



# NATIONAL SURVEY OF RESIDENTIAL PROGRAMS FOR VICTIMS OF SEX TRAFFICKING



# National survey of residential programs for victims of sex trafficking

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# Table of contents

Key findings.....	i
Introduction .....	1
Literature review.....	2
Methodology.....	10
Findings.....	11
Conclusion .....	20
References.....	21
Appendix A: Survey form for residential programs for trafficking victims.....	25
Appendix B: List of residential programs for trafficking victims.....	28

# Key findings

Through a survey, researchers sought to learn about residential programs for trafficking victims in the U.S. The purpose was to share available programs and services with other jurisdictions to better serve victims of trafficking. A listing of programs identified through the survey is provided in *Appendix B*.

The following are key findings about residential programs for victims of sex trafficking in the U.S.

- Nationally, a total of 33 residential programs were found to be currently operational and exclusive to trafficking victims with a total of 682 beds, two in Illinois.
- Residential programs were open in 16 states and the District of Columbia; California had the most with nine residential programs offering 371 beds for victims.
- The Western region of the country had the most residential programs for victims with 59 percent of the total beds available there. In California, there were ten residential programs with approximately 54 percent of all beds for trafficking victims.
- Twenty-eight states had no residential programs for victims of sex trafficking and no plans to open any.
- Most of the programs accepted both domestic and international victims (64 percent) and 36 percent were exclusive to victims of domestic sex trafficking.
- Most available beds in residential programs (75 percent) were designated for minor victims of sex trafficking.
- Of the surveyed programs, there were fewer than 28 beds for male victims of sex trafficking.
- All but one of the residential programs indicated they offer residential services 24-hours a day, seven days a week.
- Twenty-eight of the 37 operational facilities have aftercare services for the victims leaving the residential program.
- Many agencies indicated that they would be opening a residential program—a total of 27 programs offering 354 more beds.

# Introduction

Domestic sex trafficking is a violation of human rights and considered to be a form of modern day slavery. It is recognized as a growing issue in U.S.; however, the extent of trafficking remains unknown. Traffickers and victims often avoid detection since much of the criminal activity is hidden and victims rarely seek help or report their situation to police. Furthermore, what constitutes trafficking is often misunderstood. Trafficking victims do not have to be foreign-born or transported across borders; in fact, many are born in the United States and are never moved from their recruitment city. Victims of trafficking often suffer from serious physical and psychological problems. Historically, there has been a limited number of shelters and services available and fewer with the capacity to appropriately treat the severity of their problems. However, there has been a recent trend around the country to open residential facilities designed to better serve this population.

Residential programs around the country were surveyed in order to learn how many residential programs for victims of sex trafficking were in operation. Thirty-three residential programs in the United States were found that offer services to trafficking victims, two in Illinois.

# Literature review

Sex trafficking is a global problem that affects nearly every country (Europol, 2005; Miko, 2000). Sex trafficking is the third most profitable crime in the world and the fastest growing criminal enterprise (Walker-Rodriguez & Hill, 2011; Kalergis, 2009). It is estimated that over 12 million individuals are being trafficked at any point in time (U.S. Department of State, 2007). According to the U.S. Department of State (2007), approximately 800,000 individuals are trafficked across international borders every year and even more are trafficked domestically.

In recent years, domestic sex trafficking has become a main focus of law enforcement in the United States (Williams & Frederick, 2009). There are few statistics on the prevalence rates of adults involved in domestic trafficking; however, statistics for juveniles indicate that there are as many as 325,000 children at risk in the United States to be sexually exploited by human traffickers (Estes & Weiner, 2001). In addition, there is an estimated 199,000 cases of juvenile sexual exploitation in the country each year (Estes & Weiner, 2001).

In 2000, the United States passed the Trafficking of Victims Protection Act (TVPA). The Act was reauthorized in 2003 and 2005. The TVPA was the first federal law in the United States created to assist victims of trafficking and prosecute traffickers (U.S. Department of Health and Human Services, n.d.).

This report uses the term “trafficking victim.” The definition of trafficking used in this report is taken from the U.S. Trafficking of Victims Protection Act (TVPA).

TVPA defines trafficking in persons as:

1. Sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such act has not attained 18 years of age; or
2. The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

## Victims of sex trafficking

Victims of domestic sex trafficking can be any age, race, or gender; however, young girls are most vulnerable and at risk to be coerced into the sex trade. According to the U.S. Department of Justice (2004), the average age of entry into prostitution is between 12 and 14 years old. Traffickers target children at a higher rate than adults because children are easier to control, coerce, and manipulate (Clawson, Dutch, Saloman, & Grace, 2009). In 2003, there were approximately 1,400 juveniles arrested for prostitution in the United States. Of that 1,400 arrested, 69 percent were female and 14 percent were under the age of 15 (Clawson et al., 2009). According to Flowers (2001), all races and ethnicities are at risk for sexual exploitation through human trafficking. Boys are often not thought of as trafficking victims and are frequently overlooked by service providers (Estes & Weiner, 2001). However, research has shown that boys

are also targeted by sex traffickers and are at risk for commercial sexual exploitation (Goodman, 2011). According to the U.S. Immigration and Customs Enforcement (2012), it is estimated that one in ten males will be victims of sexual exploitation at some point in their childhood. Males involved in the sex trade are often at higher risk than females, particularly for contracting HIV (McKnight, 2006).

There are factors that place certain juveniles at a higher risk than others for sexual exploitation. Traffickers exploit those who are vulnerable, disadvantaged, and struggling to meet their most basic needs (Clawson et al., 2009; Hopper & Hidalgo, 2006).

According to Clawson et al. (2009), risk factors that increase a juvenile's chances of becoming a victim of sexual exploitation and/or trafficking are as follows:

- Poverty
- Young age
- Runaway/throwaway
- Homeless
- Limited education
- Lack of work opportunities
- Lack of family support
- History of previous sexual abuse, physical abuse, or psychological abuse
- Mental health challenges or learning disabilities
- Living in vulnerable areas
- Substance abuse or parent with substance abuse issues

Runaway or throwaway children are among the most targeted for sex trafficking. Many are homeless, living on the street, and in need of support, money, shelter, and food. According to Estes & Weiner (2001), in 1999 there were over 1.6 million youth considered runaway or throwaway. Of that 1.6 million, over 70 percent were at risk for sexual exploitation (Estes & Weiner, 2001). Traffickers target youth promising them money, shelter, and security (Williamson & Cluse-Tolar, 2002).

Child sexual abuse is also prevalent among trafficked victims. In one study, over 68 percent of sex trafficking victims reported experiencing child sexual abuse prior to their involvement in the sex trade (Norton-Hawk, 2002). Another study indicated that as many as 80 percent of sex trafficking victims were victims of child sexual abuse (Raphael, 2004). Furthermore, according to Widom (1995), children who have a history of child sexual abuse are 28 times more likely to be arrested for prostitution at some point in their lives.

