

Human Trafficking of Children Protocol



**Michigan Department of
Health and Human Services**

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I. Introduction

Human trafficking is a form of modern-day slavery in which people profit from the control and exploitation of others. Victims of human trafficking can include children and adults. They can be U.S. citizens or foreign nationals, male or female. The victim's relationship to the trafficker may be that of a family member, intimate partner, acquaintance or stranger. Victims are frequently exploited by traffickers who prey on their hopes of improving their lives or the lives of their families. While trafficking generally includes the manipulation of a victim into the commission of commercial sex or labor acts, the use of force, fraud or coercion is not always requisite to an individual's status as a trafficking victim. Because the inherent vulnerabilities of children make them easier to exploit, Michigan law now offers them greater protections, effectively shielding them from prosecution for acts they committed while in the care of their traffickers. In January 2015, several changes in the law went into effect that impact how law enforcement, the court and the Michigan Department of Health and Human Services (MDHHS) respond to child trafficking cases. Perhaps most importantly, any child who is sexually exploited for commercial purposes is now recognized as a victim of human trafficking, regardless of his or her ability to prove the existence of force, fraud or coercion. By creating a presumption of coercion in sex-trafficking cases involving children, Michigan law shields these children from prosecution for committing commercial sex acts.

In response to these changes, MDHHS and other stakeholders developed the revised protocol to guide child welfare and other professionals in identifying and assisting children who may be victims of human trafficking. Michigan laws call for a specialized, victim-centered approach that focuses on the rehabilitation rather than the criminalization of human trafficking victims. This protocol was developed to create a system for meeting the immediate physical and psychological needs of the victims and to ensure that, when responding to victims of human trafficking, child welfare professionals are focused on connecting victims with the services they need to escape enslavement and recover from exploitation, rather than the prosecution of criminal activity. For purposes of this guide, it is important to note that a child may be the victim of human trafficking even if the trafficker is not charged and/or prosecuted.

In sum, this document provides best practices for determining whether a child is a victim of human trafficking and how to move forward once a child has been identified as a victim. The goals of the protocol are to enable child welfare professionals to meet the immediate safety needs of human

trafficking victims; their long-term needs for stabilization; and the successful return to a normal home setting. Whenever possible, these needs should be met through the use of a coordinated, investigative team approach that employs Child Advocacy Centers (CAC) and community services to minimize trauma to the victim while providing continued protection and the delivery of specialized services. A child manipulated into committing criminal activities should not lose his or her status as both a child and a victim, nor his or her need for special protection. MDHHS intends for this protocol to promote a better understanding of the unique nature and challenges of cases involving child victims of human trafficking.

II. Michigan Law Related to Child Trafficking

A. *Child Sex Trafficking*

Under Michigan law, any child who has been recruited, enticed, harbored, transported, provided, or obtained for commercial sexual activity, a sexually-explicit performance or the production of pornography, is a victim of sex trafficking.¹ Although traffickers often use force, threats, violence, false promises, manipulation, lies and other physical or psychological methods to control their victims, a child need only be sexually exploited to be considered a victim of sex trafficking in Michigan. For children 16 years of age and older who are developmentally capable of consenting to sex the presumption is rebuttable, meaning that it can be overcome if the prosecution can prove beyond a reasonable doubt that the child was not forced or coerced into committing the offense.² Further, the presumption may be lost if the child refuses or fails to substantially comply with court-ordered services.³ In all cases involving children under the age of 16, the presumption is absolute and the child's sexual conduct may not be criminalized.

Examples of sexual exploitation include, but are not limited to, prostitution, performance of sexual acts on film or for a website, the psychological influence of children through romantic relationships with their trafficker, or survival sex. Survival sex is defined as trading sex for money or shelter. The practice is common among teenagers and young adults who have few other viable means for meeting their basic food, clothing and shelter needs. Thus, a child engaging in sexual acts may or may not be held in physical captivity. In fact, the likelihood of

¹ MCL 750.451(6).

