



Statement by

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Before the

**Tom Lantos Human Rights Commission
United States House of Representatives**

On

January 15, 2020

Chairman McGovern, Chairman Smith, and members of the Commission: Thank you for inviting me to testify on the 20th anniversary of the passage of the Trafficking Victims Protection Act of 2000 (TVPA). I appreciate your and the Congress's enduring, bipartisan support of the Federal Government's efforts to combat and deter human trafficking.

I am Katherine Chon, Director of the Office on Trafficking in Persons at the Administration for Children and Families (ACF), which is primarily responsible for implementing the Department of Health and Human Services' (HHS) anti-trafficking authorities under the TVPA, in coordination with other HHS divisions and Federal partners. I have served as senior advisor on human trafficking at HHS for nearly eight years and spent a decade prior to that founding a non-government organization working directly with survivors and building community capacity to effectively respond to human trafficking.

HHS seeks to prevent human trafficking and protect victims of its diverse forms of exploitation. As a member of the President's Interagency Task Force to Monitor and Combat Trafficking in Persons, HHS contributes to the whole-of-government approach to trafficking. Human trafficking is a violent crime, a grave human rights abuse, and a public health problem that disrupts the well-being of individuals, families, and communities. HHS addresses social determinants of health intersecting with human trafficking by integrating anti-trafficking responses across multiple systems serving populations at high risk to trafficking, including patients served by federally qualified health centers and individuals supported through child welfare, runaway and homeless youth, domestic violence victims, refugees, unaccompanied alien children, and Native American communities.

Trafficking Funding and Data

Between fiscal year (FY) 2001 and FY 2019, Congress appropriated \$240 million for HHS to increase victim identification, provide services, and build local community capacity to prevent and respond to human trafficking (see Table 1). The majority of our funding has gone towards grants and contracts to increase victim identification and provide assistance to strengthen the health and well-being of survivors. As you will see reflected in the data tables provided with this statement, HHS anti-trafficking programs have generally experienced year-over-year increases in the number of individuals certified, survivors assisted, and cases identified.

From FY 2001 to FY 2019, HHS issued 6,294 certification letters to foreign national adult victims of human trafficking and 3,276 eligibility letters to foreign national minor victims of human trafficking in accordance with the TVPA (see Tables 2 and 3). States with recipients of HHS certification and eligibility letters included Massachusetts (11) and New Jersey (49) in FY 2019. Between FY 2006 to FY 2019, a national network of HHS grantees assisted more than 13,000 foreign national survivors of trafficking and qualified family members (see Table 4). In FY 2014, Congress appropriated funding for HHS to begin grant making programs to assist domestic victims of human trafficking, which led to the assistance of more than 3,114 survivors of domestic trafficking between FY 2015 and FY 2019 (see Table 5). HHS-funded grantees provide critical support services for local communities. For example, HHS anti-trafficking grantees assisted more than 90 survivors of trafficking in Massachusetts and more than 70 survivors in New Jersey in FY 2019.

Victim Identification

HHS complements its efforts to strengthen state and local community capacity to respond to human trafficking with a national human trafficking hotline to expand access points for emergency assistance, connection to services, and reports for human trafficking concerns. In FY 2004, HHS established a national human trafficking information and referral line, which currently operates as the National Human Trafficking Hotline. Between FY 2004 and FY 2019, the hotline received 553,424 signals (calls, texts, chats, emails, and online tip reports); identified more than 59,301 likely trafficking cases and 141,197 likely victims of trafficking; and made 120,042 service referrals and 18,873 case reports to law enforcement (see Tables 6a and 6b). The hotline has received calls from every state and many of the territories in the United States; for example in FY 2019, the hotline received 475 calls from Massachusetts and 624 calls from New Jersey.

In the first decade, the hotline operated primarily as a source of information for callers, as communities across the country were introduced to the reality of human trafficking happening in the United States. As public awareness increased, the hotline received increasing numbers of substantive calls and tips, including calls directly from survivors of human trafficking. For example, 155 signals to the hotline came from likely victims in FY 2008 compared to 10,362 signals from likely victims in FY 2019. Today, hotline data also enables HHS and our partners to identify common trends, intersections with industries and government systems, and gaps in victim support that can help inform policies and programs to more effectively respond to and prevent human trafficking.