Many victims of trafficking come from unstable and unsupportive homes. According to Raphael (2004), victims of sex trafficking are more likely to have grown up with one or both parents suffering from substance abuse. A study conducted in Chicago in 2001 indicated that as many as 83 percent of victims of sex trafficking had parents who were addicted to drugs or alcohol (O'Leary & Howard, 2001). In addition, many have witnessed domestic violence in their past or have lost a parent through death, divorce, or abandonment (Clawson et al., 2009). Poverty also places youth at a greater risk for sexual exploitation. According to Lloyd (2005), youth who live



in low-income and impoverished areas are more likely to be recruited by traffickers and may have more difficulty escaping their traffickers.

The LGBT (lesbian, gay, bi-sexual, and transgender) population is also at risk for sexual exploitation and trafficking (McClain, & Garrity, 2011). Research has shown that one in four LGBT youth will be forced out of their house (Remafedi, 1987). Furthermore, in certain areas of the country, up to 42 percent of homeless youth have identified as LGBT (Ray, 2006). According to Savin-Williams (1988), approximately half of homosexual and bisexual male youth will engage in prostitution to support themselves. While LGBT population makes up a large percentage of the youth in need, this population is underserved and has a lack of resources available to them (Feinstein, Greenblatt, Hass, Kohn, & Rana, 2001).

## **Recruitment of victims**

Trafficking victims are often recruited into the sex trade by someone they know (Williamson & Prior, 2009). They may be lured in by promises of money, drugs, and attention. Victims may misinterpret the lifestyle as glamorous at first, but soon come to find that they are unable to escape their situation (Wilson & Dalton, 2008; Goodman, 2011). According to a study done by Raphael and Ashley (2008), 29 percent of victims were recruited by a boyfriend, 19 percent by a friend, and 11 percent by a family member. Trafficking victims are sometimes approached and recruited on the streets, outside of juvenile justice facilities, outside of group homes, shelters, shopping centers, and in their own homes (Williamson & Prior, 2009; Goodman, 2011).

Trafficking victims are also recruited on the Internet. Traffickers use social media sites to gain contact with children and coerce them into joining the sex trade (Latonero, 2011). Social media websites allow traffickers to befriend children on the Internet and slowly gain their trust. Often, the traffickers lure them into the sex trade under false pretenses and false promises (Latonero, 2011). Women are also recruited through classified advertisements on the Internet. Traffickers use popular classified advertising websites to pose advertisements claiming to offer work such as modeling or dancing. However, the women are forced to perform commercial sex acts and are never given the jobs offered in the advertisements. Making false promises of modeling jobs and other types of work is a common technique used by traffickers to recruit victims (Williamson & Prior, 2009).

Traffickers will also befriend victims and manipulate them into thinking they are involved in a romantic relationship. The trafficker then coerces the victims into performing commercial sex acts (Williamson & Prior, 2009). Traffickers may also recruit victims through the use of force, threats, violence, and intimidation (Williamson & Prior, 2009).

Victims of sex trafficking may be forced to work as street-prostitutes, call girls, and strippers to earn money. In addition, some may be forced into pornography, live sex shows, or sold as mail-order brides (Clawson et al., 2009). Sex traffickers advertise women and girls over the Internet (Reid, 2010). Traffickers may utilize the Internet in a variety of ways, such as forcing victims to perform strip shows or sex shows on video cams or webcams (Hughes, 2005). Furthermore, social networking sites and classified advertisement sites, such as Craigslist, have been used as a portal to advertise prostitution and sell trafficking victims (Latonero, 2011). According to a study

done by the Woman's Funding Network (2010), the majority of sex trafficking victims were advertised and trafficked through the use of online classified advertisements. In November 2008, 40 state attorneys general and the National Center for Missing and Exploited Children worked with Craigslist to take steps to combat unlawful activity and improve public safety on the web site (Radbod, 2010). After years of media criticism and attempts by various law enforcement and attorneys general to eliminate its adult services section, Craigslist announced that it was removing its adult services section in September, 2010 (Miller, 2010). However, there are still other websites that advertise adult services, escorts, and erotic services in different cities around the world.

## **Experiences of victims**

Traffickers use a variety of means to control victims, such as physically restraining victims, holding them captive in locked rooms or facilities, controlling their money, isolating them from friends and family, and taking forms of identification (Raymond & Hughes, 2001). Traffickers may also use threats, intimidation, and violence to control victims (Clawson, 2009; Raymond & Hughes, 2001). Traffickers may threaten physical harm to the victim or victim's family, or demonstrate violent acts on others (Goodman, 2011; Raymond & Hughes, 2001). Furthermore, traffickers demean and degrade victims through verbal assaults and emotional abuse. According to Hopper and Hidalgo, (2006), trafficking victims are forced to live in traumatic environments characterized by "high levels of control, exposure to chronic stress and threat, isolation, provocation of fear, and the creation of a sense of helplessness in victims" (p. 191). Victims become dependent on their traffickers and fear the consequences of rebelling or leaving. Hopper and Hidalgo (2006) point out that, "traffickers provoke feelings of fear, disconnection, dependency, and helplessness in their victims" (p. 193). The constant threats and environment of fear prevent victims from leaving or seeking help. According to Miranda (2011), victims may also be branded by their traffickers through tattoos in order to label and further control them.

Trafficking victims are exposed to a wide range of violence and physical abuse. Victims experience violence at the hands of traffickers and customers, or "johns." Victims reported incidents of beatings, sexual assaults, and the use of weapons in assaults (Raymond & Hughes, 2001; Hughes, 2005). Research has found that as many as two-thirds of sex trafficking victims report being sexually assaulted and three quarters report being physically assaulted (Clawson, Dutch, & Williamson, 2008). Other forms of violence, such as kidnappings and torture were reported by sex trafficking victims (Hunter, 1993). According to Hunter (1993), nearly half of trafficking victims in their study reported kidnapping and sexual torture such as burning, hanging, piercing, mutilation, being bound and gagged, or being penetrated with objects. Furthermore, it has been found that individuals in the sex trade are 18 times more likely to die as a result of murder (Hughes, 2005).

Researchers have found a high rate of substance use among trafficking victims (Hughes, 2005). According to Hughes (2005), more than 70 percent of trafficking victims reported using substances. Traffickers may encourage the use, or continued use, of drugs and alcohol as a means of controlling them (Raymond & Hughes, 2001; Goodman, 2011; Hughes, 2005). Victims may also use substances as a way to numb their emotions, dissociate, and cope with their situation (Goodman, 2011; Raymond & Hughes, 2001). According to Raymond and Hughes (2001), 50

percent of trafficked women reported using substances to cope with the trauma they experienced as a result of their victimization.

