



“Collaborating to Address the Needs of Trafficked Survivors with Disabilities”

January 19, 2017, 1.5 hours

Webinar Captioning Script

This webinar is part of a project called "Collaborating to Address the Needs of Trafficked Survivors with Disabilities" and it's from Office on Violence against Women.

We will be hosting a two and a half day training in your communities later on in 2017. If you would like more information on how to apply for that training, or more information on our project, in general, we'll have our email and contact information listed on one of the files, in the files box in your screen. I want to welcome -- we're honored to have both Cindy Liou and Katie Spielman today, presenting on this important topic.

Cindy Liou practices law in the area of victims' rights and human trafficking. She is currently the deputy director of legal services at Kids in Need of Defense or KIND. She was the director of the human trafficking at Asian Pacific Islander Legal Outreach.

She is the winner of the 2013 San Francisco award for policy and advocacy. So, welcome, Cindy.

We also have, with us, Katie Spielman, the staff attorney at Disability Rights California and the Lanterman practice group. The Lanterman practice groups provides legal representation.

So, without further ado, I'm going to go ahead and turn it over to Cindy and Katie.

>> Hi, good morning and good afternoon, depending on where everyone is. This is Cindy and Katie. Welcome to our webinar and we are just so happy to be here.

Just to get a sense of where everyone is from -- we do acknowledge there are many people on this webinar.

We are going to be giving a polling questions -- a few polling questions.

The first polling question is, if you could please describe your organization and just pick the best one that corresponds with what you do, even if your work overlaps. We have sexual assault, domestic violence, domestic violence and sexual assault. Domestic violence/sexual assault and human trafficking direct service provider. Human trafficking task force member, law enforcement, community-based organization and other. In doing trafficking work, it does require many different agencies and responses and we all have a lot to learn from one another.

Okay. You're seeing the poll results coming in. It does seem that most of you are identifying in the domestic violence/sexual assault service provider categories.

But also, in the other category, which is quite large. I think earlier in the chat room, we saw that we had people who were from other areas. I saw Dr. Susie Baldwin, who is a well-known doctor in the area of working on trafficking issues, who's from heal and children's rich groups and from health services agencies.

So, thank you for that.

This is the second polling question that we have, which is what best describes your work working with persons with disabilities. Most of you are coming in basic, under three years.

Which is why we have an expert with us, like Katie, which is great.

>> Katie Spielman: My name's Katie Spielman. Thank you for the great introduction.

I want to thank you, all, again, for joining us today and kind of provide a little bit of a brief overview and outline of the presentation and what we're hoping to achieve. You know, one of the -- as Cindy mentioned, purposes of talking about collaboration and how people with different areas of expertise and domestic violence and sexual assault and human trafficking and working with people with disabilities can all come together is we're going to have different areas of strengths and knowledge.

Some of this may be very, sort of, elementary for some of you. But, that's -- I think -- part of building a task force, is helping to educate each other.

As a result of this webinar, you'll be able to recognize risk factors specific for individuals with disabilities, to different forms of human trafficking, learn about disability-related accommodations and techniques you might need in working on human trafficking -- with survivors of human trafficking with disabilities and talk about different strategies for collaboration among the different groups in your area and nationwide and globally.

Briefly, we're going to -- our basic outline, we're going to talk about disabilities very generally, get into some discussion about human trafficking, more high-profile cases of human trafficking with individuals with disabilities and get into some discussion about the collaboration process and intake and strategies to make sure we're thinking about people with disabilities who are vulnerable to be trafficked.

So, very basic breakdown of different types of disabilities.

Physical, mental health, sensory or cognitive. The U.S. census breaks it down a little bit more finely, but example of a physical disability would be a limitation on ability, upper/lower limb use. Mental would be depression. Sensory disabilities are deafness and blindness. And then cognitive disabilities are disabilities that impact a person's thinking. So, including intellectual disabilities, which is formally known as mental retardation such as Down syndrome, autism, traumatic brain injury.

Disabilities can be a risk factor that could lead to victimization or a disability can be secondary to victimization. Post-traumatic stress and brain injury could be the result of victimization of crime.

So, we have another quick polling question now and you may know the answer or give your best guess of what type of disability of the four broad categories I just described do you think is the most vulnerable to victimization of crime?

I don't know if Elena can throw the poll up there?

There we go.

Okay.

So, most of the votes are coming in for cognitive and mental health, about evenly split.

And the answer is that people with cognitive or intellectual impairments are at the highest risk of criminal victimization. People with an intellectual disability have more. All people with disabilities are at risk. It's important not to go into a situation about preconceived assumptions.

And people with multiple disabilities are victims of violent crime at higher rate than those with a single disability.

So, I think we can --

>> All guests have been muted.

>> Katie Spielman: Okay.

So, this is just a quick slide, highlighting the higher rate of victimization with persons with disabilities.

These statistics are age-adjusted because there is a higher rate of disability in the older portion of the population. People with disabilities experience sexual assault at a 3.5 times greater and violent crimes 2.7 times higher than the general population.

The statistics that have been gathered from a survey sent to non-institutionalized and non-homeless people.

Those two populations, people living in institutions and people who are homeless have a higher rate.

The rate of victimization is really unknown and that's connected to the broader problem of not a lot of tracking and attention paid to rates of human trafficking and difficulty pinning those numbers and down and knowing those statistics. So, you know, right off the bat, there are some barriers to entry, barriers to access for people with disability in the criminal justice system, that is important to be aware of when thinking about a task force and collaborating to address human trafficking survivors with disabilities. There's a widespread perception among people with disabilities and some of the advocates that reporting crimes involving people with disabilities to the authorities isn't fruitful. So, there's a lot of

underreporting of crime, low rates of prosecution of crimes with people with disabilities and when convictions do occur, the sentences are generally lighter, particularly for crimes involving sexual assault.

