Meeting the Service Needs of Human Trafficking Survivors in the New York City Metropolitan Area: Assessment and Recommendations

Gregory M. Maney, Ph.D.
Tineka Brown
Taylor Gregory
Rafia Mallick
Steven Simoneschi
Charisse Wheby
Nicole Wiktor

APPLIED SOCIAL RESEARCH AND PUBLIC POLICY PROGRAM, HOFSTRA UNIVERSITY

2011

In partnership with
Joan S. Dawber, SC
LIFEWAY NETWORK
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ACKNOWLEDGEMENTS

This study would not have been possible without extensive participation by representatives from service providers, funding agencies, and law enforcement agencies. We thank the following individuals for granting us highly informative interviews: Mary Atlas-Terry, Victim Justice Program Specialist at the Office for Victims of Crime; Nyssa Parampil, Associate Director of Anti-Trafficking Services for the United States Conference of Catholic Bishops/Migration Refugee Services; Christa Stewart, Anti-Trafficking Program Coordinator for the Office of Temporary and Disability Assistance; Robert Minca, Sergeant, NYPD Vice Enforcement Division Major Case Team; and three additional persons who have requested that their identities remain confidential.

We also thank the following individuals and service providers for taking the time and effort to fill out our rather detailed survey instrument: Suzanne Tomatore, City Bar Justice Center—Immigrant Women and Children Project; Sister Teresita Hinnegan, Dawn’s Place; Lauren Burke, the Door Legal Services Center; Renan Salgado, Farmworker Legal Services of NY, Inc.; Lauren Pesso, My Sisters’ Place; and Faith Huckel, Restore NYC, Inc. In addition, we extend our appreciation to several other service providers who have requested that their identities remain confidential. It is our hope and desire that this report benefits each organization in your vital work to protect, respect, and promote the rights of the survivors of human trafficking.

Lastly, we thank Catherine Fisher, Manager of Academic Operations for Faculty Computer Services at Hofstra University for helping us to work our ways through various technical difficulties that arose in administering our online survey.
EXECUTIVE SUMMARY

Human trafficking is a modern form of slavery prevalent domestically and abroad, including in the New York City metropolitan area. Accompanied with the violations of human rights, trafficking is an affront to the personal dignity of its victims. Furthermore, trafficking is in violation of both domestic and international law. Survivors require a variety of health, legal, and social services after they are identified in order to transition successfully to life outside of trafficking. A failure to provide for these service needs increases the likelihood of several negative biographical consequences, including being re-trafficked, physical complications, psychological complications, social isolation, substance abuse, unemployment, poverty, and suicide.

Between May and December of 2010, LifeWay Network and the Department of Sociology at Hofstra University conducted a survey of area private service providers along with in-depth interviews with representatives from funding and coordinating agencies (both public and private), service providers (both public and private), and law enforcement agencies. The study aims to shed light on a variety of issues associated with trafficking; in particular the need for and availability of social services. We also set out to ascertain challenges in identifying survivors and connecting survivors to service providers.

Based upon data from our survey, we estimate that private service providers in the New York City metropolitan area have interacted with at least 11,268 survivors between 2000 and 2010. Our estimate considerably exceeds previously released official estimates for reasons discussed in the full report. It is important to note the likelihood that some trafficking victims have not interacted with private service providers, further underscoring that a large population exists locally.

After case assessment of trafficking survivors, private service providers have determined that there is a great need for long-term housing. Unfortunately major gaps exist in meeting this need. Our survey data indicates that a greater number of survivors would benefit more from either long-term housing (86.6%) or transitional housing (74.5%) than from emergency housing (64.9%). Unfortunately, the survey data indicate that despite the need, safe, affordable long-term housing is virtually non-existent, with only 3.9% of clients needing long-term housing actually receiving it. The majority of service providers responding to our survey assessed both the duration and suitability of emergency housing (the main form of housing currently available) as somewhat or highly unsatisfactory. Both survey respondents and key informants that we interviewed stated that trafficking survivors needed the sustained provision of multiple services by highly trained staff in a closed, secure environment.

A gap also exists in meeting several other service needs. While demand for a handful of the 30 services assessed was largely met, 11 of the services fall below a 20% rate of serviced demand. In particular, high rates of demand for the following services were

1 For the purposes of this study, we define the New York City metropolitan area as counties included in the New York-Northern New Jersey-Long Island, NY-NJ-PA Metropolitan Statistical Area as defined by the Office of Management and Budget.
2 See Appendix for a detailed discussion of the methodology used in this study.
largely unmet: medical care, telephone services, formal/general education, and volunteer programs for survivors. Furthermore, respondents indicated that sub-groups of survivors are frequently underserved, including male survivors, transgender survivors, domestic-born survivors, survivors under the age of 18, and female labor trafficking survivors. The reasons for these exclusions range from restrictive rules of eligibility to service providers indicating an inability to serve certain sub-populations.

Based upon these findings coupled with our review of the relevant literature, we make 20 recommendations to funding and coordinating agencies (both public and private), service providers (both public and private), and law enforcement agencies for ways to increase the identification of trafficked persons, to fill gaps in service provision, and to further cooperation between law enforcement agencies and service providers:

**Increasing the Identification of Trafficked Persons**

1. Expand trainings targeting: (1) leadership in law enforcement agencies that do not view trafficking as a local problem; and (2) less recently graduated patrol officers and precinct officers.
2. Expand trainings for the staff of agencies currently providing services to survivors and the staff of agencies that have the potential to provide services but have yet to knowingly interact with survivors (especially domestic violence-focused providers and health care providers).
3. Increase outreach efforts utilizing communications technologies most likely to be available to victims; in particular publicity through radio programs, television programs, newspapers, and magazines. We further recommend contacting media outlets using languages most frequently spoken by survivors.
4. Utilize advocates to distribute literature in locations identified as experiencing trafficking.
5. Extensively publicize one hotline that focuses solely upon trafficking victims.

**Filling Gaps in Service Provision**

6. Prioritize the creation of long-term, safe housing programs that offer a comprehensive set of services to survivors.
7. Create new and in-depth service programs that assist survivors with medical care, telephones, formal/general education, and volunteer programs for survivors.
8. Increase the provision of foster care or permanent placement to survivors under the age of 18. Develop family counseling and parenting classes for survivors with children.
9. Increase the provision of services to male survivors, transgender survivors, domestic-born survivors, survivors under 18 years of age, and female labor trafficking survivors.
10. Increase the number of bilingual staff and English language courses to facilitate communication with ESL survivors.
11. Develop strong case management systems that include a comprehensive initial assessment, awareness of referral opportunities, and a commitment to working with survivors to gain access to available services.

12. Develop and maintain a detailed, centralized, and shared database of actual and potential service providers in the New York City metropolitan area.

**Furthering Cooperation between Law Enforcement Agencies and Service Providers:**

13. Ensure that both the New York State Interagency Taskforce on Trafficking and the New York City Anti-Trafficking Taskforce are inclusive of NGOs and have regular attendance by all members;

14. Schedule ongoing meet-and-greets to connect providers with law enforcement agencies to expand stakeholder networks and to build trust.

15. Expand and, where applicable, redefine Victim Assistance positions at law enforcement agencies to ensure that: (a) interviews with survivors are conducted in a respectful manner, and (b) survivors are immediately provided with safe housing in non-incarceration settings, medical care, and other services determined to be urgently needed.

16. Advocate for statutory changes (where needed) to enable judges to waive grand juries in cases of human trafficking.

17. Fund new staff positions at service providers to serve as liaisons to law enforcement agencies during days and times that law enforcement are most likely to encounter victims;

18. Develop joint intake protocols articulated through memoranda of understanding, whereby law enforcement and service agency representatives work together to ensure that the survivor’s immediate needs are met and rights are respected while assisting law enforcement to the fullest extent possible in taking action against traffickers.

19. Expand trainings of law enforcement officials focusing upon: (a) protocols regarding the questioning of possible trafficking victims; (b) the immediate service needs of survivors; and (c) resources available to meet those needs, including safe emergency housing.

20. Expand trainings of current and potential service providers focusing upon: (a) understanding criminal investigative procedures and judicial proceedings as they pertain to trafficking cases; (b) cross-cultural competence, and (c) the legal needs of survivors.
INTRODUCTION

_Willingly no one chooses the yoke of slavery_ – Aeschylus (525–456 B.C.)

Slavery is not simply ancient history. It remains with us today and has reached transnational proportions, encompassing poor and affluent societies alike. The US Department of State Trafficking in Persons Report (TIP)(2010: 7) defines human trafficking simply as “activities involved when one person obtains or holds another person in compelled service.” International, national, and state laws provide definitions of human trafficking that generally emphasize the exploitation of individuals in the form of sexual, labor, or other services for monetary or personal gain by means of coercion, fraud, threat or use of force, and/or abuse of power or a position of vulnerability [e.g., United Nations Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children Supplementing the Convention Against Transnational Organized Crime (approved in 2000; entered into force 2003); United States Trafficking Victims Protection Act (2000; reauthorized in 2003, 2005, and 2008), and the New York State Anti-Trafficking Law (2007)]. All of these laws make it clear that those under 18 years of age engaged in sexual acts are victims of sex trafficking regardless of consent.

Human trafficking is widely reported, infringing upon the human rights of millions of people. The United States Department of State (2010) estimates that 12.3 million persons have been trafficked internationally. Among the human rights frequently violated, either in the process of trafficking or as a consequence of trafficking, are liberty and security of person, protection against slavery, freedom of movement, freedom of opinion and expression, just and favorable conditions of work, rest and leisure, education, and adequate standard of living. It is the responsibility of all members of the international community, including governmental and nongovernmental organizations, to work together to not only prevent trafficking from taking place, but also to work with the survivors of trafficking to restore their dignity, to build new lives, to ensure justice, and to organize against trafficking.

A body of laws at the international, national, and local level helps to guide, support, and structure service responses to human trafficking. Section 2, Article 6 of the United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children calls upon States to cooperate with nongovernmental organizations in order to “provide for the physical, psychological and social recovery of victims.” In particular, the Protocol calls for the provision of “(a) appropriate housing; (b) counseling and information, in particular as regards their legal rights, in a language that the victims of trafficking in persons can understand; (c) medical, psychological and material assistance; and (d) employment, educational and training opportunities.”

In 2000, U.S. Congress passed the Trafficking Victims Protection Act to protect and assist foreign-born victims of human trafficking living in the United States. The law made housing, education, health care, job training and other federally-funded social service programs available through the U.S. Department of Health and Human Services. The Act also created T visas for victims in the context of prosecuting their traffickers. The TVPA Reauthorization Act of 2005 established a grant program to “establish, develop, expand, and strengthen assistance programs.” Title II of the 2008 Reauthorization Act
expands funding for these assistance programs and extends service eligibility to include U.S. citizens or resident aliens subjected to trafficking.

