No Wrong Door

Hennepin County Response Plan to End the Sexual Exploitation of Youth
Local newspaper headlines cry out:

One Girl’s Ordeal of Terror
Ex-Con Guilty of Selling Girl for Sex on Backpage
Women Sentenced for Prostituting 2 Teen
Runaway Girls in Minnetonka

Hopkins Cheerleader Admits to Pimping Teammate
Native Women Easy Prey for Traffickers

These shocking headlines appear all too often. Child sex trafficking is all too real in Hennepin County, on our streets and in our communities. This is not just an international or inner-city problem. Child sex trafficking is a statewide, metro-wide, and county-wide health crisis that impacts the central city and the suburbs alike.

The commercial sexual exploitation of our children is a public health crisis. It is modern day slavery.

Our children are its victims.

Too often, juvenile victims of sexual exploitation are not found, not identified and not helped. Worse yet, sometimes they are found and identified, yet face further victimization.

Traffickers operate with impunity. They prey on the vulnerability of the victim. They use lies, fear, drugs and coercion to gain control. They promise love, money and dreams fulfilled. Then they buy and sell our children as commodities.

It is a business driven by profits. If nobody paid for sex, sex trafficking would not exist.

The Hennepin County No Wrong Door plan is our call to action to protect our children by combatting juvenile sex trafficking in Hennepin County. This is our plan to ensure that sexually exploited youth who enter our doors will receive the help and services they need. It is our promise that we will not send them back to those who manipulate, use and abuse them. It is our pledge that perpetrators and purchasers will be held accountable.

It will take time to change the cultural norms that support the business of sex trafficking, but we must take steps now to prevent the sale of our children, to aggressively prosecute the traffickers, and to protect and serve our children.

Jan Callison, County Commissioner, District 6
Chair, Sexually Exploited Youth Work Group

Gail Dorfman, former County Commissioner, District 3
Founding Chair, Sexually Exploited Youth Work Group
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**Principles**

**Sexually exploited youth** are victims of a crime.

**Sexually exploited youth** are not defined by where they live in Hennepin County, the color of their skin, their cultural backgrounds, sexual orientations, gender or gender identities.

We have the shared responsibility as a community to keep children **safe from sexual exploitation**.

We will partner with parents and families to keep children **safe from sexual exploitation**.

We will see children in the context of their families.

While a service and legal system is in place to break the cycle of exploitation, a coordinated response and protocols are needed.

We affirm and will be guided in our work by the voice of survivors.

A service response must be victim-centered, build on the strength and resiliency of youth, respect their need for privacy and self-determination, and help ensure a healthy future.

For services to be effective, trust and rapport must be developed with youth.

Services must be culturally relevant, developmentally appropriate, trauma-informed, and supportive of families.

Perpetrators and traffickers are criminals who must be held accountable.

We will work to change the social and cultural norms that permit the sexual exploitation of children.

**There will be No Wrong Door for sexually exploited youth in Hennepin County.**
Background

In 2011, Minnesota became the fifth state in the country to approve Safe Harbor legislation to combat juvenile sex trafficking and provide services to victims. Under Safe Harbor, government must take the lead in bringing traffickers to justice and helping victims recover and heal. It is not a voluntary response, but a legal obligation.

This document forms the basis for Hennepin County’s response to juvenile sex trafficking. Hennepin County’s No Wrong Door plan was developed over the course of a year by the members of the Sexually Exploited Youth Work Group. The work group is a cross-departmental team of Hennepin County staff, judges and health care professionals. National experts and community partners were also consulted.

Our Hennepin County No Wrong Door work plan is comprehensive in scope, from prevention to prosecution. It is aligned with the state’s No Wrong Door plan, and establishes an integrated, systemic response both within county government and in collaboration with our partners throughout Hennepin County. Governed by a set of core principles, this plan provides the guidelines to implement action steps to combat juvenile sex trafficking and provide comprehensive, victim-centered services.

Many thanks go to the members of the Sexually Exploited Youth Work Group who brought their considerable knowledge, experience, and dedication to the development of this plan.

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Paula Schaefer  
Juvenile Services Consultant

Major Kip Carver  
Hennepin County Sheriff’s Office

Captain Pete Dietzman  
Hennepin County Sheriff’s Office

Lieutenant Andrew Smith  
Hennepin County Sheriff’s Office

Sergeant Mary Jerde  
Hennepin County Sheriff’s Office

Detective Erik McKloskey  
Hennepin County Sheriff’s Office

Note: The Work Group members represented a diversity of county departments with unique areas of responsibility. Given this, not every recommendation is applicable to every department.
12-14: Average age girls trafficked for sex are first victimized.

Goal: Prevention

Address the root causes of sex trafficking and the conditions that contribute to the sexual victimization of youth.

