

Michigan Human Trafficking Health Advisory Board

2017 Annual Report



RICK SNYDER, GOVERNOR | NICK LYON, DIRECTOR

Pursuant to the Human Trafficking Health Advisory Board Act, MCL 752.991 et seq., the members of the Michigan Human Trafficking Health Advisory Board developed this annual report to detail the board's activities and recommendations for improving health and mental health services for victims of human trafficking. The report is submitted to the chairs of the committees concerned with health policy of the Michigan Senate and House of Representatives.

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Message from the Chair

Honorable Lawmakers,

Happy New Year! It is with great pleasure that we share the 2017 accomplishments of the MI Human Trafficking Health Advisory Board and 2018 goals in the attached annual report.

Human trafficking is an emerging field in healthcare, and our board members are educating themselves on the latest research to better address the challenges human trafficking survivors face.

Many of our board members are also diligently working to raise awareness of human trafficking among healthcare professionals and the larger community.

Many thanks to MDHHS for continuing to be a valuable partner, resource, and ally in proactively addressing concerns raised by board members. The board is also deeply grateful to other organizations (listed in the report) for their assistance in fulfilling its mission.

Once again, heartfelt thanks to Jonathan Breems, MDHHS policy and legislative analyst, for putting this annual report together and connecting the board to the various agencies within MDHHS. His hard work and diligence allow the board to operate seamlessly.

Finally, thank you for giving me the opportunity to serve as chairperson of this extraordinary board.

Respectfully,



Jayashree (Jay) Kommareddi, Chairperson
MI Human Trafficking Health Advisory Board

Board Members

Chairperson Jayashree Kommareddi, of Grand Blanc, represents individuals with experience and expertise in the fields of human trafficking prevention and intervention.

Vice Chairperson Matt Lori, of Lansing, is senior deputy director of the Policy, Planning, and Legislative Services Administration at the Michigan Department of Health and Human Services. Mr. Lori serves as a designated representative from the Michigan Department of Health and Human Services.

Lori Ryland, Ph. D., of Battle Creek, represents mental health professionals.

Sheila Meshinski, R.N., of Macomb, represents registered professional nurses with experience in an emergency department, emergency room, or trauma center of a hospital.

Dena Nazer, M.D., of Detroit, represents individuals licensed to practice medicine and was recommended by the Speaker of the House.

Brigette Robarge, of Belleville, represents human trafficking survivors.

Ruth Rondon, of Wyoming, represents human trafficking survivors.

Subburaman Sivakumar, M.D., of Northville Township, represents individuals licensed to practice medicine and was recommended by the Senate Majority Leader.

Steve Yager, of Lansing, is executive director of the Children's Services Agency at the Michigan Department of Health and Human Services. Mr. Yager serves as a designated representative from the Michigan Department of Health and Human Services.

Herman McCall, Ed.D., of Albion, is executive director of the Children's Services Agency at the Michigan Department of Health and Human Services. Dr. McCall serves as a designated representative from the Michigan Department of Health and Human Services. (*Replaced Steve Yager in April 2017*)

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Executive Summary

Human trafficking is the recruitment, harboring, transporting, providing, or obtaining of a person for compelled labor or commercial sex acts through the use of force, fraud, or coercion, or if the individual induced to perform a commercial sex act is under 18 years old. Human trafficking is a serious public health issue, and the healthcare community can play an integral role in confronting it.

In October 2014, Governor Rick Snyder signed the Human Trafficking Health Advisory Board Act into law. The act established the Michigan Human Trafficking Health Advisory Board, a public advisory body housed in the Michigan Department of Health and Human Services (MDHHS) and comprised of health and mental health professionals, human trafficking prevention experts, government agency representatives, and survivors of human trafficking. The Michigan Human Trafficking Health Advisory Board's mission is to improve the quality of and access to health and mental health services for victims of human trafficking.

This is the Board's second annual report to the legislature on its activities. The report includes a summary of activities from 2017 and new projects for 2018.

