

Service provision for people who've been trafficked

Thank you for participating in the Milwaukee County Human Trafficking Task Force Service Provider survey.

There are 30 questions. Most are multiple choice but we anticipate it may take you some time to complete. You might want to print out the survey questions for yourself first and enter in your responses online when you're ready.

This online survey will be live until August 14th. We encourage you to send the link to other service providers. If you would like assistance in completing the survey or have questions, please contact Claudine O'Leary at claudine@rethinkresources.net or call 414-212-5121.

We are all still learning about human trafficking and deciding what it means for our work. For the purposes of this survey we will use Wisconsin law to define human trafficking.

This means that all minors under 18 who are involved in sexual acts or sexual performance (like porn or stripping) for money, gifts, drugs, survival needs like a place to sleep or other resources are considered to be trafficked. It's not necessary to prove threats, violence or manipulation if someone is under 18.

For adults, if someone is compelled into sexual acts or sexual performance (like porn or stripping) for money, gifts, drugs, survival needs like a place to sleep or other resources by force, fraud or coercion, including using someone's drug addiction to control them - it's considered human trafficking.

Human trafficking in Wisconsin law also includes labor trafficking, where traffickers use violence, threats and lies, including impossibly high debts, to force people to work against their will for little to no money in people's homes as domestic help, on farms, in factories and magazine selling crews.

Someone does not need to cross state lines or borders to be trafficked. It includes people of all ages, gender identities, cultural/ethnic backgrounds and more.

Feel free to refer back to this definition when determining your answers to the survey questions.

1. What other words/terms do your staff or clients use to describe what the law defines as human trafficking?

2. Who is the primary contact person for trafficking-related referrals in your organization/agency?

Note: we recommend having this person fill out this survey or be involved in the responses.

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3. Please share basic contact information about the organization/agency you represent

Organization/Agency:

Address:

Address 2:

City/Town:

State:

ZIP:

Email Address:

Phone Number:

4. In your own words, describe what your agency/organization/group does. For example, what do you offer? Who do you reach?

5. How would you describe your agency/organization/programs' expertise in providing services for adults and/or children who've been trafficked?

6. Do you currently screen for indicators of human trafficking on intake or somehow determine if clients might be trafficked?

- Yes, we do.
- No, not at this time.

Other (please specify)

7. What kinds of training on human trafficking have your staff received?

basic 101 level (feel free to describe where)

more advanced level (feel free to describe where)

other (please clarify)

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8. Are you interested in training on human trafficking for your staff?

- Yes, we are.
- No, not at this time.

Other (please specify)

9. Which gender(s) do you work with? (check as many as apply)

- females
- males
- transgender and gender variant people

Other (for clarification as needed)

10. Which age groups do you work with? (check as many as apply)

- Children 11 and under
- Adolescents 12-17
- Young adults 17-24
- Adults 18 and over
- Elders

Other (please specify)

11. What types of human trafficking are you prepared to address in your program? (check as many as apply)

- Labor trafficking
- Sex trafficking
- Human trafficking with elements of both sex and labor trafficking

Other (please specify)

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12. Which types of trafficking survivors are you prepared to work with?

- Those who have legal status to be here in the U.S (including citizens, those with current visas, green card holders)
- Those who are undocumented or who might be out of legal status (including expired visa holders, people whose documents were stolen or destroyed and those whose status is unclear)
- Both of the above

13. What is your service area? (are your services focused on a certain area or key zip codes or do they reach the whole city or county?)

14. Please note the level of confidentiality and/or anonymity your program offers:

- We are not a confidential program. We might have to share information we learn with law enforcement and courts.
- We are a confidential program. All of our staff will report child abuse & neglect.
- We are a confidential program. Some of our staff are mandated reporters of abuse & neglect and some are not.
- We are a confidential program. None of our staff are mandated reporters of abuse & neglect.
- We offer anonymous services - you do not have to give your real name to receive assistance or participate.

Other (for clarification)

15. In what ways does your agency have cultural competence in serving communities of color? Please describe:

16. What languages are spoken by your staff? (check as many as apply)

- English
- Spanish
- Hmong
- Russian

Other (please specify)

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17. In what ways does your agency have competency in serving lesbian, gay, bisexual, transgender, gender variant, and questioning community members? Please describe:

18. What kinds of accessibility measures have you built into your program for people with disabilities? (check as many as apply)

- Ramps for stairs
- Elevator
- Large print materials
- Audio version of materials
- TTY/TDD
- Mobility impaired accessible restrooms
- Interpreter services
- Quiet space
- Scent-free or low-scent spaces

Other (please specify)

19. What are your hours of service?

- Weekdays during the day
- Weekdays in the evening
- Weekends
- 24 hour/round-the-clock in person response
- 24 hour hotline response

Other (please specify)

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20. Is there a cost to clients for services? If so, how do clients pay?