1.1: Hennepin County will target early intervention services to at-risk youth: homeless, runaway, and truant youth and those involved in foster care, probation and other county services.

1.2: Hennepin County will work internally, across jurisdictions and with the community to develop and support prevention strategies.

1.3: Hennepin County will continue to collaborate to promote community education and public awareness of juvenile sex trafficking.

1.4: Hennepin County will collaborate with our school districts, parents and families, community-based providers and advocacy agencies to promote and support school curriculums that address resiliency, healthy relationships and identify the signs and risks of juvenile sex trafficking.

1.5: Hennepin County will develop proactive policies to protect survivors, prevent trafficking and prosecute traffickers.

1.6: Hennepin County will support state and federal legislation that is consistent with No Wrong Door principles.
For Assistant Hennepin County Attorney Jamie Cork and her colleagues, the critical task is nothing short of changing the language and shifting social norms. Society must come to see these youth not as criminals, but as victims who need help and support.

Working with the Hennepin County Human Services and Public Health Department, Cork is training a spectrum of people who have contact with youth, in human services offices, clinics, schools and elsewhere, to help advocates identify youth who are in trouble and connect them to help.

“The goal is, no matter where these kids come in through, we’re going to get them the help they need,” she said. “There are so many of these kids out there that need the services, need the help. They’ve fallen through the cracks. Until we can make the community aware of these victims, we’re going to have hundreds of these children out on the streets abused and victimized over and over again.”
Goal: Training, education and public awareness

Training, education and public awareness efforts will be comprehensive, coordinated, streamlined, and targeted to all audiences who interact with youth populations.

2.1: Hennepin County will coordinate and provide training for county employees and key community sectors that expands understanding of:
   - Risk factors
   - Recruiting techniques
   - Red flags
   - Available resources

The content and training will be victim-centered, trauma-informed, culturally specific, gender responsive and will provide youth the necessary tools to avoid and break free from sexual exploitation.

2.2: Training for Hennepin County employees who interact with youth will build upon existing Hennepin County resources and will be specific to each service area.
   - Relevant training and education will be embedded, whenever possible, into the training staff already receive.
   - Training will be required for county staff and contracted providers on preventing juvenile sex trafficking.
   - Training will be required for county staff and contracted providers on the requirements for mandated reporting.

2.3: Hennepin County will work with other key trafficking stakeholders, in consultation with survivors, to provide a range of training and public awareness tools such as videos, brochures, workshops and curricula.

2.4: Hennepin County will partner with community organizations to raise public awareness within the community sectors that interact with at-risk youth on a regular basis.
   - Schools - including parent groups and sports teams
   - Community centers
   - Transportation – Metro Transit, Amtrak, Megabus, taxis and Greyhound sector
   - Hotel/motel industry
   - Faith communities
   - Fast food establishment
   - Shelters
   - Health care providers
   - Conventions, trade shows, and conferences
   - Sporting events
   - Judges
Hennepin County Sheriff’s Detective Erik McKloskey enters a young person’s life after a health worker, a social worker, a school employee or other person notifies him that the youth might be the victim of sexual exploitation. He works during an investigation to create a trusting relationship with the youth. Though the young men and women he sees have very complicated lives, he’s willing to listen and understand each youth’s whole story.

“When you get reports from schools or the hospital that they may have an exploited youth on their hands, the best thing you can do is go talk to them,” he said. “You don’t accuse. You make contact, so when the time comes when they need help, maybe they’ll call you.”

In some cases, after the investigation is complete, that call for help is an opportunity to get the young person off the street and moving toward recovery.
The National Center for Missing and Exploited Children estimates that at least 100,000 children are exploited each year for prostitution in the United States.

Goal: Identification and assessment

At-risk and sexually exploited youth will be identified and assessed in a timely, accurate, and respectful manner.

3.1: Hennepin County and contracted staff who interact with youth will know and employ best practices for identifying young people who are at risk for sexual exploitation. Best practice standards that identify risk factors and red flags will be adopted.

3.2: A mandated report will be generated upon identification of sexually exploited youth. Those who identify a youth experiencing sexual exploitation will be directed to call the Hennepin County Child Protection reporting line at 612-348-3552.

3.3: Once identified and reported, all youth will receive a comprehensive, client-centered assessment by Hennepin County Children and Family Services to determine their needs and eligibility for services. Children and Family Services also will develop assessment protocols.

Note: After initial assessment of a child's safety, engaging with the child's parent and family (if appropriate and safe) is the next priority of Children and Family Services staff. Partnering with the child, their parents and families to listen to concerns and perspectives, evaluate needs, and seek solutions to best protect the child is central to the work of Children and Family Services.
As director of the Minneapolis/Hennepin County Office to End Homelessness, Mikkel Beckmen knows the dangers faced by youth who live on the streets. They are likely to be approached by a predator within 48 hours of becoming homeless.