2017 Activities:

1. Hospital and emergency room human trafficking protocol pilot
2. Immigration medical evaluations for survivors of human trafficking
3. Identification policies at substance use disorder treatment providers for survivors of human trafficking
4. U.S. Department of Health and Human Services "SOAR to Health and Wellness" program
5. Adverse Childhood Experiences (ACE) and human trafficking

2018 Projects:

1. Continue oversight of the implementation of the hospital and emergency room human trafficking protocol pilot
2. Partner with the Division of Victim Services at MDHHS to improve services for survivors of trafficking
3. Work with the Division of Emergency Medical Services (EMS) and Trauma at MDHHS to raise awareness among emergency responders about human trafficking
4. Promote screening for Adverse Childhood Experiences (ACE) by healthcare providers to identify at-risk populations for human trafficking

Introduction

In 2014, a 21-bill legislative package overhauling the human trafficking chapter in Michigan's laws was signed into law by Governor Rick Snyder in 2014. One of these bills, Public Act 461 of 2014, established the Michigan Human Trafficking Health Advisory Board within the (now) Michigan Department of Health and Human Services.

The Human Trafficking Health Advisory board is comprised of nine members including representatives from the Department of Health and Human Services, medical professionals, mental health professionals, human trafficking survivors, and human trafficking prevention and intervention experts.

Public Act 461 of 2014 charges the Board with five essential duties:

1. Collect and analyze information about available health services for trafficking survivors;
2. Identify government agencies that are involved with issues related to human trafficking and coordinate the dissemination of information about health services to trafficking survivors;
3. Meet with local health agencies to review health services and establish a program to make survivors more aware of available services;
4. Establish a program to improve public awareness about available health services for survivors; and
5. Review existing state laws and administrative rules relating to health services for survivors.

Over the past year, the board met four times:

- **January 12, 2017**
- **May 9, 2017**
- **September 6, 2017**
- **November 16, 2017**

Several guest speakers gave presentations at board meetings:

- **Elizabeth Pfenning** from the U.S. Department of Health and Human Services (HHS) presented on the SOAR to Health and Wellness training program.
- **Robert Harvey** from MDHHS presented on efforts within the child welfare system in Michigan to address human trafficking.
- **Angie Smith-Butterwick** from MDHHS presented on the issue of survivors not having identification when accessing substance use disorder treatment.
- **Susan Tippett** and **Michelle Most** from Genesys Health Foundation presented on the hospital and emergency room human trafficking protocol pilot.

Background

The issue of human trafficking has received increased attention by the public in recent years. While the number of human trafficking cases in the United States remains unclear, we know that people are being trafficked in communities—large and small, affluent and poor, rural and urban—across the country. Members of our communities are being exploited at the hands of profiteers and robbed of their most fundamental right—freedom. Michigan is no exception to this crime.

Human trafficking is no longer viewed as solely a law enforcement issue. Rather, experts on human trafficking now recognize that healthcare professionals can play an important role in both identifying and assisting victims of trafficking. Studies have shown that a majority of human trafficking victims report seeing a healthcare professional at some point while being trafficked. Unfortunately, many healthcare professionals lack the training to identify victims. We must change this. Every day healthcare professionals have an opportunity to empower victims to leave their traffickers, and we should give them every possible resource to do this.

However, the healthcare professional's role does not end once a victim has been identified. Viewing human trafficking from a health lens necessitates addressing the physical and behavioral health consequences of human trafficking. The needs of trafficking victims are complex, and the factors affecting physical, mental, and emotional health are often interrelated. To properly address these complex needs, healthcare professionals must collaborate with other resources and providers in their communities. The Human Trafficking Health Advisory Board recognizes this need for cooperation and the Board has made a conscious effort to partner with other government agencies, community non-profits, healthcare organizations, and, most importantly, survivors of human trafficking. No one person, provider, or organization can address all of the needs of trafficking victims, but through education, training, and coordination we can develop a network of services for survivors that can empower victims and survivors to live healthy, independent lives.

2017 Board Activities

Over the past twelve months members of the Human Trafficking Health Advisory Board have been hard at work on a number of projects. Some of the board's work was a continuation of projects from 2016 while other projects were new and made possible by the helpful input and hard work of members. Below is a brief overview of board activities from 2017.

Hospital and Emergency Room Human Trafficking Protocol Pilot

In 2015 the Human Trafficking Health Advisory Board recommended developing and implementing a standardized human trafficking protocol for hospitals and emergency departments. According to the board's recommendation, the protocol should include several key components: warning signs of human trafficking and questions to ask if the professional suspects human trafficking, treatment guidelines for victims of human trafficking, reporting and safety procedures for Child Protective Services or law enforcement, and resources to provide the individual if an adult does not want to report to law enforcement.

