June 9, 2020

Office on Trafficking in Persons
Administration for Children and Families
US Department of Health and Human Services
VIA EMAIL infocollection@acf.hhs.gov


Dear Office on Trafficking in Persons:

HEAL Trafficking submits the following comments in response to the Office on Trafficking in Persons (OTIP) request for public comment on its “Proposed Information Collection Activity; National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (NAC) Recommendations and State Self-Assessment Survey.”

HEAL Trafficking

HEAL Trafficking is a network in 35 countries of over 3100 trafficking survivors and multidisciplinary professionals building the capacity of the health care field to respond to trafficking, from a public health perspective. We tackle issues at the crux of health and trafficking, including Education and Training, Protocols, Research, Direct Services, Prevention, Advocacy, Media and Technology. HEAL Trafficking brings together physicians, advanced practice clinicians, nurses, dentists, emergency medical services (EMS) personnel, psychologists, counselors, public health workers, health educators, researchers, clinical social workers, administrators, and other health professionals who work with and advocate for the health of survivors of human trafficking. Our mission is to mobilize a shift in the anti-trafficking paradigm toward approaches rooted in public health principles and trauma-informed care by expanding the evidence base; enhancing collaboration among multidisciplinary stakeholders; educating the broader anti-trafficking, public health, and health care communities; and advocating for policies and funding streams that enhance the public health response to trafficking and support survivors. HEAL Trafficking engages in work that combats all forms of human trafficking; supports trafficked people of all genders, ages, races/ethnicities, religions, origins, cultures, and sexual orientations; believes all trafficked persons deserve access to a full range of health care including medical, mental/behavioral health, reproductive health, dental, and substance use disorder treatment services; approaches human trafficking from a
public health perspective that incorporates a socio-ecological framework and prevention strategies; and promotes a survivor-centered, trauma-informed, evidence-based, practice-based approach to anti-trafficking efforts. Our protocol toolkit is being used in 35 countries and has been downloaded by health systems 2800 times. Our assessment tool for human trafficking curricula for health professionals is being integrated across the country to set standards for health professional trainings on trafficking.

**Background**

The Preventing Sex Trafficking and Strengthening Families Act of 2014 mandated the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (NAC) to develop a report describing how each state has implemented its recommendations to address sex trafficking in children and youth. The NAC proposes to administer a survey allowing states to assess their progress in implementing NAC recommendations.

On January 17, 2019 the NAC sent a set “Preliminary Recommendations to Strengthen the Nation’s Response to the Sex Trafficking of Children and Youth in the United States” to the U.S. Department of Health and Human Services, the U.S. Attorney General, the Senate Committee on Finance, and the House of Representatives Committee on Ways and Means. On April 10, 2020, the Office on Trafficking in Persons sought public comments on those recommendations and on a survey that would allow states to assess their progress in meeting those recommendations. HEAL Trafficking submits the following comments in response to that request.

**General Comments**

As an organization dedicated to advancing the public health approach to human trafficking, HEAL Trafficking emphasizes the critical importance of prevention in the nation’s response to human trafficking, including child sex trafficking. For the past two decades, the U.S. has greatly expanded efforts at the national, state, and local level to address human trafficking. However, to date, prevention approaches have been underutilized, with greater attention devoted to prosecution of perpetrators and services to providers.

HEAL Trafficking appreciates the detailed set of Preliminary Recommendations offered by the NAC. However, HEAL Trafficking believes that, ultimately, the best way to eliminate human trafficking is to promote primary prevention strategies that address underlying factors that lead to trafficking, which are known as the social determinants of health or upstream determinants of health. To stop trafficking before it starts, we must focus on creating a more equitable and just United States. Addressing these key factors will reduce the vulnerability to abuse and exploitation that creates opportunities for human traffickers:

- Reduce poverty by ensuring that all workers earn a living wage.
- Reduce housing instability and homelessness.
- Ensure that all workers, including low income workers, have access to high quality child care.
- Ensure that all children and youth have access to health care, regardless of income.

The NAC Preliminary Recommendations include in Section 9 recommendations on prevention. Many of these recommendations are laudable. The introduction to Section 9 states: “Develop, implement, and evaluate tailored strategies to eliminate child and youth sex trafficking and remove the vulnerability factors at the individual, family, community, and societal levels. In addition to providing direct services
to confirmed victims, efforts must be taken to prevent human trafficking so that the crime of child and youth sex trafficking does not occur in the first place.” Nevertheless, the specific recommendations that follow do not include measures to address the factors outlined above that are essential to “removing the vulnerability factors” that contribute to human trafficking generally and child sex trafficking specifically.

HEAL Trafficking also believes that it is essential to ensure that child protective services throughout the United States are well funded to provide: comprehensive, wrap around services for families facing adversity before abuse and exploitation occur; trauma-informed care for youth in their care; reduced social worker caseloads; training on trafficking for foster parents and staff at group homes; and participation in multidisciplinary teams.

**Specific Comments on Section 9: “Prevention”**

HEAL Trafficking offers the following specific comments on the recommendations in Section 9: Prevention.

**Training**

In subsection i, add parents, including foster parents, to the list of individuals who should receive training.

**Implementation**

In subsection i, add parents, including foster parents, to the list of audiences for community-based trainings.

Revise subsection ii as follows: “Consider implementing established human trafficking prevention education curricula and/or adapting existing resources for trauma-informed and age-appropriate education or curriculum on human trafficking (e.g., resources on healthy relationships and online safety). Ensure that any curriculum incorporates medically accurate, comprehensive, age-appropriate sex education that allows children to understand healthy relationships and the concepts of consent and bodily autonomy.”

Revise subsection iii as follows: “Ensure prevention efforts are focused on skill-building, including learning how to protect oneself and say ‘no’ to uncomfortable or unwanted sexual advances, in addition to knowledge increase.”

Revise subsection iv as follows: “Ensure children and youth at the highest risk of trafficking receive prevention education. These children and youth include those who live in poverty, those in the child welfare and juvenile justice systems, immigrant children, children impacted by substance abuse, black and Native American children, and lesbian, bisexual, gay, transgender, and queer (LGBTQ) children.

**Data and Evaluation**

Add a subsection v as follows: “Develop standardized measures for human trafficking data that can be used across jurisdictions.”
Add a subsection vi as follows: “Provide technical support and funding to support counties, states, and community-based organizations to build infrastructure for data collection and promote cultures of data sharing.”

HEAL Trafficking appreciates the opportunity to submit these comments and would be glad to respond to any questions.

Sincerely,

Hanni Stoklosa, MD, MPH
Executive Director
HEAL Trafficking
hstoklosa@healtrafficking.org

Susie Baldwin, MD, MPH
President
HEAL Trafficking
sbaldwin@healtrafficking.org