The New York State Anti-Trafficking Law of 2007 also follows the familiar “3Ps” approach of prevention, prosecution, and protection. It defines forms of labor trafficking and sex trafficking. The Act authorizes the New York State Office of Temporary and Disability Assistance (OTDA) and the Division of Criminal Justice Services (DCJS) to determine the status of a victim referred under the law and service eligibility. The law amends the Social Services Law, adding Article 10-D entitled “Services for Victims of Human Trafficking.” Section 483-BB provides a non-exhaustive list of the types of services that can be provided. The list includes “case management, emergency temporary housing, health care, mental health counseling, drug addiction screening and treatment, language interpretation and translation services, English language instruction, job training and placement assistance, post-employment services for job retention, and services to assist the individual and any of his or her family members to establish a permanent residence in New York state or the United States.”

The following year (2008), the Safe Harbor for Exploited Children Act was passed by Albany and signed by Governor Paterson. The law avoids the misclassification of minors as criminals by defining sexually exploited persons under the age of 16 as severely trafficked persons as well as by changing the way these minors are handled in the judicial system. Local social services districts are mandated to provide short-term safe housing facilities that offer 24-hour crisis intervention, medical care, and other services to sex trafficked minors living in the district (Polaris Project 2008). To meet these mandates, service districts are permitted to coordinate services with other districts in the region and to utilize, where appropriate “respite beds or runaway and homeless youth programs” (ibid). The act also requires planning for the different service needs of girls, boys, and transgender minors. In addition, the law requires the Office of Children and Family Services (OCFS) to “contract with an agency with experience working with sexually exploited youth to provide at least one safe house for longer-term care, in a geographic area that would meet the needs of sexually exploited youth and that cannot be readily accessed by perpetrators of sexual exploitation” (ibid).

Preventing trafficking, remedying specific cases, and restoring the human rights of human trafficking survivors requires active, sustained commitment and collaboration among funding and coordinating agencies (public and private), service providers (public and private), and law enforcement agencies. During his address to the Department of Justice’s National Human Trafficking Conference in May of 2010, Luis C. deBaca, Ambassador-at-Large for the Office to Monitor and Combat Trafficking in Persons acknowledged that some of the same issues faced prior to the passage of the TVPA remain with us today; in particular “detentions and deportations” as well as a “lack of shelters and services.” The inability to deliver services promised under international, federal, and state laws has long-term negative physical, psychological, and social consequences for the survivors of trafficking, their families, and their communities. With more than a decade elapsing since the passage of the Trafficking Victims Protection Act in 2000, the time has come to systematically and critically assess not only what is being
done to provide for the needs of the survivors of human trafficking, but also what more can be done.

A coalition of religious organizations formed in 2006, LifeWay Network's mission is to provide safe housing for survivors of human trafficking in the New York City metropolitan area. As a relative newcomer, the coalition wanted to make sure that our focus on providing safe housing is appropriate as well as to both learn from and connect with funding and coordinating agencies (both public and private), law enforcement agencies, and service providers (both public and private) already interacting extensively with trafficking survivors. Accordingly, LifeWay Network wanted to answer the following five sets of research questions:

(1) What is the need for and availability of housing for the survivors of trafficking in the New York City metropolitan area? Can we say that there is a need for housing in New York? If so, what is the extent of the need?;
(2) Does existing housing meet the needs of survivors? In particular, is the housing sufficient in its duration, in its level of safety, and/or in the in-house services provided?;
(3) Who is providing what services to which types of trafficked persons?;
(4) What are the main challenges to organizations providing services to survivors? What will help service providers to meet these challenges?; and
(5) How do service providers connect with trafficking victims? Are there any gaps in communication and coordination between law enforcement agencies and service providers?

To answer these questions, LifeWay Network contacted Dr. Gregory M. Maney, an Associate Professor of Sociology at Hofstra University, about working together on a community-based research initiative. Dr. Maney agreed enthusiastically, enlisting support from graduate students enrolled in the Masters of Applied Social Research and Public Policy Program. Working closely with LifeWay Network, the academic research team conducted an online survey of area private service providers as well as key informant interviews with representatives from funding and coordinating agencies (both public and private), law enforcement agencies, and service providers (both public and private).

Statistical and content analyses of these data sources show that most trafficking survivors need long-term, safe housing coupled with the provision of a wide array of services. Unfortunately, these service needs are frequently not being met, particularly for specific sub-populations of survivors. Both law enforcement agencies and service providers face major challenges in meeting survivors’ needs, including the challenge of working effectively with one another. Fortunately, the findings from our research coupled with a review of the academic and practitioner literatures, suggest a number of concrete steps that might be taken to further accomplish our shared goal of empowering survivors. We begin by presenting academic and practitioner research on identifying and providing services to human trafficking victims. We then present our findings from our survey of

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3 Five of the authors of this report—Tineka Brown, Taylor Gregory, Rafia Mallick, Steven Simoneschi, Charisse Wheby, and Nicole Wiktor—either were or currently are graduate students in the Masters of Applied Social Research and Policy Program at Hofstra University.
service providers and interviews with representatives from funders, law enforcement agencies, and service providers. Based upon these findings, we discuss the policy and practice implications specifically for funding and coordinating agencies (both public and private), service providers (both public and private), and law enforcement agencies.
Human trafficking strikes at the very heart of human dignity. Often lured with false promises, trafficking victims become entrapped and unable to escape captors. Human trafficking is not a fairy tale where someone is whisked away, suffers through its ordeals, and emerges without repercussions. Trafficked victims often discover that their newfound freedom is accompanied by long-lasting mental, physical, and financial challenges. Survivors frequently fear that their traffickers will return, or that they will become entangled in complex immigration proceedings, or that they will find needed services unavailable to them—all the while trying to come to terms with what they have experienced. Though it is difficult to mend completely the wounds of a trafficked victim, service providers can certainly help survivors to restore their dignity, to build new lives, and to organize to ensure justice for themselves and other survivors.

Failure to meet the service needs of survivors increases the likelihood of several negative biographical consequences, including (1) experiencing additional human rights abuses, including being trafficked again; (2) physical complications, including chronic pain and/or eventual death as a result of failure to identify and treat STDs, tuberculosis, vision and hearing impairments, lung disease, cancer from exposure to industrial toxins, dental problems, stunted growth, fatigue, headaches, dizzy spells, sexual health problems, back pain, memory problems and other cognitive impairments; (3) psychological complications, including heightened anxiety, depression, hostility, alienation, disorientation, extreme sadness, sense of worthless, shame, and of hopelessness; (4) social isolation; (5) substance abuse; (6) unemployment; (7) poverty; and (8) suicide (Zimmerman et al. 2003; Shkurkin 2004; Zimmerman et al. 2006; Clawson and Dutch 2008; O’Donnell and Hansell 2008; UNODC 2008; Nack 2010). Most academic research focuses on either the causes of human trafficking or assessing the efficacy of prevention responses. As a result, there are only a handful of studies on service providers and the services they offer to survivors, underscoring the need for further research. This section reviews studies on social service provisions to the survivors of human trafficking.

Identifying Victims

Identification of trafficking victims is critical to ensuring the prosecution of traffickers and the connection of needed social services for survivors. In a report released in 2004, the U.S. Department of Justice stated (2004: 22) “The greatest challenge for the immediate future is locating and identifying victims.” There are a growing number of state and federally funded and administered training programs designed to assist in the identification of human trafficking victims. For instance, the New York State Division of Criminal Justice Services, the New York State Office of Temporary and Disability Assistance, the U.S. Office for Victims of Crime, and U.S. Immigration and Customs
Enforcement offer trainings on identifying victims. Moreover, prominent service providers in the New York City metropolitan area offer similar trainings. Despite these positive gains, more can be done in order to aid in the identification of trafficked victims.

Several academic studies have noted the challenges and difficulties facing both law enforcement agencies and service providers in identifying victims of human trafficking. Hughes (2003) finds that many victims are socially isolated and unable to escape their traffickers. Jahic and Finckenauer (2005) note that different and restrictive definitions of trafficking get in the way of developing a universal, uniform protocol for identifying victims and providing them with social services (also see Musto 2009). Tyldum (2010) attributes identification difficulties not only to a lack of an explicit operational definition of trafficking, but also to the frequent refusal of victims to see themselves as trafficked persons. Bernat and Zhilina (2010) argue that victims often hide from the police either as a result of their immigration status or from fear of being punished by traffickers. They also assert that the labeling of trafficked persons as homeless or prostitutes by law enforcement officers results in many survivors falling through the cracks (also see Butkus 2007; Ditmore 2009). Other studies attribute under-identification to trauma that impedes the ability of survivors to discuss what they have experienced (Hopper 2004; Ditmore 2009).

In a study analyzing survey responses from a national sample of police agencies in the U.S., Farrell, McDevitt, and Fahy (2010) found that less than 10% of police agencies identified human trafficking cases between 2000 and 2006 (also see Fahy 2009). Gozdziak and MacDeonnell (2007) maintain that child victims are particularly unlikely to be identified and gain access to services. Moreover, Chuang (2010) argues that a focus upon sex trafficking by law enforcement agencies, advocates, service providers, and the media has resulted in the under-identification of the victims of labor trafficking. Farrell, McDevitt, and Fahy (2010) point toward a failure of leadership to see trafficking as a local problem coupled with a lack of training to assist police officers in identifying and responding to cases of trafficking (also see Heiges 2009). Other scholars maintain that the media needs to push awareness of trafficking into the forefront to facilitate identification. Coonan (2004), Hogan (2008), and Nack (2010) all suggest that limited access to victims in public venues and the failure to use foreign language radio, television, and print to publicize hotlines delays identification of victims by law enforcement and service providers.

Based upon this research, some scholars have put forward recommendations for ways to increase the identification of trafficking victims. MacDonald (2009) recommends a multi-pronged approach. Law enforcement, service providers, and even members of the general public should be trained to take active roles in identifying possible victims (Nack 2010). We can ask victims if they are working in the job that they thought they would when they set out for the United States, if they are free to leave their place of work, and if they receive all of their earnings directly. Asking about contact with friends and families is also a way of identifying victims as most victims are living under highly controlled circumstances. U.S. Department of Homeland Security (2010) lists several additional questions to help assess whether or not a foreign-born person may be trafficked, including but not limited to: (1) Is the person in possession of identification
and travel documents?; (2) Is the person forced to perform sexual acts or is a minor engaged in commercial sex?; (3) Has the person or their family been threatened with harm, deportation, or law enforcement action if they attempt to leave?; (4) Has the person been harmed or deprived of food, water, sleep, medical care or other life necessities; (5) Can the person freely move about, socialize, and attend religious services?

