.

Results

Document Characteristics

The 20 documents selected for review came from various sources, including NGOs, nonprofits, governmental agencies, and academic researchers. Findings from all 20 documents are presented in Table 1. Of the 20 documents, only 12 provided a publication date, with a range between 2003 and 2010. Eight documents addressed both domestic and international sex trafficking (Bortel et al., 2008; Clawson & Dutch, 2008b; Dovydaitis, 2010; FCADV, 2004; Hughes, 2003; Polaris Project, 2010; R.I.P.P.L.E., 2007; U.S. ED, 2007). In contrast, 10 documents did not specify a focus on domestic or international sex trafficking (A21 Campaign, n.d.; Barrows & Finger, 2008; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2006, 2009; U.S. DHHS, 2008a, 2008b, 2008c, 2008d; Zimmerman & Watts, 2003). One document focused exclusively on domestic sex trafficking of minors (Grace Haven House, 2009). Although one document focused on sex trafficking in European nations (Anti-Slavery International, 2005), we retained this document in our review because the information addressed victim identification, which we evaluated as relevant to the human service context in the United States.

Only one document included in the review provided recommendations based on primary data collection (Bortel et al., 2008). These researchers gathered data through qualitative interviews with community members such as law enforcement officers, judges, service providers, health care providers, and attorneys.

An additional 16 documents provided practice recommendations typically based on the organizations' experience working directly with trafficking victims (A21 Campaign, n.d.; Anti-Slavery International, 2005; Clawson & Dutch, 2008b; FCADV, 2004; Hughes, 2003; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2006, 2009, 2010; R.I.P.P.L.E., 2007; U.S. DHHS, 2008a, 2008b, 2008c, 2008d; U.S. ED, 2007; Zimmerman & Watts, 2003). Another three documents were identified as "think pieces" (i.e., articles intended to be thought-provoking that provide background information) because these authors reviewed and cited existing research (Barrows & Finger, 2008; Dovydaitis, 2010; Grace Haven House, 2009).

Strategies for Identifying Sex-Trafficking Victims

Overall, the literature regarding recommended strategies for service providers to use in the identifying sex-trafficking victims consistently discussed several salient issues, including trafficking indicators, victim interaction, immediate response, and child-specific information.

Trafficking indicators. Of the documents reviewed, 12 noted indicators of sex trafficking, and overwhelmingly agreed on typical indicators (A21 Campaign, n.d.; Anti-Slavery International, 2005; Barrows & Finger, 2008; Clawson & Dutch, 2008b; Dovydaitis, 2010; Hughes, 2003; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2009, 2010; U.S. DHHS, 2008a; Zimmerman & Watts, 2003). Several documents cited a list of trafficking indicators originally put forth by U.S. DHHS (2008a), including (a) signs the person is being controlled (e.g., under control of the person accompanying him or her); (b) signs the person does not have the freedom to exit a job or move; (c) signs of physical abuse (e.g., bruises, injuries, scars); (d) signs indicating the person is fearful or depressed. In addition, the DHHS list included indicators of international trafficking such as the potential victim is not an English speaker; the potential victim is a recent arrival to the United States from India, Asia, Latin America, Eastern Europe, Canada, or Africa; and the potential victim does not have identification, immigration documents, or a passport. The second column in Table 1 lists all sex-trafficking indicators discussed in these documents.

Victim interaction strategies. Specific strategies for service providers to use in their interactions with possible trafficking victims were included in 16 documents (A21 Campaign, n.d.; Anti-Slavery International, 2005; Barrows & Finger, 2008; Bortel et al., 2008; Clawson & Dutch, 2008b; DOJ, 2007; FCADV, 2004; Hughes, 2003; Polaris Project, 2006, 2010; U.S. DHHS, 2008a, 2008b, 2008c, 2008d; U.S. ED, 2007; Zimmerman & Watts, 2003). The discussion around these strategies included a range of topics such as (a) building trust and rapport with potential victims; (b) procedural issues in

Table 1. Review Findings: Sex-Trafficking Indicators, Interaction, Response Strategies, and Child- or Youth-Specific Information