>> Cindy Liou: So, in discussing human trafficking, just to make sure we're all on the same page, we're going to start with U.S. versus Kozminski.

It was decided in 1988.

Most of the time, when we think about human trafficking, we really think about it in the context of sex trafficking or there's all sorts of kind of ideas about what trafficking is that usually fails to really capture the breath of the types of trafficking cases that can occur and to who it may affect and we forget that trafficking is a crime that knows no borders.

It doesn't understand nationality. It doesn't recognize gender, age, and ethnicity, any of those issues.

U.S. versus Kozminski is a case that involves two men with intellectual disabilities and worked on a dairy farm and they were threatened with physical abuse and the threat of re-institutionalization, as well. In this particular case, the Supreme Court decided to interpret involuntary servitude very lower. They enacted the Trafficking Victims Protection Act, TVPA in response.

What does this mean in the grand context of everything?

Just to rewind this. When they abolished slavery, in the aftermath, they recognized that there were many different forms in which people could still be put in unfree forms of labor, involuntary servitude, slave-like conditions or things such as debt bondage.

Someone cannot liquidate a debt and they are required to work off that particular debt.

A lot of the laws exist in the book prior to the passage of the Trafficking Victims Protection Act and this particular case.

It did culminate that we needed to update the laws. And so, the Trafficking Victims Protection Act had three "Ps." The fourth P was added later.

No agency or body or individual could really address trafficking on their own and that partnerships between governments, non-government, public sector, every level was required to combat trafficking.

Again, often times, people forget this case. When we equate trafficking to only the sex trafficking, we forget that such a seminal case in our history involved two men, with intellectual disabilities, with labor trafficking.

Something important to think about when you're doing anti-trafficking work is to address all forms of trafficking.

To break down the law so that we aren't being boring lawyers and not going through the statutory laws.

We often forget that movement is not actually a requirement. You never have to cross a border. Through force or fraud or coercion. Coercion is a really important concept in anti-trafficking laws right now, to acknowledge the fact that coercion can be facilitated through non-violent forms of coercion.

They might consider that they could suffer reputational harm, financial harm direct and indirect threats.

For the purposes of those different concepts that I mentioned earlier, that largely already existed for the laws. We don't recognize this on the state level. Or the federal level and many minors who are being sex trafficked are still treated as criminals or they are arrested. Or they are just not simply recognized and given the proper services.

So it's something that I think that a lot of people are addressing and these laws are changing. Many of the state laws did track the Trafficking Victims Protection Act.

Part of your collaboration with your agency that you work with is to understand which body of laws everyone adheres to, but to acknowledge and look at all of the laws, you can't say, I only deal with state law.

Expect to work with, for example, partners who work with federal laws and find successful, collaborative points that way because you will exclude and forget about different laws and remedies for trafficking survivors at all levels.

So, there are many industries in which people with disability are trafficked off to. This slide is not exhaustive. It is any industry that people can be trafficked into.

What people forget about is being trafficked into criminal activity, including drug sales and drug transport, manufacturing work, working at factories, poultry farm. Domestic work, which is quite common. Sometimes even servile marriage, where they're expected to provide work for the entire family and extended family, as well. So, all sorts of -- it is really not exhaustive.

And Katie is going to talk a bit about some of the disability.

>> Katie Spielman: Yeah, so this slide is a very broad overview of the risk factors and vulnerabilities for people falling to human trafficking and other types of crimes.

The first and most important factor we can control is bias and stigma. There's a bias or perception among some that people with disabilities are unreliable or not credible in reporting their stories, not credible or reliable witnesses or that they won't make a good witness in a prosecution or a civil trial.

There is a perception that people with disabilities, particularly people who they have cognitive or language-related impairments will take too much time to interview and it may be the case that one of the accommodations that might be needed in your program would be allowing more time for interviews in addition to other types of accommodations to ensure you are getting good information. There's a perception that the victim's don't understand what has happened to them or that they may suffer less than no one would choose to victimize them. They are sometimes seen as not sexual active.

Care providers can be given more credibility, their stories, believed more, than the person with the disability. And then of course, the devaluing of the labor and work contributions of people with disabilities.

There's also systemic barriers.

Law enforcement system, judicial system, a lot of systems are not as comfortable with people with disabilities. People with disabilities often don't trust the system due to a history of unsatisfactory prior experiences, such as the the education system, adult protective services and sometimes that's just a matter of lack of training.

So, that's part of what a collaborative effort to address human trafficking with people with disabilities should have, as one of the first items on your checklist is making sure there is sensitivity training and awareness.

There can be cultural beliefs. Some may be more resistant than others. Sometimes people with disabilities may be sort of sequestered away more or segregated.

Not just in terms of ethnicity, but religion, age, geography.

Some cultures are more resistant to mental health treatment.

Cognitive deficits can serve as a risk factor or vulnerability.

People with intellectual disabilities may have difficulty recognizing something is unlawful. And knowing their own rights to their safety and protection. People may not be able to report the full extent of their trauma because of a lack of education or appropriate boundaries. People with disabilities, some may be reliant on caregivers for intimate care and they can get confused. There's mental illness, people are -- there's -- again, the stigma that I mentioned, people with mental illness have higher rates of transient living or homelessness and the trauma of being a victim of a crime can mimic a mental illness, also. So the symptoms of post-traumatic stress or anxiety symptoms.