Fahy (2009) finds that training officers, developing protocols, and designating specialized personnel increases the identification of trafficking victims. Other studies recommend greater educational training for health care professionals on identifying victims; particularly professionals in hospital emergency rooms, health clinics, and abortion clinics (Hughes 2003; Miller, Decker, Silverman, and Raj 2007; Nack 2010). Based upon 127 in depth interviews, Small (2007) suggests that community partnerships can be helpful in identifying victims and connecting victims to services.

**Service Needs of Survivors**

Law enforcement agencies and service providers must not only identify trafficking victims, but they must also be aware of their service needs. The available research underscores the importance of providing for the health, housing, and legal needs of survivors.

**Health Needs**— Stewart and Gajic-Veljanoski (2005) compiled a list of physical and psychological health risks facing trafficking victims. These risks include food and sleep deprivation; sexual abuse and related issues (e.g., sexually transmitted diseases, unwanted pregnancies, abortions); and post-traumatic stress disorder (e.g., anxiety, depression, body aches). Hossain et al. (2010) similarly conclude that victims of human trafficking who have endured mental and physical violence are likely to suffer from depression, anxiety and post-traumatic stress disorder (PTSD). Clawson and Dutch (2008) find that domestic minor victims are in particular need of anger management, conflict resolution, and family counseling. Service providers also note the need for substance abuse counseling, particularly among domestic victims (ibid.).

The short-term capacities and long-term well being of survivors hinge greatly upon the immediate provision of quality health services. In a study involving a series of three interviews over time of 207 female trafficking survivors across Europe, Zimmerman et al. (2006) document reductions in levels of anxiety, depression, hostility, and PTSD symptoms over time. The authors conclude (p. 22) that “immediate assistance and crisis intervention is of benefit to women, and second, that ongoing support, particularly psychological counseling, is important and necessary.” Given that encounters with law enforcement can be traumatic to trafficking victims and the memory loss that often accompanies PTSD, Zimmerman et al. (2003), O’Donnell and Hansell (2008), Ditmore (2009), and Nack (2010) emphasize prioritizing the delivery of health and social services over criminal investigations, receiving legal services, or entering legal proceedings. Strotts, Jr. and Ramey (2009) found that there is a lack of skilled training of counselors who may miss these signs and symptoms. Accordingly, Bernat and Winkeller (2010) recommend the training of service providers to help better meet the mental and emotional needs of survivors. Additionally, Miller, Decker, Silverman, and Raj (2007) point out the particular importance of educating and training health care professionals.
While research has clearly identified a myriad of health needs associated with trafficking victims, we are attempting to discern whether these needs are met by service providers. Here, research is far more limited, presenting a gap that we have set out to help fill with our study.

**Housing Needs**—Nack (2010: 839-40) interviewed prosecutors actively involved in anti-trafficking proceedings and concluded that “finding emergency shelters for victims is a huge problem in New York City.” A 2008 report by the New York State Interagency Task Force on Human Trafficking emphasizes that because “human trafficking victims can be vulnerable to re-victimization; they require safe housing that protects their person, confidentiality, and privacy” (O’Donnell and Hansell 2008:19; also see FCADV 2004; Coonan 2004). Unfortunately, housing of any type is often unavailable. Domestic violence shelters frequently have restrictions that can prevent sex trafficking victims from seeking their shelter (e.g., proving status as victim of domestic partner abuse). A lack of housing for male trafficking victims is noted in particular (ibid). Moreover, the housing that is most likely to be available is often not safe housing. In a national survey, responding service providers reported instances of sex trafficking survivors experiencing humiliation and isolation in domestic violence shelters (Clawson and Dutch 2008).

In September of 2004, the Florida Coalition against Domestic Violence released a human trafficking manual for domestic violence centers. The report states that trafficking victims typically need a longer length of stay than domestic violence victims. Clawson and Dutch (2008) find a shortage of transitional and permanent housing, particularly for “domestic minors with felony convictions and victims with mental health or substance abuse issues.” Unfortunately, domestic minors need long-term housing to “allow providers enough time to establish relationships with victims” and to provide “adequate services to meet their longer-term needs” (p.8). The FCDV report also calls for efforts by housing providers to integrate survivors into the community given that many have never freely experienced U.S. society. Furthermore, it stresses the need for interpreters—a vital resource that is often lacking.

**Legal Service Needs**—Immigration and deportation proceedings are a key issue facing human trafficking victims who are out of legal status. Brennan (2010) examined trafficking victims’ access to and use of T-visas in the United States. She points out that (2010: 1589) “it has been a challenge finding individuals in forced labor in the United States who would qualify for T visas,” suggesting that major deportation risks to trafficked victims continue to exist. Similarly, Pollock and Holier (2010) report that since the T-visa program began in 2000, approximately 1,300 visas have been granted despite the legislation allowing for 5,000 being granted each year. Only in 2009 were T-visa holders able to apply for permanent residency at the end of the visa’s 3-year time period. Survivors who are unwilling or unable to cooperate with law enforcement can also be assisted in applying for U-visas which are more plentiful than T-visas. Collecting identification documents is an important part of securing visas, and using public services (Clawson and Dutch 2008).

Based upon a survey of service providers, Clawson and Dutch (2008:2) also note the need for legal assistance and advocacy to assist survivors in “navigating the different
U.S. systems, including criminal justice, child welfare, immigration, human services, transportation, etc.”

**Life Skill Needs**—Clawson and Dutch (2008: 2) also emphasize survivors’ needs for services that will assist them in attaining independent living status. Among these services are child care, education, life skills training, job training, employment location assistance (especially pressing for international victims), and financial management.

**Effective Service Delivery**

Busch, Fong, and Williamson (2004) have suggested structuring service provisions to trafficking survivors in ways similar to domestic violence service organizations, emphasizing cross-cultural competence in service delivery, the creation of community support, and staff and client education on human trafficking (also see Clawson and Dutch 2009). Bernat and Winkeller (2010) stress the need for training service providers to facilitate victim cooperation with law enforcement. The 2010 U.S. Department of State Trafficking in Persons Report indicates three core principles for shelter programs. The principles are as follows: “(1) rebuilding the victim’s sense of empowerment, trust and community; (2) providing a combination of services such as psychological, medical, legal, educational, or life skills (including vocational and translation/interpretation); and (3) tailoring any service to each individual victim, as not all require the same services.”

Clawson and Dutch (2008:5) point out that a “lack of knowledge and understanding of what services are available is a barrier for service providers...Many service providers report great confusion regarding what services their clients are eligible for and can access, which highlights the need for effective case management…” Additionally, the study argues that international victims face crises early on, particularly in terms of being identified and securing documentation. The authors call for a consistent, central case manager to better prioritize and organize service provision efforts, noting that staff turnover and a lack of funding often thwart this objective.

We are confident that our study helps to fill in gaps in the literature on both the need for and the availability of social services for survivors of human trafficking in the New York City metropolitan area. Responding effectively to human trafficking requires a multi-pronged effort of funding and coordinating agencies (both public and private), law enforcement agencies, and social service providers (both public and private). Increasing the quantity and quality of services available for trafficked victims can complement the important work already underway to prevent human trafficking.
RESEARCH FINDINGS

Overview of Private Service Providers and Clients in the New York City Metropolitan Area

Between May and December of 2010, we conducted an online survey of private service providers having interacted with at least one unique trafficked person living in the New York City metropolitan area (see Appendix for a detailed discussion of our methods). On average, providers completing our survey have worked with survivors for six years. Overall, the amount of time that service providers have worked with survivors ranged from less than half a year to eleven years.

Based upon client numbers provided by survey respondents, we calculated estimates on the number of survivors interacting with all private service providers in the New York City metropolitan area. Overall, we estimate that area private service providers have interacted with at least 11,268 survivors between 2000 and 2010.4 In the twelve months prior to their completion of our survey, we estimate that service providers interacted with at least 1,606 survivors. The number of unique individual survivors that providers responding to our survey worked with varied, mainly depending on the type of organization and the amount of time that the organization has worked with survivors.5 Long-standing, established service providers focusing upon either the sex trafficking of domestic minors or the labor trafficking of immigrants tended to report interacting with larger numbers of survivors.

These estimates considerably exceed previously released figures. The New York State Interagency Task Force on Human Trafficking reported 36 victims confirmed by DCJS and OTDA as of July 3, 2008. Most (28) of these victims were trafficked upstate and, therefore, outside of the New York City metropolitan area. The United States Conference of Catholic Bishops (USCCB) reported that, in 2009, 55 survivors in New York State were served as clients through the HHS-USCCB per capita contract program. A representative from a federal agency (name withheld) estimated that the agency had encountered approximately 80 trafficking victims in the New York City metropolitan area since January of 2009.

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4 Our estimates were calculated using the following procedure. To avoid double counting the same client, we subtracted the number of clients referred to a responding service provider by other agencies from the number of unique individual trafficked persons that the responding service provider reported interacting with overall and during the past twelve months. After controlling for cross-agency referrals, we summed the number of clients reported by all responding service providers. We then used the average of conservative and liberal estimates of the total number of service providers interacting with trafficking survivors living in the New York City metropolitan area to estimate the survey response rate (see the Appendix for further discussion of these estimates). Lastly, we divided the total number of unique individual clients reported by all respondents by the estimated survey response rate.

5 It should be noted that one respondent indicated that they had interacted with trafficked persons, but did not keep systematic records, and thus, did not provide an estimate of the number of survivors the respondent had interacted with. For our analysis, a value of 1 was assigned to this provider. The actual number of survivors interacted with, however, is likely to be higher. In response to open-ended survey questions, other providers indicated that they believed that they were working with more trafficking survivors than they had either confirmed or reported to us in the survey.
We attribute the wide disparity in estimates, in part, to the fact that the organizations providing the alternative estimates work with a handful of area service providers and/or work with limited sub-set of survivors eligible to receive their assistance. The gap in estimates highlights the need for wider and deeper connections between funders and law enforcement agencies, on the one hand, and service providers on the other. It also underscores the advantages of using service providers as sources of data. In this context, we encourage service providers to keep systematic records on interacting with trafficking survivors to improve future estimates.

The survey not only helped us to estimate the size of the survivor client population, but also their demographic characteristics. On average, respondents reported that of all the unique individual trafficked person that their organization have interacted with, a large majority (71.5%) were victims of sex trafficking. A further 21.5% were victims of labor trafficking. The remaining 7.0% were victims of a combination of sex and labor trafficking. Our survey respondents indicated that, on average, 87.6% of the survivors that they interacted with are female; 58.4% are under the age of 18; and 20.5% are out-of-status immigrants. Respondents indicated the following places of origin: North America (72.9%), Asia (7.9%), South America (5.4%), Caribbean (4.6%), Central America (4.5%), Europe (2.1%), Africa (1.7%), and Other/Unknown (0.9%). The large number of victims born in the United States (65.6%) contrasts with the emphasis (until recently) upon providing services to foreign-born victims.