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
A21 Campaign (n.d.) Aim: To provide information on signs of sex trafficking and tips for victim identification Article type: Practice recommendations	Person: – is being controlled (e.g., does not speak for self) – lacks control over schedule and/or money – is new to the country – is fearful, depressed, or very submissive (e.g., afraid to converse with providers) – has health concerns (e.g., HIV/AIDS, pain, and pregnancy) – has signs of physical abuse (e.g., has bruises/scars) – has signs of addictions/ substance abuse	Provider should: – question potential victims alone – report to local authorities if a victim is identified	Trafficking indicators include child who: – distrusts adults; – fears deportation; – shows inappropriate behaviors around adult males; – possesses a cell phone without other belongings; – is traveling alone or in a group of children with only one adult Providers should interact with child in appropriate manner (i.e., developmentally, culturally, linguistically)
Anti-Slavery International (2005) Aim: To provide information on trafficking victim identification and assistance for service providers and others who may come into contact with victims Article type: Practice recommendations	Person: – was deceptively recruited into work – had his/her belongings/documents taken away – has falsified documents – is not allowed earnings/savings – has restricted movement – signs of being subjected to violence and violent threats – reports poor working conditions – problems with living conditions (e.g., not allowed to move residences)	Provider should: – understand how trafficking might interfere in communicating with victim (e.g., fear of retaliation) – be aware of relevant trafficking policies and services – be approachable and respectful – offer information clearly – use interpreters – assess and ensure victim's safety – connect victim to needed health and social services	Not addressed in this document
Barrows and Finger (2008) Aim: To present basic information on human trafficking and discuss the role of health care professionals in aiding trafficking victims Article type: Think piece	Cites trafficking indicators offered by the U.S. Department of Health and Human Services	Provider should: – Question victim alone – use neutral interpreter – call National Human Trafficking Resources Center hotline (1.888.373.7888) for information and assistance if victim is identified – Assess and help provide needed health care	Not addressed in this document
Bortel, Ellingen, Ellison, Phillips & Thomas (2008) Aim: To assess sex-trafficking services in Minnesota, identify available services, evaluate service effectiveness, and give recommendations for service improvement	Not addressed in this document	Provider should: – develop/use standard screening protocol – use indirect questions not including "fraud, "coercion," "force," or "trafficking" – use factual questions that focus on a person's actions	Trafficking indicators include youth who: – report many sexual partners in a short period

(continued)

Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
Article type: Empirical research		– use an intake process with multiple opportunities that allow victims to give information as comfortable – conduct interviews of incarcerated individuals after release – use professional interpreters trained in trafficking	Not addressed in this document
Clawson, H. J., & Dutch, N. (2008b) Aim: To present information on identifying trafficking victims, as well information on promising victim identification and outreach strategies Article type: Practice recommendation	Person: – is from communities and countries with considerable corruption, crime, and poverty – has not had educational opportunities – does not have family support – has been previously victimized, physically and/or sexually	Providers should: – be knowledgeable about legal trafficking definitions – use standard screening and interview practices – use culturally informed and trauma-informed interview techniques – provide outreach to potential victims through flyers and media campaigns – use consistent outreach strategies to build trust with victims – develop a community-wide taskforce for outreach and identification – provide crisis response for victims 24-hr a day, 7 days a week, 365 days a year	
Dovydaitis (2010) Aim: To provide health care practitioners with information related to service provision for human trafficking victims and tools they can use to better assist trafficking victims Article type: Think piece	Cites indicators of trafficking offered by the U.S. Department of Health and Human Services	Provider should: – be aware of safety concerns for victim and his/her family – call National Human Trafficking Resources Center hotline (1.888.373.7888) for information and assistance if victim is identified – However, decisions about calling the national hotline should be made with victim	If victim is younger than 18 years, provider is legally obligated to report to child protective services
Florida Coalition Against Domestic Violence (2004) Aim: To provide domestic and sexual violence advocates with information about human trafficking and aid in their ability to identify and assist trafficking victims Article type: Practice recommendations	Not addressed in this document	Provider should: – build trust – give information on professional role to person before trafficking screening – assess victim's safety first – explain what will happen with screening information – not engage in interrogation – be sensitive to victim's needs – be careful in using interpreters; ensure interpreter is neutral; and be familiar	Not addressed in this document

(continued)

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Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
		with how to use interpreters appropriately – work with person to develop a safety plan if a victim is identified	
Grace Haven House (2009) Aim: To describe domestic minor sex trafficking and its indicators Article type: Think piece	Not addressed in this document	Provider should: – call Human Trafficking Hotline (614.285.4357) for information and assistance if victim is identified	Domestic minor sex-trafficking indicators include: – runaway or homeless youth – child/youth looks age, while claiming to be adult – child/youth possesses large amounts of cash – child/youth possesses hotel room keys – child/youth has indicators of being "branded" (e.g., having a tattoo) – child/youth lies about her/his age and/or possesses false identification – child/youth tells life stories with inconsistencies – child/youth has little knowledge of his/her community or where he/she is – child/youth is involved with abusive or controlling partner/"boyfriend" – child/youth has signs of physical abuse and/or injury – child/youth appears to be engaging in scripted communication – child/youth has fearful or anxious demeanor
Hughes (2003) Aim: To provide information that will aid in the identification of victims of sex trafficking Article type: Practice recommendations	Person: – has injuries – has brandings/scars – has mental health concerns/distress – has untreated illness or infection – shows evidence of being controlled by an abuser – is unable to speak English – lacks knowledge about how to live within his/her community – is living in a brothel – is living with extensive security and/or restricted public access – is monitored while at appointments with service providers – has moved residences often	Provider should: – conduct more than one interview with victim to establish trust	A child is considered a trafficking victim if he or she is used for commercial sex acts Provider is legally obligated to report to child protective services when trafficking involves a minor