The threat of institutionalization can serve as a barrier for people sometimes reporting or giving the full details of having been victim to crime because the preference would be maybe to continue in that state than the fear of being placed in an institution.

Communication impairments, many of my clients have limited communication abilities or may be completely non-verbal or communicate differently so that's something you need to be aware of.

Physical disabilities can limit a person's ability to escape or flee. There are situational factors, which could include dependence on others for caregiving, physical isolation, being exposed to a lot of care providers and sometimes the person with disabilities has minimal control over who is actually serving as their care provider.

Depending on the person and the type of disabilities, may be fairly reliant on others.

People with disabilities are much more likely to be victimized by people known to them. In terms of -- for instance, people with disabilities who may be in migratory situations, there are a whole host of disability-related risk factors you can layer on top of that. If you have a device used or lost or left behind in the migration or medications and things like that.

And then, of course, society's expectations about social interactions. Some people with disabilities, people with autism, may interact with the world differently or communicate or engage socially differently than others expect or even not at all. There's also the issue that a lot of people with disabilities have, from an early age, been conditioned to be compliant and obedient to figures and authority and may lack experience in self-advocacy.

>> Cindy Liou: So, many of you, a lot of those factors and vulnerabilities actually sound familiar, particularly if you already work on the issue of domestic violence and sexual assault, for people with disabilities. And, in collaboration, one of the most important things often in a world of limited resources and time, everyone always says, often we've been met with resistance, saying I can't work on human trafficking, I already have so many cases of domestic violence survivors who where I can't take their case. There's a lot of similarities between working with domestic violence/sexual assault/human trafficking survivors.

We forget how to leverage the resources.

Many survivors may view the situation and reintegrate into the communities.

Although for trafficking, it's a little bit different if there are multiple perpetrators.

They may have financial needs and create economic independence.

We think that upon the point of intervention, that everything will be just fine but we forget that if there is to be -- for example -- even a restraining order process that takes two to three weeks, a criminal case that needs to go for three to five years, this person needs economic supports in some way, in addition to other services.

There are things to think about, as well. Things to take advantage of when you look to your partners. So, for example, in particular, for those who are vulnerable to sexual exploitation, having the conversation about healthy sexuality and relationship education.

As Katie mentioned, many people with disabilities are seen as being asexual or they might feel embarrassed to have the conversation. Talking to people who have that experience in doing that kind of work is helpful.

And, also in thinking about legal action.

So, what do we -- what can people prosecute on?

It's not just because it's a trafficking case, it could be disability law, sexual assault, and domestic violence. Also, in legal services.

What are the other benefits? Civil claims?

Is restraining order or child custody needs as well. One is the U.S. Calhan case, where a couple trafficked a woman who had cognitive disabilities and her child. They locked her up and physically and sexual assault her and stole her public benefits and had the child taken away by authorities.

Capturing on those vulnerabilities thinking no one was going to believe her or help her. All sorts of different ways of looking at this case. You see the intersections very quickly. This case, previously, there was a webinar, in which Chelsea Rice discussed this case think we list this information in the resources. To see how she worked with her in a way that was victim-center, trauma-informed and made sure there was a successful prosecution in this case.

There's a good example there, as well.

In addressing trafficking in domestic violence and sexual assault programs, we have to remember that, again, like people with disabilities who are abused, the majority of trafficking victims know their perpetrators and know what to say to them to see that the situation is going to be enticing to first be trafficked into.

They know what to say, to make it sound appealing. And it's not really the case where it's that movie, Taken, where someone shows up and kidnaps someone.

The vast majority of the cases are not like that. Really to capture on this --

It's not just service providers, there are law enforcement providers and medical health professionals who are trained on these issues and they are great partners to start off within thinking about doing this work together.

So, here I wanted to talk a little bit about labor exploitation of people with disabilities.

Generally and the state of the law, as it relates to workers' rights and labor rights of people with disabilities.

There's a section -- a provision of the federal Fair Labor Standards Act. It is little known in the community. The Fair Labor Standards Act is the provision of federal law that sets the minimum wage and workers' rights and section 14-c of that act actually allows employers, in some circumstances, to pay people with disabilities less than minimum wage.

Sometimes at little as pennies an hour and it's perfectly legal.

So, it's something that's important to be aware of when you're doing an intake.

You might not know, is this a human trafficking case?

Is it not.

This is another layer of complication.

States will have coordinated state law.

California, for instance, has a higher minimum wage than the federal minimum wage so California has its own version of this law that may actually give the employer the right to pay less than minimum wage. But this law, itself, is also possibility of abuse and often time's employers aren't following the law. The way it essentially works is that -- people with disabilities who are employed by an employer who has this certificate are paid a commensurate rate with their productivity.

How many Tps reports to you put out?

Just something to be aware of.

There's a well-known case -- it was actually a book written about it, EEOC, the equal employment opportunity and there's a book called, the boys in the bunkhouse.

Over 30 male works with intellectual disabilities who were moved from developmental centers, where they had lived in Texas, to this turkey farm in Iowa, where they eviscerated turkeys for \$15 a week and they did this for decades and were there in substandard living conditions.

They weren't provided with adequate medical care.

They were subjective to physical abuses, hitting and kicking if they weren't working fast enough.

They were punished by being sent to their rooms, if they weren't performing well -- well enough at work.

They were subjected to verbal abuses and ultimately -- actually, there was some reporting. This is a cautionary tale where social workers -- I think in the 70s or 80s, a social worker in Iowa said something isn't right. But the report got lost in the shuffle and it wasn't until decades later that this came to light and it was actually the local media and the local press who had a big role in the abuse coming to light.