“The unfortunate thing we hear is that often the people who reach out to youth who are homeless are people who want to exploit them in some way,” he said. “If any youth leaves home for whatever reason, there should be a safe place for them to go, to get into shelter and receive services and counseling.

“Clearly, one of our roles is to lead on this issue.”
The FBI has identified the Twin Cities as one of the nation’s 13 largest centers for the sexual exploitation of children.

**Goal: Service delivery**

Services will be victim-centered and draw on the strength of each youth. Service delivery will be seamless, aligned, and efficient.

4.1: Once a sexually exploited youth has been identified, assessed and triaged by the Hennepin County Children and Family Services team, the youth will be assigned a social worker who specializes in working with sexually exploited youth.

4.2: The specialized social worker will work with youth to create a comprehensive, trauma-centered individual service plan that reflects each youth’s strengths and needs. The specialized social worker will incorporate, when applicable, the sexual assault and domestic violence services that Hennepin County already has in place, to ensure a comprehensive service plan.

4.3: Hennepin County service delivery for sexually exploited youth will be transparent and tailored to the unique needs of each youth within and across the following domains:

- **Medical:** Sexually exploited youth may access a variety of health care services. All efforts should be made to provide youth with a comprehensive health care assessment, seamless referral pathways to treatment services and continuity of care.

- Each juvenile victim of trafficking identified by law enforcement or child protection shall be referred for a voluntary medical forensic exam by a sexual assault nurse examiner. These specially trained nurses will provide comprehensive exams 24 hours a day, seven days a week, in the emergency department of any hospital in Hennepin County.

- **Mental and chemical health:** Sexually exploited youth will be able to access trauma-informed, evidence-based mental health care and chemical health services. Chemical health services will be combined with mental health services when youth have a dual diagnosis. Inpatient or outpatient treatment will be provided depending on the needs of the youth.

- **Family support and reintegration:** Family support and reintegration will be provided to sexually exploited youth and their families, when appropriate and consistent with the best interests of the sexually exploited youth.

- **Emergency shelter and housing:** Ensure sexually exploited youth have access to safe shelter, supportive housing residential treatment and other appropriate social services that can effectively respond to their behavioral and emotional health needs.

continued
4.4: Hennepin County will identify a No Wrong Door coordinator to:
• Champion the implementation of the Hennepin County No Wrong Door Response Plan
• Ensure that Hennepin County’s policies and practices align with the state No Wrong Door model
• Act as a liaison between systems, departments and jurisdictions to make sure that services are seamlessly delivered, that mandates are being followed and that appropriate parties are working together effectively
• Serve as a regional expert and resource to professionals who may need information to work effectively with this population
• Identify, seek and align funding opportunities
• Identify and address service gaps
• Advise and collaborate with the Minneapolis Police Department’s Juvenile Sex Trafficking Working and Triage Group
• Update and ensure compliance with Hennepin County protocols specific to sexually exploited youth

4.5: Hennepin County will establish protocols to share case data, among law enforcement, Hennepin County Children and Family Services staff, juvenile corrections, health care, community providers, and members of the judiciary.

4.6: The No Wrong Door coordinator will meet with survivors to receive regular input on the implementation of the Hennepin County No Wrong Door plan, with particular attention paid to service delivery protocols and data privacy issues.
A November 2010 study found that on any given weekend night in Minnesota, 45 girls younger than 18 are sold for sex through internet classified websites and escort services.

**Goal: Emergency shelter, supportive housing, and residential treatment**

Ensure that sexually exploited youth have access to safe shelter, housing and residential treatment services.

5.1: Hennepin County will identify emergency shelter opportunities and programs for sexually exploited youth.

5.2: Hennepin County will create a comprehensive supportive housing inventory for the referral of sexually exploited youth. The inventory will include the metro area, greater Minnesota, and out-of-state options.

5.3: Hennepin County will create a comprehensive inventory of residential treatment programs that are available to sexually exploited youth.

5.4: Hennepin County will encourage and support the development and implementation of residential programming appropriate to the needs of sexually exploited youth.

5.5: Hennepin County will conduct regular evaluations of its contracts with emergency shelters, supportive housing and residential treatment programs, to ensure that these programs and housing opportunities appropriately meet the needs of sexually exploited youth.

5.6: Hennepin County will implement best practices for sexually exploited youth who are transitioning out of emergency shelter to home or into longer term housing.

5.7: Funding for shelter and housing for sexually exploited youth who are not residents of Hennepin County will be coordinated with the youth’s county of residence.
At the Public Health Clinic – Red Door Services, Community Health Program Supervisor Mary Jo Meuleners believes that removing barriers to sexual health care can open doors to a better life for young people who are at risk for sexual exploitation.

The clinic offers HIV and STD screening and pregnancy prevention services. Walk-in treatment and a flexible fee schedule for the uninsured make it easier to seek help. Providers at the clinic assume a nonjudgmental approach to patient care.

