

August 23, 2024

Katherine Chon
Director, ACF Office on Trafficking in Persons
Katherine.Chon@acf.hhs.gov

VIA EMAIL

RE: FY2025 OTIP Human Trafficking Funding Recommendations

Director Chon:

Freedom Network USA (FNUSA) thanks **OTIP** for continuing to provide critical funding for human trafficking service providers. These services are life-saving for survivors fleeing exploitation and allow survivors to build a safe future for themselves and their families. We appreciate your office's dedication to administering these funds effectively and the hard work of your team. We also appreciate the improvements you have implemented in the past few years to increase and improve access to trauma-informed services for all survivors.

We were especially encouraged to see **OTIP** extend the authority to all its grantees to provide victim determination documents to survivors applying for credit repair under the Debt Bondage Repair Act. One of the biggest challenges with implementing the law has been finding authorized providers, making **OTIP**'s leadership absolutely critical. Your office has set a fantastic precedent for other agencies to ensure survivors can access this important form of relief.

As you know, FNUSA is the nation's largest coalition of service providers and advocates working directly with human trafficking survivors in the United States. We are committed to the human rights-based approach to human trafficking, placing a trafficked person's priorities and narrative at the center of anti-trafficking work. We work to create a coordinated national system in which appropriate and effective high-quality services are available to any survivor, anywhere, anytime—regardless of legal status, geographic location, age, gender, sexual orientation, or type of trafficking experienced.

On behalf of our 101 <u>members</u> across the US, I respectfully submit the following recommendations for your program planning in the coming months and years. We know **OTIP** funds many service programs, but our recommendations this year focus on the National Human Trafficking Hotline, as we know the program will be included in the next round of funding opportunities.

1. Update National Human Trafficking Hotline Guidance to Better Serve the Needs of Survivors

In the wake of the efforts to require the National Human Trafficking Hotline (NHTH) to report tips to law enforcement, **OTIP** should act to protect the rights of survivors to safe calls and consent to law enforcement involvement. **OTIP** should update its guidelines for the NHTH to ensure the NHTH does not report survivors' information to law enforcement without their explicit consent. Operating the NHTH with a dual purpose has only resulted in confusion and prevented survivors from accessing needed services. The recent evaluation¹ of the NHTH and reports from survivors who have called the NHTH reveal that survivors are unaware of what a report to law enforcement would entail and what information triggers the hotline to make a report. Since 2023, countless survivors have publicly explained why the NHTH has become unsafe due to law enforcement reporting and why increasing reporting will erode trust in the NHTH.²

The NHTH consistently receives contacts outside of the scope of its mandate, which creates unnecessary delays for survivors seeking help and redirects critical resources away from survivors. Congress intended the NHTH to be "a national communication system to assist victims of severe forms of trafficking in persons in communicating with service providers." The evaluation shows that the NHTH receives multiple types of contactors, while other national hotlines almost entirely receive contactors seeking assistance. For example, in 2023, 76 percent of callers to the National Domestic Violence Hotline were victims/survivors. In the same year, only 24 percent of signals received by the NHTH were from victims/survivors. While 3,058 requests were made for service access, 6,101 were made to report tips. No other national hotline also operates as a tipline. Between 2015 and 2018, only 42% of contacts received by the NHTH were related to a specific incident of trafficking. The evaluation and hotlines' data demonstrate that a significant portion of the NHTH resources, including staff time, money, and training, are misdirected to callers trying to report tips, rather than spent on its core purpose of connecting survivors to appropriate services.