² *Id.*

³ *Id.*

psychological captivity is much higher. For instance, a child may have been told by his or her trafficker that if he or she tells authorities about the trafficker's control, the trafficker will tell their family and friends of their sexual exploits. In other cases, a trafficker may cause a victim to believe that their trafficker is the only person who cares for him or her. Often the very characteristics that make a child vulnerable to trafficking have been exploited by the child's trafficker. Recognizing these children as victims is essential to the effectiveness of the new legal framework. Therefore, upon finding a child engaged in any commercial, sexual activity, law enforcement must immediately make a Children's Protective Services (CPS) complaint to MDHHS through the statewide centralized intake system.⁴ Upon receipt, MDHHS must begin investigating the complaint as soon as possible, but within 24 hours.⁵ The CPS investigation must include a determination as to whether the child is in danger of substantial physical or psychological harm and requires protective intervention, including the initiation of child protective or dependency proceedings. (See explanation of dependency in Section *II.C. Basis for Family Court Jurisdiction*).⁶

B. Child Labor Trafficking

Under Michigan law, any child who has been recruited, enticed, harbored, transported, provided or obtained for forced labor is a victim of labor trafficking.⁷ Labor trafficking can include, but is not limited to, domestic servitude, forced labor in restaurants or salons, forced agricultural labor or debt bondage.⁸ MDHHS' response to child labor trafficking may differ from its response to child sex trafficking. Under federal law, labor trafficking victims must provide proof that force, fraud or coercion existed while they were in the care of their trafficker; regardless if the victims are children or adults. Michigan law included a provision that allows the identification of child victims of labor trafficking, regardless of the presence of force, fraud or coercion, keeping these children in line with sex trafficking victims. Child labor traffickers sometimes utilize methods of child sex traffickers as a way to control victims. Thus, sexual assault is a possible, coercive tactic used by traffickers in child labor trafficking. Child welfare professionals must use caution when interviewing victims of labor trafficking to ensure they do

⁴ MCL 750.451(7).

⁵ MCL 750.451(8).

⁶ MCL 750.451(8).

⁷ MCL 750.462e(b).

⁸ MCL 750.462a(d). Debt bondage is essentially the victim working to pay off an impossibly increasing debt.

not miss potential signs of this secondary source of trauma.

C. Basis for Family Court Jurisdiction

Recognizing that a parent or legal guardian may or may not be implicated in the child's victimization, the Probate Code has been amended to provide an alternate path for the Circuit Court Family Division to take jurisdiction of child trafficking victims if determined necessary to keep the child safe. If the child's parents or legal guardians are not the trafficker and the parents or legal guardians are capable and willing to care for the child and keep him or her safe, then initiating court involvement is not necessary. Alternatively, if the child's parent or legal guardian is involved in the child's trafficking, or if the trafficking occurred due to the child's home or environment being unfit as a result of neglect, cruelty, drunkenness, criminality or depravity on the part of a parent, legal guardian, non-parent adult or other custodian, the court may assume jurisdiction under the traditional abuse and neglect context.

1. Dependency Jurisdiction

Dependency jurisdiction permits the court to assume jurisdiction when a child, up to the age of 18, is found to be dependent and in danger of physical or psychological harm.⁹ A child may be found to be dependent when any of the following occurs:

- The child is homeless or not domiciled with a parent or legal guardian.
- The child has repeatedly run away from home and is beyond the control of a parent or legal guardian.
- The child is alleged to have committed a commercial sexual activity as that term is defined in section 462a of the Michigan penal code, 1931 PA 328, MCL 750.462a or a delinquent act that is the result of force, fraud, coercion, or manipulation exercised by a parent or other adult.
- The child's custodial parent or legal guardian has died or has become permanently incapacitated and no appropriate parent or legal guardian is willing and able to provide care for the child.

Simply stated, this allows the court to take jurisdiction over a child without holding either the child or a "responsible adult" culpable. Thus, a dependency petition will have no respondent. It should

⁹ MCL 712A.2(b)(3).

be noted that not all cases involving human trafficking should result in dependency jurisdiction. Child welfare staff and law enforcement must first investigate the child's parent, guardian, or legal custodian for their involvement in the child's trafficking. If investigators determine that the parent, guardian, or legal custodian was not involved in the child being trafficked, investigators must then address their willingness and capability to provide a safe environment for the child. If the parent, guardian, or legal custodian is capable and willing to safely care for the child, dependency jurisdiction is not necessary. If the child's parent, guardian, or legal custodian is unable or unwilling to provide a safe environment for the child, CPS, law enforcement and family court must determine if dependency jurisdiction is the best legal option.