(continued)

Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
	– shows signs consistent with experience of domestic violence – is provided with bail from pimp or trafficker if incarcerated – does not possess travel documents or any form of identification – fears police and/or authorities – has false accounts of neglect, abuse, or criminal acts against her/him – reports threats typically associated with stalking or sexual harassment – has been told lies about any part of the work he/she is doing – is unaware of how he or she obtained travel documents or identification papers – had traveling arrangements made by others and was required to pay fees for arrangements – appears to have been told how to speak to officials (i.e., coached) – has no comprehension of contract that he or she signed – was smuggled into the country		Trafficking indicators include child who: – is involved in prostitution when he or she is less than 18 years of age
Office to Monitor and Combat Trafficking in Persons (n.d.) Aim: To give service providers' practice recommendations related to aiding victims of trafficking Article type: Practice recommendations	Person: – lives with employer – lives in poor conditions (i.e., small space given number of persons) – cannot speak alone with the provider – appears to have been coached on how to speak – does not have identification (i.e., held by employer) – shows indications of physical abuse – is frightened and/or submissive – is paid in way that is not comparable to the work being done	Provider should: – Report trafficking immediately to law enforcement if victim is identified call National Human Trafficking Resource Center (NHTRC) for assistance (1.888.373.7888) if victim already left/escaped trafficking – be aware that it may not be safe to try to rescue the victim if he or she is still involved in trafficking	
Polaris Project (2010) Aim: To provide detailed information on identification of human trafficking victims, including specific practice recommendations for persons who may come into contact with these victims Article type: Practice recommendations	Person: – is unable to leave job or where he or she lives – has few belongings or financial records – has little knowledge about community in which he/she lives and/or moves often – has large debt and is not able to pay it off – receives very little or no payment for work he/she does	Provider should: – demonstrate that he or she wants to help victim – demonstrate that he or she is not attempting to punish victim or incarcerate him/her – address victim's immediate needs and create a comfortable environment – speak with victim alone	Trafficking indicators include child who: – is involved in prostitution when he/she is less than 18 years of age

(continued)

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Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
	– does not have possession of his/her identification or other important documents – shows indicators of being restrained, malnourishment, physical abused, branded, and/or lacking in health care – has a life story that is inconsistent – claims that he/she is "just visiting"	– be aware of potential power dynamics between provider and victim – be nonjudgmental – practice with cultural sensitivity – not argue with facts victim is giving or attempt to address victim's motivation for participation in his/her work	
Polaris Project (2009) Aim: To provide information on the main events and appropriate construction of a medical assessment to evaluate whether a person is a victim of sex trafficking Article type: Practice recommendations	Person: – has injuries that he or she does not want to discuss or tells an inconsistent story about injuries – is unaware of community in which he or she is living – has another individual who speaks for her/him – has indicators of physical and sexual abuse, medical neglect, and/or torture – has untreated sexually transmitted infection(s) – shows fear, anxiety, depression and/or stress – is submissive and/or avoids eye contact – reports exceptionally high number of sexual partners in comparison to others of his/her same age	Provider should: – call NHTRC for assistance (1.888.373.7888) if victim is identified – provide help for medical needs if victim is identified	Trafficking indicators include child who: – is involved in prostitution when he or she is less than 18 years of age
R.I.P.P.L.E. (2007) Aim: To provide a training manual that will aid in the identification of victims of trafficking, provide information on victim assistance, and help with the eradication of trafficking within North Carolina Article type: Practice recommendations	Situational indicators of trafficking include: – person/potential victim comes to service office with different individuals each time – another individual always speaks for person/potential victim – person has injuries that are unexplained	Providers should: – ask indirect questions to get at information needed to determine if person is a victim of trafficking – should provide explanation of their confidentiality policies – should screen/interview potential victim when he or she is alone – should use qualified interpreters (not family members, friends, or acquaintances) unless there is an emergency – should close interviews by reinforcing that trafficking is not victim's fault – assess victim for safety when identified – Service organization should: – have one designated provider conduct all interviews with a victim	Not addressed in this document

(continued)

Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
		– not have multiple providers interviewing one individual victim	Not addressed in this document
Polaris Project (2006) Aim: To provide specific information on preassessment engagement with potential victims of trafficking and possible screening questions to assess for trafficking victimization Article type: Practice recommendations	Not addressed in this document	Provider should: – be clear about professional role (how he or she can help victim), including provider limitations (i.e., not police or government official) – explain what he or she can offer (e.g., confidentiality, respect, information, honesty) – explain what will be expected from the victim in the helping relationship – use reflective listening and offer empathy – be calm and relaxed – not take excessive notes or use checklists/forms – discuss general topics and questions, such as victim's needs while weaving in other necessary screening questions – begin with questions about less intense control used by perpetrators before asking questions about more extreme control	
U.S. Department of Education (2009) Aim: To provide information to school personnel on human trafficking and ways to participate in victim identification in schools Article type: Practice recommendations	Not addressed in this document	Provider should: – call local law enforcement if victim is identified and in immediate crisis/danger – call NHTRC for assistance (1.888.373.7888) if victim is identified or to report suspicions of trafficking – call the National Center for Missing and Exploited Children's hotline (1.800.THE.LOST) for help with minors who are victims – make reports of trafficking to a local FBI field office through http://www.cybertipline.org or the Department of Justice's Human Trafficking Office (1.888.428.7581)	Trafficking indicators include child/youth: – who has unexplained school absences; unable to attend school regularly – often runs away – talks about traveling to other locations – shows signs of physical abuse – is withdrawn, fearful, and/or depressed – does not have control over his/her own schedule – does not have control over his/her identification forms – appears hungry and/or malnourished – wears clothing that is not appropriate based on season or weather – appears addicted to drugs – shows shift in behavior, dress, or belongings, such as sudden possession of expensive items – talks about sexual activities that exceed age-group norms – is involved with "boyfriend" who is 10 or more years older than potential victim

(continued)

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Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
			– uses terms that are associated with commercial sex industry – shows promiscuity
U.S. Department of Health and Human Services (2008a), Resources: identifying and interacting with victims of human trafficking Aim: To provide information for social service practitioners on how to identify and interact with victims of human trafficking Article type: Practice recommendations	Person: – is being controlled by the individual with him/her – does not have the freedom to exit a job or move – shows evidence of physical abuse (e.g., bruises/scars) – appears fearful and/or depressed – is not an English speaker – is new to the country and originally from India, Asia, Latin America, Eastern Europe, Canada, or Africa – does not have identification or immigration documents/passport	Provider should: – talk to victim in a safe location and separately, away from anyone who might be controlling her/him – maintain confidentiality – use an interpreter that speaks victim's language or use the ATT Language Line; do not ask persons who accompanied potential victim to serve as interpreter – interpreters should be screened for a potential conflict of interest before his/her help is requested – call NHTRC for assistance (1.888.373.7888) if victim is identified	Provider should: – get assistance of social services worker who has specialized skills for interviewing minors about abuse or trafficking when working with a minor
U.S. Department of Health and Human Services (2008b), Resources: messages for communicating with victims of human trafficking Aim: To give information on specific messages to convey to victims/potential victims of human trafficking that are likely to help build trust within a working relationship Article type: Practice recommendations	Not addressed in this document	Providers should aim to build a trusting relationship with the potential victim by conveying that: – he or she is here to help – he or she wants to ensure that trafficking does not happen to others – safety for the victim is a first priority – help is available for the victim, including medical care and a safe location in which to stay – help is available to protect the victim's family and to help meet family's basic needs – the victim deserves independence and has human rights – the victim deserves to be treated well Provider should: – call NHTRC for assistance (1.888.373.7888) if victim is identified	Not addressed in this document
U.S. Department of Health and Human Services (2008c), Resources: screening tools for victims of human trafficking Aim: To provide social service practitioners with example screening questions to use	Not addressed in this document	Provider should: – begin screens with indirect questions – seek help from someone who speaks victim's native language, understands her or his culture, and will maintain confidentiality	Not addressed in this document

(continued)

Table 1. (continued)