“By offering a welcoming environment, a young person feels safe to say, ‘I have this boyfriend who makes me do these things,’” Meuleners said. “My belief is when people have positive experiences with their health care providers, where they can disclose and be honest about what’s real for them, that’s an important part of recovery and healing.”
Goal: Prosecution and law enforcement
Aggressively identify, investigate and prosecute human traffickers and purchasers.

6.1: All law enforcement agencies in Hennepin County investigating juvenile sexual exploitation cases will use a victim-partnered approach when conducting trafficking investigations and prosecutions.

The victim partnered approach requires law enforcement to prioritize rescuing, protecting, and providing for the needs of trafficking victims, while ensuring public safety through the investigation and prosecution of the case. Law enforcement agencies shall coordinate, collaborate, and partner with all local, state, and federal law enforcement entities, as well as all local, state, federal, and non-profit agencies involved in providing services and shelter for trafficking victims.

6.2: The Hennepin County Sheriff’s Office will work with local law enforcement agencies to adopt a standardized approach to apprehending purchasers and traffickers.

6.3: Hennepin County will create a human trafficking law enforcement task force to develop and implement protocols for training, enforcement, investigations, and data sharing.

6.4: The sheriff’s office will include staff who specialize in investigating cases involving sexually exploited youth.

6.5: Hennepin County will pursue strategies that address the demand side of sexual exploitation.

6.6: Hennepin County will establish a Victim Justice Fund to help fund victim services, using money received from fines and forfeitures assessed to purchasers and traffickers.
In 4th District Judge Margaret Daly’s juvenile justice courtroom, the challenge has been to see beyond toughness and bravado when girls come in on delinquency charges such as drug or theft, to discern the root causes of their troubles. Often, the root cause is sexual exploitation and harmful relationships, Daly said.

“What we see is that there’s a pattern of the girls coming in with a different presenting problem,” she said. “It’s theft or assault, or their parent is the subject of a child protection case. We soon discover that some of these girls have been subjected to exploitation and have the potential to continue to be exploited.”

Though sexually exploited youth often are girls, most of the programming in the juvenile justice system was created for boys. Daly would like to change that, to offer meaningful therapy for girls, and offer them a chance to succeed.

“We’re trying to do a better job of identifying them early and developing some appropriate programming so we can engage them and avoid a pattern where they’re just running and running and running,” she said.
Implementing the Hennepin County No Wrong Door Plan

The Hennepin County No Wrong Door plan provides recommended action steps to combat juvenile sex trafficking in Hennepin County and to provide victim-centered services. With six goal areas, the plan is a call to action to a cross-departmental and multijurisdictional group of public and community stakeholders. Each will have a role to play in successful implementation.

The following structure is recommended to guide implementation of the plan, to identify and garner necessary resources, and to evaluate progress on an annual basis.

**Executive committee:**
The executive committee will include high-level public and nonprofit sector leaders or their representatives. The committee will meet quarterly, providing guidance and oversight of the No Wrong Door plan. The committee will help set priorities and benchmarks and report progress annually to the public and to elected officials.

**Implementation committee:**
The implementation committee will consist of representatives of county and municipal departments, community-based agencies, and survivors. The committee will meet monthly to develop protocols and procedures and to determine action steps, timelines and benchmarks in order to carry out the recommendations of the No Wrong Door plan. The implementation committee will recommend policies and priorities and present regular progress reports to the executive committee and will be responsible for overseeing plan evaluation.

**Subcommittees:**
Subcommittee members may include members of the implementation committee, other public sector staff, community members, advocates and survivors. Subcommittees or work groups may be established to oversee specific plan recommendations.

**Hennepin County Coordinator:**
The Hennepin County coordinator will guide the implementation committee, oversee overall implementation of the Hennepin County No Wrong Door plan, and report quarterly to the executive committee and to the County Board of Commissioners. The Hennepin County coordinator will serve as a liaison between systems, departments, jurisdictions and community-based agencies to ensure that the plan is being implemented and that partners are working together effectively. The Hennepin County coordinator will work with the implementation committee to identify service gaps and to identify and align funding opportunities.
Appendix A: 2014 County Board Resolution

Hennepin County Board Action Request
14-0084

Item Description:
Seek approval of the Hennepin County No Wrong Door Plan to end the sexual exploitation of youth in Hennepin County.