¹ Feeney et al., Evaluation of the National Human Trafficking Hotline: Contactor Help Seeking and Hotline Response Brief, OPRE Report # 2023-316, 2023, p. 13,

https://www.acf.hhs.gov/sites/default/files/documents/opre/opre-NHTH-HelpSeekingBrief-April2024.pdf

² National Survivor Network, "Survivors Oppose H.R.2601," 2023,

https://nationalsurvivornetwork.org/hr2601opposition/

³ 78 USC §7105(b)(1)(B)(ii)

⁴ Feeney et al., *Evaluation of the National Human Trafficking Hotline: Internal Operations, Protocols, and Training Report*, OPRE Report # 2023-160, 2023, p. 17 ,https://www.acf.hhs.gov/sites/default/files/documents/opre/opre-NHTH-InternalOps-April2024.pdf

⁵ National Domestic Violence Hotline, *2023 Impact Report*, 2024, p. 2, https://www.thehotline.org/wp-content/uploads/media/2024/06/2023-Impact-Report.pdf

⁶ National Human Trafficking Hotline, "2023 National Statistics," 2024,

https://humantraffickinghotline.org/en/statistics

⁷ Ibid.

⁸ Feeney et al., Evaluation of the National Human Trafficking Hotline: Contactor Help Seeking and Hotline Response Brief, OPRE Report # 2023-316, 2023, p. 7,

https://www.acf.hhs.gov/sites/default/files/documents/opre/opre-NHTH-HelpSeekingBrief-April2024.pdf

Survivors have also reported that inconsistency in the services provided by the NHTH, frustration with the difficulty in receiving referrals, and confusing screening questions prevent them from accessing necessary services during a crisis and derail calls. Survivors and service providers report having to call the NHTH multiple times to find an advocate who provides service referrals and safety planning assistance.

The screening and referral procedures highlighted in the recent NHTH evaluation (Appendix C⁹, also attached below) show some concerning policies that are preventing victims and survivors from accessing appropriate services in a timely manner. The first step listed for a caller identifying as a victim/survivor is to collect demographic information before moving into a safety planning assessment. This step wastes precious time for callers by collecting statistical information and does not actually respond to their needs. The evaluation notes that victims and survivors often only have a few minutes for a call.¹⁰ The first step should always be helping callers identify strategies to stay safe and find lifesaving services. The evaluation also revealed that safety planning was inconsistent.¹¹ Safety planning should be offered to every caller, not only assessed by the advocate. Resource referrals are currently listed as the last step in a call but should be offered at the beginning. Contact processing should redirect tips to actual tiplines to free up advocates to respond more appropriately to victims, survivors, and those seeking help for people they know.

All survivors calling the NHTH should be able to access safety planning resources on every call. The screening and referral procedures should be adapted to more quickly connect victims and survivors with appropriate services, ensure survivors know their rights in sharing or withholding information from law enforcement, and provide survivors with information relevant to the survivor's explicit requests. We believe redirecting calls related to law enforcement tips or general information will allow the NHTH provider and staff to allocate more time and resources to improving this core mission: connecting survivors with appropriate services as quickly as possible.

While we have specific recommendations for law enforcement referrals below, we were particularly concerned to learn the hotline contacts law enforcement when a caller expresses an intent to harm themselves. Many callers may be in crisis when reaching out to the NHTH, and advocates should only provide resources to those in need. Callers are often put in more danger when law enforcement is involved during a mental health crisis. ¹² Some callers have

⁹ Feeney et al., Evaluation of the National Human Trafficking Hotline: Internal Operations, Protocols, and Training Report—Appendix, OPRE Report 2023-160, 2023, p. 31,

https://www.acf.hhs.gov/sites/default/files/documents/opre/14221_NHTH_InternalOpsProtocolsTraining-Report APPENDIX.pdf

¹⁰ Feeney et al., Evaluation of the National Human Trafficking Hotline: Contactor Help Seeking and Hotline Response Brief, OPRE Report # 2023-316, 2023, p. 10,

https://www.acf.hhs.gov/sites/default/files/documents/opre/opre-NHTH-HelpSeekingBrief-April2024.pdf ¹¹ lbid, p. 14,

¹² Nicholas Turner, "We Need to Think Beyond Police in Mental Health Crises," Vera, 2022, https://www.vera.org/news/we-need-to-think-beyond-police-in-mental-health-crises

also reported that advocates asked unnecessary screening questions about their mental health. Instead of calling law enforcement or having advocates screen for mental health crises, callers should be provided information to contact the Suicide and Crisis Lifeline and other crisis lifelines, as well as trafficking-specific resources. Callers may not safely be able to call the NHTH again and should be provided with all available referrals quickly in one call.