Reference, Aim, and Article Type	Indicators of Trafficking	Interaction and Response Strategies	Child/Youth-Specific Information
when a person is suspected of being a victim of trafficking Article type: Practice recommendations U.S. Department of Health and Human Services (2008d), The mind-set of a human trafficking victim Aim: To provide social service practitioners with information on the typical mind-set of human trafficking victims that will help them gain perspective on how to best help victims Article type: Practice recommendations	Not addressed in this document	– screen interpreters for conflicts of interest – question victim while he or she is alone – call NHTRC for assistance (1.888.373.7888) if victim is identified Providers should understand that: – victims may not speak English – victims may be unaware of where they are – confidentiality is crucial – victims may fear government and/or law enforcement – potential victims often do not think of themselves as victims – Providers should: – call NHTRC for assistance (1.888.373.7888) if victim is identified	Not addressed in this document
Zimmerman & Watts (2003) Aim: To provide recommendations for interviewing victims of trafficking with regard to ethical imperatives and the safety of women being interviewed Article type: Practice recommendations	Person: – appears to feel trapped – works in an illicit or hidden workforce sector – is undocumented – has little knowledge about his/her legal options/rights – has little personal freedom – moves frequently – or his/her family has experienced or been threatened with psychological, physical, or sexual abuse – has been violently victimized or penalized by employer – does not have identification documents; worries about deportation – lies about his/her age – is tied to employer through debt or other obligations – has trauma/stress reactions (e.g., poor sense of time/space, loss of memory, or engagement in risky behaviors)	Providers should: – do anything that inflicts harm on the victim – evaluate risks to victim – promise anything in case the provider cannot deliver – offer information in victim's language – provide interpreters with preparation/training – ensure the victim's anonymity confidentiality – obtain informed consent from the victim – respect and listen to the victim – not engage in actions that could retraumatize the victim – be ready to address the victim's distress – be ready to address emergencies – use information collected from victim to her/his benefit and/or to benefit others who are trafficked	Not addressed in this document

conducting interviews; and (c) messages that service providers should convey to potential victims. The following set of strategies was mentioned in multiple documents: (a) question a potential victim when he or she is alone; (b) use indirect rather than direct questions, excluding words such as "coercion," "force," and "trafficking"(e.g., I would be interested to hear . . . or Can you tell me . . .); (c) clearly explain the service provider role to potential victims; (d) clearly explain confidentiality policies and how the information the victim provides will be used; (e) focus on the potential victim's safety and needs; and (f) conduct interviews and provide services with cultural and linguistic competence. The third column of Table 1 provides a listing of all of the victim interaction strategies discussed in these 15 documents.

Immediate response strategies. Among the literature selected for review, 14 documents suggested strategies for interactions with potential victims in situations that might require an immediate response (A21 Campaign, n.d.; Anti-Slavery International, 2005; Barrows & Finger, 2008; DOJ, 2007; Dovydaitis, 2010; FCADV, 2004; Grace Haven House; 2009; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2009; U.S. DHHS, 2008a, 2008b, 2008c, 2008d; U.S. ED, 2007). These documents consistently recommended that service providers should immediately contact the National Human Trafficking Resource Center's (NHTRC) hotline to obtain further information or to report suspected cases of trafficking. Further, a minority of documents also suggested that providers call local law enforcement, especially if the victim's situation posed immediate danger. Other suggested strategies proposed that providers should work with victims in making decisions about contacting local authorities or trafficking organizations. A few documents noted the importance of providers developing a safety plan in conjunction with victims. The third column of Table 1 provides a listing of recommended strategies for providing immediate victim assistance.

Child-specific information and strategies. Arguably, children and youth are the most vulnerable of all trafficking victims. As with adult victims, service providers may encounter these trafficking victims in a variety of settings. In addition, the literature review findings show that special indicators and strategies may be needed to identify that a child or youth has been trafficked. Of the documents included in our review, 10 noted at least one indicator of sex-trafficking victimization specific to child or youth victims, or at least one strategy for interacting with children or youth who are potential sex-trafficking victims (A21 Campaign, n.d.; Bortel et al., 2008; Dovydaitis, 2010; Grace Haven House, 2009; Hughes, 2003; Office to Monitor and Combat Trafficking in Persons, n.d.; Polaris Project, 2009, 2010; U.S. DHHS, 2008a; U.S. ED, 2007). Four documents discussed prostitution as a definite indicator of sex-trafficking victimization among persons younger than 18 years old. Other documents described indicators of prostitution as indicators of trafficking, including a child or youth who has hotel room keys, has a much older "boyfriend," and/or is familiar with prostitution phrases or terms. In offering

strategies for service providers to use in interactions with minors who may be trafficking victims, several documents noted that service providers are required to report such trafficking victims to child protective services. The fourth column in Table 1 shows the recommendations for child- and youth-specific sex-trafficking indicators and screening strategies for minor trafficking victims.

Review of Sex-Trafficking Screening Questions

Many of the reviewed documents provided screening questions that human service providers could use to help identify if a client was a victim of trafficking. In particular, eight articles were selected for further scrutiny because the authors provided exemplar screening questions (A21 Campaign, n.d.; Bortel et al., 2008; DOJ, 2007; FCADV, 2004; Polaris Project, 2006, 2009, 2010; U.S. DHHS, 2008c). These screening questions were considered exemplary because the questions were comprehensive and addressed key trafficking indicators. In addition, the documents offered specific recommendations that could be readily implemented in practice. Overall, the screening questions addressed five categories of information: victim's safety, victim's employment, victim's living environment, victim's travel or immigration, and child- and youth-specific questions. A list of all screening questions by category is provided in Table 2. We note that some reviewed documents listed the same list of screening questions originally recommended by U.S. DHHS (2008c). To avoid repetition of questions in the table, we did not include documents in Table 2 that only restated the original U.S. DHHS (2008c) questions. However, to indicate that these questions have been recommended by multiple sources, we have placed an asterisk (*) next to them in Table 2.