**How Private Service Providers Connect with Survivors**

Identifying survivors of trafficking is one of the major challenges encountered by private service providers. As Table 1 indicates, about 1 in 3 referrals of survivors to private service providers comes from other service providers (34.4% of referrals). Non-law enforcement agencies at the federal, state, county, and local levels made almost twice as many referrals to service providers than law enforcement authorities (at the federal, state, and county levels, including courts), indicating that connections with law enforcement agencies are in need of further development. After referrals from law enforcement agencies, connections were most likely to be established as a result of outreach efforts by private service providers (13.5%), followed by unsolicited self-referrals by trafficked individuals (5.5%). One representative from a federal law enforcement agency (identity withheld) indicated that New York City area hotlines set up primarily for domestic violence victims are generally not helpful in linking trafficking survivors to service providers.

Less than 5% of referrals of survivors to private service providers came from hospitals, clinics, or immigration attorneys, underscoring the need to train staff at these locations to determine who is a survivor. Anonymous tips also appear to be a rarity (0.1% of all referrals), suggesting that members of the general public either are not

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6 The following percentages control for cross-agency referrals and differences in the number of clients served by respondents.

7 Ibid.

8 All of the survey respondents were private agencies.
adequately aware of the indicators of trafficking or do not reach out to private service providers when coming into contact with an individual whom they suspect is being trafficked.

Table 1: Establishment of Connections with Survivors (%)

<table>
<thead>
<tr>
<th>Establishment of Connections with Survivors (%)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Referrals from other private social service providers</td>
<td>34.4</td>
</tr>
<tr>
<td>Referrals by non-law enforcement government agencies</td>
<td>27.0</td>
</tr>
<tr>
<td>Referrals from law enforcement authorities</td>
<td>14.1</td>
</tr>
<tr>
<td>Contact initiated as a result of outreach by provider</td>
<td>13.5</td>
</tr>
<tr>
<td>Self-referrals</td>
<td>5.5</td>
</tr>
<tr>
<td>Referrals by hospitals or clinics</td>
<td>3.6</td>
</tr>
<tr>
<td>Referrals by immigration attorneys</td>
<td>1.0</td>
</tr>
<tr>
<td>Other</td>
<td>0.8</td>
</tr>
<tr>
<td>Anonymous tip</td>
<td>0.1</td>
</tr>
<tr>
<td>Total</td>
<td>100.0</td>
</tr>
</tbody>
</table>

**SURVIVORS’ HOUSING NEEDS AND HOUSING AVAILABILITY**

A large gap exists between the need for housing of survivors of human trafficking in the New York City metropolitan area, on the one hand, and its availability on the other hand (see Table 2). The importance of the duration can be seen in that providers determined, after case assessment, that a larger number of survivors would benefit from either long-term housing (86.6%), or transitional housing (74.5%) compared to emergency housing (64.9%). Reflecting the emphasis upon providing daily and ongoing staff and peer support for survivors, respondents reported that rent and/or utilities assistance for independent housing was needed least (22.2%).

Unfortunately, the placement of survivors in long-term housing in the area is virtually non-existent. Providers reported that although over 86% of survivors would benefit from long-term housing, less than 4% of these clients have actually received long-term housing through referrals from providers. None of the respondents directly provided long-term housing. Only 28.7% percent of clients who would benefit from transitional housing received this housing either directly from the provider or through referrals.

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9 The following percentages control for cross-agency referrals and differences in the number of clients served by respondents.

10 Emergency housing is housing provided for up to 3 months. Transitional housing is provided for up to 6 months. Long-term housing is provided for more than 6 months.
Even the demand for emergency housing is not being fully met. While survey respondents indicated that 64.9% of their clients who were trafficked would benefit from emergency housing, slightly more than one-third of them (35.9%) actually received emergency housing directly from the provider or through referrals.

**Table 2: Survivors’ Housing Needs and Serviced Demand**

<table>
<thead>
<tr>
<th>Type of Housing</th>
<th>Service Needed (% Clients)</th>
<th>Serviced Demand (% Clients)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Housing</td>
<td>64.9</td>
<td>35.9</td>
</tr>
<tr>
<td>Transitional Housing</td>
<td>74.5</td>
<td>28.7</td>
</tr>
<tr>
<td>Long-Term Housing</td>
<td>86.6</td>
<td>3.9</td>
</tr>
<tr>
<td>Independent Housing</td>
<td>22.2</td>
<td>3.9</td>
</tr>
</tbody>
</table>

Comments made during interviews with key informants are consistent with these findings. One survey respondent (identity withheld) stated that housing is “difficult to access and [there is a] lack of shelters.” Christa Stewart, Anti-Trafficking Program Coordinator for the Office of Temporary and Disability Assistance, similarly stated, “The availability of housing depends upon whether the request comes in at peak time. It’s all ad hoc. Lack of housing is easily one of the biggest issues in terms of service provision.” A representative of a federal agency working on human trafficking summed up this consensus by stating “Whether affiliated with law enforcement agencies or NGOs, we all agree that there is a huge need for housing.”

In response to open-ended questions, multiple survey respondents stressed the need for longer-term housing. A representative of one provider (identity withheld) indicated that the need for longer term housing extends to all sub-populations of survivors: “Transitional and permanent, affordable housing options are sorely lacking in general for all victim types.” We now examine why there is a high level of need for longer-term housing.

**Duration of Housing**

Even when service organizations are successful in either providing or locating housing, the duration is generally too short to meet the needs of trafficking survivors. Of providers responding to our survey, 84.6% rated the duration of available housing as either somewhat or highly unsatisfactory in terms of meeting the needs of survivors. None of the respondents indicated that the duration of available housing is either highly satisfactory or even somewhat satisfactory.

Service providers working with out-of-status survivors indicated that they could not effectively meet the service needs of their clients in the absence of longer-term housing. One survey respondent (identity withheld) indicated that, “Emergency shelter doesn’t last long enough (only 3 months) given the instability and time taken to process work authorization. What we need is to extend emergency shelter and/or provide transitional and long-term housing.” Another survey respondent (identity withheld) similarly stated, “Many times law enforcement may take a while to process the work authorization or for...
the victim to receive the certification letter from HHS. The longer this takes the pressure is on us because our budgets are too limited to continue providing services on a long-term basis.” This lack of financial assistance for long-term housing coupled with long waiting lists for public housing are likely to also contribute to the absence of long-term housing for domestic survivors.

However, it is important to note that not all survivors desire to stay for the full length of time for which housing is available to them. As Nyssa Parampil, Associate Director US Conference of Catholic Bishops/Migration and Refugee Services’ Anti-Trafficking Program, pointed out during our interview: “Sometimes a client wants to stay for less time than what’s available to them. Thus, one can’t assume that a short duration reflects a lack of financial assistance or time restrictions by a housing provider.” Early departure from housing could signal a hostile, unsafe environment and/or that the services offered are not adequate in providing what a survivor requires.

**Suitability**

The majority (61.6%) of providers rated emergency housing as either somewhat or highly unsuitable for the survivors of trafficking. Only 15.4% of providers rated this type of housing as either somewhat or highly suitable. Beyond its limited duration, survey respondents and key informants who were interviewed expressed concerns related to safety, service provision, and staff training at emergency housing programs. Sergeant Minca, NYPD Vice Enforcement Division Major Case Team, highlighted the importance of safety of the survivors and indicated that he reluctantly has had to place some survivors in lock-down facilities because of the lack of security at emergency shelters: “We can place victims in the facility and within 20 minutes they can walk right out and be recruited by traffickers. Traffickers know this and go right to the shelter and pick back up the victims. Those who escaped fall right back into being victimized.” Another key informant (identity withheld) similarly stated that homeless shelters are not appropriate due to the fact that they most likely provide an open environment that lacks adequate safety measures.

Staff at emergency shelters are often not sufficiently trained to assess the specific service needs of survivors let alone to provide for these needs either directly or through referral. The fact that training is lacking is not missed by either service providers or funders. Lauren Burke, Staff Attorney and Skadden Fellow of The Door Legal Services Center, noted that the Center has worked with “children in ACS facilities who have been treated horribly by staff who do not understand trafficking in persons.” Another respondent (identity withheld) indicated that, “There are limited options for survivors nationwide. Additionally, those service providers who do come in contact with victims are in significant need of training.” Mary Atlas-Terry, Victim Justice Program Specialist at the Office for Victims of Crime states:

We acknowledge that a great deal of capacity building and training needs to occur within the ‘traditional’ victim services field to bring service providers up to speed to identify human trafficking in all of its forms and provide services appropriate to meet their needs. For instance, child advocacy centers are experts in investigating and addressing service needs for victims
of child abuse, including child sexual abuse… However, they may not be able to easily adapt their skill set and services to address the needs of a young person who has limited family support, who may be a runaway, who may have been engaged in prostitution for some time, and who may still have a significant bond with her trafficker.

**Survivors’ Needs for Other Services and their Availability**

Survivors require more than just housing. Our survey assessed 30 additional types of social services, ranging from legal assistance, counseling, and employment training and placement assistance to benefits, educational classes, and life skills. Providers identified 10 services needed by more than 75% of their trafficked clients (see Table 3). Almost all survivors need direct cash and case management beyond the initial assessment. More than three-quarters of all survivors were reported to be in need of transportation, trauma counseling, support groups, document collection, life skill training, medical care, clothing, and telephone services.

For each service, we also estimated serviced demand—the percentage of clients needing the service that actually received the service either directly through the reporting provider or through referral to a housing program offering the service. Our estimates do not take into account referrals beyond housing program providers. As a result, they are likely to underestimate serviced demand, particularly in the areas of medical care, legal services, and English language classes. In two instances—supportive counseling and reunification/repatriation services—the service needs of survivors were fully met. In several instances, the demand for frequently needed services was largely met. Over 95% of clients requiring transportation, food, and clothing received these services. Most clients requiring case management beyond the initial assessment (94.8%) and legal services related to immigration status (93.7%) received these services. Demand was largely but not completely satisfied for seven other services. Between 70% and 90% of survivors in need of the following services received them: peer-to-peer mentoring (88.4%), public benefits (83.4%), document collection (81.1%), support groups (79.8%), trauma counseling (79.7%), direct cash (79.0%), and life skill training (72.0%).

No services had a serviced demand rate between 50% and 69%. There appears to be little middle ground—either demand is largely met or it is largely unmet. Five services have a rate of serviced demand that falls between 20% and 49%. Eleven out of twenty-nine services fall below a 20% rate of serviced demand. They are as follows: employment placement (18.8%), telephone services (15.3%), family counseling (6.4%), volunteer programs for trafficking survivors (5.7%), childcare and child-related expenses (4.3%), English language classes (6.2%), medical care (2.2%), formal/general education (0.3%), community building and advocacy workshops (0.0%), parenting classes (0.0%), and foster care or permanent placement of minors (0.0%).