## **Services needed for victims**

Trafficking victims are in need of a wide range of services. Victims of trafficking often suffer from serious physical and psychological problems. They are in need of comprehensive, long-term trauma informed treatment. According to the U.S. Department of Justice, trafficking victims require specialized recovery programs that offer “shelter, nutrition, and appropriate medical treatment, as well as psychological evaluation, counseling, alcohol and drug treatment programs, education programs and life skills training” (2010, p.35).

Trafficking victims experience constant trauma and stress as a result of their victimization. Individuals who have been exposed to complex trauma often develop lasting psychological disorders as a result of their victimization. Trafficking victims who have experienced continuous psychological, physical, and sexual abuse may develop disorders such as depression, anxiety, bipolar disorder, and posttraumatic stress disorder (Farley, 2006). Many victims may also develop dissociative disorders and personality disorders as a result of the extensive trauma they experienced during childhood and as victims of trafficking (Ross, Farley, & Schwartz, 2003; Farley, 2006). They may have feelings of guilt, shame, and worthlessness as a result of the acts they were forced into, as well as the psychological and emotional abuse they experienced from their traffickers (Raymond & Hughes, 2001). Furthermore, victims may experience lasting feelings of fear and anger, as well as low self-esteem, boundary issues, suicidal ideation, and issues with intimacy (Williamson & Prior, 2009; Raymond & Hughes, 2001; Harrison, 2006).

Sex trafficking victims also suffer from a variety of physical health problems. Many victims have limited access to health care while being trafficked. According to a study done by Raymond and Hughes (2001), only 23 percent of international victims and 35 percent of domestic victims had access to some form of health care while being trafficked. Victims suffer from injuries such as broken bones, bruises, and head trauma as a result of the violence they experience while being trafficked (Zimmerman, 2003; Raymond & Hughes, 2001). According to Raymond and Hughes (2001), 35 percent of trafficked women reported having bones broken, 80 percent reported being bruised, and 47 percent reported head injuries. Victims reported other physical health problems such as gastrointestinal problems, vaginal bleeding, pelvic pain, malnutrition, fertility issues, and dental problems (Zimmerman, 2003; Clawson & Grace, 2007; U.S. Department of State, 2010). Victims of sex trafficking are also at high risk of contracting sexually transmitted diseases and HIV (Clawson et al., 2009). Furthermore, victims may experience unwanted pregnancies and complications from abortions (Raymond & Hughes, 2001; Zimmerman, 2003).

Trafficking victims may also be in need of legal services following their victimization. International victims may need assistance obtaining visas to remain within the United States (Clawson, Small, Go, & Myles, 2003). Furthermore, in some jurisdictions, victims of trafficking may have their criminal records expunged if they can prove they were being trafficked at the time of arrest for a prostitution offense. Finally, victims may need assistance obtaining compensation and government assistance.

## **Services available for victims**

The U.S. Department of Health and Human Services completed a study to learn about services for victims of human trafficking. The study found that “across the board, it was clear that the services provided to this population were inadequate” (Clawson & Grace, 2007, p.3). In 2010, the U.S. Department of Justice reported that there were few specialized recovery programs for trafficked women and girls in the United States and existing programs often are limited to youth under the age of 18 (Reid, 2010). Health and human service providers agree there is a need for specialized long term housing for victims of human trafficking (Williamson, Dutch, & Clawson, 2008).

Historically, there have been a limited number of shelters and services available to trafficking victims, and fewer with the capacity to appropriately treat the severity of their problems. Trafficking victims were placed in detention or domestic violence shelters and did not receive services that were tailored to their specific needs. While trafficking victims share some similarities to domestic violence victims, there are some notable differences. Trafficking victims need extensive care and support that traditional domestic violence or homeless shelters cannot provide (Williamson & Prior, 2009). Research has found that trafficking victims are more isolated, have less understanding of the criminal justice system, have more extreme mental health and trauma issues, and have fewer resources available to help them than victims of domestic violence (Clawson et al., 2003). Trafficking victims require longer stays and may have more heightened security needs than those offered by domestic violence and homeless shelters (Shigekane, 2007).

Recently, there has been a trend around the country to open residential facilities designed to better serve this population. Many of these new programs offer comprehensive residential and other services to sex trafficking victims. In addition to residential services, many organizations offer additional services to trafficking victims through outreach and drop in centers.

## **Program challenges in providing services to victims**

There are challenges to providing the extensive services required to help trafficking victims. Service providers have the following barriers when providing services to trafficking victims:

- Services lack of adequate resources, funding, and training
- Services lack coordination with federal, state, and local agencies
- Victim has language barriers, e.g., cannot be understood by service providers
- Victims and staff have safety concerns, such as retaliation from traffickers
- Victims have lack of knowledge of their rights
- Victims legal status such as lack of citizenship
- Victim lack support and are isolated
- Services lack of formal rules, regulations, and procedures

(Clawson, Small, Go, & Myles, 2003, p.25).

Clawson et al. (2003) found that a lack of adequate resources was the most significant barrier to providing services to trafficking victims. Furthermore, a need for better outreach services to

access victims as well as more staff and transportation services for victims were concerns for many service providers.

A lack of funding is a significant barrier when providing services to trafficking victims. According to Clawson et al. (2003), 72 percent of services providers cited funding as a main concern when assisting victims. Trafficking victims require intensive care and assistance to help them deal with the trauma they experience during their victimization. The wide range of services needed by victims are often time-consuming and costly (Clawson et al., 2003). Many programs do not receive adequate funding to support the comprehensive services required by trafficking victims, particularly during the implementation phase (Clawson et al., 2003).

Another issue identified by Clawson et al. (2003) is a lack of adequate training for service providers. Respondents indicated that there was a need for more training on the issues of human trafficking, how to work specifically with victims, how to access victims, and how to deal with the trauma symptoms and mental health issues that victims face. Furthermore, respondents cited the need for more training on cultural issues that arise when working with trafficked individuals.

Clawson et al. (2003) found coordination with federal, state, and local organizations to be a significant challenge when providing services to trafficking victims. Service providers often times need to rely on other agencies, such as victim advocates, domestic violence and sexual assault workers, health service and mental health providers, substance abuse treatment providers, social workers, law enforcement, attorneys, faith organizations, education providers, etc., to provide the full range of care needed for trafficking victims. Service providers cited issues with communication, reporting, and sharing information when working with federal, state, and local organizations. Respondents also reported poor coordination with police, as well as other government agencies. The need for coordination with these agencies is important for prosecution, as well as helping the victim obtain the proper documentation and access to services.