Based on this recommendation, MDHHS awarded a grant in fall 2016 to Genesys Health Foundation to pilot the development and implementation of a human trafficking protocol for their hospital and emergency department. While the board does not directly manage the funding of this grant, Genesys Health Foundation provided regular updates on the pilot to the board over the past year, and several board members advised on the pilot's development.

At the board's November 2017 meeting, Genesys Health Foundation presented a final report on the first year of the pilot. The report included a description of the process for developing a human trafficking protocol as well as lessons learned from the pilot.

In fall 2017 MDHHS renewed funding for the pilot for an additional year. While the first year of the pilot focused on developing the protocol and training providers, the second year of the pilot will focus on implementation, data collection, and evaluation of the protocol in several locations across Michigan. Genesys Health Foundation will continue to provide updates to the board and will submit another report to MDHHS at the end of the pilot's second year.

Immigration Medical Evaluations for Survivors of Human Trafficking

At a 2016 board meeting, Suellyn Scarnecchia from the Human Trafficking Law Clinic at the University of Michigan spoke to the board about the work of the clinic and the challenges faced by survivors and their families in accessing services. One of the challenges identified by the clinic for non-citizen clients is the cost of immigration medical exams. These exams are necessary for survivors of trafficking and their families to apply for legal permanent residence. However, immigration medical exams can cost hundreds or even thousands of dollars per family and may prevent survivors and their families from becoming lawful permanent residents. Members of the board worked with MDHHS in 2017 to create a grant from the department to the Human Trafficking Law Clinic to help cover the costs of these immigration medical exams for

survivors and their families. The board looks forward to continuing to partner with MDHHS and the Human Trafficking Law Clinic in 2018 to improve access to services for non-citizen survivors of trafficking.

Identification Policies at Substance Use Disorder Treatment Providers for Survivors of Human Trafficking

Through board members' work with service providers, the board learned that some survivors have difficulty accessing substance use disorder treatment due to lack of identification. Traffickers have been known to take personal documents such as driver's licenses or passports from victims as a method of control and intimidation. Therefore, survivors may not possess necessary identification when they try to access treatment, especially in the immediate aftermath of leaving their trafficker.

Board members met with MDHHS last year about this barrier to substance use disorder treatment for survivors. As a result, the department issued a memo in October 2017 to publicly funded treatment providers, such as Community Mental Health Service Providers (CMHSP) and Pre-Paid Inpatient Health Plans (PIHP), to inform them of this issue and clarify how providers should pay for services when survivors do not have identification. The board plans to continue to work with service providers to see if this clarification from MDHHS helps resolve the issue.

U.S. Department of Health and Human Services SOAR to Health and Wellness Training

In January 2017, a representative from the U.S. Department of Health and Human Services (HHS) presented to the board on the SOAR to Health and Wellness training. The training was created by HHS to train healthcare providers to identify, treat, and respond to survivors of human trafficking. The presenter spoke to the board about the background of the SOAR training and plans to expand the training in the future. While the board was not able to schedule an in-person SOAR training in Michigan, HHS released recordings of SOAR training webinars for healthcare providers, mental health professionals, and social workers in August 2017 that board members are able to use. Additionally, HHS is currently working with the National Human Trafficking Hotline to create profiles of each state's efforts to address human trafficking. The profiles are intended to promote collaboration and improve the response to human trafficking within states. The board plans to use these materials in the future to improve outreach to healthcare providers.

Adverse Childhood Experiences (ACE) and Human Trafficking

At the board's September meeting, members learned about Adverse Childhood Experiences (ACE) and their connection to human trafficking. ACE are stressful or traumatic events for a child such as abuse, neglect, a parent becoming incarcerated, substance abuse in the home,

and violence between family members. The cumulative effect of this stress and trauma in a child's life can have long-term negative physical and mental health effects into adulthood. However, one way to negate the negative effects of ACE is for healthcare providers to screen for them among children and provide appropriate mental health services for individuals with high ACE scores (i.e. those who have experienced a high number of adverse experiences). Chairperson Kommareddi shared research at the meeting with the board that demonstrates a correlation between ACE and individuals who are at greater risk for being trafficked. As a result, board members approved a motion to further study the link between ACE and human trafficking and to promote screening for ACE by healthcare providers to identify children who might be at risk for being trafficked.