That's something that's important to think about, too.

Because different task force members and collaborators, may have different ideas about a media plan or an outreach strategy in that way.

That's just some background.

>> Cindy Liou: Katie, I have a point to add to that.

EEOC versus Henry's Turkey Service was not seen as a trafficking case. We get the question about what's the difference between labor exploitation to human trafficking.

The question I want to pose back is, do we have to wait for it to be trafficking to not intervene anyways?

Labor exploitation is the open gateway for it to be trafficking.

Trafficking is a very severe form of labor exploitation. It's still wrong and these collaborations can still uncover these types of things.

In this particular case, it might be a legal fiction that it wasn't considered a trafficking case, but may be another paradigm, it would be seen as a trafficking case.

That's something to keep in mind. Often times, let the lawyers figure that out in the terms of the legal remedies.

Don't get caught up in the legal fiction and what point does it become worthy attention and intervention? It is usually worth asking someone, do you need assistance? Even if you're not sure if it rising entirely to a level of trafficking. We have forms within the sheltered workshops and in other cases, too, involving immigrations such as the h1b temporary workers visa. Don't be misled by the fact that this is a legal form to get these low wages are they willingly entered the contract or people aren't being locked up.

Those are not the factors in which labor exploitation or trafficking may be occurring.

What really happens is afterwards.

Can they leave the situation? Can they get medical attention?

What's happening with them? And not just simply, how did they get into the situation? People often get caught up with that and end the inquiry there.

>> Katie Spielman: Thanks, Cindy. The next couple of slides are the language we use to in trying to start out, particularly, if you haven't had a lot of experience working with people with disabilities.

If you're attending this webinar, you're interested in it. People pick up on cues and it's important to put a good foot forward. Some things to keep in mind and showing respect, the first and foremost, I probably should have put this bullet first, is let the person with the disability speak for him or herself and not direct your questions to a care provider or parent or friend. And to really let the person with the disability speak for him or herself. Focus on abilities, not limitations.

To avoid excessive praise or terms. And not to also sort of lionize or, you're my hero, you're such an inspiration. And, most importantly is to work with your partners. The next slide here, I have some examples of terms to use and terms to stay away from.

So person with a disability, for example, in our agency, we use people, first language. And we say, you know, you focus on the individual and not necessarily the disability. But, I have some clients who have said, my disability is a very important part of my identity and prefer an identity-first approach. So, then I respect that.

It's important to listen and be responsive. This slide here is really just kind of to take home and have a resource of approaches to language.

>> Cindy Liou: We have been talking about different ways of collaboration, something we do want to highlight is, first and foremost, when you're working with your partners, particularly in a form formalized setting to do anti-trafficking work, are you aligned and do you have a common incentive?

Do you understand the other agencies incentives? We are very caught up in our particular work of focus and make sure we're explaining our work to everyone else because nobody else understands what we do.

But we don't also take the time to understand what our partners really do. What's their perspective and what's their philosophy.

There may be times you would be surprised if even though everyone thinks they're here to support a person with human trafficking, ideas may be different on how to do it.

One thing that is quite helpful and natural about doing the anti-trafficking work and for those who -- service providers and people who work with people with disabilities, is to highlight -- again, people who also do domestic violence and sexual assault work, is highlighting and respecting the right of an individual to make their own choices and have it being about empowerment for them to do something else.

There is often times an easy that others might want to just fall in the pattern of wanting to rescue someone who seems vulnerable or to save them, save the poor trafficking victim, save the poor person who has a disability.

That's what we want to move away from when we think that these movements can really come together and collaborate on.

Human trafficking statistics for people with disabilities are unknown and it is a mess because there isn't a common-agreed what is trafficking, how to count the statistics, how to count for i.e. really honestly haven't done a ton of collaboration across the movement in a way quite yet. And some areas and some task forces and some groups are doing this, but I think overall, it's not a conversation we're having enough, which is again why some of the statistics are unknown. Again, to also identify, acknowledge the differing goals and movements and differing goals and have a conversation with your partners and that these are real issues and the answers might be hard and unclear, but you still need to have them in forming these partnerships.

One example that we had here, in California, is that I work with a lot of individuals who were trafficked as domestic workers and I did a little bit of work in my previous work. There was actually a move to pass a domestic worker bill of rights here in California.

We thought it would help close a lot of the loopholes and protect domestic workers and those who were trafficked. There was some resistance from some people because there was a perception that this domestic worker bill of rights might increase caregiver costs. It was a lack of a conversation to align these purposes and goals together. Particularly as these issues can manifest in different ways. I also

worked with many caregivers who were being trafficked in care home facilities and witnessing the abuse of those with disabilities.

Not quite a case where the disability was being trafficked, but all forms of abuse and intersecting arenas would crop up. These are conversations we should be having with one another. Finding complimentary areas of expertise. We know there are medical, mental health providers, certain law enforcement, individuals who are tapped to do this work, working with special victims, forces within police departments or law enforcement officers who work in this work. Those are great places to also start when you're collaborating. And acknowledging the need for cross-training and cross-accessibility.

It's not just, you need to learn what I do and my perspective, but how to we learn about what we do and what your philosophy is?

If we have a case, how do we come together to serve this individual and place their needs first? And, this also helps identify, again, additional civil and criminal options for people with disability. Katie, is there anything else you'd like to add?

>> Katie Spielman: A lot of it is to minimum negative help-seeking.

When they call one agency, they say, this is a trafficking issue, call someone else.