Clawson et al. (2003) reported that language and safety concerns were also another significant issue when providing services to trafficking victims. Language was a barrier when service providers did not speak the language of a victim and were unable to easily obtain an interpreter. Protecting victims from their traffickers and ensuring the safety of staff was another concern for service providers.

Inadequate knowledge about the victim's rights and issues surrounding legal status were other barriers cited by services providers (Clawson et al., 2003). The laws surrounding trafficking are often confusing and differ from state to state. Respondents reported difficulty with understanding the Trafficking Victim Protection Act as well as the legal issues surrounding trafficking (Clawson et al., 2003). Furthermore, there are barriers that service providers face when working with victims that have criminal histories, are trying to obtain visas, and are facing other legal issues.

Service providers reported issues with a lack of support and understanding from other agencies (Clawson et al., 2003). Often, service providers are unsure of what agencies and organizations

are equipped to handle working with trafficking victims. Organizations may not understand the issue of trafficking or have the ability to provide appropriate care to the victims.

Service providers cited other issues such as inadequate rules or no protocol when working with trafficking victims (Clawson, et al., 2003). The lack of in-house procedures can make providing services for victims difficult. Respondents also reported that there is a need for legislative advocacy, better victim assistance laws, and easier eligibility requirements for services for victims (Clawson et al., 2003).

## **Victim challenges with accessing services**

There are numerous reasons why trafficking victims may not receive the services they need. Often, sex trafficking victims are not identified as such by law enforcement or service providers. Victims are told by their traffickers to lie about their name, age, and situation to authorities. Sometimes trafficking victims, especially child victims, are viewed as runaways and not referred to appropriate services. Trafficking victims are also misidentified as domestic violence victims and referred to domestic violence shelters. Many trafficking victims will refer to their trafficker as their “boyfriend;” therefore, law enforcement misinterprets the case as domestic violence instead of trafficking (Williams & Frederick, 2009; Goodman, 2011; Raphael & Ashley, 2008; Reid, 2010).

Furthermore, victims may be unaware there are services available to assist them. Clawson et al., (2003) found a barrier to obtaining services is a victim’s limited freedom of movement. Victims under the control of traffickers may not have the ability to leave and access services (Clawson et al., 2003). Even if they do seek services, they often cannot continue with the treatment they need. Victims may also be hesitant to seek services out of fear of retaliation and violence from their trafficker (Clawson et al., 2003). Trafficking victims may fear being arrested by law enforcement for engaging in prostitution or drug use, being deported if they were brought to the United States illegally, or fear being returned to a dangerous or unhappy home environment if under the age of 18 (Clawson et al., 2009). Furthermore, trafficking victims may not view themselves as victims, or feel responsible for their situation. Self-blame and fear of stigmatization may prevent them from leaving their situation and seeking services (Williamson, Dutch, & Clawson, 2008).

# Methodology

Researchers surveyed service providers in order to develop a national program inventory of residential services for trafficking victims (*Appendix B*). Researchers started with a sample based on a list created by the Polaris Project of 12 potential residential programs operating in the United States. The Polaris Project is an organization fighting against human trafficking and modern-day slavery. In 2012, the Polaris Project updated its listing of shelter beds available to support human trafficking survivors, but did not provide detailed information on the residential programs (Polaris Project, 2012). Researchers telephoned or e-mailed the service providers between May 2011 and August 2012 to survey them about their operations. Researchers used a snowball sample; each respondent was asked, “Do you know of any other residential programs for victims of trafficking operating in the U.S.?” In addition, researchers searched the Internet for other potential residential programs.

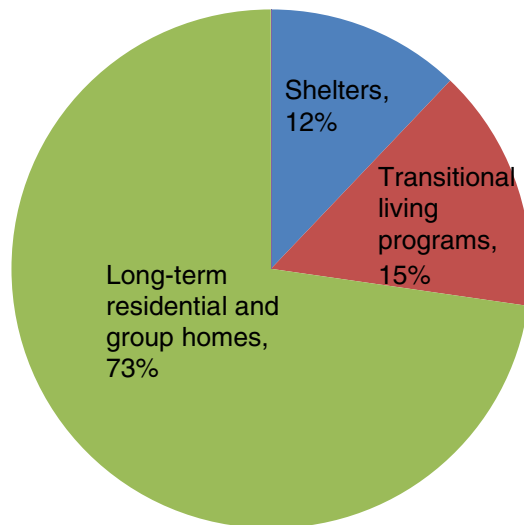
Ultimately, 100 service providers were contacted and questioned about their services. All were asked 24 questions (see *Appendix A*). Researchers asked respondents each question and hand recorded their responses. Respondents contacted by e-mail received an attachment of the survey to fill out. All agencies that provided residential services for victims of sex trafficking are included in the national program inventory (*Appendix B*). The survey did not seek to measure the quality of the services.

# Findings

## Number of programs

A total of 37 residential programs in the U.S. were found to be currently operational and exclusive to trafficking victims as of August 2012. Of the 37 programs that were open, eight facilities opened between 2011 and 2012 and 18 facilities opened in the last five years. The types of residential services available to trafficking victims include temporary shelters, long-term residential care facilities or group homes, and transitional living programs (*Figure 1*). Transitional living programs typically are temporary and aim to get individuals into permanent housing within 24 months.

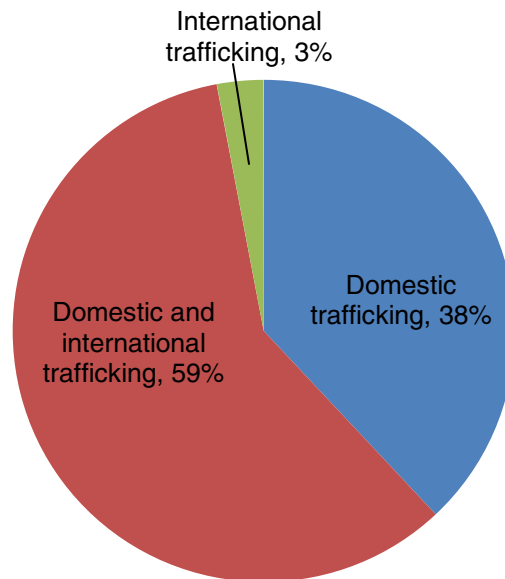
**Figure 1**  
**Residential programs by type**





Of the 37 residential programs that were operational, 14 were exclusive to domestic sex trafficking victims (38 percent). Only one residential facility was exclusive to international victims of human trafficking (3 percent). The remaining 22 residential programs accepted both domestic and international victims (59 percent). *Figure 2* depicts the types of trafficking victims served by residential programs.