Resolution:

WHEREAS, the National Center for Missing and Exploited Children conservatively estimates that 100,000 children are sexually exploited (sex trafficked) in the United States annually, with these children first victimized between the ages of 12 to 14; and

WHEREAS, a November 2010 study conducted by the Schapiro Group research firm found that each month in Minnesota at least 213 girls are sold for sex an average of five times per day over the Internet and through escort services, not including juvenile sex trafficking at hotels, on the streets, or through gang activity; and

WHEREAS, the FBI identified Minneapolis as one of 13 cities with a large concentration of juvenile sex trafficking enterprises; and

WHEREAS, in 2011, Minnesota became the fifth state in the country to approve Safe Harbor legislation to combat juvenile sex trafficking and provide services to victims; and

WHEREAS, under the Safe Harbor Law, the state of Minnesota developed a No Wrong Door framework as a model for a victim-centered, multidisciplinary response for juvenile victims of sex trafficking; and

WHEREAS, a Hennepin County cross-departmental work group was established in February 2013 to create a seamless, multi-jurisdictional county-wide response to identify youth being trafficked, find them a safe place to stay, and connect them to appropriate victim-centered and trauma-informed services; and

WHEREAS, the county work group met monthly for one year; conducted a gaps analysis; heard from local and national experts; formed subcommittees on identification and assessment, service delivery, and housing; and developed Guiding Principles and a Hennepin County specific No Wrong Door Plan; and

WHEREAS, the Hennepin County No Wrong Door plan is aligned with the Safe Harbor Law and the state framework and sets six broad goals from prevention to prosecution with recommendations and actions steps in each goal area;

BE IT RESOLVED, that the Hennepin County No Wrong Door Plan is Hennepin County's call to action to protect our children by combatting juvenile sex trafficking in Hennepin County, ensuring that sexually exploited youth who enter our doors will receive the help and services they need and that perpetrators and purchasers will be held accountable; and

BE IT FURTHER RESOLVED, that the Hennepin County Board of Commissioners approves the Hennepin County No Wrong Door Plan and directs County Administration to establish the implementation structure as laid out in the plan to set priorities and benchmarks and make recommendations to the Hennepin County Board of Commissioners for use of the $300,000 earmarked in the 2014 budget for this purpose.
Background/Purpose
The Minnesota Safe Harbor for Sexually Exploited Youth law passed in July 2011. Safe Harbor recognizes that sexually exploited children must be treated as victims and children in need of services rather than juvenile delinquents under the law. The law also directed the departments of public safety, health, and human service to develop a comprehensive victim-centered model to carry out provisions of the law. The Minnesota No Wrong Door model was released in January 2013.

At the present time, approximately 65 youth who have been identified as sexually exploited and in need of services are in Hennepin County systems. Staff estimates that an additional 75-100 sexually exploited youth may be in our system but not yet identified as such. The Human Services and Public Health Department (HSPHD) has included $200,000 in its proposed 2014 budget to provide contracted services to sexually exploited youth. HSPHD has also reallocated two case managers to start targeting services to these youth and is working directly with the Department of Community Corrections and Rehabilitation.

In February 2013, a Hennepin County Sexually Exploited Youth cross-departmental workgroup was formed to develop a comprehensive Hennepin County - specific No Wrong Door response plan. The workgroup is scheduled to finalize the County plan in January of 2014 and refer the plan and its recommendations to the County Board for approval. The Hennepin County No Wrong Door plan is to be aligned with the state plan and will create a seamless continuum of services from prevention to prosecution to ensure that sexually exploited youth who enter County doors receive the help and services they need and that perpetrators and traffickers are held accountable.

BE IT RESOLVED, that the Hennepin County Board of Commissioners will consider the recommendations of the Hennepin County No Wrong Door response plan developed by the cross-departmental workgroup in the first quarter of 2014; and

BE IT FURTHER RESOLVED, that $300,000 be designated in the 2014 Contingency Budget to implement recommendations of the Hennepin County No Wrong Door plan as determined by the County Board.
Appendix C: Understanding sex trafficking

Understanding sex trafficking

Human trafficking “ought to concern every person, because it is a debasement of our common humanity. It ought to concern every community, because it tears at our social fabric. It ought to concern every business, because it distorts markets. It ought to concern every nation, because it endangers public health and fuels violence and organized crime. I’m talking about the injustice, the outrage, of human trafficking, which must be called by its true name— modern slavery.”

– President Barack Obama, September 25, 2012

Human trafficking is the fastest-growing criminal industry and is tied with the illegal arms trade as the second largest criminal industry in the world. It crosses all social, political, racial and state boundaries. (U.S. Department of Health and Human Services).

Sex trafficking is the most common form of human trafficking. Victims of sex trafficking include young children, teenagers, men and women. (United Nations Office on Drug and Crime)

Children involved in this form of commercial sexual exploitation are victims.

A number of different phrases are used to describe the prostitution of people younger than 18, including sex trafficking or the commercial sexual exploitation of children. Whatever the name, the issue is the same: the sale of children for sex. (www.justice.gov)

Defining Sex Trafficking in Minnesota

Sex trafficking is the recruitment, receipt, enticement, harboring, providing or obtaining by any means, another person for the purpose of prostitution. – Minnesota Statutes § 609.322, Solicitation, Inducement and Promotion of Prostitution

The difference between Minnesota law and federal law is that Minnesota does not require proof of force, fraud or coercion and recognizes that a person can never consent to being sexually exploited.