Discussion

Our goal was to detect and synthesize all available service recommendations for identifying sex-trafficking victims during the provision of human services. To the best of our knowledge, this research is one of the first efforts to conduct a comprehensive, systematic literature review on this topic. Thus, this research takes an important step toward developing promising practices for identifying sex-trafficking victims in the context of human service provision. Taken together, the findings of this review offer human service providers a preliminary set of screening strategies and questions that can be used to identify sex-trafficking victims in the context of human services. The trafficking indicators discussed in this review can also inform future trafficking research.

Although the problem of human trafficking is likely as old as human history (Logan et al., 2009), it is notable that most of the documents identified for this review were produced only recently. Using the earliest of these documents as a starting point, we estimate that 2.5 documents addressing identification of sex-trafficking victims have been produced annually since 2003. Nearly all of these reviewed documents were either

Table 2. Screening Questions for Identifying Sex-Trafficking Victims

Questions by Type	References
Safety	Florida Coalition Against Domestic Violence (2004); R.I.P.P.L.E. (2007); Polaris Project (2006, 2009, 2010) U.S. Department of Health and Human Services (2008c)

Safety

1. What might happen if you went back home/to home country?
2. Has anyone threatened you with deportation?
3. Have you been deprived of food, water, sleep, or medical care?* Made you ask permission to have any of these things?
4. Do you have to ask permission to eat, sleep, or use the bathroom?*
5. Were you (or anyone you work with) ever raped or assaulted for working at a slow pace or for trying to leave?
6. Were you (or anyone you work with) ever beaten, hit, yelled at, or made to feel physical pain for working slowly or for trying to leave?
7. Have you been physically harmed in any way?*
8. Were you (or was anyone you work with) ever told that they would be physically harmed or raped for trying to leave or for working slowly?
9. Have you been threatened if you try to leave?*
10. Has anyone threatened your family?*
11. Can you remember a time you wanted to leave, but you felt that you could not? What might have happened if you left without permission?
12. Is anything going on in your life that makes you feel stressed and/or uncomfortable?
13. Is anyone forcing you to do anything that you do not want to do?*

Employment

Florida Coalition Against Domestic Violence (2004); R.I.P.P.L.E. (2007); Polaris Project (2006, 2009, 2010); U.S. Department of Health and Human Services (2008c)

1. How did you first hear about your job?
2. Did someone make you sign a contract? What did that contract say?
3. Do you owe your employer money? How did this debt come about?
4. What do you think might happen if this debt is not paid?
5. Does anyone force you to have sexual intercourse for your work?
6. Are there people who guard your workplace/place you live or video cameras that monitor your workplace/place you live to make sure no one working there leaves?
7. What kind of work did you expect to do once you arrived in this country?
8. Did anyone tell you that you would have to pay money before beginning work if you wanted employment?
9. Does your employer permit you to take breaks from working when you want or need to?
10. Has anything been said or done to make you afraid to leave your job?
11. Do you feel like you were lied to about your job before you began work?
12. Do you receive payment for your work? Is this pay the same as what you were promised?
13. How did you come to know your boyfriend/boss?
14. Has your employer ever offered you drugs or medications?
15. Can you leave your job if you want?*

Living Environment

Florida Coalition Against Domestic Violence (2004); R.I.P.P.L.E. (2007); Polaris Project (2006, 2010); U.S. Department of Health and Human Services (n.d.)

1. Do you sleep in a bed, on a cot, or on the floor?*
2. Do you have to pay rent where you are living? How much do you have to pay in rent (per month, week, or day)?
3. Are you permitted to purchase food and/or clothes by yourself?
4. Can you come and go as you please?*
5. Are you allowed to contact your friends and/or family whenever you would like?
6. In the place you live, are there windows with bars on them?
7. What are your working or living conditions like?*
8. Where do you sleep and eat?*
9. Are there locks on your doors/windows, so you cannot get out?*

Travel and Immigration Issues

Florida Coalition Against Domestic Violence (2004); R.I.P.P.L.E. (2007); Polaris Project (2006, 2009, 2010); U.S. Department of Health and Human Services (n.d.)

1. Do you have access to identification documents, passports, birth certificate, and other personal papers? If not, who has them?
2. Were you in control of arrangements for your travel to this country and your identification documents? If not, who was?