In cases of sex trafficking, dependency will always be based on the fact that the child is alleged to have engaged in commercial sexual activity. In labor trafficking cases, dependency will be based on a labor act that is the result of force, fraud, coercion or manipulation exercised by the parent or other adult.¹⁰ If jurisdiction is based on dependency alone without any separate, statutory grounds, the investigation should not include a child's parent, guardian or legal custodian. Likewise, a child's parent, guardian or legal custodian should not be placed on the Central Registry in the absence of circumstances giving rise to traditional abuse or neglect jurisdiction.

2. Traditional Abuse and Neglect Jurisdiction

In addition to dependency jurisdiction, traditional abuse and neglect jurisdiction may be appropriate if the child's home or environment is unfit as a result of neglect, cruelty, drunkenness, criminality or depravity on the part of a parent, legal guardian, non-parent adult, or legal custodian.¹¹ Because these circumstances may apply to a number of child trafficking cases, it is possible for jurisdictional grounds to be based on traditional abuse or neglect even when a parent or guardian is not involved in the actual trafficking. While labor trafficking cases tend to involve parents more often than sex trafficking cases, jurisdictional grounds based on abuse or neglect can exist if the trafficker meets the definition of a non-parent adult. A non-parent adult is a person who is 18 years of age or older who is neither a parent nor relative, but who has both regular and substantial contact with the child and a close personal relationship with the parent or someone else who is responsible for the child's welfare.¹² CPS should pursue court

¹⁰ MCL 712A.2(b)(3)(C).

¹¹ MCL 712A.2(b)(2).

¹² MCL 712A.13a(1)(h).

jurisdiction based on dependency grounds if the facts revealed during the investigation warrant it, but if the trafficking involved a person responsible for the child’s health or welfare, then abuse or neglect would most likely be the appropriate basis for seeking court jurisdiction. The investigation should include all perpetrators of abuse or neglect as well as parents or legal guardians who allegedly failed to adequately protect the child. Note that a child’s trafficker may only be a “respondent” to a petition filed in the family division of circuit court if the trafficker is the child’s parent, legal guardian, legal custodian or non-parent adult.¹³

D. Special Considerations for Missing Children under the Preventing Sex Trafficking and Strengthening Families Act

Children in the care and custody of the state who go Absent Without Legal Placement (AWOLP) from their court-ordered placements present a high risk of becoming victims of human trafficking. The Preventing Sex Trafficking and Strengthening Families Act requires all states to develop and implement plans to expeditiously locate any child missing from foster care; determine the primary factors that contributed to the child’s running away or being absent from foster care; and determine the child’s experiences while absent from foster care, including screening whether the child may have been a victim of sex trafficking. Immediately after receiving information on a missing or abducted child, the supervising agency must report to law enforcement authorities and the National Center for Missing and Exploited Children. The foster care worker must have a conversation with a child who has been located or returned from AWOLP status to determine the primary factors that contributed to the child’s running away and to learn ways for the child’s placement to respond to those factors. The worker must also inquire about the child’s activities while they were AWOLP. The Conversation Guide on Return from AWOLP ([DHS-5333](#)) was developed to assist workers in conducting these conversations. If there is suspicion that the child has been trafficked, the foster care worker must immediately make a complaint to Centralized Intake at 855-444-3911. CPS must begin investigating the complaint as soon as possible, but not more than 24 hours thereafter. Refer to MDHHS policy manual [FOM 722-03A](#) for more complete guidance.