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Board Projects for 2018

The Human Trafficking Health Advisory Board is excited for new opportunities to fulfill its mission in the coming year. Below is a list of projects the board is considering for 2018. This list is not intended to be comprehensive, and the board may introduce additional project throughout the year.

Continue Oversight of the Implementation of the Hospital and Emergency Room Human Trafficking Protocol Pilot

In fall 2017, MDHHS renewed the hospital and emergency room human trafficking protocol pilot being developed by Genesys Health Foundation for a second year. While the first year of the pilot was focused on development of the protocol and training providers, the second year will focus on implementation of the protocol. In addition, year two will include improvements to data collection by the hospital about survivors of trafficking and an evaluation of the protocol's effectiveness.

The board plans to continue receiving updates about the pilot from Genesys Health Foundation in 2018. As in year one of the pilot, Genesys will submit a final report at the end of the second year to MDHHS. The report will include a detailed description of the process of implementing and evaluating the protocol as well as lessons learned from the pilot. The board plans to use the grant's final report to develop recommendations for other healthcare organizations and providers that are interested in developing similar protocols.

Partner with the Division of Victim Services at MDHHS to Improve Services for Survivors of Trafficking

In 2017 MDHHS created a new Division of Victim Services. This division brought together a number of victim services programs including service provider grants, victim rights, victim compensation, and the Domestic and Sexual Violence Prevention and Treatment Board. The Human Trafficking Health Advisory Board plans to work with this new division in 2018 to improve survivors' access to victim services, compensation benefits, information about rights, and case notification services (MI-VINE). The board would also like to assist the Division of Victim Services in identifying victim service providers that specialize in serving survivors of trafficking.

Work with the Division of Emergency Medical Services (EMS) and Trauma at MDHHS to Raise Awareness among EMS Providers about Human Trafficking

The board plans to support the Division of Emergency Medical Services (EMS) and Trauma at MDHHS in raising awareness among EMS providers (i.e. paramedics, emergency medical

technicians, etc.) in Michigan about identifying, treating, and responding to suspected cases of human trafficking. In recent years at the federal level, the Department of Homeland Security (DHS) has trained emergency responders from a variety of fields (fire, EMS, and law enforcement) about the issue of human trafficking. Similarly, the Division of EMS and Trauma at MDHHS recently implemented an education requirement for EMS providers in Michigan on human trafficking. The board plans to assist MDHHS in 2018 with implementing this requirement and improving overall awareness of human trafficking among EMS providers.

Promote Screening for Adverse Childhood Experiences (ACE) by Healthcare Providers to Identify At-Risk Populations for Human Trafficking

The board plans to promote screening for Adverse Childhood Experiences (ACE) by healthcare providers in order to identify individuals who are at higher risk for being trafficked. Research has shown that individuals with a high ACE score (i.e. those who have experienced traumatic and stressful events) are at a greater risk for being trafficked. If healthcare providers are able to identify individuals, especially children and young adults, who have experienced a higher than average ACE score, they can potentially prevent the individual from being trafficked later in life by connecting the individual with needed services. MDHHS funds a number of healthcare providers including child and adolescent healthcare centers, community health clinics, and migrant health clinics that could potentially implement screening for ACE. The board plans to work with MDHHS to identify opportunities for healthcare providers to implement ACE screening.

Conclusion

The Board's activities described in this report represent one piece of the much larger picture of confronting human trafficking in Michigan. Healthcare professionals play a vital role in identifying and supporting victims/survivors of human trafficking. The mental, physical, and emotional consequences of human trafficking on victims/survivors are complex and creating victim-centered, trauma-informed services that effectively meets their needs requires collaboration and coordination across disciplines. To this end, much of the work in this report would not be possible without the essential input and cooperation of the board's partners throughout Michigan.

This report builds on best practices from across the country to ensure the board is implementing evidence-based, collaborative approaches to serving victims of human trafficking. The board believes that through the work described in this report, healthcare professionals will have the opportunity to achieve their field's highest aim: empowering some of our society's most vulnerable individuals to lead healthy, thriving lives.

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Acknowledgements

The Human Trafficking Health Advisory Board would like to thank the following individuals and organizations for their partnership in 2017:

- Behavioral Health and Development Disabilities Administration, MDHHS
- Children's Services Agency, MDHHS
- Elizabeth Pfenning, U.S. Department of Health and Human Services
- Genesys Health Foundation
- Michigan Human Trafficking Commission
- University of Michigan Law School Human Trafficking Clinic

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