Dear National Advisory Committee on the Sex Trafficking of Children and Youth,

On behalf of the Baylor College of Medicine Anti-Human Trafficking Treatment and Research Program, we are pleased to submit this statement to provide recommendations on best practices for combating sex trafficking of children and youth in Texas.

For a little background, the Baylor College of Medicine Anti-Human Trafficking Program was created in collaboration with the City of Houston Mayor's Office and with support from the Office of the Governor of Texas and several community partners to respond to the urgent needs of Houston-area victims and survivors of human trafficking. The mission of our program is to facilitate trauma-informed and collaborative identification, care coordination, and study of patients who are current or prior victims of labor and sex trafficking. Through this program, we have established a system that works toward integrating hospital psychiatric services with other healthcare disciplines to better address the biopsycho-social needs of human trafficking victims.

While our program was originally focused on the care and study of *adult* victims and survivors of labor and sex trafficking, we are starting to shift our focus to *also* include the care of children and youth who have been labor and sex trafficked. As mental health professionals (psychiatrists and psychologists) in a large public hospital in Houston, TX, which has the highest number of human trafficking victims in the country, we have been on the front lines of this fight against this public health calamity, and have witnessed first-hand the physical, emotional, and social implications that result from the trafficking of individuals. We know from our research and work with victims that many victims are often groomed, lured, coerced, mislead, and sold into slavery as children.

Children who have been trafficked are at much higher risk for developing depression, anxiety disorders (including PTSD), and substance abuse disorders. They are also much less likely to receive the care and resources that they need, which can increase their vulnerability to being re-victimized and trafficked. We know this pattern is true because many of the adult trafficking victims that we work with report being victimized and exploited throughout their childhood. And even when victims are able to free themselves physically from their captors, it can take years for victims to free themselves of the psychological and emotional bondage of their captors.

We believe that early detection and intervention is key to interrupting the cycle of re-victimization. And because children often lack the awareness or wherewithal to understand that they are being trafficked, it is our responsibility as adults to identify and protect them. As healthcare providers, we should expect to see these victims in every treatment setting. Indeed, we should maintain a steady state of vigilance for these children. Given the unspeakable sexual acts that these children are forced to do, healthcare providers should anticipate the kinds of injuries and medical/psychiatric sequelae related to sex trafficking. Research suggests that 88% of human trafficking victims will see a healthcare provider during the time that they are trafficked.

Early detection and intervention cannot take place without proper training and education. We encourage every healthcare facility/system to think about how they can most efficiently and effectively train all members of their staff, non-licensed support staff included. We believe training must be interdisciplinary and take place across the healthcare setting, including clinics and emergency rooms. For our program, we have developed one training that can be done in-person and another training that is administered through an online training system. In addition to training faculty and staff, we have made a concerted effort to train students from different disciplines and levels of training. We have also

made our training available for distribution through our partnership with the City of Houston so that city employees can receive this training. Finally, we have joined forces with other local health care institutions in the Texas Medical Center to form the Human Trafficking Health Care Consortium. It is through these kinds of collaborative efforts that we will be able to make more significant progress in the fight against child sex trafficking.

In solidarity with other human trafficking advocacy organizations, we support the proposed priorities for Research on Human Trafficking as Published in the July 2017 Journal of Public Health. These include determining the prevalence and costs associated with human trafficking, investigating the effectiveness of current screening and response protocols in healthcare settings, and determining the effectiveness of current human trafficking prevention approaches.

In order to address these proposed priorities, we must have reliable and consistent sources of funding for programs that are dedicated to combatting child sex trafficking. In particular, funding for developing and validating human trafficking screening tools for specific treatment settings is extremely important. For instance, there is yet to be a screening tool developed and validated to screen for human trafficking victims in a psychiatric setting. Funding towards developing better ongoing physical and mental health treatment of victims is also very sparse. We know that simply addressing the immediate physical injuries of sex trafficking has limited results. We suggest a trauma-informed, multi-disciplinary approach to address the current and future bio-psycho-social needs of sex trafficking victims.

We implore individuals in positions of power and responsibility at the local, state, and federal levels to heed the warning signs of one of the worst public health issues of our time and to act with a sense of urgency. One day of slavery is one too many. Please help us to ease the suffering of these individuals. Thank you for your time and consideration.

With hope,

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