III. Identifying Victims of Human Trafficking

Following an intervention that separates a victim from his or her trafficker, it is common for the

¹³ MCR 3.903(C)(10).

trafficker to attempt to find his or her victim and to regain control. This gives rise to a certain reluctance on the part of victims to self-identify, making it difficult to determine whether a person is a victim of human trafficking. While the self-identifying victim generally recognizes him or herself as a victim and may therefore be more cooperative, the non-self-identifying victim is less likely to cooperate during the rescue, assessment, prosecution or any other procedural step. This may be due to the influence and manipulation of the trafficker, but also because the child may not see him or herself as a victim. Many potential indicators may suggest that a child has been trafficked, and such indicators may or may not be immediately apparent. This section provides a non-exhaustive list of human trafficking indicators aimed at assisting first responders, investigators and service providers in the identification of human trafficking victims. It is helpful for these professionals to recognize certain populations are especially vulnerable to trafficking, such as unaccompanied minors, runaway and homeless youth, victims of abuse and neglect, refugees fleeing social or political conflict or oppression, and impoverished groups and individuals.

A. *Sex Trafficking Indicators*

1. Environmental Indicators

- The child's living space contains tinted windows, buzz-in entrances, video cameras, barred or locked windows, and/or other external security devices.
- The child's living space has large amounts of money, multiple condoms or timers that may be used to time sexual services, and/or advertisements for sexual services.
- The heads of the child's household are unrelated adults, and/or the child lives with other unrelated children.
- The child does not live with his or her parent(s), or know the whereabouts of his or her parent(s).

2. Physical Indicators

- The child has tattoos around the neck and wrist (which traffickers are known to use to establish control or ownership over victims).
- The child is not in control of his or her own identification documents.
- The child is found in possession of a hotel key.

3. Medical Indicators

- The child has a sexually transmitted disease or physical injuries related to sexual activity, such as pelvic pain and/or a urinary tract infection.
- The child shows signs of physical and/or sexual abuse, including physical restraint or confinement.
- The child lacks an adequate medical history.

4. Other Indicators

- The child works but does not indicate where he or she works.
- The child is not enrolled in school, or has a history of truancy.
- The child has a much older boyfriend or girlfriend, friends and/or has adults whom the child identifies as friends.
- The child does not know his or her location.

B. Labor Trafficking Indicators

1. Environmental Indicators

- High security measures exist in the work and/or living locations, such as opaque windows, boarded up windows, bars on windows, barbed wire or security cameras.
- The child is not free to come and go from the workplace.
- The child has few or no personal possessions.
- The child claims to be just visiting and is unable to identify where he or she is staying.
- The child lacks knowledge of his or her whereabouts and/or does not know what city he or she is in.

2. Physical Indicators

- The child is not in control of his or her own identification documents.

3. Medical Indicators

- The child lacks healthcare and/or an adequate medical history.
- The child appears malnourished.

- The child shows signs of physical abuse, including physical restraint or confinement.
- The child appears fearful, anxious, depressed, submissive or paranoid.

4. Other Indicators

- The child indicates that he or she owes a large debt.
- The child indicates that he or she is not allowed breaks and/or experiences unusual restrictions at work.
- The child indicates that he or she works excessively long and/or unusual hours.
- The child exhibits unusually fearful or anxious behavior when discussions mention law enforcement.
- The child appears to have lost his or her sense of time.

C. The Human Trafficking Screening Tools

The MDHHS Human Trafficking Screening Tools, Ongoing Cases ([MDHHS-5523](#)) and Closed Cases ([MDHHS-5524](#)), were created to be used by child welfare professionals who encounter potential victims of human trafficking. The tools are used to assist with screening potential victims to ensure they are provided the services and support they need, as well as to generate evidence against traffickers.¹⁴ The tools may be administered by a child welfare professional or MDHHS contract employee. A forensic interview is not a prerequisite for use of the MDHHS-5523. For example, the MDHHS-5523 may be administered when a forensic interview is not required, such as after a child in foster care displays new signs that he or she may have been victimized. It should also be administered as soon as possible whenever a child welfare professional or MDHHS contract provider recognizes one or more of the above trafficking indicators or otherwise suspects that a child is involved in human trafficking, even if the case is well underway.

There are also normed screening tools available from the Vera Institute of Justice (Vera Tool) and Covenant House that may be used to screen for human trafficking. Both can be used in place of or in conjunction with the MDHHS screening tools if the child welfare professional

¹⁴ [SRM 300](#).

chooses. The Vera Tool is accessible [at this site](#), and the [Covenant House tool](#) is also available.