Defining Terms Associated with Sex Trafficking

Sexually exploited youth: A sexually exploited youth is someone younger than 18 who has engaged, agreed to engage, or was forced into sexual conduct in return for a fee, food, clothing or a place to stay. A youth also can be sexually exploited if he or she has engaged in exotic dancing, has been filmed doing sexual acts, traded sex for drugs, or has been found guilty of engaging in prostitution or prostitution-related crimes. *

Safe Harbor Law: In 2011, Minnesota became the fifth State in the Nation to pass a Safe Harbor Law. These laws define sexually exploited youth as victims of abuse, help them find protection and support and grant them immunity from prosecution for prostitution while they are younger than 18.

Early intervention: Prevention measures, taken before youth are sexually exploited, that address root causes, environmental factors and social norms that support and contribute to the perpetuation and existence of sexual exploitation.*

Survivor: A child or an adult who has previously experienced commercial sexual exploitation and is in recovery from its impact and effects.

Trafficker: An individual who is paid or experiences financial, material, or status gain from sexually exploiting another person.
**Purchaser:** An individual who buys sex with money, drugs, shelter, or any other means of exchange. This term replaces the terms, “patron”, “John”, “client” and “trick.” Purchasers can also act as traffickers.

**Victim-Centered Services:** Services guided by the needs, strengths and voices of the victims. Victim-centered services also take into consideration the victims’ wishes, safety and well-being in all matters and practices.*

**Trauma-Informed Care:** Care that works to collaboratively address the neurological, physical, psychosocial and social effects trauma has on commercially sexually exploited youth. Trauma-informed care employs services and approaches that mitigate the effects of trauma that traditional service delivery may exacerbate in victims. *

*No Wrong Door Report-Minnesota Department of Public Safety Office of Justice Programs*
Appendix D: Identification Red Flags  
Identification and Assessment Subcommittee

Vulnerability and risk factors:

<table>
<thead>
<tr>
<th>General red flags</th>
<th>Physical red flags</th>
</tr>
</thead>
<tbody>
<tr>
<td>Runaway</td>
<td>Signs of physical abuse (bruises, black eyes, burns, cuts, broken bones, broken teeth, multiple scars)</td>
</tr>
<tr>
<td>Homeless</td>
<td>Tattoos on the neck and/or lower back that the individual is reluctant to explain – i.e. a man’s name or initials (most often encountered with U.S. citizen victims of sex trafficking)</td>
</tr>
<tr>
<td>History of sexual abuse</td>
<td>Other types of branding – i.e. cutting or burning</td>
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<tr>
<td>History of physical abuse</td>
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<tr>
<td>History of emotional abuse</td>
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<tr>
<td>Domestic violence in the home</td>
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<tr>
<td>Severe parental neglect as a child or teen</td>
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<tr>
<td>Chemically dependent parent or guardian</td>
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Poverty  
Gang influence in peer and family circles  
Being a female gang member  
Chemical use and/or abuse  
Female relatives and/or friends in prostitution  
Few (if any) ties to cultural supports  
Constant exposure to sexual exploitation and violence in the neighborhood

“The following is a list of potential red flags and indicators that can be used in recognizing a potential victim of human trafficking. It is important to note that this is not an exhaustive list. Each indicator taken individually may not imply a trafficking situation and not all victims of human trafficking will exhibit these signs. However, recognition of several indicators may point toward the need for further investigation.” - The Polaris Project

General red flags

Physical red flags

- Signs of physical abuse (bruises, black eyes, burns, cuts, broken bones, broken teeth, multiple scars)
- Tattoos on the neck and/or lower back that the individual is reluctant to explain – i.e. a man’s name or initials (most often encountered with U.S. citizen victims of sex trafficking)
- Other types of branding – i.e. cutting or burning

Emotional red flags

- Excessive concern about displeasing a “partner” or “boyfriend”

Lack of self-determination red flags

- Inability to speak to individual alone, Repeated phone calls from a “boyfriend” or “partner” (Evidence of controlling or dominating relationships)
- Individual claims to be “just visiting” an area but is unable to articulate where he/she is staying or cannot remember addresses; the Individual does not know the city or state of his/her current location

Social or developmental red flags

- Individual is dressed in inappropriate clothing (i.e., lingerie or other attire associated with the sex industry)
- Poor hygiene (individual and their clothing appear unwashed)
- Individuals who are under the age of 18 who express interest in, or may already be in, relationships with adults or older men (10+ years)

Additional medical red flags:

- Evidence of sexual trauma
- Signs of malnourishment or general poor health
- Multiple or frequent sexually transmitted infections (STIs), especially evidence of a lack of treatment for STIs
- Multiple or frequent pregnancies
• Individual reports an excessively large number of sexual partners, especially when it is not age-appropriate (i.e. 15 year old girl reporting dozens of sexual partners)
• Presence of unexplained or unusual scar tissue – potentially from forced abortions
• Evidence that the victim has had to have sexual intercourse while on her monthly cycle – i.e. use of cotton balls or other products which leave residual fibers
• Individual may either be in crisis, or may downplay existing health problems or risks

**Additional school Red Flags:**

- Change in behavior and/or academic performance
- Attendance in multiple schools
- Erratic attendance in schools
- Caregiver seems unaware of attendance problems
- Chronic hunger or tiredness; or lack of appetite
- Depression and/or withdrawal
- Fear or anger responses to people that once were okay
- Lack of records, such as birth certificate, immunization record, incomplete records
- Low-income hotel address on enrollment form
- Poor self image
- Recurrent physical complaints
- Regression
- Running away
- Statements from student, such as, “We’ve been having a hard time lately,” or “It’s a new address, I cannot remember it,” or “My family has moved a lot and I am staying with friends until we find a place.”
- Student who seems confused when asked about that last school attended
- Truancy
- Use of lingo or slang that signifies sexual exploitation—i.e. referring to a boyfriend as “Daddy” or talking about “the life”

**Sources:**

1. Human Trafficking Indicators – U.S. State Department Office to Monitor and Combat Trafficking
2. RED FLAGS AND INDICATORS General Indicators that Can Apply to All Victims of Human Trafficking Polaris Project
3. Specific Indicators that Apply to Sex Trafficking Victims
   Victims of sex trafficking may exhibit a unique set of risk factors and warning signs, including the following: SOURCE: Girls Education and Mentoring Services (GEMS)
5. MIWRC (Minnesota Indian Women’s Resource Center) Teenwise Minnesota Annual Conference Presentation
Appendix E: Best practice shelter recommendations for sexually exploited youth
Shelter and Housing Subcommittee Recommendations

Guiding values

- Trauma-informed care should be infused in every aspect of the shelter including: programming, staffing, design, processes and policies.
- System should align with current child welfare standards of shelter care.
- Shelter should be specifically for sexually exploited youth.
- Shelter should be replicable elsewhere.
- Organizers should focus on creating a shelter model first.

Location/physical plant

- Is situated 20-45 minutes outside a dense urban area, but is close enough so families could visit (example location: Tubman Monastery in Maplewood)
- Is safe, but not a locked facility
- Should be for the region/metro (not just Hennepin County youth)
- Is home-like, non-institutional
- Could possibly be a converted single-family home
- Has clear sightlines, within and outside the facility, so youth are visible to staff at all times
- Cameras provide extra security
- Has fewer than 15 clients, potential campus style of three buildings, each housing eight clients, could accommodate different ages of clients or different types of clients
- Shelter stays are fewer than 90 days*

Programming

- Is specific to sexually exploited youth
- Is trauma-informed and victim-centered
- Is set up for 24-7 crisis intervention; youth can arrive in crisis and receive appropriate assessment and response.
- Families are involved in programming and therapy, with reunification as a priority
- Reunification or placement planning begins at intake
- Includes clear and specific referrals process and assessment (especially for chemical dependence)
- Meets assessment requirements *
- Focuses on healthy relationships
- Creates new social networks
- Includes health and wellness information
- Includes an educational needs assessment, completed after intake and initial assessment. Appropriate educational programming is provided based on the outcome of the needs assessment.
- Includes social activities, such as art and dance
- Meets “enhanced shelter” requirements*
- Includes access to dialectical behavioral therapy (DBT), aggression replacement therapy (ART), motivations interviewing, etc.
- Responds to developmental needs of youth who have a physical and mental health condition (provides habilitative services)
- Planning occurs for successful transition and after care

Staffing

- Line staff are highly trained, and are specialized in their response to trauma and gender-specific needs
- A common best practice shelter and services philosophy will be adopted and followed by all staff. This recognized best practice philosophy will be rooted in trauma-informed, victim-centered care and services for sexually exploited youth
- Covers 24 hours a day, seven days a week and should be staffed for capacity at all times
- Is flexible to cover a variety of needs, for example, a middle of the night response
- Adheres to appropriate staffing ratios
- Have bona fide occupational qualifications, reflect gender of residents, due to nature of the work with people who have been sexually exploited
- Includes nurses onsite, who could do initial health and medical assessments. Explore the ability of Sexual Assault Nurse Examiners (SANE) providing services onsite
- Reflects need for transportation to appointments
- Includes security personnel as appropriate, using domestic violence shelters as a model
- Reflects diversity of shelter population
- Are culturally competent

* Minnesota Administrative Rules, Chapter 2960, Licensure and Certification of Programs for Children includes standards in shelter care. If clients are part of the child protection system, the shelter must reflect these requirements.
Appendix F: Hennepin County Medical Center Juvenile medical forensic trafficking exam model

HCMC Juvenile Medical Forensic Trafficking Exam Model

Guiding Principle:
“In some countries, the health and medicolegal components of service are provided at different times, in different places, and by different people. Such a process is inefficient, unnecessary, and, most importantly, places unwarranted burden on the child who has experienced sexual violence and exploitation. Ideally, the health care and medicolegal processes are provided simultaneously, at the same time, in the same location, and, preferably, by the same health care provider” (WHO 2003).