Public Awareness

As this month marks National Slavery and Human Trafficking Prevention Month, I want to highlight the importance of public awareness, outreach, and partnerships in contributing to the effectiveness and efficiency of HHS anti-trafficking programs. In the first ten years of implementing responsibilities under the TVPA, HHS funded grants to community organizations to increase public awareness on human trafficking and training to organizations likely to come across potential victims of human trafficking.

In FY 2004, HHS initiated the Rescue and Restore campaign to expand public awareness through community partnerships. In its first five years, the campaign generated 200 million media impressions nationally, with a focus on shifting the media's coverage of human trafficking from solely an international problem to one that happens in the United States as well. The campaign provided reporter guidelines to maintain victim security and promote ethical communications between the media and trafficking survivors. The campaign recruited more than 1,000 local and 75 national partners and formed coalitions in 25 cities and states by 2008 to serve as focal points for local outreach and victim identification.¹ The campaign received more

¹ Houston, Texas; Las Vegas, Nevada; New York, New York; Milwaukee, Wisconsin; Newark, New Jersey; Philadelphia, Pennsylvania; Phoenix, Arizona; Portland, Oregon; St. Louis, Missouri; San Francisco, California; Sacramento, California; Louisville, Kentucky; Nashville, Tennessee; Columbus, Ohio; Cincinnati, Ohio; San Diego, Los Angeles, and Orange Counties in California; and statewide in Colorado, Idaho, Florida, Georgia, Illinois,

than 10 industry awards, including the prestigious Silver Anvil Award from the Public Relations Society of America.

In FY 2016, HHS updated the name of the Rescue and Restore campaign to the Look Beneath the Surface (LBS) campaign based on feedback from survivors of trafficking, changes in federal legislation expanding target populations for outreach, and emerging research on high-risk factors. The LBS campaign is complementary to other Federal public awareness efforts by targeting audiences specific to the HHS mission including professionals in health care, child welfare, runaway and homeless youth, refugees and unaccompanied alien minors, Native American, and other faith-based and community programs.

Between FY 2008 and FY 2019, the Rescue and Restore/LBS campaign identified 5,841 victims of human trafficking, screened 16,940 potential victims, and reached over 61 million people (see Table 7). While the LBS campaign will continue to raise awareness on the indicators of human trafficking, campaign strategies will increasingly involve prevention education messages. These messages will seek to disrupt the effectiveness of common trafficking recruitment schemes through increased knowledge, resiliency, and help-seeking behavior among high-risk populations and more trauma-informed responses from potential bystanders.

In FY 2008, HHS hosted a national symposium on health and human trafficking resulting in a number of recommendations from stakeholders, including increased training for health care providers. Emerging research also showed that 66 percent of survivors of human trafficking interacted with one or more health care providers while they were trafficked, reinforcing the need for increased training among health care providers². In FY 2014, HHS began to pilot the “Stop, Observe, Ask, and Respond to Human Trafficking” (SOAR) training program informed by survivors and clinicians.

HHS currently provides SOAR Online for social workers, health, public health, and behavioral health professionals on how to identify, treat, and respond appropriately to individuals who are at risk of or who have experienced trafficking. These accredited on-demand trainings are available in English and Spanish and include modules on trauma-informed care and culturally and linguistically appropriate service standards. Last year, HHS developed additional modules specific for professionals working in education and Native community settings. As one indication of success, the National Human Trafficking Hotline has seen an increase in the trafficking-related signals from health care providers. The hotline received 265 signals from health care providers in FY 2013 prior to the piloting of the SOAR training. The number of signals from health care providers increased to 823 in FY 2017, 1,336 in FY 2018, and 1,520 in FY 2019.