(continued)

Table 2. (continued)

Questions by Type	References
3. Did someone tell you specific things to say to immigration officials when you came to this country? 4. During your trip to this country, how did the people with you treat you? 5. Did someone give you false identification or falsified documents? 6. Has your identification or documentation been taken from you?*	
Child- and Youth-Specific: 1. For what reason did you come to this country? 2. Do you have identification papers? Who has your papers? 3. Do you attend school? Do you have a job? Can you leave your job if you want to leave? 4. Where is your home? Do other people live with you? Who? Are you too afraid to leave this place? 5. Have you ever been told something bad may happen and/or has your family ever been told something bad may happen to stop you from running away? 6. Has anyone ever touched you or hurt you in anyway? 7. Do you have any concerns about your health or any injuries that need the attention of a nurse or doctor?	A21 Campaign (n.d.); Bortel, Ellingen, Ellison, Phillips, & Thomas (2008)

Note. *Questions originally developed by U.S. Department of Health and Human Services. Cited by multiple reviewed articles (e.g., A21 Campaign, n.d.; Barrows & Finger, 2008; Clawson & Dutch, 2008b; Office to Monitor and Combat Trafficking in Persons, n.d.).

"think pieces" or were developed based on practical field experience. Despite increased general awareness, relatively little attention has been focused on helping service providers identifying sex-trafficking victims in routine practice settings. This knowledge gap is further underscored by the fact that only one of the relevant documents was informed by original data collection and research. Nonetheless, the rate of document production on this topic has increased substantially over the past 5 years, which may indicate growing attention to the issue of sex-trafficking victim identification.

Even though the review findings showed consensus on many recommended strategies for victim identification, the results also showed areas of uncertainty. Many documents did not clearly distinguish whether the recommendations were intended to be used with victims of domestic trafficking, international trafficking, or both. Thus, it remains unclear if one set of screening strategies and questions will be useful in the identification of both domestic and international victims. Given the differences between domestic and international trafficking victims' circumstances, characteristics, and needs, it is likely that distinct screening strategies and questions are needed (Clawson et al., 2009). We encourage advocates and researchers who focus on the issue of sex trafficking to distinguish between the needs and concerns of domestic and international sex-trafficking victims in future efforts.

Second, a few of the documents proposed that service providers use the recommended screening strategies with potential victims in the context of ongoing service delivery, but only after providers have established trusting relationships with potential victims. This recommendation is well reasoned because victims might be unlikely to disclose details about their situation to service providers who they do not know and trust. On the other hand, service providers may have only one contact, and thus one opportunity, to identify victims. For example, trafficked youths could appear at a homeless service center once—never to appear again. In addition, service providers may not know from one encounter to the next whether a potential victim will return for services. Indeed, one trafficking indicator noted in the reviewed research emphasized that perpetrators of trafficking frequently move victims from one geographic location to another. Thus, a victim might encounter a human service provider in one community 1 month only to see a new service provider in another community the next month. Currently, the recommended identification practices do not provide guidance on ways in which service providers can conduct screenings safely and sensitively in the context of one-time encounters. This lack of guidance is a limitation of the current literature given the realities and hidden nature of sex trafficking (Clawson & Dutch, 2008b). Again, we encourage advocates and researchers to address this issue in future efforts.

Third, the literature lacks clarity regarding a recommended immediate response by service providers once a sex-trafficking victim is identified. Almost all of the reviewed documents recommended contacting the NHTRC's hotline or local law enforcement. Few documents recommended that providers consult with adult victims before taking such actions. However, the recommendation to consult with victims before taking action underscores an important question for providers: Is it possible that by contacting the national hotline or law enforcement, providers could do more harm than good for victims (Kaufman & Crawford, 2011)? Is a victim at heightened risk of danger and violence if a provider makes such a call without first establishing immediate safety for the victim? Likewise, if providers make such calls without consulting adult victims or despite adult victims' preferences, what

are the implications for victims' agency and empowerment? Moreover, and a further complication, many of the reviewed documents noted that often trafficking victims are not only unaware that human trafficking is unacceptable and illegal but also unaware that help and resources to escape trafficking are available (Logan et al., 2009). In such cases, victims might never receive help unless human service providers actively intercede. These complex, interrelated issues deserve careful attention and consideration. We encourage advocates and researchers to address these important issues by conducting research with survivors of sex trafficking about their preferences regarding interactions with human service providers.