**Figure 2**  
**Types of trafficking victims served by residential programs**

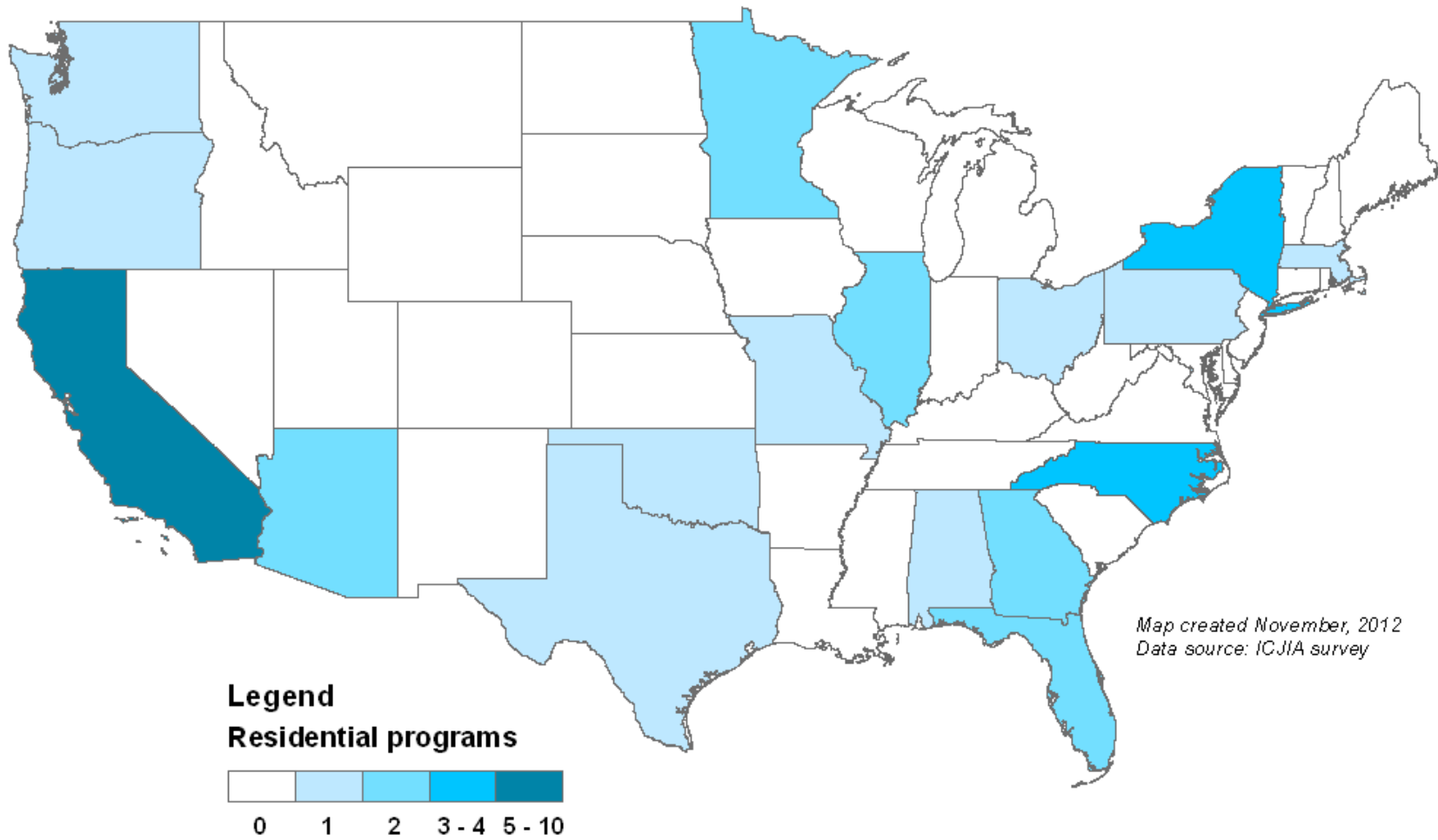


An additional 27 residential programs were found to be in the process of opening. Fifteen of the programs were to open in 2012. These facilities were in the process of obtaining funding, securing licenses, or building a facility. Of the 27 programs, 12 were designed to accept both international and domestic victims and 15 were to accept only domestic victims. None of the programs that were in the process of opening were to be exclusive to international victims.

### **Location of programs**

There are residential programs open in 17 states and the District of Columbia. The states that currently have residential programs are: Alabama, Arizona, California, Florida, Georgia, Illinois, Massachusetts, Minnesota, Missouri, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Texas, and Washington. *Map 1* indicates known residential programs in the United States by state. There were newly opening residential programs in an additional five states: Colorado, Hawaii, Michigan, Nevada, and Tennessee.

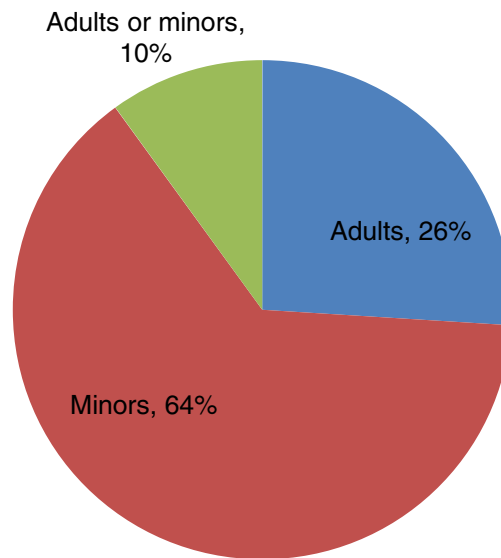
**Map 1**  
**Existing residential programs in the United States**



## Beds for trafficking victims

Residential programs around the country were surveyed to learn the number of beds available for trafficking victims in the United States. Of the 37 residential programs that were operational, there were a total of 682 beds exclusively for trafficking victims, 178 for adults, 438 for minors, and 66 for either minors or adults. *Figure 3* shows the percentage of beds available at residential programs for adults and minor trafficking victims.

**Figure 3**  
**Percent of beds available at residential programs for adult and minor trafficking victims**



The highest number of residential programs for trafficking victims was found in the Western region of the United States. The Western region had 401 of the total 682 beds for trafficking victims. California had the highest number of beds for trafficking victims among all states with a total of 369 beds.

*Table 1* provides information on residential programs that are currently operating to serve trafficking victims by U.S. region.

**Table 1**  
**Residential programs currently serving trafficking victims by U.S. region\***

Region	Number of residential programs	Number of beds	Beds exclusively for adults	Beds exclusively for minors	Beds for both**
Northeast	7	63	28	21	14
Midwest	6	55	17	0	38
Southeast	8	57	20	33	4
Southwest	4	106	34	72	0
Western	12	401	79	312	10
<b>Total</b>	<b>37</b>	<b>682</b>	<b>178</b>	<b>438</b>	<b>66</b>

\*Updated August, 2012.