By FY 2019, more than 9,600 health professionals in 45 states and 4 U.S. territories received SOAR training. Almost 94 percent of participants had “high” or “very high” confidence in their

Minnesota, and North Carolina. (See more:

<https://www.justice.gov/archive/ag/annualreports/tr2008/agreporthumantrafficking2008.pdf>)

² Chisolm-Straker, M., Baldwin, S., Gaïgbé-Togbé, B., Ndukwe, N., Johnson, P.N., & Richardson, L.D. (2016). Health Care and Human Trafficking: We are Seeing the Unseen. *Journal of Health Care for the Poor and Underserved* 27(3), 1220-1233. doi:10.1353/hpu.2016.0131.

ability to identify and respond to human trafficking after receiving the SOAR training in FY 2019. More than 3,260 individuals took SOAR Online training in FY 2019. Last year, HHS further expanded access to SOAR Online from having the capacity to train 1,500 individuals per month to now more than 1.8 million health and human service professionals. By increasing access to the trainings, we saw a 251 percent month-over-month increase in completed trainings the first month.³ On this note, I would like to thank the Congress for recognizing SOAR's value by institutionalizing it in the SOAR to Health and Wellness Act of 2018.

State, Tribal, Local, and Private Sector Actions

I would also like to note that state and local leadership and private sector institutions have increasingly incorporated a public health response to human trafficking, especially in the last five years. More states are now including state departments of health and public health into their anti-trafficking task forces⁴ and increasingly passing legislation to require training on human trafficking for health care providers. For example, New Jersey now requires all healthcare workers and volunteers who have contact with patients, regardless if the contact is clinical or non-clinical, to complete training in recognizing and intervening in cases of human trafficking. Similarly, public and private hospital networks⁵, medical and nursing school programs⁶, and health care professional associations⁷ have increasingly incorporated human trafficking as part of their missions.

HHS has engaged in robust outreach to tribal and Native American communities⁸ in order to raise awareness of human trafficking and missing and murdered indigenous women and girls to receive feedback to better inform our policies and resource development. These engagements

³ In September, HHS had 410 individual course completions for SOAR Online (before expanding access); in October, we had 1,438 course completions.

⁴ Examples include Minnesota, New York, Delaware, Florida, Michigan, Mississippi, Nebraska, Ohio, and Texas.

⁵ Massachusetts General Hospital in Boston, MA, Dignity Health in California, Huntington Hospital in New York, Catholic Health Initiatives in Colorado, and the University of North Carolina are just a few of the health systems that have piloted programs to provide comprehensive services for trafficking victims and survivors. In 2019, the American Hospital Association, seeing the connection between human trafficking and other forms of interpersonal violence and abuse, formed a partnership with HHS to incorporate human trafficking training into their Hospitals Against Violence Initiative.

⁶ For example, the University of Louisville School of Medicine designed a simulation-based medical education curriculum to prepare students to recognize victims and respond to human trafficking. Courses and other education on human trafficking have also been implemented at Stanford University School of Medicine, Baylor College of Medicine, Southern Illinois University, University of Rochester School of Medicine and Dentistry, and at other educational institutions. The Ohio Board of Nursing encourages nurses and other health care providers to be informed, aware, and responsive to human trafficking.

⁷ For example, the American Academy of Pediatrics; the American College of Obstetricians and Gynecologists; the American Medical Association, the American Medical Women's Association; the American Nurses Association; the American Psychological Association; the American College of Emergency Physician; the American Public Health Association; National Association of Pediatric Nurse Practitioners; Association of Women's Health, Obstetric and Neonatal Nurses; National Association of School Nurses; and others

⁸ Including caucus of Native American State Legislators, National Council of Urban Indian Health, Tribal Law and Policy Institute, the American Indian center of Chicago, Bureau of Indian Education, and numerous tribal consultations.

included roundtable discussions in four HHS regions, as well as in the Pacific basin addressing human trafficking in Hawaii, Guam, and Saipan. HHS released a Tribal Youth Toolkit on human trafficking and will be releasing a funding opportunity announcement on addressing human trafficking in Native communities in 2020. In FY 2019, HHS supported a Human Trafficking Leadership Academy cohort of Native American survivor leaders and allied professionals examining how culture is a protective factor in preventing human trafficking among Native youth. HHS also continued to fund the National Indigenous Women's Resource Center which developed resources to address the intersections of human trafficking, domestic and dating violence.