And so that there is kind of a referral or relationship so that people do not feel turned away and that -- which again, that is shown really impacts negatively people's ability to come forward and out of the shadows and to report about their abuse.

>> Cindy Liou: I think those are all really good points' don't have too much to add to that.

This next slide is the list of disability rights stakeholders and I just think that what Cindy said about keeping an open mind about maybe expanding the boundaries of what your agency does or what you do, what your expertise is and whether you can serve someone with a significant did go or whether we can work on human trafficking cases because it's intimidating and it's not really in our wheelhouse and we do need to have partners and collaborators and sometimes it might take another push in that initial call for someone know X, y and z and they're interested in this and we can work together and pull our resources and expertise.

This slide, here, is just a list of different local -- local, state level, national disability rights groups and agencies and organizations.

There will be a local version near where you are.

Protection and advocacy that is the agency I work for. There's a federal congressional funding for a protection and advocacy agency in every state.

So, there is a P&A, protection and advocacy, in every state in the country.

A lot of them aren't called protection and advocacy, -- we're called Disability Rights California, but we are the P&A for California.

The ark is a great organization that has resources and advocacy and things like that for people with intellectual disabilities, self-advocacy groups are a great place to start. That's people with disabilities, who are gathered together in self-advocacy groups to work on their own issues and causes.

Crisis intervention teams are a good place to start in terms of law enforcement with task forces, within law enforcement, that are already trained up in some of the specialized intervention techniques. Local behavior are people you might need to pull in for, particularly, in you're working with someone who has limited verbal ability so have a behavioral analyst or someone to come in and pick up on subtle cues to make the person more comfortable and get better information and interpret the behavioral cues. Ash is a group for people with disability.

Your local state department of health or state department of disability services would be a good place to reach out and say, who do I call about this?

The national disability rights network.

I think they were the host -- they're sort of the P&A kind of parent organization, you could say.

And I think that they hosted that training back in October with Sarah, Lori and Chelsea.

>> United cerebral palsy. Our local place has a lending library for assistive technology device. It can be from a really high-tech, iPad, to more analogue of a picture book and things that help you with reaching. All kinds of stuff they have, and they're part of a network of libraries.

For someone needing to try something out or hasn't had access to assistive technology devices that could be a good place to start, to at least get a temporary one. Try it out and see if it works.

Public benefits attorneys. A lot of benefits attorneys know a lot about working with people with disabilities, having to work on social security disability cases and things like that.>> Many of these cases that we've highlighted, there's an element of benefits fraud in which the individual with disabilities being taken advantage of for their benefits, as well. That's something to kind of also pay attention, too. We put up this slide for U.S. versus Weston, it's a pretty terrible case in which you'll see there were tons of different laws here across the law, not just labor and sex trafficking, but hate crimes, resulting death of the victim. Six adults and four children across four different states and involving law enforcement and local law enforcement. When you get together with your collaborative partners, try to go through this hypothetical as an exercise. If these individuals came to you, who, at the table, would you call upon for what services that they need and for how long?

Be realistic.

I think often times, many of us want to be at the table and say, yeah, we're ready to provide this person shelter but when the actual case comes along, we're surprised -- when we take women, we don't take adult teenage children, we only take them for four weeks.

Getting down to the nitty-gritty and based off of a hypothetical.

What would we do in a case like this? It is important to be realistic. .

>> We're going to be talking about intake and collaborative efforts on this.>> Yeah, so the first and foremost and I'll say it again is clarify who your victim or client is and assess if you have any conflicts. That may not be something that every agency or program does. We're a law office so we have to assess if we have any conflicts. It might need we need to pause the interview or process.

A lot of times, in my work, almost all of the time, the initial call for assistance is often not the individual with the disability, him or herself. It might be a family member or a friend or a care provider.

I sound like a broken record, I remind those people who are the initial callers -- of course, my gratitude and interest and willingness to work with them but my client is always going to be the person with the disability, so that's really clear to everyone from the start. And so you want to clarify your relationship with the -- with the client or victim or individual that you're supporting or helping.

And also, clarify the relationship of the victim to the suspect. Speak directly to the victim or survivor. For providers, you want to clarify the obligations and the roles.

Your roles and everyone's roles to both the victim and any caregivers or support people.

It's important to ask about accommodations, communication devices, and language accommodations, any kind of preferences or accommodation needs that the person with the disability might have.

And, just identifying whether the person who you're running the intake with has a disability and you can make that a standard part of your intake process.

Do you have any disabilities you want to identify?

Do you have any accommodation needs or requests? And then in terms of the human trafficking analysis, Cindy went over the sort of -- the means of coercion, the force, the fraud and the coercion analysis that has to take place during a human trafficking -- for meeting the elements of the human trafficking case. So you're going too probably, at intake, how does the victim's vulnerabilities inform those elements of human trafficking?

And, given a reasonable person in the victim's circumstance with the victim's cognitive profile, intellectual disability profile, situational profile, would they perceive the actions of in perpetrator as force, fraud or coercion.

>> This is more than just a straightforward question. Did you feel like you feel you couldn't leave because they were going to hold your disability against you? That's not a good one. One of the threats

was to re-institutionalize the men and what does that mean? What are their previous experiences with that? What's their idea of how law enforcement or other service agencies respond to their own credibility?

They have nothing to do with you.

Was there some way that people with disabilities were treated in their home country that you're unaware of that really informs the way they respond to things or perceive a threat? Allowing time and space for that inquiry is very important.

>> Katie Spielman: Yeah, so this is by no means exhaustive. The idea is to be thinking about accommodations from the get-go, from the intake process and throughout any service or advocacy or investigation progress you undertake.