D. Youth with Closed Foster Care Cases

The MDHHS-5524 was created for youth with a closed foster care case seeking services from a local MDHHS office or MDHHS contract provider. Child welfare professionals and/or MDHHS contract providers must use the MDHHS-5524 when interviewing these youth to screen for potential human trafficking indicators. These youth may also be victims or vulnerable of being victims of human trafficking and should be advised of available resources and/or supportive services. When any individual age 18 or older is believed to be at risk of harm of abuse, neglect, or exploitation due to human trafficking, and there is a reasonable belief that the person is vulnerable and in need of protective services, the worker must make an Adult Protective Services (APS) complaint to Centralized Intake at 855-444-3911.

IV. CPS Investigation and Coordination with Law Enforcement

CPS and law enforcement are required to work jointly to investigate human trafficking cases. In coordinating an investigation with law enforcement, CPS should be aware of the statutory presumption that any child who is under 18 years of age who is found engaging in a commercial sexual activity was coerced into that activity by another person engaged in human trafficking, and as a result the child shall not be the subject of a criminal prosecution. For a child victim 16 years of age and older, child welfare professionals must work to ensure the victim is substantially complying with all court-ordered services to avoid the possibility of the child being subjected to criminal prosecution. Due to the possibility of dependency jurisdiction, CPS should pursue the investigation as they would in response to any other complaint of suspected child abuse or neglect (see Section II. Michigan Law Related to Child Trafficking).

All child welfare professionals must file a CPS complaint when human trafficking of a child is suspected, even if the child is already involved in foster care. The purpose of CPS investigating the new allegation is to attempt to locate a person responsible and to place the perpetrator on Central Registry, not to create a new dependency petition. For cases involving the Federal Bureau of Investigation (FBI), case coordination must occur with the FBI victim specialist assigned to the complaint county. [Victim specialists' contact information](#) is available.

A. *Interviewing the Child*

1. Determining When to Use a Screening Tool

When investigating an allegation of sexual abuse or human trafficking, a forensic interview of the child must be performed. The MDHHS-5523, Covenant House, or the Vera Tool may be used to screen for human trafficking at any point during the case. While CPS workers can consider using a screening tool whenever human trafficking is suspected, neither is a substitute for a forensic interview.¹⁵ If the child is already identified as a victim of human trafficking, the CPS worker need not use a screening tool. Foster care workers must consult with supervision to assess whether to use the MDHHS-5523 if they suspect the child is a victim of human trafficking. Foster care workers must also screen for human trafficking rather than rely solely on the child's self-identifying statements.

2. Conducting the Interview

Law enforcement and CPS should coordinate victim interviews according to MCL 722.628(4). Rapport and trust are essential components of the forensic interview of a victim. Victims may not tell the truth because they may have been told by their trafficker that law enforcement will punish them and/or not help them. In fact, they may have been punished in the past by the judicial system. Victims may repeatedly tell lies or a rehearsed story. Victims often fear repercussions from their trafficker, and may also fear being taken from their trafficker. It may take several interviews to establish trust with a victim. It may take time to determine if a child has been trafficked because of the victim's potential distrust of authority figures, and/or his or her capacity to disclose. Safety is paramount—a victim of human trafficking will not disclose if he or she does not feel safe. Throughout the investigation, the trafficker must not be given access to the victim. Victims are often embarrassed or ashamed of what they have done and the abuse they have endured. Interviewers must be careful to use language that does not blame the victims. Victims of sex trafficking should not be referred to as prostitutes. The child's cultural norms may make disclosure of abuse very difficult and the interviewer should be sensitive to cultural or religious differences. Interviewers should be aware that the child's parent or caregiver may be the child's trafficker, and that the trafficker may deny that he or she is the child's parent or caregiver. If immigration is an issue, interviewers should not ask about it at the

¹⁵ All victim interviews must comply with [DHS-PUB-779](#), "Forensic Interviewing Protocol (Third Edition)".

beginning of the interview, and should proceed cautiously in this area. An interpreter should be used if the victim does not speak fluent English. Interpreters should be independent, qualified and reliable. The interpreter should have no connection with the trafficker, but the interpreter should be familiar with the dynamics of trafficking. Children, adults, neighbors, or friends present at the scene should not be asked to interpret.