Conclusion

Reflecting on the past twenty years and looking ahead to implementing the framework that the TVPA established, HHS has several foundational areas to build upon. HHS values putting people at the center of our mission. In the last ten years, HHS increased engagement with survivors of human trafficking through consulting with the victims and survivors on anti-trafficking efforts and providing leadership development opportunities. Members of the U.S. Advisory Council on Human Trafficking, who are leaders with lived experience appointed by the President, provide valuable recommendations that HHS continues to incorporate, such as the Council's recommendation on the realistic portrayals of diverse forms of human trafficking. Survivor-leaders are also an integral part of the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States, which advises the HHS Secretary and the Attorney General on the nation's response to child and youth sex trafficking. HHS also supports the professional development of survivors of trafficking through funded consultations from the National Human Trafficking Training and Technical Assistance Center and the Human Trafficking Leadership Academy.

HHS also values the power of leveraging data. In 2014, HHS initiated the Human Trafficking Data Collection project to examine shared data definitions and standards, identify opportunities for data sharing and exchange, develop an interoperable data collection platform, open up data to partner within research communities, and better understand how human trafficking is impacting HHS-funded systems of care. Today, HHS collects uniform data across anti-trafficking grant programs, incorporates human trafficking data elements into multiple health and human service data systems (e.g. health diagnostic codes, child welfare, runaway and homeless youth), and provides data and resources to strengthen prevalence estimates of human trafficking in the United States.

In the coming years, HHS looks forward to further strengthening efforts to strategically prevent the diverse forms of human trafficking. ACF will soon release a National Human Trafficking Prevention Action Plan outlining a strategy and issuing a call for partnerships to strengthen primary prevention efforts across the country. Preventing human trafficking includes effective, age appropriate prevention education designed to build resiliency against common recruitment and grooming tactics, supported by trauma-informed response protocols within schools and other youth-serving settings.

Last year, ACF collaborated with the McCain Institute on roundtable discussions spotlighting successes and challenges of prevention education implemented by states and non-government organizations. We also released a SOAR training module for school-based professionals and have reached out to the Department of Education, Bureau of Indian Education, and Department of Defense to raise awareness about this new resource. This year, we will release additional information on prevention education programs and continue to consult with our federal partners in the implementation of the Frederick Douglas Trafficking Victims Prevention and Protection Reauthorization Act.

Thank you for the opportunity to share information about HHS's activities. I would be happy to answer any questions you may have.

TABLES

Table 1. HHS Anti-Trafficking in Persons Programs Budget, FY 2001 – FY 2019

Fiscal Year	President's Budget Request	Congressional Appropriations	Foreign National Victim Assistance	Domestic Victim Assistance
2001	\$5,000,000	\$5,000,000	\$5,000,000	\$0
2002	\$10,000,000	\$10,000,000	\$10,000,000	\$0
2003	\$10,000,000	\$9,935,000	\$9,935,000	\$0
2004	\$10,000,000	\$9,909,000	\$9,909,000	\$0
2005	\$10,000,000	\$9,915,000	\$9,915,000	\$0
2006	\$9,915,000	\$9,809,000	\$9,809,000	\$0
2007	\$14,816,000	\$9,823,000	\$9,823,000	\$0
2008	\$14,816,000	\$9,814,000	\$9,814,000	\$0
2009	\$9,814,000	\$9,814,000	\$9,814,000	\$0
2010	\$9,814,000	\$9,814,000	\$9,814,000	\$0
2011	\$9,814,000	\$9,794,000	\$9,794,000	\$0
2012	\$9,814,000	\$9,775,000	\$9,775,000	\$0
2013	\$9,775,000	\$9,341,000	\$9,341,000	\$0
2014	\$19,775,000	\$13,755,000	\$12,000,000	\$1,755,000
2015	\$22,000,000	\$15,755,000	\$13,000,000	\$2,755,000
2016	\$22,000,000	\$18,755,000	\$13,000,000	\$6,755,000
2017	\$22,000,000	\$18,755,000	\$13,000,000	\$5,755,000
2018	\$18,719,000	\$23,755,000	\$17,000,000	\$6,755,000
2019	\$18,755,000	\$26,755,000	\$19,000,000	\$7,755,000