Starting with identifying whether there is a disability.

You want to create a safe environment.

You might need to get the person away from the traumatic stimuli, give some time and space from that.

If the person was brought in with assistance with a support person or caregiver, that's a fine line you need to walk because at some point -- definitely are going to need to talk to that person allow.

It might take time to build up trust.

That preferred person or support person might need to be there for some of the discussions or interviews until you've built up that rapport.

Those are just awkward conversations sometimes, but they have to be had.

Some victims might have a preferred gender that they feel more comfortable talking to. You might need to use a linguist or a behaviorist, as I mentioned earlier, for people who have very limited verbal abilities or who are totally nonverbal.

You might need to use notepads or pictures or dolls.

And, a lot of my clients with autism are very sensitive to sensory input.

So a situation where there's a lot of flashing lights or sirens or loud noises, it's going to be a terrible environment where you would hope to get any information or have any information you're sharing really sink in. You want to avoid compound questions. Ask very direct, simple, short questions. Explain the process. Explain the role.

Don't take it for granted.

I'm a lawyer, right, so I need to not take it for granted that my clients know that everything they're going to tell me, I'm going to keep totally confidential and I won't tell anyone. Use plain language. Don't use

jargon or complicated medical terminology. You want to avoid open-ends questions. Persons with intellectual disabilities, they might be eager to please and give you the answer they think you're looking for. If you're concerned that you are in a situation where you're getting a yes to every question but it might not be accurate.

You can test that by asking a series of questions, some of which you know the answer is, no. And check that, see if you're still getting a yes to everything. May need to allow for breaks. Allow for multiple interviews.

Again, part of that trust-building process and just the fatigue. And, again, allow for -- or understand -- that you may get a flat affect and that may be -- that may be an all the time thing or in response to the recounting of the traumatic event.

>> Cindy Liou: I see a question here, should we expect a person not to share the trafficking situation until a week or two in their shelter stay?

If someone is fleeing or coming to a shelter, something may be wrong and they may not be ready to share it because it's traumatic.

It's triggering because they're fearful that sharing it may result in something negative to them or to SDM to somebody else. People may not know they've been trafficked. They may not identify as a victim. They may be engaging in self-blame because of what someone has told them, I brought this upon myself, it's my own fault.

We need to identify these key trafficking indicators.

For many people, there is very little joy in identifying as a victim because it is a very – sometimes, it's describing a situation that's kind of the lowest point in their life or a very terrible situation that's happened to them so less of a description of a human trafficking and what happened in the situation that occurred?

Did you have to work for long hours? Were you sick and you felt you were still compelled to work? Are you fearful for your own safety? What about for other people?

Other questions that would crop up, there's cultural aspects to this.

For example, I had a client who told me he was very afraid of being debt and he was told if he broke a contract early, he would have to pay back all the money in the contract.

Being born and raised in the United States, it didn't seem that big of a deal.

I said, how do people come collect debt where you're from? He comes around with his machete every day and he has his wife and young daughter still abroad. So make sure to remember, debt, again, is a big one if you're working with foreign nationals or people from other cultures.

Often times, there is a violent way of what this can mean. As Susie said here -- Dr. Susie Baldwin, sometimes it can take a long time for people to disclose their victimization. There are so many people that might show up on the scene and they may not know who everyone is and they might associate everyone as being from the government. It may have to do with past forms of trauma, as well.

All sorts of issues. Other key questions to keep in mind -- this is just a very quick overview -- again, really think about the coercion aspect and the working conditions and did the person try to leave? Not necessarily physically so, but what was the situation that made this person feel like they had to be in a terrible working situation or environment? There is usually a reason that's compelling them to be there, that they are not necessarily able to articulate in one sentence and in a single conversation in one hour.

Vulnerability factors create more barriers for people to come forward.

Other examples, I've had clients say to me, you know, well -- I said, why are you so afraid of deportation? This person seemed particularly -- they were shaking.

I was like, what does it mean to be deported to you? When people are deported, they get locked up on a jail on in island. They have different ideas of what things mean so you need to get into that mindset and ideas.

When it relates to disability, it's personal to them and their experiences, you need to have the time and patience to understand that.

So, in -- this is from a from the Washington state coalition against domestic violence.

Thinking about some of these tactics.

What does your trafficker tell others about your disability?

Do they do things to take advantage of it?

What do they do to interfere with your use of items needed for safety, medication, anything of that sort? Do they restrict or interfere with communication with others? We think, oh, yeah, I already know to talk directly to the victim.

Sometimes we forget and we revert and alter or goals of what our training is and we'll turn the mom next to this person or the person without the disability and talk to them instead or wonder if this person is mentally competent enough and we rely on stereotypes to kind of forget the training we have to focus on the individual at-hand and kind of their needs.

And communicating with them directly.

One common scenario is having parents call me about their -- their children or their young children who they thought were being taken advantage of.

It turned out that the parent also had an unhealthy controlled relationship with the client in needing to rely on their benefits and that unhealthy relationship with the caregiver was lending an escape for the person to have a relationship with somebody else.

These scenarios are complicated. That brings me to service coordination.

We need to have specific questions and we need to be talking to each other, and our partners, about specific accommodations through these different services, other than just making a laundry list saying, we'll get there when we need to. Safety planning.

Katie had a good example.>> Katie Spielman: Yeah, I mean, we had an incident in our own office where there was a shooting outside of our office and it happened in the afternoon and we got put on lockdown.