Most of these services are promised under Federal law and New York State law. Furthermore, each is frequently of critical restorative importance. The possible lack of medical care reinforces the message that strong connections with health care providers are needed given the serious physical injuries that frequently result from being trafficked.
<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Service Needed (%)</th>
<th>Service Provided (%)</th>
<th>Serviced Demand (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct Cash</td>
<td>98.4</td>
<td>77.7</td>
<td>79.0</td>
</tr>
<tr>
<td>Case Management Beyond the Initial Assessment</td>
<td>98.6</td>
<td>93.5</td>
<td>94.8</td>
</tr>
<tr>
<td>Transportation</td>
<td>94.8</td>
<td>91.0</td>
<td>96.0</td>
</tr>
<tr>
<td>Counseling—Trauma</td>
<td>94.3</td>
<td>75.2</td>
<td>79.7</td>
</tr>
<tr>
<td>Support Groups</td>
<td>89.5</td>
<td>71.4</td>
<td>79.8</td>
</tr>
<tr>
<td>Document Collection</td>
<td>82.6</td>
<td>67.0</td>
<td>81.1</td>
</tr>
<tr>
<td>Life Skills Training</td>
<td>83.2</td>
<td>59.9</td>
<td>72.0</td>
</tr>
<tr>
<td>Medical Care (including Dental and Vision Care)</td>
<td>80.9</td>
<td>1.8</td>
<td>2.2</td>
</tr>
<tr>
<td>Clothing</td>
<td>79.0</td>
<td>76.7</td>
<td>97.1</td>
</tr>
<tr>
<td>Telephone Services (e.g., calling card, pre-paid cell)</td>
<td>75.4</td>
<td>11.5</td>
<td>15.3</td>
</tr>
<tr>
<td>Formal/General Education</td>
<td>74.8</td>
<td>0.2</td>
<td>0.3</td>
</tr>
<tr>
<td>Volunteer Programs for Trafficking Survivors</td>
<td>74.0</td>
<td>4.2</td>
<td>5.7</td>
</tr>
<tr>
<td>Public Benefits</td>
<td>68.5</td>
<td>57.1</td>
<td>83.4</td>
</tr>
<tr>
<td>Employment-Related Education/Training</td>
<td>67.7</td>
<td>18.9</td>
<td>27.9</td>
</tr>
<tr>
<td>Food</td>
<td>68.1</td>
<td>65.4</td>
<td>96.0</td>
</tr>
<tr>
<td>Employment Placement</td>
<td>68.0</td>
<td>12.8</td>
<td>18.8</td>
</tr>
<tr>
<td>Counseling—Supportive</td>
<td>66.1</td>
<td>74.3</td>
<td>100.0</td>
</tr>
<tr>
<td>Peer to Peer Mentoring</td>
<td>59.4</td>
<td>52.5</td>
<td>88.4</td>
</tr>
<tr>
<td>Counseling—Family</td>
<td>59.3</td>
<td>3.8</td>
<td>6.4</td>
</tr>
<tr>
<td>Legal Services—Civil/Family Court Proceedings</td>
<td>38.8</td>
<td>14.4</td>
<td>37.1</td>
</tr>
<tr>
<td>Legal Services—Victim Advocacy</td>
<td>38.7</td>
<td>15.6</td>
<td>40.3</td>
</tr>
<tr>
<td>Child Care and Child-related expenses</td>
<td>34.8</td>
<td>1.5</td>
<td>4.3</td>
</tr>
<tr>
<td>Parenting Classes</td>
<td>32.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Legal Services—Immigration (e.g., U &amp; T Visas)</td>
<td>22.2</td>
<td>20.8</td>
<td>93.7</td>
</tr>
<tr>
<td>English Language Classes</td>
<td>20.9</td>
<td>1.3</td>
<td>6.2</td>
</tr>
<tr>
<td>Reunification/Repatriation Services</td>
<td>20.7</td>
<td>24.3</td>
<td>100.0</td>
</tr>
<tr>
<td>Interpretation/Translation</td>
<td>19.2</td>
<td>8.5</td>
<td>44.3</td>
</tr>
<tr>
<td>Counseling—Substance Abuse</td>
<td>12.4</td>
<td>4.3</td>
<td>34.7</td>
</tr>
<tr>
<td>Community Building and Advocacy Workshops</td>
<td>1.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Foster Care or Permanent Placement of Minors</td>
<td>0.3</td>
<td>0.0</td>
<td>0.0</td>
</tr>
</tbody>
</table>

* Either directly or via referral to housing programs providing services. The following percentages control for cross-agency referrals and differences in the number of clients seen by responding providers.
(see p. 11). Formal/general education, English language classes, and employment placement all can play key roles in reducing the vulnerability of survivors to being re-trafficked. To go beyond the rhetoric of empowerment, service providers need to offer both individual and collective opportunities for survivors to contribute to their communities as well as to organize against human trafficking. Few providers offer volunteer programs or community building and advocacy workshops and generally do not see a need for such programs. One representative of a federal agency (identity withheld) highlighted the utility of telephone services in supporting survivors: “We try to find a way to stay in touch with these victims. Agents try to find funding for cell phones. We give them our cell phone numbers. Many of them call. Most of the young women I work are pretty good in calling us if they need help.” The same key informant highlighted the importance of family counseling and legal services: “Most of the victims have a child. So there are issues in working with the victim to make sure that Administration for Children’s Services doesn’t get involved…Some of the girls who’ve been here a long time need legal advice regarding full custody. We want to make sure they have full access to these services.”

Services needed by sizeable minorities of survivors were sometimes largely unavailable. About one-third of the survivors would benefit from childcare and assistance with child-related expenses, but only 1.5% of survivors received these services. The situation is even worse for parenting classes. Respondents reported that 32% of the survivors interacted with would benefit, yet none of the providers actually provided these classes either directly or through referral to a housing program provider. While slightly more than 20% of clients needed English language classes, slightly more than 1% of clients actually received this service for a serviced demand rate of 6.2%.

**Eligibility Restrictions**

Not all survivors of human trafficking in the New York City metropolitan area are equally likely to receive services. Overall, respondents indicated that three sub-groups of survivors are most likely to be underserved: transgender survivors, male survivors, and survivors under the age of 18. The finding reflects an orientation towards providing services to adults; in particular victim services for women through domestic violence shelters and rape crisis centers. Extensive regulation contributes to fewer providers offering services to children. Access to specific services also frequently depends upon additional factors such as the interaction between the survivor’s gender and the form of trafficking that she or he has experienced. As Christa Stewart, Anti-Trafficking Program Coordinator for the Office of Temporary and Disability Assistance, aptly puts it, “No one agency serves survivors across the demographic spectrum.”

**Eligibility for Housing**—The survivor’s gender has an important affect upon access to housing (see Table 4). Males and transmales (female to male) were less likely to receive housing than females and transfemales (male to female). At the same time, females received greater access to housing compared to transfemales. While all respondents providing housing reported that female victims of sex trafficking were eligible, slightly over half (55.6%) reported that transfemale victims of sex trafficking were eligible. Eligibility for housing drops for female survivors who are the victims of labor trafficking.
Legal status also has a slight effect on a victims’ eligibility for housing services. Out-of-status immigrants were somewhat less likely to be eligible for housing than U.S. citizens and permanent residents.

Age is the strongest predictor as to whether or not a survivor will be eligible for housing. Minors are the least likely sub-population to be eligible for housing services, with two-thirds of housing providers reporting that survivors under the age of 18 are ineligible for their programs. Only 18.1% of foreign-born survivors under the age of 18 were supplied emergency housing—the form of housing most readily available but least suited to trafficking survivors as discussed above. Sergeant Minca, NYPD Vice Enforcement Division Major Case Team, stated, “The biggest problem right now in the City is finding housing, especially for underage survivors. There’s no place to house under fourteens or fifteens.” The finding underscores the importance of rapidly implementing the Safe Harbor for Exploited Children Act. The frequent exclusion of transgender minors from housing programs highlights the importance of the Act’s provision for greater planning to meet the service needs of girls, boys, and transgender minors.

Table 4: Eligibility for HOUSING by Survivor Characteristics

<table>
<thead>
<tr>
<th>Gender &amp; Type of Trafficking</th>
<th>% of Providers Reporting Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Females, Sex Trafficking</td>
<td>100.0</td>
</tr>
<tr>
<td>Females, Labor Trafficking</td>
<td>88.9</td>
</tr>
<tr>
<td>Transfemales, Sex Trafficking</td>
<td>55.6</td>
</tr>
<tr>
<td>Transfemales, Labor Trafficking</td>
<td>55.6</td>
</tr>
<tr>
<td>Males, Sex Trafficking</td>
<td>44.4</td>
</tr>
<tr>
<td>Males, Labor Trafficking</td>
<td>44.4</td>
</tr>
<tr>
<td>Transmales, Sex Trafficking</td>
<td>44.4</td>
</tr>
<tr>
<td>Transmales, Labor Trafficking</td>
<td>44.4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Legal Status</th>
<th>% of Providers Reporting Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Citizens and Permanent Residents</td>
<td>88.9</td>
</tr>
<tr>
<td>Immigrants (Out-of-Status)</td>
<td>77.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>% of Providers Reporting Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–17</td>
<td>33.0</td>
</tr>
<tr>
<td>18–24</td>
<td>100.0</td>
</tr>
<tr>
<td>25+</td>
<td>88.9</td>
</tr>
</tbody>
</table>

**Full Eligibility for Services**—Full eligibility for all services provided directly by survey respondents is affected by the same demographic characteristics, although the access effects of these characteristics are occasionally different. As Table 5 shows, the following
sub-populations were most likely to be declared ineligible for some of the services offered by providers: male survivors, transmale labor trafficking survivors, and survivors under 18 years of age. Roughly half of the responding providers indicated that each of these sub-populations would be ineligible for at least one of their services. Full eligibility increases slightly for transmale sex trafficking survivors and transfemale labor trafficking survivors (61.5% respectively). Eligibility increases further for transfemale sex trafficking survivors and U.S. citizens and permanent residents (69.2% respectively). Female sex trafficking survivors and survivors between the ages of 18 and 24 had the highest full eligibility rates (92.3% respectively).