Table 2. HHS Issuance of Certification Letters, FY 2001 – FY 2019

Fiscal Year	Total Recipients	Basis of Certification			Type of Trafficking			
		Bona Fide T Visa Application	Continued Presence	T Visa	Sex & Labor	Labor	Sex	Unknown
2001	195	1	194	0	0	80	6	109
2002	77	1	76	0	0	26	19	32
2003	143	39	103	1	0	13	3	127
2004	143	31	109	3	2	24	5	112
2005	195	44	151	0	3	26	23	143
2006	208	35	173	0	35	31	39	103
2007	269	109	146	14	16	171	82	0
2008	286	112	172	2	12	223	49	2
2009	329	137	189	3	10	270	49	0
2010	450	201	242	7	44	352	53	1
2011	463	2	257	204	28	348	87	0
2012	367	0	146	221	27	247	93	0
2013	406	5	122	279	32	276	98	0
2014	528	2	144	382	40	388	100	0
2015	621	0	143	478	56	469	96	0
2016	443	0	94	349	41	324	78	0
2017	448	0	103	345	35	335	77	1
2018	412	0	77	335	33	283	90	6
2019	311	0	69	242	22	211	67	11

Table 3. HHS Issuance of Eligibility Letters, FY 2001 – FY 2019

Fiscal Year	Total Recipients	Type of Trafficking			
		Sex & Labor	Labor	Sex	Unknown
2001	4	0	0	2	2
2002	19	0	4	13	2
2003	6	0	2	1	3
2004	18	1	0	3	14
2005	32	6	3	4	19
2006	20	2	7	3	8
2007	32	2	19	11	0
2008	32	2	11	19	0
2009	50	3	28	19	0
2010	92	11	57	24	0
2011	100	10	57	33	0
2012	102	6	72	24	0
2013	114	3	79	32	0
2014	217	8	149	60	0
2015	239	7	184	48	0
2016	335	15	245	75	0
2017	506	34	367	105	0
2018	466	29	312	125	0
2019	892	27	614	251	0

Table 4. HHS Grant Programs Assisting Foreign National Victims of Human Trafficking, FY 2012 – FY 2019⁹

Fiscal Year	Service Sites	Victims Served	Participants¹⁰ Served	Sex Trafficking	Labor Trafficking	Sex & Labor Trafficking	Unknown Trafficking	Adult Victims	Minor Victims
2012	152	599	763	124	432	41	2	578	21
2013	270	808	1,147	199	545	63	1	778	30
2014	290	931	1,256	198	666	67	0	891	40
2015	283	1,018	1,521	191	730	97	0	967	51
2016	233	929	1,322	159	671	99	0	865	64
2017	261	1,100	1,531	194	796	109	1	1,043	57
2018	269	1,280	1,612	277	870	130	3	1,175	105
2019	272	968	1,573	194	654	117	3	824	144

Table 5. HHS Grant Programs Assisting Domestic Victims of Human Trafficking, FY 2015 – FY 2019

Fiscal Year	Victims Served	Sex Trafficking	Labor Trafficking	Sex & Labor Trafficking	Unknown Trafficking
2015	163	n/a	n/a	n/a	n/a
2016	341	n/a	n/a	n/a	n/a
2017	636	432	14	8	182
2018	1,149	971	37	21	120
2019	825	714	19	18	74

⁹ Prior to establishment of the grant in 2012, HSS funded assistance for pre-certified and certified victims of human trafficking and their qualified family members through a contract from April 2006 to October 2011 – 2,735 participants enrolled in the program during this time.