They told us to all go home a little early at 4:00, but we had some people who have personal attendants who come when it's time to go and they weren't scheduled to be there until 5:00 so it was something we needed to work through and make sure everyone had a plan to get out safely and had someone with them if that was a necessary part of the process.

It's not -- things come up last-minute and things like that, that you might not think about in advance, are important to have a plan for and have a way to deal with.

>> Cindy Liou: Other good questions are asking the individual directly, do you have any concerns about using a hospital or accessing the food bank or the bus system or certain services, like financial aid? We forget often times that all are a lot of assistive devices -- sorry, Katie, I'm needing to turn to Katie. We rely on the internet a lot to access benefits and services and they don't -- >> Cindy Liou: Katie and I, in developing this presentation, I had to learn from her about, how about this, like, great, fun, picture? A lot of consideration to think about there.

Another case I had -- I had a client who was also transgender who needed a service dog, that was several layers of difficulty there in finding shelter.

Again, something we have to think about and not just put off.

Next slide.

>> Katie Spielman: I think that the -- one of the things to think about in terms of beginning an investigation, whether a formal or informal investigation inquiry assessment in thinking about was this person with a disability a victim of human trafficking? The process may require a more sort of therapeutic approach. Anytime you're doing an investigation, you've got multiple goals to keep in mind. You're trying to find facts and get reliable facts and get evidence, but then you're also trying to avoid traumatizing the victim again, which is difficult. And really try to empower the victim.

So, it's just something to keep in mind, that the process may take place more slowly.

A lot of people in the comments have noted that it takes a long time to build up trust for anyone who has been a victim of trafficking and maybe more so with a person with disability where you have the additional mistrust in systems and law enforcement and fear of institutionalization. You want to make sure you're collaborating with your disability resources and interviewing the victim and other witnesses with disabilities.

A lot of people -- for instance, Henry's Turkey Service in Iowa, the essential civil case, it was a lot of interviews of the 32 men that were at this turkey farm, all corroborating stories about what their conditions were like and what their wages were like and the housing and the work and all of it.

So, you know, particularly with very traumatic crimes, just a police officer in a uniform might not be the most effective interviewer and --

>> You might need someone from the special victim's unit or someone with crisis training, within your law enforcement agency or one of your partners.

And the other thing to keep in mind is that -- I know a lot of the people in this webinar aren't necessarily from legal services organization services, but in terms of a legal workup, you might think that the DRB is actually good for your case narrative, but it could be very disempowering if you make that decision without consulting with your client and talking to your client about their options and respecting their wishes and explaining the boundaries of what you can and can't disclose, what you have to disclose, when the victim or witness might be under oath. For me and a lot of people, you might be a mandated reporter if you do a lot of work with dependent adults or people with developmental disabilities, so in California, I am actually a mandated reporter, but at the same time, I'm also a lawyer and I owe duty of -- confidentiality.

Going -- explaining those intricacies and understanding in your own role, whether you have that duty of mandated reporting is important, not just for working with your clients or the people that you're serving, but also if you're working with collaborators so that everyone knows the responsibilities that everyone else has on the team, that they just can't wait in some circumstances.

>> We want to encourage you that although it seems like these cases might seem difficult, they are worthwhile on the legal end.

We shouldn't say, the defense is going to attack this person's competence.

When taking on these cases, the defense is always going to attack uncertain -- by defense, I mean the defensive perpetrators or abusers, they will attack certain issues. We have to be ready for these attacks and work up the cases and work with the experts and work with the most quote/unquote piece of evidence in the case, which is the victim, the survivor, and to be patient with them. Cases have been prosecuted and we shouldn't engage, again, in that behavior that, again, disincentivizes people because they're not to be believed or they're not as credible. As Katie mentioned, some of those difficulty that people with disability face early on --this goes with various things. Same thing, don't be discouraged by the attack, well, this person is an immigrant and they're doing this for status.

Any of those things, you have to be prepared.

[Indiscernible] is a trafficking expert, who has a lot of experience in this work.

She worked on the U.S. versus [Indiscernible] involving 60 people and she's done a lot of work in this arena and I would recommend if you're looking for experts, to speak to her. Confidentiality privilege, Katie touched on mandatory reporting already. It's a common source of conflicts between collaborators anti-trafficking work.

For a lot of people who work with people with disability, mandatory reporting is involved in this.

It is important to know the confidentiality roles and limits and to explain them to one another and to the individual so they that know and you protect them.

Social service providers, when you have notes, for example, that are overly detailed -- we talked about how it takes a long time for the story to come out and it may be inaccurate because that information can be mandatorily turned over to the defense because it is their constitutional right to be able to defend themselves to get that information. So, having that conversation, that's why attorneys are very protective of drafts of their documents.

So, again, have that conversation so that you know and that you have conflict resolution so it's not personal and everyone's protecting confidentiality.

Minimizing writing.

Picking up the phone.

Things of that sort.

>> So, I think we are nearing the end, here, and we just wanted to speak a little bit about outreach. So, if -- you're interested in -- yourself or your agency or your program, reaching out and putting the word out that you're interested in open and building up qualification to work with human trafficking survivors with disabilities, in terms of if you're coming from a place of, I know domestic violence, I know sexual assault, I maybe even know human trafficking well, but I'm newer to the disability world, think about whether people of disabilities are reflected in your marketing and outreach materials.

Are people with disabilities visible in any of the presentations that you do? The work that you do?

The materials you put on your website?

Are they available in different formats?

Do you have YouTube video that would be available? Do you have information in Braille? If you've got -- again, material on the internet with images, are the images tagged with alternative text?

Is your office accessible?