Eligibility restrictions do not necessarily reflect a lack of capacity to provide for the needs of a sub-population of survivors. Nevertheless, analysis of our interviews and survey responses suggest that a range of demographic characteristics bear heavily on the type of services that providers feel capable of providing to a trafficking survivor (see Table 6). Almost half (47.1%) of survey respondents reported feeling incapable of providing services to transgender individuals if they are survivors of labor trafficking. A large number of respondents (41.2%) also reported feeling incapable of providing

Table 5: Eligibility for ALL SERVICES by Survivor Characteristics

<table>
<thead>
<tr>
<th>Gender &amp; Form of Trafficking</th>
<th>% Fully Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Females, Sex Trafficking</td>
<td>92.3</td>
</tr>
<tr>
<td>Females, Labor Trafficking</td>
<td>76.9</td>
</tr>
<tr>
<td>Males, Sex Trafficking</td>
<td>46.2</td>
</tr>
<tr>
<td>Males, Labor Trafficking</td>
<td>46.2</td>
</tr>
<tr>
<td>Transfemales, Sex Trafficking</td>
<td>69.2</td>
</tr>
<tr>
<td>Transfemales, Labor Trafficking</td>
<td>61.5</td>
</tr>
<tr>
<td>Transmales, Sex Trafficking</td>
<td>61.5</td>
</tr>
<tr>
<td>Transmales, Labor Trafficking</td>
<td>53.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Citizen Status</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Citizens and Permanent Residents</td>
<td>69.2</td>
</tr>
<tr>
<td>Immigrants (Out-of-Status)</td>
<td>84.6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–17*</td>
<td>53.8</td>
</tr>
<tr>
<td>18–24</td>
<td>92.3</td>
</tr>
<tr>
<td>25+</td>
<td>84.6</td>
</tr>
</tbody>
</table>

* Two of the respondents indicated that they would provide services to survivors age 17 and younger if they were accompanied by an adult guardian, which is rarely the case with trafficked minors.
services to transgender individuals if they are survivors of sex trafficking. Looking at non-transgender survivors, survey respondents feel less capable of providing male survivors with services compared to female survivors.

With regard to age, survey respondents feel less capable of providing minors (29.4% incapable) with services compared to 18-24 year olds (5.9% incapable) and survivors over 25 (11.8% incapable). Furthermore, survey respondents feel less capable of providing services to citizens (35.3% incapable) than to out-of-status immigrants (17.6% incapable).

These findings from our survey are echoed in comments made by key informants we interviewed. More providers see themselves as capable of providing services to out-of-status immigrants than to U.S. citizens and permanent residents. As Mary Atlas-Terry, Victim Justice Program Specialist at the Office for Victims of Crime, pointed out, “Until recently, all grants were geared towards international survivors. Last year (2009) was the first time that OVC’s grants focused upon domestic minors.” Underage survivors (i.e., those under 18 years of age) are also perceived to be underserved. Lauren Burke, Staff Attorney and Skadden Fellow of The Door Legal Services Center, exclaimed, “There are

Table 6: Provider Capability to Supply Services by Survivor Characteristics.
(\(\%\) of Providers Indicating Incapable of Providing Services)

<table>
<thead>
<tr>
<th>Gender &amp; Type of Trafficking</th>
<th>Incapable (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfemales, Labor Trafficking</td>
<td>47.1</td>
</tr>
<tr>
<td>Transmales, Labor Trafficking</td>
<td>47.1</td>
</tr>
<tr>
<td>Transfemales, Sex Trafficking</td>
<td>41.2</td>
</tr>
<tr>
<td>Transmales, Sex Trafficking</td>
<td>41.2</td>
</tr>
<tr>
<td>Males, Labor Trafficking</td>
<td>35.3</td>
</tr>
<tr>
<td>Males, Sex Trafficking</td>
<td>29.4</td>
</tr>
<tr>
<td>Females, Labor Trafficking</td>
<td>11.8</td>
</tr>
<tr>
<td>Females, Sex Trafficking</td>
<td>0.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Citizen Status</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Citizens and Permanent Residents</td>
<td>35.3</td>
</tr>
<tr>
<td>Immigrants (Out of Status)</td>
<td>17.6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–17</td>
<td>29.4</td>
</tr>
<tr>
<td>25+</td>
<td>11.8</td>
</tr>
<tr>
<td>18–24</td>
<td>5.9</td>
</tr>
</tbody>
</table>
not enough services for youth!” However, youths are not the only ones underserved. One respondent (identity withheld) stated, “This [their services] doesn’t address the needs of men, boys, and transgender persons. There are huge gaps for those populations.” Having examined what services providers believe they are capable of offering to different sub-populations of survivors, we now turn our attention to the main challenges facing both service providers and law enforcement agencies.

Main Challenges Facing Service Providers and Law Enforcement Agencies

Our research has identified several challenges that complicate the process of providing services to survivors of human trafficking. One of the most important challenges remains identifying survivors. Service providers and law enforcement agencies reported having difficulty identifying trafficked persons because of coerced victim silence, victim denial, language barriers, and/or cultural differences. A lack of understanding of human trafficking and training to identify the signs of someone being trafficked also contribute to the problem. According to one service provider representative responding to our survey (identity withheld), “Law enforcement are rarely trained to identify victims, which makes the default mechanism to be the criminal justice system—a system that continues to criminalize victims.” Mistrust of law enforcement also impedes identification. Another survey respondent (identity withheld) reported, “Because we deal mostly with criminalized undocumented rural workers, the police either do not play a role or they actually are being used by traffickers as a means of threat and coercion.”

Service providers also face challenges in identifying trafficking victims and providing appropriate services. Faith Huckel, Executive Director of Restore NYC, states: “There is a huge problem with identification of survivors due to shame, fear, and a lack of education about the issue.” Accordingly, in her interview with us, Mary Atlas-Terry, Victim Justice Program Specialist with the U.S. Department of Justice Office for Victims of Crime highlighted the need for improvements to the identification process so as to ensure the effective provision of services.

Beyond obstacles to identifying survivors, service providers pointed toward several other challenges that they face. Funding-based restrictions on service eligibility often impeded service providers from meeting the needs of specific clients. A lack of funding and staff in general also has hampered the provision of multiple services needed by large numbers of survivors, in particular long-term housing and accessible transportation. Those receiving training for working with trafficking survivors often are frustrated in their efforts to translate this training into full-time employment. Several additional organizational challenges were noted, including concerns for the safety of staff and clients as well as high rates of staff turnover.

Both service providers and law enforcement officials widely and readily acknowledged the challenges of working together. Three-quarters (75%) of service providers responding to the question rated the performance of the police in meeting the needs of trafficked persons as either somewhat unsatisfactory or highly unsatisfactory. One respondent (identity withheld) indicated that, in her experience, law enforcement lacks the knowledge and experience to understand survivors, especially the survivors of labor trafficking.
In turn, law enforcement agency representatives that we interviewed pointed towards several challenges in working with service providers. One key informant (identity withheld) pointed out that law enforcement and service providers do not work the same schedule. Service providers tend to work a 9 to 5 schedule while most of their cases occur after hours and on the weekend. This hampers collaboration and survivors’ immediate access to services and support beyond initial protection by law enforcement.

Law enforcement officials also expressed concerns about service providers impeding the prosecution of traffickers. One representative of a federal agency (identity withheld) suggested that providers’ concerns regarding confidentiality were often overwrought and unwarranted:

I think confidentiality is a very western concept. They (trafficking victims) come from countries where the milkman and shopkeeper knows what’s going on with you. These victims are now in this country. They’re isolated. They don’t speak language and they don’t know what a NGO is. And now confidentiality is thrown at them…A common sense approach is what should happen. Once NGOs establish trust, then they should indicate that law enforcement agencies are there to assist.

Another key informant (identity withheld) related and expanded upon similar concerns:

NGOs have to work more closely with police departments. They have to understand that we have a job to do and that is to go after the traffickers. We would like to be involved in the in-take process. I’d be more than willing to have service providers involved in our interview process. I understand that service providers need to protect the confidentiality of clients. Nonetheless, things they might say during that initial interview that NGOs might pass over and forget could be useful in prosecution. In a lot of interviews that we’ve done, the victims are schooled too much by service providers. We need to know key things such as movement. Coached victims often make things up and we catch them in lies. There are many cases that slip through the cracks because of the lies and victims not being forthcoming. Whatever she tells us she also has to tell the DAs. If the statements don’t match up, then we can’t prosecute.

Law enforcement agency representatives indicated that service providers need to learn more about the process of criminal investigations and judicial proceedings.

One representative of a federal agency (identity withheld) noted a lack of capacity on the part of some of the service providers offering assistance: “We’re picky about who we work with. It boils down to who we can rely upon and who we can trust. There are so many NGOs in the area, but sometimes they can’t do what they’re offering…You really have to vet the service providers.”

Service providers and law enforcement agents also often disagree over the extent to which law enforcement has shifted its approach from criminalizing those who have been trafficked to treating them as victims. With regard to the NYPD, one service provider representative (identity withheld) stated:
It depends on the police officer. There are some excellent NYPD officers that really understand the issue and are doing what they can to educate other officers. However, police are looking at the women mostly as criminals rather than victims. Therefore, their perception of the problem is usually victim-blaming.

In contrast, Sergeant Minca, NYPD Vice Enforcement Division Major Case Team stated, “We emphasize that we want to go after the traffickers and not them. We try not to arrest the girls and we see them as victims. It’s a major shift in the NYPD. I also see this shift when talking with other agencies.” This perception of a major shift was echoed by a federal agency representative (identity withheld):

I agree 100%. This position I’m in didn’t exist until 2 years ago. We had one woman who single handedly tried to work on this in Washington DC... Now we are up to 15 individuals nationally working full time on trafficking. We hope to have full time Victims Assistance Coordinators in all of the offices to conduct emergency assessments and to hook up with NGOs.

Another federal agency representative (identity withheld) similarly states: “I’m surprised at the question. I can’t recall my agency ever taking a criminalization approach. We take the opposite approach.” Service providers and law enforcement agencies need to overcome these challenges to ensure that survivors of trafficking receive both restorative services and remedial justice.
RECOMMENDATIONS

In this section, we present recommendations based upon the findings of our research regarding ways for funding and coordinating agencies (both public and private), service providers (both public and private), and law enforcement agencies to further identify survivors and to assist them in restoring their dignity, rebuilding their lives, ensuring justice, and mobilizing against human trafficking. While much of the discussion above has focused upon service providers and law enforcement agencies, it is clear that without expanded resource provision and direction from funding and coordinating agencies, service providers and law enforcement agencies cannot fill gaps in publicity, training, and services.

Increasing the Identification of Trafficked Persons

1. We recommend that funding and coordinating agencies provide the resources (e.g., money, space, mailing lists) necessary to further expand trainings targeting: (1) leadership in law enforcement agencies that do not view trafficking as a local problem; and (2) less recently graduated patrol officers and precinct officers. The trainings should focus upon locating and identifying trafficked victims.

2. Funding is also needed to train current and potential service providers (especially domestic violence-focused providers and health care providers). The trainings should similarly focus upon locating and identifying trafficked victims.

