COUNTY 172

HUMAN TRAFFICKING TASK FORCE

Human Trafficking Task Force Meeting Minutes June 5th, 2017 at 6:30pm Conference Room, 3rd Floor, Winchester Hall

Members present were Miles Ward, Frederick County Human Relations Department, Chief Ed Hargis and SGT Andrew Alcorn, Frederick City Police Department, Malcom Furgol, United Way, Marguerite Vacca-Kaye, Human Relations Commission, Nina Carr and Heather Moreno, Heartly House, Jessica Fitzwater, Frederick County Council, Jessica Beall, Department of Social Services, Lindsey Carpenter, State's Attorney's Office, Pam Holtzinger, Frederick Memorial Hospital, Jethro Reid, Frederick County Public Schools, Barbara Fink, Health Department, Michael O'Connor, Maryland Municipal League, and Karen Lewis Young, State Delegation.

Also present were guests Sydnee Sichert, Frederick County Council, Katie Dallimore, United Way, Tressa Bell, Frederick Memorial Hospital, Sara Kominers, Maryland Coalition Against Sexual Assault, Andrew Johnson, Susan Drasal, Karen Vangider.

- 1. Approval of minutes: Jessica Fitzwater moved to approve the minutes and Marguerite Vacca-Kaye seconded the motion. Minutes were approved.
- Guest Speaker, Amelia Rubenstein, LCSW-C Clinical Research Specialist, Child Sex Trafficking Victims Initiative University of Maryland School of Social Work
 - a. Discussed the two federally funded child trafficking projects
 - i. Child Sex Trafficking Victims Initiative now child welfare services are required to provide services to minor victims
 - ii. Maryland Human Trafficking Initiative for Children and Youth (up to age 24) create multi-disciplinary teams to respond to child trafficking cases, and develop statewide training strategy
 - b. Shared data from all reports of suspected trafficking in Maryland through Child Protective Services
 - i. 322 reports from 2013-present for children under 18 where there is a trafficker OR non-pimp controlled/survival sex/commercial sex.
 - ii. Baltimore City has highest number of reports, followed by Baltimore County, Prince George's County, Washington County, then Anne Arundel County. Frederick County has five documented reports.
 - c. Most victims have high utilization of services (e.g., foster care, runaways, institutional settings, frequent hospital visits, etc.)
 - d. They see an increase in cases after training in a particular county due to better identification and response. Numbers have steadily risen since 2013.
 - e. Gathering data for human trafficking is hard at every level; there is no true reliable estimate, though methods are improving.

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- f. It is easier to collect data on minors due to mandated reporting laws; any child trafficking should be reported to CPS. There's no central place for adult data, but numbers are likely much higher than minors.
- g. Challenges to data collection include: reluctance to self-report; fear of deportation for undocumented victims; lots of stigma and shame around commercial sex

3. Q & A with Amelia

- a. Suggested focusing on solid training even more than one screening tool
- b. The Dallas High Risk Runaway Model screening tool has been very effective with runaway youth; Massachusetts General has great medical screening tool.
- c. Specialized services are ideal but start by putting training in place. For example, a victim can enter a homeless shelter and be given support and services until they can get into a long term program.
- d. Use existing resources as much as possible. Include child abuse center, homeless services, adult protective services and LGBTQ advocates in our task force work.
- e. Labor trafficking needs equal attention as sex trafficking in Maryland though it is harder to see. There are legislative gaps and no MD statute regarding labor trafficking. Susan Ritter with HSI is a great resource.
- f. MD has a Safe Harbor working group Safe Harbor laws decriminalize child victims of sexual exploitation; they can't be charged with prostitution.
- g. There are problems with congregate care for trafficked minors the control they are under in a home can trigger a power dynamic like when they were controlled by a pimp.

4. Review of survey results

- a. 123 respondents, with 42% representing medical workers.
- b. Survey shows an overwhelming response that training, education and screening are needed to better identify and serve survivors.
- c. The top three barriers to responding to cases are: lack of awareness or concern within the community, inability to identify the existence of trafficking victims or problem, and lack of community resources to support victims.
- d. Currently talking to key stakeholders to get better info on the amount of cases, screenings and data tracking in our county.
- e. Will send a snapshot of survey results for other sub-committees to utilize.
- f. Amelia's presentation validates why it's hard to gather accurate numbers; it's clear nationwide that numbers go up when training for identification increases.

5. Sub-Committee Presentations

a. Training:

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- i. Chief Hargis reviewed the training recommendation plan; emphasized we can't mandate, only recommend trainings
- ii. Recommendations will be discipline specific (i.e., medical, social services, law enforcement, education, government (non-medical), community awareness)
- iii. Will include employee training levels, discipline specific resources, information sharing and suggested cross-discipline yearly summit
- iv. Sub-committee will have a draft report in 60 days
- v. Amelia noted all state DSS workers will have training this year

b. Legislative:

- i. Currently fact finding based on laws that passed or did not pass; looking at fiscal notes to see resources tied to laws
- ii. Researching county code, land zone ordinances, signage laws
- iii. Waiting for other recommendations from sub-committees
- iv. Let Jessica know if you have any legislative suggestions by Mid-August

c. Community Response & Protocol

- i. Created an updated draft of protocol and resource list
- ii. Networking with state and other county task forces regarding existing resources
- iii. Sgt. Alcorn has connection at Saving Angels
- iv. Welcomed Katie from United Way as new intern helping task force
- v. Survey shows need for outreach; we will follow up with specific agencies: Chief Hargis will connect Heather with Asian American Center; Nina will contact Frederick Center; Malcom and Heather will contact Coalition for the Homeless; Jessica Beall and Tressa Bell will contact Adult Protective Services

6. Task Force Timeline

- a. Group discussed moving next meeting to another Monday in July due to the holiday. It will be a working meeting. August and possibly September we will get guest speaker(s). September meeting is moved to the 18th because of Labor Day. October and November will be draft working meetings. Final draft completed by December.
- 7. No public comment.
- 8. Adjournment