Is someone with a wheelchair going to be able to get in and out of your office and get through your office and use your restrooms?

Think about cross-promoting with disability-based organizations and saying, this is what we do.

We know you do this or we want to understand more of what you do and can we cross-promote service in this area of human trafficking and people with disabilities?

Then you just ask for feedback and be responsive to feedback from the disability community. Look for a local self-advocacy group of people with disabilities to say -- just give maybe an intro talk of what you do and get feedback from them about what the needs are in their community and any suggestions for improvement. And then, be mindful also of recruiting and employing people in your own program who have disabilities.

>> Be careful about campaign materials that has morbid portrayals of human trafficking.

We have learned that often times, if you have a campaign where the featured person, who's a domestic violence victim, is battered and bruised with a black eye, it doesn't encompass the full breath of what domestic violence can be like and that abuse is not violent and it can lead to people thinking if they're not being physically abused, it's not abuse. The psychological abuse is the most painful see a lot of campaigns where people -- it's very -- graphic design and someone is locked up in a cage or they have a barcode on them. That's not necessarily going to allow something to self-identify.

If they're not being physically restrained or a labor trafficking case with sexual assault, they might not identify with the ad where someone is dressed in skimpy clothing to belie it is supposed to be a sex trafficking ad.

Don't let that deter you from doing effective outreach.

You need to collaborate with partners and encourage dialogue.

Don't be scared to incorporate these questions into your intake. Again, in going back to the intake on the most basic level, do you ask about disabilities in your intake?

Is there a place and how would you ask those questions?

These resources do exist, so start thinking about them.

This is not an exhaustive checklist, but an overview of some of the things we have mentioned here today, just to start off with.

This is a lot of work.

Don't be deterred because, again, it is important to start and to work on.

So, are there -- at this point -- if you have a particular -- some of you work on task forces or you have committees to do outreach or to do services.

These are different places where you can start off incorporating some of these items. Are there questions?

We can take them -- Elena, I'll let you take it from here.

>> Thank you, Cindy and Katie, for all the wonderful information. For those of you listening in, feel free to put them in the chat box.

I have one question that came in through registration, was for domestic violence, sexual assault service providers in rural communities that are looking to collaborate with state-wide disability rights stakeholders.

I guess the question is, if you're in a rural community and you're thinking that you don't have a ton of resources or a disability rights agency locally, Katie, you have suggestions about how, you know, they might be able to reach out to the state-wide provider because maybe a lot of the stakeholders you mentioned earlier do work in rural areas? >> Katie Spielman: I'll give an example.

My office is in Oakland, but we get funding in California, in our state, that is earmarked and targeted and the purpose of the funding, is to make us -- we would want to go to rural areas anyways.

We get certain funding that's tied to having to serve particular underserved rural locations and so I do a lot of travel for me job. I'm driving to -- the central valley next week. And, I think that -- that is hopefully the case with state-wide level disability rights groups in all states' think certainly, in the protection and advocacy network that I'm a part of, it's an issue and a problem we're all aware of and mindful of the additional challenges of people with disabilities. It's so much harder to access providers and transportation and services.

If you are in a rural community, yes, absolutely reach out to your state-wide disability groups to share your story and your needs and find out about what they can do to come in and help or, you know, with technology now, there's a lot of work that can be done remotely, it's not the same as boots on the ground, but maybe with a partnering up to say, how can we work together to address the needs?

>> Asking and requesting for that training to be local because often times, trainings are held in the big metropolitan and urban areas and it's important to bring trains to those locales and to really, again, show them that there is -- there are resources and they can reach out.

Again, it's not just the hand-off.

We have a case involving somebody with a disability, there are certain things also that you can do beforehand and prep and work with the agencies to build questions into your intake and figure out accommodations on the front-end. Transportation, in working with rural communities, it's one of the biggest questions.

Elena, I know you did a lot of work in rural communities.

>> I think it should have been in the files section of the webinar but we recently did a webinar on addressing trafficking in rural communities and how you might think about some partners you might not have thought about before that could help in your work to address trafficking, to try to leverage resources. So, that's also in the files folder that you can take a look at if you're interested in more information about that issue, in particular.

I think we have one more question.

Feel free to jump off and feel free to fill out the survey when you log off.

We had a question come in, in the registration, specifically about task forces and about whether someone that's doing specifically disability rights work or the task force itself, if they should be reaching out to a local disability rights stakeholder and how you might do that think it's a general question, I think you might have addressed it.

If there's something you'd like to reinforce?

>> I think it's a great idea. It's great for a disability perspective to be at the table of the task force, looking at human trafficking and even more important, I would say, than having someone from a DB rights group or a disability service organization, would be having a person with a disability on the task force.

>> I've noticed in collaboration and task forces, the response isn't going to be that great if you go to someone and say, hey, you're not identifying trafficking victims.

If you say, hey, you have a lot of expertise and we want to learn from you and they'll learn about the work you're doing. Often times, people are stressed. They're stressed about resources, they're stressed about their existing work. It's hard to break people out of silos so coming to them with that approach is an open way to learn and start that conversation because it is true, often times, I've noticed in trying to start new collaborations, people will say to me, we've never had a trafficking case know the truth is, no, they haven't identified as such.

I might have worked with someone with a disability and frankly didn't have any idea and didn't know it's okay to admit that we need to learn that this is a continual process and we are better when we are learning together from one another.>> Wonderful. Thank you, both.

We're just out of time. Thank you, all, who participated.

And stay-tuned for news on upcoming webinars for us, as well.

>> Thank you.

>> Thanks, every one.

>> Thank you.