Survivors need a safe place to request resources and safety planning. Survivors and service providers across the country have expressed that they are losing trust in the hotline with its current operating procedures. **OTIP** now has the opportunity to ensure the hotline is survivorcentered and rebuild trust in its ability to help victims and survivors without causing more harm.

Therefore, FNUSA recommends that **OTIP** do the following to address these needs:

- a. Restrict NHTH reporting to law enforcement to two narrow circumstances:
 - a. When the potential victim is a minor, or
 - b. When the caller is a victim/survivor and explicitly requests assistance in contacting law enforcement.
- b. Redirect callers who are not victims or survivors hoping to submit a tip to the Homeland Security Investigations Tip Line or their local law enforcement agency/tipline. The NHTH should prioritize the needs of callers who need services and redirect other callers to existing law enforcement tiplines.
- c. Require advocates to state what information provided by a caller may trigger a law enforcement report at the start of a call.
- d. Update the screening questionnaire to prioritize service access and shorten the length of time necessary to screen for services. The questionnaire should not encourage advocates to waste precious time on unnecessary screening questions (including mental health screening and demographic questions). It should only require the questions necessary to find the right service providers.
- e. Require the NHTH to refer callers to other crisis hotlines, rather than law enforcement, when someone expresses an intent to harm themselves or the need for specific services, including the Suicide and Crisis Lifelines and LGBTQ+ crisis hotlines.
- f. Require advocates to offer safety planning and service referrals at the beginning of a call in which someone is seeking services for themselves or someone they know to ensure advocates consistently offer survivors assistance with service access.
- g. Require the questionnaire to be evaluated by lived experience and accessibility experts to ensure the questions do not pressure callers to disclose unnecessary information and are accessible to people with a wide range of neurodivergence, education, and language proficiency.
- h. Require more thorough and frequent training for NHTH advocates, including additional training on these topics to increase the consistency in service provided to survivors:
 - a. Explaining the terminology used in the questionnaire in simple terms
 - b. Explaining why questions are necessary
 - c. Identifying service providers in the appropriate service area
 - d. Understanding labor trafficking and available services

- e. Assisting survivors who are calling during a crisis
- i. Ensure the NHTH is consistently fully staffed with advocates to ensure survivors can reach help and reduce advocate stress.
- j. Require additional quality assurance measures to ensure advocates who are not providing consistently effective service are identified and provided additional training.
- k. Facilitate a listening session among the providers of multiple related hotlines (like the National Domestic Violence Hotline and the National Sexual Assault Hotline) to discuss best practices for supporting hotline operators and ensuring operator wellness. OPRE should create recommendations for all ACF-funded hotlines regarding wellness policies for operators.

2. Ensure the National Referral Directory is Consistently Updated and Service Providers are Properly Vetted

Service providers across the country report that they receive referrals from the NHTH for survivors outside of their service area or seeking different services than they provide, despite repeated efforts to update their listings in the National Referral Directory. Survivors who have called the NHTH also report being referred to service providers who are unable to serve them or are located in different geographical areas. While the directory offers a wide scope of service providers throughout the US, we are concerned the listings are not consistently updated and vetted or contain insufficient information to refer callers effectively. For example, a provider may select the option for specialized competency for LGBTQI Individuals because they have served members of the LGBTQ+ community, but may not have specific training or specialization in serving trans survivors.