Services are free to clients

Sliding scale fees

Private insurance

Medicaid

BadgerCare

Other (please specify)

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21. Please mark what you currently offer to those affected by human trafficking:

	we do this	we have referrals for this
info and referral hotline to explore options if someone is trafficked	<input type="checkbox"/>	<input type="checkbox"/>
intake and assessment	<input type="checkbox"/>	<input type="checkbox"/>
emergency response when someone is located by law enforcement or comes forward	<input type="checkbox"/>	<input type="checkbox"/>
crisis support during or after trafficking	<input type="checkbox"/>	<input type="checkbox"/>
case management to plan and coordinate care of those who've been trafficked	<input type="checkbox"/>	<input type="checkbox"/>
advocacy to ensure rights of those who've been trafficked	<input type="checkbox"/>	<input type="checkbox"/>
drop-in center services welcoming people who've been trafficked	<input type="checkbox"/>	<input type="checkbox"/>
street outreach	<input type="checkbox"/>	<input type="checkbox"/>
work site outreach (e.g. farm, strip club)	<input type="checkbox"/>	<input type="checkbox"/>
safety planning including specifics around trafficking	<input type="checkbox"/>	<input type="checkbox"/>
assistance with restraining orders	<input type="checkbox"/>	<input type="checkbox"/>
emergency shelter for those who've been trafficked	<input type="checkbox"/>	<input type="checkbox"/>
emergency food	<input type="checkbox"/>	<input type="checkbox"/>
emergency clothing (including underwear)	<input type="checkbox"/>	<input type="checkbox"/>
hygiene supplies (e.g. soap, toothbrush)	<input type="checkbox"/>	<input type="checkbox"/>
short term housing for trafficking survivors	<input type="checkbox"/>	<input type="checkbox"/>
long term housing for trafficking survivors	<input type="checkbox"/>	<input type="checkbox"/>
out of home care for children who've been trafficked (foster care, group home)	<input type="checkbox"/>	<input type="checkbox"/>
residential therapeutic care with trafficking specific programming	<input type="checkbox"/>	<input type="checkbox"/>
connection to Unaccompanied Refugee	<input type="checkbox"/>	<input type="checkbox"/>

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Minor program

transportation to appointments	<input type="checkbox"/>	<input type="checkbox"/>
assistance in getting identification, birth certificate	<input type="checkbox"/>	<input type="checkbox"/>
financial advocacy to repair credit, eviction history, lack of banking services, identity theft	<input type="checkbox"/>	<input type="checkbox"/>
help finding employment	<input type="checkbox"/>	<input type="checkbox"/>
help learning job skills	<input type="checkbox"/>	<input type="checkbox"/>
ABE/GED classes	<input type="checkbox"/>	<input type="checkbox"/>
tutoring/assistance with K-12 classes	<input type="checkbox"/>	<input type="checkbox"/>
English as second language classes	<input type="checkbox"/>	<input type="checkbox"/>
culturally/linguistically specific services	<input type="checkbox"/>	<input type="checkbox"/>
first aid (cuts, burns, infections)	<input type="checkbox"/>	<input type="checkbox"/>
access to comprehensive medical care	<input type="checkbox"/>	<input type="checkbox"/>
preventive health care	<input type="checkbox"/>	<input type="checkbox"/>
reproductive and sexual health services	<input type="checkbox"/>	<input type="checkbox"/>
connections for tattoo removal	<input type="checkbox"/>	<input type="checkbox"/>
AODA counseling services	<input type="checkbox"/>	<input type="checkbox"/>
AODA residential treatment	<input type="checkbox"/>	<input type="checkbox"/>
assisting with accessing AODA treatment	<input type="checkbox"/>	<input type="checkbox"/>
harm reduction services for current drug users (e.g. overdose prevention, syringe exchange)	<input type="checkbox"/>	<input type="checkbox"/>
non-western healthcare (e.g. herbs, traditional healers)	<input type="checkbox"/>	<input type="checkbox"/>
spiritual counseling	<input type="checkbox"/>	<input type="checkbox"/>
legal advocacy for people charged with crimes (e.g. prostitution, trespassing)	<input type="checkbox"/>	<input type="checkbox"/>
legal advocacy when reporting being a victim of a crime (e.g. kidnapping, sexual assault, trafficking)	<input type="checkbox"/>	<input type="checkbox"/>
legal advocacy for	<input type="checkbox"/>	<input type="checkbox"/>