History:
HCMC Sexual Assault Resource Service is a group of sexual assault nurse examiners who are skilled practitioners in the medical forensic exam of patients who have experienced a sexual assault. This service is available on a 24-hour basis in all of the Hennepin County hospitals where we respond to adult and adolescent victims, and to pediatric victims at Hennepin County Medical Center.

Position Statement:
In order to provide juvenile victims of human trafficking with the immediate medical and forensic care they need, Hennepin County Medical Center Sexual Assault Resource Service has developed a juvenile trafficking exam that follows the same response model as the sexual assault exam. This exam is for patients who are younger than 18, and should be performed at Hennepin County Medical Center in the Emergency Department. This trafficking exam will provide the first medical forensic exam for these patients and will serve as an entry point for multidisciplinary team members including law enforcement, attorneys, child protection, advocates, and trafficking service providers.

Juveniles who have been identified as sexually exploited need to be offered immediate, trauma-sensitive and efficient medical-forensic care which includes:
- STD testing and treatment
- Pregnancy prevention
- Documentation relating to medical history, history of exploitation, photographs and injuries
- Care of injuries and/or infections
- Timely evidence collection
- Referrals to other hospital providers/units
- Discharge plan, including culturally specific community connections for recovery, case management and follow-up medical care
  * Consent is an important piece of trauma recovery, and must always be obtained by the patient for each component of the medical-forensic exam

This initial medical forensic trafficking exam will be performed for all victims, regardless of the number of hours following the last sexual assault or contact, even when past the timeframe of evidence collection. The complexity of needs that trafficked juveniles have demands an immediate and serious response by professionals who are available at any time of day or night at a facility that has the capacity to care for emerging or unexpected medical issues. This first exam provides the opportunity to evaluate and provide care for the immediate medical and psychosocial needs of the victim.

Patients should be referred to Corner House under these circumstances:
- When the patient is younger than 12 (or if female, is premenarchal)
- When the adolescent is not yet able to be forthcoming about the history of exploitation
- For a future medical visit related to health recovery
  *In these cases, care will be taken by the Sexual Assault Resource Service nurse to avoid questions related to the history of exploitation so the forensic interview can remain intact.
  *Forensic evidence collection and the initial medical exam can be performed by the SANE, then the patient should be referred to Corner House for a forensic interview coordinated by law enforcement.
Juvenile (<18) Victim of Trafficking
Arrives with Law Enforcement for Medical/Forensic Exam

**HCMC Emergency Department Triage**

Page a SANE nurse for the exam at 612-873-5832
Indicate patient age to operator.

- For patients ≤12 years old, a SANE-P will arrive
- For patients 13-17 years, a SANE-A is called.

Limited number of staff to be involved with patient care

**SANE Nurse**

**Acute Exam**
≤ 168 hours (7 days)

- Consent
- Assessment of immediate medical and psychological needs
- Basic medical assessment
- Physical and genital assessment
- Injury assessment/treatment
- Forensic evidence collection
- Documentation (including photos with any related injuries at any stage of healing, with patient consent)
- Urine NAAT for GC/Chlamydia
- Other testing PRN
- HIV PEP offered, when appropriate

For pubertal patients:
- Provide STI prophylaxis
- Offer emergency contraception (Plan B) to female patients

**Follow-Up Care For ALL PATIENTS**

- Offer voluntary 24-hour HCMC placement when needed
- Provide culturally specific referral links
- Provide option of phone interpreter PRN
- Follow-up medical care

**Non-Acute Exam**
> 168 hours (7 days)

- Consent
- Assessment of immediate medical and psychological needs
- Basic medical assessment
- Physical and genital assessment
- Injury assessment/treatment
- Forensic evidence collection
- Documentation (including photos with any related injuries at any stage of healing, with patient consent)
- Urine NAAT for GC/Chlamydia
- Other Testing PRN
- Rapid HIV PRN

For pubertal patients:
- Offer pregnancy testing to female patients

**≤ 12 year old patients**
- In-house consultations: SW/Child Maltreatment Team
- Report to CPS/LE if not already done

**> 12 year old patients**
- In-house consultations: SW
- Report to CPS/LE if not already done