The additional directory of law enforcement contacts is impossible to maintain as law enforcement officers relocate, contact information changes, and programs change often. The evaluation noted that survivors who had tried to utilize the law enforcement directory found it difficult to reach recommended officers, showing that the directory is not serving its intended purpose and is not easily maintained.¹³ The directory is also a program outside the scope of the hotline's mandate that pulls resources away from better maintenance of the services referral directory and hotline operations. We believe that redirecting the NHTH resources away from serving as a law enforcement tipline is essential to improve services for survivors.

Therefore, FNUSA recommends the following to address these needs:

- a. Require more frequent requests for updated information from service providers in the directory.
- b. Require the NHTH provider to update directory information within two weeks of a service provider providing updated information.
- c. Require an evaluation of the vetting criteria for service providers and law enforcement

¹³ Feeney et al., *Evaluation of the National Human Trafficking Hotline: Referral and Partnerships Brief*, OPRE Brief # 2023-222, 2023, p. 9, https://www.acf.hhs.gov/sites/default/files/documents/opre/OPRE-NHTH-Referral-Partnerships-April2024.pdf

- by multiple experts with lived experience each year.
- d. Update the criteria for providers to be considered specialized in serving a particular population to include more strict training standards.
- e. Include more in-depth vetting questions about service providers' physical building accessibility and available accommodations. Provide this information in public directory listings and to all callers referred to a provider.
- f. Cease collecting law enforcement contact information and vetting officers for the law enforcement directory.

3. Perform Additional Research on the Effectiveness of the Hotline in Meeting Survivors' Needs

FNUSA was pleased to see the evaluation of the NHTH published in 2023 and 2024, as the study provides opportunities to adapt the hotline's procedures to best meet survivors' needs. While the evaluation covered many areas of the NHTH's operations, the need for a few additional areas of research was revealed. We encourage **OTIP** to fund additional evaluations of the NHTH with larger sample sizes of victims and survivors to study how well accessibility needs are being met, how the referral directory is vetted, the effectiveness of the screening questionnaire, and the effectiveness of hotline advocates' training. Each evaluation should include input from multiple experts with lived experience, including experts who have attempted to utilize the NHTH's services.

<u>Therefore, FNUSA recommends</u> **OTIP** pursue research in the following categories to meet these needs:

- a. An evaluation of the screening questionnaire utilized by the NHTH to determine if:
 - a. It is written in plain language
 - b. Callers consistently understand the questions asked without requesting clarification
 - c. All terminology in the questionnaire has an accompanying plain language definition advocates can provide to callers
 - d. It effectively guides advocates to provide service referrals
 - e. It weeds out callers looking to ask general questions or report tips to prioritize callers needing services
- An evaluation of interpretation and accessibility services provided by the NHTH (both inhouse and through contractors) to ensure they are inclusive of many disabilities and languages.
- c. An evaluation of the NHTH's accessibility policies and advocates' disability competency.
- d. A more extensive evaluation of the NHTH's referral system and directory vetting process.
- e. An evaluation¹⁴ of how well the NHTH utilizes survivor-centered approaches and connects callers with services and safety planning.

www.freedomnetworkusa.org

¹⁴ The <u>2020 evaluation</u> of the National Domestic Violence Hotlines operations is an effective example of this type of evaluation

4. Coordinate with OVC to Provide Consistent Grant Practices and Guidelines Across Federal Funders

There continue to be stark differences between the program funding and guidelines issued by **OTIP** and **OVC**. For survivors, this can be extremely confusing and distressing when the level and type of services provided change dramatically when they, for example, achieve Certification or move to a different city or state. We strongly recommend that **OTIP** and **OVC** develop consistent programs and guidance to create more parity in the services available to survivors.