3. Large numbers of contacts resulting from outreach efforts by survey respondents highlight the importance of widely and intensively publicizing qualified service providers. We recommend an increase in outreach efforts utilizing communications technologies most likely to be available to victims; in particular publicity through radio programs, television programs, newspapers, and magazines. We further recommend contacting media outlets using languages most frequently spoken by survivors. Our survey data indicates that languages spoken by survivors in the New York City metropolitan area include, but are not limited to (listed in descending order of the number of speakers): English, Spanish, Chinese (e.g., Mandarin, Fuzhounese), Russian, Korean, Bengali, Arabic, Igbo, Hindi, Thai, Hungarian, French, Tagalog, Haitian Creole, Bulgarian, Portuguese, Malayalam, Nepalese, Bahasa Indonesian, Telegu, Urdu, and Ukrainian.

4. The general public also should be provided access to identification of human trafficking victims training so they are able to assist individuals in their neighborhoods. We recommend the utilization of advocates to distribute literature in locations identified as experiencing trafficking.

5. Some key informants noted trafficking victims encountering problems connecting with providers when calling New York City area hotlines established primarily to assist domestic violence victims. Accordingly, we recommend that stakeholders attempt to come to an agreement to extensively publicizing one hotline that focuses solely upon trafficking victims (e.g., the National Human Trafficking Resource Center hotline—888-3737-888).
Filling Gaps in Service Provision

6. Our research indicates that there is a severe shortage of housing suitable for the survivors of trafficking in the New York City metropolitan area. Greater cooperation among both public and private coordinating/funding agencies and social service providers is needed to prioritize the creation of long-term, safe housing programs that offer a comprehensive set of services to survivors, preferably directly or, if necessary, through referrals.

7. Offering a wider array of services is essential to rebuilding the lives of trafficking survivors. Above, we have documented the tragic consequences of failing to provide these services, including the re-trafficking of survivors. Based upon our survey findings, many service providers are unable to assist survivors (either directly or through referrals to housing programs) with medical care (80.9% of clients needed, 2.2% serviced demand), telephone services (75.4% of clients needed, 15.3% serviced demand), formal/general education (74.8% of clients needed, 0.3% serviced demand), and volunteer programs for survivors (74.0% of clients needed, 5.7% serviced demand). We recommend increased funding for the creation of new and in-depth service programs in these areas as our research indicates that these services are essential to empowering survivors.

8. We recommend that service providers working with unaccompanied survivors under the age of 18 ensure the provision of foster care or permanent placement. The Unaccompanied Refugee Minor Program (URM) is particularly helpful in securing these and other services for international minors. We also recommend that funding and coordinating agencies assist service providers working with survivors with children in developing family counseling and parenting classes. At present, such services are virtually non-existent. To help ensure the highest quality of services, we recommend that the New York State Office of Children and Family Services develop a comprehensive approach to screening and training providers.

9. Given their underserviced status, we recommend that funders and providers take steps to increase the provision of services to survivors under 18 years of age, male survivors, transgender survivors, and domestic-born survivors. Efforts should be made to more widely publicize providers serving these sub-populations (see Recommendation #12) as well as to ensure that transportation is available to survivors who are a considerable distance away from these providers. Nonetheless, the demand for the services of these providers may exceed the capacities of the agency. In this context, greater coordination between service providers focusing upon sex trafficking and service providers focusing upon labor trafficking can increase the availability of services to female labor trafficking victims. In addition, funders can support organizations in either creating new facilities and services providing for the needs of male and transgender survivors and/or to expand existing facilities and services to become more gender inclusive. Whenever possible, providers should establish inclusive guidelines regarding eligibility for housing and other social services. We also recommend that staff at service providers (in particular emergency shelters, ACS
facilities, and domestic violence shelters) receive trainings in preparation for working with underserved populations.

10. When possible and appropriate, increase the number of bilingual staff, interpretation services, and English language courses to facilitate communication with ESL survivors.

11. Given the frequent need of survivors for multiple services, service providers need to develop strong case management systems that include a comprehensive initial assessment, awareness of referral opportunities, and a commitment to working with survivors to gain access to available services.

12. To facilitate service referrals, coordination, and assessment, we recommend developing and maintaining a centralized, shared database of actual and potential service providers in the New York City metropolitan area. For each provider, the database should specify what services providers are capable of providing, to whom, and at what cost (if any). To help create this database, the authors of this report commit to sharing our sampling frame and relevant survey findings with the New York State Interagency Taskforce on Trafficking, the New York City Anti-Trafficking Taskforce, and the Polaris Project. Cooperative initiatives between stakeholders are essential for providing fast and high quality housing and service provision to survivors.

**Furthering Cooperation between Law Enforcement Agencies and Service Providers**

Our research reveals ongoing challenges in the relationship between law enforcement agencies and service providers. We suggest the following as possible ways to promote constructive working relationships:

13. Ensuring that both the New York State Interagency Taskforce on Trafficking and the New York City Anti-Trafficking Taskforce are inclusive of NGOs and have regular attendance by all members;

14. Scheduling ongoing meet-and-greets to connect providers with law enforcement agencies to expand stakeholder networks and to build trust;

15. Expanding and, where applicable, redefining Victim Assistance positions at law enforcement agencies to ensure that: (a) interviews with survivors are conducted in a respectful manner, recognizing that trafficking survivors are victims that are likely to have experienced repeated traumas and physical injuries that may make it difficult for them to immediately relay information to law enforcement officials; and (b) survivors are immediately provided with safe housing in non-incarceration settings, medical care, and other services determined by emergency case assessment to be urgently needed.

16. Trauma and physical injuries experienced by victims can preclude their immediate disclosure of information regarding trafficking situations. As a result, law enforcement agencies may have to drop cases against traffickers because of the need to immediately convene a grand jury. Accordingly, we recommend that law enforcement agencies and service providers work together to advocate for statutory changes (where needed) to enable judges to waive grand juries in cases of human trafficking.
17. Funding a new staff position at service providers specializing in emergency assessment and service delivery. The new staff person would serve as a liaison to law enforcement agencies. The liaison would be on call and available during days and times that law enforcement are mostly likely to encounter victims;

18. Developing a joint intake protocol articulated through memoranda of understanding whereby law enforcement and service agency representatives work together to ensure that the survivor’s immediate needs are met and rights are respected while assisting law enforcement to the fullest extent possible in taking action against traffickers. We recommend that part of this protocol entails the immediate provision of the following services: translator services, medical care (including a psychological assessment by a professional counselor specializing in PTSD), and contact with a victim assistance coordinator and service provider representative. Providing a translator for survivors possessing limited English proficiency is important when survivors first arrive at the precinct in order to convey safety and protection to the survivors. In cases such as sex trafficking, it is also important that specific medical services are provided quickly for the well being of the survivor and to assist in the prosecution of traffickers (e.g., rape kits can provide important evidence). Safe housing service providers should be contacted immediately in cases where a law enforcement agency cannot provide safe housing outside of a lockdown setting.

19. Increased funding for expanded trainings of law enforcement officials by service providers regarding the needs of survivors will help law enforcement officials to better assist survivors if service providers are not available during late hours. The trainings should focus upon: (a) protocols regarding the questioning of possible trafficking victims; (b) awareness and sensitivity to cultural differences that could influence the quality of interactions between officers and survivors; (c) the immediate service needs of survivors; and (d) resources available to meet those needs, including safe emergency housing. These trainings can occur in tandem with trainings assisting law enforcement officials in identifying victims of trafficking (also see Recommendation #1 above).

20. Funding is also needed to train current and potential service providers (especially domestic violence-focused providers and health care providers). The trainings should focus upon: (a) understanding criminal investigative procedures and judicial proceedings as they pertain to trafficking cases; (b) cross-cultural competence, and (c) the legal needs of survivors. These trainings can occur in tandem with trainings assisting service providers in identifying victims of trafficking (also see Recommendation #2 above).

We are confident that the benefits from cooperation and collaboration will outweigh initial obstacles and allow the stakeholders to help survivors transition into society more smoothly and strengthen the struggle against human trafficking.
CONCLUSION

Our research indicates that a large majority of survivors of human trafficking require access to safe, long-term housing and multiple support services including direct cash, transportation, trauma counseling, support groups, document collection, life skills training, medical care (including dental and vision care), clothing, telephone services, formal education, and volunteer programs for trafficking survivors.

There is a pressing need for more and better housing for trafficking survivors. Only 3.9% of survivors who needed long-term housing actually received it. Representatives from coordinating and funding agencies (both public and private), law enforcement agencies, and service providers (both public and private) all highlighted this gap during their interviews. In particular, youth and transgender individuals are less likely to receive appropriate housing and other services.

Our recommendations are based upon findings from our survey of service providers, our interviews with key informants, and our review of the relevant literature. All three stakeholders (funding and coordinating agencies, law enforcement, and service providers) need to continue to develop more efficient and collaborative ways of identifying trafficking victims and working together to ensure restorative services and remedial justice. Greater time, effort, and funding is needed to train law enforcement officials and the staff of service providers (particularly health care, domestic violence, and ACS providers) to identify survivors, to offer survivors safe and adequate housing and other needed services, to be knowledgeable about humane, supportive, and culturally appropriate interactions with survivors, and to understand the often multi-level, location-dependent, and time-sensitive processes of criminal investigation and prosecution of traffickers. While current efforts must be acknowledged, more can be done to enhance public awareness. Expanded publicity through the radio, television, newspapers, and magazines coupled with the greater utilization of advocates to distribute literature in locations identified as experiencing trafficking are ways to increase the chances of reaching victims.

Beyond these collaborative recommendations, there are recommendations that focus mainly on one of the three stakeholders. **Funding and coordinating agencies** should either encourage organizations to create new facilities and services providing for the needs of underserved gender minorities or expand existing facilities and services to become more gender inclusive. Furthermore, service providers should receive the funding necessary to provide highly needed and largely unavailable services such as medical care, telephone services, formal/general education, and volunteer programs.

**Service providers** attempt to meet the critical needs of survivors, but good intentions are not always sufficient. An almost ad hoc process of providing services needs to be reevaluated and turned into a professionalized system where the staff of service providers are trained, protected, and supported. Either directly or through referral, providers should endeavor to increase the provision of the following services: long-term safe housing, medical care, telephone services, formal/general education, and volunteer programs for survivors. Providers working with foreign-born survivors are encouraged to
provide English language classes either directly or through referral. Providers working with minors should ensure, where appropriate, the provision of foster care or permanent placement. Providers working with survivors with children should develop or identify family counseling and parenting classes to support survivors.