\*\*The age range of the accepted adults and minors for each residential program varies.

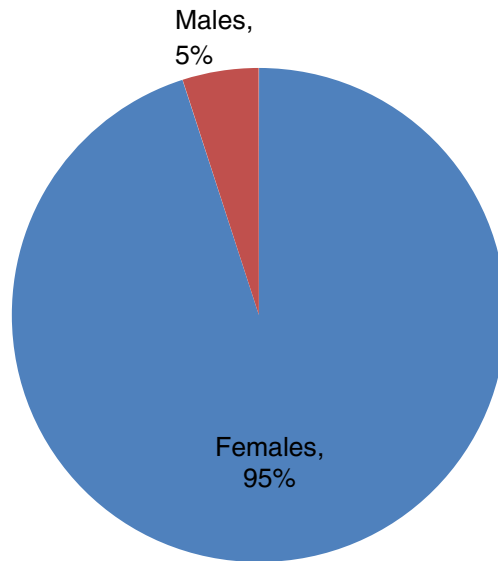
The states used to make up each region are the following:

- *Northeast*: Connecticut, Delaware, Maine, Massachusetts, Maryland, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, Washington D.C.
- *Midwest*: Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin.
- *Southeast*: Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Virginia, West Virginia.
- *Southwest*: Arizona, Oklahoma, New Mexico, Texas.
- *West*: Alaska, California, Colorado, Hawaii, Idaho, Montana, Nevada, Oregon, Utah, Washington, Wyoming.

Of the 37 operational programs, the majority of beds were for minors. There were 28 beds in the Northeast, 17 beds in the Midwest, 20 beds in the Southeast, 34 beds in the Southwest, and 79 beds in the West for adult victims of trafficking.

Only two facilities of the 37 operational programs indicated they would accept male victims, *Children of the Night* in California and *Grounds of Grace* in Illinois. All of the residential programs in the process of opening are exclusive to female victims of trafficking as well. Several residential programs reported that they will refer male victims to other shelters or programs but do offer them trafficking specific services. One program reported that they will accept transgender youth if they identify themselves as female. Another program indicated they would offer hotel accommodations for males for a short period of time. Of the surveyed programs, there were fewer than 28 beds for male trafficking victims (*Figure 4*).

**Figure 4**  
**Beds for victims of trafficking, by gender**



The 27 residential programs to open will be able to offer over 354 more beds to trafficking victims, a 93 percent increase over the current bed capacity. Most of the beds will be provided exclusively to minors. There will be one program opening in the Northeast, seven in the Midwest, eight in the Southeast, six in the Southwest, and five in the West. The southwestern region has the highest number of beds in residential programs that are in the process of opening. Texas was the state with the highest number of beds to be opened— between 110 and 116 beds to be opened by 2013. *Table 2* shows information on residential programs that will serve trafficking victims by U.S. region.

**Table 2**  
**Residential programs to open to serve trafficking victims by U.S. region\***

Region	Number of residential programs	Number of beds	Beds exclusively for adults	Beds exclusively for minors	Beds for both**
Northeast	1	6	0	6	0
Midwest	7	59-63	0	59-63	0
Southeast	8	123	11	112	0
Southwest	6	118-124	0	118-124	0
Western	5	48-50	12	36-38	0
<b>Total</b>	<b>27</b>	<b>354-366</b>	<b>23</b>	<b>331-343</b>	<b>0</b>

\*As of August, 2012.

\*\*The age range of the accepted adults and minors for each residential program varies.

An additional 45 beds for trafficking victims were available in residential programs not exclusive to trafficking victims. These 12 additional facilities offered specific residential services to trafficking victims *and* accepted other populations as well, such as domestic violence victims or runaway youth. Those facilities offered certain services to their trafficking victims including specialized counseling services, separate beds, or a longer stay. *Table 3* displays those programs by U.S. region.

**Table 3**  
**Non exclusive residential programs offering services to trafficking victims**  
**by U.S. region**

<b>Region</b>	<b>Number of residential programs</b>	<b>Number of specific beds for trafficking victims</b>
Northeast	3	No specific beds
Midwest	2	24 (adults) *
Southeast	2	21(adults) *
Southwest	2	No specific beds
Western	3	No specific beds
<b>Total</b>	<b>12</b>	<b>45 beds</b>

\*Beds for women that are involved in prostitution and have a substance abuse problem

## Services

All of the residential programs exclusive to trafficking victims, with the exception of one, indicated they offer residential services 24-hours a day, seven days a week. The program that did not offer 24 hour services was open to residents after 10p.m. The programs were exclusive to trafficking victims in the sense that they do not take other populations and have tailored their programs to specifically serve and meet the needs of trafficking victims.

A wide range of services are offered at the residential programs. All of the 37 operational programs have some type of case management and all offer counseling services. Fourteen of the 37 operational facilities offer both individual and group therapy and five offer more intensive trauma counseling. Twenty-six of the programs have educational services for the trafficking victims such as home schooling, tutoring, GED programs, and college preparation assistance. The type of educational services each program has depends on the age range of the victims. Sixteen of the programs have job and vocational training. Twenty-five of the programs offer some form of life skills training where victims are taught basic skills such as hygiene, cleaning, cooking, nutrition, money management, and time management. Thirteen of the residential programs have specific recreational programs and activities for the victims. The type of recreational activities offered varies by location and program. Some activities offered by the programs include sports, exercise, yoga and Pilates, gardening, swimming, horseback riding, and group outings. Additional types of services that are in place at the residential programs include survivor support groups, mentoring, music and art therapy, substance abuse and addictions treatment, medical and dental care, spiritual services, family reintegration and family therapy,

relationship and parenting skills, immigration and legal assistance, relapse prevention, youth development training, and diversion skills.

Twenty-eight of the 37 operational facilities have aftercare services for the victims leaving the residential program. The types of services offered range from continued case management to mentoring, alumni groups, financial assistance, support groups, legal assistance, counseling services, education, and relapse prevention. Twenty-two of the 37 operational programs offer other services, in other words, non-residential to trafficking victims. Trafficking victims do not have to reside in the residential program to receive these services. Those offered include drop-in centers, street outreach, case management, counseling and therapy, life skills, mentoring, victim advocacy, legal assistance, medical care, hotline service, diversion programs, relapse prevention, addictions treatment, education services, and vocational training. Several agencies indicated that they hold community awareness events and offer community training and education about human trafficking and commercial sexual exploitation of children.