B. Taking a Child into Protective Custody

With respect to taking a child into protective custody, CPS workers should treat human trafficking victims as they would any other abuse and neglect victim as outlined in [DHS-PUB-794](#), “A Model Child Abuse and Neglect Protocol with an Approach Using a Coordinated Investigative Team, pages 18-19.”

C. Appropriate Placement and Treatment

With respect to placing a child into appropriate placement and treatment options, CPS workers must follow placement selection criteria for human trafficking victims as they would any other abuse and neglect victim as outlined in MDHHS policy manual [FOM 722-03](#). Strict confidentiality is necessary to prevent the trafficker from obtaining information on the victim’s whereabouts. Child welfare professionals and law enforcement agents who are working with the child must adhere to laws governing confidentiality and privilege and conduct background checks on family members to whom they provide information about the victim. All necessary measures, such as minimizing the number of people directly in contact with the victim, should be taken to protect the privacy and identity of victims to ensure their safety and security.

The needs of survivors of trafficking are typically very complex and often require a multi-disciplinary approach to address severe trauma, medical needs, legal issues, safety concerns, shelter and other basic daily needs, and financial hardship. All victims must be placed in a safe environment and be offered specialized treatment and services. These may include: responding to a child’s emotional and behavioral instability (addressing trauma through intensive group and individual therapy); family therapy; and transitional living services that lead the victim to independence. The victim’s medical issues must be assessed and treated as needed. The victim’s physical and mental stability must be maintained throughout placement and treatment. Efforts should be taken to ensure that victims of child sex trafficking are placed in specialized facilities or placements that cater to victims of human trafficking, sexual abuse or domestic

violence. Child welfare professionals may refer to the MDHHS website at www.michigan.gov/humantrafficking and/or the Attorney General's website at www.michigan.gov/ag/humantrafficking for service options and legislative updates.

D. Foreign Nationals

A foreign national is a foreign-born individual who is residing in the United States regardless of immigration status. In many instances, child victims of human trafficking may be foreign nationals. Victims of human trafficking who are foreign nationals are especially vulnerable and may pose unique challenges for a number of reasons, including language barriers, lack of legal identification, fraudulent documents, social isolation and/or fear of deportation. Most are unaware that there is assistance available – laws that help prosecute traffickers, immigration services through MDHHS, and federal immigration laws offering relief to certain foreign nationals who are victims of trafficking. Legal representation, with regards to their immigration case, should be obtained as soon as possible after identification by the assigned foster care worker. Failure to consult with an attorney in a timely manner could result in the victim's deportation. In addition, victims who are foreign nationals face irreparable harm to their chances for future immigration relief if the victims are charged with a criminal offense or their applications for social services and other benefits are incorrectly filed. Reference MDHHS policy manual [FOM 722-06K](#) for more detailed information.

Foreign nationals and Unaccompanied Refugee Minors (URM) may need to be federally recognized as victims of human trafficking to be eligible for public services. When a foreign national is taken into protective custody, or placed with MDHHS for care and supervision, Article 36 of the Vienna Convention on Consular Relations requires the appropriate consulate receive notification within 48 hours. Child welfare professionals are required to complete and submit the DHS-914, Notice to Foreign Consul/Embassy, to the appropriate consulate. A listing of foreign consular offices in the United States may be found at www.usembassy.gov.

Child welfare professionals must verify if the victim has a verified humanitarian status as outlined in MDHHS policy manual FOM 722-06K. If the victim meets the qualifications for humanitarian status, child welfare professionals must contact the MDHHS Office of Refugee Services at 517-241-7820 to request a determination for reclassification of the child as a URM.

The Office of Refugee Services will review the request and if appropriate, initiate the request to the Director of the U.S. Office of Refugee Resettlement for reclassification.