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immigration options and relief		
coordination with law enforcement during trafficking investigations and prosecutions	<input type="checkbox"/>	<input type="checkbox"/>
legal advocacy to obtain T or U visas, refugee status	<input type="checkbox"/>	<input type="checkbox"/>
advocacy for client to regain custody of kids	<input type="checkbox"/>	<input type="checkbox"/>
language interpretation	<input type="checkbox"/>	<input type="checkbox"/>
life skills training	<input type="checkbox"/>	<input type="checkbox"/>
cash assistance	<input type="checkbox"/>	<input type="checkbox"/>
assist in applying for benefits like SSI, W-2, FoodShare, etc.	<input type="checkbox"/>	<input type="checkbox"/>
support for children of trafficked client	<input type="checkbox"/>	<input type="checkbox"/>
childcare services (during program participation)	<input type="checkbox"/>	<input type="checkbox"/>
mental health services	<input type="checkbox"/>	<input type="checkbox"/>
trauma specific counseling	<input type="checkbox"/>	<input type="checkbox"/>
mental health counseling that addresses trafficking	<input type="checkbox"/>	<input type="checkbox"/>
peer support groups of trafficked youth or adults	<input type="checkbox"/>	<input type="checkbox"/>
peer support (non-trafficking specific)	<input type="checkbox"/>	<input type="checkbox"/>
sex work or prostitution specific group support	<input type="checkbox"/>	<input type="checkbox"/>
mentorship from survivors of trafficking	<input type="checkbox"/>	<input type="checkbox"/>
youth programs	<input type="checkbox"/>	<input type="checkbox"/>
sexual abuse/assault advocacy	<input type="checkbox"/>	<input type="checkbox"/>
sexual abuse/assault support groups	<input type="checkbox"/>	<input type="checkbox"/>
domestic violence advocacy	<input type="checkbox"/>	<input type="checkbox"/>
domestic violence support groups	<input type="checkbox"/>	<input type="checkbox"/>
services for those identified as "bottoms" (mostly women who start out as trafficked and now enforce rules set by pimps/traffickers through violence and control)	<input type="checkbox"/>	<input type="checkbox"/>

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- | | | |
|---|--------------------------|--------------------------|
| assistance in re-connecting with family and support networks | <input type="checkbox"/> | <input type="checkbox"/> |
| support for family members and partners of trafficked youth and/or adults | <input type="checkbox"/> | <input type="checkbox"/> |
| volunteer opportunities for trafficking survivors | <input type="checkbox"/> | <input type="checkbox"/> |
| leadership development of trafficking survivors | <input type="checkbox"/> | <input type="checkbox"/> |
| awareness and education about trafficking | <input type="checkbox"/> | <input type="checkbox"/> |

Other (please specify)

22. Imagine you were speaking directly to someone who has been trafficked - what would you say to encourage them to call you for services or assistance?

23. What might make someone ineligible for your services? (check all that apply)

- If client was an active drug user and unwilling to enter drug treatment
- If client was unwilling to leave trafficker or trafficking network
- If agency was unable to get parental permission for a minor to receive services
- If client was unwilling to share real name before receiving basic services
- If client was currently involved in the commercial sex trade and unwilling to stop or exit.
- If agency was unable to secure reimbursement or funds for services
- If client didn't fit our target population (age, cultural background, area of city, etc.)

Other (please specify)

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24. Excluding hotline response or outreach, please note what your capacity for referrals might be on a monthly basis for your current services.

- 1-3
- 4-6
- 7-9
- 10 or more

Other (please specify)

25. Using the legal definition of human trafficking noted at the start of the survey, how many trafficked clients would you estimate your agency/organization/program has worked with in the last 12 months?

- None that we know of
- 1-5
- 6-10
- 11-20
- over 20

26. Are you considering or planning for specialized services/programs for adults and/or children who are or have been trafficked? If so, tell us what's in the works.

Yes

No

27. Do you have survivors of trafficking or people who have been involved in the sex trade or exploitative labor situations as members of your staff, board of directors and/or on an advisory board?

- Yes, we do.
- No, not that we know of.

Other (please specify)

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28. Will you permit the Milwaukee County Human Trafficking Task Force to distribute information about your program to local system and community partners in a resource guide?

- Yes
 No

29. Will you permit the Milwaukee County Human Trafficking Task Force to share information about your program with the National Human Trafficking Hotline that receives calls from Wisconsin residents looking for resources?

- Yes
 No

30. Is there anything else you would like to add?

Thank you for participating in our survey! We will share the results with you once we have a chance to review the responses.