The fourth issue raised by this review centers on what actions human service providers should take if their community lacks aftercare services to which they can refer victims. As noted earlier, there is a nascent literature regarding aftercare services for trafficking victims. Unfortunately, such services are not universally available throughout the United States. To help address this service gap, we encourage human service providers to collaborate with other providers to develop aftercare organizations, policies, and protocols in their communities. We refer readers who are interested in such community organizational efforts to Boxill and Richardson's (2007) discussion of how their community worked to develop an aftercare service organization for victims of domestic sex trafficking. We also call on policy makers to attend to the various aspects of human trafficking, including its identification and the provision of services for victims. Community-based service providers are necessary for the development of an aftercare services infrastructure. However, there are many demands on these providers' time and resources, and their capacity to develop such services is limited. Consequently, the provision of aftercare services will remain inconsistent and uneven as long as society relies on community-based service providers to take the sole lead in developing such a service system. The United States needs consistent and widespread policy development and funding attention to this atrocious problem.

However, even without aftercare services available in the community, the findings from this review suggest that it is important for human service providers to identify victims whenever possible. If nothing more, providers should adapt their usual services to victims' unique and vulnerable circumstances. Nonetheless, we urge providers to seek out possible referrals and resources for victims before they implement the recommended screening strategies and questions presented here. Human service providers should be able to find some services in their community to help trafficking victims, even if those services are not dedicated to trafficking victims.

Limitations and Future Research

As readers consider the review findings, we encourage them to be mindful of this study's limitations. For example, we might not have discovered and included all pertinent documents in this research. However, from the outset of this research, we worked to address this limitation by using wide-ranging, multiple search strategies to locate as many relevant documents as possible. In addition, two researchers worked independently to choose articles for review based on clearly defined inclusion criteria. It is also possible that we missed or misunderstood information presented in the reviewed documents. Again, we worked to address this limitation by reviewing each of the 20 documents carefully and completely with a standardized review form. Our goal for this research was to synthesize all service recommendations for identifying sex-trafficking victims during the provision of human services. Nevertheless, the recommended identification strategies and screening questions cannot be considered promising practices without thorough empirical testing. Accordingly, we urge human service providers concerned with sex trafficking to collaborate with researchers to test these identification strategies and screening questions.

Based on current practice protocols, it may be that human service providers are often offering typical services to sex-trafficking victims without identifying these highly vulnerable clients. Such service delivery practices are unfortunate. At best, service delivery encounters in which victims are not identified are missed opportunities to help victims escape the horrors of trafficking. At worst, human service providers could do harm to sex-trafficking victims by delivering services as usual without accounting for these victims' vulnerable circumstances. Our aim and hope is to help human service providers in their everyday practice by offering a preliminary set of screening strategies and questions to identify sex-trafficking victims in the context of human services. We also hope this review encourages others to test the recommended practices so that evidence-based screening strategies and questions will become available to all human service providers.

Identifying Domestic and International Sex-Trafficking Victims During Human Service Provision: Critical Findings

- Findings showed a consistent discussion of several prominent categories of recommended strategies for human service providers to use in the identification of sex-trafficking victims, including:
  o trafficking indicators (e.g., signs that the potential victim is being controlled, signs that the potential victim does not have the freedom to exit a job or move);
  o victim interaction strategies (e.g., question potential victims while they are alone, use indirect rather than direct questions, clearly explain any confidentiality policies, and how the information that victims provide will be used);
  o immediate response strategies (e.g., call the National Human Trafficking Resource Center hotline at 1.888.373.7888 for further information and help for aiding sex-trafficking victims);
  o child-specific information (e.g., service providers are legally obligated to report to child protective services when victims are identified); and
  o strategies for victim interaction.

- Many documents provided screening questions that human service providers could use to identify persons as sex-trafficking victims. Screening questions addressed the following information categories:
  o safety,
  o employment,
  o living environment,
  o travel and immigration, and
  o child- and youth-specific questions.

Identifying Domestic and International Sex-Trafficking Victims During Human Service Provision: Practice, Policy and Research Implications

Practice

- The review results offer human service providers a preliminary set of screening strategies and questions to identify sex-trafficking victims in the context of human services. We encourage providers who are working in human service sectors where they might encounter victims (e.g., child advocacy, child protection and welfare, criminal justice, domestic violence, health care, homelessness outreach and sheltering, juvenile justice, sexual assault, and victim advocacy) to review and use these strategies and questions when appropriate.

Policy

- We encourage consistent, widespread policy development and funding attention to the problem of trafficking in the United States. In particular, we call on policymakers to attend to the development and funding of aftercare services for victims.

Research

- The trafficking indicators determined here may be a useful guide for researchers who are conducting trafficking research.

Future research is needed to:

- empirically test these identification strategies and screening questions;
- address the distinction between domestic and international sex-trafficking victim needs and concerns;
- develop guidance about how to conduct screenings safely and sensitively in the context of one-time human service encounters;
- conduct studies with sex-trafficking survivors about their preferences regarding interactions with human service providers.

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Bios

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