E. American Indian/Alaska Native Children

American Indian/Alaska Native children are subject to the Indian Child Welfare Act¹⁶ (ICWA) and Michigan Indian Family Preservation Act¹⁷ (MIFPA) which establish jurisdiction for state or tribal courts in child welfare matters. Native American Affairs policy and case management resources for the State of Michigan may be found on the Native American Affairs website at www.michigan.gov/americanindians. These resources address notice under ICWA and MIFPA, which is required for all American Indian/Alaska Native child custody proceedings in order to assist these families with culturally appropriate services and placement.

F. Addressing the Victim's Medical and Mental Health Needs

In instances involving sex trafficking or labor trafficking involving sexual assault, investigators must follow MDHHS policy manual [PSM 713-04](#) on medical examinations for sexual abuse allegations, including obtaining a specialized examination. If possible, the medical examination should be conducted at a CAC. If a medical specialist is not immediately available or if an examination at a CAC is not an option, the child may be examined in an emergency room; however, this should only occur after all attempts to find a medical specialist to perform the examination have been unsuccessful.

1. Medical Evaluation

A comprehensive medical examination should be completed by a medical practitioner who specializes in medical examinations of child sexual abuse or a sexual assault nurse examiner. This examination must be performed within 30 days of the start of any investigation; however, in the case of recent sexual assault, the examination should be completed sooner. If the sexual assault occurred within the last 120 hours, the child should be offered a medical exam with forensic evidence collection as soon as possible. Medical exams require parental consent or a court order. If the victim was sexually assaulted within the last 72 hours, a consultation with an HIV specialist should occur to determine if HIV Post-Exposure Prophylaxis (PEP) should be offered

¹⁶ 25 USC 1901 *et seq.*

¹⁷ MCL 712B.1-41.

to the victim as part of the examination. PEP is a way to prevent HIV infection after a possible recent exposure. It involves taking HIV medications within three days after a single high-risk event to stop HIV from making copies of itself and spreading throughout the body. Since this treatment is time sensitive and considered an emergency treatment, it does not require parental consent or a court order.

The comprehensive medical evaluation should include a full physical examination including an anogenital examination, testing for sexually transmitted infections, and behavioral/mental health/trauma screening, which may reveal evidence of post-traumatic stress, including memory impairment, anxiety, depression, addictions, panic attacks, or phobias. For the medical practitioner to effectively examine, evaluate and provide treatment (if needed), the worker must:

- Clearly state why a medical evaluation is being requested, specifically indicating that the child is a suspected victim of human trafficking.
- Provide reasons for suspicion of human trafficking.
- Provide all known health/medical information regarding the child.
- Share pertinent case information, including previous case history, complaints, investigations, and findings.

2. Psychological Assessment or Evaluation

When a child is alleged to be a victim of human trafficking, a mental health assessment or psychological evaluation is required. CPS is responsible for the cost of this assessment or evaluation by use of the DHS-93. In addition to this evaluation, MDHHS shall arrange for counseling services for the child, in addition to reunification, adoption or other services needed.

V. Conclusion

A number of factors unique to human trafficking complicate determinations that a child has been trafficked. Self-identification is rare for several reasons. Victims may harbor extreme distrust of and animosity toward authority figures. They may form trauma bonds with their traffickers, resulting in the victim's desire to protect the trafficker. Many victims are well-practiced, and therefore skilled, at concealing their situations. They may use false identification documents or may not be in control of their own documents. If they are foreign nationals, they

may fear deportation. Others may fear harm or retribution. Because some victims must “collaborate” to survive, it can at times be difficult to distinguish victims from traffickers. Finally, victims with developmental disorders may have limited means of communication, physical mobility or a diminished ability to understand the dynamics of a dangerous situation. While any or a combination of these factors can make identification more difficult, simply being aware of them can make them less confounding.

Because children are especially vulnerable to human trafficking, this document seeks to provide specific guidance to those who encounter child victims. Child trafficking demands a specialized and coordinated response by child welfare professionals and law enforcement to ensure the safety of the victim and to pursue child protection proceedings when needed. Child victims must be protected, physically and psychologically from their traffickers, and must be offered placements and services specifically designed to address the trauma they have experienced.

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