## **Other areas of program operation**

All of the residential programs for trafficking victims indicated they were secure and safe facilities. While not all programs were locked facilities, they all employed a variety of safety measures. Nearly all of the programs indicated that their facility's location was confidential with an unpublished address and unmarked building. Many of the programs had twenty-four hour staff on premises, security cameras, alarm systems, and security guards. One program indicated that they had an armed guard on the premises at all times and another had guard dogs on the property. Several of the programs were located in secluded, rural areas. Most of the programs had a gated or fenced property with a buzzer system to allow access. Other security measures included employee and volunteer background checks, wired or alarmed windows, screened calls, and restricted cell phone and Internet access. However, despite security measures, program participants often run away and return to their trafficker (Clawson & Goldblatt Grace, 2007; U.S. Department of Justice, 2010).

Of those surveyed, the majority of referrals were from law enforcement, the court system, social workers, street outreach, hotlines, and other service providers. However, some of the residential programs reported that they get self-referrals, walk-ins, and referrals from parents or schools.

The majority of the residential programs reported that they would accept victims from anywhere in the United States. A few reported that they preferred to serve local victims that were in need. However, other residential programs indicated that they preferred to accept victims from out of the area. They reported that accepting victims from out of state reduces their likelihood of running away and keeps the victims farther away from their traffickers.

The sources of funding for the residential programs varied depending on the type of facility. There are a number of faith-based residential programs primarily funded from churches and private donors. Other residential programs receive state and federal funding, as well as grants and donations. Several programs indicated they operate solely on private donations and fundraisers. A lack of funding was a common barrier for the residential programs that are in the process of opening. Several programs reported that they have delayed opening due to insufficient

funding. One program abandoned efforts to open a safe residential program and changed focus to assisting other organizations. Operating budgets for the surveyed residential programs range from under \$10,000 to over \$100,000 depending on the program and location.

This survey found that federal and state funding is rarely allocated to programs that serve trafficking victims, but when it is, the minimal funding received is often not enough to cover the costs incurred from treating these individuals. As a result, many programs must look elsewhere for funding and support. Some programs receive private and individual donations, hold events, fundraisers, and operate mobile thrift stores to help supplement costs. One surveyed program was closed in May 2012 due to a lack of funding. The staff reported that the funding they received was not enough to cover the expenses of the program.

The number of employed staff at each program varied depending on the program size. The number of staff ranged from two full time staff members to 25 full time employed staff. Six of the programs reported that they had part time staff and shift workers. The average number of staff at the facilities was seven. Several programs indicated they had a 4:1 or 3:1 resident to staff ratio. In addition, sixteen of the 37 operational programs reported that they had volunteers at their program.

All of the programs reported that staff received training prior to working with victims. The type of training offered and the length of training varied depending on the residential program. The length of trainings ranged from two hours to six weeks of initial training. Several programs required continued trainings, monthly or yearly. Some programs reported that they received assistance training staff from other non-profit organizations or used pre-developed training models such as Hands that Heal Curriculum, Sex Workers Addressing Treatment (SWAT), or Mending the Soul. The topics of training included commercial sexual exploitation of children, human trafficking, stages of change, crisis intervention, de-escalation, youth development, conflict mediation, trauma, stress management, CPR, and first aid.



# Conclusion

Residential programs for trafficking victims were more prevalent in the United States than often reported in the media and by various organizations. Estimates of available beds range from 50 to 200 according to Shared Hope International, Polaris Project, and the Congressional Research Service. Locating and contacting the programs was difficult due to their confidential nature and undisclosed locations. The researchers learned about many of the programs through contacts with known residential programs and Internet searches. *Appendix B* provides a listing of all programs identified through our survey.

This report found a total of 682 beds for trafficking victims in the United States. However, these beds appeared to be located in clusters. Certain areas of the country are underserved while certain states have the majority of beds. The Western region of the country had the largest number of residential programs, making up 59 percent of total beds. In California, there were ten residential programs with approximately 54 percent of all beds for trafficking victims. There were other areas of the country with few beds—28 states were identified that had no beds for trafficking victims or beds to be opened.

There was a significantly larger number of beds for minor victims of trafficking. Of the total number of beds available to victims, only 26 percent of beds were for adult victims. Furthermore, of the programs in the process of opening, only an additional 23 beds will be opened for adults. There were only 28 beds total in the two residential programs that would accept male victims. This number under-represents the number of beds available to males as the two programs were not exclusive to males.

Funding was a common concern for many of the residential programs. Several programs were struggling financially. One program closed due to funding concerns and another program in the process of opening delayed their residential program or abandoned efforts to open their programs due to a lack of funding. Many of the existing programs reported that finances were a concern. In response, many of the program held fundraisers and employed other methods to raise money for their residential services.

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# Appendix A: Survey form for residential programs for trafficking victims

RESIDENTIAL PROGRAM NAME: \_\_\_\_\_

Date: \_\_\_\_\_

1. What is your Website? (if not known)
  
2. Do you provide residential/ shelter services (overnight accommodations) for individuals who are or have been involved in prostitution or victims of trafficking?  
 NO If no, did you ever provide these services?  
 NO—If no, stop here.  
 YES—If yes, when?  
  
 YES If yes, continue to Q3.
  
3. Are your residential services offered 24 hours a day/ seven days a week?  
 NO—If no, when is it offered (e.g., only an overnight shelter, only during the day)?  
  
 YES—If yes, continue to Q4.
  
4. Do you serve victims of:  
 Domestic trafficking only.  
 International trafficking only.  
 Both domestic and international trafficking.
  
5. Are your residential services offered exclusively to trafficking victims and women involved in prostitution or do you take other populations as well (e.g., domestic violence, runaway youth)?  
 NO—Take other populations as well as trafficking victims. If no, do you have specific services for trafficking victims at your residential home?  
  
 YES—Services offered exclusively to trafficking victims.

6. How long has the residential program been in operation?
7. What is your current capacity of the residential program?
8. How long can residents stay?
9. What is the age range of the residents you take at your residential program?
10. Do you accept male victims, female victims, or both?
  - Male only.
  - Female only.
  - Both male and female victims.
11. Is your residential program secure/ safe?
  - NO
  - YES
  - a. If yes, how do you ensure safety?
12. What services do you offer at the residential program?
13. What is the annual operating budget for your residential program?
14. What are your sources of funding for the residential program?
15. What geographical area does the residential program serve?
16. How do you get referrals to your residential program?
17. Do you offer aftercare (e.g., services after leaving the residential program)? If yes, explain.
18. Does your agency offer any other services (besides the residential program) to this population? Please specify.
19. How many staff are employed in the residential program?

20. What initial and ongoing training is offered to staff of the residential program?
21. Has your program ever been formally evaluated? If yes, can I obtain the published findings? If no, why not?
22. Can I please get a copy of your agency's annual report?
23. Do you know of any other residential programs for victims of trafficking operating in the U.S.? Please specify.
24. Can I please have contact info for your residential program?