FNUSA recommends the following to address these needs:

- a. Coordinate with OVW and OVC to provide TA to all grantees and subrecipients on language access issues, including language access requirements, interpreter and translator qualifications, interpreter and translator ethics, best practices in working with interpreters and translators, and budgeting for language services.
- b. Support the use of multiple funding sources to meet the needs of all survivors. Grantees should be able to use funding from both OTIP and OVC as long as they meet both funding sources' objectives.
 - i. For example, when providers exceed the number of survivors they agreed to serve with one grant, they should be allowed to use another funding source to serve additional survivors.
 - ii. When TVAP or ASPIRE subrecipients receive a new OVC grant, they should be allowed to keep clients enrolled in TVAP/ASPIRE until their individual TVAP/ASPIRE budgets are exhausted. Requiring subrecipients to transition the client immediately is an unnecessary burden on both the subrecipient and the survivor.
 - iii. If a client begins TVAP or ASPIRE and moves into an OVC services area, allow the client to finish their TVAP/ASPIRE grant period before switching to OVC grantee services to ensure continuity of services.
- c. Partner with **OVC** to support and require increased collaboration between human trafficking service providers and **HUD** CoCs (Continuums of Care) and local housing authorities by:
 - i. Connecting providers with rapid rehousing providers funded by **HUD**.
 - ii. Providing mandatory TTA for all **OTIP** grantees on housing topics, including understanding and accessing mainstream housing programs, collaborating with CoCs, partnering with culturally specific and non-specific organizations, and developing relationships with landlords.
 - iii. Host regional, joint training sessions with **OVC** and **HUD** to support collaboration and problem-solving to address the persistent challenges faced by trafficking survivors in finding and maintaining safe housing.

5. Collaborate to Fund a Field-Driven National Resource Center

As new providers emerge and existing programs expand their services, there is limited support to ensure that programs are effective. A National Human Trafficking Resource Center is a

critical investment in proactive training and technical assistance. The domestic and sexual violence fields have invested in national training and technical assistance to support the development of high-quality services, standards for evaluation and research, and to build a more collaborative environment for providers.

FNUSA recommends the following to address these needs:

- a. **OVC** and **OTIP** should collaborate to establish at least one national resource center that is field-driven, connected to direct service providers, staffed by those with direct services, lived, and program development experience, and an understanding of federal grant funding.
- b. The Center should serve as a central distribution point for all federal training materials, including webinars, posters, videos, and other materials.
- c. The Center should provide extensive, pro-active training and technical assistance to all grantees and subrecipients to ensure that voluntary, victim-centered, non-discriminatory services are provided with federal funds.

6. Research, Data and Evaluation

We commend **OTIP**'s commitment to research, data, and evaluation. We encourage you to continue collaborating with **NIJ** and **OPRE** to support research that has a real and immediate impact on the improved understanding of human trafficking and the delivery of effective, appropriate services. The research should focus on establishing more effective services and improving outreach and identification of survivors.

Therefore, FNUSA recommends the following to address these needs:

- a. All research grants should be required to provide guidance on how to put the research into practice, which is developed in coordination with a service provider.
- b. Require that research grants include paid consultants with lived experience to guide the design, implementation, analysis, and application of the research.
- c. Better align the data collection requirements for OTIP and OVC funds. When providers are collecting the same types of data for both programs, the process is easier for providers, and the data analysis is more meaningful for the nation.
- d. Develop joint OTIP and OVC guidance on program evaluation to support grantees in engaging in meaningful evaluation that is useful for both the grantees and the government—including community needs assessments, and both process and outcome evaluations. Grant solicitations should clearly state if research and/or evaluations are required and if a minimum amount of grant funds must be budgeted for that purpose.
- e. For desk audits and monitoring of **TVAP** and **ASPIRE** subrecipients, the grantee and external researchers should not be allowed to request or require that program participants participate in interviews. Survivors may feel obligated to participate even if they are uncomfortable, and this practice places undue pressure and burdens on those with the least power, while compromising the ability of providers to honor confidentiality for all survivors.

We look forward to discussing these recommendations with you and working collaboratively with **OTIP** as you work to further strengthen and expand your human trafficking victim services.

Sincerely,

Emma Ecker

Senior Policy Specialist

Gmma Gother

Freedom Network USA