In the VHT-NC Program's first 2 years, 39 participants have been enrolled across 4 projects. This profile describes participant characteristics at intake and service provision through FY2022. Two projects have not yet enrolled participants and all have faced enrollment challenges including, for example, COVID-19 restrictions, low staffing capacity, and the need for improved understanding and awareness of human trafficking.

### Demographics

**American Indian or Alaska Native**  80%

**Native Hawaiian or Other Pacific Islander**  18%

**Asian**  3%

**Hispanic or Latine**  3%

92% of participants are female

13% identify as LGBTQ

32 average age (range: 15 to 61)

### Top 5 Referral Sources

**Self-referral** is the most common referral pathway to the VHT-NC Program. Project staff also conduct direct outreach in various settings (e.g., street, motels, encampments, partner locations).

31% Self

13% Family Member/Guardian

13% Native Service Provider

10% Trafficking-specific, Native Service Provider

8% Homeless Agency/Shelter

“We have seen a huge increase in self and peer referrals. I think one strength that that highlights, is that community connection and care amongst individuals. Resource sharing amongst the [participants] we’re serving, we are seeing a lot, which I think is a huge strength and I always thank [participants] for passing our information along or getting a friend connected.”

—Project director

The Administration for Children and Families’ Office on Trafficking in Persons established the Demonstration Grants to Strengthen the Response to Victims of Human Trafficking in Native Communities (VHT-NC) Program to build, expand, and sustain organizational and community capacity to deliver services to Native American (i.e., American Indian, Alaska Native, Native Hawaiian, and/or Pacific Islander) people who have experienced human trafficking. In September 2020, six VHT-NC projects were awarded 3-year grants to provide culturally responsive and trauma-informed participant outreach and identification, comprehensive case management and service provision, and training to respond to human trafficking in their communities. RTI International and American Indian Development Associates are conducting a formative evaluation of these VHT-NC projects.
Type of Trafficking Experienced

- 10% Labor
- 13% Sex & Labor
- 18% Unknown
- 59% Sex

Living Situation & Employment at Intake

- 44% Emergency housing
- 33% Permanent housing
- 18% Transitional housing
- 5% Institution (e.g., correctional facility)
- 18% Employed at intake

Needed & Received VHT-NC Services*

Participants' service needs are largely being met. All participants are provided comprehensive case management and assistance through direct service provision or referral. Services that meet immediate needs are often provided first, while longer-term supports may take more time.

Safety planning
- Needed: 51
- Received: 67

Housing services/subsidies
- Needed: 46
- Received: 49

Mental or behavioral health
- Needed: 44
- Received: 31

Transportation
- Needed: 41
- Received: 51

Basic necessities
- Needed: 39
- Received: 39

Financial assistance
- Needed: 39
- Received: 26

Traditional healing/cultural practices
- Needed: 39
- Received: 28

Victim advocacy
- Needed: 36
- Received: 44

Crisis intervention
- Not reported: 39

*Ordered by the top 8 needed services (i.e., services requested by the participant or assessed as being needed by the project) at intake.

“They’re not identifying themselves as being trafficked. If you say that to them, they still don’t connect it. They’re like, ‘No, that’s not me. No.’ So, we’re trying to figure out the verbiage to use when working with clients to identify as, like, hey you were a victim of this.”
—Project director describing screening challenges
Needed & Received Public Benefits*

Participants are receiving needed assistance to obtain public benefits. This often includes help obtaining necessary documents, completing forms, and navigating complex systems.

<table>
<thead>
<tr>
<th>Service Type</th>
<th>% Needed</th>
<th>% Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>General assistance</td>
<td>46</td>
<td>54</td>
</tr>
<tr>
<td>Housing subsidies</td>
<td>31</td>
<td>26</td>
</tr>
<tr>
<td>Food benefits (e.g., SNAP)</td>
<td>26</td>
<td>36</td>
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<tr>
<td>Child care subsidies</td>
<td></td>
<td></td>
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<tr>
<td>Medicaid, Medicare, SCHIP</td>
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<tr>
<td>Unemployment insurance</td>
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<tr>
<td>State-specific benefits</td>
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<tr>
<td>TANF</td>
<td>8</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>5</td>
</tr>
<tr>
<td>SSI/SSDI</td>
<td>5</td>
<td>3</td>
</tr>
</tbody>
</table>


*Ordered by needed public benefits (i.e., benefits requested by the participant or assessed as being needed by the project) at intake.