Contact person's name:

Contact person's title:

Agency name:

Residential program name:

Address:

Phone number (for residential program, will be on published list):

E-mail:



# Appendix B: List of residential programs for trafficking victims

This appendix lists residential programs offer services only to trafficking victims and/or women escaping prostitution found in the course of this study. This list should not be seen as an endorsement of any agency, program, service, or individual.

State	Residential Program	Domestic or International	Age Range	Length of Stay	# of beds	Website	Contact Information
Alabama	The Wellhouse, Inc.	Domestic & International	18 +	No limit	6	the-wellhouse.org	P: (800) 991-0948 E: info@thewellhouseinc.org
Arizona	Dignity House	Domestic & International	18 +	1 yr	24	catholiccharitiesaz.com	P: (602) 870-0376 E: info@cc-az.org
Arizona	Streetlight	Domestic	11-17	Until 18	48	streetlightphx.com	P: (623) 435-0900 E: info@streetlightphx.com
California	Courage House	Domestic	11-17	Until 18	6	couragetobeyou.org	P: (916) 517-1616 E: info@c2bu.org
California	Bilateral Safety Corridor Coalition (BSCC)	Domestic & International	16-18, 18 +	2 yrs	10	bsccoalition.org	P: (619) 336-0770
California	Children of the Night	Domestic	11-17	Until 18	24	childrenofthenight.org	P: (818) 908-4474 E: llee@childrenofthenight.org
California	Coalition to Abolish Slavery and Trafficking (CAST)	Domestic & International	18 +	2 yrs	10	castla.org	P: (213) 365-1906 E: info@castla.org
California	Faces of Slavery	Domestic	Under 18	No limit	250	facess.org	P: (855) 690-4860 E: info@facess.org
California	Freedom House	Domestic & International	18 +	18 mo.	8	freedom-house.us.com	P: (650) 488-0831 E: info@freedom-house.us.com

<b>State</b>	<b>Residential Program</b>	<b>Domestic or International</b>	<b>Age Range</b>	<b>Length of Stay</b>	<b># of beds</b>	<b>Website</b>	<b>Contact Information</b>
California	Generate Hope	Domestic & International	18 +	No limit	10	generatehope.org	E: info@generatehope.org
California	Mary Magdalene Project	Domestic & International	18 +	6 mo.-1 yr	6	mmp.org	P: (615) 322-4783 E: judy.ames@mmp.org
California	Project Hope- LA Dream Center	Domestic & International	18 +	No limit	35	dreamcenter.org	P: (877) 632-7234
California	San Francisco Safe House	Domestic & International	18 +	18 mo.	10	sfsafehouse.org	P: (415) 643-7861
Florida	Dream Home- Dream Again Ministries	Domestic & International	18 - 39	18-24 mo.	10	runforfreedom.net	P: (407) 697-2985
Florida	Wings of Shelter	Domestic & International	Under 18	Until 18	5	wingsofshelter.com	P: (239) 340-2980 E: wingsofshelter@aol.com
Georgia	Living Water for Girls	Domestic	12-17	Up to 2 yrs	10	livingwaterforgirls.org	P: (678) 783-0126 E: info@livingwaterforgirls.org
Georgia	Wellspring Living	Domestic	12-17	9-10 mo.	14	wellspringliving.org	P: (770) 631-8888
Illinois	Anne's House	Domestic	12-21	Until 21	8	sapromise.org/anne.htm	P: (312) 291-7916 E: promise@usc.salvationarmy.org
Illinois	Grounds of Grace	Domestic & International	18 +	No limit	4	groundsofgrace.com	P: (314) 472-5942
Massachusetts	Germaine Lawrence-ACT Group Home	Domestic & International	12-18	6 mo.-no limit	8	germainelawrence.org	P: (781) 648-6200

State	Residential Program	Domestic or International	Age Range	Length of Stay	# of beds	Website	Contact Information
Minnesota	Breaking Free	Domestic & International	16-17, 18 +	12-18 mo.	27	breakingfree.net	P: (651) 645-6557
Minnesota	Source Annex	Domestic	18 +	12-18 mo.	5	sourceannex.org	P: (612) 822-5200
Missouri	Veronica's Voice	Domestic	18 +	No limit	8	veronicasvoice.org	P: (816) 483-7101 E: safecenter@veronicasvoice.org
New York	Gateways Program	Domestic	12-16	1 yr	13	jccany.org	P: (914) 773-6173 E: jcca@jccany.org
New York	Girls Educational and Mentoring Service (GEMS)	Domestic & International	12-24	18-24 mo.	14	gems-girls.org	P: (212) 926-8089
New York	LifeWay Safe House	Domestic & International	17 +	18 mo.	5	lifewaynetwork.org	E: mflifeway@yahoo.com
New York	Restore NYC	International	18 +	1 yr	7	restorenyc.org	P: (212) 300-2092 E: info@restorenyc.org
North Carolina	Emma's Home-Transforming Hope Ministries	Domestic	12-17	12-18 mo.	4	transforminghopeministries.org	P: (919) 943-1477
North Carolina	Hope House- On Eagles' Wings Ministries	Domestic	12-17, 18-25	1 yr-no limit	4	hopehousenc.com	P: (877) 276-8023
North Carolina	TRIAD Ladder of Hope Ministries	Domestic & International	18 +	5 mo.	4	triadladderofhope.org	P: (336) 881-5416 E: sandra@triadladderofhope.org
Ohio	Second Chance	Domestic & International	Minor Adult	30 days	3	secondchancetoledo.org	P: (419) 469-8820 E: secondchance@tamohio.org

<b>State</b>	<b>Residential Program</b>	<b>Domestic or International</b>	<b>Age Range</b>	<b>Length of Stay</b>	<b># of beds</b>	<b>Website</b>	<b>Contact Information</b>
Oklahoma	Hadassah House- All Things New Campaign	Domestic & International	18 +	2 yrs	10	allthingsnewcampaign.org	E: allthingsnew09@yahoo.com
Oregon	Athena House- Janus Youth	Domestic & International	9-18	No limit	12	janusyouth.org	P: (503) 233-8111
Pennsylvania	Dawn's Place	Domestic & International	18 +	1 yr	10	ahomefordawn.org	P: (215) 849-2396 E: dawnsp1@verizon.net
Texas	Freedom Place	Domestic	11-18	No limit	24	freedomplaceus.org	P: (281) 210-1516
Washington DC	Polaris Project	Domestic & International	18 +	6 mo.-2 yrs	6	polarisproject.org	P: (202) 745-1001 E: info@polarisproject.org
Washington	The Bridge Program	Domestic	14-18	2 yrs or until 18	20	youthcare.org	P: (206) 694-4500 E: info@youthcare.org



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