Additionally, to ensure the equitable delivery of services to all survivors, to the fullest extent possible providers should establish inclusive eligibility guidelines to increase service access for underserved sub-group such as transgender individuals and minors. When possible and appropriate, increasing the number of bilingual staff to facilitate communication with ESL survivors and providing specific training for staff regarding working with transgender survivors is also recommended.

While funders and service providers focus primarily on the survivors’ well-being, law enforcement has the task of also incarcerating traffickers and making sure that justice is served. Formal and informal opportunities to network and build trust between service providers and law enforcement officials are critical to promoting cooperation in the pursuit of both of these objectives. Another key recommendation is the development of joint intake protocols and memoranda of understanding between law enforcement agencies and service providers to ensure that the survivors’ immediate needs are met and rights are respected while assisting law enforcement to the fullest extent possible in taking action against traffickers. We recommend that part of these protocols and MOUs entail the immediate provision of the much needed services, including safe housing in non-incarceration settings, translator services, medical care, and expedited case assessments by service providers. The expansion of the number of victims assistance staff at law enforcement agencies and their presence during investigative interviews with survivors along with trainings of law enforcement officials by service providers should help to ensure that survivors’ immediate needs are met during late and weekend hours, when representatives from service providers are not necessarily available. A considerable amount of tension results from requirements in certain jurisdictions to immediately empanel grand juries to indict incarcerated traffickers. Successfully lobbying for legislative changes that enable judges to waive grand juries in cases of alleged human trafficking will help to ensure that the needs of survivors are prioritized without jeopardizing the ability to prosecute their traffickers.

Meeting the needs of the survivors of human trafficking requires more than the goodwill of a few people. Our research has shown that there is a lack of data available on service delivery to trafficking survivors. We call for similar studies to be conducted on an ongoing basis to assess progress in meeting the service needs of survivors. Remaining cognizant of the vulnerability of survivors as human subjects, law enforcement agencies and service providers might consider bringing in an independent researcher to administer anonymous or confidential surveys to survivors to learn of their perceptions of interactions with law enforcement agencies and service providers. Members of survivor support groups could also be approached collectively to see if they would be willing to serve as focus group for an independent researcher. Researchers should attempt to collect more than a handful of case studies to enhance the external validity of the findings.
By taking the research findings seriously and translating them into practice, we are confident that LifeWay Network and other stakeholders can effectively accomplish our mission of serving, protecting, and empowering the survivors of human trafficking. The alternative is to see the continued re-victimization and denial of human dignity to trafficked persons.
REFERENCES


United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children; Section 2, Article 6


APPENDIX: DISCUSSION OF METHODOLOGY

In partnership with LifeWay Network, Dr. Maney, and graduate students enrolled in the Masters of Applied Social Research and Public Policy program at Hofstra University conducted a study to assess the need for and availability of safe housing and other support services for survivors of human trafficking living in the New York City metropolitan area. Our research consisted of administering an online survey to non-profit or private agencies providing services to trafficking survivors as well as conducting interviews with key informants from funding and coordinating agencies (both private and public), service providers (both private and public), and law enforcement agencies. The survey instrument was revised substantially based upon the feedback of representatives from three funding/coordinating agencies and one major private service provider coupled with the results of a pilot survey. Both survey and interview respondents were asked a series of questions regarding their knowledge and experiences related to how they came into contact with survivors; the extent of their interactions with survivors; the demographic characteristics of the client population; the service needs of survivors, service availability and quality; and major challenges in assisting survivors. Participation in both the survey and the interviews was voluntary. Respondents were able to discontinue or refuse to answer any question at any time.

Ensuring Validity and Reliability

Concerns persist regarding the validity and reliability of data on human trafficking due to, among other things, the silencing of those being trafficked, underreporting by survivors who have escaped traffickers, a failure by law enforcement agencies and service providers to identify victims, oversimplifying assumptions and the biasing of research subjects by researchers, and small, biased samples (e.g., Tyldum 2010; Brunovskis and Surtees 2010; Choo, Jang, and Choi 2010; Zhang 2009). Even if these threats are mitigated, errors in data entry, coding, and analysis could undermine the accuracy of the findings.

We have proactively addressed these issues to meet the challenges of producing credible research. We took several steps to ensure the validity and reliability of the measures included in the survey instrument. First, we asked that when answering survey questions, respondents use the same definition of human trafficking; specifically, the definitions of severe forms of human trafficking provided by the Trafficking Victims Protection Reauthorization Act of 2008. Second, we simplified and clarified the language of several questions based upon feedback from the pilot survey as well as interviews with key informants. We made deliberate, concerted efforts to use neutral phrasing and terminology familiar to service providers. Third, we also used this feedback to compile a comprehensive if not exhaustive list of potential responses; in particular, responses to questions pertaining to service needs, availability, and eligibility. Fourth, many of our survey questions gave respondents an open-ended option to provide responses other than the preset categories. Beyond consent-related questions, respondents were not required to answer questions. Fifth, we decided to administer the survey online using Qualtrics to
avoid any threat that differences among survey administrators might pose to the reliability of responses.

One of the shortcomings of our analysis was the lack of systematic data collection by organizations, raising the possibility that our survey data may only provide crude estimations of the actual experiences of service providers. Accordingly, whenever possible, we compare our survey data with statistics compiled by taskforces, funders, and (other) government agencies. We refrained from using other methodological instruments such as case studies, as those would have reliable lower degree of external validity than our survey.

**Sample Selection**

We sought to survey non-profit organizations actively providing services to trafficked persons living in the New York City metropolitan area. As is often the case in human rights research, a randomized sampling technique was not feasible due to the small estimated population of service providers. Through online searches, we identified multiple resource lists for trafficking victims. From these lists we identified 130 non-profit organizations said to offer services to trafficked persons. Of these 130 organizations, we determined that 109 offer services in the New York City metropolitan area. We contacted each of these 109 organizations, via e-mail and phone, encouraging them to complete the survey. Of the organizations contacted, 8 indicated that they had not provided services to trafficked persons, including one law firm providing representation to those accused of trafficking. These organizations were told not to fill out the survey. In total, representatives from 17 private service providers completed the survey.11

Because the sample is not random, it may not be representative of the population of private service providers. It is likely that when compared to non-respondents, respondents have greater resources and greater contacts with other services providers. Moreover, some of our respondents provide services across the region, including locations outside of the New York City metropolitan area. As a result, statistics based upon our survey data may overestimate the size of the population of trafficking survivors interacting with service providers in the New York area. On the other hand, providers responding to the survey are likely to not have identified some of their clients as trafficking victims. For instance, one survey respondent (identity withheld) stated: "We are working with 55 clients all from Korean and Chinese background. From this number, it is clear that at least 15 of the clients are clear trafficking cases, though we estimate that the number is much, much higher (probably closer to about 40 clients)." The inability to identify all clients who have been trafficked is likely to contribute to our

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11 The response rate for the sampling frame was 16.8%. We do not know whether or not all of the organizations in the sampling frame that did not respond to our emails and telephone calls have actually provided services to trafficking survivors. We asked the 17 respondents to list up to three agencies that they made referrals to. Based upon this information, we know of 31 service providers that have interacted with one or more trafficking survivors in the New York City metropolitan area. The response rate for known service providers, therefore, was 54.8%.
statistics underestimating the size of the population of survivors interacting with service providers in the New York City metropolitan area.

We stress that because of the silencing of victims and survivors moving immediately from the area, service providers are likely to interact with only a small fraction of trafficking victims. Accordingly, we do not attempt to estimate the number of persons trafficked in the New York City metropolitan area. Rather we limit ourselves to estimating the number of trafficked persons interacting with area private service providers. Our estimate does not include the number of trafficked persons interacting only with public service providers.

It is also possible that the regional origins of clients as reported by respondents may be a function of the relative size and affluence of different Diasporic groups in the United States. It is reasonable to conclude that the larger and more affluent the Diasporic group is, the more likely it is that there is a service provider specializing in assisting this sub-population of trafficked persons.

**Protection of Human Subjects**

Some researchers have interviewed and/or surveyed trafficking survivors (e.g., Simkhada 2008; Aron, Zweig, and Newmark 2006). Zimmerman et al. (2008), however, encountered ethical challenges when talking to victims of human trafficking. They chose to exclude possible subjects after psychological assessment because the subjects were psychologically unable to participate or could not complete the interview.

Our research team (including LifeWay Network staff) discussed and addressed human subject concerns prior to conducting both the survey and the interviews. We refrained from surveying or interviewing individual trafficking victims for two reasons. First and foremost, due to their marginalized and vulnerable status, it was decided that conducting research directly with trafficked persons would present undue risks to human subjects. Second, gaining access to trafficked persons presents a myriad of challenges.

We chose, therefore, to instead conduct research with representatives from funders, service providers, and law enforcement officials focusing upon human trafficking. Most of our subjects have interacted with large numbers of trafficking survivors. These experiences qualify our subjects to speak competently about issues related to service provision. Our survey started by asking for consent for use of their name and in a separate question the use of the name of their affiliated organization. In reporting our findings below, we respect the confidentiality of respondents who requested that their identities be withheld. The interviews were conducted and recorded with either the verbal or written permission of the respondents. All key informants and survey respondents were given an opportunity to comment on a draft of this report. Extensive efforts were made to incorporate this feedback into the final version.

**Data Coding and Analysis**

*Survey Data*—Qualtrics automatically created a quantitative database of survey responses. Dr. Maney and Ms. Wiktor then cleaned this data. Once identified, outlier values were either verified, replaced, or removed. Instances of double responses to single-response questions were removed from the analysis. Whenever appropriate, text
responses were reassigned to appropriate response categories. Most of our analyses consisted of calculating descriptive statistics such as sums, averages, and percentages. We made these calculations using either Excel or Stata. Where appropriate and needed, our estimates control for cross-agency referrals as well as differences among respondents in the reported number of clients served. 

**Interview Data**—Once transcribed, interviews were imported into a content analysis software program (NVivo!) and coded for themes arrived at both deductively and inductively. In particular, we created thematic coding units that would assist us in answering the five sets of research questions discussed above (see p. 9). After coding selected passages of interviews together for training purposes, Dr. Maney, Ms. Brown, Mr. Simoneschi, and Ms. Wiktor separately coded the interviews. Differences in coding were discussed and reconciled. Themes were then analyzed for their robustness. Interview passages that were representative of prevailing themes across key informants and consistent with our analysis of the survey data are reported in the findings. We believe that, when taken together, our survey and interview data provide credible, new insights regarding the provision of services to trafficking survivors living in the New York City metropolitan area.

For further information on this report, please contact:

Joan S. Dawber, SC  
Life Way Network  
Executive Director  
(718) 779-8075  
jsdlifeway@yahoo.com

Gregory M. Maney, Ph.D.  
Associate Professor of Sociology  
Hofstra University  
(516) 463-6182  
socgmm@hofstra.edu