¹⁰ Participants include victims enrolled in the program along with their qualified family members (e.g., spouses, children, etc.) who receive TVAP services.

Table 6a. National Human Trafficking Hotline¹¹ Signals, FY 2004 – FY 2019

Fiscal Year	Total Signals	Likely Trafficking Cases	Likely Victims	Signals from Likely Victims	Unique Service Referrals	Cases Reported to Law Enforcement
2004	1,600	n/a	n/a	n/a	n/a	n/a
2005	4,000	n/a	n/a	n/a	n/a	n/a
2006	2,670	n/a	n/a	n/a	n/a	n/a
2007	2,329	n/a	n/a	n/a	n/a	n/a
2008	4,463	n/a	2,078	155	412	123
2009	7,969	n/a	1,147	266	654	302
2010	12,135	407	1,084	429	912	491
2011	17,301	1,708	1,593	688	17,791	767
2012	23,048	3,205	4,802	1,129	13,367	1,275
2013	32,438	4,796	9,695	2,641	15,522	1,304
2014	39,134	5,166	9,229	2,602	16,746	1,230
2015	36,916	5,418	11,829	3,487	9,937	1,434
2016	54,823	7,405	16,407	4,608	8,711	2,120
2017	68,938	8,686	21,644	4,626	17,342	2,794
2018	116,940	10,658	34,753	7,136	9,365	3,434
2019	136,990	11,852	26,936 ¹²	10,362	9,283	3,599

Table 6b. National Human Trafficking Hotline Signals, FY 2008 – FY 2019

Fiscal Year	Likely Trafficking Cases	Sex Trafficking	Labor Trafficking	Sex & Labor Trafficking	Unknown Trafficking	Adults	Minors
2008	n/a	378	215	19	83	315	113
2009	n/a	379	167	22	229	316	197
2010	407	621	245	33	77	365	174
2011	1,708	1,105	336	22	89	491	266
2012	3,205	1,856	481	99	86	770	438
2013	4,796	1,332	283	14	173	1,145	659
2014	5,166	3,201	707	160	394	2,938	1,410
2015	5,418	3,998	756	169	495	3,420	1,686
2016	7,405	5,400	1,045	272	688	4,771	2,294
2017	8,686	6,233	1,330	336	787	5,469	2,742
2018	10,658	7,637	1,296	632	1,093	4,832	2,229
2019	11,852	8,275	1,287	704	1,586	4,880 ¹³	2,088

¹¹ In previous years, the National Human Trafficking Hotline was referred to as the National Human Trafficking Resource Center and the Trafficking Information and Referral Line.

¹² Due to ongoing data cleaning by the grantee, data on number of likely victims identified in FY 2019 is subject to change.

¹³ Due to ongoing data cleaning by the grantee, FY 2019 data on case demographics are subject to change.

Table 7. Rescue & Restore/ Look Beneath the Surface Grant Programs, FY 2008 – FY 2019

Fiscal Year	Potential Victims Identified/ Screened	People Trained	Total Victims Identified	Sex Trafficking Victims	Labor Trafficking Victims	Sex & Labor Trafficking	Trafficking Type Unknown	Adult Victims	Minor Victims	Age Unknown
2008	167	13,154	60	12	45	3	0	56	1	3
2009	378	13,297	214	72	135	7	0	183	22	9
2010	707	23,982	505	292	173	32	8	386	104	15
2011	613	14,663	443	289	113	17	24	287	141	15
2012	1,055	28,244	634	430	185	12	7	389	219	26
2013	1,088	33,628	763	561	188	9	5	543	199	21
2014	1,374	34,047	569	367	172	26	4	402	145	22
2015	2,741	25,521	515	213	258	34	10	403	65	47
2016	3,730	28,883	543	191	288	35	29	514	23	6
2017	2,547	26,609	481	208	212	40	21	450	23	8
2018	867	17,269	559	359	152	42	6	489	64	6
2019	1,673	18,576	555	401	118	27	9	487	67	1